Equally Well in Action

Implementing strategies to improve the physical health of people living with mental illness





Equally Well the first six years, July 2023

Acknowledgement

Equally Well recognises the lived experience of people who have experienced emotional or mental distress and the variety of experiences those people have had in accessing mental health services. Lived experience is embedded in Equally Well and continues to drive and direct our purpose.

Equally Well acknowledge the Aboriginal and Torres Strait Islander peoples as traditional custodians of the land on which it operates. We pay respect to Elders past, present and emerging, and value the rich history, unbroken culture and ongoing connection of Aboriginal and Torres Strait Islander people to country. Equally Well values inclusion and diversity and is committed to providing a safe, culturally appropriate, and inclusive service for all people, regardless of their ethnicity, faith, disability, sexuality, gender identity or health status.

A note on language

Equally Well acknowledges the wide range of terms often used within the field of mental health, such as service user, consumer, patient, client, person with lived experience and psychiatric survivor. These terms reflect local contexts, historical moments, political influences and preferences. We have used the terms people living with mental illness and consumers. We also acknowledge the critique and limitations of all terms, including people living with mental illness.





Contents

Forewo	rd	04
Introduction		05
Who is	Equally Well?	07
	ly Well Ambassadors nal Consensus Statement ine	
Strateg	ic focus for Equally Well	12
Measu	ring up to our commitment	14
Equally Well National Consensus Statement Six Essential Elements		17
	A holistic, person centred approach to physical and mental health and wellbeing	18
	Effective promotion, prevention and early intervention	20
	Equity of access to all services	22
	Improved quality of health care	24
	Care coordination and regional integration across health, mental health and other services and sectors	26
	The monitoring of progress towards improved physical health and wellbeing	28
Referer	References	

Foreword

As we celebrate six years of the Equally Well movement in Australia, while there is still work to do, it is cause for those who have met their commitment for action, to appreciate how far we have come, together to make change in the lives of people living with mental illness and the communities that support them.

Six Year Progress Report

This Report charts the progress and maturity of the Equally Well movement which has gone from 58 supporting organisations that signed the original National Consensus Statement in 2017, to a 100 strong group of change makers, all doing what they can to make a difference.

The success of Equally Well recognises that across all these partnerships and initiatives, a consistent theme resonates; Equally Well actions are improving the wellbeing of people living with mental illness and is saving lives.

Changes in health policy and practice guidelines, increases in the number of programs targeting physical health improvements and innovative research across the mental and physical health sectors is happening in 2023 on a scale that would have been unheard of even a decade ago.

The sparks of hope ignited in the launch of the Equally Well movement in 2017 have lit the fire for change and the individuals and organisations who remain committed to the course are the fuel that will ensure it continues to burn brightly.

We are encouraged and inspired by the work of so many in the Equally Well movement and look forward to being able to report continued impact in our ultimate target to reduce that 15 year lifeexpectancy gap for people living with mental illness and achieve a more equitable health outcome for all.

Dave Peters Equally Well Alliance Co-Chair

Vall

John Allan Equally Well Alliance Co-Chair



Australian Government

Department of Health and Aged Care

Equally Well is funded by the Australian Department of Health and Aged Care





Introduction

This is a story about the power for collective action and change. The Australian health and mental health system is a complex set of services and organisations.

As such, to facilitate maximum impact, Equally Well uses an innovative constellation model of collective impact for mental health service reform never before seen in this country.

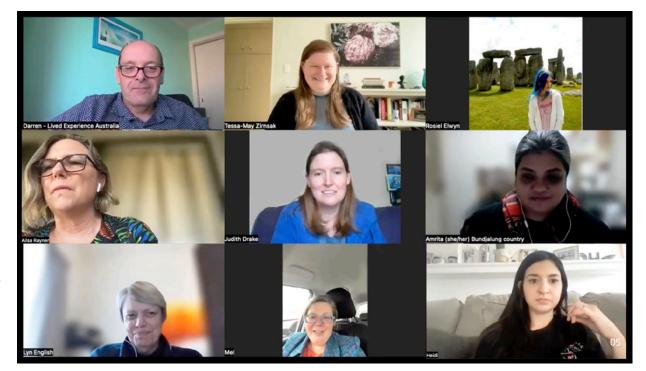
The need for Equally Well

The fact that every year over 20,000 people with mental illness die prematurely mostly due to preventable physical illnesses like heart disease, cancer, diabetes and influenza, is a national shame. In 2017, 58 organisations from across all levels of government, clinical groups, lived experience and advocacy groups and community based notfor-profits, came together to make a commitment to do something about this preventable loss of life.

More than a year of consultation, workshops, drafting and incorporating 1,400 written submissions, the Equally Well National Consensus Statement was developed. What emerged was strong agreement for the need for shared commitment to action. The National Consensus Statement is just that, a summary of the consensus on the actions needed to address this national problem.

In 2017, the National Mental Health Commission supported the establishment of the Equally Well project team to oversee and coordinate the implementation of the Equally Well National Consensus Statement. Six years on is a good time to reflect on what impact has been made through this collective call for action that became the Equally Well movement.

The Equally well backbone team was formed, in an intermediary role, to provide that connective tissue that binds us all together. This role enables capacity for collaboration and momentum that no single entity within the network could.



Meeting in an online collaboration our Equally Well consumer resources design team make plans to launch new co-designed physical health resources in 2023.

Introduction cont'd

The Productivity Commission Inquiry into Mental Health 2020, highlighted implementation of improving the physical health of people living with mental illness as a 'Priority Reform' and a "Start Now Reform". In 2022 the National Mental Health and Suicide Prevention Agreement confirmed this in its "commitment for all Australian governments to make the physical health of people living with mental illness a priority at all levels. The Parties reaffirm their commitment to the principles of Equally Well" (p 15).

Instead of introducing another fragment into an already fragmented mental health service system, the Equally Well movement is breaking down silos and building connections between the near 100+ supporter organisations that are each playing their role in improving the physical health of people living with mental illness. These organisations, that include NGOs, consumer peak bodies, professional colleges, all levels of government and primary care organisations, have formally committed "to make the physical health of people living with mental illness a priority at all levels", to make a difference.

Using a Collective Impact approach, Equally Well works to help organisations to work together collaboratively, advocate for care equity, develop new resources and provide quality care.

This Equally Well in Action report highlights the impact being made in the first six years, and demonstrates the need to continue to working together into the future.

We still have a long way to go, but our 2022 national scan of the health industry indicated over 300 initiatives underway right across the country. Some notable highlights include;

- Every state mental health department has an Equally Well-related strategy or is currently in the process of developing one.
- Community managed organisations (NGOs) have introduced world leading reforms to protect and enhance the physical health of their clients.
- Primary Health Networks (PHNs) have reported 55 new initiatives focused on the physical health of people living with mental illness.
- The National Medical Health and Research Council recently committed \$5 million to research targeting the physical health of people living with mental illness.

Equally Well is alive and well. Australia is leading the world in a coordinated approach to improving the health of people living with mental illness.

On an international level, Equally Well Australia is a leader in sharing innovation and creating valuable networks through the creation of the International (Aus/NZ/UK/Canada) Equally Well Alliance, and the International Collaborative Learning Network. Through sharing of data and resources and collaborating on important work such as the Global Call for Vaccine Equity and International Equally Well Scorecard, these connections are amplifying the impact of the movement and making sure the issue of health equity for people with mental health conditions is an international health priority. We are creating an evidence based network of information about mental and physical health benchmarks from around the world that is making a difference.

This is the story of just the first six years of this unique movement and worldleading initiatives across our country and at all levels of the health system. But we still have a long way to go until the practices to achieve health equity for people living with mental illness are embedded as 'standard practice' across our system.

This is just the beginning.

Prof Russell Roberts Equally Well National Director



Left: Members of the inaugural Equally Well International Alliance meeting in Washington DC in 2017 with representatives from Australia, joined by colleagues from the United Kingdom, Canada and the United States.

Below: Some of the members of the Equally Well Project team, Lee Cobb, Sonia Diab, Associate Professor Rachel Rossiter, Marcelle Rawlings, Victoria Erskine and Professor Russell Roberts at the NSW Health Older Persons Mental Health showcase in 2022.



Who is Equally Well?

Equally Well is anyone who works together to improve physical health for people living with mental illness. The Equally Well Project team works to connect the organisations, sectors and system elements together to mobilise and enable an effective collective national response to this problem. The Equally Well movement is supported by a small backbone team of staff based in regional Australia with Charles Sturt University. The project team has a budget of approximately \$400,000 per annum. In addition, it receives funding for specific projects such as the symposium, developing consumer resources, measuring implementation progress and delivering the data linkage project.

Equally Well is an intermediary organisation that uses a collective impact approach to mobilise existing services and organisations around a shared goal. Strategically we have a threefold focus: To promote awareness, facilitate collaboration in the sector and measure progress.

Lived experience is at the heart of who we are and what we do.

"Using a Collective Impact approach, Equally Well works to help organisations to work together collaboratively, advocate for care equity, develop new resources and provide quality care."

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Prof Russell Roberts

Who is Equally Well? cont'd

Equally Well ensures all its committees are chaired or co-chaired by someone with lived experience (consumer or carer). All Equally Well research or evaluations are either consumer led, or consumer co-led.

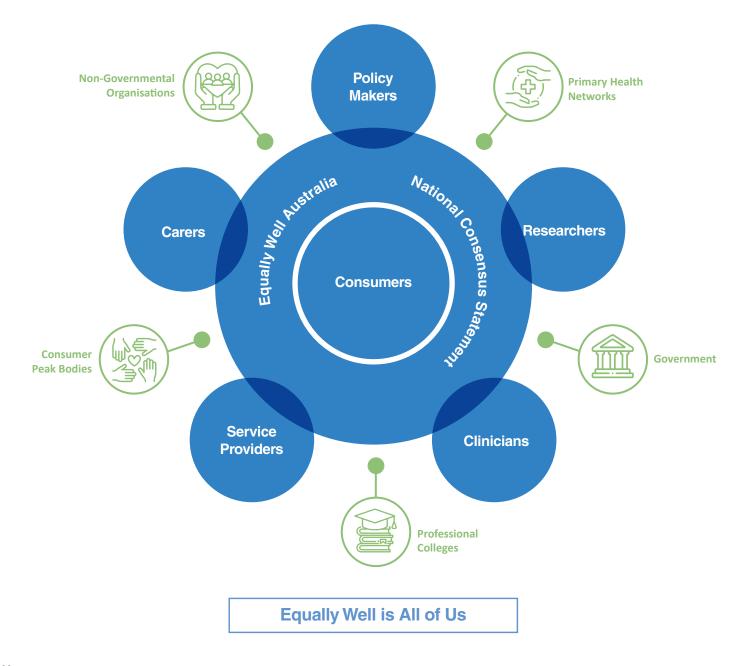
Further, our governance policy is that multiple committee members are to be experts by experience; in order to help counter-balance the historic and systemic power asymmetries inherent in medical models.

Equally Well is all of us.

This diagram shows how we work within constellations and also connect across constellations through a variety of innovative practices in the Equally Well version of Collective Impact. Within constellations we seek to influence through key partnerships and establishing and maintaining communities of practice across key areas of the sector.

We employ ten (pro-bono) Ambassadors who serve as leaders, connectors and conduits with the different constellations in our service environment. Across constellations we seek to connect across jurisdictions and sectors through our national oversight committee, the Equally Well Alliance. We also look to use shared activities in practice improvement, resource development and service evaluation to connect across constellations.

Through acting out our mission under the Collective Impact model we are moving the needle on health outcomes by contributing to the policy and authorising policy environment, having an impact in mental health advocacy in the chronic care sector and success in building a coalition of the willing and growing our network of influence across all levels of the health and policy sector.



Equally Well Ambassadors

Ambassadors serve as leaders, connectors and conduits with the different constellations in our service environment.



Simon Rosenbaum Exercise Physiology Ambassador

"The vision and sharing of resources, knowledge and experience is the most exciting part of Equally Well and is what will ultimately lead to pragmatic and scalable solutions to addressing inequality."



Brenda Happell Nursing, Consumer & Carer Experience Ambassador

"Equally Well brings together all people with an interest in physical health and mental health including consumers, carers, clinicians, academics, managers and policy makers to pursue their mutual interests. As such it focuses on common purpose and unites people around this goal."



Andrew Watkins Health Services Ambassador

Sam Manger

"Equally Well is that national voice. It brings together resources from around Australia and in doing so inspires consumers, carers and clinicians to promote equity of access to quality health care

General Practitioner Ambassador "I am proud that Equally Well is working

to recognise and prioritise these areas

to improve the health of so many who

suffer, often unnecessarily.





Dave Peters Lived Experience Ambassador

"Equally Well is positioned very well to lead a change in attitudes and to help lead by example to co-ordinate the services across Australia with a strategic plan for addressing the physical health of people living with chronic mental illness."

Carolynne White Occupational Therapy Ambassador

"Equally Well will empower consumers and carers and enable them to receive more holistic health care. It also encourages practitioners to genuinely apply person-centred principles in practice, which will ultimately benefit everyone."

Scott Teasdale Mental Health Dietitian Ambassador

"Equally Well's focus on integration of mind and body care, combined with a focus on prevention, early intervention, and ongoing recovery support for both mental and physical health, can facilitate real-world changes for a better model of care."

Amanda Wheeler Pharmacy Practice Ambassador

"I believe our diversity and combined energies can make a genuine and sustainable difference to reducing comorbidities and 'closing the gap' in life expectancy for people living with mental illness(es)."



Reza Rostami Refugee and Culturally and Linguistically Diverse Ambassador

"My goal is to extend the organisation's goal to a wider group of people, such as refugees and asylum seekers."



National Consensus Statement

Our vision is to improve the quality of life of people living with mental illness by providing equity of access to quality health care, with the ultimate aim of bridging the life expectancy gap between people living with mental illness and the general population.

We **commit** to making the physical health of people living with mental illness a priority at all levels: national, state/territory and regional. We commit to bringing the importance of physical wellbeing across the spectrum of health – from promotion and prevention to treatment, for people of all ages across our whole society – to public attention, to spur change.

We **commit** to partnering with consumers and carers, service providers (government, non-government and private), planners, policy makers and funders, to achieve our vision.



We will improve the physical health of people living with mental illness by acting to deliver:



A holistic, person centred approach to physical and mental health and wellbeing



Effective promotion, prevention and early intervention



Equity of access to

all services



Improved quality of health care



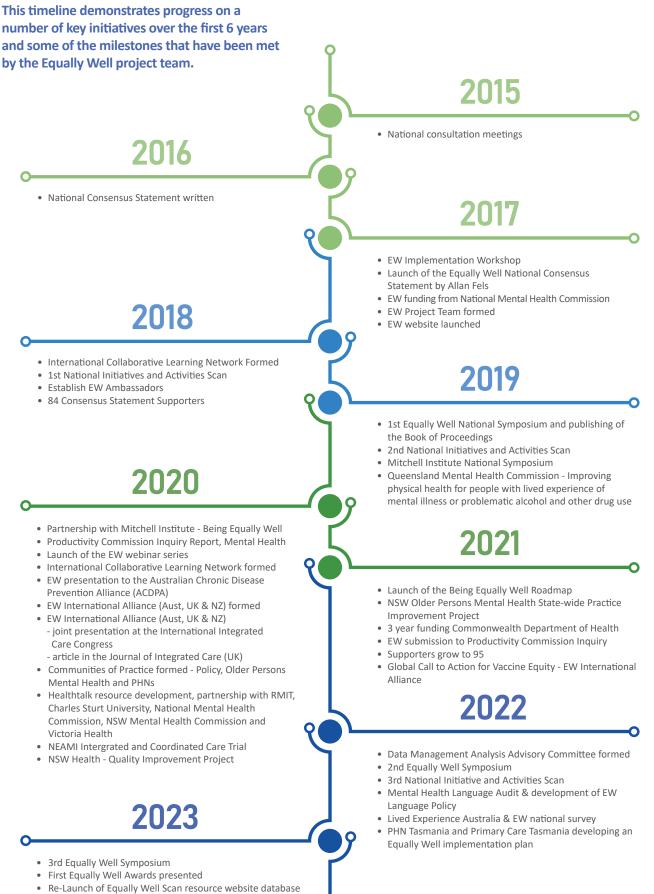
Care coordination and regional integration across health, mental health and other services and sectors



The monitoring of progress towards improved physical health and wellbeing

Timeline





Strategic focus for Equally Well

To put the Consensus Statement into action, the Equally Well project has four key areas of strategic focus; awareness, collaboration, resource development & dissemination, and measuring progress. The projects outlined on the following pages represent the key projects and activities supported by the current funding 2017-2024.



O1 Equipping and empowering consumers and carers to achieve quality care

Co-designed resources for people with lived experience, carers and clinicians to help better navigate the health system and receive better attention to their physical health needs. This online resource may include video testimonials, fact sheets and other information developed with the voice of the consumer at its heart. Annual Symposium

02

Bringing people together, creating momentum and energy, sharing and showcasing excellence

The goal of the annual symposium is to enable and energise leaders to share, collaborate and amplify impact. Sharing knowledge, success and challenges are ways that help us move closer to our goal.

In three years, this event has brought over 1,000 people together, 120 presentations, streamed to an online audience of over 1,500 spreading the message of hope for the future in which physical health can and should be a priority in prevention, treatment and care for people with mental illness. Data Linkage Project

03 Providing evidence, identifying gaps, setting priorities and informing policy

Equally Well is leading a data linkage project in partnership with the Australian Bureau of Statistics to measure our nation's progress in addressing the life expectancy gap for people living with mental illness. This work will also examine service usage patterns, socioeconomic and other factors and their relationship to physical health outcomes.

The three-year project includes an analysis of millions of datasets across multiple departments in the first of its kind comprehensive picture of progress on life expectancy gaps in people living with mental health conditions.



National Initiatives & Activities Scan

04

Optimizing collaboration, reducing duplication and showcasing best practice

The Equally Well National Initiatives and Activities Scan provides an overview of the work that organisations around Australia are undertaking to improve the physical health of people with mental illness.

Our 2022 scan revealed 308 actions underway, 78% of the initiatives incorporated lived experience in project design and implementation. A new online data portal provides the latest resources in a easily searchable format for consumers, carers and clinicians. Communities of Practice

05

Connecting networks, overcoming barriers, building relationships, sharing and learning

Communities of Practice (CoP) provide an opportunity to discuss relevant policy developments, project initiatives that are planned, underway or under review across specific sectors in the health system. They are confidential forums to discuss challenges and other issues between specialist areas of focus. The current CoP groups include;

- Government policy officers
- Mental health coordinators in PHNs
- Older Persons Mental Health
- Communication Working Group

Communication

06

Maintaining momentum, raising awareness improving impact and collectively influencing policy and guidelines

Our communication strategy focuses on review, monitoring and reporting on plans to support improved awareness of Equally Well and its goals and objectives.

To connect organisations in the sector we use social media, online newsletters, direct email, webinars and events. Our showcases of innovation at the annual Symposia bring together delegates from all sectors to share best practice, innovation and research.

We also employ ten (pro-bono) Ambassadors who serve as leaders, connectors and conduits with the different constellations in our service environment.

Measuring up to our commitment

In the following pages we have highlighted how the Equally Well project, together with organisations and individuals who make up the nearly 100 Equally Well supporters, are measuring up to the commitment to take action in our shared mission for greater health equity and improvements in the quality of life for people living with mental health conditions.

Two key strategic activities of the Equally Well project team, the Equally Well Symposium and the Initiatives and Activities Scan, are integral in providing the momentum to drive the work of the movement forward. The impact being made through these two specific activities is highlighted below.



Dave Peters and Russell Roberts at the 2019 Symposium.

Equally Well Symposium

The Equally Well Symposium has been the signature event for the Equally Well project that has provided significant momentum for change and opportunities for genuine connection and collaboration and provides an experience where everyone is on an equal level; consumers, carers, clinicians, researchers and policy makers connect on their united shared agenda. In three events held in Melbourne 2019, Gold Coast 2022 and Sydney 2023, this event has;

- brought over 1,000 people together to network and connect
- shared 120 presentations showcasing best practice case studies across the mental health sector from Australia and internationally including some world leaders in their fields
- streamed to an online audience of over 1,500 through a virtual conference hub in 2022
- amplified impact through media and social media coverage in 1,300 tweets sent by 141 participants to the hashtag, #EquallyWellAu22, creating 12.4 million Twitter impressions in 2022 alone.

With the generous support of sponsors, including the Australia Government, NGOs, universities and state based Mental Health Commissions, this remains a free event open to all who support the Equally Well mission and who want to learn and share ideas to continue to move the collective agenda forward.

United together with a common agenda and shared themes, the Symposium has been successful in helping people make new connections, and break down barriers between people with lived experience of mental health conditions and health care professionals, by putting everyone in an equal place.

"I've spoken to a number of consumers and carers who have said the 2019 symposium was the best event of the year!"

Dave Peters, EWA Co-Chair



The way lived experience delegates were on an equal footing with academics and bureaucrats and clinicians led to some really valuable conversations and discussions.

2022 Lived Experience attendee

Coordinated by a collective working group representing the diverse supporter base, the Symposium has generated innovative presentations on research, policy development and practice across topics such as:

- Peer workforce
- Young people
- Smoking
- Lifestyle
- Substance use
- Older people
- Training and development
- Carers
- Improving access
- LGBTI
- Human rights
- Informed consent and informed consumers

- Comprehensive care
- Shared care coordination
- Aboriginal and Torres Strait Islander health
- Services and systems
- Translating research into practice
- Exercise Nutrition
- Engagement and connection

Middle:

Ivan Frkovic

speaking at the

2022 Symposium.

- Chronic disease
- Lived Experience
- Peer navigators
- Medication

Through themes such as "Equally Well in Action", "Action and Collaboration for Hope and Health" and "Becoming an Equally Well Country: Working collaboratively to reduce health inequality", the Symposium has helped spread the message of hope for the future in which physical health can and should be a priority in prevention, treatment and care for people with mental illness.

Top Left: Chris Maylea, Nic Juniper, Tom Wood, Tessa Zirnsak.

Bottom Left: Rosemary Calder, Dave Peters, Russell Roberts, Mal Hopwood.

Top Right: Panel Session at the 2022

event with Vicki Langan, Fay Jackson and Andrew Watkins. Bottom Right: Sam Manger speaking at the 2022 Symposium





Measuring up to our committment cont'd

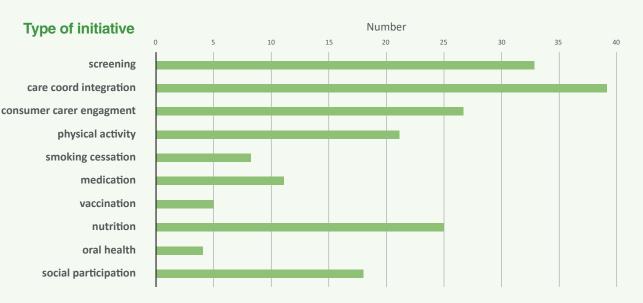
National Initiatives and Activities Scan 2022

In 2022 we conducted the third Equally Well Initiatives and Activities Scan. The scan achieved an outstanding response rate of 73% of our supporters, however, there are still a significant number of initiatives not captured by this scan. Further, we also know that many organisations have not commenced their Equally Well journey yet, so there are great opportunities to do better.

We have mapped this extensive work from the Equally Well supporter organisations against the criteria outlined in the National Consensus Statement. This is where the accountability for collective action is happening. This important research tells us a story that while there are hundreds of life-saving initiatives underway, there are still opportunities to do better.

- Smoking one in two long term smokers dies of smoking-related illnesses and while the percentage of smokers in Australia has been plummeting in the last 20 years, it remains unchanged for people living with mental illness.
- Vaccination people living with mental illness are 7 times more likely to be hospitalised and 5 time more likely to die due to vaccine preventable conditions. A flu vax costs \$20. A night in hospital costs \$2,000.
- Oral Health poor oral health has major negative impacts on immunological, cardiovascular and other body systems, yet appears to be an area receiving least attention.

The scan is just one measure of the impact of the last 6 years of Equally Well. In the following pages we will share examples of how Equally Well is making an impact in its commitment to the National Consensus Statement.



Areas of activity and opportunities for action

This graph charts the number of initiatives and activities grouped by specific categories from the 2022 Equally Well National Initiatives and Activities Scan

Case studies from around the Equally Well network

These are the Six Essential Elements of the National Consensus Statement and the values that guide the mission of all those who are part of the Equally Well movement.

Significant progress has been made in implementing the 48 actions of the Equally Well National Consensus Statement. Since then the physical health of people living with mental illness is;

- a priority of the Fifth National Mental Health and Suicide Prevention Plan
- a recommended "Priority Reform" and "Start Now Reform" of the Productivity Commission Inquiry into Mental Health
- a commitment of the National Mental Health and Suicide Prevention Agreement
- a priority of Joint Regional Planning Guidelines for Integrated Mental Health and Suicide Prevention Services for PHNs.



Equally Well Alliance members Dave Peters and Vicki Langan.

The Six Essential Elements



Element 1

A holistic, person-centred approach to physical and mental health and wellbeing



Element 2

Effective promotion, prevention and early intervention



Element 3 Equity of access to all services



Element 4 Improved quality of health care

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Element 5

Care coordination and regional integration across health, mental health and other services and sectors

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Element 6

The monitoring of progress towards improved physical health and wellbeing



Element 1

A holistic, person centred approach to physical and mental health and wellbeing



Lived experience is at the heart of the work within Equally Well with co-design principles the foundation of the work.

We commit to improving the capacity of all involved in mental health to provide the best evidence-based practice in physical care for people living with mental illness.

People living with mental illness, their families and other support people will be empowered by understanding their rights, being active partners in planning for their care, and being equipped with the knowledge and tools to advocate for, co-design, and partner to provide and monitor, quality health care.

The national scan identified 45 activities that displayed a holistic, person centred approach. Some examples of this element in action are included in the case study examples.

Case study examples

Lived Experience Australia and Equally Well Review of Physical and Mental Health Care in Australia

In 2021, peak advocacy organisation Lived Experience Australia, along with Equally Well Australia, conducted research to understand the level of support and focus on the physical health needs of people living with mental ill-health from the health and mental health professionals they accessed.

The report produced from this research presents a national collective voice of consumers' and carers' experiences.

Being Equally Well Roadmap

The Being Equally Well roadmap is a resource for GPs, for other primary health care and mental health professionals and services, for PHNs, and for local hospital and health districts and networks. It is also a map for governments and health system administrators, as frontline health professionals cannot achieve sustainable change without system improvements to support them.

The roadmap details other system enhancements that are needed to support the frontline of care in doing more to improve the physical health of individuals.

Mental Health Stepped Care Model - Holistic Care

The Eastern Melbourne Primary Health Network has developed a Mental Health Stepped Care Model (SCM) which seeks to respond to the National Mental Health Commission's recommendations for new care models designed to deliver substantive reform.

The model provides mental health services across the continuum of need, for people requiring lowintensity support to higher levels of support.

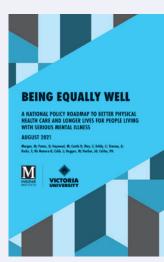
The model is person-centered, recovery-focused, and integrated with other services including ensuring that GPs are at the centre of the consumer's care playing a central role in managing physical health needs.

Image Captions

Lived Experience Australia and The Mitchell Institute reports are two examples of active partners in planning for and equipping consumers and carers. Ambassador Reza Rostami promotes Equally Well to refugee communities.



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Element 2

Effective promotion, prevention and early intervention



We commit to promoting physical health and a contributing life by proactively facilitating early detection and intervention, thereby reducing avoidable physical illness.

Services will focus on promoting a healthy lifestyle, intervening early to stop physical diseases from developing, and providing psychosocial supports which contribute to overall wellbeing.

People living with mental illness who smoke will be offered tailored support to quit smoking.

The scan revealed 81 activities that had a significant emphasis on promotion, prevention or early intervention. Some examples of this element in action are included in the case study examples.

Case study examples

Neami National Physical Health Prompt and Health Prompt for older persons

Neami National have rolled out their physical health prompt across Australia.

This guides and ensures clinicians have discussions with consumers about all aspects of their physical health.

Flourish Australia's Physi-cards and Physi-cards online

This interactive person-led tool supports people to regularly review their health, notice changes, and enables person-led conversations about physical health with clinicians.

Healthtalk Physical Health Resources

The lived experience of people accessing mental health services has been the focus in the development of this resource created by a partnership between researchers from Equally Well, Charles Sturt University, RMIT and La Trobe University in offering hope for users of mental health services in improving their physical health.

The latest addition to the Healthtalk Australia website addresses these needs through consumer stories and a series of digital resources that aim to offer a sense of hope and support for people helping them with specific resources for clinicians, health practitioners and consumers.

WellMob Digital Resources

E-Mental Health in Practice (eMHPrac) is a support service funded by the Australian Government to build digital mental health awareness and skills in primary care practitioners across the country. One of eMHPrac's recent initiatives is the development of WellMob, a website that brings together online social and emotional wellbeing (SEWB) resources for Aboriginal and Torres Strait Islander people.

Smoking Cessastion

Queensland Public Mental Health Alcohol and Other Drug Services have been implementing routine screening for smoking and delivery of a smoking cessation brief intervention to support people experiencing mental illness and substance use disorders to quit smoking. Together with a partnership with Queensland Quitline, these strategies have contributed to a 1.5% reduction in the Queensland Community Mental Health Services Smoking rate from 2018 to 2022, equating to approximately 430 lives saved over five years.

Image Captions

Co-designed and delivered digital health resources from Neami, Healthtalk and WellMob are improving prevention and early intervention in physical health care for people living with mental illness and their carers. Jade Ryall and Russell Roberts promoting Flourish Physi-cards.









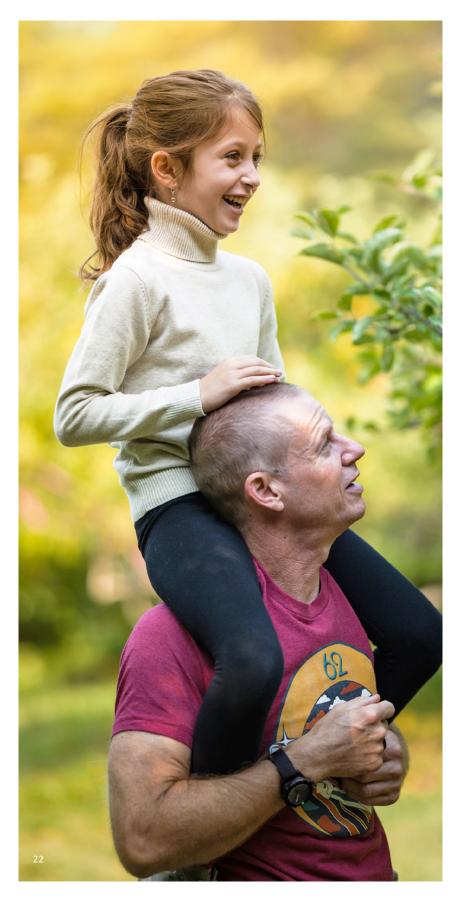
national Improving national Median





Element 3

Equity of access to all services



We commit to promoting ways to provide improved and more equal access to health services, hospital and specialist care.

Alternative service provision and funding mechanisms may have to be considered to improve access to general practice, nursing, allied health, Aboriginal and Torres Strait Islander health, community health and dental services.

People living with mental illness will not be discriminated against because of their mental illness. They will have equal access to primary health, hospital, specialist and healthy lifestyle support services.

We will work to ensure people living with mental illness have equal access to secure housing, sufficient and nutritious food, education, employment, community participation and a safe environment. These underlying factors determine health and mental health, and are fundamental to help people live a contributing life and build thriving communities.

Our partners reported 65 activities in the national scan that had a strong emphasis on attaining greater equity of access to quality care and social supports. Some examples of this element in action are included in the case study examples.

Case study examples

Equally Well consumer resource project

A team from La Trobe University is leading a program to produce a co-designed resource to empower and equip consumers to access the quality and comprehensive health care they deserve.

Nurse led mobile vaccination clinic

The Eastern Suburbs Mental Health service and the Central Eastern Sydney Primary Health Network runs a peer and nurse led clinic in collaboration with the Kirkton Road Centre. This model was effective in achieving comparable vaccination rates to the general public.

Live Well Program older persons mental health

The South Western Sydney Primary Health Network and South Western Sydney Local Health District, Older Peoples Mental Health (OPMH) Service have partnered to deliver the Live Well project which seeks to empower clinicians to encourage positive lifestyle changes in people aged 65 years+. This intervention uses behavioural activation techniques to promote healthy lifestyles to improve health, wellbeing and resilience.

Dental health services

Provision of dental services to inpatients at the Adult Mental Health Rehabilitation Unit (AMHRU) situated in the University of Canberra Rehabilitation Hospital. Fortnightly visits providing dental screenings, oral assessments, oral health prevention, smoking cessation, and dietary assessments and advice and a mobile dental van on-site at the University of Canberra Hospital.

Quit Victoria - Centre of Research Excellence on Achieving the Tobacco Endgame - University of Queensland

In 2021, with funding from the Australian Government, Quit launched the Quit Centre Victoria to provide health professional resources and accredited/endorsed training for primary care health professionals that support the provision of best practice smoking and vaping cessation care. The Quit Centre team also provided feedback to the Royal Australian and New Zealand College of Psychiatrists on their smoking and vaping cessation materials.

Image Captions

Programs to target smoking cessation and support older people to live well longer are being delivered as a priority by Equally Well partners.

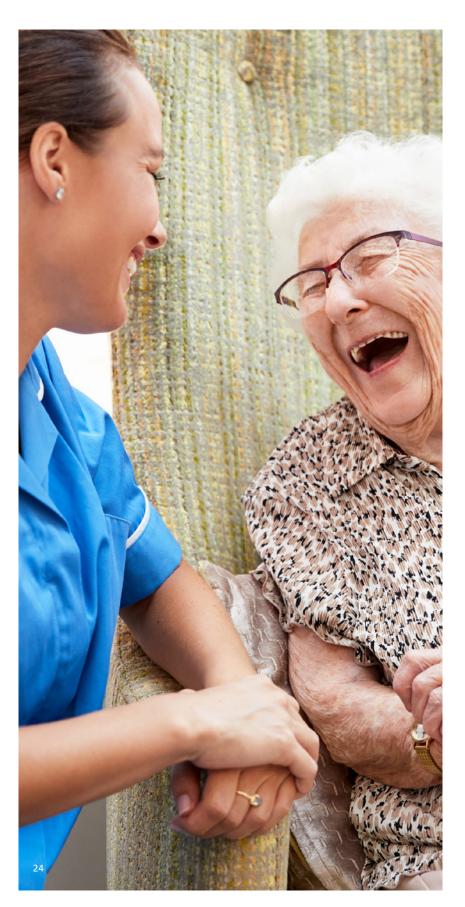


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Element 4 Improved quality of health care



We commit to quality, evidencebased physical health care for people living with mental illness. Intervening with biopsychosocial care of mental illness (that is, taking into account various biological, psychological and social factors) as early as possible is key to improving physical health.

Physical and mental health influence one another; a lack of care of one can lead to serious problems with the other.

Health and mental health workers will understand their role in integrated health care, including their responsibility to ensure people living with mental illness receive quality physical health care.

Mental health services will ensure physical health checks, and programs to maintain and improve physical health are an integral part of the care of people living with mental illness.

Not surprisingly, actions to enhance the quality of care were the most frequently identified focus element (n=147) of the initiatives reported by our supporters in the national scan. Some examples are summarised in the case study examples.

Case study examples

Food and Mood Program

Under the leadership of Dr Sam Manger and Dr Tetyanna Rocks, The Australasian Society for Lifestyle Medicine, Monash University Food and Mood Centre, James Cook University and the Equally Well team have partnered in the development of a comprehensive education package for optimal physical health care for people living with mental illness.

Mindgardens

Keeping the Body in Mind project is one of the award-winning programs from the Mindgardens Neuroscience Network, based at the University of NSW. Along with world-leading research on mental health, drug and alcohol and neurological conditions. This program is an example of a collaboration between clinicians to offer referrals for physical health checks as a priority in people with severe mental illness offering eight free sessions with an exercise physiologist.

North Western Melbourne Primary Health Network

This project offers the delivery of integrated chronic care to clients who are at risk of experiencing one or more physical health conditions. This wrap-around program is focused on ensuring that consumers are linked with nurse function within the program and that suitable referrals are made to GPs, specialists, and allied health service providers.

The Mudgee GP Clinic

The community mental health team at Mudgee, NSW has partnered with the local GP practice to run a weekly clinic where people are seen by both the GP and the mental health worker at the same time. Robust to changes in practice managers and GPs, this clinic has lead to substantial improvements in health, and dramatic decreases in unplanned hospital admissions and ED presentations.

Image Captions

Australaisan Society of Lifestyle Medicine and Mindgardens Neuroscience Network are two examples of organisations researching and improving awareness of how physical and mental health factors influence each other.









Keeping the Body in Mind is a:

- Free service for people living with severe mental illness
- Involves up to 8 sessions with an accredited exercise physiologist
- Provides additional exercise resources beyond these sessions

The Fifth National Mental Health and Suicide Prevention Plan

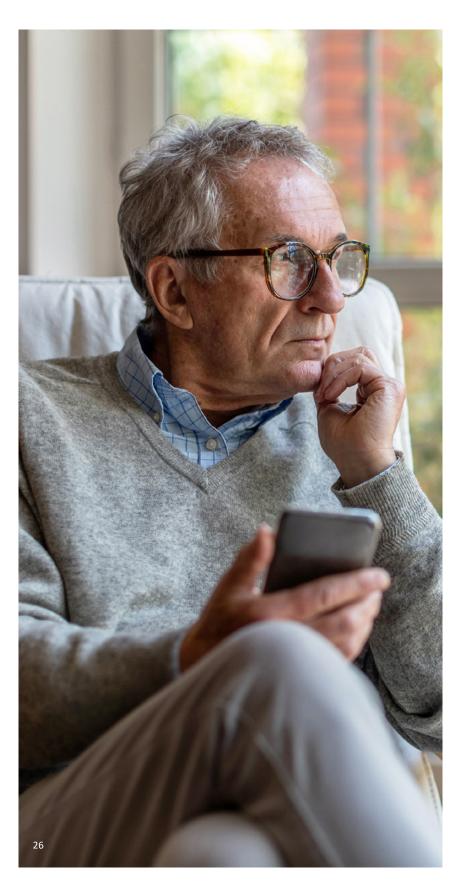


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Element 5

Care coordination and regional integration across health, mental health and other services and sectors



We commit to providing integrated care, delivered seamlessly across health, mental health and social services to improve physical health as well as psychological and social recovery.

This involves national leadership and regional coordination to ensure existing, new and emerging services work together effectively to improve the physical health of people living with mental illness.

E-health refers to health related services and information delivered online. Establishing effective e-health solutions to enable both quality care and care coordination should be progressed as a priority.

Our scan of activity revealed 71 initiatives which sought to enhance care coordination. Examples of activities that address this essential element appear in the case study examples.

Case study examples

While You Wait - GP Resource Suite

The While You Wait GP Resource Pack was developed with a small group of GPs and lived experience representatives through funding from the NSW Mental Health Commission, Health Literacy Initiative and support from researcher Kath Thorburn. These resources support GPs and their clients in planning for managing wellbeing while waiting for mental health services.

Commissioned Service - Shared Care

In this shared care model between the South East Sydney Local Health District, Sydney Local Health District, and St Vincents Health Network Sydney, the program supports the physical health of people with severe mental illness who are clients of community mental health services and/or who are transitioning from secondary to primary care.

Cancer Australia 10-Year Plan

The 10-year Australian Cancer Plan has recognised people living with mental illness as a priority group due to the collective efforts for input from the Equally Well collective into the National Cancer Plan.

Living Well, Living Longer Program

The Living Well, Living Longer Program is a targeted program available for all consumers of Sydney Local Health District Mental Health Services. The program includes targeted activities and initiatives to improve health and wellbeing, as well as ensuring that all mental health consumers are offered screening for metabolic syndrome. This helps reduce dangerous cardiovascular risk factors including abdominal obesity, raised plasma glucose, raised cholesterol, and elevated blood pressure.

Image Captions

Finding pathways to providing integrated care across the health sector is critical to the success of the Equally Well mission. These examples from GP's to policy, demonstrate some of the ways this is happening across the network.

Avoidable Tragedy? World Health Organization Management of physical health "<u>Preventable</u> physical conditions in adults with severe mental disorders health conditions lead to premature mortality in The HO GUIDELINE people with severe mental Australian disorders... (which are) commonly overlooked, not Cancer Plan only by themselves and FOUNTAIN (A) World Health Organization people around them, but (A) World Health Health Sydney Local Health District also by health systems." BUILDING THE FUTURE Sydney Local Health District ONSULTATION DRA





Element 6

The monitoring of progress towards improved physical health and wellbeing



We commit to supporting the development of health and wellbeing targets and indicators to measure progress towards our goal of improving the physical health of people living with mental illness at national, state/territory and regional levels.

We will have information and research systems to monitor progress and support ongoing service accountability and improvement.

Activities with a strong element addressing measurement at the national, state or regional level were identified in 21 of the activities reported by our supporters in the national scan.

Some examples of this element in action are included in the case study examples.

Case study examples

Equally Well Data Linkage Project

The data linkage project is a unique partnership between the Australian Bureau of Statistics and Equally Well to measure our nation's progress in addressing the life expectancy gap for people living with mental illness.

Healthy Minds, Healthy Bodies, Data Project

The Data and Analytics Branch of the Australian Government, Department of Health and Aged Care is conducting major data analytics projects to calculate life-expectancy gaps and estimate age of onset of chronic conditions for people with mental health-related diagnoses.

Vaccine preventable hospital admissions for people using mental health services

The data published on vaccine preventable hospital admissions for people using mental health services is part of building the evidence to continue to help move the work forward in our collective aim for equality of health care for people living with MH conditions and demonstrates leading-edge research.

Sara, G., Chen, W., Large, M., Ramanuj, P., Curtis, J., McMillan, F., ... & Burgess, P. (2021). Potentially preventable hospitalisations for physical health conditions in community mental health service users: a population-wide linkage study. Epidemiology and Psychiatric Sciences, 30, e22.

Breast cancer screening participation in women using mental health services in NSW, Australia: a population study

This research shows only 30.3% of mental health service users participated in breast screening, compared with 52.7% of other NSW women. There is no current Australasian data to support health system planning and improvement strategies. Low breast cancer screening participation rates for NSW mental health service users suggest significant risk of later detection, possibly leading to more extensive treatment and premature mortality.

Lambeth, C., Burgess, P., Curtis, J., Currow, D., & Sara, G. (2023). Breast cancer screening participation in women using mental health services in NSW, Australia: a population study. Social Psychiatry and Psychiatric Epidemiology, 1-8.

Equally Well National Initiatives and Activities Scan and the Equally Well National Research Scan

Coordinated by the Equally Well project team these scans are measuring the impact and progress of the collective movement for change and impact on improving physical health for people living with mental illness. Painting a collective picture of all the work and research being undertaken to improve the physical health of people with a lived experience of mental health issues. By identifying, sharing, and learning from a diversity of approaches we can enhance how we work together towards this common goal.

Image Captions

Research in breast screening rates and vaccination preventable hospital admission, for people with mental health conditions, are some examples of monitoring progress towards health equity from across the Equally Well network.



Call 13 20 50

For women aged 50

Vaccine preventable hospitalizations in mental health service users: a booster is needed

Grant Sara, Michael Lau, Wendy Chen, Myu Arumuganathan, Fred Wu

InforMH, System Information and Analytics Branch, NSW Ministry of Health Northern Clinical School, Faculty of Medicine and Health, University of System



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Equally Well Supporters

ACT Government, Health ACT Primary Health Network Adelaide Primary Health Network Amaranth Foundation Australasian Society of Lifestyle Medicine Australian & New Zealand Mental Health Association Australian Association of Social Workers Australian Nursing and Midwifery Federation, VIC Branch Australian Primary Mental Health Alliance Australian Psychological Society Being Bendigo Community Health Services Bridges Health & Community Care Brisbane North Primary Health Network Central and Eastern Sydney Primary Health Network Central Queensland, Wide Bay, Sunshine Coast Primary Health Network Centre for Rural & Remote Mental Health **Charles Sturt University** Consumers Health Forum of Australia Country SA Primary Health Network Dietitians Association of Australia Eastern Melbourne Primary Health Network eMHprac Exercise & Sports Science Australia Flourish Australia Government of South Australia. SA Health Government of Western Australia, Department of Health Government of Western Australia, Mental Health Commission GP down south Grow Guardian Exercise Rehabilitation HAES Australia headspace

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