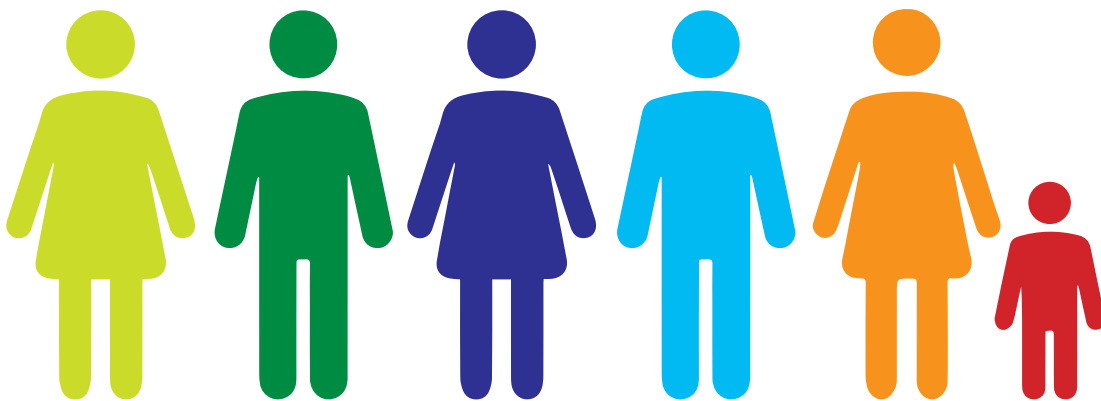


National Mental Health Commission

National Lived Experience (Peer)
Workforce Development Guidelines

Growing a Thriving Lived Experience Workforce

A national roadmap for collaborative development



Australian Government

National Mental Health Commission

About this report

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Director of Communications
National Mental Health Commission
PO Box R1463
Royal Exchange NSW 1225

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- Heather Nowak, Consumer Peer Worker
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A vital component of mental health services

Lived experience is central to mental health reform. A well supported Lived Experience workforce results in benefits for people accessing services, families, and service providers as well as the broader community.

Lived Experience work or practice is recognised as a unique and separate discipline that offers a valuable contribution to the mental health sector. As its own discipline, Lived Experience work has distinct values, principles, and theories that define Lived Experience work and the way it is practiced.

Lived Experience workers draw on their life-changing experiences of mental or emotional distress, service use, and recovery/healing, and their experiences, or the impact of walking beside and supporting someone through these experiences, to build relationships based on collective understanding of shared experiences, self-determination, empowerment, and hope. It is common to have experiences of distress and emotional pain, loss, stigma, discrimination, loss of rights, and navigating complex systems. Lived Experience also includes experiences and an understanding of losing and regaining hope, and emancipation. People's paths to healing, hope, and recovery are also different.

The Lived Experience workforce is made up of people who are employed in paid positions that require Lived Experience as an essential employment criterion, regardless of position type or setting. Lived Experience workers provide a resource for change. Regardless of the job position, each worker is a 'change agent' providing a resource to support personal change in service users and cultural and practice change in the service. This dual focus is a unique characteristic that requires other health professionals and employing organisations to actively partner with the Lived Experience workforce.

Lived Experience work needs to be supported and embedded as an integral part of the way all mental health services are delivered. The challenge is not simply to create new jobs or recruit new workers, but to embed a new source of knowledge and new ways of thinking about mental health, into an established service system. A commitment to change, collaboration, and co-development is essential.

A well supported Lived Experience workforce results in benefits for people accessing services, families, and service providers as well as the broader community. To achieve these benefits, the workforce needs to be well supported, sufficient in numbers and embedded across all areas of the mental health system.

The responsibility for workforce development sits across a diverse range of jurisdictions, agencies, and professions. The partnership for change must be between employers, health professionals, Lived Experience agencies and Lived Experience workers. Action is required by all stakeholders to ensure the development of the Lived Experience workforce.

The purpose of Lived Experience workforce development is to ensure that skilled Lived Experience workers are available in all areas in Australia to meet the needs of people with mental health challenges, their families, carers and supporters, and the needs of mental health services. The national goal for workforce development is to engage all stakeholders to collaboratively address key development priorities in order to grow and sustain a viable Lived Experience workforce.

A thriving mental health Lived Experience (Peer) workforce is a vital component of "quality, recovery-focused mental health services".

Department of Health, 2015

The National Lived Experience Workforce Development Guidelines

The National Mental Health Commission has led the development of the *National Lived Experience Workforce Development Guidelines* as a key reform initiative of the Fifth National Mental Health and Suicide Prevention Plan.

The current working conditions for Lived Experience workers are variable in quality and appropriateness. The growth of the workforce has been inconsistent across different states, territories and regions, and across public, community and private sector services. Employment opportunities at this time are limited.

“As the peer workforce continues to grow, it is critical that the field grapple with fundamental questions as to how to best support the development and advancement of the peer workforce.”

Jones, Kosyluk et al., 2020

As a national document, the *National Development Guidelines* bring together key issues from state, territory, and organisational policies and guides, with the expertise of Lived Experience to create a single overarching framework for consistent national development of the Lived Experience workforce.

The *National Development Guidelines* are the result of extensive consultation and a co-production process to ensure that national standards for Lived Experience workforce development are grounded in the expertise of lived experience. The core theme identified through the consultation process was the need to develop flexible, recovery-oriented workplaces where Lived Experience workers are enabled to achieve in their professional roles with flow-on benefits for the whole workforce and for service users and their families.

The *National Development Guidelines* provide an overview of the professional principles, values and roles of the Lived Experience workforce together with detailed steps for employers at each stage from planning a Lived Experience workforce through to embedding as part of the services core business.

The stepped actions in the *National Development Guidelines*, with their emphasis on organisation-wide change, promote the role of Lived Experience workers as change agents and boundary spanners. Change-oriented work environments that recognise and support the holistic nature of Lived Experience work are essential to realise the intended outcomes and impact of the Lived Experience workforce.

A suite of resources

The *National Development Guidelines* are published with a suite of documents that will continue to be developed as the Lived Experience workforce grows and our shared knowledge and understanding of this essential work deepens.

Growing a Thriving Lived Experience Workforce is a companion document to the *National Development Guidelines*. The contents of this document should be interpreted in the context of the whole of the *National Development Guidelines*.

The published *National Development Guidelines* and supporting suite of documents are available for download on the National Mental Health Commission's 'Mental Health Reform' webpage: <https://www.mentalhealthcommission.gov.au/LivedExperienceWorkforceGuidelines>

The Lived Experience workforce

Regardless of position type or level of authority, Lived Experience roles are distinguished by a commitment to using lived experience to benefit others, uphold human rights and achieve systems transformation.

Designated Lived Experience roles include all positions that require lived experience as key criteria, regardless of position type or setting. Key to qualification for Lived Experience roles, is that the experiences were so significant they caused the individual to reassess and often change their lives, their future plans, and their view of themselves. Designated roles have two distinct perspectives and ways of working and are informed by either: personal experience of mental illness or experience of supporting someone through mental illness.

Members of the Lived Experience workforce in Australia are employed in a range of positions across various settings. The Lived Experience workforce includes but is not limited to: Consumer Consultants; Carer Consultants; peer support workers; family/carer peer support workers; specialist peer workers; and various designated Lived Experience roles in executive governance; paid board and committee representation; education; training; research; consultancy; policy design; and systemic advocacy across various service settings.

All Lived Experience workers hold relationships as core to their work. These are relationships with people experiencing mental health challenges and their families, carers and other supporters. They are also relationships with colleagues from other professional backgrounds, and organisational and sector leaders. The relationships made possible through lived experience help to improve the lives of individuals and assist service providers and organisations to develop recovery-oriented and person-directed services. This dual focus contributes to continuous improvement in mental health services and the mental health system.

This is a professional approach in which diverse personal experience-based knowledge is applied within a consistent framework of values and principles. To realise the full potential of this workforce, Lived Experience workers need to be engaged in meaningful and supported roles that are consistent with this framework.

Designated Lived Experience roles raise expectations of what is possible for people who have lived experience and significantly contribute to reducing discrimination and prejudicial attitudes.

The Lived Experience workforce

The starting point for understanding the unique qualities of Lived Experience work is the recognition of its specialist knowledge and experience base.

Unique knowledge, abilities and attributes

- Profound life-changing mental health challenges that have led to a new life direction and concept of self or life-changing experiences while supporting someone with mental health challenges that have profoundly impacted their life/world view.
- Personal identification with, and experiences of service use and/or advocating for someone using services.
- Understanding experiences of marginalisation, exclusion, discrimination, loss of identity/human rights/citizenship.
- Willingness to purposefully share experiences and parts of personal story in work role.
- Understanding both experiences of hopelessness and the critical need for hope – how to move from a position of hopelessness to one of hope.
- Willingness to use emotional understanding and knowing as key to work role.
- Willingness to be vulnerable and publicly 'out'.
- Understanding the personal impact of experiences of trauma.
- The degree of empathy and what they are able to understand and empathise with.
- Greater equality and efforts to reduce power imbalances with people accessing services, including no involvement with coercive or restrictive practice of any kind.
- Being an advocate/change agent.
- Level of awareness about self-care and skills/strategies to prioritise it.

What makes Lived Experience work effective?

- Applying lived expertise: not just having a lived/living experience but what has been learned through that experience and how it's applied.
- Links with and understanding of the wider consumer movement and concepts.
- Work that is values-based and authentically lived experience-informed, person-directed and aligned with recovery principles.
- A social justice and fairness focus informed by understanding power imbalances.
- Significant understanding and ability to use personal story effectively and appropriately, for the benefit of the other person or system/service reform.
- Convey or inspire optimism and hope.
- A bridge between organisations and people accessing services/supporting people accessing services.
- Understanding of overlapping identities and experiences (intersectionality) and the impacts of culture and identification.
- Trauma-informed: awareness of the role/impact of trauma and how to respond sensitively and appropriately.
- Resilience in the face of discriminating, prejudicial and disempowering attitudes, practices and policies.
- Focus on the relationship.
- Greater flexibility/scope/ability to be responsive to the person, rather than being driven by a prescribed agenda.
- Specialisation may be useful depending on the context and experience e.g. people from the Deaf community, Youth, people with experiences of family violence etc.

Adapted from Byrne, L., Wang, L., Roennfeldt, H., Chapman, M., Darwin, L. *Queensland Framework for the Development of the Mental Health Lived Experience Workforce*. 2019, Queensland Government: Brisbane

Benefits of the Lived Experience workforce

A well supported Lived Experience workforce results in benefits for people accessing services, families, social networks, and organisations, as well as the broader community.

Benefits for all

- Social justice
- Equality
- Diversity
- Increased value of lived experience
- Increased hope and optimism – raising expectations of what is possible for people with lived experience
- Greater wellbeing and inclusion
- Improved culture for safe sharing
- Challenge discrimination and prejudice

Benefits for families, carers and social networks

- Lived understanding aids rapport and relationships built on connection and trust
- More equitable relationships
- Foster a sense of belonging/ community
- Focus on human rights/ social justice
- Living example of hope
- Increased empathy
- Advocacy
- Mutuality

Benefits for people accessing services

- Risk adverse approaches replaced by dignity of risk
- Lived understanding aids rapport and relationships built on connection and trust
- More equitable relationships
- Foster a sense of belonging/ community
- Focus on human rights/ social justice
- Living example of hope
- Increased empathy
- Advocacy
- Mutuality

Benefits for organisations and colleagues

- Greater recovery understanding/ orientation
- Contribute to more person-directed approaches
- Co-production leads to safer and more accountable services
- Contribute to more inclusive, flexible, resilient work culture
- 'Bridge' of understanding between people accessing services and colleagues in traditional roles
- Reduced need for ongoing formal support and hospitalisation

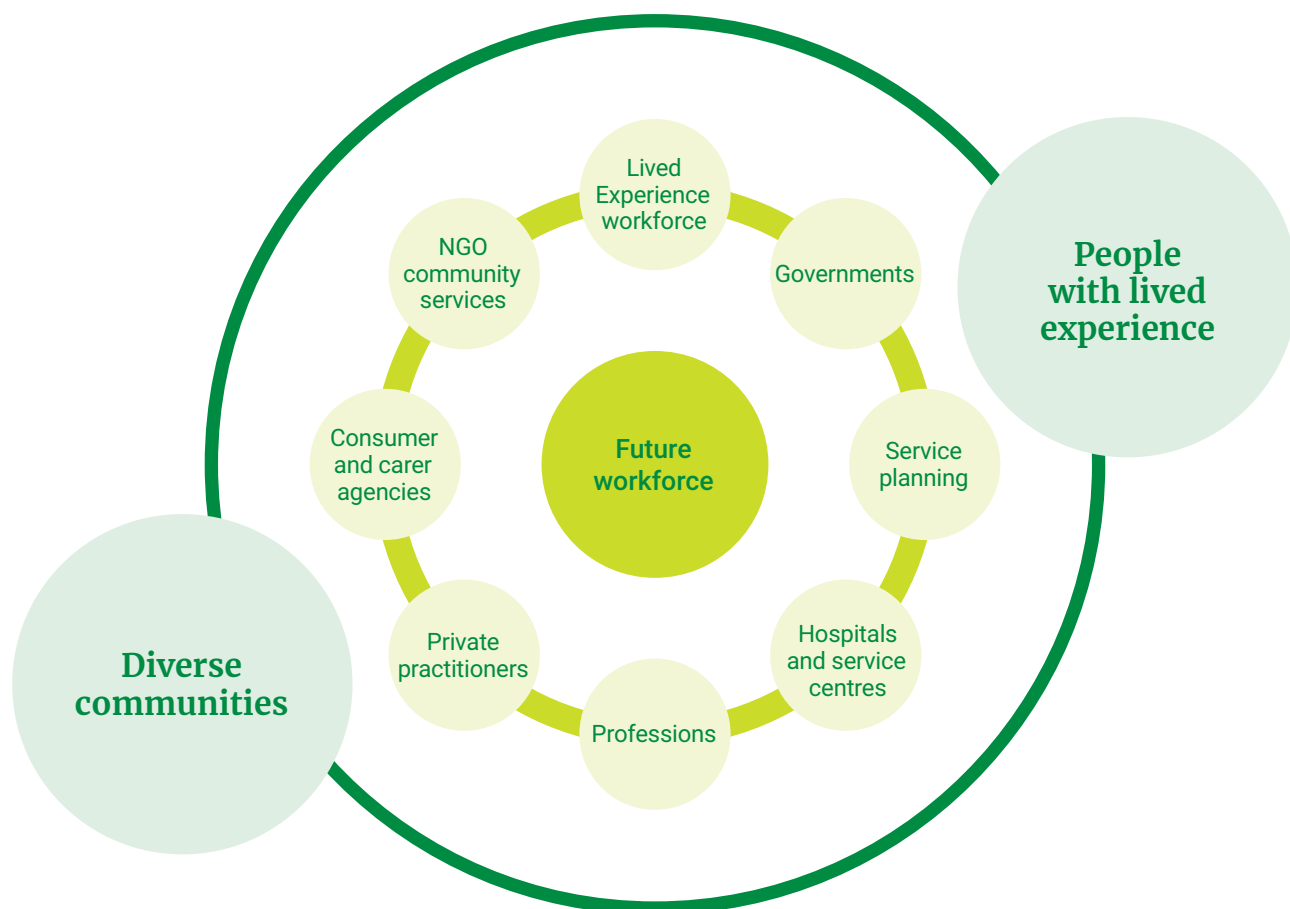
Adapted from Byrne, L., Wang, L., Roennfeldt, H., Chapman, M., Darwin, L. *Queensland Framework for the Development of the Mental Health Lived Experience Workforce*. 2019, Queensland Government: Brisbane

Workforce development – a shared responsibility

The responsibility for workforce development sits across a diverse range of jurisdictions, agencies, and professions. Action is required by all stakeholders to ensure the development of the Lived Experience workforce.

The mental health care system is made up of a widely diverse group of stakeholders including different service users and communities, different organisations, governing bodies and jurisdictions as well as many different professional groups. The Lived Experience workforce has the potential to contribute to transformation of the mental health service system. To achieve this broad transformation, all stakeholders need to be equally committed to the change process.

Workforce development decisions cannot be fully effective without the leadership and active engagement of people with lived experience and the communities they come from. Workforce development should always be contextualised to local needs, reflecting the diverse perspectives of lived experience. People with lived experience are the future workforce.



A shared agenda for change

The *National Development Guidelines* are intended to strengthen understanding and collaboration across the mental health sector and beyond, contributing to more effective services and ultimately, better outcomes for people accessing services, their families, supporters and communities. Five priorities are identified for the mental health service system as a roadmap for leaders across diverse settings to establish policies and practices that support sustainable and effective workforce growth.

1 Develop understanding as a foundation for workforce development

The Lived Experience workforce is an essential element in the development of recovery-oriented care. Lived Experience workers need the support of employers and colleagues who are committed to recovery-oriented practice. A key priority is to increase shared understanding of the role of Lived Experience work in the continuous development of recovery-oriented mental health services.

2 Support a thriving Lived Experience workforce

Safety, training, support and recognition underpin a thriving workforce. Today's employment experiences will influence the potential for future workforce development. A key priority is to ensure that people employed in Lived Experience roles thrive in appropriate employment conditions.

3 Planning for workforce growth

Lived Experience workers are needed everywhere, at all levels in service delivery and decision-making and across diverse communities. Growing and diversifying the Lived Experience workforce will provide services users, their families and supporters with more choice and support. A key priority is to support planning for growth in the Lived Experience workforce in terms of the breadth of employment opportunities and diversity of the workforce.

A shared agenda for change

4 Integrate Lived Experience work in community care

The development of community based stepped care in every region must include lived experience-led and lived experience delivered services. A key priority is to increase the integration of Lived Experience-led services and co-delivered Peer Support services into regional health care systems, ensuring that everyone has access to care that supports recovery including people in rural and remote areas and people from diverse communities.

5 Development is supported by a national Lived Experience strategy

Investment in the personal and family/carer Lived Experience workforces is vital for consistent national development. Development of national professional peak bodies representing the Lived Experience workforce is identified as a key priority. A national peak organisation could support the development of professional leadership for both the consumer and carer Lived Experience workforces at national and state levels.

A shared agenda for change

Priorities for Lived Experience workforce development



Measuring progress

Collaborative effort towards these priorities will contribute to a mental health service system in which:

- All mental health services are committed to recovery-oriented practice.
- Everyone has access to care that supports recovery including people in rural and remote areas and people from diverse communities.
- Lived Experience work is valued and identified as 'core business' in all mental health services.
- Flexible workplace strategies support the wellbeing of all employees including the Lived Experience workforce.
- Employment opportunities support the integrity of Lived Experience work and fidelity to the professional values and principles of the profession.
- The Lived Experience workforce is reflective of diverse communities and different experiences of mental health and mental health services.
- Co-production in equal and respectful partnership between lived experience expertise and mental health service provider expertise is the foundation for all mental health service development and evaluation including development of the Lived Experience workforce.
- All stakeholders collect meaningful data and participate in evaluation and auditing to measure success and identify opportunities for ongoing development.

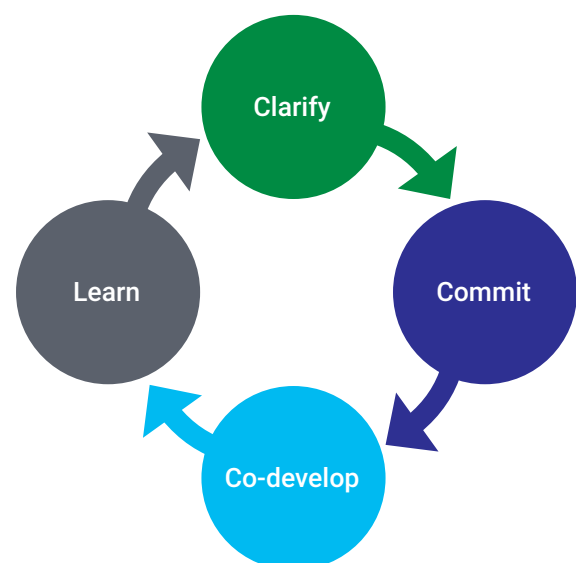
Principles to guide workforce development

The *National Development Guidelines* promote six core principles that are relevant to employers, policy makers, funding bodies, service planners and mental health commissioners:

- 1. Co-production**, engaging all stakeholders in equal and respectful partnership for all aspects of workforce development is essential for Lived Experience workforce development to be effective and meaningful.
- 2. Maintain the integrity of Lived Experience work** ensuring that all work is consistent with the values, and principles of Lived Experience work and develops from its strong foundations in the consumer movement.
- 3. Create the conditions for a thriving workforce**, developing flexible, recovery-oriented workplaces where Lived Experience workers are enabled to achieve in their professional roles with flow-on benefits for the whole workforce and for service users and their families.
- 4. Respond to diversity**, engaging with diverse communities to ensure that all aspects of service delivery meet their needs and engaging a Lived Experience workforce that reflects the diversity of service users and their families and supporters.
- 5. Reduce coercive and restrictive practice**, ensuring that Lived Experience workers are not placed in positions where they are expected to support coercive or restrictive practices, and working to co-produce more effective alternatives to restrictive practices.
- 6. Support systemic change and professionalisation** of the Lived Experience workforce, identifying areas for prioritisation in funding, policy, planning and service commissioning.

Depending on the current status of an organisation or region's Lived Experience workforce, many steps may be required to fully embed a sufficient workforce to support change. The *National Development Guidelines* identify four simple stages of development that can be implemented by any organisation or service provider, regardless of resources or current stage in development.

- 1. Clarify** – develop understanding of Lived Experience work and recovery. Assess current practices for alignment with this understanding. Create opportunities to connect with consumers, carers and families, and lived experience services in your area.
- 2. Commit** – put Lived Experience workforce development and recovery-oriented practice on the agenda as core business. Include it in all planned activities and budgets.
- 3. Co-develop** – work with people with lived experience and their families and supporters to review existing practices and develop new approaches.
- 4. Continuously Learn** – collect data, service user and staff feedback. Regularly co-evaluate and apply new knowledge to the next steps in development.



Co-production

Co-production is effective when all parties feel valued and have the skills and confidence to contribute fully.

The starting place within each priority area is engaging in partnership with Lived Experience workers. Genuine co-development and co-production in equal and respectful partnership between Lived Experience expertise and mental health service provider expertise is the essential foundation for development of the Lived Experience workforce. Co-production requires acknowledging lived expertise in recovery-orientation, being person-directed, and better understanding the experiences and views of people accessing services.

Lived Experience work is based on principles of reciprocity and equality, each person giving from their experience in a respectful exchange of knowledge as they mutually contribute to problem solving. Like all other workers, Lived Experience workers are best able to contribute in an environment of equity, fair and impartial inclusion.

For co-production to be transformational there must be a sharing of power between designated Lived Experience and non-designated workers.

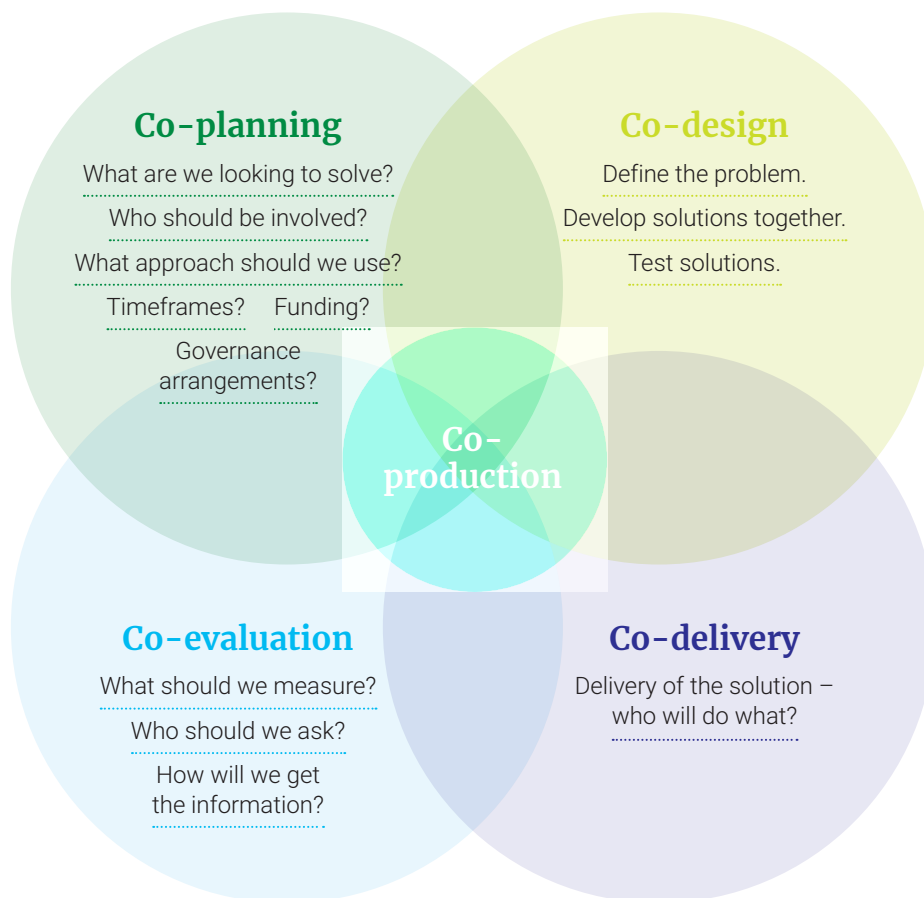


Image source: Roper, C, Grey, F, & Cadogan, E (2018). Co-production: Putting principles into practice in mental health contexts.

Maintaining the integrity of Lived Experience work

Lived Experience work is values-based, with values acknowledged as important in setting priorities in Lived Experience practice.

Core values	What does it mean?
Hope	Belief in people's fundamental capacity to overcome challenges.
Equality/equity	Working from a place of common humanity and vulnerability. Actively working to minimise power imbalances.
Mutuality	Being in a relationship with another person where both people learn, grow and are challenged through the relationship. Sharing responsibility in relationships.
Empathy	Understanding another's experience from a point of common experience and genuine connection.
Choice	Acknowledging and respecting each person's choices, dignity of risk and boundaries. Acknowledging that the person is the expert of their own experience.
Respect	Honouring another's view and experience without judgement or making assumptions.
Authenticity	Integrity, being open, honest, trustworthy, and transparent in work practices and relationships. Valuing the use of lived experience and vulnerability in the service of others transforms these from what may have been perceived as weaknesses into strengths.
Belonging/inclusion	Respecting and understanding the value of inclusion and impact of exclusion. Recognising intersectionality and valuing diversity culture, spirituality, membership in chosen groups and community.
Interdependence/interconnectedness	Recognition that we exist in relationships and that the relationships with families and/or social networks are often impactful in our lives and important to healing.
Justice/Human Rights	Understanding the impact of social justice/inequity on identity and opportunity e.g. race, culture, sexual orientation. Recognising that equal access to resources and support is an important factor in everyone's recovery and healing. Recognising the consumer movement as a response to the history of social injustice and discrimination towards people with lived experience. Recognising how Lived Experience work is connected to the human rights movement and upholding the human rights of people with lived experience.

Ultimately, Lived Experience work is distinguished not so much by what Lived Experience workers do but how they do it. Values are the pillars of the Lived Experience workforce and inform Lived Experience practice.

The process of workforce growth through many different stakeholders, communities and organisations, may put pressure on the Lived Experience workforce to adopt practices that are inconsistent with professional values. Maintaining the authenticity and uniqueness of Lived Experience roles is paramount to achieve the intended outcomes for service users and service providers and to maintain the safety and wellbeing of Lived Experience workers.

Responding to diversity

The *National Development Guidelines* acknowledge the need for the Lived Experience workforce to be reflective of our diverse communities and experiences, especially First Nations Peoples of Australia.

A diverse Lived Experience workforce assists individual organisations and the wider sector to better meet the needs of people with different experiences, identities and backgrounds. Ensuring language and concepts are not exclusively focused on Western definitions and practices is particularly important to create culturally appropriate services.

Workplace culture that embraces diversity fosters respect for all employees and sends a strong message that diversity is valued.

The need for adequate and appropriate support is emphasised for Lived Experience workers who are in representative roles for their culture and community. In these roles the opportunities to explore, understand experiences and build relationships is not limited to the role as a Lived Experience worker, but also arises as a result of an affiliation with the culture and community.

Reducing coercive and restrictive practice

Employing a Lived Experience workforce has been shown to contribute to a more recovery-oriented practice and reduce the need for restrictive practices in acute inpatient settings where restrictive practices are most prevalent.

Mental health intensive care units, involuntary settings and criminal justice settings have been identified as challenging environments for Lived Experience workers, due to the use of involuntary treatment and restrictive practice. Coercive and restrictive practices refer to any intervention or treatment process that either puts pressure on another to act in a certain way or restricts the rights and/or freedom of movement of another person.

These are challenging environments for Lived Experience workers, and they should not be expected to be involved in the use of restrictive practices. By understanding this and building it into policy and practice, trust and relationships between people accessing services and Lived Experience workers is strengthened and the morale and authenticity of Lived Experience roles is not compromised.

An important task will be exploring how Lived Experience roles can contribute to the sector goal of eliminating coercive and restrictive practices and taking action to support this.

Planning and supporting mental health reform

A system-wide approach to investment in the personal and family/carer Lived Experience workforces, including a sector-wide national workforce strategy and KPIs, is vital for ongoing development.

There are important sector-wide areas for action that are beyond the scope of any individual employer or Lived Experience organisation to address. The responsibility for workforce development sits across a diverse range of jurisdictions, agencies, and professions. Action is required by all stakeholders to ensure the development of the Lived Experience workforce.

Investment must be sufficient, sustainable, and long-term. It must be informed by Lived Experience-led sources and best practice evidence.

This investment needs to encompass whole-of-sector education on the uniqueness and value of the personal and family/carer Lived Experience workforces, support the expansion of the Lived Experience workforces and improve practical and philosophical support for Lived Experience work. Widespread systems change that enables enhanced supportive structures, including industrial relations development, the funding of national peak bodies for the personal and family/carer Lived Experience workforces, appropriate supervision, and policies that protect the authenticity of the work.

The overarching system level priorities align with the recommendations of the Productivity Commission's Inquiry into Mental Health and the Royal Commission into Victoria's Mental Health System.

Lived Experience leadership

Co-production is an essential principle for development of the Lived Experience workforce. Where employers have responsibility for engaging lived experience expertise in co-production, the Lived Experience sector must have the capacity to respond.

Specific tasks identified in the *National Development Guidelines* that require Lived Experience leadership and meaningful co-production include:

Educate	Invest in whole-of-sector education on the uniqueness and value of the personal and family/carer Lived Experience workforces. Funders, policy makers and sector leaders also need education in the value and contribution of the Lived Experience workforce, in order to make informed decisions about workforce development.
Engage	Drive whole-of-sector/whole-of-workforce understanding and commitment. Increasing engagement with governments, funding bodies/policy makers and individual organisations to the benefits of Lived Experience work, personal recovery, and person-directed approaches in all accredited and ongoing professional development and tertiary qualifications.
Establish	Data collection, evaluation and auditing mechanisms to measure success and opportunities for ongoing development. Collect benchmark data and continue to expand the knowledge/evidence-based, with particular emphasis on diverse perspectives and those in regional, rural and remote areas.
Enable	Networking, professional learning and development opportunities, expand career pathways and provide a wide range of education and training options while maintaining multiple pathways to employment.

Planning and supporting mental health reform

Professionalisation

Professionalisation is an important part of workforce development, expected to increase consistency in the employment, pay levels, workplace strategies and supports available to Lived Experience workers, provide greater clarity, structure, and formalisation of roles and lead to more accountability for organisations. This is supported by the recent Productivity Commission report and the Commission's feasibility study on professionalisation for peer support roles.

There is a role for funding bodies and policy makers to support the workforce to coordinate the development of national professional peak bodies for the personal and family/carer Lived Experience workforces and expand the availability of co-produced training and qualifications for Lived Experience workers. National bodies need to be specifically focused on workforce issues and paid Lived Experience participation and roles. This role is distinct from that of existing consumer/carer peak bodies and new bodies are therefore required to represent the interests and rights of Lived Experience work as a discrete discipline.

To maintain the integrity of the profession, professionalisation must come from within the Lived Experience workforce. It is important that any move towards professionalisation reflects the origins of peer-to-peer work and the consumer movement and maintains the values of mutuality and egalitarianism.

Priorities for funding and service commissioning

Current funding, structures and systems do not consistently identify the need for Lived Experience workforce development or support sustainable development. Funding bodies and sector-wide policy makers can facilitate development of the Lived Experience workforce by prioritising workforce development projects, investing substantially and sustainably in Lived Experience work.

All agencies responsible for mental health funding, policy or service commissioning can contribute to Lived Experience workforce development by ensuring that:

- Decisions are based on a clear understanding of Lived Experience work, developed in collaboration with Lived Experience leaders.
- Priorities and standards for funding reflect the *National Guidelines*.

Achieving change in mental health services and systems will take time. To be effective, the Lived Experience workforce needs to be sustained for the long-term. The development of funding, policy and service planning approaches that are able to support Lived Experience workforce development is both an immediate need and a long-term commitment.

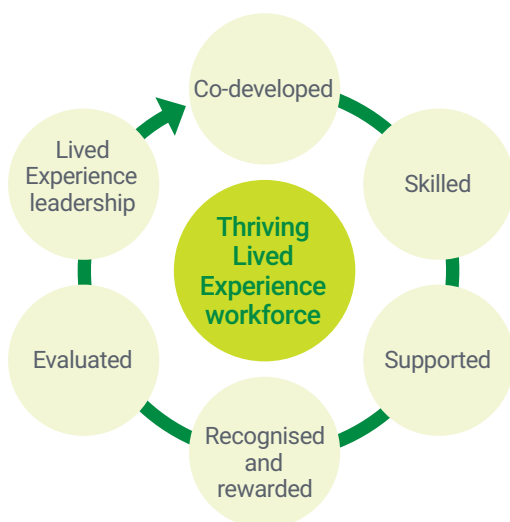
A full list of priorities for Lived Experience leaders, funding, policy and service commissioning can be found in the *National Guidelines*.

Foundations for a thriving workforce

Safety and wellbeing underpin a thriving workforce.

Organisations that provide mental health services have an important role to play in building the foundations for an effective Lived Experience workforce. They are at the frontline in creating employment opportunities, supporting the development of individual workers, and demonstrating the impact of this employment strategy.

The workforce as a whole will thrive when individual workers feel safe and experience a sense of wellbeing.



Indicators of a thriving workforce include:

- **Skilled:** Lived Experience workers have access to the training they need to confidently and safely perform their work.
- **Supported:** Lived Experience workers have access to peer-led mentoring and supervision and feel supported in their workplace.
- **Recognised:** Lived Experience workers are recognised for their contribution to service user and organisation outcomes and receive remuneration that is appropriate to support their continued employment in this field.
- **Co-developed:** Lived Experience workers are partners in the co-creation of their own roles, the organisation's practices and workforce development.
- **Achieving:** Lived Experience workers contribute to action learning and evaluation to contribute to the evidence for change.
- **Peer-led:** there are career opportunities in advanced practice roles and in leadership roles at all levels in the mental health sector.

The needs for a thriving workforce and the needs for organisational readiness intersect to provide a practice blueprint for Lived Experience workforce development.

Summary of employer actions for Lived Experience workforce development

	Preparation: Clarify	Preparation: Commit	Implementation: Co-develop	Transformation: Learn and grow
Leadership and culture	<p>Build</p> <ul style="list-style-type: none"> ✓ Leadership understanding of: <ul style="list-style-type: none"> • Lived Experience workforce • Recovery-oriented practice • Diverse perspectives and needs ✓ Strengthen commitment to diversity and inclusion 	<p>Prioritise</p> <ul style="list-style-type: none"> ✓ Mission statements recognise Lived Experience work as core business ✓ Build whole-of-workforce commitment to lived experience 	<p>Lead</p> <ul style="list-style-type: none"> ✓ Identify champions and allies for the Lived Experience workforce ✓ Partner with lived experience to develop and implement workforce strategy ✓ Consider opportunities to develop Lived Experience leadership roles 	<p>Embed</p> <ul style="list-style-type: none"> ✓ Lived Experience roles represent diverse culture and perspectives ✓ Person-directed and recovery-oriented service delivery and practices are established ✓ Safe sharing of lived experience is prioritised for the whole workforce
Policies and planning	<p>Review</p> <ul style="list-style-type: none"> ✓ Identify the gap between current practices to recovery-oriented practice standards ✓ Current levels of diversity in service users, workforce and community 	<p>Review</p> <ul style="list-style-type: none"> ✓ HR and other policies for flexibility to support Lived Experience work ✓ Outline a Lived Experience workforce strategy ✓ Include Lived Experience in long-term budgets and plans 	<p>Plan</p> <ul style="list-style-type: none"> ✓ Develop an implementation plan ✓ Develop position descriptions and recruitment processes ✓ Budget for sufficient numbers of roles and Full Time Equivalent and all necessary supports and training 	<p>Grow</p> <ul style="list-style-type: none"> ✓ Lived Experience roles are employed at all levels sufficient to meet needs ✓ Career pathways are available for Lived Experience workers ✓ A range of supervision and training options are available to Lived Experience workforce
Development	<p>Educate</p> <ul style="list-style-type: none"> ✓ Whole-of-workforce about Lived Experience roles and the value of diversity ✓ People accessing services and their families about Lived Experience roles ✓ Provide service users with information on peer support services in the region 	<p>Connect</p> <ul style="list-style-type: none"> ✓ Create opportunities to listen to service users ✓ Build relationships with Lived Experience agencies ✓ Form a co-development steering group ✓ Work with other organisations for co-learning 	<p>Equip</p> <ul style="list-style-type: none"> ✓ Ensure access to appropriate supervision and training for Lived Experience workers ✓ Consider Lived Experience apprenticeships/ traineeships ✓ Enable connections for Lived Experience workers with Lived Experience networks 	<p>Learn</p> <ul style="list-style-type: none"> ✓ Review and evaluate the impacts of and remaining challenges to embedding the Lived Experience workforce ✓ Evaluate to contribute to a lived experience informed evidence base

Note: This summary represents key actions that any employer may take to develop and embed a Lived Experience workforce. Actions for organisations with specific interests, including regional and rural services, involuntary services, and service planning and funding appear in separate checklists throughout the Guidelines.

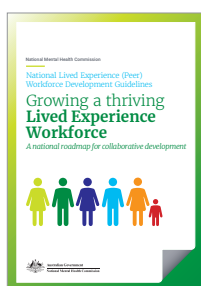
National Guidelines for Lived Experience Workforce Development

This document contains extracts from the *National Guidelines for Lived Experience (Peer) Workforce Development*. References used in the development of this document are listed in Appendix 1 of the *National Guidelines*.

The *National Development Guidelines* provide the foundation for a suite of documents that will continue to be developed as the Lived Experience workforce grows and our shared knowledge and understanding of this essential work deepens.

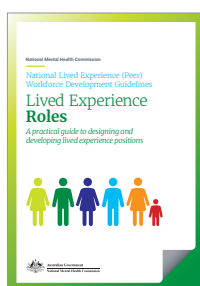
The *National Development Guidelines* are intended to support ongoing development of the Lived Experience workforce in Australia, foster greater consistency in working conditions, and strengthen understand and collaboration across the mental health sector, contributing to more effective services and ultimately, better outcomes for people accessing services, their families, carers, supporters and communities.

Companion documents to the *National Development Guidelines* currently include:



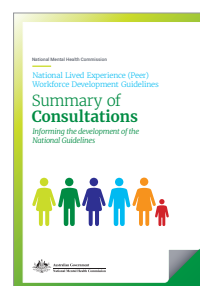
Growing a Thriving Lived Experience Workforce:
A national roadmap for collaborative development

This provides a brief overview of the *National Development Guidelines* with an emphasis on a national shared agenda for change in mental health care.



Lived Experience Roles:
A practical guide to designing and developing Lived Experience positions

This provides practical guidance to managers and Human Resource services on the design and implementation of new Lived Experience positions.



Summary of Consultations:
Informing the development of the National Guidelines

Findings from the survey, focus groups and interviews undertaken during the development of the *National Development Guidelines*.

Future companion documents may include:

- **Developing Employment Opportunities:** *A self-assessment decision-making tool for employers*
The future companion document will provide a brief overview of the actions for employers in mental health including reflective tools to assist in the first essential steps in workforce development: clarification, developing understanding, and commitment.
- **Lived Experience workforce role in regional mental health and suicide prevention:** *A self-assessment tool for Primary Health Networks and regional service planners.*
- **Investing in Lived Experience Workforce Development:** *Priorities for service planners, policy makers and funding bodies (work in progress).*

All published *Guidelines* are available for download on the National Mental Health Commission's 'Mental Health Reform' webpage: <https://www.mentalhealthcommission.gov.au/LivedExperienceWorkforceGuidelines>

Policies, frameworks and guides related to the *National Development Guidelines*

As a national document, the *National Development Guidelines* provides a single overarching framework for consistent national development. These guidelines are consistent with the principles defined in state, territory, and organisational policies and guides.

- Department of Health and Human Services, Victoria (2019). *Lived Experience Engagement Framework*. State of Victoria. ISBN 978-1-76069-763-1. Available at: [Mental health lived experience framework](#)
- Mental Health Commission of NSW (MHCNSW) (2018). *Lived Experience Framework for NSW*. State of New South Wales. <https://www.nswmentalhealthcommission.com.au>
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- Mental Health Council of Tasmania (2019). *Peer Workforce Development Strategy*. State of Tasmania. https://mhct.org/wp-content/uploads/2019/11/MHCT_PWDS-Web.pdf
- National Eating Disorders Collaboration (NEDC) (2019). *Developing a Peer Workforce for Eating Disorders*. www.nedc.com.au – Peer Work Resources.
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- Northern Territory Mental Health Coalition (NTMHC) (2019). *2018–2019 Mental Health Peer Support Workforce Needs Assessment*. Report to NT Primary Health Network October 2019.
- Queensland Government (2019). *Queensland Framework for the Development of the Mental Health Lived Experience Workforce*. (Byrne, L., Wang, L., Roennfeldt, H., Chapman, M., Darwin, L., 2019).
- Western Australia Association for Mental Health (WAAMH) (2014). *Peer Work Strategic Framework for the Mental Health and Alcohol and Other Drugs Sectors in WA*. <https://waamh.org.au/assets/documents/projects/peer-work-strategic-framework-report-final-october-2014.pdf>

