**Co-Leadership Safety and Quality Mental Health (CSQMH)**

**Steering Group**

**Terms of Reference**

1. Purpose

The Co-Leadership Safety and Quality Mental Health Steering Group is comprised of representatives from the Mental Health Commission (MHC), the Department of Health (DoH), the Office of the Chief Psychiatrist (OCP) and Health Service Providers (HSPs) for the purpose of:

* Providing a coordinating function for the governance of safety and quality in publically funded mental health services in WA;
* Facilitating shared understanding of an integrated and comprehensive safety and quality governance system across mental health services;
* Strengthening collaboration, partnerships and communications among the different agencies to ensure effective responses to safety and quality issues in publically funded mental health services;
* Building on existing standards[[1]](#footnote-1) for accreditation and licensing and improving the implementation of associated processes; and
* Reducing duplication and streamlining safety and quality processes in mental health services.
1. Accountability and reporting

The Steering Group is accountable to the Commissioner, MHC and the Director General, DoH. The Steering Group will report to and provide an advisory role to the Commissioner and Director General as required on:

* Any actions or outcomes relating to safety and quality that will have an impact on mental health patients / consumers and their family/carers and the service agreements currently in place between the MHC and DoH/HSPs, as well as between the MHC and NGOs, including licensed private psychiatric hostels;
* Any actions or outcomes that relate to the implementation of relevant legislation / Acts (eg the *Mental Health Act 2014; Health Services Act 2016)*; and
* Any other actions or outcomes that relate to safety and quality processes deemed appropriate by the DG Health, Commissioner MHC or Chief Psychiatrist;
* Where agents have specific statutory functions, these cannot be overridden by the Steering Group;
* Members are responsible for representing their agency and ensuring ongoing communications with relevant stakeholders in their respective agencies on the advice and activities of the Steering Group.

1. Functions and Responsibilities

The Steering Group’s functions and responsibilities are to:

* Coordinate a safety and quality governance strategy across all publically funded mental health services;
* Develop pathways and specifications for acquiring and sharing relevant data (eg Notifiable Incidents; complaints regarding mental health service delivery) relating to safety and quality issues arising from publically funded mental health services;
* Identify and monitor key safety and quality issues and outcomes arising from accreditation processes for publically mental health services against the National Safety and Quality Health Service Standards and/or the National Standards for Mental Health Services, to identify any trends and advise on improvement/mitigation actions needed to all involved stakeholders;
* Monitor and review relevant system-wide risk processes ensuring appropriate controls and treatments are in place for identified risks;
* Advise on overarching safety and quality policies and procedures that govern/impact on publically funded mental health services to ensure consistency/alignment;
* Ensure that any safety and quality priorities resulting from the 5th National Mental Health Plan, changes to psychiatric care, accreditation standards and/or licensing processes are communicated appropriately to all involved stakeholders; and monitor actions taken to address changes as appropriate;
* Identify and minimise duplication of processes to address safety and quality issues where possible; identify and monitor areas where necessary attention is required to prevent issues/risks ‘falling through the cracks’;
* Where relevant, contribute to reviews/amendments of related legislation, standards and policies including but not limited to:
	+ *Mental Health Act 2014*
	+ *Hospital and Health Services Act 1927*
	+ *Health Services Act 2016*
	+ Licensing standards
	+ Notifiable Incident reporting processes / documentation.
1. Subcommittees and Working Parties

The Steering Group may create Working Parties as required and can include key stakeholders such as the West Australian Association for Mental Health, Health and Disability Complaints Office and the Mental Health Advocacy Service. At the time of creation the expected timeframe of the Working Party shall be specified, as will the deliverables expected of it.

1. Membership
	1. **Members**

The members of the Reference Group will be as follows:

* Executive Director, Patient Safety Directorate (DoH)
* Director, Data and Information, Purchasing and System Performance (DoH)
* A/Manager, Licensing and Accreditation Regulatory Unit (DoH)
* Program Manager, Mental Health Unit (DoH)
* Chief Psychiatrist, Office of the Chief Psychiatrist (OCP)
* Intergovernmental Officer (OCP)
* Service Director, Mental Health Armadale Kalamunda Group (EMHS)
* Co-Director, Mental Health Rockingham (SMHS)
* Director of Clinical Services (NMHS)
* A/Manager Safety and Quality (NMHS)
* Mental Health Clinical Lead (WACHS)
* Senior Project Officer (CAMHS)
* Chief Mental Health Advocate (MHAS)
* Consumer representative
* Carer representative
* Aboriginal representative
* Assistant Commissioner, Purchasing, Performance and Service Development (MHC)
* A/Director, Health Relationship and Purchasing (MHC)
* Assistant Director, Programs (MHC)
* Senior Project Officer, Quality Assurance (MHC) Secretariat
1. **Chairperson**

The Chairperson is to be rotated between DoH, OCP and MHC every 12 months.

1. **Secretariat to the Steering Group**

The Secretary to the Steering Group shall be the Senior Project Officer, Quality Assurance (MHC).

The Secretary shall be the authorised channel of communication of decisions of the Steering Group.

The Secretary, following approval by the Chairperson, shall: issue agendas and supporting material which shall be available electronically at least three working days prior to meetings; book venues, prepare minutes and/or action statements for each meeting and circulate these a week before the next meeting; keep separate files of:

* Agendas and documents circulated with them;
* Minutes and/or action sheets;
* Any documents/correspondence tabled at meetings or circulated other than with agendas.

The Secretary’s files shall remain the property of the MHC and must be preserved in accordance with the State Records Act 2000.

Minutes shall be ratified by at least two Steering Group members at the subsequent meeting.

1. **Operating Procedures**
	1. **Meetings**

The Steering Group shall normally meet every 3 months. The Chairperson may convene a special meeting in which case all Steering Group members shall receive at least 24 hours’ notice of the meeting in writing, by email or by phone.

* 1. **Quorum**

A quorum consists of a Chairperson or delegate, plus five (5) Steering Group or proxy members. This should comprise at least one representative from DoH, OCP, MHC and two HSP representatives.

* 1. **Apologies**

If a member is to be absent, then a permanent proxy should be arranged and notification that the nominated proxy will attend should be given prior to the next meeting, either through the Steering Group’s Secretariat or the Chairperson.

* 1. **Voting**

Where the Chairperson deems a matter is for vote, then each member of the Steering Group (including proxy members) has the right to vote. Co-opted members or any other persons in attendance may not vote.

* 1. **Conduct of meetings**

The decision of the Chairperson is final in all matters of procedure.

* 1. **Standing agenda items**

The specific standing agenda items are:

* Updates on Safety and Quality Partnership Standing Committee (SQPSC)
* Notifiable Incidents – trend data
* Other trend data / information as agreed
	1. **Confidentiality**

Every member has the right to confidentiality within the meeting. The records of this Steering Group are to be considered confidential unless agreed or stated otherwise.

The meeting will determine whether specific information such as tabled reports or preliminary review findings will be treated as confidential or not.

* 1. **Conflict of interest**

Any member who has any conflict of interest (perceived or actual) should as soon as practicable declare such interest to the Chairperson. If the conflict of interest has significance, the member will:

* not participate in the discussions at the meeting at which the matter is the subject of consideration, or in the preparation of advice; and/or
* withdraw from the meeting until the relevant matter has been completed.

**ADOPTION AND AMENDMENT OF TERMS OF REFERENCE**

The TOR will be reviewed annually or as required.

These Terms of Reference shall be altered only with the approval of this Steering Group.

These Terms of Reference were first endorsed by the Steering Group on:
27 April 2016.

Subsequent revision dates:

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| --- | --- | --- |
| No |  |  |
|  | 4 May 2018 | New Health Service Provider members added; other member roles amended |
|  | 26 June 2018 | Update of Purpose, Accountability, Functions and Responsibilities based on meeting minutes from 29 May and 26 June 2018 |

1. Including the National Standards for Mental Health Services (2010), OCP Standards and the National Safety and Quality Health Service Standards 2nd Edition (2017) [↑](#footnote-ref-1)