

Government of Western Australia Mental Health Commission



Expression of Interest: Lived Experience consumer representative for the Bilateral Schedule on Mental Health and Suicide Prevention – Western Australian Joint Service Planning and Governance Committee

The Mental Health Commission (MHC) recognises the valuable contribution that consumers, family, carers and community members make to the planning, implementation, delivery and evaluation of mental health, suicide prevention and AOD programs and services in Western Australia (WA).

The National Mental Health and Suicide Prevention Agreement (National Agreement) is the first agreement of its kind and sets out the shared intention of the Commonwealth and state and territory governments to work in partnership to improve the mental health of all Australians and to enhance the services of the Australian mental health and suicide prevention system. The National Agreement also commits governments to consulting with those with lived experience of mental ill health and/or suicide and their families and carers throughout its implementation.

The <u>WA Bilateral Schedule on Mental Health and Suicide Prevention (Bilateral Schedule)</u> forms a schedule to the National Agreement and sets out how the Commonwealth and WA will collaborate to implement system reforms that: address gaps in the mental health and suicide prevention system; and delivers a mental health and suicide prevention system that is comprehensive, coordinated, consumer focused and compassionate.

To support implementation of the Bilateral Schedule, the Commonwealth and WA governments will establish the Western Australian Joint Service Planning and Governance Committee (the Committee). The MHC, on behalf of the Committee, is seeking expressions of interest to appoint one consumer representative to the Committee. A family member/carer representative will also be appointed.

The role of the Committee

The Committee will provide:

- high-level leadership regarding local system planning to contribute to reform of the mental health, alcohol and other drug system in WA, and
- guidance to enable WA Primary Health Alliance (WAPHA) and the MHC to make informed decisions that meet the needs of local communities and ensure alignment and integration with Commonwealth and state-based services.

The consumer representative will ensure a lived experience perspective is included in the Committee's advice and recommendations. This will include recommendations to guide the development of services in the Bilateral Schedule.

Applicable initiatives under the Bilateral Schedule include:

- Investing in Child Mental Health and Social and Emotional Wellbeing
- Youth Mental Health Services
- Perinatal Mental Health Screening
- Aftercare Services
- Western Australia Eating Disorders Program
- Initial Assessment and Referral Tool
- Workforce Initiatives

The Committee will be co-chaired by the MHC and the Commonwealth Department of Health and Aged Care and will include senior representatives from WAPHA as well as other identified stakeholders.

Member commitment and remuneration

The Committee will exist for the duration of the National Agreement, until 30 June 2026. It is anticipated that the Committee will meet:

six-weekly for the first year, and

We're working for Western Australia. every two months from year two, until the end of the National Agreement.

The terms of reference for the Committee will be provided for endorsement by its members at the first meeting, scheduled for 9:30am-11:30am (AWST) on **Wednesday, 31 August 2022**.

Paid participation is offered for the role in line with the MHC's <u>Consumer, Family, Carer and Community Paid Participation Policy</u> (the Policy) at \$75 per hour, minimum three-hour payment. Depending on the length of the meeting, additional hours may be paid to support meeting preparation. Additional guidance on this is provided in the Policy.

Assessment of expressions of interest

Respondents will be assessed against the responses to the selection criteria below as well as the definitions (Advisor Tier) set out in Attachment 1 of the Policy and may be requested to provide a Criminal Record Check.

Shortlisted applicants may be invited to meet with the selection panel to further discuss their suitability.

How to respond to this EOI

To be considered for appointment to the Committee, interested parties are required to provide:

- a Curriculum Vitae (no more than three pages), including two referees
- a brief statement (no more than two pages) indicating your suitability based on the selection criteria/questions set out below.

Please mark your application "EOI Private and Confidential – Western Australian Joint Service Planning and Governance Committee Lived Experience Representative" and email to IGR@mhc.wa.gov.au.

The closing date for all EOI applications is 9:00am (AWST) Monday, 22 August 2022.

Enquiries

Please contact Ms Natasa Dale (08) 6553 0397, or Ms Emma Timms (08) 6553 0427, or email: IGR@mhc.wa.gov.au, if you require further information about the role.

Selection criteria/questions

1. Have lived or living experience of mental health/suicide related issues, including significant engagement with services across the continuum of primary, secondary and tertiary care.

Briefly describe how the intersect (or lack thereof) between primary, secondary and tertiary services impacted your recovery journey.

2. Have demonstrated lived experience representative skills and well-developed interpersonal skills and are able to effectively present a collective view on behalf of WA consumers regarding mental health, suicide prevention, and/or AOD networks in discussions and advice/recommendation formulation.

Please describe a recent example of where you have used your leadership skills and interpersonal skills to advocate for change to benefit people of lived experience at a strategic and/or executive level. This should include how you utilised your relevant networks to present a collective view.

3. Have a clear understanding of the WA mental health and suicide prevention sector, including the primary, secondary and tertiary care mental health systems.

What are the current WA mental health and suicide prevention priorities and issues, from a consumer perspective?

4. Have a general or high-level understanding of the priority reform areas being addressed through the National Agreement and Bilateral Schedule, including the emphasis on collaboration between the Commonwealth and WA governments.

What is your understanding of the priorities to be delivered under the Bilateral Schedule and National Agreement broadly and how these will be delivered through the Committee?