

Independent Chair Communique No. 3

I am pleased to be able to share my third update as the Chair of the Ministerial Taskforce into Public Mental Health Services for Infants, Children and Adolescents aged 0 – 18 years in Western Australia (the ICA Taskforce).

The third meeting of the ICA Taskforce was held on 11 May 2021. Discussions were again rich and constructive. Several key items were discussed:

- The importance of engaging and consulting with consumers, families, carers, staff and stakeholders from across Western Australia, including those in regional and remote areas, was emphasised. Where ever possible existing engagement mechanisms will be utilised. We are finalising our consultation plan to ensure people can participate in a variety of ways.
- Health Service Providers will be contacted over the coming weeks to ensure staff have the opportunity to provide input to the Task Force.
- The recently released Federal budget was discussed and relevant interfaces with the Taskforce were noted. The Taskforce will continue to monitor both State and Federal funding commitments potentially relevant to our work.
- A progress report of implementation of the recommendations from the [Chief Psychiatrist's Review into the Treatment of Ms Kate Savage by Child and Adolescent Mental Health Services](#) was tabled by the Child and Adolescent Health Service. It was noted that Child and Adolescent Mental Health Emergency Service Model of Care has been finalised and implemented at Perth Children's Hospital (Recommendation 5) and a review of the application of current guidelines for the management of Emotionally Unstable Personality Disorder in early adolescents is ongoing. (Recommendation 3).

The work of the ICA Taskforce is progressing well, and we met with several key stakeholders including the Western Australian Association for Mental Health, Health Service Union of Western Australia, West Australian Council of Social Services and Telethon Kids Institute. I have also met with several Health Service Provider Executives and Board members.

During these meetings I have been informed of the challenges and opportunities for our infant, child and adolescent mental health system. Reoccurring themes include an increased demand for public mental health services, a lack of service provision for infants, children and adolescents who are not severely or acutely unwell, and concerns relating to staff wellbeing.

In the past month the ICA Taskforce have focussed on several key activities including ensuring the three Expert Advisory Groups supporting the taskforce are established and have met for the first time.

Expert Advisory Groups: The three Expert Advisory Groups (EAGs), Lived Experience, Clinical and Interagency have all now met and will provide key input to the outcomes of the ICA Taskforce, such as providing direction on the future mental health system; shaping the key features and details of the system; and identifying key considerations for implementation and sustainability. Members of the Clinical EAG, of which their first meeting was held in April, have since been contacted asking for further information about their key opportunities for change.

The Interagency and Lived Experience EAGs were held on 14 May 2021. The Interagency EAG was co-chaired by Ms Robyn Kruk and Dr Sophie Davison on 14 May, on behalf of Ms Jennifer McGrath and Dr Aresh Anwar, and was attended by 43 representatives from government agencies, peak bodies, and non-government organisations.

The Lived Experience EAG was co-chaired by Ms Wendy Cream and Ms Georgia Anderson on 14 May and was attended by 27 members of the EAG, including a diverse range of backgrounds, ages, experiences and expertise, including consumers, family and carers.

All sessions were engaging, informative and provided a strong basis for the work ahead. The continued opportunity to hear and understand the views of consumers, families, carers, staff and

stakeholders is an invaluable aspect of the Taskforce. As such, a decision has been made to also invite formal submissions to the Taskforce. More details will be made available soon.

Additional key tasks undertaken since my last communique include:

Data analysis: Data from Health Service Providers, the Mental Health Commission and other key agencies continues to be collected and analysed to assist in evidencing the current state of the system and projecting the demand for infant, child and adolescent mental health services. This information will inform the second Insights paper and will be discussed in detail at the next Taskforce meeting in June.

Consultation: In addition to the start of targeted consultation undertaken so far, further extensive consultation is planned by the Taskforce. This will ensure consumers, families, carers, staff and stakeholders have an opportunity to bridge gaps and complement knowledge from the EAGs, Insights papers, data analysis and other Taskforce activities.

Targeted research: Two key areas of research are underway which will inform future directions of the Taskforce. These initial areas of focus are: Best practice service delivery models of care, and mental health workforce models, capability and supply.

I am looking forward to the third Taskforce meeting in June where we will start to consider the demand and capacity of the infant, child and adolescent mental health system, review information obtained from the Clinical, Interagency and Lived Experience EAGs and better understand the gaps and issues that need to be addressed to develop user informed, sustainable future services.

If you have any questions, comments or feedback for the ICA Taskforce please email CATaskforce@mhc.wa.gov.au

Robyn Kruk AO

Independent Taskforce Chair