Expert Reference Group on Mental Health Reform (ERG)
Meeting 2
4 June 2013
10.00am – 4.00pm

National Mental Health Commission (NMHC)

MINUTES

ATTENDEES

Allan Fels, Chair
Jayashri Kulkarni
Darren Carr
John Feneley
Judy Bentley
Alisa Rayner
Robert Parker
Peter Tyliss
Danuta Pawelek
Frank Quinlan

NMHC
Monash Alfred Psychiatry Research Centre
Mental Health Council of Tasmania
Commissioner, NSW Mental Health Commission
Carer Representative
Consumer Representative
NT Department of Health
Chief Psychiatrist, SA
WA Mental Health Commission

Ex-Officio

Robyn Kruk
Georgie Harman

NMHC
NMHC

Secretariat

JulieAnne Anderson

JA Projects Pty Ltd

Other attendees

Gary Hanson
Paul Jelfs

AIHW
ABS

Observers

Jane Moxon
Josh Fear
Jason Thomson

NMHC
MHCA
AIHW

APOLOGIES

Harvey Whiteford
Jack Heath
Peter Norrie

University of Queensland
SANE Australia
Chief Psychiatrist, ACT
1. **Welcome and apologies**

The ERG:
- Noted attendees and apologies.
- Noted that the purpose of today’s meeting was to agree on a suite of targets and indicators, informed by findings from members consultations and other consultations to date.

2. **Confirmation of the minutes of the ERG meeting, 10 April 2013**

The ERG:
- Confirmed the minutes of the meeting held on 10 April 2013.
- Noted that the minutes would be published on the ERG page on the NMHC website.
- Noted that the business arising from the meeting had been addressed.
- Noted that some further consultations with key stakeholders would occur between ERG meetings to discuss the draft indicators and targets, such as the Homelessness Council.

**ACTION 2013.09:**
NMHC to publish confirmed minutes on the ERG page on the NMHC website

3. **Outcomes from consultations**

The ERG:
- Noted that a number of targeted consultations had been undertaken and the outcomes from these consultations had been provided in the meeting papers or discussed at the meeting.
- Noted the feedback from the MHCA resulting from their consultations which involved: state-based workshops, online surveys and two workshops, the National Mental Health Consumer and Carer Forum (NMHCCF) and the Council on Non-Government Organisations in mental health (CONGO):
  - The participants in the consultations and the respondents to the 300 surveys received support the need for the ERG to identify targets and indicators that are whole-of-life, national and will drive transformational change in mental health and that this change needs to be broader than the health sector
  - The ERG need to take on board the feedback from the community and reflect this in the output of the ERG
  - There was general agreement for use of the *A Contributing Life* framework, with the inclusion of three additional domains: community wellbeing, workforce, and, prevention and early identification
  - The MHCA’s consultations identified 10 targets and related indicators across the whole-of-life
  - In the consultations participants supported process rather than outcome indicators to drive change due to the challenge, at times, of measuring
outcome indicators. However, it was noted that some process indicators could be proxy indicators while outcome indicators were being identified:

- Stress the importance of whole of life approach – keep it above and much more than the health domain – other factors like community wellbeing came through really strongly.

- Noted the need to consider whole of government issues, such as the place of education within mental health reform; for example, mental health literacy.

- Noted that the drivers of mental health reform need to include governments, NGOs and the community and be broader than the health sector.

- Noted that the output of the ERG needs to support behavioural change which may also enable leverage of resources from portfolio’s other than health.

- Noted that the work of the ERG needs to be broadly focussed and include supporting driving change downwards to the community, include community wellbeing and quality of life.

- Noted that ‘community wellbeing’ is an indicator within the Sustainability Report.

- Noted that the ERG work was discussed at the Australasian Schizophrenia Conference and that the attendees believed that there was a risk that the focus on the community and recovery was at the cost of enhancing the acute sector.

- Noted the outcomes from the National Summit on Addressing the Premature Death of People with a Mental Illness which was held in Sydney on 24 May 2013, including discussion that focussed on:
  - Morbidity and mortality
  - Screen, intervene and follow-up
  - Obesity and smoking
  - Role of peer workers
  - Recovery framework
  - Medication management

- Noted the outcomes from carer and consumer consultations by ERG members:
  - Carers being part of care plan development
  - Workforce participation of carers, measured in hours of work
  - Importance of advanced care directives
  - Recovery focus
  - Importance of whole of life
  - Keep it real and about people
• Noted that the work of the ERG does not replace existing reports on mental health performance and that the ERG work should enable COAG to measure the important reform areas.

4. Identifying areas of consensus

The ERG:

• Agreed that the focus of the meeting would be on agreeing targets and indicators
• Reviewed the draft framework of domains, targets and indicators provided in the meeting papers.
• Identified the following criteria to assist in the critiquing of the draft framework:
  o Measurability:
    ▪ Data availability
    ▪ Sustainability/viability of target and/or indicator
    ▪ Directionality – should the measure go up, down, don’t know
  o Alignment – with data linkage issues
  o Political power
  o Ability to achieve transformational change
  o Recognisable and understood
  o Is it amenable to change / behaviour by service provider
  o National, whole of life, outcome measures
• Revised the draft framework based on outcomes from this meeting for further consideration by members out-of-session
• Noted that the discussions will be held with the ERG members who were unable to attend this meeting.
• Noted that further consultations still need to occur using the deliberations of the ERG as the basis for discussions.

ACTION 2013.10: ERG Secretariat to revise draft framework and disseminate to ERG members for out-of-session consideration and feedback

ACTION 2013.11: ERG Secretariat/ NMHC to liaise with ERG members who were unable to attend this meeting to seek their input

ACTION 2013.12: ERG Secretariat / NMHC to undertake further consultations with draft framework

5. Other Business

No other business was identified.
6. **Next steps and next meeting**

The ERG:

- Noted that the next steps for the work of the ERG involve:
  - Revision of the draft framework for further consideration by members and key stakeholders out-of-session
  - ERG Secretariat to use the feedback from ERG members and stakeholders to revise the draft framework and prepare the narrative to accompany the indicators and targets
  - The revised version will be considered by the ERG at the meeting on 16 July 2013.

- Noted that the next meeting of the ERG is scheduled for the 16 July 2013 at Sydney Airport, from 10am – 1.00pm.

- Noted that members may prefer to join this meeting via teleconference

- Noted that following the July ERG meeting the NMHC will be attending a meeting of national Commissions in Perth where the indicators and targets will also be discussed.
## Summary of action items

<table>
<thead>
<tr>
<th>Completion quick guide*</th>
<th>Action Item no.</th>
<th>Meeting date</th>
<th>Topic</th>
<th>Action</th>
<th>Responsibility</th>
<th>Date required/Instructions</th>
<th>Date complete/comment</th>
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<tbody>
<tr>
<td><strong>Actions from 4 June 2013 Meeting</strong></td>
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<td>✔️</td>
<td>2013.09</td>
<td>04/06/13</td>
<td>ERG minutes</td>
<td>Publish confirmed minutes on the ERG page on the NMHC website</td>
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<td>✔️</td>
<td>2013.10</td>
<td>04/06/13</td>
<td>Draft framework of indicators and targets</td>
<td>ERG Secretariat to revise draft framework and disseminate to ERG members for out-of-session consideration and feedback</td>
<td>ERG Secretariat</td>
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<td>✔️</td>
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<td>ERG Secretariat/ NMHC to liaise with ERG members who were unable to attend this meeting to seek their input</td>
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<td>✔️</td>
<td>2013.01</td>
<td>10/04/13</td>
<td>ERG Terms of Reference and Membership</td>
<td>ERG Chair to confirm the position of members as individual experts in correspondence with the Mental Health Reform Working Group (MHRWG) Co-Chairs</td>
<td>ERG Secretariat/Chair</td>
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<td>✔️</td>
<td>2013.02</td>
<td>10/04/13</td>
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<td>ERG Chair to write to MHRWG Co-Chairs regarding revised Terms of Reference for the ERG and co-opted members to the ERG</td>
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<td>10/04/13</td>
<td>ERG Consultations</td>
<td>All members to identify specific peak organisations and/or individuals with expertise to be included in consultations and provide advice to the ERG</td>
<td>ERG members</td>
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<td>✓ 2013.04</td>
<td>10/04/13</td>
<td>ERG Secretariat to identify relevant Ministerial Councils and other government agencies for inclusion in broad consultations</td>
<td>ERG Secretariat</td>
<td>Letters to be sent once revised draft of indicators and targets is available</td>
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<td>ERG members to be invited to the CONGO meeting on 21 May 2013</td>
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*Note:

✓✓ = Fully completed
✓ = Partially completed
× = Not completed
? = Further information/direction required