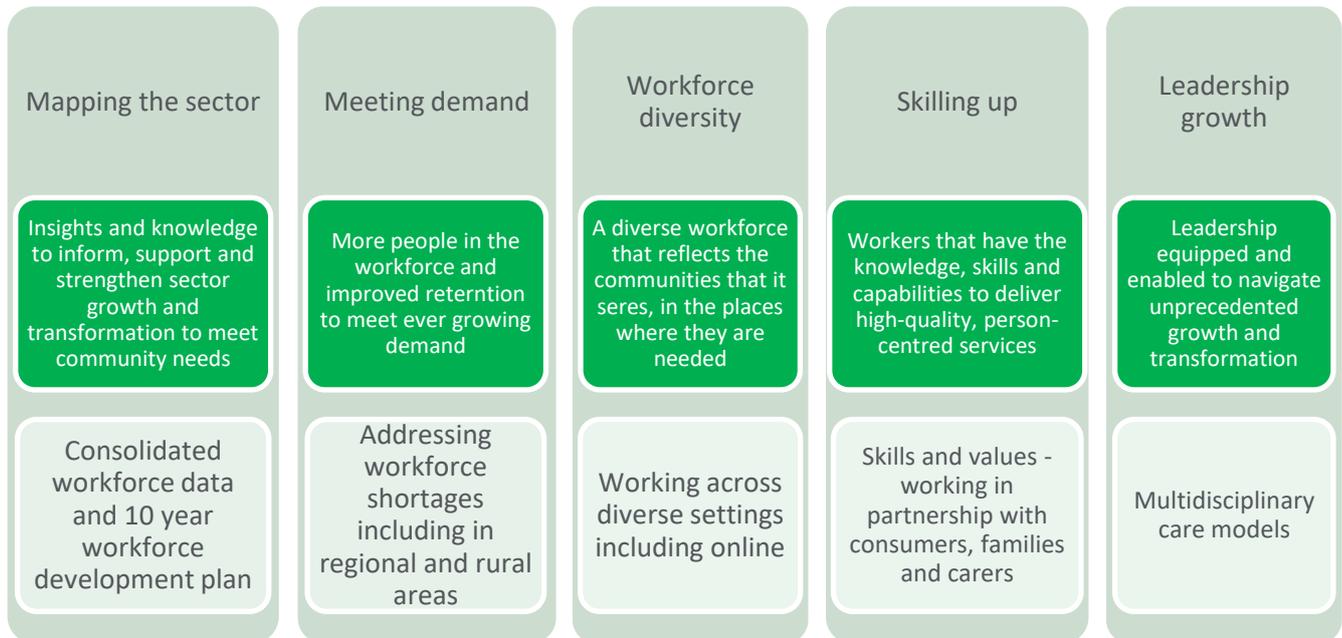


# FSSI Mental Health Royal Commission Additional Information

FSSI is providing this additional post-roundtable information to support the Mental Health Royal Commission with further insights into the pathways for mental health services workforce transformation, drawing on our unique vantage point across the community services sector. As outlined in the introductory one page, FSSI works in partnership to pilot and evaluate new educational models and pathways, build leadership capability and develop evidence, data and insights to inform workforce development approaches.

This response provides outline of the key challenges, barriers and opportunities in developing the mental health workforce drawn from FSSI's work in aligned areas. Our recommendations for actions are below:

## Recommended elements of a framework for workforce development



FSSI is uniquely placed to support these recommended elements for workforce development, including:

- Leading or informing a process to collaboratively develop a data framework to guide the identification of the mental health workforce
- Supporting formation of a 10 year workforce development plan
- Co-designing a workforce development strategy that provides a tiered approach to development
- Co-designing a community services common core and piloting innovating delivery models
- Drawing on existing pilots, scaling up models to grow the workforce including attracting and supporting diverse learners, such as those with lived experience, to completion
- Co-designing leadership development programs including models to enable career trajectories to support diverse learners, such as learner with lived experience

## Challenges across the mental health and broader community services workforce

As outlined in the one pager, FSSI's vision is for a strong community supported by a diverse, high-quality, responsive and innovative social sector.

The mental health royal commission has identified a range of challenges across the mental health workforce that align with the broader challenges faces by the social services sector.

These include that Victorians need a mental health workforce that ...

- Can provide services and supports to diverse Victorians across the State;
- Can advocate for service innovation, service improvement and adequate budget resourcing”;
- Is “skilled, competent and engaged”;
- Is “empathetic, respectful and responsive to individuals and their unique needs”;
- Is “person-focused and compassionate”;
- Is able to work “partnership with consumers, families and carers”;
- Can embrace and support “strengthened models of multidisciplinary care”;
- Has the “values and skills to provide consumer-focused, recovery-oriented and safe services in a collaborative, accountable and transparent way”;
- Can “work in a diverse range of settings” including online settings.<sup>1</sup>

These challenges are being addressed in like sectors, including family violence and disability services through co-designed approaches to support the growth, quality, and adaptations of the social service workforce.

Our work across a number of initiatives, including targeted and community embedded traineeships and higher level apprenticeships, has provided us with insights to barriers and enablers to workforce transformation in the social service sector.

### *Reaching Diverse Cohorts*

An example of an approach that could support professional development of the lived experience workforce is the community traineeship model. FSSI and has been supporting and evaluating VCOSS' community traineeship model which provides a wrap around support model to enable learners who may not usually succeed in education to succeed. This include case management and mentoring, combined with academic support, that is tailored towards identified cohorts of learners. This has resulted in improved completions and a more diverse and skilled workforce.

## Understanding the mental health workforce

A key to driving quality improvements in the mental health workforce is establishing an understanding of the broad mental health workforce, including size, demographics and qualifications. There is a need for a comprehensive data framework that encompasses the diversity of the mental health workforce. This is vital

<sup>1</sup>Mental Health Royal Commission Interim Report [https://s3.ap-southeast-2.amazonaws.com/hdp.au.prod.app.vic-rcvmhs.files/4215/8104/8017/Interim\\_Report\\_FINAL\\_.pdf](https://s3.ap-southeast-2.amazonaws.com/hdp.au.prod.app.vic-rcvmhs.files/4215/8104/8017/Interim_Report_FINAL_.pdf)

to identify the current and future capacity and to plan interventions. It is also necessary to identify and build diversity in the workforce at all levels.

There are a variety of workforce datasets that can be drawn upon as an example such as the national health workforce dataset and the Australian Teacher Workforce Data Strategy. These strategies were simpler in nature as they draw on datasets related to registered professions. More disparate workforces, including early childhood education, have been the subject of a census which provides good snapshot data but is limited in its utility given its one off occurrence.

The challenge of the mental health workforce is the multiplicity of professions and employers making it vital that a collaborative approach is used to identify the mental health workforce, data availability and gaps.

This needs to be cognisant of workforces that interface with mental health, including disability, education, corrections and aged care, and require a tiered approach to capability training. For example, FSSI's research into mental health in aged care settings found that 85% of aged care residents has mental health or behavioural symptoms, and that the personal care workforce and leadership in aged care needed mental health awareness and response training<sup>2</sup>.

Once the workforce is mapped, a workforce development strategy can be established to target key outcomes over a ten year timeframe.

## Barriers

FSSI's work across a range of social service sector employers reveals a number of barriers to upskilling, and opportunities drawn from current and past pilot activities.

A key enabler of a progressive, flexible and diverse workforce is timely, relevant professional learning to skill and upskill the workforce.

Key challenges raised by employers across the social services sector include:

- Limited capacity and capability in the sector to afford or support training and upskilling. For example the NDIS pricing model does not encompass professional training requirements
- Smaller services needing greater understanding, strategies and processes to support pathways to upskilling
- Costs to employer seen as too high for many, and resources to provide suitable supervision and mentoring are too stretched by existing client service requirements
- Off-job training time-release is regarded as unaffordable by many
- Diversity of views as to relevance and quality of remote learning
- Diversity of views as to fitness for purpose of existing training package-based qualifications. This has come into stark attention during COVID-19, highlighting the need for common, base level training around issues such as infection control.

These challenges are exacerbated by issues attracting, recruiting and retaining staff. The financially constrained circumstances in which the social sector operates, and practices such as competitive tendering, work against adoption of a collaborative approach.

<sup>2</sup> FSSI A knowledge review of Australian mental health related education and training research in residential aged care, Unpublished

## Opportunities

There are clear opportunities to respond to the challenges identified including:

- Combining recruitment and entry level training to co-create employment opportunities for cohorts of learners such as older workers, and younger workers
- Interest from employers in unbundling of qualifications to enable components that meet employer needs
- Opportunities to explore micro-credentials to rapidly respond to training needs, and accredit these to enable career progression
- Active interest in co-designing qualifications and participating in work integrated learning
- Opportunities for work integrated learning and graduate programs across employers
- Building understanding between training providers and workplaces, which may include embedding training providers in workplaces to lower opportunity costs of training, increase professional trust in training, and trainers' understanding of and capacity to adapt to workforce
- Providing a continuum of training to enable career progression – the Mental Health Royal Commission has identified training of people with lived experience as a key cohort
- Attracting cohorts of workers displaced due to COVID-19 that can be mapped into mental health workforce

## Transformation across all levels – opportunities for impact

FSSI has undertaken work at a variety of levels in the social sector industry, from entry level community traineeships to upskilling to developing an evidence base demonstrating the efficacy of different types of educational models, pathways and interventions.

Although there are multiple capability frameworks and career pathways, there is a need for a common core of understanding and common attributes across workforces. Common elements across community service workers identified include occupational health and safety, person centred care and human rights, management and supervision skills and feedback.

There is an opportunity to provide a common core of training across the mental health workforce to set common expectations and levels of understanding. This can be complemented with training at a variety of levels to enable capability uplift and support career pathways.

### *Designing a Common Core*

The NDIS Future Workforce Capability Project comprised the research and design of five new values-based curriculum areas for the Certificate III in Individual Support (Ageing and Disability), and four new RMIT microcredentials to assist with the training and professional development of sector workers. Victorian Council of Social Services (VCOSS) worked closely with industry representatives to identify priority areas for inclusion in the new curriculum

The five areas emerging were The Ethics of Care; Human Rights-led Practice; Power and Abuse; Working with Diversity and Enabling Technology.

The new training materials were developed via a co-design process which placed the people who access aged care and disability services at the centre of the design process to ensure that the new curriculum reflected their values and addressed their needs.

## Workforce transformation

FSSI is supporting workforce transformation across the community services sector. Our vantage point across the sector enables us to draw on and shape practice across different sectors, and to be cognisant of the flow on impacts of work in one sector across community services more broadly. We have provided key inputs to the community sector industry plan for government, inputting to this through both our academic work such as literature reviews and our insights working across the sector.

The work emerging in family violence has clear parallels with the mental health sector. The rollout of the family violence work includes improved recognition of the necessary breadth of the workforce to include other sectors such as education and health for example. This has flow on implications for training to ensure consistency of approach.

FSSI is skilled at developing, piloting and scaling models of workforce development across the community services sector, from entry level to leadership skills.

### *Building higher level leadership skills to drive workforce professionalisation*

FSSI's higher level apprenticeship model provides management and leadership skills to fill a gap in mid tier qualifications. Improved leadership capability drives improved management practices, and capacity to deliver quality outcomes, as well as to attract, upskill and retain staff. Key learnings include the desire of employers to co-design training, and the necessity of close relationships between training institutions and employers to build trust, understanding and relevance.

## Government's role in driving system level reforms

Governments have a key role in driving system level reforms through a range of levers:

- Procurement – aligning funding and policy drivers to support desired changes and reducing competition. Adopting a human rights based approaches to care, including checks and balances
- Regulation – driving quality improvement through mandating standards, such as minimum qualification levels
- Actively supporting and de-risking employment and training for targeted cohorts of learners  
Trialling Innovation – piloting new models of training product co-creation to meet sector need, and advocating for system reform to remove barriers to adaptive education. Incentivise co-design, voice of people with lived experience at the table
- Evaluating outcomes, and identifying and addressing emerging barriers to scale up
- Sector co-ordination – supporting the sector to meet, identify and address emerging needs.
- Co-ordination across government to address common community sector goals

### *Regulatory drivers of sector transformation in other sectors – early childhood education*

The early childhood education and care has transformed over the past decade in large part due to the introduction of the National Quality Framework. This has driven the upskilling of the sector from one with a large reliance on unskilled staff, to one where most staff are trained at Certificate III level, with an increasing number of diploma and bachelor qualified staff. This upskilling has driven consistent quality improvements across the sector. Recruitment, attraction and retention remain challenges in part due to pay and conditions, and absence of a long term, funded workforce development strategy.