



FACT SHEET - Governance of Mental Health Services

The Health Services Act 2016

- The *Health Services Act 2016* (HS Act) provides a contemporary devolved governance model for the WA health system, including the public mental health services provided by Health Service Providers (HSPs).
- The Director General of the Department of Health (the Department CEO) as System Manager is responsible for the overall management, performance and strategic direction of the WA health system. HSPs are responsible for the delivery of public health services to their community.
- The HS Act provides a framework for the purchasing of mental health, alcohol and other drug services by the Mental Health Commission from the HSPs.

The Mental Health Act 2014

- The *Mental Health Act 2014* (MH Act) governs mental health treatment and care in WA, including that provided by HSPs.
- The MH Act confers powers of review and investigation on the independent Chief Psychiatrist, the mental health advocates, the Mental Health Tribunal and the Health and Disability Services Complaints Office (HaDSCO) to ensure that safe and quality mental health care services are provided.

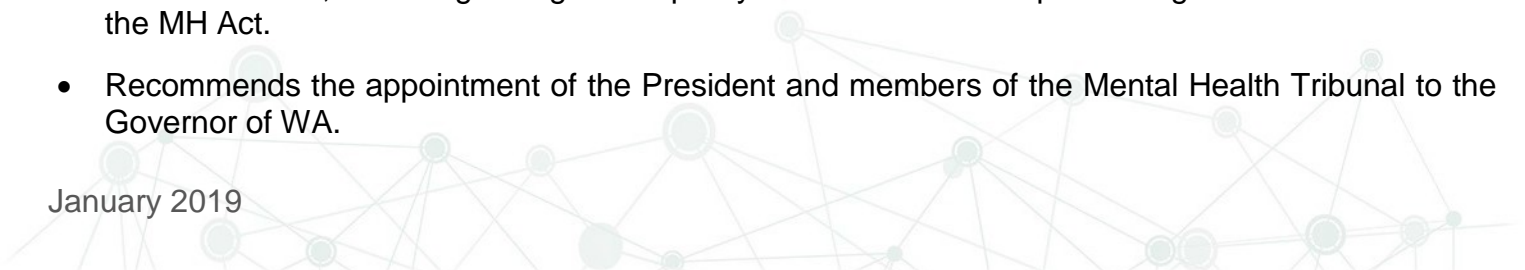
Roles and Responsibilities

Minister for Health

- Accountable to WA Parliament for the operation of the HS Act and the WA health system, including planning, service delivery, and performance.
- Can direct any HSP in relation to the performance of its functions.
- Establishes HSPs.
- Appoints board members, for board governed HSPs, and designates a Chair and Deputy Chair.
- Can request information that relates to the functions of an HSP from any HSP, including in relation to mental health. (NB: not entitled to access to personal information except in certain circumstances (s.61(5) of the HS Act)).

Minister for Mental Health

- Accountable to WA Parliament for the operation of the MH Act.
- Approves distribution of the mental health portfolio budget.
- May initiate an inquiry into the mental health treatment, care or other services provided by a HSP to a person or a class of persons. The inquiry will have broad-ranging, compulsory powers upon individuals and entities, including HSPs.
- May direct HaDSCO, the Chief Mental Health Advocate and the Chief Psychiatrist in relation to certain matters, including the general policy to be followed in performing the functions under the MH Act.
- Recommends the appointment of the President and members of the Mental Health Tribunal to the Governor of WA.






Department CEO

- Responsible for strategic leadership, oversight, performance, planning, policy setting and direction of the WA health system.
- Oversees, monitors and promotes improvements in the overall delivery of health services, including the safety and quality of mental health services provided by HSPs.
- May issue binding policy frameworks and directions to HSPs to ensure a consistent approach to a range of matters, including relating to mental health service delivery.
- May issue binding directions to HSPs, in relation to a matter set out in a policy framework or the Department CEO's functions under the HS Act.
- Enters into service agreements with HSPs setting out services to be provided by HSPs, funding, performance measures and operational targets. This includes mental health services not purchased by the Mental Health Commissioner (i.e. emergency department mental health care).
- Monitors performance of the HSPs and takes remedial action when performance does not meet expected standards.
- May initiate an investigation, inspection or audit to assess HSPs' compliance with the HS Act, and may conduct an inquiry into the functions, management or operations of HSPs.
- Must prepare an annual report for the Minister for Health, which is tabled in Parliament.

Mental Health Commissioner

- Responsible for development of mental health planning and strategy, responsibility for determining the range of mental health services required for the State, together with responsibility for specifying activity levels, ongoing performance monitoring and evaluation of key mental health programs.
- Coordinates research into causation, prevention and treatment of alcohol and other drug use problems; provides assessment, treatment, management, care and rehabilitation of persons experiencing alcohol or other drug use problems or co-occurring health issues (including mental health issues); and (subject to the consent of the Minister for Mental Health) may establish and maintain premises and/or accommodation for those purposes.
- Purchases mental health, alcohol and other drug health services and support services across the State from the WA health system (via commission service agreements) and from other non-government health providers.
- Must prepare an annual report for the Minister for Health, which is tabled in Parliament.
- May request, under Section 572 of the MH Act, disclosure of relevant information about mental health treatment and care and service evaluation by the Department CEO and HSPs. HSPs and the Department CEO are not bound to disclose information requested by the Mental Health Commissioner under this Section.

Health Service Providers

- Legally responsible and accountable for providing safe, high quality, and efficient health services to their local communities, in accordance with their service agreements with the Department CEO and commission service agreements with the Mental Health Commissioner.
 - Must comply with policy frameworks and directions issued by the Department CEO.
 - Must prepare an annual report for the Minister for Health, which is tabled in Parliament.
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Chief Psychiatrist

- Responsible for the treatment and care of a range of persons within the scope of the MH Act, including involuntary patients, voluntary patients being treated at a mental health service, and licensed psychiatric hostel residents.
- May visit a mental health service at any time, or review the treatment being provided to an involuntary patient, amongst other powers.
- Mental health services are required to report certain matters to the Chief Psychiatrist, such as unreasonable use of force by a staff member against a patient, and other incidents related to provision of treatment and care that are likely to have an adverse effect on a patient.
- Must prepare an annual report for the Minister for Health, which is tabled in Parliament.
- Must publish guidelines for certain purposes and must publish standards for the treatment and care of certain people as specified under the MH Act. The Chief Psychiatrist may also publish guidelines relating to the treatment and care of persons who have a mental illness.

Mental Health Tribunal

- Undertakes a range of functions to protect the rights of involuntary patients subject to the MH Act. These include conducting periodic reviews of involuntary status, and ensuring that clinicians and services comply with certain aspects of the MH Act.
- The Mental Health Tribunal is constituted by psychiatrists, lawyers and community members.
- The President of the Mental Health Tribunal must prepare an annual report for the Minister for Health, which is tabled in Parliament.

Mental Health Advocacy Service

- Advocates for involuntary patients and others within the scope of the MH Act, including by ensuring that patients are aware of their rights under the MH Act, and by investigating matters that may adversely impact patient health, safety and wellbeing.
- The MH Act requires a mental health advocate to contact every involuntary patient within seven days or, in the case of a child, 24 hours after the involuntary treatment order is made.
- The Chief Mental Health Advocate must prepare an annual report for the Minister for Health, which is tabled in Parliament.

Mental Health Networks

- The Mental Health Network was launched in 2014 by the Department of Health and the Mental Health Commission.
- Aims to improve health outcomes for people with mental health conditions by enabling consumers, carers, health professionals, hospitals and health services (government and non-government) to engage and effectively collaborate to inform mental health policy and reform, and to strengthen and increase coordination of mental health care across the State.
- Led by two Co-Leads who are supported by the Mental Health Network Executive Advisory Group, which convenes bi-monthly.
- A number of Sub Networks have been set up to support the Mental Health Network to meet its objectives. Each Sub Network is accountable to the Co-Leads.

- The current Sub Networks are: Eating Disorders, Forensic, Multicultural, Neuropsychiatry and Developmental Disability, Older Adult, Perinatal and Infant Mental Health, Personality Disorders, Youth Mental Health, Joondalup Region and Peel and Rockingham Kwinana.

Mental Health Advisory and Consultation Groups

- A range of system-wide advisory and consultation groups exist to provide advice on mental health matters to the responsible agencies. These groups provide clinical and policy advice, facilitate liaison and consultation across HSPs and external agencies, and provide forums for mental health executives and clinicians to consider approaches to system-wide mental health strategic and policy related issues.

Purchasing of mental health services from the WA health system

Head Agreement

- Under the HS Act the Department CEO and Mental Health Commissioner may enter into a head agreement concerning the making of commission service agreements.
- The head agreement must state:
 - system-wide funding caps and performance standards for the provision of mental health, alcohol and other drug health services;
 - role, responsibilities and accountabilities of the Department CEO in the provision of services and of the Mental Health Commissioner as a purchaser of services; and
 - action to be taken if the terms of a commission service agreement are not agreed.

Commission Service Agreements

- The Mental Health Commissioner may purchase mental health, alcohol and other drug health services from HSPs through separate commission service agreements, which must give effect to the terms of the head agreement.
- A commission service agreement must state:
 - the mental health, alcohol and drug health services to be provided;
 - teaching, training and research in support of the services to be provided;
 - the funding; performance measures and operational targets;
 - how the evaluation and review of results in relation to performance will be carried out; and
 - the performance data and other data to be provided to the Mental Health Commissioner and Department CEO.

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