



**The Victorian
Collaborative Centre**
For Mental Health & Wellbeing

Leading change together

*Annual report
2023-24*

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Except where otherwise indicated, the images in this document show models and illustrative settings only, and do not necessarily depict actual services, facilities or recipients of services. This document may contain images of deceased Aboriginal and Torres Strait Islander peoples.

In this document, 'Aboriginal' refers to both Aboriginal and Torres Strait Islander people. 'Indigenous' or 'Koori/Koorie' is retained when part of the title of a report, program or quotation.

Available at <http://www.vccmhw.vic.gov.au>

Design: Daniel Cordner design



**The Victorian
Collaborative Centre**
For Mental Health & Wellbeing

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Declaration

In accordance with the Financial Management Act 1994, I am pleased to present the Victorian Collaborative Centre for Mental Health and Wellbeing's annual report for the year ending 30 June 2024.

Terry Laidler
Board Chair

11 September 2024



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Acknowledgement of Country

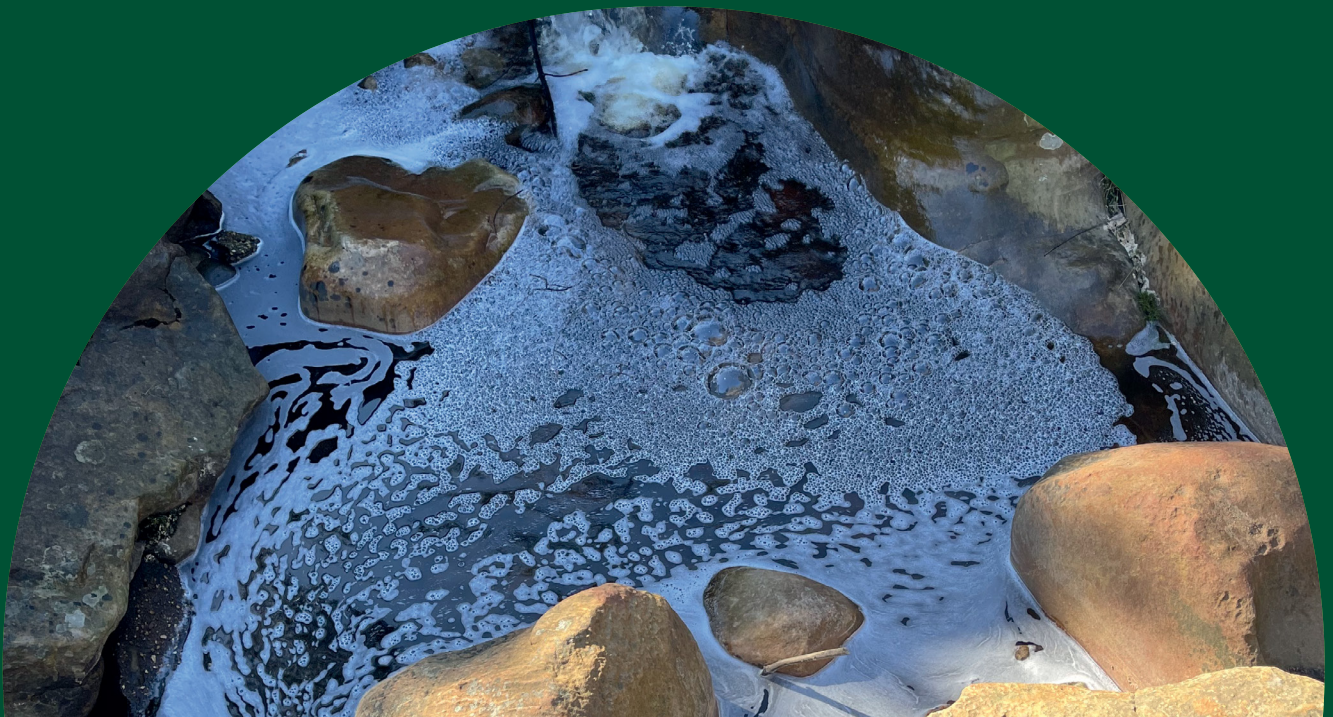
The Victorian Collaborative Centre for Mental Health and Wellbeing (the Collaborative Centre) acknowledges with deep respect all First Nations people and Traditional Owner groups within Victoria. We recognise their enduring connection to Country, Culture, and Kin, a connection that has been nurtured for thousands of years.

We acknowledge government's role in the devastating impacts of colonisation, the displacement and dispossession of First Nations people, and the ongoing social, emotional, biological and political consequences.

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We pay our deepest respects to Elders past and present, recognising their ongoing resilience, wisdom, and leadership. We acknowledge that this land was, is, and always will be Aboriginal land.

Photo: Gariwerd by Larroom Art photographer



Our commitment to allyship and Aboriginal Victorians

The Collaborative Centre commits to collaborating with Aboriginal Victorians in ways that respect their sovereignty. We acknowledge that self-determination involves more than consulting and partnering with Aboriginal Victorians on policies, programs and research initiatives that affect their lives. We also recognise the key role and expertise of Aboriginal Community Controlled Health Organisations (ACCHOs) in driving holistic solutions for their communities. We acknowledge the decision making and resource control that ACCHOs require to drive these solutions. We are committed to centring Aboriginal lived and living experiences and expertise voices (consumers and carers) at the heart of any work of the Collaborative Centre designed to promote better outcomes for Aboriginal Victorians. We look forward to working with ACCHOs and Aboriginal communities, ensuring that when we are fulfilling our functions under the *Mental Health and Wellbeing Act 2022*, we do so in line with the self-determined needs of Aboriginal Victorians.

We acknowledge that the mental health system has failed to fully recognise Aboriginal ways of knowing, doing, and being. We strive to learn from this history and aim to work towards a mental health system that respects and incorporates Aboriginal

perspectives. We commit to celebrating the strengths of Aboriginal communities and to working collaboratively to address the challenges they face.

The Collaborative Centre respects the aspirations and sovereignty of all Aboriginal Victorians and is committed to Victoria's Treaty process. We wholeheartedly support this and have listened to the Yoorrook Justice Commission recommendations and the aspirations of the First Peoples Assembly. We are committed to ensuring the Collaborative Centre's *Lived and Living Experiences Strategy* (i) does not limit the Treaty processes or outcomes, (ii) will be open to revision to support any Treaty-making processes, (iii) is proactive toward progressing much needed policy or reform initiatives in Victoria's Mental Health and Wellbeing System, and (iv) is not deprioritised or delayed by the Treaty process.

We acknowledge that the terms Aboriginal, Indigenous, and First Nations or First Peoples are used interchangeably and do not capture the unique language groups of many within the community. The Collaborative Centre does not favour one approach over the other and we respect all people's rights to self-identification.

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Recognition of lived and living experiences

The Collaborative Centre acknowledges people with lived and living experiences of mental ill health and psychological distress and the experience of people who have been, and are, carers, families, supporters and kin. We are deeply grateful for their expertise and continued generosity which guide the Collaborative Centre's work.

We are committed to honouring the work of the consumer and carer movements.

The Collaborative Centre celebrates, values and welcomes people of all backgrounds, genders, sexualities, cultures, religions, ages, bodies and abilities.



An introduction from our Board

Collaboration is in our DNA, and its practice has been central to our strategic decision-making this year as we have continued to build trusted partnerships and relationships across Victoria to deliver on our vision for a transformed mental health and wellbeing system.

Our defining collaborations are with people with lived and living experiences of mental ill health and/or psychological distress, inclusive of families, carers, supporters and kin. Their contributions remain at the heart of our work. Equally important are our partners in the reform; the policy makers, clinicians and researchers of the mental health and wellbeing sector.

6 This year we have worked with our lead partners, the Royal Melbourne Hospital, the University of Melbourne and 18 other partner organisations, to formalise our Adult and Older Adult Best Practice Consortium. We are also working with a wide range of partners and collaborators across the state to achieve our shared vision of compassionate, inclusive and accessible mental health and wellbeing services, grounded in a deep respect for human rights.

Our Lived Experiences Advisory Panel (LEAP) continues to shape our strategic directions. These are captured in our soon-to-be released *Collaborative Centre Strategic Plan 2024-2027*, which documents our roadmap to deliver change over the next three years to realise our vision for better mental health for all Victorians through collaborating and learning together.

Key highlights during 2023-24 for the Collaborative Centre are outlined below:

- Our Co-CEOs, Carolyn Gillespie and Professor Sarah Wilson, joined us in January and have brought significant leadership expertise, comprehensive strategic thinking and a new culture to the Centre. We would also like to acknowledge and thank Acting CEOs Dan Brown and Eleanor Williams for their steadfast work prior to the arrival of Carolyn and Sarah.

- We have welcomed Dr David Fenn and Associate Professor Bridget Hamilton from our lead partners to our Board – who bring us a wealth of additional research and practice knowledge and expertise.
- Several key pieces of foundational strategic work have been completed or are in the final stages of co-design and nearing completion: our Collaborative Charter; our Memorandum of Understanding for the Adult and Older Adult Best Practice Consortium; our *Lived and Living Experiences Strategy 2024-2027*; and our *Translational Research Strategy 2024-2027*.
- We've secured and are co-designing the fit out of our new accommodation at 205 Queensberry St in Carlton. This will be an easily accessible, welcoming place where our team, partners and the community can come together, engage and belong.
- We've made significant progress towards finalising a co-designed logo, brand and website for the Collaborative Centre that we believe reflects our vision.

One of our key learnings is that building the trust and relationships that underpin genuine collaboration takes time and focus. But it's time we must take. Together we can achieve more, it's that simple.



Terry Laidler, Chair and Maria Katsonis, Deputy Chair

An introduction from our Co-CEOs

As the inaugural Co-CEOs of the Collaborative Centre, we are thrilled and honoured to have been appointed to lead the foundational work of this world-first Centre, forging collaborative ways of working to unlock innovation and change for Victoria's mental health and wellbeing system.

Our unique, joint executive leadership model brings together and integrates the perspectives of lived and living experiences, clinical practice and research into real-time decision making and action. It has enabled us to shape and model a new way of working together, demonstrating the power of integrated thinking for finding solutions to complex and intractable problems.

We are humbled by the enormity of our challenge and are committed to taking the time and care needed to partner well and make positive change. Stewarding this work brings great responsibility to ensure we shape a more efficient and compassionate system that will deliver better mental health outcomes for generations of Victorians to come.

Since commencing the role in January, we have hit the ground running, leading the Centre's first *Strategic Plan 2024-2027*; *Lived and Living Experiences Strategy 2024-2027*; and *Translational Research Strategy 2024-2027*.

Our *Lived and Living Experiences Strategy 2024-2027* frames the vision to embed lived and living experiences through all the functions of the Centre and foster new ways of thinking, being and doing. The vision for our first *Translational Research Strategy 2024-2027* for Victoria is to embed collaboration between people with lived and living experiences, practitioners and researchers in the locations where care is provided, to narrow the gap between research innovation and practice and produce better outcomes for consumers, families, carers, supporters and kin.

In our first 6 months, we have also been focused on growing the culture of the Collaborative Centre and embedding new ways of working to

create an organisation that is culturally affirming, psychologically safe, and a great place to work! We are fortunate to work with an extraordinary team who share our passion and commitment – for their tireless efforts and sustained energy, we thank them.

Our focus on workforce and culture has been accompanied by work to strengthen our foundations in governance, decision making, financial reporting, and managing opportunities and risks, in order to set up the Centre for success into the future.

Also core to our work is developing an ongoing dialogue with our partners and the wider sector. This has included hosting a number of networking events that connect the perspectives of people with lived and living experiences, the workforce, researchers and sector leaders. At times, this has involved leaning into difficult conversations, sitting with moments of discomfort and reflecting on what we have learned to find better ways of working together towards our shared goals.

In our conversations so far, we have been inspired by the hope and enthusiasm of many of you, and strive to remain a beacon of hope as we carry the work of the Centre forward into the year ahead.



Carolyn Gillespie and Professor Sarah Wilson
Co-CEOs

Section 1:

**About the
Collaborative
Centre**

About us

Who we are

The *Mental Health and Wellbeing Act 2022 (the Act)* established the world-first Victorian Collaborative Centre for Mental Health and Wellbeing, premised on connecting lived and living experience leadership, innovative service delivery and cutting-edge mental health translational research, to facilitate transformative statewide improvements in treatment, care, and support across Victoria's mental health and wellbeing system.

To fully achieve the objectives set out in the Act, the Collaborative Centre was set up to do things differently. This is reflected in our integrated organisational structure and operating model that places lived and living experiences at the heart of our work and embeds collaboration with researchers and the workforce to translate evidence into innovative and effective practice.

By advancing from our establishment phase to this holistic operational model, the Centre aims to deliver better mental health and wellbeing outcomes for Victorians through collaborating and learning together, acting as a pivotal "engine room" for reform across the mental health and wellbeing sector.

In partnership with people with lived and living experiences, we translate evidence into innovative and effective practice and work with the workforce and researchers towards our common goal of driving groundbreaking change to Victoria's mental health and wellbeing system.

The Collaborative Centre was established under Gabrielle Williams MP, Minister for Mental Health. Since October 2023, Ingrid Stitt MP is the responsible Minister.

Our purpose

As a model for the transformed mental health and wellbeing system envisaged by the Royal Commission, the Collaborative Centre is committed to:

- championing lived and living experience leadership so that change reflects the experiences of those who know the system best.
- promoting and drawing on evidence and outcomes to drive accessible, safe, effective and compassionate treatment, care and support that meet the needs of different people and communities.
- sharing evidence drawn from and reflective of lived and living experiences and up-to-date research, as well as a continual learning approach to drive improvements in care and support.
- drawing on evidence and outcomes from our research to influence mental health policy and service reform.
- partnering and collaborating with people with consumer and carer lived and living experiences, mental health leaders and practitioners, researchers, academics, services and organisations to bring unique, diverse and informed experiences and knowledge to the reform discussion.
- maintaining transparency in all that we do, especially in the way we communicate with partners and stakeholders; welcoming open communication and being responsive to feedback.

We know that we need new ways of working to reform our complex mental health and wellbeing system by building trusted relationships; elevating the knowledge and expertise of lived and living experiences; and establishing a culture of collaboration, innovation and learning.

Our functions

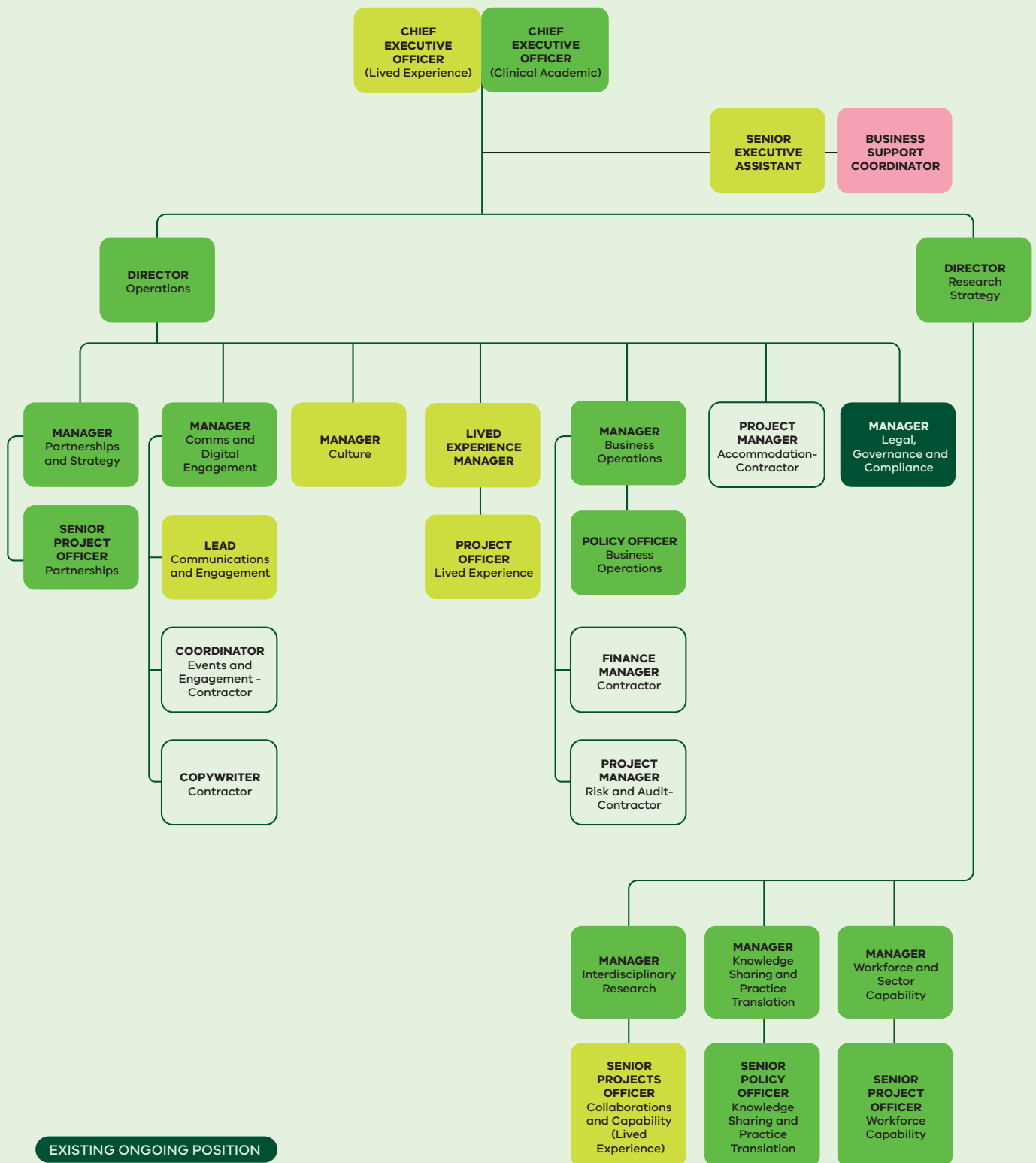
The functions of the Collaborative Centre are outlined in Chapter 15 of the Act. Our functions are to:

- provide, promote and coordinate the provision of mental health and wellbeing services.
- assist service providers to facilitate and improve access to mental health and wellbeing services.
- provide or arrange the provision of specialist support services and care for persons who have experienced trauma.
- develop strategies for conducting research, and applying and disseminating research findings, in the field of mental health and wellbeing having regard to any priorities for research determined by the Centre Board.
- conduct, promote and coordinate research in the field of mental health and wellbeing, including in collaboration with other persons and entities.
- provide, promote and coordinate activities that support the continuing education and professional development of service providers and persons who work or conduct research in the field of mental health and wellbeing.
- provide advice and guidance to service providers and practitioners in relation to the provision of mental health and wellbeing services.
- report to the Minister and the Health Secretary on matters relevant to its functions.
- perform any other function conferred on the Centre by or under the Mental Health and Wellbeing Act or any other Act.

These functions informed and were reflected in our 2023-24 Statement of Priorities, which sets out what we will achieve by the end of September 2024.

Our organisational structure

as at June 2024



- EXISTING ONGOING POSITION
- EXISTING FIXED-TERM POSITION
- DESIGNATED LIVED EXPERIENCE (LE) ROLE
- TEMPORARY AGENCY STAFF – NON VPS
- NOT YET COMMENCED

Our governance

The Collaborative Centre has a governing Board which is accountable to the Minister for Mental Health for all its functions, operations and strategic plan, in accordance with the Act.

Our Board is accountable to the Treasurer for financial management decisions and record-keeping, and to the Secretary of the Department of Health for its significant decisions and research priorities.

As a public sector agency, the Collaborative Centre must comply with the Standing Directions of the Minister for Finance under the *Financial Management Act 1994 (section 3.2)*. This includes appointing a Finance, Audit and Risk sub-committee that is directly responsible to the Board and oversees the Centre's risk and financial management and compliance with relevant laws and policies.

To ensure that lived and living experiences are deeply embedded to guide all aspects of our work, the Collaborative Centre has an established Lived Experiences Advisory Committee (LEAP). LEAP is an advisory group of the Board, established in line with the requirements for a Board-appointed committee set out in the Act.

LEAP reports and provides expert advice to the Board in relation to the Board's functions, and the activities and priorities of the Collaborative Centre. LEAP also provides advice to the Collaborative Centre operational team, and LEAP members participate in range of activities including working groups, co-design activities and input into key strategic documents.

The Co-CEO leadership model of the Collaborative Centre is the first of its kind for a mental health public sector agency. Under the Act, the two roles include a Co-CEO (Lived Experience), and a Co-CEO (Clinical/Academic). This unique and powerful model means that real time dialoguing, strategic planning and decisions are made with a true integration of lived and living experiences, research excellence and clinical expertise. This enables us to take a holistic and collaborative approach to our work.

The Co-CEOs manage the resources, organisational structure and day-to-day operations of the Collaborative Centre, implement the decisions and plans of the Board, and support the Board to undertake its responsibilities.

To learn more about our Board members, LEAP and our Co-CEOs, please visit the Collaborative Centre website: <http://www.vccmhw.vic.gov.au>.



How we work with the Department of Health

The Collaborative Centre is defined as both a public body and portfolio entity of the Victorian Department of Health (DH). Established in response to the interim report of the Royal Commission into Victoria's Mental Health System, we contribute to, and are a critical part of, a significant 10-year reform program to transform how mental health and wellbeing treatment, care and support are designed and delivered in Victoria. As such, we work closely with DH to ensure consistency and alignment across the broader reform program.

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Shared services arrangement

The Collaborative Centre is currently co-located with DH at 50 Lonsdale Street, Melbourne. Our Memorandum of Understanding (MOU) outlines DH's agreement to provide corporate services to the Centre, including:

- accommodation
- Information and communication technology
- people and culture, and payroll services
- office supplies and mail services
- financial support
- fleet services; and
- procurement services.

The corporate service arrangements outlined in the MOU represent value for money for the Collaborative Centre and support us to work alongside DH to deliver on our shared priorities. Due to this service arrangement, the Collaborative Centre's expenses and other data are captured by DH and reflected in their annual reporting. For the 2023-24 financial year and ongoing, the Collaborative Centre has an exemption under s53(1) (b) of the *Financial Management Act 1994* enabling our financial statements to be consolidated with those of DH.

Wherever possible, and for transparency, the Collaborative Centre has included information relating to its finances, investments and expenses in this annual report. All financial information provided is also reflected in DH's cumulative reporting for 2023-24, unless otherwise stated.

Alignment with Department of Health objectives

The Collaborative Centre's remit and functions have strong alignment with DH's objectives as set out in *2023-24 Budget Paper 3*.

Objective 1: Keep people healthy and safe in the community and **Objective 2: Care close to home** summarise the vision and intent of the reformed mental health and wellbeing system as envisaged by the Royal Commission. In bringing together lived and living experiences, research and clinical perspectives to drive system change, the Collaborative Centre is working towards a mental health and wellbeing system where people can receive the treatment, care and support they want; when, where and how they want it.

One of the Collaborative Centre's core functions is to lead the translation of high-quality research into better outcomes for Victorians who access mental health and wellbeing services. Our three-year translational research focus, outlined in our forthcoming *Translational Research Strategy 2024-2027*, includes prioritising translational research that supports new and enhanced models of care for adults and older adults needing ongoing, intensive forms of mental health and wellbeing treatment, care and support, as well as their families, carers, supporters and kin. This includes meeting the needs of First Nations and diverse communities. Our *Translational Research Strategy 2024-2027* strongly aligns with **Objective 3: Keep improving care** and **Objective 4: Improve Aboriginal health and wellbeing**.

The Collaborative Centre has an essential role in coordinating, promoting and delivering mental health services and continuing education and professional development informed by innovative translational research and lived and living experiences. This means working with researchers, workforces, services and people and communities with lived and living experiences to understand where we can add most value to address what is working, what is not, and where there are gaps or areas of duplication. Our unique remit puts us in the ideal position to support **Objective 5: Move from competition to collaboration**.

Building the capability of the mental health and wellbeing workforce is essential to a safe, sustainable and effective system. The Collaborative Centre has been setting the foundations for achieving our whole-of-workforce education and professional development function by working in collaboration with DH and the sector to strengthen and support the mental health workforces. In line with our focus on evidence-informed approaches and practice change, we are working to support an adaptive mental health and wellbeing system – one that compels us to reflect on the evidence underpinning the ways we deliver care, where that evidence is lacking, to commit to change our practice, test new ideas, and share what works for the benefit of all Victorians, in line with the aims of **Objective 6: A strong workforce**.

The human rights and dignity of all Victorians guide everything we do. The Collaborative Centre is proudly inclusive; we take a stand against all forms of stigma, discrimination and harm, and we uphold the human rights of all people who engage with mental health and wellbeing services. Through our translational research agenda, and in line with our human rights-led approach to system reform, we are actively supporting the move towards elimination of seclusion and restraint and a reduction in compulsory treatment across Victoria's mental health services. **Objective 7: A safe and sustainable health system** describes the future we are collectively working towards, and we are proud to work towards a mental health and wellbeing system that serves all Victorians.

The Collaborative Centre currently delivers mental health and wellbeing services via our partners. As we are not currently directly delivering these services, we are not required to report against performance measures outlined in *Budget Paper 3* against either Mental Health Clinical Care or Mental Health Community Care Services.



Alignment with the principles of the Mental Health and Wellbeing Act 2022

The Collaborative Centre is committed to aligning with the principles of the Act.

The work of the Collaborative Centre aligns most closely with the four highlighted principles.

The 13 principles are:

- Dignity and autonomy principle
- Diversity of care principle
- Least restrictive principle
- Supported decision making principle
- Family and carers principle
- **Lived experience principle**
- **Health needs principle**
- Dignity of risk principle
- Wellbeing of young principle
- **Diversity principle**
- Gender safety principle
- **Cultural safety principle**
- Wellbeing of dependents principle

Lived experiences principle

Our commitment to centring lived and living experiences and expertise informs not only the work that we do every day, but our foundational structures and processes.

We have supported alignment with the lived experiences principle through the following activities in 2023-24:

- The development of our inaugural *Lived and Living Experiences Strategy 2024-2027*, co-designed with and by people with lived and living experiences.
- The development of the Consortium's Memorandum of Understanding has included regular engagement with lived experience peaks, including VMIAC, Tandem and the Self-Help Addiction Resource Centre (SHARC).
- We commissioned a lived experience scoping review, exploring opportunities for improvement in lived experience leadership and research.
- We invested in Intentional Peer Support training for staff in designated lived and living experience roles.
- We continued to invest in LEAP, to support the ongoing engagement of lived and living experience perspectives and expertise across our strategic planning.
- Our *Translational Research Strategy 2024-2027* and Knowledge Sharing Platform both champion a holistic approach to evidence that we define as 'transformative evidence'. This includes recognising and elevating experiential knowledge and lived expertise.

Procurement and recruitment

We are working towards full implementation of processes that will ensure lived experience representation in all procurement and recruitment activities.

In 2023-24 we trialled the following new processes for selected procurements, with a view to expanding these to all future procurements:

- Selected procurement panels included a designated lived experience staff member.
- Selected procurement activities included a criterion for tendering organisations to describe evidence of their commitment to ensuring leadership and participation of people with lived and living experiences in past work, organisational culture and the proposed work for the Collaborative Centre. Among others, this criterion informed the selection of the successful architect to design our new premises at 205 Queensberry Street.

Since January 2024:

- we recruited Carolyn Gillespie, our Co-CEO (Lived Experience), ensuring lived experience leadership and advocacy is modelled and championed from the very top of the Collaborative Centre.
- at least one lived experience designated staff member has been on the panel for all substantive (contract or ongoing) recruitment processes.
- all recruitment interviews have included a question asking the interviewee to describe their commitment to lived experience participation and leadership.
- we have created opportunities for staff recruited into non-designated roles, to have their positions reclassified as designated lived experience roles. We are working towards full implementation of a process whereby all roles can be reclassified as designated, with the functions to be renegotiated accordingly, where the incumbent has appropriate experience, expertise and desire to bring their lived experiences to their role.

Health needs principle and Diversity principle

We have combined these two principles as the Collaborative Centre takes an intentional approach to ensuring that our work prioritises better mental health and wellbeing outcomes for people from diverse and marginalised backgrounds. Our *Lived and Living Experiences Strategy 2024-2027*, our *Translational Research Strategy 2024-2027* and the projects we are currently delivering, all share this commitment to recognising that demographic factors, socioeconomic circumstances, and other health and wellbeing influences, including stigma, discrimination and trauma can each have compounding effects on both a person's mental health and wellbeing and their experience of the system.

Below are some other ways our work in 2023-24 supports these principles:

- Our *Translational Research Strategy 2024-2027* details our clear commitment to prioritising research that benefits diverse and marginalised communities. It identifies specific cohorts that we intend to support through translational research projects and actions.
- Our Knowledge Sharing Platform will host resources and evidence-based research that addresses broader and intersecting social determinants of health, such as alcohol and other drug use, homelessness, gender-based violence. The platform's content and curation strategy will prioritise resources that support diverse and marginalised cohorts.
- We are partnering with leading organisations that represent Victoria's diverse communities, including Victorian Aboriginal Community Controlled Health Organisations (VACCHO), VMIAC, Tandem, SHARC, Victorian Multicultural Commission, Switchboard Victoria and Thorne Harbour Health.
- A social network analysis project will map the connectivity between mental health and wellbeing services and community organisations that provide mental health and wellbeing support to marginalised and diverse populations, to identify potential improvements in service access and provision for these communities.
- We have funded a project in partnership with Transforming Trauma Victoria to pilot an innovative trauma-informed practice model to support the Women's Recovery Network's (Wren's) Hospital in the Home program (this project also aligns with the **Gender safety principle**).

Cultural safety principle

Below are some examples of how our work in 2023-24 supports this principle:

- We proudly confirmed our support for VACCHO's *marra ngarrgoo, marra goorri* Accord and we are progressing conversations with VACCHO about how to work together to champion and uplift First Nations-led research.
- We have included in our Translational Research Strategy 2024-2027 a priority area focusing on designing and expanding models of care that are culturally safe and responsive.

Alignment with other principles

The Collaborative Centre has a clear remit to support system coordination and models of care for adults and older adults. We continue to advocate and work towards system-wide approaches and transformation that will ensure better experiences and outcomes for everybody who engages with the system.

This includes young people – in line with the ***Wellbeing of young people principle*** and the ***Wellbeing of dependents principle***.

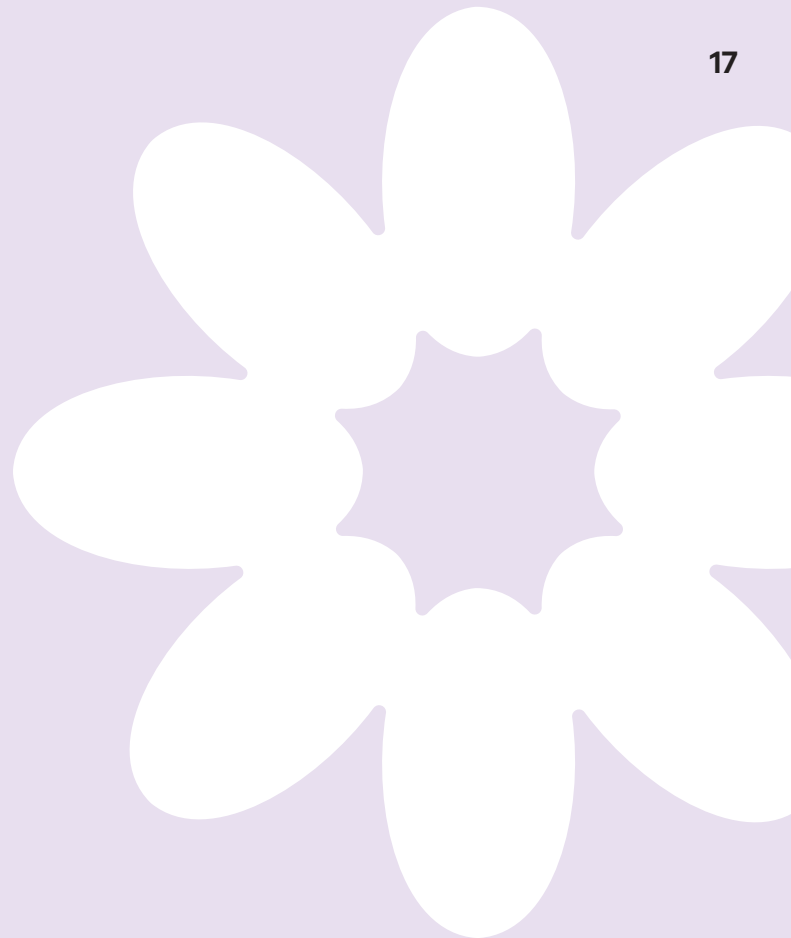
It is also important to note that several principles relate to the direct provision of mental health and wellbeing treatment, care and support. In future years, and with the ongoing growth and maturity of our partnerships across the sector, our capacity to directly provide the provision of treatment, care and support in line with these principles will be established.

In the meantime, a number of translational research projects commissioned by the Collaborative Centre in 2023-24 are laying the groundwork for our future contribution to direct service.

We are currently building the evidence base that supports greater autonomy and safety for consumers, carers, family, supporters and kin.

We are supporting our Best Practice Adult and Older Adult Consortium lead partners, Royal Melbourne Hospital and the University of Melbourne to undertake a feasibility study of the Open Dialogue model as an approach to eliminating the use of seclusion and restraint. Open Dialogue places the consumer and their own network at the centre of treatment and uplifts the roles of consumers, families/carers and service providers, so that all voices are equal. It provides an alternate approach for people experiencing an emotional crisis.

It is a way of structuring mental health services to be more responsive to people's needs through being in dialogue with people in crisis and their networks, with an emphasis on supported decision making. The Open Dialogue model has considerable alignment with the ***Dignity and autonomy principle***, the ***Least restrictive principle*** and the ***Dignity of risk principle*** as described in the Act.



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Section 2: Year in review

Our Statement of Priorities

Our *2023-2024 Statement of Priorities* is an agreement between the Collaborative Centre’s Board and the Minister for Mental Health about what we will deliver between October 2023 and September 2024.

Our priorities are set across five specific areas:

Partnerships and service improvement



Embedding lived experiences

Research



Workforce capability and development

Continuing operational establishment



Partnerships and service improvement

- Implementing the Adult and Older Adult Best Practice Consortium.
- Working with the Royal Melbourne Hospital as our health service partner to plan for delivering treatment, care and/or support at a co-located site.
- Planning for how the Collaborative Centre will fulfil its legislated function to ‘provide, promote and coordinate mental health and wellbeing services’.
- Developing existing partnerships, including with VMIAC, Tandem, VACCHO and the Victorian Multicultural Commission.
- Setting up new partnerships and relationships, including with organisations involved in the delivery of mental health research and services, Commonwealth and national bodies, and others to be determined.
- Formalising a relationship with the Statewide Trauma Service.

Embedding lived experience

- Launching and implementing the Collaborative Centre’s Lived Experience Framework.
- In line with the framework, embedding lived experience engagement and leadership effectively across the Collaborative Centre’s functions.
- In line with the framework, developing internal culture, processes and structures that demonstrate exemplary recruitment, employment, retention and recognition of lived experience staff (consumer and carer perspectives).

Translational research

- Launching the Collaborative Centre’s first research strategy, in line with reform priorities identified by the Royal Commission.
- Developing an action plan outlining how the Collaborative Centre will implement the research strategy.
- Evaluating and monitoring the Collaborative Centre.
- Implementing translational research initiatives that will improve mental health treatment, care and support in line with the research strategy.
- Designing the Centre’s ongoing ‘sharing what works’ operating model, including:
 - » designing and connecting a network of academic service leaders in line with the Royal Commission’s vision creating a model for how translation and dissemination activities will interrelate to deliver real impact.
 - » setting up the clearing house function, including designing parameters and requirements starting a research scan sharing outputs from research.

Workforce capability and development

- Delivering events, forums or webinars as part of a sector learning and engagement program in line with the research strategy that reaches service providers, people with lived and living experiences and academics
- Determining the Collaborative Centre’s future education and development operating model, including scope, intended outcomes, activities, resourcing and planning for implementation.

Continuing operational establishment

- Launching the Collaborative Centre’s first three-year strategic plan, in accordance with the requirements of section 667 of the Act.
- Appointing Co-CEOs in accordance with section 659 of the Act.
- Selecting and fitting out an interim site accessible to service users and close to health and academic partners, as well as early planning for a long-term site.
- Establishing digital platforms for accessible communications and meaningful engagement, including a website and stakeholder management system.
- Reporting to the Minister for Mental Health and Department of Health as required, and in accordance with sections 669 and 670 of the Act.



Progress against our Statement of Priorities

The 2023-24 financial year has been a period of rapid growth for the Collaborative Centre. We took significant steps towards establishing our ongoing operations and growing our team to prepare for the ambitious work program envisaged by the Royal Commission as set out in our Statement of Priorities.

This year the Collaborative Centre grew from a small establishment team of 12 staff (10.9 FTE) to a core team of 20 (19.2 FTE) staff. Between February and June 2024, we have been supported by five additional temporary contract staff to support the delivery of key projects outlined in our Statement of Priorities. In line with our commitment to lifting and amplifying lived and living experience perspectives, the number of staff in designated lived experience roles has grown from 3.6 FTE at the beginning of July 2023 to 5.6 FTE as at 30 June 2024. We are proud to have lived and living experience representation at all levels of our organisation.

Our significant growth has provided valuable opportunities to develop a strong team culture, and a shared vision for the future of the Collaborative Centre. Strengthening our organisational culture continues to be a key priority, and this year saw the recruitment of our inaugural Manager, Culture to support this ongoing program of work.

Between January and June 2024, we have continued to make rapid and significant progress towards the delivery of our 2023-24 Statement of Priorities as outlined in detail in the tables below.

It is important to note that our Statement of Priorities runs from October 2023 until September 2024. As at 30 June 2024, all objectives outlined in the Statement are on track to be delivered by the end of September, with the exception of one performance measure related to planning for the Collaborative Centre's long-term accommodation (see pages 33-34). This annual report outlines our progress to 30 June 2024.

Highlights include the finalisation of the Collaborative Centre Charter and aligned Charter guidelines, progress towards completion of the *Translational Research Strategy 2024-2027* and *Lived and Living Experiences Strategy 2024-2027*, and nearing completion of the Customer Relationship Management (CRM) project to support more sophisticated management and engagement with Collaborative Centre partners, collaborators and communities.

Progress also continues towards the Collaborative Centre's move to 205 Queensberry Street in Carlton. This project has also reached a number of key milestones as at June 2024, including the appointment of the demolition and landscape design teams.

Our team continues to engage in design workshops and briefings to guide the architectural work to ensure that the new accommodation meets the needs of our staff, partners and collaborators and that lived experience remains a core consideration in all phases of the project.

Partnerships and service improvement

A key theme of our work in 2023-24 has been expanding our engagement and partnerships, both formally and informally, across the sector to ensure that we are well placed to deliver on our remit to bring together people with lived and living experiences, researchers and practitioners to deliver positive outcomes.

This work has been guided by our Collaborative Charter, which outlines and underpins our approach to collaborative relationships.

As at June 30 2024, 7 deliverables are complete and 5 are on track for completion by end of September 2024.

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SOP ref	Title	SOP performance measure	Progress as at 30 June 2024	Status as at 30 June 2024
B1: Partnerships and service improvement				
B1.1	Implementing the Adult and Older Adult Best Practice Consortium.	Agreements entered into with each lead partner in accordance with section 646 of the Act, with approval from the Minister and a public announcement (completed at time of publication).	A Development Report to inform the Memorandum of Understanding (MOU) between the Collaborative Centre, Royal Melbourne Hospital and the University of Melbourne has been finalised. This concludes work done by the three organisations alongside VMIAC and Tandem to inform the ways the three organisations will work together, including reporting arrangements, work planning and governance. The report includes additional material that is beyond the scope of an MOU and will act as a standalone artefact to inform the partnership moving forward.	Completed
		Clear governance and advisory structures agreed and implemented that bring together lived experience, academic and service delivery perspectives.		On track
		Workplan developed with input from all Consortium members and other Collaborative Centre partners and stakeholders.		On track
		Service delivery and academic partner representatives inducted to the Board (pending appointment by the Governor-in-Council).		Completed
		Reporting arrangements to DH via the Collaborative Centre determined.		Completed
		Reporting arrangements to DH via the Collaborative Centre determined.	Hive Legal has commenced drafting the legal instrument informed by the report's contents.	Completed

SOP ref	Title	SOP performance measure	Progress as at 30 June 2024	Status as at 30 June 2024
B1.2	Working with health service partner to plan for delivering treatment, care and/or support at a co-located site.	Once interim site selected, planning with clinical partner for the design and delivery of services that are suitable from the chosen location.	Planning sessions have commenced.	Completed
B1.3	Planning for how the Collaborative Centre will fulfil its legislated function to 'provide, promote and coordinate mental health and wellbeing services'.	Plan for the Collaborative Centre's future role in supporting and coordinating statewide services has been agreed between the Centre and DH.	Conversations are continuing to progress with DH.	On track
B1.4	Developing existing partnerships, including with the Victorian Mental Illness Awareness Council (VMIAC), Tandem, the Victorian Aboriginal Community Controlled Health Organisation (VACCHO), the Victorian Multicultural Commission.	Partnership framework and Collaborative Charter agreed and implemented.	Collaborative Charter has been approved by Board.	Completed
B1.5	Setting up new partnerships and relationships, including with organisations involved in the delivery of mental health research and services, Commonwealth and national bodies, and others to be determined.		Commencement of Co-CEOs has involved broad sector engagement, including opportunities to explore future collaborations.	Completed
B1.6	Formalising a relationship with Transforming Trauma Victoria (formerly Statewide Trauma Service).	Formal relationship developed between the Statewide Trauma Service and Collaborative Centre.		On track
		Work underway with the Statewide Trauma Service and the Department of Health to determine how the two entities will inter-operate in the future. This plan considers future governance arrangements, co-location and alignment of functions.	Conversations are continuing to progress with DH.	On track

Partnerships and service improvement

Highlights for 2023-24

Developing our Collaborative Charter

This year we published our Collaborative Charter, a significant piece of work that outlines and underpins our approach to collaborative relationships.

The Charter outlines eight principles that will guide our partnerships and collaborations. It also defines what success looks like against each principle, so we can measure whether our collaborations are having positive outcomes for all participants.

The Charter ensures that our partnerships and collaborations are deeply aligned to our foundational values: ensuring lived and living experience participation, building strong connections and relationships across the sector and upholding human rights and social justice.

We have also developed a framework to support us to implement the Charter, and this will be our toolkit for how we consider, formalise and evaluate collaborations.

Establishing the Adult and Older Adult Best Practice Consortium

Acquitting the requirements of our Statement of Priorities and legislated functions, in late 2023, we appointed the Royal Melbourne Hospital and the University of Melbourne as lead partners of the Adult and Older Adult Best Practice Consortium. They are leading a broader network of 18 health and wellbeing services that have distinct areas of expertise and represent diverse interests and perspectives.

The Consortium will focus on research and implementing best practice treatment, care and support.

The Consortium's work will:

- demonstrate a model for high quality mental health care, treatment and support for adults and older adults.
- deliver interdisciplinary translational research and share its findings, methodologies and insights with the Collaborative Centre. This includes defining a research program that links to the Collaborative Centre's *Translational Research Strategy 2024-2027* and establishing a framework for measuring research outcomes.
- ensure effective management, coordination and reporting to enable the effective operation of the Consortium.

Embedding lived experiences

Embedding lived and living experience, leadership and expertise through all of the Collaborative Centre's work and functions has been a significant focus in 2023-24.

Along with our inaugural Co-CEO (Lived Experience), the Centre's Lived Experience Lead is responsible for supporting the professional and personal development of our designated lived and living experience workforce and lifting skills and capacity across the broader Collaborative Centre team to embed lived expertise across our work.

In 2023-24, we made significant progress towards the publication of our *Lived and Living Experiences Strategy 2024-2027*, and began implementing measures to ensure our recruitment and procurement processes are in line with our values, our legislative responsibilities and our commitment to lived experience engagement and leadership.

As at June 30 2024, all 4 deliverables are on track for completion by end of September 2024.

SOP ref	Title	SOP performance measure	Progress as at 30 June 2024	Status as at 30 June 2024
B2: Embedding lived experience				
B2.1	Launching and implementing the Collaborative Centre's Lived Experience Framework.	Lived Experience Framework developed, and implementation commenced with input from diverse people with lived and living experiences.	The outline of the <i>Lived and Living Experiences Strategy 2024-2027</i> has been finalised, with consultation and approval planned for August/September. Preparations are underway to support the next phase of the Strategy and ensure integrity of co-production.	On track
B2.2	In line with the framework, embedding lived and living experience perspectives effectively across the Collaborative Centre's functions. In line with the framework, developing internal culture, processes and structures that demonstrate exemplary recruitment, employment, retention and recognition of lived experience staff (consumer and carer perspectives).	Attract, onboard and support its lived experience staff members.	Lived Experience Lead role appointed.	On track
		Embed lived experience within its governance and advisory structures.	Lived Experience Community of Practice is established. Staff in designated roles have access to co-reflection and individual supervision/coaching.	On track
		Support lived experience partnership, leadership and participation in the true spirit of collaboration for all of its research, capacity building and system improvement activities.	Processes and structures are in place to ensure LEAP advises the Collaborative Centre's work. Additional designated roles are required to bring lived and living experience perspectives to all functions as new functions are set up.	On track

Embedding lived experiences

Highlights for 2023-24

Developing our *Lived and Living Experiences Strategy 2024-2027*

In 2023-24 the Collaborative Centre progressed its inaugural *Lived and Living Experiences Strategy 2024-2027* (included in our Statement of Priorities as 'Lived Experience Framework').

We have built on the work done in 2022-23 to engage with lived experience leaders within the Collaborative Centre (including our Board and LEAP) as well as externally to design the foundational elements of the Strategy, including our strategic goals and a clear vision for how it will inform and drive our work.

Our three-year *Lived and Living Experiences Strategy 2024-2027* will be a resource for the Collaborative Centre, and will outline how we will embed, enhance and uplift lived experience expertise, leadership and participation across all aspects of our work. In sharing the strategy publicly, we aim to be transparent and accountable in our actions and to share what we learn along the way so that others in the sector might benefit.



Translational research

In 2023-24 the Collaborative Centre made significant progress towards the delivery of Victoria's first statewide *Translational Research Strategy 2024-2027*. The Strategy will represent an important step towards realising the Royal Commission's vision of a modern, sustainable mental health system that adapts and responds to the future needs of Victorians.

We also funded and implemented a series of translational research initiatives, including pilot projects with our Lead Partners, statewide partners and other collaborators as well as PhD scholarships and industry placements.

These projects involve embedding collaboration between researchers, mental health workforces and people with lived and living experiences in the locations where care is provided.

This year we expanded our translational research team to ensure the Collaborative Centre is well placed to drive research excellence and practice translation across the sector.

As at June 30 2024, 1 deliverable is complete, 10 are on track for completion by end of September 2024, and 1 has been delayed.

SOP ref	Title	SOP performance measure	Progress as at 30 June 2024	Status as at 30 June 2024
B3: Research				
B3.1	Launching the Collaborative Centre's first research strategy, in line with reform priorities identified by the Royal Commission.	Research strategy approved by Board and made publicly available.	Board approved a draft <i>Translational Research Strategy 2024-2027</i> for consultation and an initial engagement plan. An updated engagement plan for a series of <i>Collaborating to Transform</i> roundtables has been developed. The draft Strategy has been shared with key organisations for feedback and review.	On track
		Strategy reflects priorities identified by the Royal Commission and which have been determined by the Board in consultation with the Secretary of DH, in accordance with section 648(f) of the Act.		On track
		Reflects input from people with lived experiences (consumer and carers), the mental health workforce, academics and other diverse stakeholders within the mental health and wellbeing sector.		On track
	Developing an action plan outlining how the Collaborative Centre will implement the research strategy.	Action plan provided to DH with an overview of initiatives that will be delivered under the research strategy to ensure alignment of work.		On track
	Evaluating and monitoring the Collaborative Centre.	Final report for developmental evaluation completed.		Completed

SOP ref	Title	SOP performance measure	Progress as at 30 June 2024	Status as at 30 June 2024
B3.2	Implementing translational research initiatives that will improve mental health treatment, care and support in line with the research strategy.	Translational research initiatives underway that seek to improve mental health treatment, care and support. Initiatives are delivered by the Collaborative Centre, through the Adult and Older Adult Best Practice Consortium and/or through other partners.	Several translational research initiatives are in train that seek to improve mental health treatment, care and support.	On track
	Designing the Centre's ongoing 'sharing what works' operating model, including:			
	Designing a network of academic service leaders in line with the Royal Commission's vision.	Plan for the Collaborative Centre's future role in delivering a service-level research network agreed with DH.	We are working with DH to determine and plan for the Collaborative Centre's future role in delivering the network.	Delayed
	Creating a model for how translation and dissemination activities will interrelate to deliver real impact.	Details of each initiative provided to DH, including timelines, research outputs and intended outcomes.	Details will be included in our forthcoming <i>Translational Research Strategy 2024-2027</i>	On track
		Design project started that will deliver a clear scope and operating model for research translation and dissemination, including the academic network. The project will consider options for scaling up operations for enduring and statewide impact.	Design project has commenced in partnership with DH.	On track

SOP ref	Title	SOP performance measure	Progress as at 30 June 2024	Status as at 30 June 2024
B3.3	Setting up the clearing house function including designing parameters and requirements.	Clear scope determined for the clearing house function, including parameters for guidance and evidence, requirements and intended outputs and outcomes.	Websilk, in partnership with Mind Australia, has commenced the development of the new Collaborative Centre website and integrated knowledge sharing platform. The website and underlying knowledge sharing architecture is on track to go live in September.	On track
	Starting a research scan.	Initial dissemination function is live.		On track
	Share outputs from research.	Plan in place for further development of the clearing house that details project timelines and future resourcing needs.	A Knowledge Sharing Platform Content and Curation Strategy is in development. Following an initial call-out for sample resources via Consortium leads, individual meetings with organisations are being scheduled to source best practice resources.	On track



Translational research

Highlights for 2023-24

Progress towards delivering our *Translational Research Strategy 2024-2027*

The Collaborative Centre's *Translational Research Strategy 2024-2027* underpins a move towards an adaptive mental health system where Victoria leads in:

- testing innovative models of treatment, care and support.
- gathering evidence about what works.
- sharing this evidence across the sector for more effective practice.

Our approach includes investing in the next generation of translational research leaders and supporting our mental health and wellbeing workforces by equipping them with new evidence-based tools to boost access to resources they need to shape new ways of delivering care and improved outcomes.

This work will also inform whole-of-workforce continuing education and professional development activities that support and lift core mental health and wellbeing capabilities.

A strong international evidence base has informed the development of our Strategy including:

- reviews of current and best practice in mental health translational research.
- collaboration with people with lived and living experiences of mental ill health challenges, including representatives from diverse communities and lived experience peaks such as VMIAC, Tandem and SHARC.
- engagement with more than 600 people, including mental health academics and researchers, mental health professionals and people with lived experiences.

The Strategy will be accompanied by annual action plans that outline the things we will do to acquit against our functions and ensure that our actions remain integrated across the Centre.

Designing a Knowledge Sharing Platform

To expand our role in sharing and promoting high-quality translational research, the Collaborative Centre has made significant progress towards delivering an innovative Knowledge Sharing Platform.

The platform will exceed the commitment outlined in our Statement of Priorities to create a clearinghouse function to share resources and translational research outcomes with the sector. The Knowledge Sharing Platform takes the clearinghouse concept further by recognising that the traditional definition of 'knowledge' relies on rigid definitions of evidence and does not account for the value of experiential forms of evidence, such as lived and living experience and practice wisdom.

The aim of the Knowledge Sharing Platform is to bring together the latest thinking and evidence from all these perspectives to inform system-level change. We will share outputs from cutting-edge mental health and wellbeing translational research to underpin new approaches to delivering care.

As at June 2024, we have:

- commenced development of the governance, content and curation for the Platform. This will include guides for the development of knowledge sharing and practice translation resources for all funded translational research projects, such as clinical practice points, plain language resources.
- commissioned the development of tangible resources to contribute to the Platform, such as a Lived Experience toolkit being developed with Wellways Australia, and the piloting and testing of trauma-informed resources to support delivery of the Hospital in the Home services run by the Women's Recovery Network.
- invited sector partners to submit best practice resources to host on the Knowledge Sharing Platform.

Workforce capability and development

A skilled, sustainable mental health and wellbeing workforce is crucial to genuine system transformation and to driving continuous improvement in mental health services.

The Collaborative Centre has commenced design of a centralised, coordinated, and collaborative

whole-of-workforce approach to education and development. We will build on what is already working and introduce innovations to support the future mental health workforce, ensuring it meets the long-term needs of the sector and community. As at June 30 2024, all 4 deliverables are on track for completion by end of September 2024.

SOP ref	Title	SOP performance measure	Progress as at 30 June 2024	Status as at 30 June 2024
B4: Workforce capability and development				
B4.1	Delivering events, forums or webinars as part of a sector learning and engagement program in line with the research strategy that reaches service providers, people with lived and living experiences and academics.	Proposed schedule of sector engagement (linked to the research strategy once it is published) provided to DH to ensure alignment of work.	Proposed schedule of sector engagement will be finalised as part of the translational research strategy and will be provided to DH to ensure alignment of work.	On track
		Delivery of public engagement in line with the schedule.	The Centre has delivered several events and have participated number of engagements. Other events and engagements activities currently in the planning phase.	On track
B4.2	Designing the Collaborative Centre's future capability operating model, including scope, intended outcomes, activities, resourcing and planning for implementation.	Design project commenced to deliver a clear scope and operating model for the capability function. The project will consider options for scaling up operations for enduring and statewide impact.	The approach for designing the Centre's future operating model was endorsed by the Board in June. This builds on the agreed scope of the Centre's future role in capability, which was endorsed by the Board in April.	On track
		Plan for the Collaborative Centre's future role in capability has been agreed with DH.	The team has engaged with LEAP and is now commencing meetings with key people and organisations.	On track

Workforce capability and development

Highlights for 2023-24

Developing an operating model for workforce education and development

The Collaborative Centre and DH have progressed discovery and engagement activities to support the development of a workforce capability operating mode.

DH has commissioned work to better understand the success, gaps and opportunities of current workforce education and development functions, which will directly inform the new model.

The Collaborative Centre is engaging with a range of people and organisations to understand the gaps, challenges and opportunities in mental health workforce education and development. We have met with our Consortium partners, statewide services, peaks (including lived

experience peaks) representative organisations and those focused on priority cohorts, industrial bodies and other key organisations.

In 2024-25, the Collaborative Centre will continue to build relationships and engage widely to ensure the design of our operating model is fit for purpose and delivers on the Royal Commission's vision.

The Collaborative Centre and DH share a focus on planning for the future and ensuring sustainable approaches to mental health workforce education and development. The operating model will consider both current and potential challenges and opportunities to ensure that it is adaptable and scalable in the coming years.

Continuing operational establishment

In our second year of operation, the Collaborative Centre continued to deliver strong sector leadership; compliance with legislation, regulations and public expectations; and communicating clearly and transparently. These functions are critical to our organisational success. To achieve our ambitions, we know that we must engage openly and honestly and commit to ongoing collaboration as we work to transform mental health care services and delivery in Victoria.

In the 2023-24 financial year, our key achievements have included establishing the structures and processes to support the next stages of our strategic planning, appointing our inaugural Co-CEOs, and building the foundations of our ongoing communications and engagement functions so that we can continue to build awareness of and participation in our work.

As at June 30 2024, 1 deliverable is completed, and 3 are on track for completion by end of September 2024. At the time of reporting, 1 deliverable is at risk and 1 has been paused owing to changing government priorities.

SOP ref	Title	SOP performance measure	Progress as at 30 June 2024	Status as at 30 June 2024
B5: Continuing operational establishment				
B5.1	Launching the Collaborative Centre's first three-year strategic plan, in accordance with the requirements of section 667 of the Act.	Strategic Plan approved by Minister and published.	An agency has been engaged to support this work. Planning is progressing with Board, LEAP and Collaborative Centre executive team.	On track
B5.2	Appointing Co-CEOs in accordance with section 659 of the Act.	Co-CEOs appointed by the Chairperson in consultation with the Board and with the approval of the Minister.	Complete	Completed
B5.3	Selecting and fitting out an interim site close to health and academic partners, as well as early planning for a long-term site.	Interim site proximate to health and academic partners selected and fit-out commenced. Timing permitting, operations have commenced in the interim site.	Architect has delivered stage one early works and demolition, and a landscape design concept for rooftop. A contractor for demolition of existing interior and landscaping has been settled.	At risk
		Early planning commenced to consider long-term site.	Long term site planning is paused due to Victorian Government changes to planned Arden precinct.	Paused
B5.4	Establishing digital platforms for accessible communications and meaningful engagement, including a website and stakeholder management system.	A new website has been launched with an approved stand-alone brand.	Brand identity has been developed and is awaiting final approvals. Website design and development is progressing and on track for timely delivery. CRM build is in its final stages, which include testing and preparation for staff induction and training.	On track
B5.5	Reporting to the Minister for Mental Health and DH as required, and in accordance with sections 669 and 670 of the Act.	The Collaborative Centre has acquitted its reporting requirements with DH as outlined in Part C of this Statement of Priorities.	A regular meeting cadence has been implemented with DH following changes to their structure.	On track

Continuing operational establishment

Highlights for 2023-24

Selecting and fitting out our new accommodation

The Collaborative Centre has selected an existing building located at 205 Queensbury Street Carlton for our new premises.

Our new location in the heart of Melbourne's health, research and innovation precinct will set the Collaborative Centre up to perform its essential role of bringing together people with lived and living experiences, researchers and practitioners to support better collaboration.

The co-location opportunities offered by the building – including with our partners Royal Melbourne Hospital, University of Melbourne and Transforming Trauma Victoria – and the capacity to host sector, workforce, lived experience and community events, workshops and training will further support the Collaborative Centre's long-term strategic objectives.

Work towards preparing the building for occupation commenced later in the financial year than intended, due to legislative timelines that delayed recruiting key staff including our Co-CEOs. These delays also impacted our ability to fully expend the budget allocated to this work, which is why this deliverable is marked as 'at risk'.

Planning for the Collaborative Centre's permanent accommodation was paused following the relocation of the Victorian Government's planned biomedical precinct from North Melbourne to Parkville. We are currently working with the DH to determine our options for long-term accommodation options.

As of June 2024, architectural design work is nearing completion, with \$801,171 being spent on this project in 2023-24. We anticipate the new premises will be ready to occupy in late 2024.



Section 3:
**Financial
overview
and
summary**

Financial overview of 2023-24

In 2023-24 the Collaborative Centre transitioned from its establishment phase to the early stages of ongoing operations. However, delays associated with the revision of the Act resulted in a four month delay in appointing our Co-CEOs. This in turn pushed back the development of an ongoing organisational structure for the Collaborative Centre and the recruitment of staff with specialist skills required for delivering on objectives set out in our Statement of Priorities.

Given the impacts on recruitment and onboarding of staff, a number of initiatives – most notably the fit-out of our interim office location – commenced later in the financial year than planned. Our operating result of \$9.63m of expenditure against

our budget of \$11.05m reflects this delay but also shows the significant efforts and achievements of the Collaborative Centre in the second half of the financial year to deliver on our Statement of Priorities.

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Financial context

As a portfolio agency of DH, the Collaborative Centre's financial data and information is collected by and reported on by DH. Information presented in this report was provided by DH and is also included in the department's annual report, unless otherwise noted.

The Collaborative Centre operates as a cost centre within DH and works to a budget allocation determined by the Victorian Government. This means that:

- certain corporate services costs are included in our MOU with DH and are therefore excluded from the Collaborative Centre's budget and expenses (see page 38 for more information).
- expenses that are treated as internal transfers within DH – for example, costs related to information technology development projects such as our Customer Relationship Management (CRM) system – are removed from the Centre's total appropriation and do not appear under expenses.

Summary of financial position

The Collaborative Centre has been provided with an appropriation of \$4.24m to support its core ongoing expenses. This has been supplemented by an additional \$6.99m for 2023-24 to continue the establishment of the Centre. The financial

statements of DH show that the appropriation total for our cost centre was \$11.05m due to the transfer of funds back to the department for the CRM build noted above as well as the inclusion of \$0.08m carried over from the 2022-23 financial year.

	2023-24 Actual	2022-23 Actual
Total Appropriation	11,050,472	2,165,405
Expenses from transactions		
Employee benefits	2,788,627	1,251,321
Grants and other transfers	2,168,555	-
Interest expenses	46,900	-
Depreciation and amortisation	189,866	-
Other operating expenses	4,436,527	914,084
Total expenses from transactions	9,630,475	2,165,405
Net operating balance	1,419,997	-

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The changes between the Collaborative Centre's financial position from 2022-23 to 2023-24 are expected due to our continued growth, and broadly reflect the increases in spending anticipated and planned for during the establishment phase.

The variance to budget is due primarily to the abovementioned delays in the first half of the financial year. These delays also resulted in an underspend of \$0.58m on employees and external staff. The absence of this additional resourcing contributed to the delays in planning for the interim site fit-out, with the impact being an underspend of approximately \$0.84m in operating expenditure for the project.

There have been no subsequent events after 30 June that have made a material impact on the financial position of the Centre.



Section 4:

Attestations and disclosures

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**The Victorian
Collaborative Centre**
For Mental Health & Wellbeing

Level 27, 50 Lonsdale Street
Melbourne VIC 3000

www.vccmh.vic.gov.au

Financial Management Compliance Attestation Statement (FR 5.1.4)

I, Terry Laidler, Chairperson of the Victorian Collaborative Centre for Mental Health and Wellbeing, on behalf of the Responsible Body, certify that the Victorian Collaborative Centre for Mental Health and Wellbeing has no Material Compliance Deficiency with respect to the applicable Standing Directions under the Financial Management Act 1994 and Instructions.

Terry Laidler

Board Chair,

Victorian Collaborative Centre for Mental Health and Wellbeing

11 September 2024



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Competitive Neutrality Policy (FRD 22)

Competitive neutrality requires government businesses to ensure where services compete, or potentially compete with the private sector, any advantage arising solely from government ownership be removed, if it is not in the public interest. Government businesses are required to cost and price such services as if they were privately owned. The Competitive Neutrality Policy supports fair competition between public and private businesses and provides government businesses with a tool to enhance decisions on resource allocation. This policy does not override other policy objectives of the government and focuses on efficiency in service provision.

The Centre continues to comply with the requirements of the Competitive Neutrality Policy and confirms there were no relevant procurement activities within this category during the 2023–24 financial year.

Details of consultancies over \$10,000 / Details of consultancies under \$10,000 (FRD 22)

For the purposes of the requirements of FRD 22:

- a consultant is a particular type of contractor that is engaged primarily to perform a discrete task for an entity that facilitates decision making through:
 - » provision of expert analysis and advice.
 - » development of a written report or other intellectual output.

The Collaborative Centre did not engage any individuals or agencies to complete work meeting the above definition in 2023–24. On request, details of contractors can be provided.

Disclosure of procurement complaints (FRD 22)

The Collaborative Centre's procurement activity for the 2023–24 reporting period is captured in DH's annual reporting.

The Collaborative Centre was not subject to any procurement complaints in 2023–24.

Emergency procurement (FRD 22)

The Collaborative Centre is subject to DH's emergency procurement protocols, and the Centre's procurement activity is captured in DH's annual reporting.

The Collaborative Centre did not undertake any emergency procurement activity in 2023–24.

Environmental reporting (FRD 24)

Victoria was one of the first jurisdictions in the world to implement a net-zero emissions target into law. The government brought forward its commitment to achieve net-zero from 2050 to 2045. It is aiming to cut emissions by 45 to 50 per cent by 2030.

FRD 24 was introduced on 1 July 2022 and requires all public bodies to meet environmental data reporting requirements. For the purposes of FRD 24, the Collaborative Centre is a Tier 4 entity. During the 2023–24 financial year, the Collaborative Centre was located at 50 Lonsdale Street, Melbourne with DH.

Our electricity consumption, electricity offsets, fleet and office accommodation is provided as part of our shared services arrangement with DH, as articulated in our Memorandum of Understanding. Data on environmental impacts is included in the Department of Health's annual report.

The Collaborative Centre will report on FRD 24 in the 2024–25 financial year when we move to our interim premises at 205 Queensberry Street.

Disclosure of major contracts (FRD 12)

Under FRD 12, the Collaborative Centre is required to publish details of any contracts over the value of \$10 million.

The Collaborative Centre did not enter into any contracts over the value of \$10 million in 2023–24.

Government advertising expenditure (FRD 22)

Government campaign advertising means a campaign bought by the Centre through the Master Agency Media Services (MAMS) media-buying contract.

The Centre's expenditure in the 2022–23 reporting period on government campaign expenditure did not exceed \$100,000. The Centre has a Nil disclosure to report.

ICT expenditure (FRD 22)

For the 2023–24 reporting period, the Centre incurred a total information and communication technology (ICT) expenditure of \$208,170. This information below has also been consolidated within DH's annual report.

All Operational ICT Expenditure		ICT Expenditure related to Projects to Create or Enhance ICT capabilities	
BAU ICT Expenditure	Non-BAU ICT Expenditure	Operational Expenditure	Capital Expenditure
Total	Total*		
\$208,170	\$-	\$-	\$ -

Note. *Total = operational and capital expenditure; ICT = information and communication technology; BAU = business as usual.

Executive disclosures (FRD 15)

The appointment of our Co-CEOs in January saw the Collaborative Centre shift from a single Acting CEO position to two senior executives at SES-2. There were two incumbents serving in the Acting CEO role throughout 2023-24, and the adjustment of executives roles is reflected in the table below.

As outlined in the *Workforce data disclosures (FRD 22)* table (see Page 46), there are currently two

VPS-6 staff members acting in long-term executive (SES-1) roles. As these are acting arrangements, the roles are not reflected in the table below.

Note: the Collaborative Centre’s executive disclosures are not duplicated in DH’s annual reporting, as Collaborative Centre workforce data has not been captured in the department’s end of year reporting processes.

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Total number of SES			Women		Men		Self-described	
Class	No.	Var.	No.	Var.	No.	Var.	No.	Var.
SES-3	0	0	0	0	0	0	n	n
SES-2	2	(1)	2	(1)	0	(0)	n	n
SES-1	0	(0)	0	(0)	0	(0)	n	n
Total	2	(1)	2	(1)	0	(0)	n	n

Occupational health and safety (FRD 22)

The Collaborative Centre aligns with the DH occupational health and safety systems, policies and processes as part of our shared services arrangement.

During 2023-24, and since our establishment, the Centre has not recorded any occupational health and safety incidents or hazards, as confirmed in the table below:

Indicator	Per 100 staff members in 2023-24	Actual in 2023-24	Per 100 staff members in 2022-23	Actual in 2022-23	Total
Hazards or incidents	0	0	0	0	No incidents recorded
‘Lost time’ standard claims	0	0	0	0	No incidents recorded
Average cost per claim for 2023-24					\$0 – no incidents recorded
Fatalities	0	0	0	0	No incidents recorded

Reviews and studies expenditure (FRD 22)

In 2023-24 the Collaborative Centre undertook 7 studies with a total cost of \$1,780,252. Details of individual reviews and studies are outlined below:

Name of review/study	Reason	Scope	Anticipated outcomes	Estimated cost for year (ex-GST)	Total cost (if completed)	Publicly available (Y/N and URL)?
Social network analysis	To understand system interactions and interrelations.	Map system interactions and relationships in 2 x Victorian regions.	Better understanding of gaps and opportunities for system navigation.	\$200,000	N/A	N/A - incomplete
Open Dialogue	To investigate alternatives to seclusion and restraint in Area Mental Health and Wellbeing Services.	Investigate feasibility of dialogical approaches as an alternative model to seclusion and restraint	Report outlining the feasibility of the proposed model.	\$301,536	N/A	N/A - incomplete
Hospital in the Home	To improve treatment, care and support for women accessing a Hospital in the Home service.	Research project to evaluate trauma-informed care at the Women's Recovery Network (Wren).	A series of resources to support trauma-informed treatment, care and supported for women.	\$200,000	N/A	N/A - incomplete
Embedding research in clinical care	To support the next generation of translational researchers.	Co-locating academic and researchers within clinical settings	PhD scholarships, industry placements and a Post-doctoral Fellowship.	\$867,019	N/A	N/A - incomplete
Lived experience research toolkit	To implement recommendations from <i>Lived experience research scoping review</i> (funded in 2022-23).	Evidence-informed tools and resources to support delivery of lived experience-led research.	Toolkit to be hosted on the Collaborative Centre's Knowledge Sharing Platform.	\$166,823	N/A	N/A - incomplete
Family and Carer Research Advocacy Network (FaCRAN)	To better support families, carers and supporters.	A review of the current research around development of targeted supports for families, carers and supporters.	Systemic review paper to be hosted on the Collaborative Centre's Knowledge Sharing Platform.	\$44,874	\$44,874	N

Workforce data disclosures (FRD 29)

The table below outlines the current composition of the Collaborative Centre's workforce, and variation from the 2022-23 reporting period.

This financial year saw significant growth in the size of our team, especially at the VPS 5 and VPS 6 level. This reflects the operational demands of our Statement of Priorities for the year and focus on growing our functional teams in line with the future vision of the Centre.

In line with the Collaborative Centre's current funding conditions, the majority of roles are currently non-ongoing.

Note: the Collaborative Centre's workforce data disclosures are not duplicated in DH's annual reporting, as Collaborative Centre workforce data has not been captured in the department's end of year reporting processes.

	JUNE 2024						JUNE 2023								
	All employees		Ongoing			Fixed term and casual		All employees		Ongoing			Fixed term and casual		
	Number (headcount)	FTE	Full-time (headcount)	Part-time (headcount)	FTE	Number (headcount)	FTE	Number (headcount)	FTE	Full-time (headcount)	Part-time (headcount)	FTE	Number (headcount)	FTE	
DEMOGRAPHIC DATA	Gender														
	Women	13	12.4	2		2	11	10.4	7	6.1				7	6.1
	Men	7	6.8				7	6.8	3	2.8				3	2.8
	Self-described							2	2					2	2
	Age														
	15-24														
	25-34	6	5.8				6	5.8	6	5.7				6	5.7
	35-44	12	11.5	2		2	10	9.5	4	3.2				4	3.2
	45-54	1	1				1	1	1	1				1	1
	55-64	1	0.9				1	0.9	1	1				1	1
65+															
CLASSIFICATION DATA	VPS 1-6 grades	18	17.3	2	0	2	16	15.3	12	10.9	0	0	0	12	10.9
	VPS 1														
	VPS 2														
	VPS 3														
	VPS 4	2	1.8				2	1.8	3	2.8				3	2.8
	VPS 5	6	5.5				6	5.5	3	2.7				3	2.7
	VPS 6	10	10	2		2	8	8	6	5.4				6	5.4
	Senior employees	2	1.9	0	0	0	2	1.9	0	0	0	0	0	0	0
	SES-2 Executives	2	1.9				2	1.9							
	Other														
	Total employees	20	19.2	2	0	2	18	17.2	12	10.9	0	0	0	12	10.9

Note: There are 2 VPS-6 employees acting as executives under long-term acting arrangements at SES-1 level

Workforce inclusion policy (FRD 22)

The Collaborative Centre is aligned with DH's suite of workforce inclusion policies, including the *Gender Equality Action Plan*, *Aboriginal and Torres Strait Islander Workforce Strategy 2021-2026*, *LGBTIQA+ Workplace Inclusion Action Plan* and the *Victorian Public Sector's Getting to Work: Disability Employment Action Plan 2018-2025*.

In line with its commitment and ambition to champion lived and living experience leadership and participation, the Collaborative Centre is developing its own *Lived and Living Experiences Strategy 2024-2027*, which outlines how the Collaborative Centre will build lived and living experience leadership and capability across the organisation.

The Collaborative Centre currently has seven staff in designated lived and living experience roles – at all levels of the organisation, and across every operational team. Celebrating diversity, and ensuring equity of participation and experience for all staff, informs every aspect of the Collaborative Centre's work.

Relevant legislation

Building Act 1993 (FRD 22)

The Collaborative Centre complies with the requirements of the *Building Act 1993*, the *Building Regulations 2018* and other Victorian legislation referenced by the Victorian Building Authority. The Collaborative Centre controls one government building located at 205 Queensberry Street Carlton.

The Centre engaged a team of suitably qualified and registered building consultants comprising a project manager and lead architect, who acted as the Principal Consultant. The Principal Consultant engaged a sub-consultant team, including a consultant building surveyor, building services engineer, land surveyor, DDA consultant, acoustic engineer, structural engineer and landscape architect.

Consultants engaged for public construction fall under the *Project Development and Construction Management Act 1994*, and are not considered consultants for the purpose of FRD 22 reporting.

Number of major works projects undertaken in 2023-24 (>\$50 000)	1
Number of building permits, occupancy permits, or certificate of final inspection issued in relation to buildings owned in 2023-24	1 building permit 0 occupancy permits 0 certificates of occupancy
Number of emergency orders and building orders issued in relation to buildings in 2023-24	0 emergency orders 0 building orders
Number of buildings that were brought into conformity with building standards during 2023-24	0 buildings brought into conformity

Carers Recognition Act 2012 (FRD 22)

The Collaborative Centre recognises the contribution made to the community by carers and has taken measures to promote and support those with caring responsibilities under the Carers Recognition Act 2012 including:

- promoting flexible working arrangements, whilst aiming to minimise the likelihood of efficiency losses or adverse impacts on productivity or business continuity.
- promoting carer's leave entitlements along with other leave entitlements, pursuant to the Enterprise Agreement, and the *Fair Work Act 2009*. The Centre ensures compliance by providing clear and consistent advice to employees and managers.
- providing support through the Employee Assistance Program.

Freedom of Information Act 1982 (FRD 22)

The *Freedom of Information Act 1982* (FOI Act) allows the public a right to request access to documents held by the Centre, including personal documents and documents relating to the Centre's activities. The FOI Act also allows people to request that incorrect or misleading information regarding their personal details is amended and provides an appeal process to review access decisions.

In 2023-24 the Centre did not receive any requests for access to documents under the FOI Act.

Making a request

FOI requests to the Centre are processed by the Department and requests to the Department can be made by:

- emailing foi@health.vic.gov.au
- sending an application to the FOI Unit at:
Freedom of Information unit
Department of Health
GPO Box 4057
Melbourne Victoria 3001
- online at <https://ovic.vic.gov.au>.

When making an FOI request, applicants should ensure the request is in writing, and clearly identifies the material or documents being sought.

Local Jobs First Act 2003 (FRD 25)

The *Local Jobs First Act 2003* introduced in August 2018 combines the Victorian Industry Participation Policy (VIPPP) and the Major Project Skills Guarantee (MPSG) policy which were previously administered separately.

The Centre is required to apply the Local Jobs First policy in all projects valued at \$3 million or more in Metropolitan Melbourne or for statewide projects, or \$1 million or more for projects in regional Victoria. MPSG applies to all construction projects valued at \$20 million or more. The MPSG guidelines and VIPPP guidelines will continue to apply to MPSG applicable and VIPPP applicable projects respectively where contracts were entered prior to 15 August 2018. The Centre has a Nil disclosure to report.

Public Interest Disclosures Act 2012 (FRD 22)

The *Public Interest Disclosures Act 2012* (PID Act) enables people to report corrupt or improper conduct by a public officer or a public body. The Collaborative Centre is a public body for the purposes of the PID Act.

Public interest disclosure

A public interest disclosure is a complaint of corrupt or improper conduct or detrimental action by a public officer or a public body.

'Improper or corrupt conduct' involves substantial mismanagement of public resources, risk to public health or safety or the environment, or corruption. 'Detrimental action' is action taken against a person in reprisal for making a public interest disclosure and includes discrimination, disadvantage, or adverse treatment.

The Centre is committed to the aims and objectives of the PID Act. It does not tolerate improper conduct by its employees, officers or members, nor the taking of reprisals against those who come forward to disclose such conduct.

Reporting process

A public interest disclosure regarding the conduct of a Collaborative Centre employee or its board members can be made by contacting IBAC (details below).

The Department of Health handles public interest disclosures on behalf of the Centre and ensures that support and welfare protection is provided to anyone who make a disclosure.

A disclosure can be made by contacting the Department of Health:

- publicinterestdisclosure@health.vic.gov.au or
- the Integrity Hotline on 1300 024 324.

Alternatively, disclosures may be made directly to the Independent Broad-Based Anti-Corruption Commission (IBAC) Victoria and make a disclosure:

- in person at: Level 1, North Tower, 459 Collins Street, Melbourne Victoria 3000.
- by mail: IBAC, GPO Box 24234, Melbourne Victoria 3001
- by online: www.ibac.vic.gov.au
- by telephone: 1300 735 135
- by email: See the website above for the secure email disclosure process, which also provides for anonymous disclosures.



**The Victorian
Collaborative Centre**
For Mental Health & Wellbeing

50 Lonsdale Street
Melbourne, Victoria