Relational, not just rational: Rethinking workforce development for integrated care

Statewide Centre for Addiction and Mental Health Consultation

Dr Katrin Oliver[1], Dr Ali Cheetham[1], Dr Troy McGee[2], Ass/Prof Leah Heiss[2], Amy Killen[2], Prof Dan Lubman[1], Ass/Prof Shalini Arunogiri[1]

APSAD Sydney, 10 November 2025

Turning Point
TREATMENT · RESEARCH · EDUCATION

Eastern Health

Hamilton Centre
Open minds. Open doors.

MONASH University

MONASH DESIGN HEALTH COLLAB

Disclosure of interest

This work was supported by the Victorian Department of Health.

Ass/Prof Shalini Arunogiri is supported by a National Health and Medical Research Council (NHMRC) Investigator Grant (GNT2008193).

Hamilton Centre

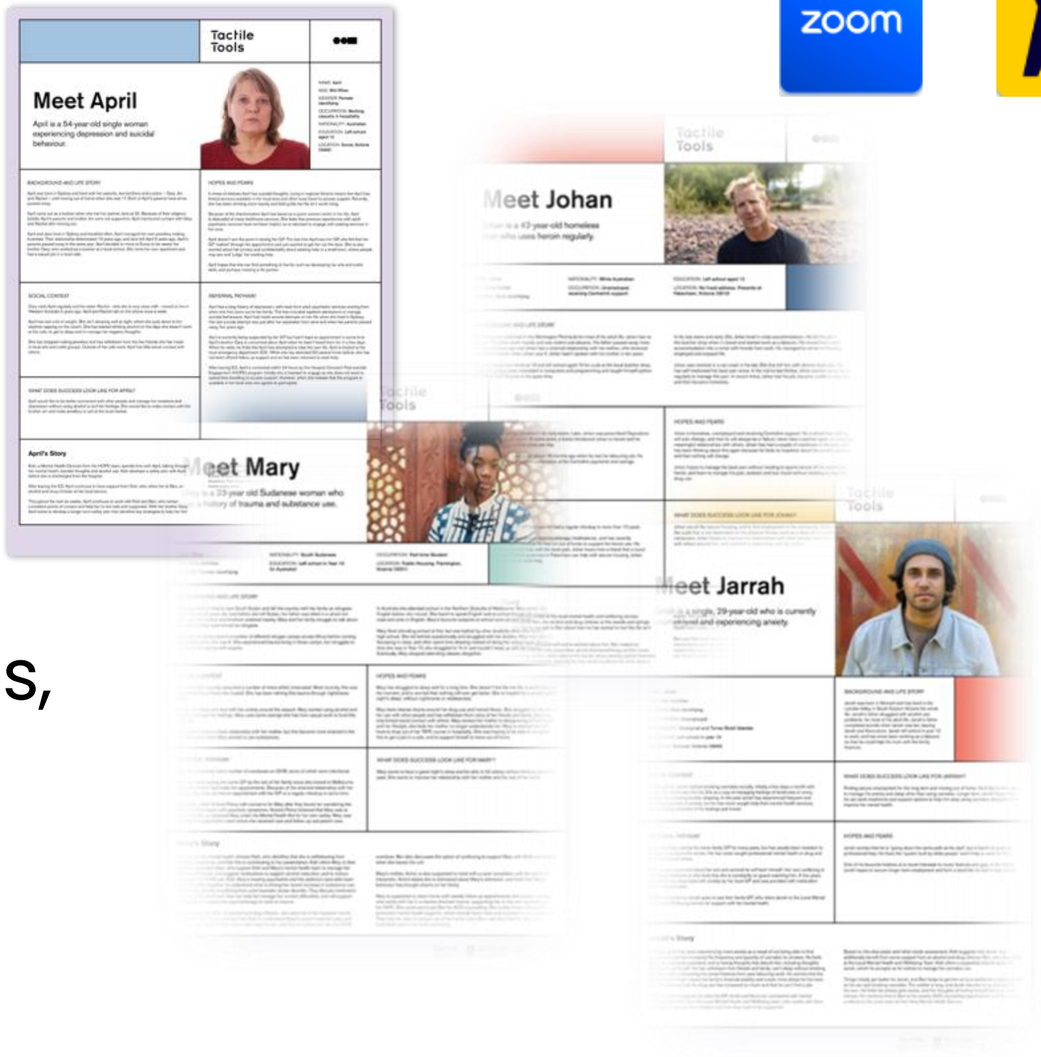
Open minds. Open doors.

MONASH University

MONASH DESIGN HEALTH COLLAB

Research method

- 2 co-designed workshops
- 57 participants
- 40 organisations
- Clinicians, leaders, peer workers, LE advocates



The role of workforce development in uplifting integrated care

Disrupt conventional workforce development models

and

Deconstruct assumptions that individual training alone

can enhance integrated care.

Prerequisites

Role clarity: *“Everybody needs to understand what everyone else does"* – Dual Diagnosis Clinician

Stigma reduction: *“One of the major reasons why stigma exists is that people don't feel confident about interventions"* – Mental Health Nurse

System navigation: *“The navigational support for the systems is one of the hardest things to teach […] the system is so convoluted that you have to have that skill in the first place”* – AOD Clinician

Relationality

“If that had been in person, we would’ve stood around talking to each other, continuing the work. It’s about developing relationships.” – Mental Health Team Leader

Context

“We've done decades of training workers about integrated treatment. They go back to their host service, and they find that the host services do not support integrated treatment."

– Dual Diagnosis Provider

"The more competent you are, the more you get overloaded... there's no return coming for that."- Consultant Psychiatrist

Practical implications

1. Get the sequence right
2. Rethink learning methods
3. Back training with organisational support
4. Recognise workforce development as systems change

Katrin.oliver@monash.edu

OUR DOOR IS OPEN.

FOLLOW US ON:

@HCENTRE_AU

FACEBOOK.COM/
HAMILTONCENTREAU

LINKEDIN.COM/COMPANY/
HAMILTON-CENTRE-AU

Hamilton Centre
Open minds. Open doors.