Executive summary

About this document

This document is a guide for mental health practitioners and services to Australia’s national framework for recovery-oriented mental health services. It provides definitions for the concepts of recovery and lived experience. It describes the practice domains and key capabilities necessary for the mental health workforce to function in accordance with recovery-oriented principles. And it provides guidance on tailoring recovery-oriented approaches to respond to the diversity of people with mental health issues, to people in different life circumstances and at different ages and stages of life.

About the framework

The national framework for recovery-oriented mental health services provides a vital new policy direction to enhance and improve mental health service delivery in Australia.

It brings together a range of recovery-oriented approaches developed in Australia’s states and territories and draws on national and international research to provide a national understanding and approach to recovery-oriented mental health practice and service delivery. It complements existing professional standards and competency frameworks at a national and state level.

The framework supports cultural and attitudinal change and encourages a fundamental review of skill mix within the workforce of mental health services, including increased input by those with expertise through experience.

All people employed in the mental health service system1 regardless of their role, profession, discipline, seniority or degree of contact with consumers will use the framework to guide their recovery-oriented practice and service delivery. This includes practitioners, leaders, volunteers and people in administrative, policy development, research, program and service planning and decision-making positions.

The framework defines and describes recovery and lived experience, describes the practice domains and key capabilities necessary for the mental health workforce to function in accordance with recovery-oriented principles, and provides guidance on tailoring recovery-oriented approaches to respond to the diversity of people with mental health issues. It is underpinned by extensive research and consultation and informed by lived experience.

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1 The mental health service system comprises services and programs in which the primary function is to provide promotion, prevention, early intervention, medical and psychiatric treatments and recovery support for people who experience mental health issues or mental illness, and/or their families, carers and support networks.
The framework is presented in two documents.

- This document, *A national framework for recovery-oriented mental health services: Guide for practitioners and providers*, gives guidance to mental health practitioners and services in recovery-oriented practice and service delivery.

- A companion document entitled *A national framework for recovery-oriented mental health services: Policy and theory* provides background on the research and policy underpinnings of the framework.

Additional resources for practitioners, services, carers and consumers to help in the implementation of the framework are available at www.health.gov.au/mentalhealth.

It is important to recognise the significant investment that Australian mental health services have made over the last thirty years in the delivery and improvement of rehabilitation and other services that address the psychosocial needs of people experiencing mental health issues. The framework benefits considerably from this investment. It was developed through an extensive consultation process involving individuals and organisations across Australia through online surveys, written submissions and consultative forums.

**Recovery: the concept**

Recovery-oriented approaches offer a transformative conceptual framework for practice, culture and service delivery in mental health service provision.

The lived experience and insights of people with mental health issues and their families are at the heart of recovery-oriented culture. The concept of recovery was conceived by, and for, people living with mental health issues to describe their own experiences and journeys and to affirm personal identity beyond the constraints of their diagnoses.

Recovery-oriented approaches recognise the value of this lived experience and bring it together with the expertise, knowledge and skills of mental health practitioners, many of whom have experienced mental health issues in their own lives or in their close relationships. Recovery approaches challenge traditional notions of professional power and expertise by helping to break down the conventional demarcation between consumers and staff. Within recovery paradigms all people are respected for the experience, expertise and strengths they contribute.

Recovery-oriented approaches focus on the needs of the people who use services rather than on organisational priorities.

**Personal recovery—a definition**

There is no single definition or description of recovery. For the purposes of this framework, recovery is defined as ‘being able to create and live a meaningful and contributing life in a community of choice with or without the presence of mental health issues’.

**Recovery-oriented mental health practice**

Recovery-oriented mental health practice refers to the application of sets of capabilities that support people to recognise and take responsibility for their own recovery and wellbeing and to define their goals, wishes and aspirations.
Recovery-oriented practice encapsulates mental health care that:
• recognises and embraces the possibilities for recovery and wellbeing created by the inherent strength and capacity of all people experiencing mental health issues
• maximises self-determination and self-management of mental health and wellbeing
• assists families to understand the challenges and opportunities arising from their family member’s experiences.

Recovery-oriented mental health service delivery
Recovery-oriented mental health service delivery is centred on and adapts to the aspirations and needs of people. It requires a shared vision and commitment at all levels of an organisation. It draws strength from, and is sustained by, a diverse and appropriately supported and resourced workforce that includes people with lived experience of mental health issues in their own lives or in close relationships.

Recovery-oriented mental health services have a responsibility to:
• provide evidence-informed treatment, therapy, rehabilitation and psychosocial support that helps people to achieve the best outcomes for their mental health, physical health and wellbeing (Victorian Department of Health 2011)
• work in partnership with consumer organisations and a broad cross-section of services and community groups
• embrace and support the development of new models of peer-run programs and services.

Recovery, self-determination and safety
Recognising that consumers’ self-determination is a vital part of successful treatment and recovery, the principles of recovery emphasise choice and self-determination within medico-legal requirements and duty of care. Striking a balance requires an understanding of the complex and sometimes discriminatory nature of the goal of reducing all harmful risks (Slade 2009a, pp. 176–179). Services must manage various tensions including:
• maximising choice
• supporting positive risk-taking
• the dignity of risk
• medico-legal requirements
• duty of care
• promoting safety.

Maximising people’s self-determination requires continued efforts to reduce coercion, seclusion and restraint. However, involuntary assessment and treatment will continue to be necessary when there is no less restrictive way to protect a person’s health and safety.

All Commonwealth and state legislation and standards governing mental health service provision emphasise the importance of working collaboratively with a person and their family irrespective of whether they are receiving treatment voluntarily or involuntarily, or whether that treatment is in a hospital or in the community. Self-determination is a vital part of successful treatment and recovery. The concepts of self-determination, personal responsibility and self-management and the goals of reclaiming control and choice are pivotal regardless of a person’s legal status. For people who are treated under mental health legislation—that is, involuntarily—recovery-oriented care will have different characteristics at different phases of their treatment.
Domains of recovery-oriented practice and service delivery

The framework consists of 17 capabilities, grouped into five fields of practice known as ‘practice domains’. The domains are overlapping and should be used concurrently.

Domain 1: Promoting a culture and language of hope and optimism is the overarching domain and is integral to the other domains.

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A service culture and language that makes a person feel valued, important, welcome and safe, communicates positive expectations and promotes hope and optimism—this is central to recovery-oriented practice and service delivery

Domain 2: Person 1st and holistic

Putting people who experience mental health issues first and at the centre of practice and service delivery; viewing a person’s life situation holistically

Domain 3: Supporting personal recovery

Personally defined and led recovery at the heart of practice rather than an additional task

Domain 4: Organisational commitment and workforce development

Service and work environments and an organisational culture that are conducive to recovery and to building a workforce that is appropriately skilled, equipped, supported and resourced for recovery-oriented practice

Domain 5: Action on social inclusion and the social determinants of health, mental health and wellbeing

Upholding the human rights of people experiencing mental health issues and challenging stigma and discrimination; advocating to address the poor and unequal living circumstances that adversely impact on recovery.

Capabilities

Capabilities for recovery-oriented practice and service delivery encompass underlying core principles, values, knowledge, attitudes and behaviours, skills and abilities. Individuals, teams and organisations need these capabilities in order to support people with mental health issues to live a meaningful and contributing life in their community of choice. The framework identifies 17 key capabilities within the five practice domains. Each capability is described with the following attributes:

Core principles that should govern all practice, decisions and interactions in the provision of mental health care within the relevant domain

Values, knowledge, behaviours and skills consistent with recovery-oriented practice

Recovery-oriented practice examples intended to support all mental health workers to translate principles of recovery into their daily practice
Recovery-oriented leadership examples directed at service leaders and managers that describe activities and governance structures that support and promote a recovery-oriented organisation.

Opportunities and resources to guide and support implementation.

A detailed description of the domains and associated capabilities can be found in the Appendix at the end of this document. They are summarised in Table 1 below.

Table 1: Practice domains and capabilities

<table>
<thead>
<tr>
<th>Domains</th>
<th>Domains 2: Person 1st and holistic</th>
<th>Domains 3: Supporting personal recovery</th>
<th>Domains 4: Organisational commitment and workforce development</th>
<th>Domains 5: Action on social inclusion and the social determinants of health, mental health and wellbeing</th>
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</thead>
<tbody>
<tr>
<td></td>
<td>Holistic and person-centred service</td>
<td>Promoting autonomy and self-determination</td>
<td>Recovery vision, commitment and culture</td>
<td>Supporting social inclusion and advocacy on social determinants</td>
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<td></td>
<td>Responsive to Aboriginal and Torres Strait Islander people</td>
<td>Focusing on strengths and personal responsibility</td>
<td>Acknowledging, valuing and learning from lived experience</td>
<td>Challenging stigmatising attitudes and discrimination</td>
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<td>Responsive to people from immigrant and refugee backgrounds</td>
<td>Collaborative relationships and reflective practice</td>
<td>Recovery-promoting service partnerships</td>
<td>Partnerships with communities</td>
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<td></td>
<td>Responsive to gender, age, culture, spirituality and other diversity</td>
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<td>Workforce development and planning</td>
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<td></td>
<td>Responsive to lesbian, gay, bisexual, transgender and intersex people</td>
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<td>Responsive to families, carers and support people</td>
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Conclusion

Helping people to find the right combination of services, treatments and supports and eliminating discrimination by removing barriers to full participation in work, education and community life is the key to the promotion and adoption of a recovery-oriented culture within mental health services.

Application of this framework will contribute to improved mental health and wellbeing as people are supported in new ways to lead fulfilling and contributing lives. The framework will foster new and innovative service designs, and in particular services designed and operated by people with lived experience of mental health issues. All Australian jurisdictions and all mental health services have a responsibility to promote and implement the framework.