



The Victorian
Collaborative Centre
For Mental Health & Wellbeing



Collaboration in Action



Annual Report
2024-25



To receive this document in another format,

email the Victorian Collaborative Centre for Mental Health and Wellbeing collabcentre@vccmhw.vic.gov.au.

Authorised and published by the Victorian Government, 1 Treasury Place, Melbourne.

© State of Victoria, Australia, Department of Health, October 2025.

Except where otherwise indicated, the images in this document show models and illustrative settings only, and do not necessarily depict actual services, facilities or recipients of services. This document may contain images of deceased Aboriginal and Torres Strait Islander peoples.

In this document, 'Aboriginal' refers to both Aboriginal and Torres Strait Islander people. 'Indigenous' or 'Koori/Koorie' is retained when part of the title of a report, program or quotation.

In this document, "Lived and Living Experience (LLE)" is used to refer to individuals with past or current lived experiences of mental health challenges and/or their families, carers, supporters and kin, who utilise the expertise built from their experiences to support systems transformation. Lived and Living Experience Workforces (LLEWs) specifically refers to individuals employed in the mental health and wellbeing system in designated roles to work from their respective LLE Discipline Frameworks."

Available at <http://www.vccmhw.vic.gov.au>

Design: Porter Novelli Australia



**The Victorian
Collaborative Centre**
For Mental Health & Wellbeing

205 Queensberry Street
Carlton VIC 3053

www.vccmhw.vic.gov.au

Declaration

In accordance with section 668(1) of the *Mental Health and Wellbeing Act 2022*, I am pleased to present the Victorian Collaborative Centre for Mental Health and Wellbeing's annual report for the year ending 30 June 2025.

Dr Gerry Naughtin

Board Chairperson

20 October 2025





Contents

Acknowledgement of Country	06
Our commitment to allyship and Aboriginal Victorians	07
Recognition of Lived and Living Experience	07
Recognition of the Mental Health Workforce	07
A message from the Chair and Co-CEO	08
Section 1: About the Collaborative Centre	10
Strategy on a page	11
Snapshot of our achievements	12
About us	14
Meet our team	20
Our alignment with the <i>Mental Health and Wellbeing Act 2022</i>	24
Section 2: Our year in review	26
Delivering on our strategic priorities	27
Performance Priority 1: Connecting people, ideas and evidence	28
Performance Priority 2: Translating research into practice	32
Performance priority 3: Providing treatment, care and support	38
Performance Priority 4: Strengthening and supporting the workforce	40
Performance Priority 5: Building a sustainable and influential organisation	42

Acknowledgement of Country

The Victorian Collaborative Centre for Mental Health and Wellbeing (the Collaborative Centre) acknowledges with deep respect all First Nations peoples and Traditional Owner groups within Victoria. We recognise their enduring connection to Country, Culture, and Kin, a connection that has been nurtured for thousands of years.

We acknowledge government's role in the devastating impacts of colonisation, the displacement and dispossession of First Nations peoples, and the ongoing social, emotional, and political consequences.

We pay our deepest respects to Elders past and present, recognising their ongoing resilience, wisdom, and leadership. We acknowledge that this land was, is, and always will be Aboriginal land.



Our commitment to allyship and Aboriginal Victorians

The Collaborative Centre commits to collaborating with Aboriginal communities in ways that respect their sovereignty. We acknowledge that self-determination involves more than consulting and partnering with Aboriginal communities on policies, programs and research initiatives that affect their lives. We also recognise the key role and expertise of Aboriginal Community Controlled Health Organisations (ACCHOs) in driving holistic solutions for their communities, and we acknowledge the decision-making and resource control that ACCHOs require to drive these solutions. We are committed to supporting Aboriginal self-determination and ensuring the perspectives of Aboriginal people are informing the work of the Collaborative Centre. We look forward to working with ACCHOs and Aboriginal communities, ensuring that when we are fulfilling

our functions under the *Mental Health and Wellbeing Act 2022*, we do so in line with the self-determined needs of First Nations peoples.

We acknowledge that the mental health system has failed to fully recognise Aboriginal ways of knowing, doing, and being. We strive to learn from this history and aim to work towards a mental health system that respects and incorporates Aboriginal perspectives. We commit to celebrating the strengths of Aboriginal communities and to working collaboratively to address the challenges they face. The Collaborative Centre respects the aspirations and sovereignty of all Aboriginal Victorians and is committed to Victoria's Treaty process. We wholeheartedly support this and have listened to the Yoorrook Justice Commission recommendations and the aspirations of the First People's Assembly of Victoria.

Recognition of Lived and Living Experience

The Collaborative Centre recognises people with Lived and Living Experience (LLE) of mental health challenges and psychological distress and the experience of people who have been, and are, carers, families, supporters and kin. We support ongoing mental health reform and are committed to partnering with and being led by people with LLE to achieve systemwide transformation.

The Collaborative Centre is dedicated to learning from and honouring the work of LLE communities. We recognise the diversity of experiences which may intersect with mental health across all backgrounds, genders, sexualities, cultures, religions, ages, bodies and abilities – that enrich our collective understanding of wellbeing and strengthen our work.

Recognition of the Mental Health Workforce

The Collaborative Centre acknowledges, recognises and appreciates the commitment, skills and expertise of staff working in mental health services across Victoria. The mental health workforce is the backbone of our mental health system. We are committed to working in collaboration with all parts of the mental health workforce, supporting the wellbeing of staff and their continuing education and capability development to collectively drive reform of Victoria's mental health system.

A message from the Chair and Co-CEO

A year of change and growth

In the 2024-25 financial year, the Collaborative Centre made major achievements in progressing our work and impact in implementing recommendations from the Royal Commission.

Recent Victorian Government announcements have further refined our purpose on whole-of-workforce training and capability development. Our translational research and partnerships are positioning the Collaborative Centre to drive innovative new models of care and support Victoria's mental health workforce, informed by LLE leadership and engagement.

As we pause and reflect on our achievements, we are pleased that we have delivered on time and under budget across our 2024-25 performance indicators. We launched our first *Strategic Plan 2024-2027* and our *Translational Research Strategy 2024-2027*, providing a roadmap to improve Victoria's Mental Health and Wellbeing System together.

Building a stronger foundation for transformation

The 2024-25 financial year was about embedding the Royal Commission vision of working differently at the Centre, bringing together people with LLE researchers, practitioners, workforce educators and policy makers to improve mental health outcomes for all Victorians.

We also consolidated and refined our legislative functions, risk management, reporting and compliance obligations. In addition, formalising the *Adult and Older Adult Best Practice Consortium (Consortium)* with our lead partners, Royal Melbourne Hospital and the University of Melbourne, provides a strong foundation for ongoing development of our translational research, workforce development and innovative service delivery.

Our achievements this year included:

- **Strengthening our partnerships with members of the Consortium**, marked by a Consortium Connect Event and the development of the Consortium's workplan.
- **Completing the fit out of our new accommodation in Carlton**, embedding us in the community and bringing us closer to our lead partners, by July 2025.
- **Launching our flagship AI-driven Knowledge Sharing Platform**, bringing new technology to support research translation and workforce capability development across the mental health sector.

- **Strengthening our leadership team**, with the appointments of Professor Jason Thompson, the University of Melbourne’s inaugural Professor of Mental Health reform; Emma Cadogan, Director of Workforce Education and Development; and Bradley Medcroft, Chief Operating Officer.
- **Standing up our workforce training and development function** ready to commence on 1 July 2025, ensuring minimal disruption to continuity of professional training programs as staff transitioned from the Centre for Mental Health Learning (CMHL).

All of these achievements have been delivered as we near the end of the three-year term of the inaugural Board and the Lived Experience Advisory Panel (LEAP). The Collaborative Centre has built firm foundations for our next phase of development and growth. We enter the 2025-26 financial year with a clear understanding of our role as a system steward. We appreciate the scale of work to be done and look forward to delivering on our legislative functions in collaboration with the sector.

We acknowledge the commitment and contributions of all Board members during the past year. In particular, we recognise the leadership the inaugural Board Chair, Terry Laidler and Deputy Chair, Maria Katsonis in establishing the Collaborative Centre. We extend our sincere gratitude to our LEAP and look forward to their evolving governance role as they transition to the new Lived and Living Experience Governance (LLEG) Committee.

Our progress throughout this year would not have been possible without the commitment and purpose our hardworking staff have brought to their roles every day. We also acknowledge our inaugural Co-CEO (Lived Experience), Carolyn Gillespie, who we farewelled in June 2025.

We thank her for her leadership and commitment to embedding LLE into our foundations. We are also grateful for the work of Dan Brown, who served as Director of Operations and Acting Director of Workforce Education and Development, and Dr Katie Jones, Director of Research Strategy.

We extend our deep gratitude to the CMHL leadership and staff for the invaluable contribution they have made to developing Victoria’s mental health workforce over the years. We are proud to be continuing their important work in supporting the capability of the sector.

Finally, we recognise and thank our lead partners, Royal Melbourne Hospital and the University of Melbourne for their contributions and partnership. We also recognise and thank our broader network of sector partners and lived experience leaders and communities. Your engagement, collaboration and trust keep us accountable and moving forward.

In the year ahead, our focus will be on consolidating our progress and deepening our impact. We look forward to working together towards a better, more connected mental health and wellbeing system for all Victorians.



Dr Gerry Naughtin OAM
Board Chairperson



Professor Sarah Wilson, FAHMS, FASSA, GAICD
Co-CEO (Clinical/Academic)

Section 1:

About the Collaborative Centre



Strategy on a page

In 2024, the Collaborative Centre delivered its first three-year strategic plan, which sets out our vision for better mental health and wellbeing for all Victorians through collaborating and learning together. It is our roadmap for the changes required to reform Victoria's Mental Health and Wellbeing System over the next three years.

Our *Strategic Plan 2024-2027* was shaped through conversations with people with LLE, researchers, practitioners, community groups and policy makers. It has involved close collaboration with our LEAP and the Consortium.



Snapshot of our achievements



Focus Area 1

Connected the mental health and wellbeing sector through our convened community knowledge sharing events, reaching more than 25,000 Australians.

Focus Area 2

Delivered Victoria's first *Translational Research Strategy 2024-2027*, with rollout now underway with our lead research partner, the University of Melbourne.



Focus Area 3

Delivered the Open Dialogue project in partnership with our lead clinical partner, the Royal Melbourne Hospital.

Focus Area 4

Commenced work to deliver systemwide mental health workforce education and professional development for Victoria, following the joint announcement of the Victorian Premier and Minister for Mental Health in March 2025.



Focus Area 5

Completed fit out of the Collaborative Centre's new accommodation at 205 Queensberry Street, Carlton.



About us

The Collaborative Centre was established under the *Mental Health and Wellbeing Act 2022 (Vic)* in response to the first recommendation of the *Royal Commission into Victoria's Mental Health System*. We commenced operations on 1 September 2022 with a mandate to fulfil the aspiration of the Royal Commission and work towards better mental health and wellbeing for all Victorians. We are accountable to the Minister for Mental Health as the responsible Minister. Ingrid Stitt MP was appointed Minister for Mental Health in October 2023.

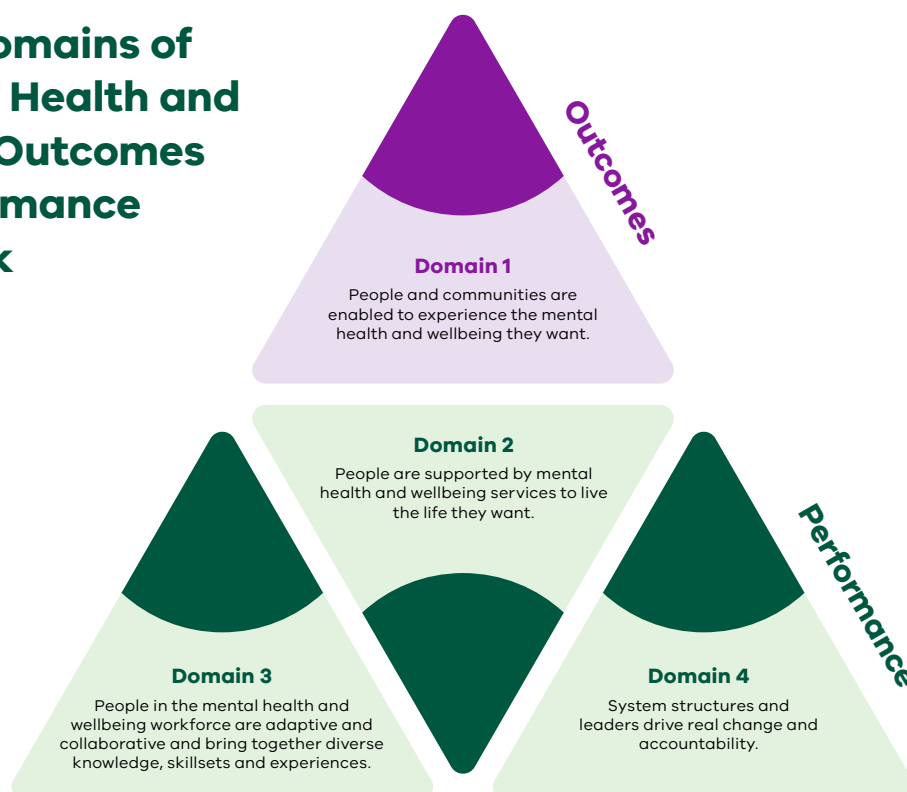
Our role

The Collaborative Centre is one of the system stewards that was established alongside other Victorian Government initiatives to support the reform agenda for better mental health and wellbeing outcomes across the state.

We work closely with the Department of Health and other system stewards, peak bodies representing mental health consumers and carers, statewide services, mental health service and workforce training providers across the sector, research

institutions, professional organisations, and unions. Collaboration is central to our way of working and partnering, as outlined in our Collaborative Charter. Across this broad network of partners, our priorities are focused on leading Victoria's mental health translational research to innovate models of care and service delivery and support systemwide workforce training and capability development, informed by LLE expertise and participation.

The four domains of the Mental Health and Wellbeing Outcomes and Performance Framework



The Victorian Government developed the Mental Health and Wellbeing Outcomes and Performance Framework (OPF) to deliver the Royal Commission's recommendation to establish a systemwide framework to guide reform, measure progress and drive accountability. The OPF has four domains that link indicators of system performance with mental health and wellbeing outcomes for Victorians.

As a statutory entity, the Collaborative Centre operates within Domain 4: System Stewardship. Our role as a system steward is to support the growth of a high performing, learning mental health system.

This role bridges the gap between research and practice, between what we know and what we're doing. By translating existing knowledge and innovating new models of care informed by LLE we can uplift systemwide workforce training and capability development for better outcomes for consumers and carers.

Embedding collaboration between researchers, practitioners, people with LLE, workforce educators and policy makers provides a powerful model for innovating the way we deliver care, supporting policy development and government decision making.

Our governance



Our Board

The Collaborative Centre has a governing Board, which is accountable to the Minister for Mental Health for stewardship and oversight of the delivery of the Collaborative Centre's legislated functions under the *Mental Health and Wellbeing Act 2022* (Vic).

The Board established a Steering Committee in 2025 to guide the Collaborative Centre's many priorities throughout the year. This included overseeing the fit out of our new accommodation and the realignment of our governance, leadership and budget with the Collaborative Centre's refined purpose and priorities.

Reflecting the Collaborative Centre's commitment to LLE and bringing an evidence-informed approach to our work, the Board also commissioned a review of the Collaborative Centre's engagement with LLE communities, led by Special Advisor for Lived and Living Experience, Erandathie Jayakody. The review provided a set of recommendations that will be actioned by the Board to deepen our collaboration and relationships with Victoria's LLE sector leaders and communities.

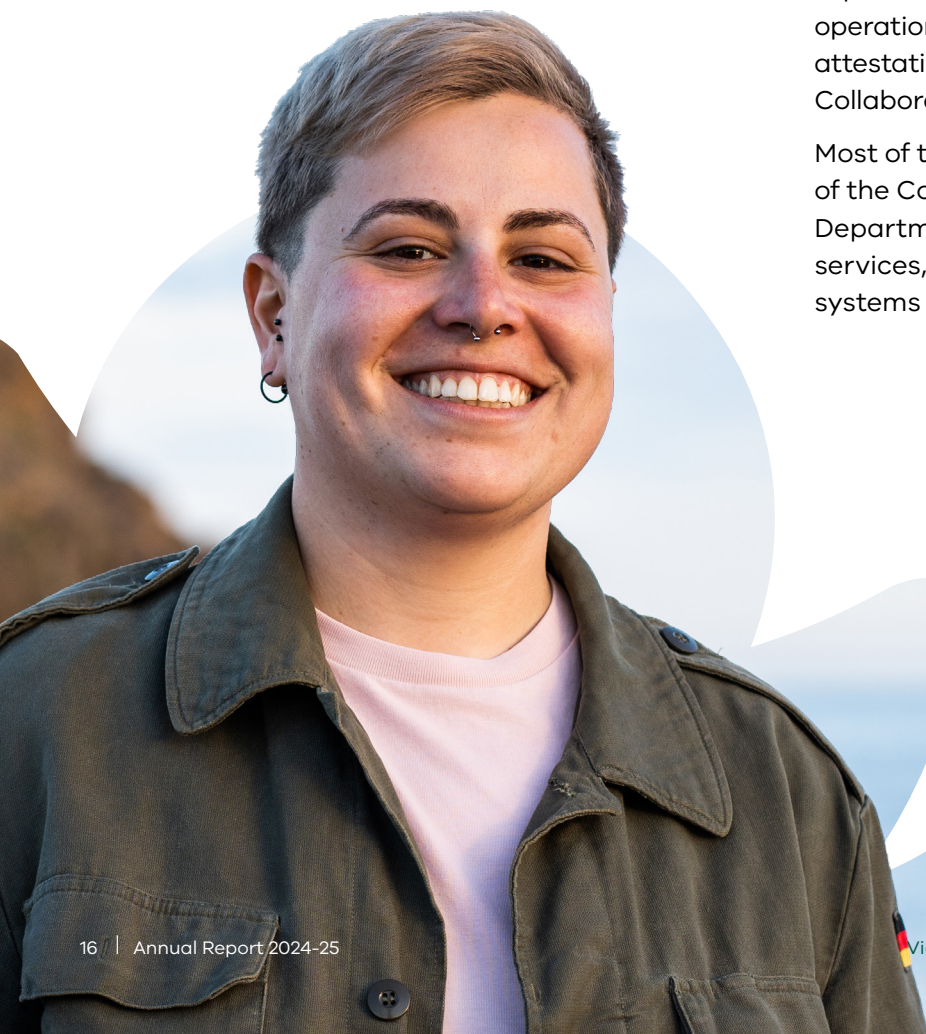
Finance, Audit and Risk Committee

The Board has established the FAR Committee to assist with its oversight, compliance and assurance obligations to further the Collaborative Centre's purpose, functions and strategic priorities in a financially efficient and effective way. The FAR Committee is accountable to the Board.

On 20 August 2025 the Minister for Finance made an ongoing determination that the Collaborative Centre consolidate its annual financial statements and report of operations with those of the Department of Health. This included granting an ongoing exemption from the requirements of the Standing Directions, and from public attestation in the annual report. The Collaborative Centre will continue to provide the Department of Health with an annual internal compliance attestation and information on its financial activities.

This determination and exemption were made in accordance with the Financial Management Act 1994 and Direction 1.5 of the Standing Directions 2018. The determination was based on the Collaborative Centre's low financial risk, and the undue administrative burden that preparing separate financial statements, a report of operations and Standing Directions compliance attestation annually would create on the Collaborative Centre and the Department of Health.

Most of the financial management requirements of the Collaborative Centre are covered by the Department of Health, who provide corporate services, including accounting, reporting and systems services.



The Lived Experiences Advisory Panel (LEAP)

LEAP was established to provide expert advice to the Board on its functions and the activities and priorities of the Collaborative Centre. The LEAP also provides advice to the Collaborative Centre's operational team, and LEAP members participate in a range of activities including working groups, co-design and providing expertise on strategic documents.

The 2024-25 financial year has been a year of transformation, transition and tenacity, for our sector, our community and the LEAP. It has been a year of navigating uncertainty with intention, holding space for truth-telling, and strengthening the foundations of LLE governance as a systemic right, not a symbolic gesture.

As the mental health sector grappled with operational pressures and evolving expectations, we held fast to our commitment: that lived experience is not only a form of knowledge, it is a source of governance, leadership, and cultural transformation. This year marked the start of a deliberate shift from advice to authority, from participation to power-sharing, and from legacy to leadership.

We said a sad but fond farewell to several foundational members, including our esteemed Co-Chairs, Dr Caroline Lambert and Emily Unity. Under their stewardship, LEAP became more than an advisory body, it became a collective identity. Their compassion and vision helped establish a platform grounded in courage, empathy, and collective wisdom.

In 2024-25, the LEAP played a central role in shaping the direction and integrity of the Collaborative Centre's work. We contributed to the three-year strategic plan through a dedicated planning day with Board and executive leaders, ensuring it was grounded in shared values and co-visioning. We progressed the Collaborative Centre's LLE Strategy with a focus on authenticity, intersectionality, and real power-sharing. Our participation in establishing the Lived Experience Knowledge Group, part of the Consortium, ensured LLE leadership is embedded in mental health governance.



Sam Hayward and Robyn Callaghan

We also guided the redesign of the Collaborative Centre's website and the development of a new Knowledge Sharing Platform, championing accessibility and co-produced learning. Importantly, we had a voice in the design of the new 205 Queensberry Street premises, ensuring the fit-out aligned with principles of healing, rights, accessibility and inclusion.

The Board has endorsed a recommendation from LEAP to establish a new Lived and Living Experience Governance (LLEG) Committee to replace LEAP in the 2025-26 financial year. A charter has been developed to support this new Board committee, which will strengthen the voices of people with LLE in the governance and work of the Collaborative Centre.

This is a significant structural shift from an advisory body to a formal governance committee embedded within the Collaborative Centre's Board. This transition isn't just administrative, it's transformational.

Sam Hayward and Robyn Callaghan have been elected as the new LEAP Co-Chairs following the three-year term of Caroline and Emily. Sam and Robyn are working with the Board on the transition and recruitment processes for the new LLEG Committee.

The Adult and Older Adult Best Practice Consortium

Under the 2022 Mental Health and Wellbeing Act, the Collaborative Centre has established its lead clinical and research partners, the Royal Melbourne Hospital and the University of Melbourne, captured in our shared *Memorandum of Understanding*. Our lead partners bring the strength and reach of a broad network of 18 metropolitan and regional health services, research institutions and community organisations, forming the *Adult and Older Adult Best Practice Consortium (Consortium)*.

Figures 1 and 2 show the connectivity of Consortium partners.

The Consortium brings deep expertise and a shared commitment to driving meaningful reform. Its broad network provides statewide reach and connectivity to the Collaborative Centre, including both regional and metropolitan contexts.

Our partnership with the Consortium has underpinned the delivery of a broad range of projects by the Collaborative Centre this year.

List of Consortium partners

Lead partners



The Royal Melbourne Hospital



Consortium partners



AUSTRALIAN CATHOLIC UNIVERSITY



- DARDIMUNWURRO
- GRAMPPIANS
- UNITINGVICITAS

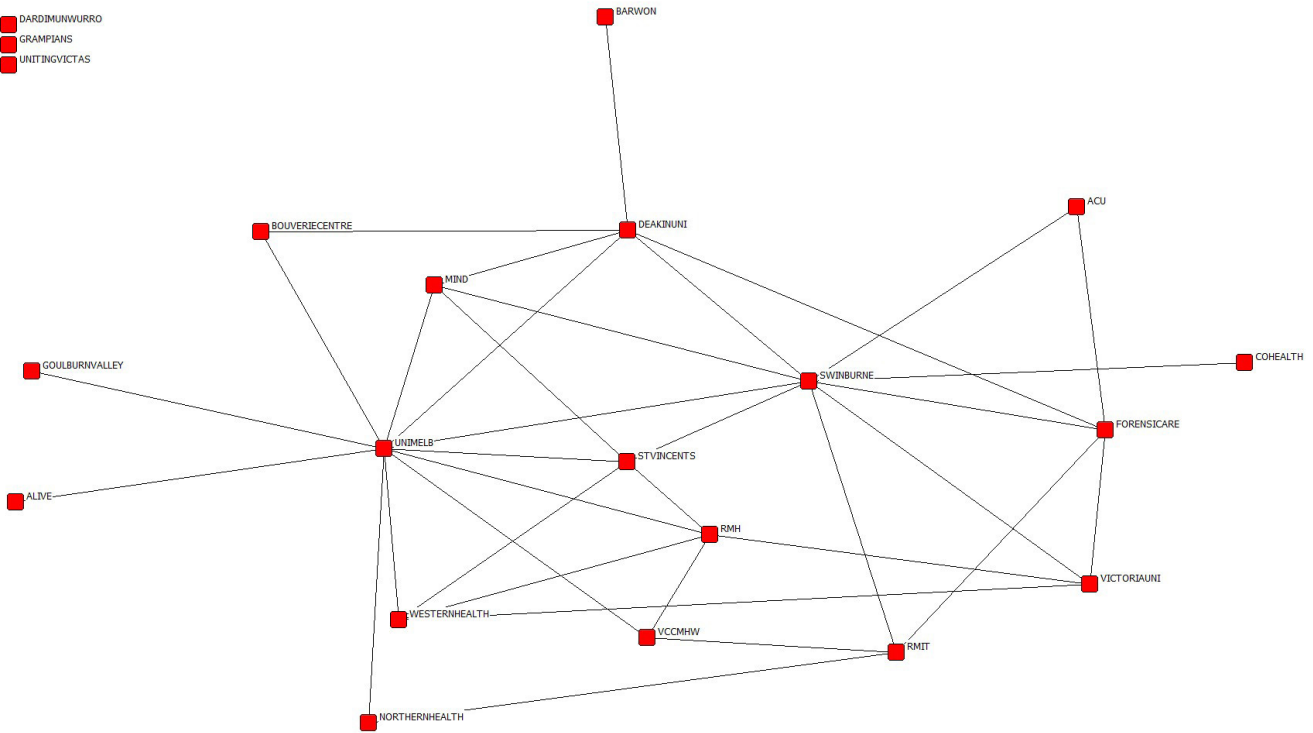


Figure 1. Existing research collaborations between the Consortium including the Collaborative Centre.

- DARDIMUNWURRO
- UNITINGVICITAS

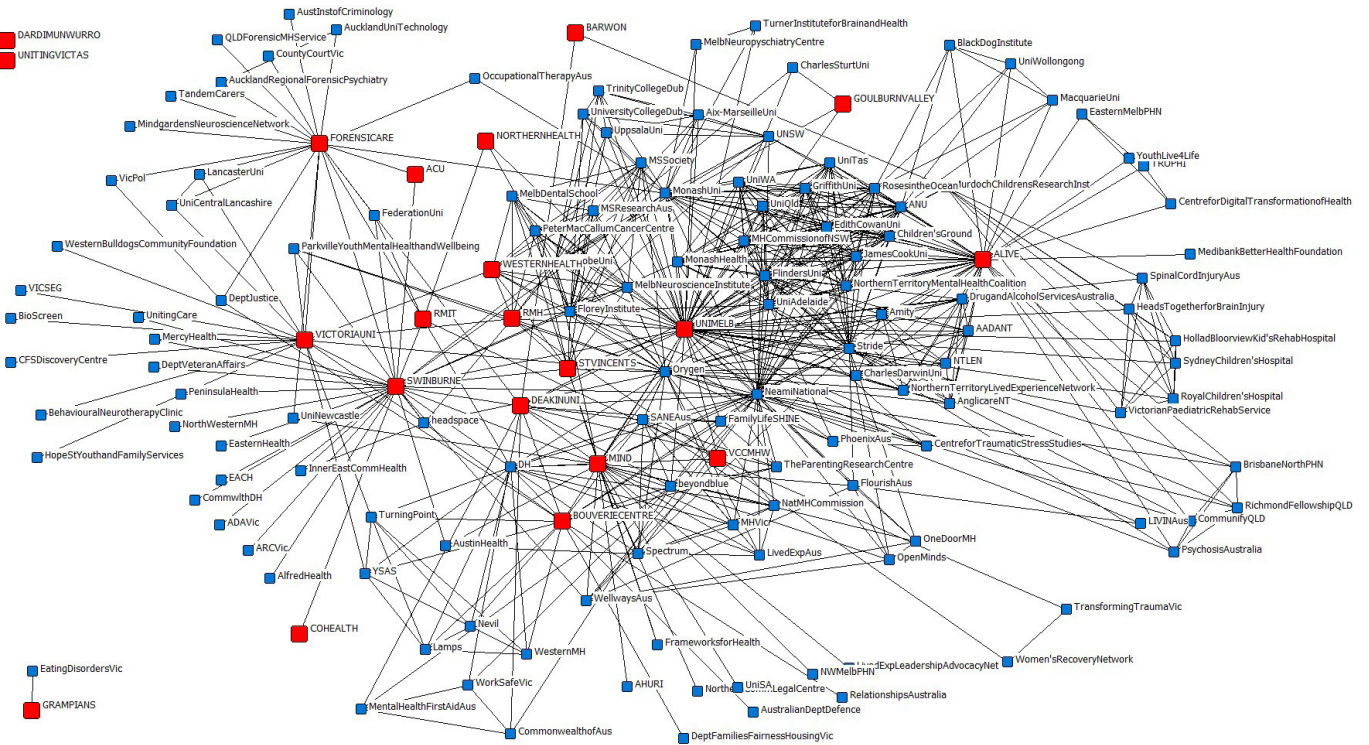


Figure 2. Existing research collaborations between the Consortium and broader sector partners.

Meet our team

Our Board



Dr Gerry Naughtin
Chair



Amelia Walters
Deputy Chair
(Lived Experience)



Lisa Brophy



Gill Callister



David Fenn



Bridget Hamilton



Sheree Lowe



Phong Nguyen



Fionn Skiotis

With thanks to our outgoing Board members:



Terry Laidler
Outgoing Chairperson
(until 31 August, 2025)



Maria Katsonis
Deputy Chairperson
(Lived Experience)
(until 25 June, 2025)



Steve Moylan
(until 31 August, 2025)

Our Lived Experiences Advisory Panel Co-Chairs



Sam Hayward
Co-Chair



Robyn Callaghan
Co-Chair



Suzie Thoraval
Chair

Our Finance, Audit and Risk Committee Committee Chair

With thanks to our outgoing Co-Chairs:



Caroline Lambert
Outgoing Co-Chair
(until 2 July 2025)



Emily Unity
Outgoing Co-Chair
(until 2 July 2025)

Our Leadership Team



Professor Sarah Wilson
Co-CEO, PhD, FAMHS, FASSA, GAICD
Co-CEO (Clinical/Academic)
8 January 2024

Sarah is a leading international researcher in brain and mental health with a sustained track record in research translation embedded in co-design with people with lived and living experience. She is a Professor of Clinical Neuropsychology with more than 30 years of practice experience in the Victorian public and private health sectors and over 15 years of executive and senior leadership. Sarah's contributions to health and social sciences research have been recognised through dual fellowship of the Australian Academy of Health and Medical Sciences and the Academy of Social Sciences in Australia.



Bradley Medcroft
Chief Operating Officer (COO)
(23 September 2025)

Bradley Medcroft is a senior public sector and consulting executive with deep expertise in governance, reform, and people leadership. He has held C-suite roles across the Victorian Public Service, the courts, and management consulting, with qualifications in Law, Psychology and Project Management. As COO of the Centre, he oversees operations, culture, and strategic delivery embedding lived experience leadership throughout the organisation.



Emma Cadogan
Director, Workforce Education and Development
(21 July 2025)

Emma Cadogan is a social worker and workforce leader with extensive experience across mental health, harm reduction, and education. She has held senior roles in the Department of Health, National Health Service, Prahlan Mission and the Pharmaceutical Society of Australia, specialising in workforce strategy and training. Emma leads the Collaborative Centre's workforce portfolio, embedding LLE and driving equity, social justice, and inclusion.



Professor Jason Thompson
Professor of Mental Health Reform, The University of Melbourne (Academic Lead Partner)
(21 July 2025)

Professor Jason Thompson is a psychologist and systems researcher with international recognition in policy modelling, mental health reform, and translational research. He has published more than 100 papers, secured over \$5 million in research funding, and shaped Victoria's COVID-19 response through epidemiological modelling. A Professor at the University of Melbourne, he brings expertise in building interdisciplinary, LLE-led research.

With thanks to our outgoing Co-CEO (Lived Experience):



Carolyn Gillespie
Co-CEO
(12 June 2025)

To learn more about our Board members, LEAP, FAR Committee and our leadership team, please visit the Collaborative Centre website: <http://www.vccmhw.vic.gov.au>.



Our alignment with the *Mental Health and Wellbeing Act 2022*

The Collaborative Centre is committed to aligning with the principles of the Act. Our work aligns most closely with the following principles.



Health needs



Diversity



Gender safety



Lived experience



Family and carers



Dignity and autonomy



Least restrictive



Dignity of risk



Least restrictive principle

- Our **Collaborative Charter** is built on the foundation of upholding human rights and social justice and it forms part of our relational approach to partnership and collaboration.
- A key enabling principle of the Our Centre's first **Strategic Plan 2024-2027** is to embed human rights, social justice and take an intersectional approach into everything we do.
- Our **Translational Research Strategy 2024-2027** recognises the need to nurture a culture focused on better experiences for consumers, families, carers and kin. This includes our third research priority area of *Eliminating seclusion and restraint and reducing compulsory treatment*.



Family and carers principle

- The fourth research priority of our **Translational Research Strategy 2024-2027** is focused on the development of dedicated and flexible supports for families, carers, supporters and kin.
- We supported the development of resources through the **Family and Carer Research and Advocacy Network**. This work focused on describing, mapping and defining the Connect Centre carer lived experience workforce, including making recommendations to grow the carer workforce.



Health needs and diversity principle

- A key enabling principle of the Collaborative Centre's **Strategic Plan 2024-2027** is to take an intersectional approach into everything we do.
- The second research priority of our **Translational Research Strategy 2024-2027** is committed to supporting and amplifying culturally responsive, intersectional approaches to care for First Nations peoples and communities, diverse communities, and people impacted by intersecting layers of oppression.
- Our **Knowledge Sharing Platform** hosts practice resources and evidence-based research that support intersectional and culturally safe approaches to care as well as addressing broader and social determinants of health, such as alcohol and other drug use, homelessness and gender-based violence. The platform's content and curation strategy prioritises resources that support diverse and marginalised communities.



Lived experience principle

- As set out in our **Strategic Plan 2024-2027**, the Collaborative Centre's purpose is to work in partnership with people with LLE towards our common goal of driving groundbreaking change to Victoria's mental health and wellbeing system. It is also an enabling principle for the Collaborative Centre's work to champion LLE leadership, partnership and co-production.
- LLE is embedded throughout the Collaborative Centre, including our decision-making, governance, leadership and workforce.
- The first enabling pillar of our **Translational Research Strategy 2024-2027** is to champion LLE leadership and engagement.



Cultural safety principle

- Our **Collaborative Charter** values all perspectives and we aspire to making people feel safe to share their views and experiences.
- The second research priority of our **Translational Research Strategy 2024-2027** is committed to supporting and amplifying culturally responsive, intersectional approaches to care.

Section 2:

Year in review



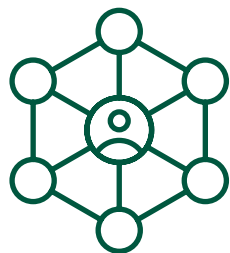
Delivering on our strategic priorities

Statements of Priorities are key accountability agreements between Government and Victorian publicly funded entities, including health, mental health and ambulance services.

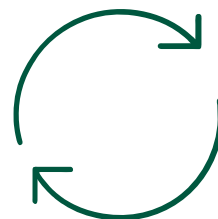
Across the performance outcome indicators of the Collaborative Centre's 2024-2025 *Statement of Priorities*, we have delivered on time and under budget for the 2024-25 financial year.

These achievements have occurred in the context of reduced Collaborative Centre staffing, ahead of the 2025-26 May budget outcomes and the Silver Review.

1. Connecting people, ideas and evidence.



2. Translating research into practice.



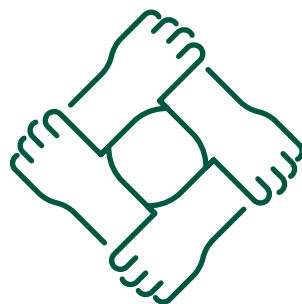
3. Providing treatment, care and support.



5. Building a sustainable and influential organisation.



4. Strengthening and supporting the workforce.



Connecting people, ideas and evidence

Our work brings people together to engage widely and share trusted information that drives positive change.

We have connected diverse perspectives and sources of evidence, including the knowledge and expertise of LLE and interdisciplinary approaches

to support collaboration on system challenges and drive positive change across the system.

During 2024-25, we deployed several knowledge sharing initiatives that connected people to the information and resources they need to translate evidence into practice within their local contexts.


Knowledge sharing events

Translational Research Strategy launch



87 attendees

Consortium Connect event



84 attendees

'In Conversation' event – men's experiences with mental health



103 attendees



75% reported increase in knowledge

'In Conversation' event – promoting gender-based safety across mental health and wellbeing services

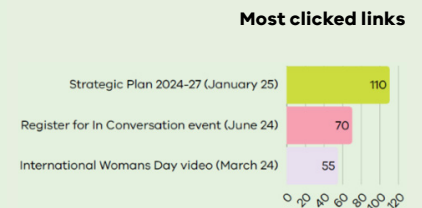
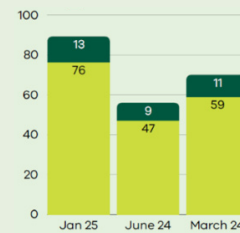


60 attendees

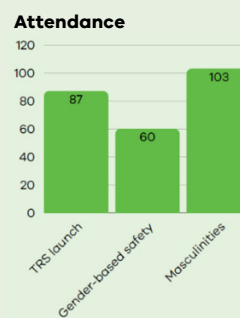


51% reported increase in knowledge

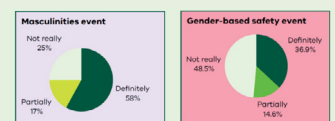
E-newsletters



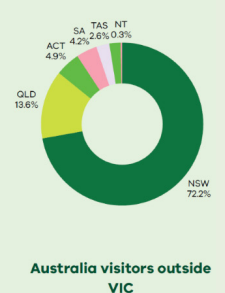
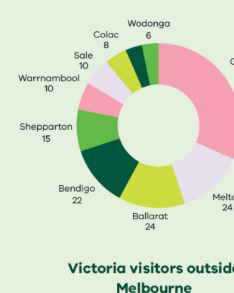
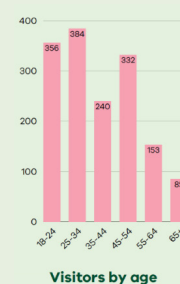
Events



In Conversation post-event surveys
Attendees were asked about whether they **'got what (they) were hoping for' out of (these events)**.



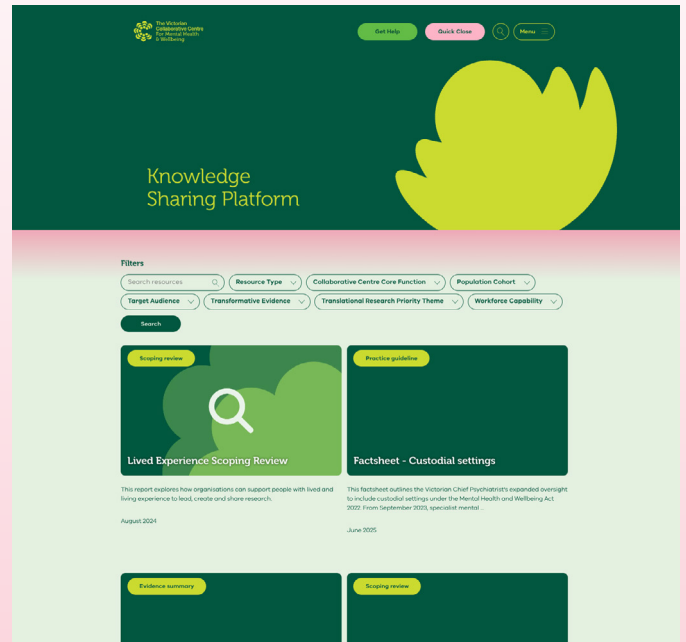
Web - audience insights



Data-driven insights and capabilities

The Knowledge Sharing Platform was successfully launched in June 2025, with more than 80 mental health and wellbeing articles already submitted and published on the platform.

The platform is unique and was co-designed to champion a transformative approach to knowledge sharing by integrating three types of evidence – the knowledge of people with LLE, evidence-based best-practice from those working in care settings, and the latest research findings and evaluation insights from academics, researchers and evaluators. The Knowledge Sharing Platform is a sector-wide resource – for researchers, practitioners, policy makers, consumers and carers to search, filter, interact with and download resources based on their information and evidence needs.



Thought leadership and engagement with more than 25,000 Australians.

An increase of **500+** followers on LinkedIn (total 3,697).

Ongoing, regular public communications about the Collaborative Centre's new role in statewide mental health workforce education and development.

21,375

unique views of our website.

An increase of **1,260**

e-news subscribers (total 2,160).

Our progress

Our goals for 2024-25 We will convene inclusive knowledge sharing events to drive positive system change

Connecting people, ideas and evidence

Outcomes

Over the course of the 2024-25 financial year, four significant knowledge sharing events were held to engage with the sector:

- Two 'In Conversation' events exploring the diverse perspectives of practitioners, people with LLE and researchers on:
 - Promoting gender-based safety across mental health and wellbeing services (60 attendees, 51 per cent reported increase in knowledge)
 - Men's experience with mental health (103 attendees, 75 per cent reported increase in knowledge)
- A 'Consortium Connect' event bringing together the Consortium and leaders across the research, LLE, service delivery, community and government sectors (84 attendees) to share new knowledge relating to community based and hybrid models of care.
 - Mapping of the Consortium's current research and service delivery collaborations was undertaken, highlighting its systemwide connectivity (as shown in Figures 1 and 2 on page 17).
 - The event formed the basis on which the 2025-26 Consortium Workplan is being finalised, which was co-designed and developed.
 - The event is the first in an ongoing series to provide regular opportunities for the Collaborative Centre and Lead partners to engage with broader Consortium members to develop innovative translational research and implement evidence-based enhancements to treatment, care and support for sector wide impact.
- The Co-CEO (Clinical/Academic) has undertaken one-on-one meetings with all the organisations in the Consortium, and the Collaborative Centre has provided seed funding for each organisation to contribute to the co-design and implementation of the work.



Our goals for 2024-25 We will deploy a leading-edge knowledge sharing platform with users at its centre

Outcomes

The Knowledge Sharing Platform was successfully launched in June 2025. This deliverable is partially complete as the timeframe was too short to analyse metrics reflecting use of the Knowledge Sharing Platform for the 2024-25 financial year. Despite this, over 80 mental health and wellbeing articles have already been submitted and published on the platform. Metrics for the Collaborative Centre's former website and other communication channels are addressed below.

The Knowledge Sharing Platform was developed through an extensive co-design process to champion a transformative approach to knowledge sharing by equally valuing and integrating three types of evidence – the knowledge of people with lived and living experience, evidence-based best-practice from those working in care settings, and the latest research findings and evaluation insights from academics, researchers and evaluators.

Resources on the Knowledge Sharing Platform can be tailored to a diverse range of end-users, including researchers, practitioners, policy makers, consumers and carers, allowing them to search, filter, interact with and download resources based on their information and evidence needs. To meet a diversity of user needs, the Knowledge Sharing Platform also houses a broad range of resource types, including best-practice evidence and toolkits, outputs of translational research, insight summaries from evaluations, and multimedia learning modules to support workforce development. Examples include a co-designed trauma-informed toolkit, and a Lived Experience Translational Research toolkit for use by academics and researchers across all stages of the research life cycle.

In support of the Knowledge Sharing Platform an AI-driven Resource Submission and Analysis (RSA) tool was also launched. This tool is unique and uses Claude AI to allow resources to be continually added to the platform that are then analysed and prioritised against the three types of evidence and the priorities of the Translational Research Strategy 2024-2027.

To support ongoing development of the platform and its use in the professional development of Victoria's mental health workforce at scale, the Collaborative Centre has prepared a large Medical Research Future Fund National Infrastructure bid to support the Phase 3 build of further AI capability of the Knowledge Sharing Platform. This bid draws on cutting edge technological advances to support a learning mental health system and if successful, will include implementation testing of the platform in mental health services, such as the Victorian Virtual Emergency Department, Royal Melbourne Hospital community services and Headspace. This is the first AI-driven health platform developed in partnership with Department of Health and is a flagship program for the Victorian Government. Outcomes of the Medical research Future Fund grant round will be announced in October 2025.



Connecting people, ideas and evidence

Outcomes

In addition to the Knowledge Sharing Platform, the Collaborative Centre launched its new, co-designed brand and website in June 2025. The website was designed to seamlessly integrate the Knowledge Sharing Platform, strengthening the interdependencies between the knowledge-sharing and workforce education and training functions of the Collaborative Centre.



Analysis of 2024-25 metrics for the Collaborative Centre's former website and other communication channels shows an increase in engagement across all our communication channels, including:

- An increase of over 500 followers on LinkedIn (total 3,697)
- 21,375 unique views of our website
- An increase of 1,260 e-news subscribers, now totalling 2,160 (see dashboard above for further details, including most clicked e-news links)
- Ongoing, regular public communications (EDMs) about the Collaborative Centre's new role in statewide mental health workforce education and development.

The dashboard on page 28 provides a breakdown of the profile of visitors to our former website. Combined, the data attest to the growing profile and impact of the Collaborative Centre as a system steward of mental health reform.



Translating research into practice

Leading translational research is a pivotal part of our work to embed collaboration between people with LLE, the mental health workforce and researchers, and to close the gap between research innovation and practice uptake. We closed out the financial year with five translational research projects underway. All five projects are aligned to our priority research areas and embed LLE.

Strategic goals



We will ...

- Narrow the gap between research innovation and practice across Victoria, promoting new ways of working with evidence.
- Lead research that embeds collaboration between people with LLE, practitioners and researchers in locations where care is provided.
- Aspire to excellence in research translation and practice and provide independent authoritative advice for Victoria.

In order to ...

- Nurture a culture focused on better experiences and outcomes for consumers, families, carers, supporters and kin.
- Set a new standard for collaborative models of care that recognises the complexity of factors which shape mental health and wellbeing outcomes at a local, regional and statewide level.
- Drive systemwide practice and policy reform.

Our three-year focus



Models of care for adults and older adults needing ongoing, intensive forms of mental health and wellbeing treatment, care and support, as well as dedicated, flexible supports for their families, carers, supporters and kin.

For this group, translational research priorities will consider:

- Community-based and hybrid models of care.
- Supporting and amplifying culturally responsive, intersectional approaches to care for:
 - First Nations people and communities.
 - Diverse communities.
 - People impacted by intersecting layers of oppression.
 - Eliminating seclusion and restraint and reducing compulsory treatment.
 - The development of dedicated and flexible supports for families, carers, supporters and kin.

Our achievements in this area are testament to the reach and partnership of our Consortium partners who bring together diverse expertise to advance translational research and best practice in treatment, care and support.

Translational research projects delivered in 2024-25

Open Dialogue Project

This project is being delivered in partnership with the Royal Melbourne Hospital, focusing on the feasibility of dialogical approaches to eliminating seclusion and restraint and reducing compulsory treatment within Area Mental Health and Wellbeing services. Services have commenced from a new delivery site in Carlton, delivered by a new inner Melbourne community mental health team. The goal of the project is to improve access to treatment, care and support for people residing in Carlton, the CBD, and North and West Melbourne while piloting the innovative model of care, integrating evidence-based practice with an Open Dialogue approach.

Hospital in the Home

This project was delivered in partnership with Transforming Trauma Victoria to pilot an innovative trauma-informed practice model in the Statewide Women's Mental Health Service to reduce the rate of sexual assault and harassment of women in traditional acute care facilities.

It included the development of a Trauma-informed Toolkit to support the mental health workforce in delivering trauma-informed care. This toolkit has been iteratively co-designed and is now undergoing testing to inform broader implementation through the Knowledge Sharing Platform. Funding of the project was also extended by the Collaborative Centre to provide richer qualitative data and additional translational outputs, including a webinar series and a series of case studies.

Embedding research in clinical care

This initiative, delivered in partnership with the University of Melbourne, invests in the next generation of mental health translational research leaders through translational research internships, PhD Scholarships and postdoctoral research fellowships. The initiative focuses on co-locating researchers within practice settings to support the direct translation of evidence into practice to reduce the practice translation gap and provide the sector with the latest best practice, evidence-based approaches.

Mapping the connectivity of Victoria's Mental Health and Wellbeing System

This project is being delivered in partnership with University of Melbourne to provide a statewide map of the connections between mental health and wellbeing services to inform system reform, beginning with Hume and Western metro regions (see Figures 3 and 4).

Data collection and analysis has been conducted, and preliminary findings have been presented in the form of an interim report, reflecting data from 15 organisations and 22 sub-teams. Data analysis has been supplemented by qualitative interviews, using a semi-structured approach to further explore the nature of connections between organisations and the role of LLE in the workforce.

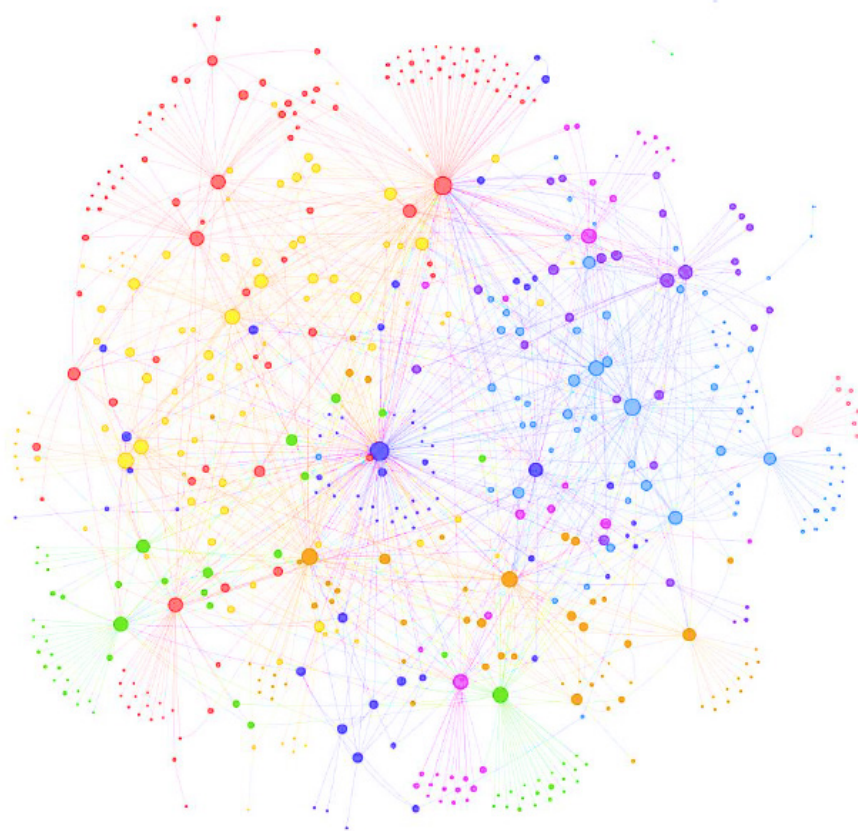


Figure 3. Overall connectivity of the Hume and Western metro regions with colours indicating communities of closely connected nodes within the region (services de-identified).

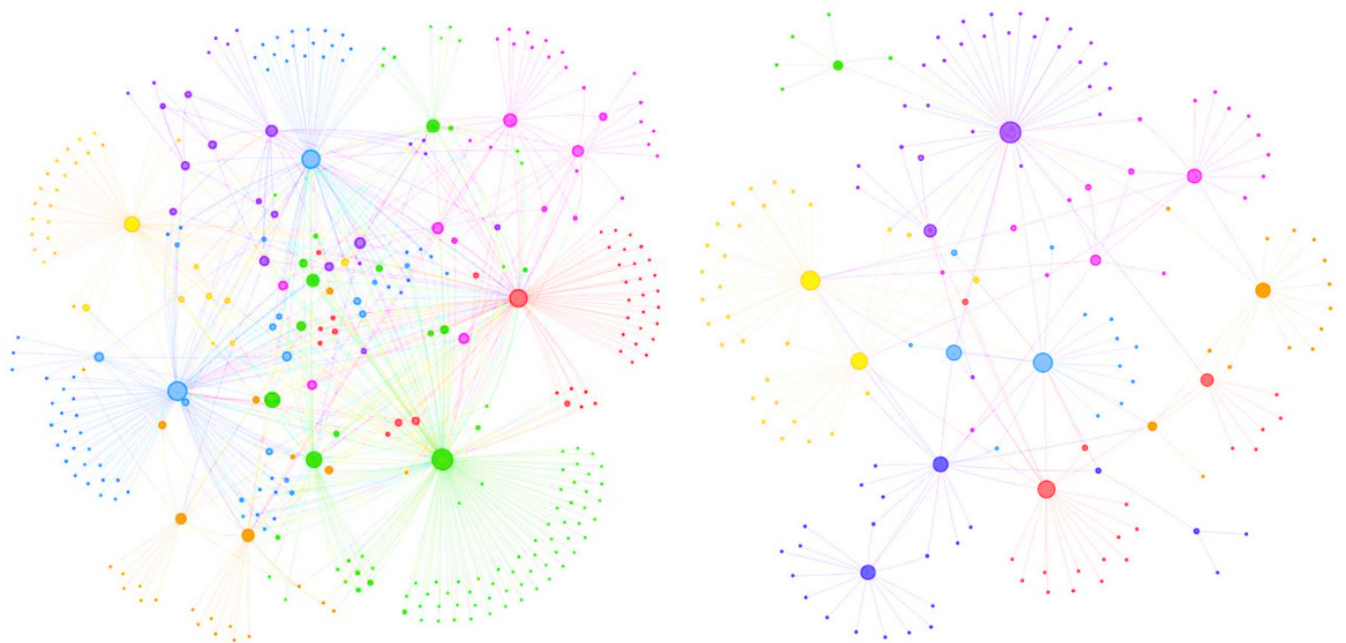


Figure 4. A comparison of (A) Information sharing and (B) Resource sharing in the Hume and Western metro regions with colours indicating communities of closely connected nodes within the region (services de-identified).

Our progress

Our goals for 2024-25: We will develop and demonstrate effective approaches to translational research

Translating research into practice

Outcomes

Five translational research projects aligned to the goals of our Translational Research Strategy continue to make significant progress.



1. The Open Dialogue Project

(Goal 3; Priority #3)

This project is being delivered in partnership with Royal Melbourne Hospital, focusing on the feasibility of dialogical approaches to eliminating seclusion and restraint and reducing compulsory treatment within Area Mental Health and Wellbeing Services. Services have commenced from a new delivery site in Carlton, delivered by a new Inner Melbourne community mental health team. This community team will:

- Improve access to treatment, care and support for people residing in Carlton, CBD, North and West Melbourne.
- Pilot the innovative model of care integrating evidence-based practice with an Open Dialogue approach.

To support the work two key partnerships have been developed, including one with Alfred Health to develop a training program for staff practicing from the principles of Open Dialogue. The second partnership is with the Bouverie Centre and La Trobe University to lead a qualitative research project exploring the perceived enablers and challenges to implementing Open Dialogue approaches in an Adult and Older Adult Area Mental Health Service.

2. Hospital in the Home

(Goal 1; Priority #1)

This project was delivered in partnership with Transforming Trauma Victoria to pilot an innovative trauma-informed practice model in the Statewide Women's Mental Health Service to reduce the rate of sexual assault and harassment of women in traditional acute care facilities by providing treatment and support at home.

The project includes development of a Trauma-informed Toolkit to support the mental health workforce in delivering trauma-informed care. This toolkit has been iteratively co-designed and is now complete. It is being tested in a metro and a regional location to inform broader implementation through the Knowledge Sharing Platform. Funding of the project was also extended by the Collaborative Centre to provide richer qualitative data and additional translational outputs, including a webinar series and a series of case studies.

3. Embedding research in clinical care

(Goal 2; Priority #2)

This initiative is being delivered in partnership with the University of Melbourne to invest in the next generation of mental health translational research leaders through Translational Research Internships, PhD Scholarships and Postdoctoral Research Fellowships. The initiative focuses on co-locating researchers within practice settings to support the direct translation of evidence into practice to reduce the practice translation gap.

- The Collaborative Centre has supported the joint appointment of the inaugural Professor of Mental Health Reform at the University of Melbourne, who will support integration and coordination of research initiatives aligned with the Translational Research Strategy. In collaboration with the Co-CEO (Clinical/Academic), this role will grow Victoria's leadership in mental health translational research and LLE research expertise, including system re-design and innovation to support a learning mental health system that delivers improved outcomes for consumers and carers. The role will also work closely with the Best Practice Partnership Lead and Consortium Program Coordinator to manage research activities in partnership with people with LLE and service delivery practitioners to ensure transformative evidence is harnessed to drive system reform.
- Two Postdoctoral Research Fellows commenced at the Collaborative Centre, one specialising in Victorian mental health law with expertise in reform and the other in systemwide connectivity mapping and analysis. Their work is supporting the delivery of translational research projects across the Centre and with the Consortium and sector partners.
- Three PhD internships have commenced to embed research in service delivery settings, including two at cohealth and one at MIND Australia.
- Four co-supervised PhD scholarships have been established at the Collaborative Centre. The first involves a partnership with Federation University and Safer Care Victoria and will create a co-designed harm mitigation strategy for gambling behaviours among people with ASD and ADHD. The second involves a partnership with the Body Image Eating and Weight Research Team at La Trobe University to explore novel treatments for people with eating disorders, including the use of music therapy. The third and fourth scholarships have been recently awarded and will commence in the next financial year with a focus on translating and evaluating the impact of the early environment on neuroplasticity and mental health, and strengthening family support in young onset dementia.
- Three systematic reviews have been funded and commenced in this reporting period:
 - Cath Roper is conducting a review titled: *From the perspective of those who engage in it, what are the distinctive knowledge and practices of the consumer workforce discipline in mental health services: a narrative literature review.*
 - Ellen Walsh is conducting the second review: *Family inclusive practice in community and in-patient mental health settings: A systematic review of the evidence for individual and relational outcomes.*
 - The third review is being conducted by Sophie Mattingley: *Therapeutic Risk-taking in Forensic Mental Health: A scoping review of Principles, Practices, and implementation Challenges.*

Our goals for 2024-25: We will develop and demonstrate effective approaches to translational research

Translating research into practice

Outcomes

4. Mapping the Connectivity of Victoria’s Mental Health and Wellbeing System

(Goal 3; Priority #1)

This project is being delivered in partnership with the University of Melbourne to provide a statewide map of the connections between mental health and wellbeing services to inform system reform, beginning with Hume and Western metro regions.

This results of this research will facilitate more efficient service provision and improved consumer and carer path finding. It will also allow greater linking of Area Mental Health and community services to enable consumers and carers to access the supports they need closer to home.

Initial data collection and analysis have been conducted, and preliminary findings have been presented in the form of an interim report, reflecting data from 15 organisations and 22 sub-teams.

Quantitative data analysis has been supplemented by qualitative interviews, using a semi-structured approach to further explore the nature of connections and the role of LLE in the workforce of these organisations.

To date, scientific presentations of this work include a platform presentation at the TheMHS Conference in Canberra, and a platform presentation at the Australian Social Networks Analysis Conference in Brisbane. An abstract was also submitted to INSNA Sunbelt 2025 Paris for a platform presentation on Mapping collaboration and service integration in the mental health sector: An Australian case study.



5. Lived Experience Translational Research Toolkit

(Goal 3: Drive systemwide practice and policy reform; Priority #2: Supporting and amplifying culturally responsive approaches to care)

This project was delivered in partnership with Wellways, involving First Nations and LLE researchers. It has led to the development of a Lived Experience Toolkit to support LLE leadership and engagement in translational research. The toolkit provides the mental health and wellbeing sector with a practical resource for use across all stages of the research life cycle, promoting interdisciplinary understanding and new ways of working to support a culture of transparency and inclusive participation in translational research. The Collaborative Centre is supporting services to implement the toolkit and integrate learnings from the project to enhance service delivery. It will be shared across the sector on the Knowledge Sharing Platform.

Our goals for 2024-25: We will embed LLE in translational research projects

All five projects (100 per cent) embed LLE collaboration, participation or leadership. The Lived Experience Toolkit project champions LLE leadership and engagement in research and is being led and delivered by a LLE research team in partnership with the Collaborative Centre.



Our goals for 2024-25: We will embed research in practice to reduce the practice translation gap

60 per cent of projects co-locate research and practice. These include The Open Dialogue Project, Hospital in the Home, and the University of Melbourne initiative of Embedding Research in Clinical Care (details above).



Providing treatment, care and support

We have worked with our partners to provide, promote and coordinate the delivery of treatment, care and support for adults and over adults. Our commitment to co-design evidence-based models of care that are grounded in LLE and translate into practice across the mental health system has driven the delivery of these initiatives, all designed to reduce restrictive practices and eliminate seclusion and restraint by adopting innovative approaches to care.

Partnerships are critical to our role in providing, promoting and coordinating the delivery of treatment, care and support for adults and older adults.

Our progress

Our goals for 2024-25: We will co-design models of care to improve experiences of consumers, carers, families, supporters and kin

Providing treatment, care and support

Outcomes



As noted above, the Collaborative Centre is working on two new community models of care with its Consortium and statewide partners. These include its Lead Service Delivery partner, Royal Melbourne Hospital, on the delivery of the Open Dialogue approach, and its statewide partner, Transforming Trauma Victoria and Phoenix Australia on the trauma-informed model of care of Hospital in the Home. This deliverable is partially complete as data collection on both programs is still underway with a review of both programs planned for the 2025-26 financial year.

In collaboration with its partners, the Collaborative Centre also has three nationally competitive bids under consideration to fund the development of an additional three models of care, including:

- (i) Strengthening models of peer workforce leadership training to improve LLE care in marginalised communities.
- (ii) Enhancing practice implementation of Safewards, an evidence-based model of care to reduce the use of seclusion and restraint.
- (iii) Strengthening whole-of-workforce capability development in delivering early interventions and care for children with mental ill-health and neurodevelopmental conditions.



Strengthening and supporting the workforce

The Collaborative Centre supports Victoria's mental health workforce through evidence-based, co-produced training and professional development. A workforce with a shared set of core capabilities grounded in research and best practice will lead to better outcomes and experiences from those who access the mental health system.

On 3 March 2025, the Alban Labor Government and Minister for Mental Health Ingrid Stitt announced that from 1 July the Collaborative Centre would become responsible for the professional development and upskilling of Victoria's mental health workforce.

"The workforce is the backbone of our mental health system and delivering this recommendation will support them to continue developing their skills and deliver the best care possible. The Victorian Collaborative Centre will play a significant role bringing together lived experience, research and innovation to help us grow and develop our world-class mental health workforce."

Minister for Mental Health Ingrid Stitt.

Purposeful, collaborative work was undertaken between the senior leadership teams of CMHL, Royal Melbourne Hospital, the Department of Health, unions bodies and the Collaborative Centre to support the successful transition of existing workforce programs. This ensured commencement of the Collaborative Centre's Workforce Education and Development function on 1 July 2025.



Our progress

Our goals for 2024-25: We will develop a continuing education and professional development strategy for whole-of-workforce core mental health and wellbeing capabilities

Strengthening and supporting the workforce

Outcomes

A broad range of sector consultations were initially conducted with sector partners, including statewide services, local mental health and wellbeing services and Area Mental Health services, to inform the key elements of the Centre's *Workforce Education and Development Strategy*. Following the announcement of the Minister about the transition of workforce development functions from the Centre for Mental Health Learning (CMHL) to the Collaborative Centre, team resourcing was reallocated to support transfer of these functions. A strong emphasis was placed on supporting a smooth transition of programs with minimal disruption to continuity of delivery to ensure successful establishment of the Collaborative Centre's Workforce Education and Development function by 1 July, 2025. This included significant collaborative work with senior executives of CMHL, Department of Health, Royal Melbourne Hospital and relevant union officials to support new secondee arrangements of CMHL staff in the Centre. It also required significant technological and procurement work to transition current CMHL professional development programs across to a purposed-built calendar of program events on the Centre's new website. The transition has now been successfully completed with eight CMHL staff having commenced work at the Collaborative Centre.



Recruitment of key workforce roles at the Collaborative Centre also commenced in the last quarter of the 2024-25 financial year to prepare for delivery from 1 July. This included the Director, Workforce Education and Development; Manager, Sector Capability; Events Coordinator; and Manager, Lived Experience Workforce Education and Development. Their work will be complemented by an integrated team of statewide educators and workforce facilitators (including CMHL staff, consumers and carers) to deliver whole-of-workforce professional development aligned with the Capability Framework. This work will commence with a training needs analysis to inform the finalisation of Victoria's three-year *Workforce Education and Development Strategy* in partnership with the Department of Health's Mental Health and AOD Workforce Development team in the 2025-26 financial year.

To strengthen this work, the Collaborative Centre's workforce team will also expand with the addition of three LLE workforce partnership roles to support project management responsibilities for the LLE Workforce Development Program transitioning from the Department of Health's Lived Experience Branch. This will enable additional LLE workforce expertise to be embedded in the Collaborative Centre and ensure the program's sustainability and impact into the future through strengthened collaboration across the sector. The Collaborative Centre also managed a project funded by Department of Health and delivered through the Family and Carer Research and Advocacy Network (FaCRAN). This work focused on describing, mapping and defining the Connect Centre carer lived experience workforce, including making recommendations to grow the carer workforce.

Our goals for 2024-25: We will increase workforce skills, knowledge, and capabilities

Outcomes

Rapid work was conducted this financial year, in partnership with Department of Health and workforce education providers, to prepare for the roll out of workforce education and training functions in the 2025-26 financial year. Since the Collaborative Centre will commence coordination of education and professional training activities formally from 1 July 2025 this deliverable is as partially complete.



The Collaborative Centre is also partnering with the Mental Health PhD program at the University of Melbourne to deliver a three-part 'Lived Experience in Research' graduate research education series. Two events were hosted in the 2025-26 financial year, with the final event scheduled for 2025-26.

This series has been designed to champion LLE-led research and expertise, and foster connections between graduate researchers from the program, LLE researchers and the Collaborative Centre.

The Mental Health PhD Program brings together graduate researchers exploring mental health from diverse disciplinary perspectives, including psychiatry, psychology, epidemiology, community mental health, and many more. The goal of the program is to provide all graduate researchers undertaking a PhD relating to mental health with a platform to connect, share and discover so that they can become fully rounded researchers who can approach the field of mental health from a multi-disciplinary perspective.

The Collaborative Centre's partnership with the program is supporting greater understanding of LLE in the emerging workforce, enabling the next generation of practitioners and translational researchers to develop the knowledge and skills needed for system transformation.

Building a sustainable and influential organisation

During the past 12 months we have worked hard to ensure we have the foundations in place, with robust governance and financial, compliance and reporting practices that uphold our accountability, transparency and ethical standards, and completing the fit out of our permanent new home, embedded in the community.

Embedding the Collaborative Centre in the community

We have also completed the fit out of our permanent new home at 205 Queensberry St, Carlton. Some final renovation work is underway on the top floor of the building and will be finished by early in the New Year. This move creates a foundation for deeper community collaboration and brings us closer to our Consortium of health and research partners. It also embeds the Royal Commission vision of working differently at the Collaborative Centre. Integrated teams of researchers, practitioners, people with LLE, workforce educators and policy makers are now actively delivering on our priority focus areas to strengthen and broaden our impact in the year ahead.





Our progress

Our goals for 2024-25 We will commence operations from our new accommodation

Building a sustainable and influential organisation

Outcomes

Fit out has been completed, with Collaborative Centre staff and partners now having successfully commenced operations from the new accommodation site. The Carlton location is proximate to the Collaborative Centre's Lead health and academic partners and has been refurbished to promote collaboration and community engagement following a comprehensive co-design process that included people with LLE, researchers and practitioners.

The move to the new site has offered the opportunity for a refresh, boosting team culture, energy and wellbeing after a demanding 12 months. Final work is underway to complete the rooftop by December 2025 to provide staff and visitors with an outdoor space based on the principles of salutogenic design. A formal launch of the building is being planned for the 2025-26 financial year, pending availability of the Minister for Mental Health and Wurundjeri Elders.

Our goals for 2024-25 We will develop our people, internal capabilities, resources, structures and systems to deliver on our strategic areas

Outcomes

A Wellbeing Committee was established and commenced implementation of initiatives to improve connection, collaboration, employee experience and wellbeing at the Collaborative Centre. A number of staff planning days were also scheduled over the last 12 months, designed to align programs of work, identify team values and collaborative ways of working, and to promote psychological and cultural safety within the organisation. An all-staff meeting is also held each week, with a strong focus on providing staff with strategies to support wellbeing and promote a strong organisational culture.

The Collaborative Centre's new accommodation includes a sensory room with all-staff meetings currently focusing on sensory regulation and the development of personalised sensory kits to maximise individual wellbeing both within and outside the work environment.

Our goals for 2024-25 We will strengthen and grow our model of LLE leadership and expertise

Outcomes

To support new staff joining the Collaborative Centre to strengthen their understanding of LLE leadership and expertise, the delivery of professional development activities that prioritise LLE and allyship have been planned in partnership with the Collaborative Centre's LEAP. This will address the percentage of staff who indicated they needed greater support with this and ensure LLE is centred in their work.

The departure of senior staff from the Collaborative Centre included the Co-CEO (Lived Experience), the Director of Operations and the Director of Research Strategy. A Chief Operating Officer (COO) and Professor of Mental Health Reform have since been appointed to renew the Director roles.

In response to the departure of Co-CEO (Lived Experience), the Board appointed a Senior Lived Experience Advisor to lead broad consultation and advisory work to strengthen the Centre's capacity to support LLE leadership and collaboration.

The results of this work have been captured in a *Lived and Living Experience Directions Report*, recently submitted to the Collaborative Centre's Board for consideration. This will inform the LLE leadership and governance of the Collaborative Centre in the 2025-26 financial year, given that the Board approaches the end of its three-year term on 31 August 2025.

The Co-CEO (Clinical/Academic) has also commenced regular meetings with the Co-Chairs of LEAP and reached out to LLE sector peak bodies to strengthen Collaborative Centre connections. Planning is also underway to increase engagement of Consumer Academics in the Collaborative Centre's translational research and workforce development functions.

Additional measures to further strengthen LLE leadership and expertise will be addressed in the Collaborative Centre's *2025-26 Statement of Priorities*.





**The Victorian
Collaborative Centre**
For Mental Health & Wellbeing

205 Queensberry St,
Carlton, Victoria