A publication from the Mental Health Coordinating Council



The evidence continues to build in support of greater investment in community-based mental health services. The Australian Institute of Health and Welfare (AIHW) has just released its 2017/18 data which demonstrates that mental health related presentations to emergency departments continue to grow. Earlier this month the Australasian College for Emergency Medicine (ACEM) released a consensus statement calling for additional community-based mental health care and said "more work needs to be done to build and sustain a functioning, integrated mental health system that supports the prevention, early intervention and better management of mental health needs for children, adolescents and adults."

The statement emerged from a National Summit last year, where the results of a survey were shared showing while 4% of emergency department presentations are due to mental health and behavioural conditions, they comprise 19% of people waiting for hospital-based treatment and 28% of people experiencing difficulties in accessing any mental health treatment at all. It is indeed telling that doctors working in emergency departments acknowledge "that many mental health presentations to emergency departments occur as a result of chronic underfunding in community treatment settings for both mental health and drug and alcohol."

Of course, community managed mental health organisations have been demanding reform to meet these needs for decades. In NSW, the number of mental health related emergency department presentations has risen by 76% between 2004/5 and 2017/18 and MHCC member organisations experience first-hand the challenges many people living with mental health conditions face in getting the support they need, when and where they need it.

It is welcome news to hear other organisations support a rebalancing of community and hospital-based mental health services, because meaningful reform requires advocacy from all who work to improve access to mental health treatment, rehabilitation and support services. This is particularly so now when mental health is under the spotlight as never before with a Productivity Commission's inquiry into mental health, a Royal Commission in Victoria and the National Royal Commission into Disability, including psychosocial disability.

So what needs to change? More resources need to be invested in mental health services with a shift in emphasis towards early intervention and community-based support. Services must be trauma-informed and recovery oriented, with people with a lived experience of mental health conditions codesigning programs and service delivery.

The system should be easier to navigate, with a greater focus on integrated and coordinated care with all parts of the mental health sector and other health and human services working together and understanding and respecting each other's roles and contribution. There must be a coherent workforce development strategy that is supported locally and by state and national governments. Above all we need leadership at all levels of the system to ensure that people living with mental health conditions and their families get the support they need to live meaningful and contributing lives.

VIEW from the peak FROM THE CEO MHCC PROJECTS VIEW from the peak



Every group nominated workforce as a key issue

Since our last edition, it has been election season, with both state and federal elections occurring within months of each other. The federal election saw some good mental health commitments, although neither side put forward a comprehensive, overarching policy to reform and improve mental health services. MHCC will now work with our national body, Community Mental Health Australia, to ensure implementation of the promises made.

During the NSW election, MHCC wrote to political parties with our four key mental health priorities and published their responses on our website. We were pleased to see all major political parties indicate support for improved mental health services in NSW. Since the reelection of the Berejiklian Government, MHCC had a very productive meeting with the new Minister for Mental Health, the Hon Bronnie Taylor, and we look forward to working with Minister Taylor to progress our priorities.

The Productivity Commission Inquiry into mental health provides another opportunity to advocate for change and greater investment in prevention, early intervention and community-based support. MHCC made a <u>submission</u> setting out the role and value of community managed mental health organisations and putting forward recommendations for change.

One recommendation was that funding and policy settings ensure a skilled and experienced community based mental health sector workforce - I was reminded again of the importance of this when at a recent Mental Health Australia/PHN forum, every group nominated workforce as a key issue. MHCC will continue to focus on workforce over the coming months.

There was also discussion at the forum about the Australian Government's announcement to provide an additional 12 months support for people transitioning from Commonwealth mental health programs. While this is welcome, a lot of detail remains unclear. What is clear is that working with PHNs is more important than ever for CMO's and the recent MHCC CEO forum provided a valuable opportunity to hear from Julie Sturgess, Chief Executive of North Coast PHN, about how to effectively engage with PHN's along with addresses from the Safeguards and Quality Commissioner Graeme Head and NSW Mental Health Commissioner Catherine Lourey. I hope you enjoy the May View From the Peak.

Regards Carmel

# In this issue From the CEO 2 Community co-design projects 3 Mental Health Rights Manual 4 CMHDARN Project Officer 5 Certificate II Pilot 6 Safe Storytelling 7 YES and CES Project 8 Members Profile: Aftercare 9 Resources 10 NDIS update 11

# MHCC Move to Company Limited by Guarantee

The Mental Health Coordinating Council have completed the conversion from an incorporated association to a company limited by guarantee registered under the Corporations Act. This follows resolutions approving this course of action carried at the 2018 AGM.

MHCC will now be known as the Mental Health Coordinating Council Limited. This does not change MHCC's role as the peak body representing community managed mental health organisations nor our status as a charitable benevolent institution and registration as a deductible gift recipient.



# Expanding Community Engagement: Reimagine Today

Peer Leaders for MHCC's Reimagine Stage 2 project have been working tirelessly to build networks in NSW/ACT, NT, QLD, SA, TAS and VIC. With the support of host mental health peaks in each state/territory, the Peer Leaders are working with communities to share information about reimagine.today, the NDIS and psychosocial disability, and are forging relationships with health services, communities, community mental health services and individuals. These networks include people living with psychosocial disability, their carers, family and professional supporters. They continue to promote the use of the reimagine.today resource and support skill-building for people in their journey of accessing the NDIS.

Our Peer Leaders are working with diverse communities across the country as part of a codesign process to enhance existing materials on reimagine.today. Priority groups include people from culturally and linguistically diverse (CALD) communities, LGBTIQA+ people, Aboriginal and Torres Strait Islander communities and people living in rural and remote areas. Our first co-design sessions are in April and May across Australia.

Engagement through peer-led networks aims to build the capacity and skills of people with psychosocial disabilities in self-advocacy, decision making and self-management of their NDIS access. Peer Leaders will run a workshop in late May in Western Sydney for people with a psychosocial disability and their supporters, including sessions on reimagine.today, skill-building, and a brief consultation on enhancing content for the reimagine.today website.

The Peer Leader team is continuing to grow stronger. We met for our second face-to-face workshop in Sydney on 5-6 March. This was a successful step in continual team building, through further development of connections and capacity building activities for Peer Leaders. This work directly contributes to the strengthening of the peer workforce.



#### What is Reimagine Stage 2?

The Reimagine Stage 2 project is funded by the NDIA through the National Information, Linkages and Capacity building (ILC) Readiness Grants. It focusses on the enhancement of MHCC's resource reimagine.today – a free online resource that supports people living with mental health conditions to access the NDIS.

Launched in 2017, the reimagine.today website was developed by MHCC in partnership with the NDIA in collaboration with people with lived experience of mental health conditions.

Website improvements will improve accessibility for Aboriginal and Torres Strait Islander people, people from culturally and linguistically diverse communities, LGBTIQA+ people and people living in rural areas. New materials will focus on selfadvocacy, decision-making and self-management of an NDIS plan. A website relaunch is planned by June 2020



To get involved contact Rebecca Lewis on (02) 9555 8388 (ext 113) or email Rebecca.l@mhcc.org.au

2 May 2019 May 2019

VIEW from the peak

MHCC UPDATES

CMHDARN

VIEW from the peak

# NSW Mental Health Rights Manual: Your Rights and the NDIS

MHCC recently launched a new chapter of the well-established and respected <u>NSW Mental Health Rights Manual</u>, which continues to empower, support and inform people looking to better navigate mental health-related service systems in NSW.

The new chapter focuses on the NDIS and the rights of people with psychosocial disability engaging with the NDIS, a scheme which has the capacity to significantly improve the quality of life of people living with psychosocial disability. The new chapter is an important resource for consumers of mental health services, their carers, and people working in the mental health sector.

The chapter includes sections which outline the functions of the NDIS, the services and supports the scheme can offer and how to navigate the scheme. It also describes the legal framework which underpins the NDIS, how to ensure your rights are being met and the structures in place to monitor the quality and safeguards of NDIS services.

A new list of NDIS resources has also been added to the Mental Health Rights Manual.

Find the Mental Health Rights Manual at mhcc.org.au/our-work/resources





### Summary Report and Landscape Review

**Safeguards and Monitoring:** Protecting the Rights of People Receiving Care and Support in Community-Managed Mental Health Organisations in NSW

Mental health community-managed organisations (CMOs) play a crucial role in achieving the goals of the Fifth National Mental Health and Suicide Prevention Plan and Living Well: A Strategic Plan for Mental Health in NSW. Both plans envision an expanded role for CMOs with an emphasis on safeguards, monitoring and compliance. Major changes to the service delivery environment have increased the focus on safety and quality. These changes include the NDIS, which has quality and safeguards framework, community-based services now being commissioned by PHNs and NSW Health, and CMOs providing services under different Commonwealth or state funded programs, integrated at the point of service delivery.

MHCC investigated whether there is a need for further or changed safeguarding and monitoring in light of this transforming service delivery environment. We examined the function and effectiveness of safeguarding and monitoring mechanisms across community-managed mental health services, supported by project funding from NSW Health Mental Health Branch.

Our analysis was informed by consultations and a Landscape Review that outlines the national and state policy context and documents the safeguarding and monitoring mechanisms that apply to CMOs providing psychosocial supports in NSW.

The project identifies the implications of reforms for NSW mental health CMOs that are registered NDIS providers, as well as those who are not. The project also documents models of international and interstate safeguarding and monitoring for CMOs providing psychosocial supports, drawing tentative conclusions to be tested through further research and consultation.

Contact corinne@mhcc.org.au for further information

Find the Summary Report at <a href="mailto:mhcc.org.au/our-work/publications">mhcc.org.au/our-work/publications</a>



# Introducing Jo Penhallurick, CMHDARN's new Project Coordinator





Jo spent the last ten years working in not-for-profit community-based organisations in Australia and the USA, in both front-line roles and management of programs and projects.

"My roles have spanned a diversity of service contexts including homelessness and social housing, LGBTI counselling, mental health and community health. Recent roles include Program Manager at Community Options and Quality Improvement Coordinator at Weave Youth and Community Services. My work has centred around implementing ethical systems of practice to support the valuable work undertaken by the community-based workforce. I have an Honours degree in psychology from Sydney University and a passion for the use of both qualitative and quantitative data to inform best practice in a meaningful and sustainable way. I am keen to promote research and data collection that is representative of our communities, which is accessible and translatable into practice, so that it can be utilised to its utmost. I have worked with a number of minority and/or marginalised communities and I am fascinated by the extra layers of complexity involved in conducting ethical research in these areas.

"I am excited to be working for MHCC, NADA and the Mental Health Commission of NSW and coordinating CMHDARN. I have been interested in and a member of the Network for some years. I very much look forward to meeting network members and others from a diversity of services across both the mental health and AoD sectors, as well as supporting and making research connections happen."

You can contact Jo at <a href="mailto:info@cmhdaresearchnetwork.org.au">info@cmhdaresearchnetwork.org.au</a> or on (02) 9555 8388

#### About the network

CMHDARN is a partnership between Mental Health Coordinating Council (MHCC), the Network of Alcohol and other Drugs Agencies (NADA) and the Mental Health Commission of NSW. It was established in 2010 to broaden involvement of the community mental health and alcohol and other drugs sector in practice-based research and to promote the use of research in practice.

4 May 2019 May 2019

# Transition to Work and Study Project

MHCC has been funded by NSW Health to run a new pathway qualification to further the education opportunities for people wishing to gain work in the sector. As a Registered Training Organisation with more than 30 years' experience in the sector, MHCC was well-placed to hear the concerns of people wishing to study and gain work, but facing barriers to completing the Certificate IV qualifications.

Some of the feedback we received from peer work students is that they would like to study further to advance their standing in the mental health sector, but find the requirements and length of the CHC43515 Certificate IV in Mental Health Peer Work onerous.

To gain entry to Certificate IV in Mental Health Peer Work, students must secure a peer workplace placement; this can be difficult to attain for people with minimal workplace experience.

In addition, some students can find educational settings challenging if they have not studied for some time.

MHCC's CHC22015 Certificate II in Community Services provides a stepping stone for these students, to gain confidence and skills in a supported learning environment. We hope many of our Certificate II students go on to complete the Certificate IV in Mental Health Peer Work.

The pilot of the Certificate II started in February this year and is due to be completed in June. MHCC was able to offer 22 students fully-funded places in this qualification, with NSW Health providing the funding.

Our students have come from a great variety of cultural backgrounds, ages and experience. All identified as consumers or carers, some had completed prior studies and others hadn't.

Feedback from the first training day in February was highly positive and indicated potential demand for future training.





We've been funded by NSW Health to run 4 more of these qualifications over the next two years; 2 in Sydney and 2 in regional areas.

#### Participants said...



"I thoroughly enjoyed the pace and participation"

"I learned that good communications skills are paramount - both verbal and non-verbal"

"The group work and examples were very helpful"

"My understanding of workplace communications, rights and obligations has really improved"

## MHCC's Newest Course - Safe Storytelling

MHCC is excited to offer a new half-day course, Safe Storytelling, which was developed by our trainers with lived experience in response to sector demand. Safe Storytelling is for workers who use their lived experience and personal stories when supporting people. The workshop covers purposeful, meaningful and sustainable storytelling, which can be used when workers are required to share their lived experience with consumers. It is also suitable for managers who wish to update their knowledge on safe disclosure and the principles of safe storytelling.



The next course will run in Sydney on June 6



# Training in Regional NSW: Graduation in Orange

In February, two graduates of MHCC's highly popular CHC43515 Certificate IV in Mental Health Peer Work, met with staff for a graduation ceremony in the Central West town of Orange, to celebrate their success.

The graduates, employees of Western NSW Local Health District, met at the Centre for Remote & Rural Mental Health in Orange. The graduation ceremony provided the opportunity for MHCC to also run a public information session on the Certificate IV Mental Health Peer Work training, running in Dubbo in mid-April. The Certificate IV is also being offered in Broken Hill, far west NSW, at the end of May.

In recent months MHCC has held professional development training in **Tamworth, Canberra and Coffs Harbour** 



May 2019

VieW from the peak View from the peak MEMBER PROFILE MHCC PROJECTS

# Your Experience of Service YES & CES Project 🗒



Jun 2020

Recommendations

for ongoing

Experience

Measurement in

**NSW CMO Sector** 

In 2018 the Community Managed Organisations Your Experience of Service and the Carer Experience Survey Project (CMO YES & CES) was established. The project demonstrated the NSW Government's commitment to greater accountability and transparency in response to the NSW Mental Health Commission's Living Well report.

The YES & CES project will support consistent experience measurement in NSW mental health CMOs. to allow services to understand consumer and carer experiences. MHCC is working with InforMH, an analytics branch of NSW Health, and MHCC members to ensure only they receive the feedback that relates to their service delivery type category.

Twelve CMOs are participating in the Advisory Working Group (AWG), working with MHCC and InforMH to develop the lived experience measurement. The AWG will consult the sector on issues raised during pilot implementation, such as survey use, impact on practice for consumers and carers, service culture and the business processes of CMOs.

The YES questionnaire, which is the first cab off the rank, is designed to gather information from consumers about their experiences of care. It aims to help mental health services work with consumers to build better services. The second pilot, CES, will similarly gather evidence from carers of people using mental health CMO services. The YES questionnaire was developed with mental health consumers based on recovery principles described in the 2010 National Standards for Mental Health Services.

The YES questionnaire data is confidential and does not include personal identifiers, such as a medical record number. Services will receive feedback combined under a particular service type. Feedback will help organisations identify what they do well and areas for improvement.

We are at the information gathering stage and expect the pilot to be trialled in July and August, when CMOs will start offering the questionnaire to service users. Evaluation will occur after 12 months. The pilot is expected to run for a year-and-a-half ending June 2020. This will include the YES CMO and CES design and implementation, and implementation of e-YES.

Jun 2018 Phase 2: YES Pilot **DELIVERABLES** Phase 1: Project Establishment · Guideline for **DELIVERABLES** implementation **DELIVERABLES** Framework

- Establish project team at InformMH
- Establish project steering group • Confirm
- governance Confirm resources
- Confirm project scope and plan

Sep 2018 Jul 2019 Sep 2019 Phase 3: CES Pilot Phase 4: eYES Pilot · Guideline for **DELIVERABLES** implementation for service · Framework for · Amendments to the improvement using experience service improvement YES and CES guidelines measurement that uses YES and to include offering **CES**  Artwork for YES the questionnaire Artwork for CES questionnaire electronically questionnaire and and supporting · Electronic version of supporting materials YES developed and materials · Scanning, data • Scanning, data available for use in the extraction and data extraction and data sector storage process storage process · eCES available for use in developed developed the CMO sector Taxonomy Reports developed of services and distributed Recommendations established including process for ongoing implementation in for de identifying the sector services · Reports developed and distributed Recommendations for ongoing implementation in the sector

we feature Aftercare, an MHCC member for more than 30 years. Aftercare

As Australia's longest serving mental health services organisation, Aftercare has helped transform the lives of people with mental health concerns for more than 110 years. Aftercare is a specialist mental health provider, focusing on serving those with particularly severe and complex needs. Aftercare's mission is to enhance the social and emotional wellbeing of clients through its belief in social justice and commitment to collaborative learning and recovery.

Over the past 110 years, Aftercare has grown to become a national leader in the provision of nongovernmental mental health services and offers more than 54 programs in NSW, Queensland and Victoria. Clients can access care and support ranging from assistance with developing the skills required to manage day-to-day tasks to fully-supported accommodation for those with persistent and complex needs. Aftercare offers community services, residential services, and integrated services to help clients lead fulfilling, independent lives.

Aftercare partners with leading organisations such as headspace and LikeMind to deliver specialist services to youth, adults and families.

As an NDIS provider, Aftercare assists clients in the application process and the development of individual plans. Aftercare has had a major focus on addressing the high demand for housing support under the NDIS. It operates several residential services, supporting more than 100 people. The emphasis is on each person's individual strengths; helping them build resilience and enhance their opportunities for social inclusion.

Aftercare has grown to become a national leader in the provision of non-governmental mental health services and offers more than 54 programs

One of Aftercare's recent initiatives is to develop integrated service projects that offer holistic, personcentred hubs for clinical care and psychosocial support. Aftercare partners with health providers and social service agencies to deliver a range of psychosocial support services in one place. The Poppy Centre in Queensland specifically works with young children and their families, whilst our Floresco centres work with adults and their carers.

Aftercare is dedicated to ensuring clients and others in the community receive the help they need for their mental health concerns and continues to change and innovate to better meet those needs.



To become an MHCC member visit our website mhcc.org.au/membership

provide support and care for someone who experiences vental ill-health or Aftercare carer support MHCC is a member organisation. Our members help shape the future of mental health policy in NSW. Here

May 2019 May 2019 View from the peak RESOURCES NDIS

# MHCC presents new resources aimed at building capacity and sharing research

#### ■ Mental Health in Australia: A Quick Guide

Produced by the Parliamentary Library of Australia, this **guide** provides an overview of mental health in Australia, including the prevalence, cost, government responsibilities and services.

#### apo.org.au

#### ■ InsideOut Institute Podcast

This <u>podcast</u> is about eating disorders and includes research, treatment, the road to recovery, the journey for families and loved ones, international guests and people with a lived experience.

#### itunes.apple.com

#### ■ Understanding LGBTI+ Lives in Crisis

La Trobe Uni and Lifeline with support from QLife and ACON, present <u>findings</u> of LGBTI+ people's use of crisis support services in Australia, a first in Australia.

#### lifeline.org.au

# Blueprint for Trans and Gender Diverse Health

ACON has released a Blueprint for improving the health & wellbeing of the trans & gender diverse community in NSW, to help overturn the barriers to healthcare experienced by the community on a daily basis.

#### acon.org.au

#### ■ CMHDARN NGO Research Showcase

The Community Mental Health Drug and Alcohol Research Network produces a bibliography to showcase the significant contribution to knowledge being made within the NGO sector.

#### cmhdaresearchnetwork.com.au

#### Trauma-informed Care Textbook

Dr Richard Benjamin, a member of MHCC's Trauma Informed Care Advisory Group, along with co-editors Joan Haliburn and Serena King, have released a textbook titled "Humanising Mental Health Care in Australia: A Guide to Trauma-informed Approaches". Royalties go to not-for-profits. To purchase the book email Richard.benjamin43@outlook.com

#### Richard.benjamin43@outlook.com

#### Homelessness and Mental Health: Towards Change

New research by the Australian Housing & Urban Research Institute provides evidence about systemic issues and policy levers to provide housing and services for people with lived experience of mental health conditions.

#### ahuri.edu.au

#### Griefline

Griefline is a national dedicated grief helpline that provides free counselling to people experiencing loss and grief, including mental health concerns and carer support. Griefline runs from midday to 3am 7 days a week. Griefline also offers online counselling. Call 1300 845 745

#### griefline.org.au

#### Read View From the Peak online to access direct links.

While MHCC endeavours to provide the most up-to-date information, we cannot comprehensively endorse the work of external organisations.

## Improving NDIS Access and Community Interface

MHCC remains active in supporting our members' journey of NDIS implementation.

MHCC is progressing our NSW ILC Community Engagement Education Package (CEEP) Project to help better support community connection for people outside of an NDIS funded package. This includes codesign of learning resources and opportunities for Community Workers, volunteers and people with lived experience.

We continue to advocate and influence policy direction for improved access and plan implementation for people with psychosocial disabilities. As at the end of March, there were 21,746 people with a psychosocial disability accessing the NDIS nationally including 7,589 in NSW.

MHCC is engaging with the NSW Ministry of Health funded ILC projects due to conclude in June 2019:

- The NDIS and Mental Health for Aboriginal People with Psychosocial Disability and their Families, Carers and Communities Project. This project seeks Aboriginal people, families, carers and communities to be involved in another codesign project with meetings scheduled at six sites across in NSW (managed by Gilimbaa).
- ICLA Project Embark supporting people experiencing homelessness and psychosocial disability to access the NDIS.

MHCC welcomes the government's announcement in March of an additional 12 months support for clients transitioning from Commonwealth mental health programs. We also continue to monitor roll-out of the National Psychosocial Support (NPS) measure for people ineligible for NDIS funded supports. Seven NSW PHNs have now commissioned NPS services.

#### NDIS participants with a plan living with a pyschosocial disability National Disability Insurance Agency (NDIA) quarterly report (March 2019) **NSW NATIONAL** 12,411 42,254 Estimated Estimated number of number of potential NDIS potential NDIS participants living without a plan 7,589 20,000 21,746 64,000 Target (2020) Target (2020) Currently Currently

# Joint Standing Committee NDIS Report

An important milestone in March was the Joint Standing Committee progress report on the NDIS arising from the NSW Parliamentary Inquiry into the NDIS that MHCC made a <u>submission</u> to. The report makes 18 recommendations including -

- 1. the NDIA to work with the mental health sector to refine the psychosocial disability stream before it is rolled out nationally to ensure it is fit-for-purpose
- 2. the NDIA to offer additional training in mental health for staff and planners to rollout the psychosocial disability stream nationally during 2019
- 3. COAG audit all Australian, state and territory services, programs and associated funding
- 4. the Australian Government extend funding for PIR, PHaMs and D2DL programs until 30 June 2021 and make public by 30 June 2020 how it intends to deliver longer-term arrangements for existing program clients not eligible for the NDIS.

10 May 2019 May 2019



#### MEMBERSHIP

#### MHCC is a member organisation

See all our members at mhcc.org.au/our-members



Help MHCC set the agenda for the Community Managed Mental Health Sector and define the messages that we campaign on and communicate to government agencies and service bodies. We need your experience to inform the future shape of our sector. Become an MHCC member today!

#### MHCC STAFF AND CONTACT DETAILS

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