

MENTAL HEALTH ADVISORY COUNCIL MEETING MINUTES

February 9, 2023

Attendees	Paul Parfitt (PP), Tracey Young (TY), Richard Oades (RO), Virginia Catterall (VC), Jessica Nguyen (JN), Jennifer Wilton (JW), Nafiso Mohamed (NM), Lee Steel (LS)	Mental Health Commission Gascoyne Room, Level 2, 1 Nash Street Perth WA 6004 and MS Teams Thursday, 9 February 2023 08:30am – 12:30pm
Chair	Margaret Doherty (MD)	
Deputy Chair	Patricia Councillor (PC)	
MHC Support	Cath Colvin, A/Principal Policy Officer, Stakeholder Engagement, Mental Health Commission Niloo Eijkenboom, A/Assistant Director, Governance and Stakeholder Engagement, Mental Health Commission.	
Guests	Ms Leonie Dick, Wheatbelt Aboriginal Coordinator, Wheatbelt Mental Health Service Dr Sophie Davison, Chief Medical Officer Mental Health, Mental Health Commission Ms Denise Cail, Acting Assistant Director, Treatment Services, Mental Health Commission	
Apologies	Pauline Cole	
AGENDA ITEM	DISCUSSION	ACTION LOG
1. Acknowledgement of Traditional Owners	The Deputy Chair acknowledged the Whadjuk people of the Noongar Nation. Respects were paid to Elders past, present and future for their knowledge and traditions.	
2. Welcome and apologies	The Chair welcomed attendees and noted apologies.	
3. Recognition of Lived Experience	The Chair recognised those with lived and living experience and acknowledged the emotional labour that comes with it.	
4. Member Check In	Members did a round table check in.	
5. Reflection Item	Virginia Catterall presented the reflection item: The dangerous game of cat-and-mouse playing out on outback streets ABC News. Members noted: <ul style="list-style-type: none"> Aboriginal women are eighteen times more likely to experience domestic violence. Alice Springs have introduced an alcohol ban as a 'circuit breaker' to reduce the violence. Needs based funding of \$250 million has been introduced to address the disadvantages to which the Aboriginal community in Alice Springs is exposed. How funds will be distributed is still to be determined. 	Note: Chair to provide reflection item for next meeting.

	<ul style="list-style-type: none"> • A program on SBS was also discussed, noting its positive message. It focussed on a young Aboriginal boy in the community who works within the youth space for the community, teaching and supporting young children. • The past requirement for Aboriginal people to relinquish their Aboriginality in order to become Australian Citizens was recognised as harmful. • Removal of children from families is not appropriate as the sole response where communities experience poverty, discrimination and disadvantage. • Investment in cultural programs run by Aboriginal staff is important. 	
6. Conflicts of Interest	No declaration of interests were noted.	
7. Acceptance of previous meeting minutes	Council members endorsed the 8 December 2022 meeting minutes.	
8. Action Log	<p><u>Completed actions:</u> These were discussed and noted.</p> <p><u>Outstanding actions:</u> Action 233 – An introduction between WA Recovery College and Geraldton Community and Carer Advisory Group is still in progress.</p>	
9. Budget	The budget was noted.	
10. Update on the Banksia Hill Detention Centre in relation to mental health services	<p>The Chair introduced Dr Sophie Davison and Denise Cail who provided an update on mental health services at the Banksia Hill (Banksia Hill) Detention Centre. Members discussed the following in further detail:</p> <ul style="list-style-type: none"> • These issues affect the families of young people in detention as well as the young people themselves. • Banksia Hill is a complex facility as it accommodates children of all genders who are sentenced as well as those on remand. • A study undertaken by the Telethon Institute for Child Health identified that ninety percent of the young people detained have a severe neurological problem, most previously undiagnosed. These conditions affect motor skills, ability to plan, cognition, attention, language and social skills. Therefore, an individual's cognitive ability is affected and this needs to be considered, especially as a large number of detainees also have language and literacy challenges. 	

- There are multiple family and social disadvantages, along with trauma, that also need to be addressed in prevention and diversion from detention.

Overall, the MHC is addressing:

- Specific recommendations from the Infant, Child and Adolescence Taskforce (ICA) regarding the provision of wraparound youth services through all aspects of an individual's involvement with the Department of Justice (Justice) system.
- Justice is working with the MHC to develop a Model of Care (MoC) for children at risk of involvement or those involved in the justice system which incorporates child and adolescence services within the community and coordinated care.
- Graylands Reconfiguration and Forensic Taskforce (GRAFT) is developing a business case for enhanced forensic beds within a young forensic unit as there are currently no forensic mental health beds for young people under eighteen years of age. This results in individuals with serious mental health challenges being managed at the Banksia Hill facility as access to the East Metropolitan Youth Unit is not always possible.
- Youth mental health services generally include young people up to 24 years, however the Youth Justice system age range is from ten to eighteen years of age. There is work being undertaken to ensure that the differing age ranges does not contribute to further gaps for young people requiring services.
- A State election commitment to provide additional services at Banksia Hill includes increased in-reach psychiatric care.

Justice has received funding to assist with the following at Banksia Hill:

- Updating the Intensive Supervision Unit;
- Developing a new Crisis Care Unit that will provide a more therapeutic approach; and
- Creation of an Aboriginal Services Unit to provide culturally safe care.

For all of these services to work well together, they must:

- Incorporate trauma informed principles and child safe practices;
- involve redeveloping current practices to incorporate positive behaviour management;
- Be culturally responsive;
- Focus on an individualised approach;
- Aim to provide individuals with as much autonomy and responsibility as possible, within a justice facility setting; and

	<ul style="list-style-type: none"> • Provide support to staff in order to help them adapt to the change in service provision. <p>Funding related to the new MoC will be used to employ a multi-disciplinary team. inclusive of:</p> <p>Additionally, a model of working with family and taking a holistic approach to ensure cultural safety is being developed by Justice and will include Aboriginal services. This will need to recognise cultural diversity and include translation services.</p> <p>The proposed new Philosophy of Care (PoC) will take a more individualised approach however it will require input from many individuals, inclusive of family, in order to work effectively.</p> <p>A multidisciplinary approach will be essential to ensure individualised care both inside and outside of the facility and a Model of Service (MoS) is being drafted to reflect this. How the MoS will work within the Justice setting needs to be refined.</p> <p>Some potential issues raised by members were:</p> <ul style="list-style-type: none"> • Fetal Alcohol Spectrum Disorder assessments are critical, and queries arose as to whether this team be able to assist with some aspects of these assessments. It was noted ongoing paediatric assessments will be considered as long-term care for these individuals as part of the MoC. • Assessments for conditions such as Attention Deficit Hyperactivity Disorder are urgently required for individuals at Banksia Hill, so services can be accessed once an individual has been released. It is essential eligible individuals have access to National Disability Insurance Scheme (NDIS) funding to enable the implementation of the appropriate supports. • Timely access to Neuropsychology for individual young people was raised, given the current system does not facilitate this. Having a dedicated resource at Banksia Hill was discussed, noting incorporating services within the community for neuro developmental disorders and co-occurring mental health problems has better outcomes. • One experience was shared in which an individual assessed under the Justice system received a diagnosis through that system. However, the court would not release the relevant documentation to the individuals to assist them with obtaining NDIS funding or other relevant mental health support services. • Schools in regional Western Australia (WA) currently do not have the budget to provide the required NDIS support services. 	
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	<ul style="list-style-type: none"> • Improved communication from the Justice Department is vital as some families and children are unsure of how long they will be detained at Banksia Hill and some of the negative behaviours may be arising from this lack of transparency and communication. • A multi-agency approach and prevention strategy is required to ensure children do not end up at Banksia Hill in the first instance. • The proposed PoC will incorporate a trauma informed approach to meet diverse needs and be culturally responsive. <p>Members thanked the guests for the update and were positive about the allocation of funding to improve the mental health outcomes for these vulnerable young people. A trauma informed approach to meet the needs of these children in a more therapeutic way was considered a positive and safer approach, noting this was supported many years ago by prior Council guest Dr Helen Milroy.</p>	
BREAK		
<p>11. A more culturally secure approach to Mental Health for the Aboriginal community in Northam</p>	<p>The Chair introduced Ms Leonie Dick and the following discussion arose from her presentation:</p> <p>The philosophy of the Wheatbelt Mental Health Service is Aboriginal people have the right to live well and stay well and its purpose is to deliver an integrated holistic mental health service that addresses whole of life, whole of family.</p> <p>The Statewide Specialist Aboriginal Mental Health Service (SAMHS) program commenced in 2012 and integrates Aboriginal concepts into mental health services with clients the central focus. It also provides a career pathway for Aboriginal people as it offers training within the community mental health space, promoting the expansion of the Aboriginal workforce.</p> <p>Central to the success of the SAMHS program, are key components of the MoC inclusive of:</p> <ul style="list-style-type: none"> • Staff cultural competency which includes cultural safety and co-managing clients with clinical staff • Aboriginal Mental health workers are included in all aspects of an individuals' care • There is an open-door policy with staff accessible five days a week • Working in partnership with multidisciplinary teams ensures continuity of care • Patient centred care and recovery principles with culture as the foundation of the care is essential 	<p>Action 236: Members will be provided with a copy of the presentation.</p>

- Individuals are connected to a Mental Health worker best suited to their needs. The cultural competency is more than an awareness of difference, it is the capacity to improve outcomes by integrating culture into delivery of services, acknowledging that Aboriginal people have their own way of therapy which needs to be incorporated into services
- Translating the clinical knowledge to cultural concepts so the individual can understand the journey they are about to commence
- Understanding nuances of family ties, cultural obligations and using cultural intelligence
- Incorporating the overall use of Aboriginal language
- Understanding there is a deep connection to land, country and spirituality. This is particularly important when an individual is transferred away from their country. It is important to understand that being on country is a legitimate part of their individual recovery process.
- Understanding that a social and emotional wellbeing approach for Aboriginal people move incorporates physical, human and spiritual aspects. For example, voice hearing may be understood as hearing from ancestors, rather than as a symptom of an illness. Incorporating consumers, families, Elders and communities who understand and embrace these beliefs, is an integral part of the recovery process for an individual.
- Aboriginal concepts differ to Western medical concepts and a holistic approach needs to be incorporated in contemporary practice. This includes understanding of culture-bound syndrome.
- The MoC incorporates Elders and Aboriginal medicine in consumer’s care. This is recorded in the Single Patient Information System which is accessed by all WA hospitals and health services.
 - A pilot program implemented October 2022 includes Aboriginal Healers. It is hoped the program will continue, noting they can provide healing for culture-bound syndrome. Traditional Aboriginal Healers are the cultural equivalent to a psychiatrist (within the bio-medical framework). Their wisdom and knowledge are handed down through generations.
 - Cultural governance needs to sit alongside clinical governance.

It was recognised that the impact of colonisation has resulted in deep, intergenerational trauma for some individuals and communities and this has affected their spiritual, environmental and psychological connection which in turn harms their individual mental health. A strong connection to culture, community and country is key. Members were grateful for the insightful and informative presentation by Ms Dick, noting its invaluable content will be useful in providing advice to the Commissioner.

<p>12. Member Profiles</p>	<p>Jennifer Wilton provided the member profile.</p>	<p>Note: Virginia Catterall will provide the member profile at the March meeting.</p>
<p>13. 2022 Review / Planning for 2023</p>	<p>The Work Plan was discussed, noting the Chair met quarterly with the previous Mental Health Commissioner and will continue to do so with Acting Mental Health Commissioner, Lindsay Hale. The Work Plan may be affected by the implementation of recommendations arising from the Independence Governance Review.</p> <p>The lessons learnt from last year included:</p> <ul style="list-style-type: none"> • Ensuring guests included those in decision making capacities, along with an individual who works at the grass roots level to enable a broad overview in discussions. • There needs to be a greater capacity for people to present on issues that are part of the Council’s overall strategic direction. • An overview of what recommendations made by the Council have been considered by the MHC will be tabled for discussion at the next meeting. • Meeting at alternative venues was discussed and Linkwest will be investigated as an option with Managers who are managing the specific community hub in which a meeting might be held would be invited to present on the work of their Centre. <p>Members agreed to invite the following guests to meetings in 2023:</p> <ul style="list-style-type: none"> • Acting Commissioner of Mental Health to discuss the overarching strategy to ensure all major projects are co-ordinated to minimise duplications or gaps • Jaide Lancaster, Superintendent BHDC, or another representative from the Justice Department to discuss the operating philosophy. The MHC will contact Emma Timms to determine the most appropriate guest. • Justine Dandy, Associate Professor from Edith Cowen University regarding Cultural and Linguistically Diverse (CaLD) youth research • Western Australian Local Government Association presentation on CaLD youth and Lee Steel to provide questions to ask the guest presenter. • Department of Local Government, Sport and Cultural Industries and how their initiatives intersect with the strategy of the Council • Preventative programs that are in place for young people who may be at risk of entering the criminal justice system. 	<p>Action 237: A overview to be provided to Council on what recommendations to the Commissioner have been implemented by the MHC.</p> <p>Action 238: Meeting at Linkwest venues to host meetings will be investigated. Members will also suggest other venues.</p> <p>Action 239: MHC to contact Emma Timms to determine the most appropriate guest from the Justice Department.</p> <p>Action 240: Lee Steel to provide questions to ask the WA Local</p>

	<ul style="list-style-type: none"> • Professor Steve Alsop, Chair of the Alcohol and Other Drugs Board • Lyn Mahboub from Curtin University (Curtin) to be invited to speak regarding Lived Experience. • An update will be sought from Lyn Mahboub and students who will graduate from the Lived Experience program currently commencing at Curtin. 	<p>Government Association guest.</p>
<p>14. Discussion on presentations and advice to the Commissioner</p>	<p><u>General:</u></p> <ul style="list-style-type: none"> • Suggestions on how the MHC can more effectively include under-represented communities in their work. • Members recognised the significant work guests undertake when creating a presentation for Council and wish to ensure this valuable content is not lost. <p><u>A more culturally secure approach to Mental Health for the Aboriginal community in Northam:</u></p> <ul style="list-style-type: none"> • This presentation identified the need to provide more culturally secure advice to the Mental Health Commissioner. • Members recognised the exceptional work undertaken by Ms Dick and the Wheatbelt Mental Health team via the pilot project and agreed this should be evaluated and implemented state-wide to promote more successful mental health outcomes regionally. • There has been significant work undertaken to set the context, create organisational readiness and embed specific culturally secure practices which could effectively be rolled out to other regions. • Mr Parfitt will advise Ms Dick the Council is supportive of expanding this program into other communities and ascertain whether providing support to Ms Dick would assist in being able to role the program out to further regions. • A 'lunch and learn' session with Ms Dick will be suggested to the MHC. <p><u>Update on the Banksia Hill Detention Centre in relation to mental health services</u></p> <ul style="list-style-type: none"> • It is important to reinforce the entire approach needs to be trauma informed. • Suggest the MHC review Ms Dicks' presentation to see whether there are any connections to the issues being experienced at Banksia Hill particularly for Aboriginal young people 	<p>Action 241: Paul Parfitt to discuss with Ms Dick the options for rolling out the programs into other regions.</p> <p>Action 242: A lunch and learn session with Ms Dick to be suggested to the MHC.</p>
<p>15. Other Business</p>	<p>N/A.</p>	

16. Values Reflection	<p>Council members provided value reflections as follows:</p> <ul style="list-style-type: none"> • Values were achieved and included LGBTIQ+SB and changing the language of CaLD to ELD – Ethnoculturally and Linguistically Diverse. • Discussions were respectful whilst still addressing what is important • Ms Dick and Mr Parfitt’s presentation was positive and illustrated innovation and exploration of issues at a local level • Planning for the coming year incorporates exploring innovation at a local level • Promotion on the hope for recovery was not quite as strong in the content for today’s meeting., noting there may be a challenge in understanding what recovery is in certain contexts e.g. youth detention. 	
<p>Meeting closed at 12:22pm</p>		
NEXT MEETING	<p>Thursday,9 March 2023</p>	