

Attendees	Andrew Williams, Virginia Catterall, Paul Parfitt, Pauline Cole, Lee Steel, Jessica Nguyen, Richard Oades, Tracey Young	Mental Health Commission Djeran Room, Level 1, 1 Nash Street Perth WA 6004 and MS Teams Thursday, 10 June 2021 08:30am – 11:30pm
Chair	Margaret Doherty	
Secretariat	Caitlin Parry, Matthew McCoulough-Fry	
Guests	Dr Mark Montebello (Deputy Chair, Alcohol and Other Drugs Advisory Board) Ms Yvonne Fletcher (Family and Carer Representative) Ms Teresa Henry (Family and Carer Representative) Ms Vee Wilson (Family and Carer Representative)	
Apologies	Gemma Powell, Patricia Councillor, Emily Wilding	
AGENDA ITEM	DISCUSSION	ACTION LOG
1. Welcome and apologies	The meeting was opened by the Chair at 08:30am and apologies were noted.	
2. Acknowledgement of Traditional Owners	The Chair acknowledged the traditional custodians of the land and paid respects to Elders past and present.	
3. Acknowledgement of Lived Experience	The Chair recognised those at the meeting with personal and family lived experiences.	
4. Reflection: Headspace Guide to Meditation	Council members watched an official trailer for the Headspace Guide to Meditation series which is currently available on Netflix. Members expressed appreciation for seeing a useful tool such as this being promoted to people outside of a mental health sector space.	Note: Pauline Cole will provide the reflection item for the next meeting.
5. Conflicts of Interest	No conflicts of interest declared.	
6. Acceptance of previous meeting minutes	The minutes from the previous meeting were endorsed.	

<p>7. Action Log</p>	<p><u>Completed actions:</u> All actions other than those listed below are now complete.</p> <p><u>Outstanding actions:</u> Action 137 – Needs to be followed up before the next meeting. Action 139 – Check in with responsible member prior to the next meeting.</p>	
<p>8. AODAB Update</p>	<p>Dr Mark Montebello introduced himself and his role as Deputy Chair on the Alcohol and Other Drug Advisory Board (AODAB). Dr Montebello updated Council members on the notes and actions from the last AODAB meeting which was held on 29 March 2021. These items included the use of nitrous oxide for the purpose of intoxication, the Early Warning System Group, Statutory Review of the Mental Health Act 2014, the Young People’s Priorities for Action and the Community Treatment and Emergency Response Roadmap project.</p> <p>Meeting attendees discussed the minimum floor price for alcohol noting that many people will continue to purchase alcohol regardless of price, and if prices rise people will have less money to spend on essentials. Council members emphasised that the creation of dry Aboriginal communities has not stopped the infiltration of alcohol into communities. This has frequently occurred on access roads to those dry communities. A particularly complicating aspect, as an Australian specific example, is caused by the obligatory relationships that are prevalent still today amongst Aboriginal people. Regardless of price, this means that people are obliged to source alcohol for others upon request. A minimum floor price on alcohol will not affect this practice, but instead will reduce the availability of resources for other needs.</p>	
<p>9. Meeting with Family Members</p>	<p>Yvonne Fletcher, Teresa Henry, and Vee Wilson spoke with Council members about their experiences with the mental health system in Western Australia.</p> <p>The difficulty of access to services for people with a diagnosis of autism or other co-occurring medical issues was noted as an area of concern, as was an over-reliance on the use of medication. The gaps in coverage of the National Disability Insurance Scheme (NDIS) were also raised. Concern was expressed that all recorded information is captured by health services and may not accurately reflect the reasons given to consumers for cancellation or denial of services.</p> <p>Access to people with a lived experience, a clearer and more obvious path in who to contact and what services are available, dedicated case workers, continuity of care, and carer support in hospitals, were identified as supports that would make a difference to people trying to navigate</p>	<p>Action 140: MM to transcribe the information provided by the Family Members and circulate to members for preparation of draft Advice.</p> <p>Action 141: Send thank you letters to all guests for attendance and include link to the survey.</p>

	<p>the system. It was noted that an increase in the understanding of all kinds of diversity and a greater emphasis on service providers listening to consumers and their family is required.</p>	
<p>BREAK</p>		
<p>10. Interagency Expert Advisory Group - MHAC</p>	<p>Tracey Young gave Council members an update into her new role as a member of the Interagency Expert Advisory Group for the Infants, Children and Young Peoples Taskforce (ICA Taskforce).</p> <p>With a focus on the Child and Adolescent Mental Health Services (CAMHS) system, three expert advisory groups (EAGs) have been created to inform and support the ICA Taskforce - clinical, lived experience, and inter-agency. Robyn Kruk is the Chair for the taskforce and was also the Chair for the Sustainable Health Review.</p> <p>Meeting attendees noted there are many voices that go unheard and there are barriers to accessing CAMHS in the north of the state, as many children are deemed ineligible as they do not come from a stable environment. Meeting attendees also highlighted the issues with children in the justice system not being heard from and acknowledged that other groups also require further consideration in an overhaul of the system. These include, but are not limited to, Aboriginal and Torres Strait Islander peoples, rural and remote peoples, and those experiencing co-occurring alcohol and other drug (AOD) and mental health issues. It was also recognised that there is only one child health specialist, Dr Mathew Coleman, who has both AOD and child mental health as a focus.</p> <p>It was discussed that the CAMHS website does not have any information on the how to access their service in the regions. These services are being delivered by WA Country Health Service in the regions, so this should be addressed as it is an accessibility issue. Suicide prevention strategies for the regions have not been discussed and the rate of suicide in the Kimberley is eight times that of elsewhere. Meeting attendees suggested that if a co-design process were to be employed, many of these issues would be addressed.</p> <p>Medication access in the hospital system was discussed and it was recognised that if you have an attention deficit hyperactivity disorder or autism diagnosis, CAMHS cannot prescribe stimulants which leaves the stimulant prescribing to be done by private practitioners, which is often out of the financial reach of people. There are no authorised prescribers in the public health system and as a result, private psychologists are being overwhelmed by referrals.</p>	<p>Action 142: RO to provide link to book on co-design.</p> <p>Action 143: PCole to provide information on the Personality Disorders Model of Care and a link to it.</p>
<p>11. Budget</p>	<p>The Chair provided an update on the Mental Health Advisory Council (MHAC) budget, advising</p>	

	that the Mental Health Commissioner had approved an increased budget which will facilitate a move to four-hour meetings and the appointment of a Deputy Chair.	
12. Discussion on presentations and advice to the Commissioner	<p>Members agreed that independent advice should be drafted regarding the points raised by the family members in attendance, as to what made the difference for them in their experiences</p> <p>Members noted that many of the points raised were reflective of the needs that were identified for the One Stop Shop.</p> <p>Members also expressed that mental health for children is a growing area of importance and that people with lived experience are invaluable in providing empathy in these situations. Psychopharmacological education needs to be improved, including information regarding potential side effects, and family members and carers need to be provided with better information and education.</p>	
13. Forensic Mental Health	<p>The Chair advised that the Frankland centre has only 30 beds and has done since its inception in 1993. Given that the numbers in prisons have increased from 1,900 in 1993 to 6,500 in 2021 and that there is an over-representation of people with mental health issues in prison, this is indicative of a crisis within the forensic mental health space.</p> <p>Forensic services were identified in the ten-year plan and nothing has been done thus far. Given that one of the commitments of the MHAC is speaking for the unheard voices, this is something that needs to be addressed.</p> <p>It was discussed that the Graylands taskforce has been refreshed yet this planning and implementation is likely to take years, and short-term solutions in the interim need to be identified.</p> <p>Council members will work together to craft advice.</p>	<p>Action 144: MD, VC and LS to work on advice regarding Forensic Mental Health Services.</p> <p>Action 145: CP to circulate link to Human Rights website to Council members.</p>
14. Other Business	<p>The Chair acknowledged that the MHC was recently recognised for advertising in the Alcohol and Other Drugs space.</p> <p>It was also noted that events being hosted during this week by LinkWest are providing opportunities for connection in the sector.</p>	Action 146: TY to send an item from Patricia Councillor to CP for circulation.
15. Values Representative	<p>Virginal Catterall was the values representative for the meeting and provided feedback, recognising that the respect for diversity was evident in many of the discussions today. Promoting hope was discussed in relation to one of the guests expressing that at one point, she had lost hope and didn't want to hear about remaining positive, however she is now once again</p>	

	hopeful for the future.	
Meeting closed at 11:30am		
NEXT MEETING	Thursday, 10 June 2021 Mental Health Commission	