

Tuesdays with Nexus

Interactive online sessions

in partnership with NEMHSCA



Key Themes from Tuesdays with Nexus

4 May 2021 - 9.30am

50+ people attended this session – Thank you for your participation.

Implications of the Royal Commission into Victoria's Mental Health System.

Recommendation 23 *The Victorian Government should set up a new service to support people who have experienced trauma. The Victorian Government should pay for the new trauma service.*

Recommendation 24 *The Victorian Government should work with the new trauma service to find new ways to support people who have experienced trauma.*

Guest Speakers:

Professor Dan Lubman AM, Director, Turning Point, Eastern Health, Professor of Addiction Studies and Services, Eastern Health Clinical School, Director, Monash Addiction Research Centre, Monash University

Ms Nicole Sadler AM, CSC, Head of Policy and Practice, Phoenix Australia – Centre for Posttraumatic Mental Health and Enterprise Fellow Department of Psychiatry University of Melbourne.

<https://finalreport.rcvmhs.vic.gov.au/download-report/>

RCVMHS Responding to Trauma

Volume 2, Chapter 15, pages 335 – 394

https://finalreport.rcvmhs.vic.gov.au/wp-content/uploads/2021/02/RCVMHS_FinalReport_Vol2_Accessible.pdf

Points of discussion today:

- The system structures currently in place does not allow for the types of recommendations made in the RCVMHS
- A top-down approach to build a sustainable, integrated system is needed
- A spectrum of services is needed to cater for a variety of populations impacted by different types of trauma
- MDMA and Psilocybin treatment for trauma needs more research but shows promising results, in combination with psychotherapy – Talk therapies are still seen as best evidence

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- Outcome measures currently used seek symptom reduction as goal, however broader metric are required, to be co-designed with consumers and clients, families and carers, to better understand what it is they want from the services, - 'Metrics that mean something' such as quality of life outcomes need to be considered
- Escalation pathways need addressing – identifying different approaches to address trauma, as well as different options for treatment being available when one or another option doesn't work and not seeing this as failure on the part of the individual
- TIC needs to include the whole system: clients, consumers, families, carers, peer workforce, specialist services, staff, treatment approaches, and the system over all

Synopsis of the RCMHS Chapter 15

A new approach to addressing trauma will:

- By the end of 2022, establish a Statewide Trauma Service hosted within the Collaborative Centre for Mental Health and Wellbeing, to deliver the best possible mental health and wellbeing outcomes for people of all ages with lived experience of trauma.
- Fund the Statewide Trauma Service to bring together mental health practitioners, trauma experts, peer workers and consumers with lived experience of trauma to:
 - a) conduct multidisciplinary and translational trauma research;
 - b) develop and deliver education and training that supports Victoria's mental health and wellbeing workforce to deliver trauma-informed care;
 - c) develop and oversee digital peer-led support platforms offering consumers access to peer support networks; and
 - d) coordinate and facilitate access to specialist trauma expertise, including secondary consultation for mental health practitioners and peer workers across Victoria's mental health and wellbeing system
- Adopting a trauma-informed approach requires training the broader mental health and wellbeing workforce to recognise and understand the mental health impacts of trauma, and to be sympathetic towards those who have experienced trauma. Current evidence indicates that the public mental health system does not adequately identify or provide for the mental health and recovery needs of consumers affected by trauma.
- The dominance of the biomedical model has constrained the extent to which mental health services have been able to build understanding and knowledge about the delivery of trauma-informed care and practice
- Drawing on coordinated trauma expertise, the Statewide Trauma Service will develop and deliver training to support the multidisciplinary trauma workforce in Victoria. Importantly, the Statewide Trauma Service will design and deliver an accredited program of training specific to the trauma practitioner roles.

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- The Statewide Trauma Service will train and support a multidisciplinary workforce of specialist trauma practitioners. Each Area Mental Health and Wellbeing Service will employ up to three trauma practitioners, with:
 - up to 66 trauma practitioners embedded in the 22 Adult and Older Adult Area Mental Health and Wellbeing Services
 - up to 39 trauma practitioners embedded in the 13 Infant, Child and Youth Area Mental Health and Wellbeing Services.
 - To work with peer support workers in Local Mental Health and Wellbeing Services to provide and facilitate access to a broad range of trauma supports for consumers of all ages and backgrounds; and
 - To contribute to the ongoing learning and professional development of the mental health and wellbeing workforce through supervision, consultation and shared clinical care.
- The Victorian Government must establish a future mental health and wellbeing system that is informed about trauma. The system must recognise the diversity of trauma experiences prevalent in the community and have the capacity and capability to respond to the needs of consumers who have experienced trauma. A minimum requirement of mental health services is to do no harm.

Challenges and barriers:

- Inconsistent service responses for consumers affected by trauma
- Failure to recognise the impact of trauma on mental health and wellbeing
 - 'a fear of opening 'Pandora's box' and the clinicians' actual or perceived lack of capacity to respond therapeutically • concern that asking about trauma could retraumatise or trigger psychological distress • a belief that treatment for trauma is something that should be provided separately to the mental health care being provided, and is outside the remit of the clinician's role • issues surrounding disclosure, such as a reluctance to discuss the experience', which may be because of issues of stigma and shame or because the individual involved does not identify the experience as traumatic.
- Lack of therapeutic support for trauma
- Failure to provide early support to consumers affected by trauma
- Crisis driven access to support for trauma
- Experiences of trauma within the mental health system
- Failure to recognise the impacts of trauma on families, carers and supporters

A new response to trauma

The Commission supports the view that trauma 'needs to be removed from its silo and integrated with the complexities of other mental health disorders and persistent social factors.'

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By embedding a trauma-informed approach across the entire mental health and wellbeing system, consumers will benefit from a system that recognises that trauma is a determinant of mental illness; facilitates early support; reduces the risk of retraumatisation; and matches consumers with supports to aid recovery within and outside of the mental health and wellbeing system.

- A system that provides local, therapeutic-levels of support for consumers affected by trauma
- Developing and embedding trauma-informed practice across the mental health and wellbeing system
- Access to peer support workers and online support networks
- A system that is supported and equipped to deliver exemplary mental health care for consumers affected by trauma
- A system that provides a coordinated response
- A system that is based on a contemporary and consolidated understanding of trauma
- A workforce that is equipped to respond to trauma through comprehensive education and training
- A system that fosters and sustains a trauma-informed approach

(RCVMHS, (2021) Volume 2, Chapter 15, p 335-394)

Resources Shared:

NEMHSCA Trauma Informed Care and responding to sexual abuse disclosure

<https://www.emphn.org.au/what-we-do/mental-health/north-east-mental-health-service-coordination-alliance-nemhsca/nemhsca-events>

Rethink Addiction Australia

<https://www.rethinkaddiction.org.au/>

Rethink Addiction in Australia Special Panel Event – book here for live session

<https://www.eventbrite.com.au/e/rethinking-addiction-in-australia-tickets-148297328301>

Addicted Australia

<https://www.sbs.com.au/programs/addicted-australia>

Phoenix Australia Guidelines

<https://www.phoenixaustralia.org/australian-guidelines-for-ptsd/>

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Turning Point COPE Program

<https://www.turningpoint.org.au/treatment/cope>

Responding to trauma, 360Edge training, 13 May 2021

https://www.eventbrite.com.au/e/responding-to-trauma-in-alcohol-and-other-drugs-online-tickets-130673157933?aff=Newsletter&utm_source=360Edge&utm_campaign=2f3cacffa3-EMAIL_CAMPAIGN_2020_02_12_02_10_COPY_02&utm_medium=email&utm_term=0_42fd415bb-2f3cacffa3-1356273292&mc_cid=2f3cacffa3&mc_eid=cec0338b10

We are taking a break!

'Tuesdays with NEXUS' online sessions in 2021 have been focussed on the overview of the recommendations into the Royal Commission into Victoria's Mental Health System for the past few months. We have covered a variety of perspectives from consumers, the lived experience workforce, families and carers, alcohol and other drug sectors including addiction medicine, mental health and dual diagnosis, responses to trauma etc. in relation to how the recommendations may impact different points of view. At this time many questions remain unanswered and are requiring further thought and direction from peak bodies. We will resume our fortnightly sessions in July/ August with the hope that we will have a better understanding of the next steps and can keep the community informed of new developments in this area.

Past sessions and resources are available via the Nexus web site <https://www.svhm.org.au/nexus>

'Tuesdays with Nexus' –

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| Date: | Tuesday's – July 2021 TBA |
| Start time: | 9.30 am – VIC |