



Government of **Western Australia**
Mental Health Commission

*We're working for
Western Australia.*

Graylands Reconfiguration and Forensic Taskforce (GRAFT)

Lived Experience Advisory Group

TERMS OF REFERENCE

Document Control

Document Title	Terms of Reference – Lived Experience Advisory Group – GRAFT		
TRIM File Name	Terms of Reference – Lived Experience Advisory Group - GRAFT		
TRIM File No.	MHC-13794/002	TRIM Doc No.	MHC21/49031
Status	Draft		
Owner	Belinda Brett		
Version No.	1.0	Version Date	18/06/2021

Review

Reviewed by	Signature	Date
Annual Review Date		

Release and approval

Reviewed by	Signature	Date

Record of issue

Version	Date	Reason and comment
1.0		

Contact for enquiries and proposed changes

All queries and changes regarding this document should be directed to	
Name	Belinda Brett
Position	Executive Manager – Mental Health Commission

1. Background

The contribution of people with lived experience is critical to the work of the Graylands Reconfiguration and Forensic Taskforce (GRAFT). It is essential that people with a lived or living experience of mental health and alcohol and other drugs (AOD), including consumers, carers, family members and other support people, are actively engaged and participate in decisions that affect their care and the conditions that enable them to live contributing lives. The Mental Health Commission (MHC) and the GRAFT understand the importance of the direct knowledge that people with lived experience can share about the actual needs of the Western Australian community.

2. Purpose of the GRAFT

The GRAFT is the peak project governance body responsible for the oversight and planning for the future of the Graylands Hospital (Graylands) site, forensic services and the nearby Selby Older Adult Mental Health Service (Selby).

GRAFT has representatives from all relevant Government agencies who are working together to explore options to be presented to Government regarding whether the Graylands and Selby sites will continue to be used for mental health service provision and how to rearrange mental health services in Western Australia (WA) to ensure that people can access and receive the right care to meet their needs in the right place.

The GRAFT will:

- Ensure the smooth transition to future service delivery envisaged in the Western Australian Mental Health, Alcohol and other Drug Services Plan 2015-2025 (the Plan);
- Provide Government with the assurance that future investment is appropriately balanced in the right location, setting (inpatient and community) and acuity;
- Ensure that decommissioning and divestment of Graylands and Selby does not occur in isolation, and includes broader consideration of all impacts across the mental health system, including forensic;
- Ensure the appropriate level of cross-agency oversight and input into key decisions impacting the provision of mental health care in hospitals, community and prisons; and
- Provide the necessary assurance that the broader needs across the mental health system, and interdependencies across prisons and other community care settings are considered as a foundational principle; and ensure that the implementation does not occur in isolation, or solely as an approach to developing models of care for the replacement of services currently provided at Graylands.

3. Purpose of the Lived Experience Advisory Group

The Lived Experience Advisory Group (LEAG) will play a significant role in representing consumers, families, carers, and community members with personal lived experience of the services in scope across WA. Their direct experience and knowledge of the current state of the mental health and AOD services offered at Graylands, Selby, by the State Forensic Mental Health Service (SFMHS) and the Department of Justice (DoJ) across WA will help shape the decisions about the future of the Graylands site and the replacement services, including rehabilitation and recovery services, older adult and forensic mental health services.

The LEAG will support the GRAFT to identify:

- Issues, criteria and priorities relating to options presented to GRAFT;
- implementation considerations, including timeframes and responsibilities;
- key risks and mitigating strategies that can be implemented to guide implementation; and
- a governance mechanism for ongoing monitoring and evaluation.

Members of the LEAG will draw on their personal experiences to provide advice to the GRAFT to support a rigorous approach to the planning and development of contemporary replacement services that meet the needs of Western Australians living with mental illness now and into the future.

The LEAG will report directly to the GRAFT and will be responsible for providing advice with clear guidance and evidence to support the work and decision making of the GRAFT. The GRAFT will regularly consult with the LEAG, however the LEAG may provide advice to the GRAFT on its own initiative.

The LEAG will also provide advice to the GRAFT on who to consult with and when, outside of the two Advisory Groups.

There will be two Advisory Groups reporting directly to the GRAFT:

- **Lived Experience:** Comprising of consumers, family members and carers with personal lived experience of seeking and/or engaging with services within scope of the GRAFT.
- **Clinical:** Comprising of senior clinicians and employees that work directly or interface with the services run from Graylands, Selby, SFMHS and mental health services provided by the DoJ. This is to include medical, nursing, allied health and peer workers from agencies such as Health Service Providers (HSPs), the MHC and its service providers. This includes any agency that provides and/or directly interfaces with such services.

4. Governance

The LEAG will report directly to the GRAFT. The LEAG will be co-chaired by independent GRAFT member Ms Debora Colvin and a member of the LEAG itself.

5. Membership

Members will be recruited via an expression of interest. Other members may be recruited in a targeted way to ensure that there is representation in relation to all services in the scope of the GRAFT and to ensure that members have recent living or lived experience.

The LEAG will be comprised of consumers, family members, carers and support people from across WA. These individuals will:

- Be past or present consumers who have accessed services through Graylands, Selby, SFMHS or mental health services provided by the DoJ; including short and Hospital Extended Care inpatient admissions and people from regional areas; and/or
- Be the carer, family member or guardian of someone who has accessed services through Graylands, Selby, SFMHS or mental health services provided by the DoJ; including short and long stay inpatient admissions and people from regional areas; and/or

- Be a consumer, family member or carer who has attempted to access services through Graylands, Selby, SFMHS or mental health services provided the DoJ; and
- Be drawn from a diversity of backgrounds (e.g. individuals living in regional or remote locations, Aboriginal and Torres Strait Islander, Culturally and Linguistically Diverse, Lesbian, Gay, Bisexual, Transgender, Intersex, Questioning or other diverse sexuality and gender, or individuals living with a disability).

LEAG Members are strongly encouraged to represent their unique experience, expertise and interests but may also liaise and network with peers and other people with personal lived or living experience of services in Graylands, Selby, SFMHS and mental health services provided by the DoJ to further inform themselves and the work of the LEAG.

The LEAG, through its Co-Chairs, may invite non-members to participate in specific activities, as required. This will be undertaken when it is considered they are directly involved with the matter at hand or they have some expertise to assist on advising on matters, as required. Additionally, the LEAG Co-Chair may attend the GRAFT as required.

Members of the LEAG will be paid for their time, and reimbursement for out of pocket expenses, in line with the MHC Consumer, Family, Carer and Community Paid Partnership Policy (available at www.mhc.wa.gov.au under the “About Us” tab). The paid participation rate at the active tier is \$37.50 per hour for a minimum of three hours. Out of pocket expenses may be reimbursed but must be negotiated and approved by the MHC before expenses are incurred.

6. Member roles and responsibilities

Members of the LEAG will be responsible for:

- Preparing for LEAG meetings and activities, including reviewing pre-reading materials.
- Contributing fully and constructively at meetings, including supporting the participation and ‘voice’ of all attendees.
- Bringing a problem-solving approach to LEAG and GRAFT activities and contributing to a positive team culture.
- Following the ToR, Public Sector Code of Ethics, and the MHC’s Code of Conduct.

7. Proxies

Sustained participation in the LEAG activities is critical to the work of the GRAFT. Members of the LEAG should use their best endeavours to prioritise their involvement in the group and its activities supporting the GRAFT. As common practice, members will not be entitled to nominate a proxy to attend AG meetings and other GRAFT activities in their place. Where members are unable to attend a meeting, they should, as soon as practicable, notify one or both Co-Chairs.

8. Quorum

A minimum attendance of 50% plus one of the LEAG members will constitute a quorum.

9. Meetings

It is anticipated that the LEAG will meet once a month. The times and dates for these meetings are to be confirmed. Members can attend meetings in-person or dial-in via

videoconference. All meetings will be held in the Perth CBD area.

10. Confidentiality and conflicts

The discussions and decisions of the LEAG meetings shall not be conveyed to unauthorised persons (i.e. individuals not directly involved in the LEAG or GRAFT). During the first meeting of the LEAG, members will be required to sign a confidentiality agreement and declare any actual or perceived conflicts of interest and identify how these conflicts will be managed through the duration of the LEAG. If a conflict of interest occurs over the course of the LEAG it must immediately be declared to the Co-Chairs.

11. Secretariat

Secretariat support for the LEAG will be provided by the MHC. Minutes of meetings and other records are developed and maintained by this secretariat unit.

12. Minutes

Minutes of each LEAG meeting shall be recorded and distributed within one week to each member, including any key actions.

13. Reporting and engagement

The LEAG, on behalf of the GRAFT, will undertake stakeholder consultation with consumers, families and carers. The GRAFT will also engage with clinicians, HSPs and key agencies across Government to promote a whole of Government approach to the GRAFT outcomes.

14. Term

Unless otherwise agreed in writing by the MHC the LEAG will support the GRAFT for a period of 12 months with the possibility of extension for an additional 12 months.

15. Related Documents

- GRAFT ToR
- Confidentiality agreement
- Conflict of interest form
- Advisory Group charter
- Clinical Advisory Group ToR