

Attendees	Jessica Nguyen (JN), Lee Steel (LS), Paul Parfitt (PP), Tracey Young (TY), Richard Oades (RO), Emily Wilding (EW), Dr Pauline Cole (PCole), Virginia Catterall (VC), Patricia Councillor (PC)	Mental Health Commission Djeran Room, Level 1, 1 Nash Street Perth WA 6004 and MS Teams
Chair	Margaret Doherty (MD)	
Secretariat	Caitlin Parry (CP)	
Guests	Dr Sarah Pollock, Chief Mental Health Advocate, Mental Health Advocacy Service	
Apologies	N/A	
		Thursday, 11 November 2021 08:30am – 11:30am
AGENDA ITEM	DISCUSSION	ACTION LOG
1. Welcome and apologies	The Chair welcomed everyone to the meeting.	
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 and acknowledged the emotional labour that comes with contributing one's own experience.	
4. Reflection: I Have a Sparkling Personality (Disorder) and song 'Breathe Me' by Sia	Council members reflected on the video I Have a Sparkling Personality (Disorder) and listened to the song Breathe Me by Sia. Members engaged in conversation on the video and some shared their personal and professional experiences in the personality disorder space. It was noted that personality disorders are overarchingly a vitally important condition in need of mental health treatment. Stigma and discrimination within the system ensures the topic is not discussed regularly and with enough openness to individual experiences. People with a diagnosis of personality disorder have very different experiences to those who do not have a personality disorder and specific attention to individual differences is important, in order to address individual needs. Council members noted that there are many barriers to treatment services for people with a diagnosis of personality disorder including a diagnosis of antisocial personality disorder which is a barrier for people seeking and receiving appropriate services easily.	Note: Virginia Catterall will provide the Reflection item for the December 2021 meeting.

5. Declaration of Conflicts of Interest	The Conflict of Interest Register was updated out of session. MD and TY noted the agency they are involved with have been awarded contracts by the Mental Health Commission (MHC). This will be reflected in the Conflicts of Interests Register.	Action186: Conflict of Interest Register to be updated
6. Acceptance of previous meeting minutes	The minutes from the previous meeting were endorsed.	
7. Action Log	<p>Completed actions: 177, 180, 181, 182, 183, 184, 185.</p> <p>Outstanding actions: These are N/A, with the only open action items being 'on going' and not overdue.</p>	
8. Budget	Council members noted that they had received the updated Year-To-Date budget in their meeting papers pack.	
9. Council Member Updates	<p>The Chair advised Council members that all those who were up for re-appointment should have received their offer of re-appointment letters and are required to confirm their acceptance of re-appointment to MHAC@mhc.wa.gov.au as soon as possible. The Chair announced to members that in addition to current members being re-appointed, Ms Patricia Councillor has also been appointed to the position of Deputy Chair. Council members congratulated Ms Councillor on her appointment.</p> <p>The Chair also noted that two new members would be commencing on the Council. Ms Nafiso Mohamed and Ms Jennifer Wilton have been appointed for an initial two-year term as members of the Council and will join in February 2022. Members were welcoming of the news, noting that both Ms Mohamed and Ms Wilton would bring with them an additional range of experience and expertise.</p> <p>Council members provided updates on what is happening within their own space as follows:</p> <ul style="list-style-type: none"> VC advised that she has joined new groups recently including the Graylands Reconfiguration and Forensic Taskforce (GRAFT) Lived Experience Advisory Group (LEAG); and the GRAFT Forensic Subgroup. In addition, she has been appointed to the Community Treatment and Emergency Response Roadmap Project (CTER) (The Roadmap) Expert Working Group (Metro). Cabinet confidentiality does not allow for the 	Action 187: Secretariat will circulate the links shared within the meeting chat.

	<p>further sharing of information about the progress with these groups other than that which has been shared by other presenters to the MHAC.</p> <ul style="list-style-type: none"> • TY reflected on the strong grassroots initiatives that were visible during the Council’s trip to Pingelly in November 2020. It highlighted how community members came together to work things out despite the dire lack of resources available. TY spoke of her work as the MHAC representative on the Ministerial Taskforce into Public Mental Health Services for Infants, Children and Adolescents aged 0-18 years in Western Australia (ICA Taskforce). There is a common theme across all of the work she is involved in, being the importance of conversation and the power of yarn. Language is important; the alternative to ‘we’re not funded so we can’t do that’ is ‘let’s get together and talk about what we can do’. TY felt the quality of engagement with lived experience participants in these conversations has evolved from 10 years ago when their voices were not given a meaningful seat at the table. The presence and visibility of services within the community was identified as important. • LS reflected on the general lack of regional services and how governments and organisations need to ensure innovative delivery is incorporated into the tendering process which should be KPI or outcome driven. She discussed the work that has been undertaken in Pingelly with seniors where a virtual village hub has been created. A community choir project has also begun, with participants ranging in age from 12 to 87 years. The first community event was held on 31 October 2021 with over two hundred people attending the show. LS noted these types of events allow the community to come together, connecting people, which creates an inclusive welcoming space. • PC advised there have been recent discussions on how the community can address matters without the need for marches. The Step up Step Down service continues to be well promoted and Yamatji Southern Regional Corporation CEO, Jamie Strickland has visited the centre and discussed the work they are doing and how it will benefit the community. • PP is currently assisting the Headspace centre in Northam and is a member of the committee addressing extended hours for the Wheatbelt Mental Health Service which covers mental health and drug and alcohol support seven days a week. He is also providing assistance to the Aboriginal Mental Health team in the Wheatbelt in his capacity as an Elder and it is a busy space at the moment. 	
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- EW announced that she has accepted a role as a Local Government Councillor for the Town of Bassendean. In the LGBTQ+ space, the Equal Opportunity Commission are currently undertaking a review of *the Equal Opportunity Act 1984, Western Australia (Act)*. Intersex individuals are omitted from the current Act and transgender individuals are only protected if they have undergone gender recognition which does not apply to most individuals in the Transgender community in Western Australia (WA).
- PCole noted the lack of safe environments available for people in crisis, highlighting there are service areas that do not fully understand the difference between assessment, treatment and management in a crisis situation. There are currently a lot of siloed services where knowledge is not being shared. PCole recommended that the Mental Health Commission (MHC) needs to actively imbed the Statewide Model of Care for Personality Disorders <https://www.mhc.wa.gov.au/media/3579/pd-report-jan-2021.pdf> to assist with this.
- RO is in discussion with the Recovery College of WA regarding regional representation on their Board. Recovery College WA is intended to operate flexibly and be able to develop local programmes suited to the local context. He is also contracted nationally for developing Aboriginal Social Outcomes suitable for regenerative farming. RO met with the Hon. Don Punch, MLA, the new WA Minister for Disability Services and heard that only 3 of the beds in the Eastern Disability facility had been utilised. Current legislation is a limiting factor and he only has power to stop admissions, but none over releases. The Government are looking at this issue. RO also noted he recently visited Broome and the Sobering-Up Centre supported by MHC has been shut down due to the Shire and MHC declining financial responsibility for its physical upkeep. He noted in general there has been a large increase in the number of Aboriginal services within Broome – compared to a much smaller number in the South West.
- JN advised she had been at Fiona Stanley Hospital for the last year evaluating their mental health pharmacy service. She is now located back at Fremantle Hospital and will go back at Fiona Stanley Hospital next year. The Chair queried the current cost of Opiate Replacement Therapies with JN, noting these costs are not covered by Medicare. JN noted when individuals pay for this service, it indicates a commitment to undertaking the treatment, which was important. It was felt that the community pharmacist is not utilised



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enough and their role within the mental health space was acknowledged as vitally important. This was particularly evident during the COVID-19 pandemic and the stress community pharmacists were placed under during this difficult time was noted. TY referenced the Evaluation of the Primary Care Navigator (PCNA) model for people bereaved by suicide in the Peel, and Rockingham, Kwinana region in WA which she had tabled for noting. Discussion took place regarding postvention, with the PCNA highlighting difficulties with obtaining information from General Practitioners (GP) post an individual's suicide. The PCNA noted this information was more easily obtained via community pharmacies as opposed to GPs. JN noted community pharmacists often have daily interaction with patients which can provide a useful source of information and potential support.

The Chair advised this week is Senior's Week which is relevant as Older Adults are often the forgotten members of the mental health group. Ageing creates problems with physical health however, it is important this is incorporated with mental health for this demographic. For ageing family members and carers, concerns about what will happen to the person they care for when they are no longer here continues to be a source of significant anxiety. It was noted that some carers are accessing their superannuation to purchase accommodation for dependants as they are unable to source suitable, stable accommodation through the current system. Impacts like these are largely invisible so are therefore not being identified although there are a couple of [National reports](#) that have been undertaken within the mental health space. Six years ago, the financial contribution by carers in the mental health space was identified to be \$14.2B per annum, with many of these family member carers in the age bracket 45 years and older.

The Chair also discussed the release of the [National Mental Health Commission's Peer Workforce Development Guidelines](#) in December 2021. The Chair noted she was a Deputy Co-Chair of the Steering Committee for this project which will be important in providing a national set of guidelines for services and systems in developing a sustainable and supported peer workforce with organisations having addressed their readiness for this workforce. An imbalance at a national level between the consumer peer workforce and the family carer peer workforce has been identified, and this will need to be addressed. A link to the project launch on 1 December 2021 can be found [here](#).

The Chair also referenced the National Stigma and Discrimination Reduction Strategy which is being led by the National Mental Health Commission, noting there has been a great deal of interest. MD is a member of the Public Stigma and Discrimination Technical Advisory Group part

	<p>of which will look at media and public reporting. The impact on communities of poor reporting can be very stigmatising and therefore reporting needs to be undertaken thoughtfully and sensitively. This is an important avenue for changing community views in these spaces. Discussion also took place regarding the National Statement of Principles for Forensic Mental Health 2006. The Chair is working with Mental Health Matters 2 Ltd, which is providing a lived experience component within this project, noting this will be further progressed in 2022.</p> <p>Council members discussed the importance of encouraging bravery for people to speak up when language is incorrect or misused. It was agreed that this is a sensitive subject, especially when there are people from mixed backgrounds in the room. This lends to the importance of being upfront in meetings and maintaining a safe space where anyone is entitled to question or correct someone’s language with the intention of promoting learning and enacting change.</p>	
BREAK		
<p>10. Trauma Informed Care Practices</p>	<p>Dr Sarah Pollock, Chief Mental Health Advocate, Mental Health Advocacy Service (MHAS), gave an update on the trauma informed practice training which MHAS advocates have recently received. It was noted that the training was high quality and has already proven valuable for MHAS staff.</p> <p>Some background information on the Trauma Informed Care Practice training day was provided which included working on case studies and applying learnings in a practical way. It was noted that advocates are already practicing differently and taking their time and care through cases. It was also noted that advocates are challenging the clinical language used in tribunals to enforce better language practices.</p> <p>Meeting attendees discussed how the <i>Mental Health Act 2014</i> (the Act) does not mention trauma and how there is opportunity within the Statutory Review Project to work on making the Act more trauma sensitive. The importance of individuals completing their own Treatment Support and Discharge Plans in their own words was noted and it was felt this should be imbedded in the Act. The importance of language was discussed alongside what is it that keeps a person safe, and what can be done in the sector to raise awareness of trauma and to reduce the stigma that can be associated with it. The ‘Emotional CPR’ approach was explained as a holistic approach to mental distress. https://www.emotional-cpr.org/ while working to align the significance of mental health alongside physical health. It was agreed the language used in the Mental Health Tribunal reports, post incident and post seclusion interviews will need to evolve.</p>	<p>Action 188: A soft copy of the Mental Health Advocacy Service Annual Report will be shared with members.</p>

	<p>Dr Pollock noted that the workforce appears collectively close to burn out and there is a system that is very risk conscious which creates barriers to a safe space, along with not always having the time to engage in a way that is meaningful.</p> <p>Current barriers of training within the public sector include the expense of the training and having clinicians take time off to attend training. An alternative approach would be to address what small steps can be started with that do not cost money such as changing some of the language. It was also noted having to re-tell your story is a traumatic process, i.e. conversation that starts with: “you don’t have to retell your story - I have read through some information, and I think I’m aware of some of the issues so that we can begin”.</p> <p>Dr Pollock noted there is a Trauma Informed Recovery Language Guide being created by Professor Nicholas Proctor from the University of South Australia and his research team that would be useful. The Chair noted there needs to be a move away from an approach of “what’s wrong with you” to “what’s happened to you / what’s happening for you?”. Being involved with mental health services can also be traumatising and this element needs to be considered.</p> <p>PCole noted that trauma is not the best word to be using as it doesn’t capture enough clarity and precision of a situation and felt the term is out of date. A quality workforce is important and more important than spending money on buildings.</p> <p>The Council advised Dr Pollock the following initiatives are a priority; the Peer Workforce Project, Roadmap, ICA Taskforce, the Statutory Review of the Mental Health Act and GRAFT. The priority focus needs to be safety; transforming a system from an unsafe system to a safe and welcoming system.</p>	
<p>11. Geraldton Trip Discussion</p>	<p>The Chair advised that planning for the regional trip to Geraldton is underway and raised the idea for members to split into smaller groups following the official meeting to , meet with individual services. This will allow Council members to come back together at the April meeting and discuss each of their experiences and inform their peers. Suggestions for visits included; Greenough Regional Prison, public mental health services, local General Practitioners, St. John of God Geraldton Hospital and Hope Springs Community Farm.</p>	
<p>12. Discussion on Presentations and Advice to the Commissioner</p>	<p>The Chair confirmed that the advice the Council drafted on the GRAFT project was given to the Mental Health Commissioner and a response will be provided in due course.</p>	

Remembrance Day	The Chair noted that today is Remembrance Day and acknowledged the courage and sacrifice veterans have made for their country and the peace they fought hard to achieve. Veteran mental health and their social and emotional welfare was also acknowledged as was the need to ensure they receive the services they need for their mental health and wellbeing. A one-minute silence was observed at 11.11am to remember those who have died or suffered in wars and conflicts.	
13. Other Business	N/A.	
14. Values Representative	VC was the Values Representative for the meeting and noted the diversity of discussion, and the expertise the two new members will add to the group. VC felt the Council member updates were very beneficial and helped to increase understanding the diversity of the work that each of the members undertakes.	Note: Pauline Cole will be the Values Representative at the December 2021 meeting.
Meeting Closed		11:30am
NEXT MEETING	Thursday, 9 December 2021 Mental Health Commission	