Results of the EMHSCA Partnership Survey 2024

Summary

The Eastern Mental Health Service Coordination Alliance (EMHSCA) partnership survey conducted in late 2024 aimed to assess the effectiveness of the Alliance, identify strengths and areas for improvement, and gather insights on barriers and opportunities for future actions. Out of 15 members, 53% responded, indicating general satisfaction with the Alliance's performance.

Key findings include:

- Most objectives were rated as 'partially' or 'fully' achieved.
- Members expressed that lower ratings often stemmed from local workload pressures rather than the Alliance itself.
- The Alliance operates at 'collaboration and coordination' levels, with aspirations for future 'integration.'
- Future opportunities include focusing on mental health reform, cross-sector integration, and supporting the Our Workforce, Our Future Framework Local Implementation Team.
- Current challenges highlighted include workforce stability, risk and safety in services, and uncertainties in funding.
- Key focus areas for the next year involve shared care planning, workforce support, and continued mental health reform efforts.
- Members suggested enhancing engagement by addressing competing priorities and ensuring stable funding for long-term planning.
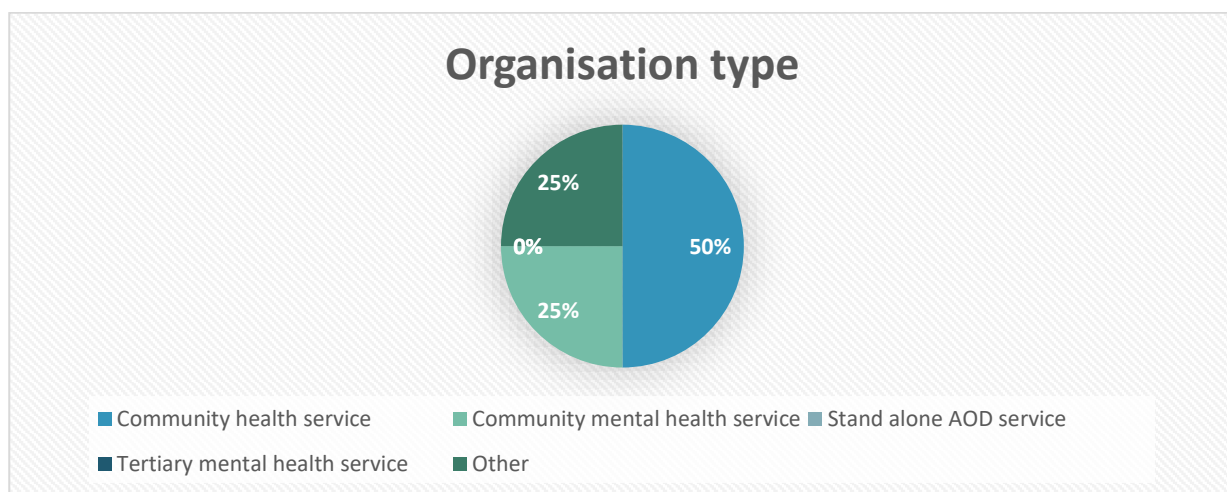
Background

The EMHSCA partnership survey was undertaken in October – November 2024 to:

- understand how effective the Alliance has been at achieving its aims and objectives in 2024
- identify strengths of the Alliance and areas for improvement
- understand the barriers and enablers you may have experienced in participating in the Alliance
- identify opportunities for the Alliance's action in the future

The information gathered through this survey will assist with planning the EMHSCA activities for 2025.

From 15 active EMHSCA members, eight survey responses (53%) were received from a variety of service providers (see Figure 1 for details).

Organisation type

- Community health service — 50%
- Community mental health service — 25%
- Stand alone AOD service — 0%
- Tertiary mental health service — 25%
- Other

Figure 1. Types of organisations who completed the survey.
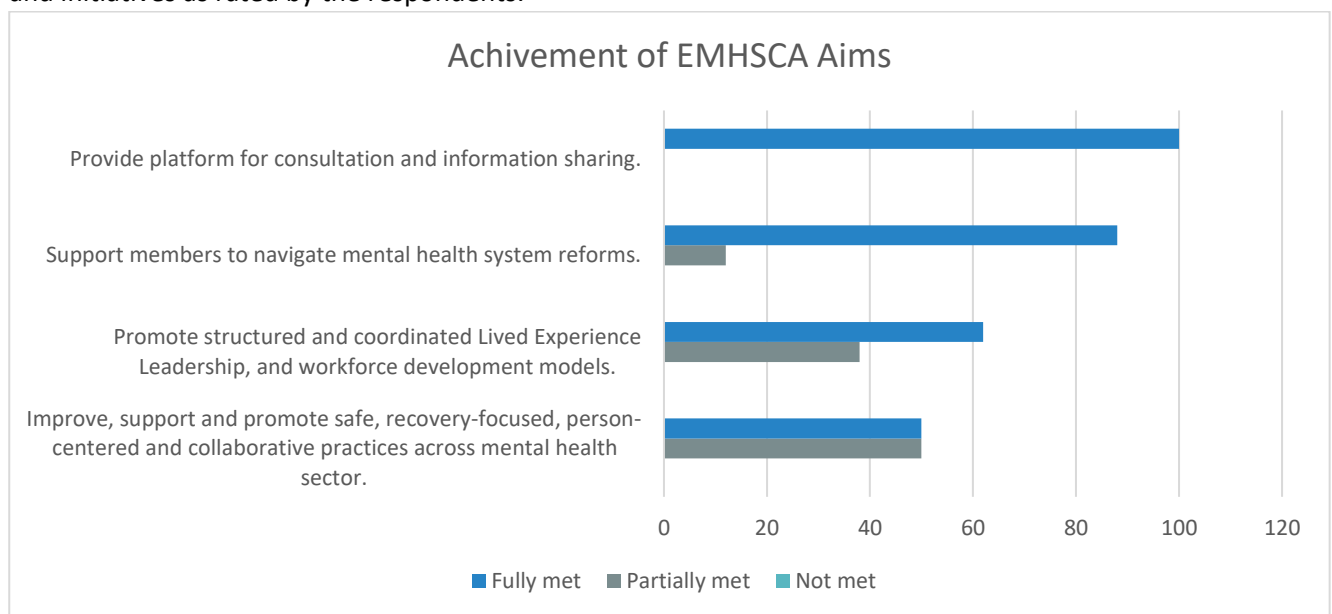
Achievement of the Alliance's objectives

Respondents reflected on the Alliance's performance in 2024, rating how well it met the EMHSCA aims and strategic objectives.

Most aims and objectives were rated as 'partially' or 'fully' achieved by the majority of respondents.

The following objectives/initiatives were reported as least achieved:

- Strategic objective 1 - Initiative 1: Designing tools and strategies for collaborative advocacy.
- Strategic objective 3 - Initiative 1: Creating opportunities for information sharing about available services and developing service agreements.
- Strategic objective 3 - Initiative 2: Creating opportunities for Mental Health and Wellbeing Locals to share information about models of care, integration, common referrals and challenges.
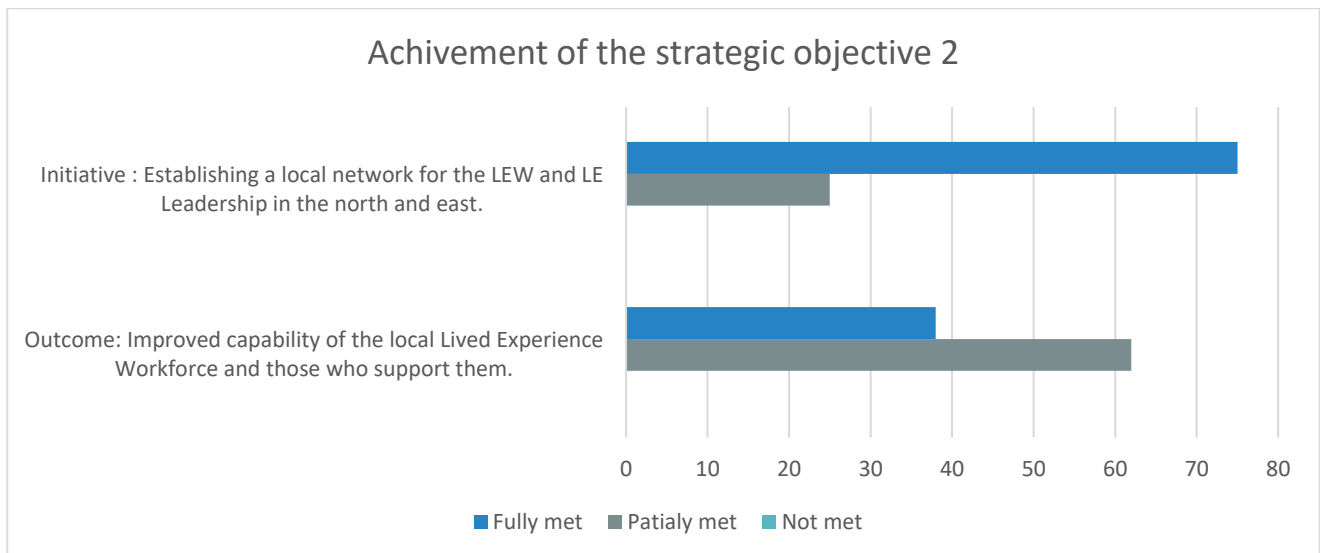
Figures 2 - 5 on the following pages breakdown the achievement of the aims and each strategic objectives and initiatives as rated by the respondents.
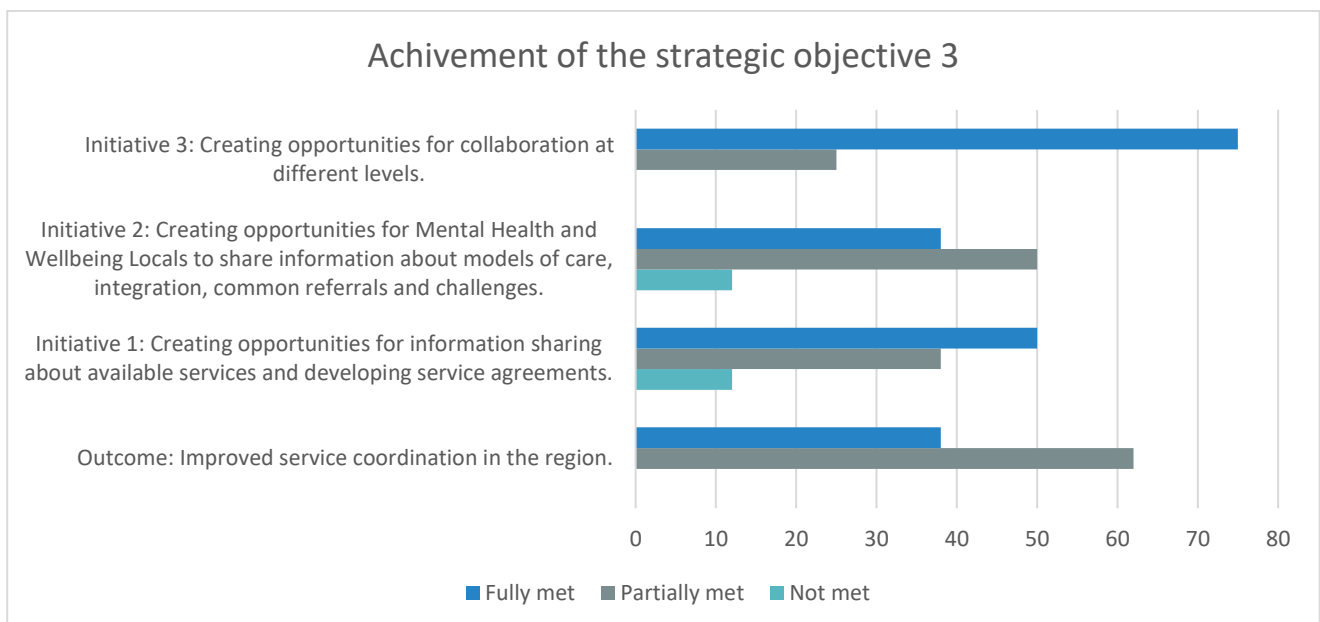

Figure 2. Achievement of EMHSCA aims
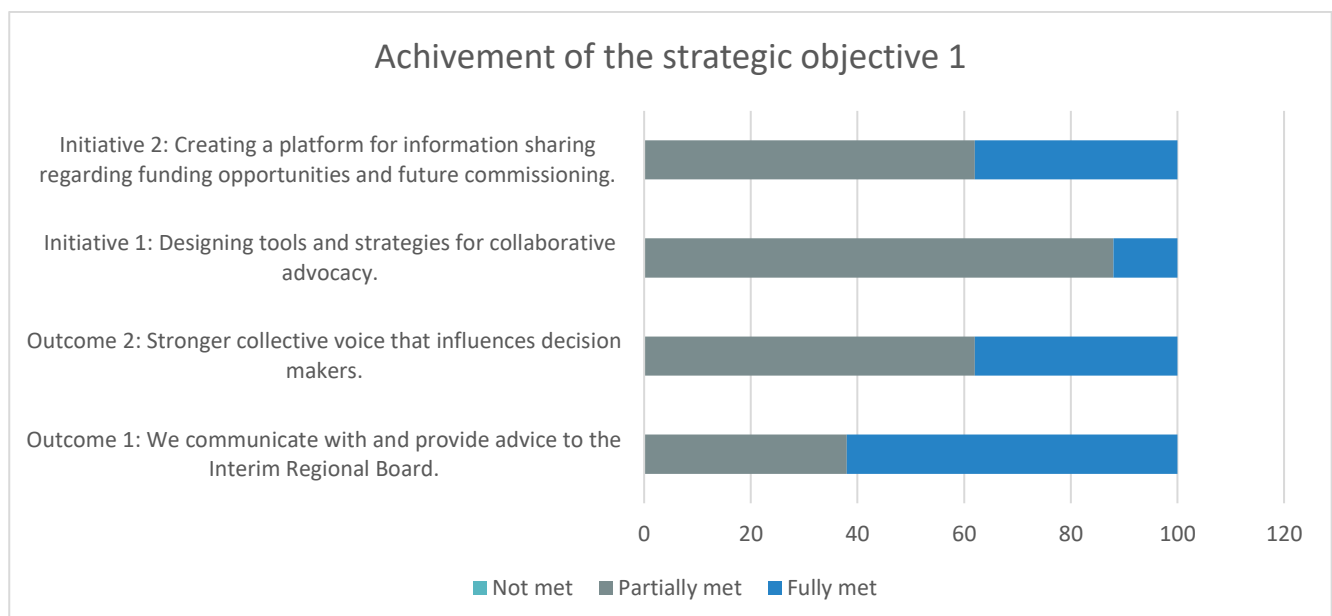
Figure 3. Achievement of the strategic objective 1

**Figure 4.** Achievement of the strategic objective 2

Figure 5. Achievement of the strategic objective 3

Members' self-rated experience of the Alliance

A summary of the survey questions relating to the functioning of the Alliance are presented on the following page (Figure 6). Each statement was rated on a scale of 1-5, with 1 being 'strongly disagree' and 5 being 'strongly agree'. Overall EMHSCA members are satisfied with the Alliance and the way it operates.

Respondents noted that lower scores reflect not so much the Alliance's effectiveness but rather the increased workloads and local pressures that limit their ability to engage as much as desired. Additionally, KPI tensions make it difficult to involve specific team members who would greatly benefit from participating in the Alliance.
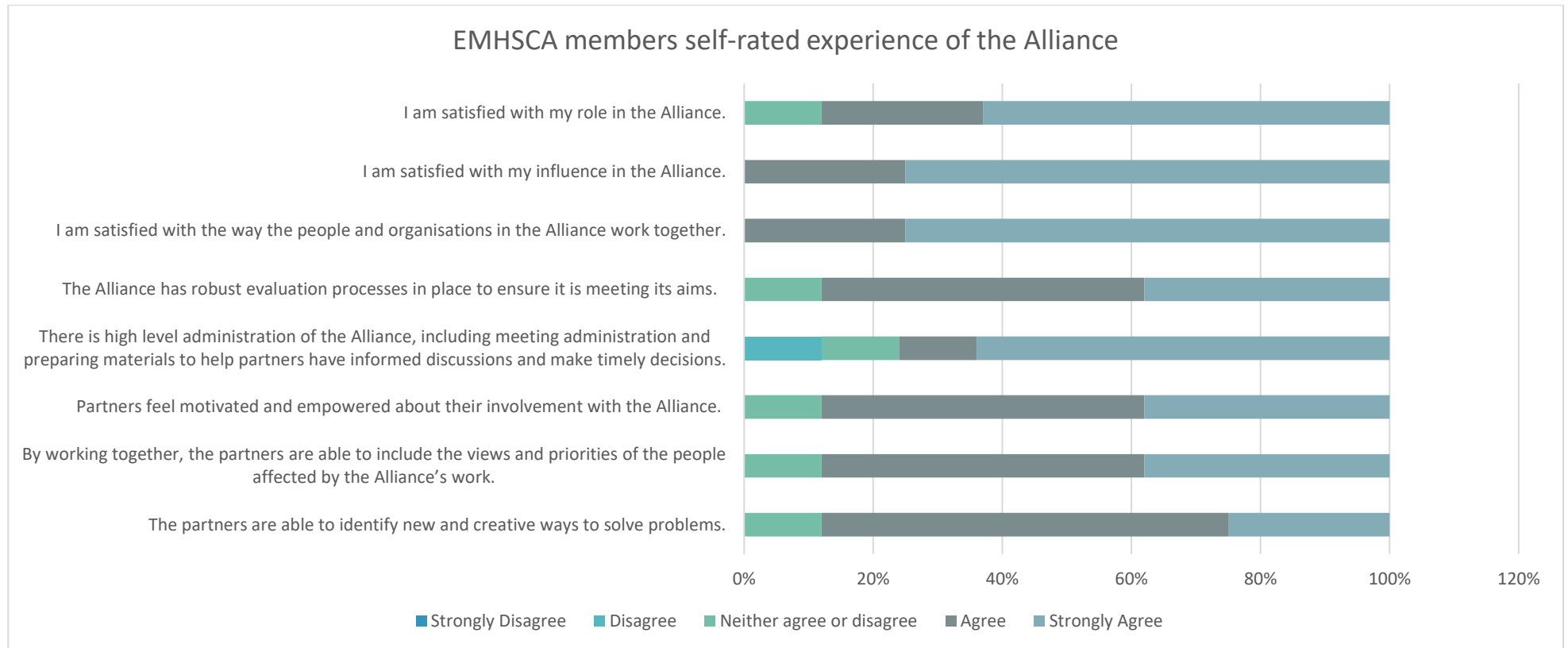
Figure 6. Members' self-rating of their experience of the Alliance (n=8).

Level of integration of the Alliance

Respondents were asked to rate on the integration continuum where they felt the Alliance was working, and where they felt it could have been working (Figure 7). Each of the levels were defined as follows:

- **Isolation:** Agencies don't recognise the need to communicate, no attempt to communicate.
- **Communication:** Agencies talk to each other, share some information.
- **Coordination:** Staff from agencies work together on case-by-case basis to coordinate some support.
- **Collaboration:** Agencies work together on project-by-project basis, including joint analysis and planning.
- **Integration:** Intensive collaboration, agencies interdependent, significant resource sharing and trust.

The majority of respondents felt the Alliance currently operates at the level of 'collaboration and coordination'. In the future, respondents reported they felt the Alliance could be working at 'integration' level.
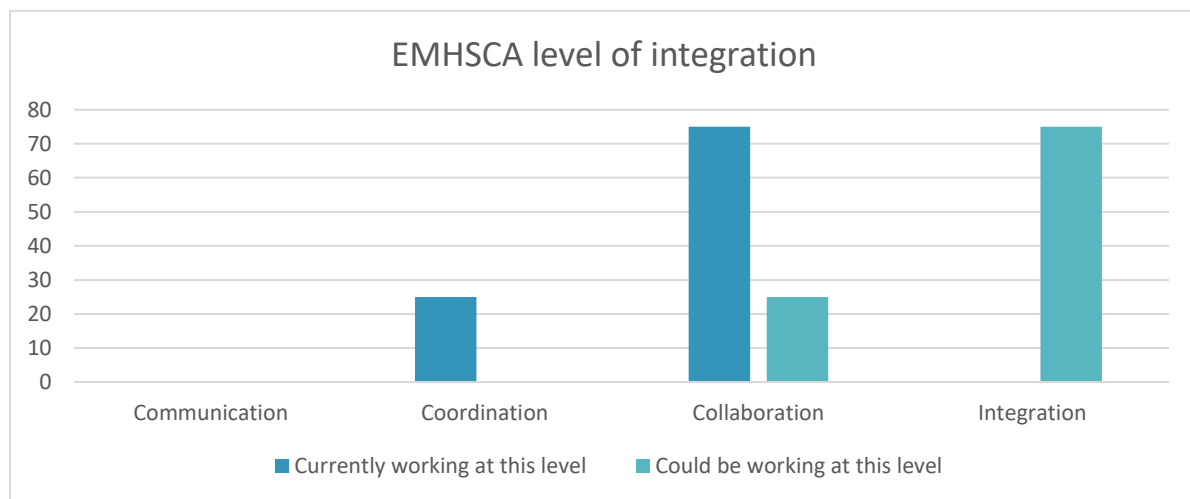
Figure 7. EMHSCA level of integration

Qualitative comments from respondents highlighted that the active involvement of lived experience enhances the Alliance, and in-person meetings could strengthen connections among regular attendees.

Furthermore, respondents noted that various activities span all four levels; there are numerous coordination activities and some collaborations. There is genuine potential for increased collaborative work leading to integration, provided there is adequate resourcing.

Additionally, specific team members could benefit from attending the Alliance for deeper integration, but current workloads do not allow for this.

Future opportunities of the Alliance

Members shared their views on future opportunities and functions of the Alliance, leading to the following emerging themes:

- **Continued Focus on Mental Health Reform:** Stay engaged in reforms, hold funders/government accountable, and work on current priorities to transform mental health services.

- **Continued Focus on Integration**: Develop a clear vision and goals for integration, seek grants/funding as an Alliance to deliver aligned projects, and enhance collaboration while awaiting funding from Victoria.
- **Engagement with Other Sectors**: Promote greater cross-sector integration beyond the current mental health and AOD levels.
- **Supporting the Local Implementation Team:** The Alliance could play a vital role in implementation as the LIT progresses.

Current sector challenges

Members identified several current sector challenges for the Alliance to address, which include:

- **Shared Advocacy Strategy:** Focus on workforce stability, retention, and professional development.
- **Linkages with the Local Implementation Team:** Ensure that LITs are not clinically dominated in terms of workforce development outcomes.
- **Risk and Safety:** Address how the sector understands risk and creates safety in mental health services for individuals and organizations.
- **Uncertainty in Funding and Reform Environment:** Limited new sector investment poses multiple challenges, including NDIS barriers for individuals with psychosocial disabilities and fragmented reforms across state and federal governments.

Alliance focus areas for the next 12 months

Members suggested key focus areas for the Alliance in the upcoming year, with themes including:

- **Shared Care Planning:** Support for a cross-sector shared care protocol.
- **Supporting the Workforce**: Foster a thriving workforce, celebrate achievements, and support the Lived Experience Workforce while linking with the Local Implementation Team.
- **Continued Support for Mental Health Reform**: Pursue transformative approaches to engage individuals in their mental health and wellbeing, continuing the necessary transformation despite defunding.

Enhancing member engagement in the Alliance

Members were asked what could enhance their engagement and commitment to the Alliance, leading to the following themes:

- **Overall Satisfaction with the Alliance:** Many expressed their satisfaction for the Alliance, finding meetings and communications engaging. Newer members particularly highlighted the usefulness of the information shared.
- **Competing Priorities:** Many face challenges due to the number of meetings competing for their time. While they value this space, the competing demands can be overwhelming.
- **Uncertain Funding:** Emphasis on the need for longer-term planning based on the stability and resourcing of the Alliance.