

Mental Health Network (MHN) –2019/20 Annual Report

The Mental Health Network is the only truly whole of sector reference group for the modelling and development of mental health services. This is critical in the context of meeting the National Standards for Mental Health Services, the Chief Psychiatrist’s Standards for Clinical Care, and the agreed planning principles underpinning the Western Australian Mental Health, Alcohol and Other Drug Services Plan 2015-2025.

In 2019/20 the MHN progressed the outstanding recommendations of the February 2019 Mental Health Network (MHN) Review;

1. Finalised the revised Terms of Reference for the Executive Advisory Group (EAG) and Sub Network Steering Committees including improved meeting procedures and recording.
2. Developed and distributed an Orientation Pack including role statements for EAG members, Steering Committee Co-Chairs, Steering Committee members consumer family and carer members and Mental Health Commission (MHC) Liaison Representatives.
3. Drafted a MHN Communication Strategy, including strategies to engage with internal and external key stakeholders and the MHN membership base.
4. Prepared a briefing paper for the MHC with options for the future resourcing and administration of MHN lived experience participation payments.

The MHN also progressed, at the request of the Mental Health Commissioner, the development of a Model of Care (MOC) for the treatment and support of people with Personality Disorders in WA. The MHC contracted the WA Association for Mental Health to develop and produce the MOC in consultation with the Mental Health Co-Leads and the Personality Disorders Sub-Network Steering Committee, which took on the role of Reference Group for the project.

The MHN responded to the COVID-19 emergency;

1. Encouraged and supported Sub Network Steering Committees to perform a community of practice function for COVID-19 mental health impact and responses to their population cohort.
2. Produced and distributed two broadcast MHN COVID-19 information and resource email communications to inform MHN members on the mental health impact of the emergency and WA, national and international responses.
3. Developed, in consultation with the EAG and the Sub Network Steering Committee Co-Chairs, a detailed briefing paper for the Mental Health Commissioner on the mental health impacts of COVID-19 emergency and recommended responses.

The MHN Co-Leads engaged key stakeholders through regular meetings with the Department of Health (DoH) Network Leaders Forum, The Statewide Mental Health Planning and Policy Group, Clinical Reference Group, and the Mental Health Unit.

The MHN Co-Leads also contributed to consultation regarding the governance of the mental health sector and the role of the MHN.

The **Perinatal and Infant Mental Health (PIMH)** Sub Network Steering Committee progressed the hosting of PIMH promotion, illness prevention, primary health, secondary and tertiary services information on the MHC “Our Services” and “Think Mental Health” site and contributed to consultations regarding COVID-19 and the Personality Disorders Model of Care.

The **Youth** Sub Network Steering Committee oversaw the preparation of the report “Informing Youth Suicide Prevention for Western Australia (2019)”, developed a working group to address the key physical health and mental health issues for young people 10 to 24 years as part of the COVID-19 Youth Taskforce, reviewed and supported the proposal from a Health Service Provider to establish Youth Community Treatment Services across the Perth metropolitan area and contributed to consultations regarding COVID-19 and the Personality Disorders Model of Care.

The **Eating Disorders (ED)** Sub Network Steering Committee developed a pathway of care for 16 – 25-year-olds with a diagnosis of ED which helped to inform the business case developed by the MHC and North Metropolitan Health Service for the establishment of services for the continuity of recovery for those living with an ED. ED Sub Network members participated in the Commonwealth Government National Strategy Research & Translation Eating Disorders Phase One Consultations.

The **Forensic** Mental Health Sub Network Steering Committee developed dedicated accommodation models for Forensic clients which were presented to the MHC Safe Place Accommodation Strategy and worked into a business case for government by the MHC, and contributed to consultations regarding COVID-19, the Mental Health Advocacy Service report: Forensic Youth Mental Health Mapping of Pathways – Access to Care and the Personality Disorders Model of Care.

The **Peel and Rockingham Kwinana** Sub Network Steering Committee served as a place-based community of practice for mental health, transitioning to a focus on the Rockingham and Kwinana area in particular, and contributed to consultations regarding COVID-19 and the Personality Disorders Model of Care.

The **Multicultural Mental Health** Sub Network Steering Committee were advised the outcome of the review of the Transcultural Model of Service and that the model would not progress in the state proposed. The steering committee subsequently contributed to consultation for the Multicultural Futures Research Project on Culturally and Linguistically Diverse (CaLD) Mental Health and Alcohol and Other Drugs responses and contributed to consultations regarding COVID-19 and the Personality Disorders Model of Care.

The **Older Adult Mental Health** Sub Network Steering Committee has met infrequently due to the lack of administrative support, the resignation of a Co-Chair and time constraints of the other Co-Chair. The group remains committed to continue and has contributed to consultation regarding the impact of COVID-19 as well as the Personality Disorders Model of Care.

The **Neuropsychiatry and Developmental Disability (NPDD)** Sub Network Steering Committee provided advice to the MHC on the collection of data regarding treatment and support options for individuals with co-occurring cognitive impairment and mental health issues. The NPDD Steering Committee also provided input to the Office of Chief Psychiatrist Report “People with Severe Mental Illness and Challenging Behaviour”. The Steering Committee has renewed its sponsorship arrangements, securing 360 Health and Community as administrative support sponsor.

The **Joondalup and Wanneroo** Sub Network Steering Committee has not met, and negotiations are underway with the sponsor to determine if there is a commitment to renewing the sponsorship.

Membership

As of June 2020, the total MHN membership was 804 members, and the Sub Network membership comprised:

Multicultural Sub Network – 298
Older adult Sub Network – 268
PIMH Sub Network – 232
Youth Sub Network – 417
Eating Disorders Sub Network – 258
Forensic Sub Network – 236
Joondalup Sub Network - 195
NPDD Sub Network - 256
Rockingham and Kwinana Sub Network - 162
Personality Disorders Sub Network Members – 383

Upon joining the Network, members are offered the option to select what sector(s) they represent. Members are able to nominate more than one sector. Current sector representation is detailed below:

Consumers – 136
Family/Carer – 132
Mental Health Clinician – 287
Non-Government Organisation – 79
Primary Health – 28
Aboriginal Health – 30
CaLD– 53
No selection – 240

The MHN will have the following priorities in 2020/21:

1. To **inform** the substantial reform agenda that is underway; both at state (e.g. Sustainable Health Review Implementation Graylands Redevelopment, the Young Persons, Child and Adolescent and Older Adult MH&AOD Priorities for Action) and commonwealth level (e.g. Productivity Commission Report Response).
2. To **inform** the development of models of service for major new initiatives (e.g. Youth MH&AOD Homelessness service) and promote and support the implementation of models developed by the MHN (e.g. Personality Disorders Model of Care).
3. To provide further **engagement** opportunities for MHN members by implementing the MHN Communications Strategy and supporting the re-invigoration of MHN Sub Network Steering Committees, that is underway, including establishing a new MHN Sub Network on a priority MH population, condition, or geographic area.
4. To contribute to sector wide **collaborative** initiatives including the development of a Mental Health Research Strategy.

5. To provide further **learning** opportunities for MHN members by progressing stage two of the MHN's orientation and development program, which was postponed in 2019/20 because of the Covid19 emergency.