

Annual Communique 2024

This is the first Annual Communique for the Housing and Mental Health Agreement 2022 (HMHA 22). As outlined in HMHA 22 Monitoring and Reporting Framework, this communique provides a progress update on the three core objectives and the 15 signatory commitments.

We welcome feedback from HMHA 22 state, district and local committees.

Three core objectives

1. Re-invigorate effective, accountable, and sustainable governance at the interface of mental health, housing, and homelessness services.

HMHA 22 supporting frameworks, including a <u>Governance</u>, <u>Service Delivery</u> and <u>Monitoring and</u> Reporting Framework have been published.

District and local implementation of HMHA 22 has commenced.

Support is being provided to HMHA 22 participants in each local health district to establish governance structures in line with the HMHA 22 Governance Framework.

2. Deliver on our shared agenda through strategic actions in partnership with funded services and other key stakeholders.

The strategic actions in <u>HMHA 22 Service Delivery Framework</u> support the implementation of HMHA 22 at the state, district and local level. District and local committees are developing implementation plans that reflect the needs of the shared client group in their local area.

At the state level, the HMHA 22 State Steering Committee has delivered on the following strategic actions:

Strategic action	Progress update
S1: Establish and partner with the Lived Experience Committee (LEC) to inform implementation, review and evaluation of HMHA 22.	The LEC has been established at the state level to inform implementation, review and evaluation of HMHA 22.

S5: Establish and provide secretariat support to HMHA 22 State Steering Committee.	The HMHA 22 State Steering Committee has been established with secretariat support.
S6: Finalise, release and promote the three tiered HMHA 22 Governance Framework.	The HMHA 22 Governance Framework has been finalised and released and is being promoted across NSW.
S7: Finalise, release and promote HMHA 22 Service Delivery Framework, and review every two years.	The HMHA 22 Service Delivery Framework has been finalised and released and is being promoted across NSW. The framework will be reviewed every two years.
S8: Finalise, release and promote HMHA 22 Monitoring & Reporting Framework.	HMHA 22 Monitoring and Reporting Framework has been finalised and released and is being promoted across NSW.

State levels actions still in progress include:

Strategic action	Progress update
S2: Promote key learnings from state funded programs that align with HMHA 22 vision	NSW Health and DCJ will share key learnings from state funded programs through a HMHA 22 SharePoint site and via HMHA 22 communication pathways.
S3: Promote trauma informed care to HMHA 22 participants through the ACI Mental Health Network.	Trauma informed care will be promoted on the HMHA 22 SharePoint site, enabling access to key trauma-informed care resources for clinicians and DCJ staff. Trauma Informed Care training is being developed as part of the induction program for all new Homes NSW Access and Demand staff. The HMHA 22 Lived Experience Committee is providing input into the training.
S4: Investigate ways to collect data on shared clients who require mental health and housing support when exiting correctional facilities.	Data linkage activities are underway with DCJ and NSW Health data teams and other key stakeholders.
S9: Finalise, release and promote HMHA 22 Information Sharing Framework.	NSW Health and DCJ are developing a HMHA 22 information sharing resource to ensure client privacy is protected in the exchange of client information between agencies
S10: Provide support to districts for the implementation of HMHA 22.	The Ministry of Health has engaged an independent consultant to support each district establish HMHA 22 governance structures in line with the Governance Framework.
	Implementation updates will be provided to the HMHA 22 State Steering Committee and Lived Experience Committee.

S11: Consult and collaborate early on policy, programs and initiatives that impact the shared client group.	The HMHA 22 State Steering Committee will consult and collaborate on future policy, programs and initiatives that impact the shared client group. An example of this approach is the Mental Health In-Reach Service. This service has been implemented and is being
	evaluated collaboratively between DCJ, NSW Health, Local Health Districts and non-government homelessness services. See S16 below.
S12: Promote HMHA 22 in Funding Agreements and Implementation Plans.	The HMHA 22 principles have been embedded in any policy and commissioning related to the shared client group. This is a continuing action.
S13: Ensure all scheduled reviews of state wide policies relating to the shared client group consider the objectives and commitments of HMHA 22.	Scheduled reviews of state wide policies relating to the shared client group will consider the objectives and commitments of HMHA 22.
S14: Encourage and support innovative practices through HMHA 22, and share examples of innovation and best practice across different districts.	The HMHA 22 State Steering Committee encourages and supports innovative practices through HMHA 22, and shares examples of innovation and best practice across different districts.
	The Committee will continue to look at new ways to promote and share innovation and best practice across the state.
S15: Investigate options for integrating housing assessments and status into mental health admission screening protocols.	Options for integrating housing assessments and status into mental health admission screening protocols will be investigated.
S16: Pilot and evaluate a Mental Health In-reach Service (MHIRS).	The Mental Health In-Reach Service has been piloted in Sydney, South Eastern Sydney and Central Coast Local Health Districts. An independent evaluator is currently undertaking an evaluation of the service. The findings of the evaluation will be released publicly.
	evaluation will be released publicly.

3. Embed agreed HMHA 22 principles in policy, commissioning and service delivery.

At the state level, NSW Health, DCJ and partner agencies and organisations continue to embed the HMHA 22 common principles in policy, commissioning and service delivery.

Principle	Progress update
Support participation of people with lived experience, their families, carers and kinship networks to understand their	The HMHA 22 Lived Experience Committee has been established to support participation of people with lived experience, their families, carers and kinship networks. Support is being provided to local and district committees to

experience of the systems.	co-design local and district implementation plans with people who have lived experience.
Support participation of Aboriginal people, their communities and kinships networks to understand their experience of the systems.	An Aboriginal-owned business has been engaged to consult with Aboriginal people, communities and service providers to raise awareness of the HMHA 22. These workshops will seek advice on any barriers to participation in HMHA 22 governance structures and inform participants of key themes to consider when engaging with Aboriginal community services to better meet the needs of Aboriginal people.
Understand our progress on the shared agenda (as outlined in the Service Delivery Framework).	See progress updates under Objective 2.
Include information from, and make information available to, HMHA 22 signatories and participants.	The HMHA 22 Supporting Frameworks detail communication and escalation pathways and processes for HMHA 22 signatories and participants. The HMHA 22 SharePoint site will also foster greater collaboration and sharing of information and resources at the state, district and local level.
	Feedback provided by key stakeholders, including HMHA 22 signatories and participants, was incorporated into the supporting frameworks following a public consultation process.
	The Annual Communique and regular committee meetings enable information sharing between signatories and participants, in line with the Governance Framework.
	NSW Health and DCJ host webinars with district operational contacts to share and discuss information about HMHA 22 implementation.
Embrace innovative data linkages as a key building block for HMHA 22 integration.	Data linkage activities are underway with DCJ and NSW Health data teams and other key stakeholders.
Draw from existing data, where possible, to minimise administrative burdens.	As above.
Protect client privacy at the three tiers of governance – local, district and state – by disaggregating data.	NSW Health and DCJ are developing a HMHA 22 information sharing resource. Data will be disaggregated to ensure client privacy is protected.

Signatory Commitments

Updates on the ten signatory commitments currently in progress are listed below. The full list of commitments can be found in the <u>HMHA 22 Monitoring and Reporting Framework</u>.

Commitment	Progress update
Senior Executive leadership (Ministry of Health and DCJ) has leadership and oversight of the Agreement	Regular HMHA 22 updates have been provided to the NSW Mental Health Taskforce. The HMHA 22 State Steering Committee meets quarterly.
The State Steering Committee provides reports to the Secretaries on HMHA 22 progress and escalates issues that cannot be resolved at the state-wide governance level as needed.	Updates on the HMHA 22, and its implementation, have been provided to the Secretaries of DCJ and NSW Health.
Both agencies commit to establish, re-invigorate, and actively participate in HMHA 22 governance at the state, district and local levels to implement the agreement and the intended objectives.	Following a broad public consultation process, the HMHA 22 Governance Framework has been released. The HMHA 22 State Steering Committee has been established and support is being provided to establish district and local committees in line with the Governance Framework.
Resource the secretariat function across state, district and local governance tiers, to ensure accountability and ongoing operation of HMHA 22.	Signatory agencies are committed to supporting and resourcing the secretariat function at all HMHA 22 governance levels. The HMHA 22 State Steering Committee has been established and support is being provided to establish district and local committees in line with the Governance Framework.
Establish and resource a lived experience panel and engage people with lived experience, their families, carers and representative organisations in the operation and evaluation of HMHA 22.	The HMHA 22 Lived Experience Committee has been established and is actively engaged with the operation of the HMHA 22.
Engage with other NSW Government agencies, relevant Commonwealth Government agencies, and NGOs who play an important role in supporting positive outcomes for the shared client group.	A broad range of HMHA 22 participants are currently represented at the state level governance. District and local committees are being supported to establish broad membership representation that best supports the local needs of the shared client group.
Implement the No Exits from Government Services into Homelessness: A Framework for	Agencies continue to implement actions under the No Exits from Government Services into Homelessness: A Framework

Multi-agency Action. for Multi-agency action. Lead the development and Following a broad public consultation process, the HMHA 22 ongoing operation of HMHA 22 Service Delivery Framework and Monitoring and Reporting Service Delivery Framework and Framework have been finalised and published. ensure transparent reporting State, district and local level strategic actions are reported against outcomes and indicators under Objective 2. in the framework. This includes working towards shared goals that reflect the key focus areas across the housing, homelessness and mental health interface. Establish and maintain Monitoring and reporting mechanisms for HMHA 22 at the performance monitoring state, district and local level are described in the Monitoring mechanisms for shared goals to and Reporting Framework. Reporting pathways for district support client level and service and local committees are being established. delivery outcomes The HMHA 22 State Steering Committee and Lived Experience Committee will be included in monitoring and reporting of the HMHA 22.

Develop and embed principles for collaboration and service principles in the planning, delivery and evaluation of policies, programs and services.

The HMHA 22 signatories and participants are committed to embedding principles for collaboration and service principles in the planning, delivery and evaluation of policies, programs and services. The HMHA 22 Governance Framework and Service Delivery Framework have been published and are key resources to support this.