

MENTAL WELLBEING PLAN

APRIL 2020 – OCTOBER 2021



MINDFUL
MARGARET RIVER

Augusta Margaret River Mental Health Alliance

Version 6 – June 2021

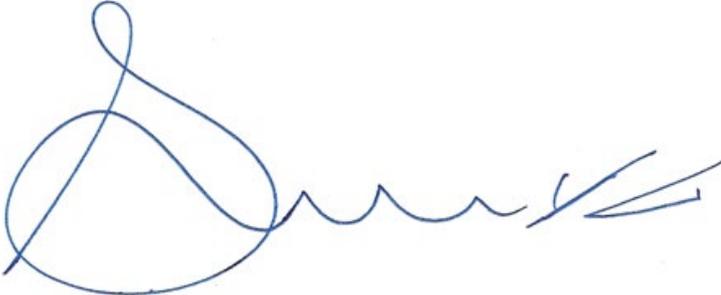
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Mindful Margaret River
(Augusta Margaret River Mental Health Alliance)
Margaret River

ENDORSED BY

A handwritten signature in blue ink, appearing to read 'Stuart Hicks', with a stylized flourish at the end.

**STUART HICKS
CHAIRMAN, MINDFUL MARGARET RIVER**

PURPOSE

The Mindful Margaret River Mental Wellbeing Plan (MMRMWP) seeks to build resilience and improve wellbeing within the community by:

- Actively supporting partnerships between community and service providers to identify and address local issues.
- Provide a means to coordinate, implement and evaluate an evidence-based, whole of community approach in a timely and appropriate manner.

OVERVIEW

The Augusta Margaret River Mental Health Alliance and Mindful Margaret River (MMR) was formed in response to multiple studies completed over 2018-19, which have carefully examined what is needed in our community to improve the overall mental health and wellbeing of our community members.

This project focuses on four (4) priority areas: building access, knowledge, services and collaboration across mental health services in the Augusta Margaret River community. The Alliance brings together 14 people representing key government agencies and community members to work in partnership to take local action. The roles within this project include:

- *MMR Alliance Board*
The Alliance Board is comprised of 14 people who govern the project, making the key decisions and driving collaboration between government agencies and community.
- *MMR Team Captains*
There are four (4) team captains are Alliance Board members who volunteer their time to coordinate action across the MMR volunteer taskforce and within each priority area.
- *MMR Volunteer Taskforce*
The MMR volunteer taskforce is comprised of around 35 community representatives from a broad range of different backgrounds who are able to bring different perspectives to the group. These members are responsible for implementing the actions outlined in this plan and for promoting the plan within the community. Importantly, they are there to engage directly with community members, to be a known leader within the community, to assist people to make connections and to lend a helping hand where they can.
- *MMR Project Officer*
The project requires 1 employed Project Officer (1 FTE), in order to ensure consistency and project support across the four volunteer teams. This person will provide a much needed coordination point for ongoing implementation and monitoring of progress against this plan, as well as providing a central point for public communications, logistics and volunteer coordination.

How this group was formed

MMR formed following two mental health reports on the Augusta Margaret River community, which were delivered in 2018-19. These reports offered a range of recommendations across community activity and health services in the area. An interim group lead a process in September 2019 to call for expressions of interest from community members, to form a group to lead action on mental wellbeing. This was advertised in the local newspaper, through a media release and through communications to various community and health network groups. The process to date has been inclusive of all, focused on action and collaboration. While MMR are not yet an incorporated group, there has been consistent support from various non-for-profits, incorporated community groups and government agencies to ensure this work continues.

How this plan was developed

This plan has been carefully developed through the MMR Alliance Board and AMR Volunteer Taskforce, with the help of staff from the Mental Health Commission and St John of God Community Alcohol and Drug Service. This has included analysis of several consultation documents and reports and one regional planning workshop involving all stakeholders on 13 February 2020. This has provided the context for the MMRMWP and are central to this plan if reviewed in the future. These documents include:

- Mental Health and Wellbeing in the Shire of Margaret River Final Report, Centre for Rural and Remote Mental Health (2019)
- State Public Health Plan for Western Australia, Objectives and Policy Priorities for 2019-2024
- Health and Community Services Access and Mapping Project Final Report, GP Down South and WAPHA (28 June 2019)
- Survey Results Augusta Margaret River Shire, Youth, services and the region, LAMP (2019)
- AMR Shire Draft Public Health Plan 2019-2023.

These are available at the Mindful Margaret River website, <https://yoursay.amrshire.wa.gov.au/communityalliance> or the Mental Health Commission Prevention Branch - Community Support and Development Programs communityprograms@mhc.wa.gov.au.

LINKS TO EXISTING STRATEGIES

This plan acknowledges the existing strategic framework of:

National Strategies:

- National Drug Strategy 2017-2026
- National Alcohol Strategy 2019-2028
- The 5th National Mental Health and Suicide Prevention Plan

State Strategies:

- The Western Australian Alcohol and Drug Interagency Strategy 2018-2022
- Mental Health, Alcohol and Other Drug Services Plan 2015 – 2025 (the Plan)
- Mental Health Promotion, Mental Illness and Alcohol and Other Drug Prevention Plan 2018-2025
- WA Suicide Prevention Strategy 2020: Together we can save Lives

WORKING DOCUMENT

The MMRMWP is an 18-month plan. However, there may be cases where strategy and key priority areas will adopt some variation according to emerging trends in the community. The plan will be reviewed in 18 months' time (October 2021) to ensure progression of the assigned strategies.

CURRENT ENVIRONMENT

It is acknowledged that this plan was developed shortly prior to the COVID-19 pandemic. The COVID-19 outbreak and its flow-on effects are generating a range of impacts on the mental health and wellbeing of individuals and communities, including those who experience quarantine or self-isolation. To support the community during this period, Mindful Margaret River is aware that its approach will need to be agile and innovative. This means that the detail within this plan may adjust as priorities arise and evolve. Throughout the plan, we have also aimed to identify the actions that are of greater priority in this new context as well as actions that may need to be deferred to best support our health industry.

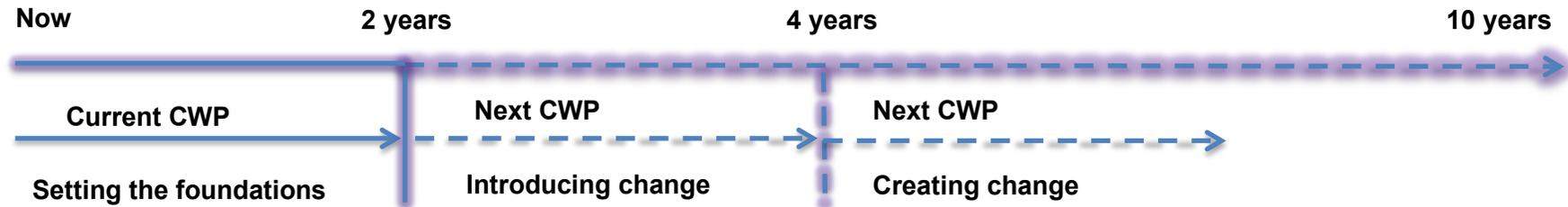
PLANNING CHECKLIST

(refer Appendix 1)

Steps	Task	Date	Done
1. Create management group	<ul style="list-style-type: none"> Identify management group members. 	May 2019	√
	<ul style="list-style-type: none"> Call first meeting to establish purpose and structure, including terms of reference, meeting structures, meeting schedules, reporting pathways, etc. 	May 2019	√
2. Identify local needs	<ul style="list-style-type: none"> Review existing information and research in relation to Mental Health and Alcohol and Other Drug related issues in the area. Conduct community/key stakeholder consultation around issues (if no existing information or research found). 	June to August 2019	√
	<ul style="list-style-type: none"> Confirm research/consultation findings with key stakeholders and the management group. 	September to November 2019	√
3. Prioritise issues for action	<ul style="list-style-type: none"> With management group, prioritise the top two or three issues for action. 	December 2019	√
	<ul style="list-style-type: none"> Work through each priority using the '<i>mapping tool</i>' refine priorities by identifying target groups, community impact, contributing factors, etc. 	January 2019	√
4. Develop actions and implement plan	<ul style="list-style-type: none"> With management group agree on a broad range of actions to address each priority. 	13 February 2020	√
	<ul style="list-style-type: none"> Complete a CWP template for each priority issue which includes – actions, timeline, resources and evaluation. 	27 February 2020 (draft)	√
	<ul style="list-style-type: none"> Each team, in conjunction with their Team Captain to implement strategies and regularly report on progress to the Alliance Board and Chair 	Ongoing	
	<ul style="list-style-type: none"> Source funding to employ a Project Officer who can support the volunteers and ensure quality of work 	May 2021	√

PRIORITY AREAS

1. **Mental Wellbeing and Self Care**
2. **Mental Health Services and Supports**
3. **Access to Mental Health Services**
4. **Mental Health Service Collaboration**



Priority 1: **Mental Wellbeing and Self Care (next 18 months)**

- Community has increased awareness and understanding of mental health wellbeing and resilience through the provision of education and training to professionals and the broader community.
- Improved engagement and relationships between all members of the community to reduce isolation and increase inclusiveness.
- Increase mental health resilience within vulnerable groups in the Augusta Margaret River Shire.

Priority 2: **Mental Health Services and Support (next 18 months)**

- Strengthen and increase Community and Social Support Services in the Augusta Margaret River Shire.

Priority 3: **Access to Mental Health Services (next 18 months)**

- Increased awareness and knowledge of Mental Health and Alcohol and Other Drug Services (place based, outreach, phone and online) including how to access them.

Priority 4: **Mental Health Service Collaboration (next 18 months)**

- Improved coordination and collaboration between existing networks and stakeholders to allow better support to the community.

COMMUNICATIONS PLAN

The below table outlines a brief summary of the communications support that will be provided to the four teams in an attempt to ensure a consistent and professional approach for Mindful Margaret River initiatives. This is currently generously led by one (1) volunteer taskforce member, *until a MMR Project Officer is able to be employed*. Work includes coordinating communications across the four volunteer teams, administrating and disseminating useful resources, and leading promotions and initiatives associated with the short-term outcomes articulated in this plan.

TASK	LEAD	TASK DESCRIPTION	ACTION	PROGRAM DATES
1. To build and maintain an effective and practical set of communication platforms for Mindful Margaret River	Taskforce member #32	Website/Logo/Social Media: - Launch MMR website & Facebook page - To create a better Member Booklet PDF and re-upload to the Shire website - Exploration of other media i.e. radio, mobile app	All teams will contribute to information provision through a designated team member to be collated and sent for consideration for inclusion in MMR website and Facebook page.	March/ April 2020 – <u>Update</u> ongoing with PIO in place
2. Continue to manage technological platforms and provide administrative updates.	Taskforce member #32	Present a visible, valued, coordinated face for MMR in the community—so that people know we exist, know what we do, and can find a portal to communicate with us.	Disseminate the relevant Mental Health information forwarded by appointed team members.	April 2020 till May 2021
3. To oversee the totality of our communications and provide expert advice or suggestions to members of Mindful Margaret River	Taskforce member #32	Provide guidance on professional and effective communication methods.	Liaise with each of the Team Captains to support the mechanics and consistency of Mindful Margaret River communications.	April 2020 till May 2021

Priority 1: MENTAL WELLBEING AND SELF-CARE

Responsibility of Team 1 Team Captain: Di Ritson Number of taskforce volunteers: 10 Aim: Individuals, families and vulnerable groups are well equipped to sustain their mental health and wellbeing.			
Description: Being mentally healthy and living well is important to every one of us – whether we are living with a mental illness or not. It’s about enjoying life and fulfilling our potential. It’s having the ability to cope with stresses and sadness, building and maintaining resilience without resort to unhealthy and dangerous resources, and it’s about being connected to friends, family, community and culture. Mental health and wellbeing is important to individuals, families, schools, workplaces and communities. There is a role for everyone to play.			
SHORT-TERM OUTCOME/S (next 18 months)	KEY PERFORMANCE INDICATOR	COLLECTION TOOL	COLLECTED BY
Community has increased awareness and understanding of mental health wellbeing and resilience through the provision of education and training to professionals and the broader community	Demonstrated increase in knowledge of signs and symptoms	Training feedback/evaluation forms	Organisations facilitating training
	Provision of training for professionals and community	Number of training/sessions delivered	Organisations facilitating training
	Number of people registered to Virtual Group Coaching Program	Registration	Real Wisdom Facilitator
	Demonstrated increase in resilience of Virtual Group Coaching attendees.	The CD-RISC Resilience Scale	Real Wisdom Facilitator
	Increased awareness of mental health supports	Training feedback/evaluation forms	Organisations facilitating training
		Number of posters distributed	Aaron Milward
	Demonstrated increase in use of the Website	Number of people accessing website.	Website data collection tool.
Improved engagement and relationships between community groups in the Shire to reduce isolation and increase inclusiveness	Dissemination of relevant information.	Number of posts on website and social media from collaborative agencies.	Website and Facebook data collection tool.

	Number of people attending events	Attendance Registers	Event Organiser
	Number of groups applying for Shire Grants through partnerships/collaboration	Shire Grants Register	Shire
Increase mental health resilience within vulnerable groups in the Augusta Margaret River Shire	Number of events/activities being held	Feedback/evaluation forms Registration Schedule	Event Organiser

Short-term Outcome 1.1: Community has increased awareness and understanding of mental health wellbeing and resilience through the provision of information and training to professionals and the broader community.

TASK		LEAD	RESOURCES	TASK DESCRIPTION	ACTION	PROGRAM DATES
1.1.1	Disseminate mental health and wellbeing information to the community.	Taskforce member #55	Taskforce member #35, Taskforce member #32, Taskforce member #63 Volunteers, Suicide Prevention Coordinator, Website URL, Facebook https://www.facebook.com/mindfulmargaretriver Taskforce	Use the online platforms to disseminate relevant information utilising the “7 doors” framework. This includes but not restricted to supports and information related to and to include for consideration: Covid 19 information (evidence based and approved) Mental Health and Wellbeing. Alcohol and Other Drug. Family and Domestic Violence, Homelessness, Financial Stress, Education at home, Tips in isolation and other relevant information	Develop a process to approve material to be placed on the Website and Facebook pages. Measure numbers reached through collaborative liaison with local organisations	April 30 2020 and ongoing. Update Collated information provided to PIO May 2021 for review and development with web designer. Launch expected August 2021. Linked to Team 1 in Action Plan 2021.

1.1.2	Development and Distribution of “Navigating COVID- 19 – Staying Mentally Healthy” Posters	Taskforce member #43 Taskforce member #64	Taskforce member #35 Taskforce member #55 Taskforce member #45 Hard copy in locations around the towns in the AMR Shire – and beyond in the SW. Digital copies available for e distribution. Funding consideration is for development and printing of posters.	Posters are developed in phases from emergency to recovery and include a new poster about every 2 weeks with a new message that captures where people are at and delivers supportive messages about how to stay mentally healthy.	Posters will be placed in locations not limited to Shopping centres, Post office, Hospitals, Agencies, Organisations, Doctor surgeries and various community centres.	April 2020 to <u>Update</u> Discontinued action
1.1.3	Develop and provide virtual resilience and mental wellness training and coaching to people in the Augusta Margaret River region. Beneficiaries to include community members and groups (e.g. parents) and professional	Taskforce member #34	Virtual Group Coaching Program to build personal resilience. Each program consists of 6 x weekly 90 minute virtual professionally designed and facilitated group coaching sessions. This requires sourcing and securing of funding to deliver.	Real Wisdom develops and facilitates virtual group resilience training and coaching programs, in response to community and professional demand, coordinated through Mindful Margaret River, Shire of AMR and/or appropriate professional references, or through direct community requests. In terms of COVID-19 emergency dynamics, delivery is within 1 week notice periods or less, and scalable in terms of number of programs and facilitators, within professional limitations. Outcomes are measured using the most commonly used, and Australia- and disaster-validated CD-RISC (-10) (resilience scale).	Torsten Henschel, and Mindful Margaret River Leadership to discuss	From April 2020, within COVID--19 community challenge and recovery period The program can be delivered long-term as successful and required <u>Update</u> Community requesting particular private consultancy work can be supported to identify funding

	groups (e.g. frontline COVID--19 staff, educators, business or community leaders etc.)					through PIO external to MMR as requested. Linked to Team 3 in Action Plan 2021.
1.1.4	Audit available non face to face suicide prevention, mental health and alcohol and other drug training available during COVID- 19 isolation and social distancing to people in the Augusta Margaret River region	Suicide Prevention Coordinator Alcohol and Other Drug Prevention officer Mental Health Commission	Taskforce member #1, Existing evidence informed and safe training available. Taskforce members to contribute to building the knowledge base. Website, email, stakeholder groups and AMR Shire	Information collated from state-wide available non face to face training in suicide prevention, mental health and alcohol and other drugs. Build a resource list of links or information to offer targeted training opportunities to specific and targeted groups (e.g. professionals and community).	Relevant information will be distributed and made available to the targeted audience via the appropriate platform. Website, email, stakeholder groups and AMR Shire.	By mid April 2020. <u>Update</u> Training information provided through SJOG. Training has continued face to face in the south west, linked to Team 2 in Action Plan 2021.
1.1.5	Develop and circulate an awareness raising Public	Suicide Prevention Coordinator Alcohol and Other Drug	Taskforce member #1, and Taskforce member #55	Utilise appropriate National and State Campaign Resources (i.e. Think Mental Health, Act Belong Commit, RU OK?, Alcohol Think Again, Drug Aware)		Development of Public Information Plan completed by

	Information Plan that focuses both on Mental Health & Wellbeing and Alcohol and Other Drug related information that is relevant to the Augusta Margaret River Community	Prevention Officer Mental Health Commission	Distribution via Website, social media, posters and other campaign related media.	(incorporate resources such as Beyond Blue, Lifeline, Gambling resources).		May 2020 and ongoing. Update Communication strategy and collaborative approach to public awareness raising ongoing. Linked to Team 1 and Team 4 in Action Plan 2021.
		Roses in the Ocean. Suicide Prevention Margaret River (SPMR)	Encourage stories of people with a lived experience Utilise a variety of methods including online, print media, radio and community notice areas for distribution of information	Provide linkage to Roses in the Ocean on MMR website.	Ongoing <u>Update</u> Ongoing stories of lived experience and local content supported through AMR Mail and MMR partnership, fortnightly. Linked to	

						Team 1 in Action Plan 2021.
1.1.6	Source funding to provide access to relevant training in suicide prevention and mental health and wellbeing and ensure that is promoted to the specific target groups.	Suicide Prevention Coordinators	Taskforce member #1, Suicide Prevention Coordinators South West Trainer Register. Funding application to shire or others for reduced cost or supported places. Margaret River Education Campus	Provide access to three Mental Health First Aid workshops (Standard, Youth or Aboriginal) to the broader community of Augusta Margaret River Shire. https://mhfa.com.au/ This training is targeted at the general community over 15 years of age. Youth Mental Health First Aid is mandated training to certain staff working within schools.	Mindful Margaret River Leadership	Spread over the 18 months. June Dec 2020 and March 2021. <u>Update</u> Focus for Action Plan 2021 under Team 3 and Team 7
		Suicide Prevention Coordinator	Taskforce member #1, Suicide Prevention Coordinators project will contribute training materials in kind. Shire (venue, catering) Margaret River Education Campus (Venue)	Deliver 3 safeTALK (suicide alertness for everyone training workshops) to the broader community. http://www.livingworks.com.au/programs/safetalk/ This training is targeted at the general community over 15 years of age.	Mindful Margaret River Leadership	Spread over the 18 months. From Nov 2020 <u>Update</u> Focus for Action Plan 2021 under Team 3 and Team 7
		Suicide Prevention Coordinators	Taskforce member #1, Suicide Prevention Coordinators South West Trainer Register. Funding application to shire or others for reduced cost or	Deliver 1 x LivingWorks ASIST training workshop http://www.livingworks.com.au/programs/asist/ This training is targeted at the general community over 15 years of age.	Mindful Margaret River Leadership	October 2020 <u>Update</u> Focus for Action Plan 2021 under

			free for supported venue and catering. Margaret River Education Campus (venue) Shire (venue, catering) LivingWorks ASIST 2 day - Applied Suicide Intervention Skills Training.			Team 3 and Team 7
		Suicide Prevention Coordinators	Taskforce member #1, Suicide Prevention Training Calendar. Department of Education Lead School Psychologists, WA Country Health Service, Dr Peter Durey, GP Down South This training is provided free of charge in MOU with trainer support agencies. Catering and Venue may be funding consideration.	Provide registration information to professionals and paraprofessionals who come into contact with those at risk of suicide in Augusta Margaret River for this year's scheduled 2 day Gatekeeper training dates in the SW. This is mandated training for certain sectors and targeted to professionals.		Current scheduled dates 17th 18th June, 8th 9th Sept, 3rd 4th Dec Face to face delivery is in accordance with the current COVID- 19 meeting requirements. Update Promoted through MMR to members and local community. Ongoing in

						Action Plan 2021 under Team 3
		Suicide Prevention Coordinator	Taskforce member #4, SPMR, Cross Fit MR, Taskforce member #8, Regional Men's Health Initiative These sessions are funded by the Mental Health Commission of WA and are usually free of charge. Consideration of Venue and Catering costs.	Engage Regional Men's Health Initiative to deliver 2 sessions (to be defined and discussed) examples at: https://regionalmenshealth.org.au/ within the Augusta Margaret River Shire – at least one session to be held outside of the town centre. Proposed Augusta and Scott River		<u>Update</u> Priority area under Action Plan 2021 under Team 8.

Short-term Outcome 1.2: Improved engagement and relationships between members of the community to reduce isolation and increase inclusiveness

TASK		LEAD	RESOURCES	TASK DESCRIPTION	ACTION	PROGRAM DATES
1.2.1	Within virtual resilience Group training and coaching Program (1.1.3), facilitate Strong relationship and	Taskforce member #34	Refer 1.1.3, no additional resources necessary. Requires paid Zoom accounts.	As part of Real Wisdom's virtual group resilience training and coaching programs, facilitators will specifically introduce a challenge for each participant to facilitate their own virtual conversations within their personal or professional communities, based on building resilience and support	Refer 1.1.3 It is intended and anticipated that deep virtual community conversations will be seeds for a mindset shift in the Mindful Margaret River spheres of influence, towards building community solidarity, spirit, increased connections and community	April 2020 <u>Update</u> Not started due to funding requirements of 1.1.3

	community of practice amongst participants. Challenge each participant to 'pay it forward', by facilitating similar resilience conversations within their individual networks and social circles				resilience, well beyond the current COVID--19 emergencies, supporting both a recovery period, and long-term sustainability, mindfulness and resilience	
1.2.2	Support good mental health practices through existing or new membership linkages and participation group, including: social networking, volunteerism,	Taskforce member #15	AMR Shire Men's Shed Sport and Recreation group.	Work with Men's Shed to integrate with Sport and Rec	AMR Shire to Initiate conversations with and between key sporting and community groups that the shire would then follow up to get progress reports covering areas such as: identifying what contacts have/are being made, what initiatives have/are being developed and how different groups are collaborating in the Mental Health and Wellbeing space.	April 2020 to April 2021 Update AMR Shire Sport and Rec committee engaging with A Stitch in Time as kick off of mental health conversations July 2021.
		AMR Shire	SPMR Zero to Hero	Encourage participation in Youth Development Programs (i.e. Zero to Hero)		

sports clubs and Men's sheds	Taskforce member #32	Identify Intergenerational activities that will increase intergenerational connections		Team 5 in Action Plan 2021.
	Taskforce member #30	Organise a community wide social event during Harmony Week		Harmony Week March 2020. Update Cancelled due to COVID restrictions
	AOD officer SW CADS	Organise and hold social events (to include the inclusion of alcohol-free events) each calendar year that focus on bringing the farming and town community together		TBC and in accordance with the current COVID- 19 meeting requirements Update Focus shift to supporting existing groups to have conversations around mental health and identify ways to support. Action Plan

						2021, Team 2, Team 8 and Team 10.
			Taskforce member #55 and Taskforce member #1 AMR Shire officer.	Utilise the Shire Community Events Calendar/Facebook page to disseminate MMR relevant event information. E.g. Harmony, MR Show stand.		TBC and in accordance with the current COVID- 19 meeting requirements <u>Update</u> Through Facebook (June 2021) and new web (launch August 2021) promotion and linking of community to local events and ways to connect.
			Taskforce member #55 to liaise with Shire and Taskforce member #15	Investigate whether a Augusta Margaret River welcome pack is in existence, if not advocate and contribute to a welcome pack that can be provided to new members of the community through the relevant real-estate agents in the region		May 2020 <u>Update</u> Hello Margaret River was provided through the

						Shire to residents as requested, now found in Rotary Directory.
		Alcohol and other Drug Prevention Officer SW CADS	Goodsports Taskforce member #15 Taskforce member #55	Engage and liaise with the South West Good Sports (GS) representative and invite to a meeting to discuss the program. They deliver sessions to clubs and groups regarding evidence based strategies to reduce alcohol related harm in sporting clubs (Responsible Service Alcohol, licencing requirements, standard drinks, posters etc.)		TBC and in accordance with the current COVID- 19 meeting requirements <u>Update</u> Same as Task 1.2.2 AMR Shire Sport and Rec committee engaging with A Stitch in Time as kick off of mental health conversations July 2021. Team 5 in Action Plan 2021.

TASK	LEAD	RESOURCES	TASK DESCRIPTION	ACTION	PROGRAM DATES	
Short-term Outcome 1.3: Increase mental health resilience within vulnerable groups in the Augusta Margaret River Shire.						
1.3.1	Support the development of an Ecological Restoration project to improve resilience, self confidence and connectedness	Taskforce member #35	Taskforce member #1, Stuart Hicks Taskforce member #47, Taskforce member #34 Nature Conservation Transition MR Gondwana Link Lishman Health Foundation. Eco Health Network AMR Shire Seek funding opportunity through Lotterywest	Work with young people and Nature Conservation to develop a pilot programme to engage young people in the evidenced therapeutic action to increase mental health and wellbeing by becoming involved in ecological restoration.	Engage with local schools, cultural and Aboriginal groups	Dec 2020 to April 2021 Update The Eco Health project is up and running. Followed on in Action Plan 2021 Team 6.
1.3.2	Explore opportunities to support first responders and increase resilience particularly after traumatic events	Taskforce member #34		Police, Fire and Emergency Workers		May 2020 and ongoing Update Not started

1.3.3	Explore opportunity for the program Waves for Change	Taskforce member #62	Taskforce member #55	Engage a Surfing Mentor to work with MMR to implement the program Waves for Change https://www.waves-for-change.org/about-waves-for-change/ to Margaret River.	Investigate the resources required to implement the program and engage a surfing mentor.	Dec 2020 to April 2021 <u>Update</u> Not started
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Priority 2: MENTAL HEALTH SERVICES AND SUPPORTS

Responsibility of Team 2 Team Captain: Erin Statz Number of taskforce volunteers: 10 Aim: To ensure a comprehensive range of appropriate mental health services and supports is available in the Shire.						
This priority area was developed through the consultation process and the various reports that were conducted in the Augusta Margaret River Shire. The key focus of this priority area is to bring key Mental Health and Alcohol and Other Drug Services into the shire. Currently there are a number of Drive in/Drive Out Services available, or services in neighbouring towns such as Busselton, which does delay people being able to seek treatment due to these service barriers, lack of transport to attend services out of town and some services not being available in the region at all, such as accommodation for people experiencing homelessness, domestic violence crisis accommodation and support services, culturally and linguistically diverse specific services and access to palliative care.						
SHORT-TERM OUTCOME/S (next 18 months)			KEY PERFORMANCE INDICATOR			
Strengthen and Increase Community and Social Support Services (personalised support, peer support, family support, flexible respite, individual advocacy services, Alcohol and Other Drug programs, initiatives to promote good health and wellbeing) in Augusta Margaret River Shire.			Increase in the number of local support services available			
Short-term Outcome 2: Strengthen and Increase Community and Social Support Services in Augusta Margaret River Shire						
TASK		TASK DESCRIPTION	RESOURCES	TEAM MEMBER WITH KEY RESPONSIBILITY	ACTION	Planned completion DATE
2.1	Preliminary Identify Current Services and Gaps	2.2.1 Review current list of services from database.	Health and Community Services Access and Mapping Project Final Report (GP Down South), My Community Directory	Taskforce member #58	PART 1 - Obtain database from Team 4, review current services list and check for gaps in services (TASK 4.3).	September 2020
				Taskforce member #29		
				Taskforce member #58	PART 2 - Provide feedback on services that are not included,	October 2020

			Team 4 – Currently building a database of all services in the local area, due back by the end of July 2020.	Taskforce member #29	Record gaps in services on the database	Update Not completed, picked up in Action Plan 2021 in Team 9
				Taskforce member #58 Taskforce member #29	PART 3 – Provide feedback to MMR feedback to the MMR Alliance	November 2020 Update Not completed, picked up in Action Plan 2021 in Team 9
2.2	Identify current local programs/initiatives (Alcohol and Other Drug or Mental Health) being delivered and where there are gaps	2.2.1 Undertake and audit/review of the current social supports and Mental Health or Alcohol and Other Drug programs being delivered in Sporting Clubs and identify clubs or committees that may benefit from these social supports (i.e. Tomorrow Man)	Shire’s sport and recreation committee and community resources. List of suitable Programs that support Mental Health in clubs. AOD Prevention Officer James Shepherd	Taskforce member #61	PART 1 - Develop a list of local sporting and social clubs.	August 2020 Update Same as Task 1.2.2 AMR Shire Sport and Rec committee engaging with A Stitch in Time as kick off of mental health conversations July 2021.

						Team 5 in Action Plan 2021.
				Taskforce member #61	PART 2 – Request information on who are open to engaging in MH/AOD/Social Emotional Programs and who would like support to access programs.	30 September 2020 <u>Update</u> Same as Task 1.2.2 AMR Shire Sport and Rec committee engaging with A Stitch in Time as kick off of mental health conversations July 2021. Team 5 in Action Plan 2021.

				Taskforce member #61	PART 3 – Link to Team 1 who support clubs and possible opportunities to add a wellbeing plan to their group (TASK 1.2.2)	PART 3 – ASAP after PART 2 <u>Update</u> Same as Task 1.2.2 AMR Shire Sport and Rec committee engaging with A Stitch in Time as kick off of mental health conversations July 2021. Team 5 in Action Plan 2021.
2.3	Identify existing community supports – networks (non clinical) and gaps	2.3.1 Collate a list of resources and networks who can be called on to support those in need or to link them into community	Existing local resources groups and networks. Rotary Club group listings. Strong volunteerism in the Shire. Facebook community notice boards, existing help groups and supports.	Taskforce member #9 Taskforce member #46	Part 1 - Collate a list of existing groups – networks.	August 2020 <u>Update</u> Completed, information incorporated into Action Plan 2021 in Team 1, Team

2.4	Face to Face Personal Services/Supports	2.4.1 Clarify, promote and sustain Local Community Coordinator position in the Shire, identifying any gaps in the current role.	Survey provided to Community by LCC program. Letter of support from MMR as needed. Media promotion as needed.	Taskforce member #50	Advocacy and attempt to secure funding targeted at emerging gaps due to COVID- 19	30 May 2020 Update Advocacy to Department of Communities and media campaign to raise awareness about the loss of the LCC role in community. Completed 2021

		2.4.2 Using the Team 4 database, identify any services without secure funding such as Just Home, LCC, Financial Counselling etc		Taskforce member #58 TBD – Taskforce member #30, future email related to grants, best way forward	PART 1 – Using Team 4 database, Identify any services in the local area with insecure funding arrangements (TASK 4.3).	September 2020 Update Not started
		2.4.3 Identify CALD services in the Shire	Intercultural Action Group – Taskforce member #32	Taskforce member #32	PART 1 – Using Team 4 database, identify any services that support CALD (TASK 4.3)	30 May 2020 Update Completed as part of the Blue Pages in 2020, available online in web update August 2021.

Priority 3: ACCESS TO MENTAL HEALTH SERVICES

Responsibility of Team 3

Team: Erin Statz

Number of taskforce volunteers: 10

Aim: Individuals, families and vulnerable groups are clear about where to turn, how and when to seek help on issues affecting mental health. COVID-19 priority actions are marked in blue.

There are major and multiple barriers to accessing Mental Health and Alcohol and Other Drug services within the Augusta Margaret River region. Lack of available services, lack of out of hours services, lack of choice in services and transport barriers were common themes within the consultations that were undertaken. Barriers to accessing services in Augusta Margaret River were attributed to community attitudes and understanding about mental health and Alcohol and Other Drug needs, how to access support and knowing what supports are available.

SHORT-TERM OUTCOME/S (next 18 months)	KEY PERFORMANCE INDICATOR	COLLECTION TOOL	COLLECTED BY
Increased awareness and knowledge of Mental Health and Alcohol and Other Drug services, including how to access them.	Increase in the number of people aware of appropriate local services/agencies	Community Perception Survey (pre-post comparison)	Mental Health Commission / Whole of Alliance
	Increase in the methods used to disseminate service and access information to the community	Comprehensive list of all services Quantitative evaluation of communication plan	Mental Health Commission / Whole of Alliance

Short-term Outcome 3: Increased awareness and knowledge of Mental Health and Alcohol and Other Drug services, including how to access them

TASK	TASK DESCRIPTION	RESOURCES	TEAM MEMBER WITH KEY RESPONSIBILITY	ACTION	PROGRESS RECORDED	
3.1	Preliminary Identify and agree on the key audiences and identify a champion within each audience to disseminate the information:	In order to target Mental Health messaging identifying the audiences and contact to disseminate the information	Identified populations through reports linked with MMR	All members	Team members are responsible for audience contacts. Any new identified audiences will allocated a champion. Intermittent contact with identified groups as needed for MMR projects and tasks.	Completed (ongoing) Update Will change with membership over time, Action Plan 2021 has groups requiring champions.
3.2	Preliminary Develop reassuring and readable guidance for the audiences on what services and supports are available, including when and how to access them	3.2.1 Develop a plan to disseminate information from MMR to wider community.	Curtin University	Taskforce member #5 and Taskforce member #3 with input from Team leaders and incorporating 3.1	Curtin University workshop to best to disseminate local specific information on mental health and wellbeing including support/advice around branding and messaging.	Preliminary plan August 2020 Update Completed in workshop December 2020, linked to Action Plan 2021 Team 4
		3.2.2 Explore options for those that do not have physical access to services. What opportunities has telehealth presented us?	Members of our team with clinical experience in implementing telehealth	Taskforce member #19, support from Taskforce member #28 and Taskforce member #38	PART 1 – Lay terms short summary of what is telehealth	September 2020 Update

					Completed 2020, linked to Action Plan 2021 Team 1 and Team 8
				Taskforce member #28 Taskforce member #38	PART 2 - Using the database from Team 4, drilling down to outreach locations, assistance to attend, alternative meeting arrangements (TASK 4.3). October 2020 <u>Update</u> Information collated in Blue Pages, provided to GPs and available on website update August 2021.
				Taskforce member #28 Taskforce member #38	PART 3 – Provide information to Team 1 for website; for Facebook and to Alliance October 2020 COMPLETED
		3.2.3 Explore existing Mental Health Digital Hubs.	Existing platforms: My Community Directory WA Health Pathways MMR website SWHPN	Existing list provided	PART 1 – Completed, can be added to at any time July 2020 COMPLETED
				Taskforce member #4	PART 2 – Using existing database from Team 4, September 2020

					contact any services and encourage service providers to be on existing platforms (TASK 4.3)	COMPLETED
				Taskforce member #4 MMR MCD– Led by Taskforce member #23 Charity Coffman. Provide feedback on MCD: Taskforce member #30 Taskforce member #4 Taskforce member #16	PART 3 – Provide information back to MMR Alliance Provide feedback to MCD.	Update MCD feedback put on hold
		3.2.4 Review and update existing flow chart and A4 Flyer for Mental Health and Alcohol and Other Drugs from the GP Down South Report	Existing Mapping project completed by WAPHA	Erin Statz	Updated and provided appropriate places	March 2020 COMPLETED
		3.2. Contact Health Professionals Network in South West with MMR	South West Health Professionals Networks	Erin Statz	Provide information to Sally regarding MMR and make appropriate introductions	April 2020 COMPLETED
3.3	Preliminary Disseminate existing local	3.3.1 Waiting rooms, public and private community spaces, other places where community gather.	Curtin University in 3.2.1	PART 1 – Taskforce member #3 Taskforce member #5 With Erin Statz	PART 1 - Team 1 has collated information for the website with information. Need to ensure information and	August 2020 COMPLETED

mental health and wellbeing supports to the following dissemination channels:		Team 1 – Information gathered for website to be provided		participation from team leaders for Curtin workshop in August.	Update Web update August 2021, linked to Action Plan 2021 under Team 1.
		Links into other strategies, group work on TRELLO	PART 2 -	PART 2 – compile a list of waiting rooms, public/private community spaces or gathering spaces where information can be provided/placed	September 2020 COMPLETED Update Linked to Action Plan 2021 Team 1 & Team 8
			PART 3 – Taskforce member #11, Taskforce member #28 and engagement with YAC	PART 3 - physically distribute information identified as community space PART 3 – physically distribute information identified as community space	Pending other tasks Update As needed with Action Plan 2021
	3.3.2 Bulletin/public notice board audit - compile list of all bulletin boards in area.	Shire, local knowledge of team members.	Taskforce member #4	Compile a list of known existing public bulletin/notice boards.	August 2020 Update Completed 2020, to be used by Team 8 &

					Team 9, Action Plan 2021
	3.3.3 Annual Shire rates notice as a means of communicating to broad audience	Strong relationship with AMR Shire	AMR Shire	UNKNOWN	July 2020 Update Pending, Team 1 in Action Plan 2021
	3.3.4 Online platforms and Facebook – Where our materials end up (telehealth, flyers, physical access, etc.)	Taskforce member #32 for website and Facebook.	Taskforce member #3 Miriam Avery as conduit for information from our groups.	Provide relevant information about accessing community supports to Miriam as they become available/completed. Such as 3.2.3; 3.4.1	April 2020 Update Ongoing, Team 1 in Action Plan 2021
	3.3.5 Rotary Directory – advertise MMR in the Rotary Directory	MMR team member involved in Rotary Directory	Taskforce member #30 with Erin Statz	Liaise with Rotary directory lead and ensure information is included	June 2020 Update Ongoing, Team 1 in Action Plan 2021
	3.3.6 Augusta Directory – advertise MMR in the Augusta Directory		Erin Statz	Requesting Augusta Directory to include local mental health and wellbeing list in their directory free of charge	August 2020 Update Ongoing, Team 1 in Action Plan 2021

3.4	Share transport options for community members to access community support	3.5.1 Collate a list of existing transport options, mode of transport, cost and general availability.	Local experience and knowledge within MMR	Taskforce member #28	PART 1 – List existing supports (ie. PATS, local taxis, bus, etc), in the community to physically get to a service, who is eligible, how to access this.	August 2020 Update Not started, some information available through Blue Pages
				Taskforce member #50, Taskforce member #46 and Taskforce member #9 probably can help with parts 1 & 2 as it links to their task.	PART 2 - Using the database from Team 4, find out if any assistance to attend is offered by services (TASK 4.3). PART 2 – What services provide support or alternatives to meet Share what exists with the community through various formats in 3.3	September 2020 Update Not started, some information available through Blue Pages
				Taskforce member #28	PART 3 – What are the gaps, who can't get any support to access. Identify the gaps and share this information with MMR Alliance	September 2020 Update Not started, some information available through Blue Pages

Priority 4: MENTAL HEALTH SERVICE COLLABORATION

<p>Responsibility of Team 4 Team Captain: Dr Peter Durey Number of taskforce volunteers: 11 Aim: Mental health service providers and supporters collaborate more fully</p>						
<p>The workshop process identified whilst there are a number of networks and social groups in the region, however they are not necessarily well coordinated or working together. This was particularly evident among the service providers that are both based in the region and that provide services via in-reach. Working in collaboration is essential if individuals are to navigate appropriate linkages between clinical and non-health supports. Multi-agency working is about providing a seamless response to individuals with multiple and complex needs and also ensure that individual agencies, networks and social groups are all aware of what each other is doing and working together on certain aspects and events where possible.</p>						
SHORT-TERM OUTCOME/S (next 18 months)		KEY PERFORMANCE INDICATOR	COLLECTION TOOL	COLLECTED BY		
Improved coordination and collaboration between existing networks and stakeholders to allow better support to the community.		Community report that services work in partnership to provide support for Mental Health and Alcohol and Other Drug issues	Community Perception Survey (Pre/Post)	Mental Health Commission		
		Mental Health and Alcohol and Other Drug providers develop more strategic alliances and service integration.	Services report an increase in coordinated care models.	Service Providers		
<p>Short-term Outcome 4: Improved coordination and collaboration between existing networks and stakeholders to allow better support to the community.</p>						
TASK	TEAM MEMBER WITH KEY RESPONSIBILITY	RESOURCES	TASK DESCRIPTION	ACTION	PROGRAM DATES	
<p>Short-term Outcome 4: Improved coordination and collaboration between existing networks and stakeholders to allow better support to the community.</p>						
4.1	Preliminary Sign-up local mental health providers to commit to the Mindful Margaret River	Taskforce member #23	Mindfulness Margaret River Logo printed cost TBC WAPHA GP Down South	Invite mental health providers and supporters to make a public commitment to collaboration by displaying the MMR logo.	Form a list of MHPs etc Develop a map of local providers and their area of expertise.	September 2020 Completed 2020

	Objectives and Principles.		Clearly defined Principles	Distribution of principles to community service providers,	Liaise with other teams re logo and principles and confirm outline with CMHA board Obtain signed commitment from MHP's and provide them with logo	
4.2	Establish a consortium to explore ideas to hold a Mental Health Expo in the Shire	Shire Taskforce member #41	Decide on the topic(s) for the meeting from the Consortium and WAPHA	Invite Mental Health service providers to explore ways of promoting themselves to each other and the community	Choose the topic(s) and arrange a meeting with the help of the Shire for the event and follow up	Completed October 2021
4.3	Preliminary Audit existing network groups in the Shire to gain an understanding of their use/role and whether or not there are any gaps	Taskforce member #24	AMR Shire Taskforce member #59 Implementation Officer	Audit of existing networking groups to ascertain who is involved, when meetings occur and key objectives. (check if networking meets CPD / peer supervision obligations of members). Provide results to Alliance	Using the results of the audit establish from within existing groups, a collaborative which meets the dual role of professional development / peer supervision for participating professionals.	Update Audit results provided to group by Dec 2020 Development of network group by April 2021
4.4	Advocate for a wider range of services and pathways for GPs to encourage a more coordinated approach	Dr Peter Durey Taskforce member #60	GP Down South GP Surgeries in AMR Shire WAPHA	Outline Health Pathways and how to use the system. Provide information on other telehealth systems. e.g. ePsychiatry and GP Navigator. Encourage the use of GPDS MH Coordinators	Meet with GPs and explain systems and discuss barriers to their use. Help with getting updates on details in the pathways. Explore technological ways GP's can support	Update December 2020

					Coordinated Care given COVID--19	
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APPENDIX 1

PLANNING FOR AN EFFECTIVE PLAN

Prior to establishing and implementing a community plan, a number of steps need to happen to ensure the resulting plan has been developed in partnership to reflect the communities needs and has the best chance at creating sustainable change.

It is important that the community have a strong understanding of the issues and have ownership of the strategies developed to address them. To ensure this, processes should be put in place that allow community input into all stages of the development and implementation of the Plan, including progress made against addressing the issues.

