



**Private Mental Health
Consumer Carer Network (Australia)**

engage, empower, enable choice in private mental health

**TWENTY FIRST (21st) MEETING
OF THE
NATIONAL COMMITTEE**

HELD AT

**THE ROYAL AUSTRALIAN AND NEW ZEALAND
COLLEGE OF PSYCHIATRISTS
(RANZCP)
309 LA TROBE STREET
MELBOURNE
VICTORIA**

18–19 FEBRUARY 2010

REPORT AND RESOLUTIONS

Glossary of Terms and Acronyms

AHIA	Australian Health Insurance Association
AMA	Australian Medical Association
APHA	Australian Private Hospitals Association
DoHA	Australian Government Department of Health and Ageing
ECT	Electroconvulsive Therapy
FaHCSIA	Australian Government Department of Families, Housing, Community Services and Indigenous Affairs
Health Insurer(s)	Private Health Insurer(s) that pay benefits for psychiatric care
Hospital(s)	Private Hospital(s) that provide mental health services
MBS	Australian Government Medicare Benefits Schedule
MHCA	Mental Health Council of Australia
MHSC	Mental Health Standing Committee of the AHMAC Health Priorities Principal Committee
NACMH	National Advisory Council on Mental Health
NC	The National Committee of the Private Mental Health Consumer Carer Network (Australia)
Network	Private Mental Health Consumer Carer Network (Australia)
NHHRC	National Hospital and Health Reform Commission
NMHCCF or Forum	National Mental Health Consumer Carer Forum
PBAC	Pharmaceutical Benefits Advisory Committee
PMHA	Private Mental Health Alliance
PMHA–CCMWG	PMHA Collaborative Care Models Working Group
PMHA–CDMS	PMHA–Centralised Data Management Service

1. OPENING AND WELCOME

The Independent Chair of the Private Mental Health Consumer Carer Network (Australia) [Network], Ms Janne McMahon, opened the Twenty First (21st) Meeting of the Network's National Committee (NC) at 9:30 AM (the Meeting) on Friday, 18 February 2010. The Meeting was held over two days at the Headquarters of the RANZCP at 309 La Trobe Street in Melbourne. The following representatives were present.

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| 1. Ms Janne McMahon | Independent Chair and Consumer Representative on the Private Mental Health Alliance (PMHA) |
| 2. Ms Kim Werner | Deputy Chair and Network State-based Co-ordinator for the Australian Capital Territory (ACT) |
| 3. Mr Norm Wotherspoon | Queensland (QLD) |
| 4. Ms Alvina Hill | New South Wales (NSW) |
| 5. Ms Ruth Carson | Carer Representative on the PMHA, Acting Network State Co-ordinator for Victoria (VIC) |
| 6. Mr John Kincaid | South Australia (SA) |
| 7. Mr Patrick Hardwick | Western Australia (WA) and National Mental Health Consumer Carer Forum |
| 8. Mr Michael O'Hanlon | Beyondblue |
| 9. Mr Wayne Chamley | Board Member Mental Health Council of Australia |
| 10. Mr Phillip Taylor | Secretary (PMHA Director) |

APOLOGIES

There were no apologies

INVITED GUESTS FRIDAY 19 FEBRUARY 2010 (see Agenda Item 12)

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| 1. Ms Adi Glancy | <i>RANZCP Project Officer for the Chronic Condition Self Management Project.</i> |
| 2. Dr Margaret Leggatt | <i>Carer Member of the Network's Expert Advisory Panel.</i> |
| 3. Professor Neil Cole | <i>Consumer Member National Advisory Council on Mental Health.</i> |

2. REPORT OF THE LAST MEETING NETWORK NC MEETING

The Meeting noted a copy of the Report of the Twentieth (20th) meeting of the Network's NC, held on 17/18 August 2009 in Melbourne. The Secretary, Mr Phillip Taylor, reported that a copy of the Report had been provided to the PMHA and would be posted on the Network's website.

3. PROGRESS WITH ACTIONS ARISING FROM THE 20TH MEETING

The Meeting updated the following Table of Progress on actions arising from the 20th NC Meeting.

ITEM #	DETAILS	RESPONSIBILITY	STATUS
2	Report of the last Network Meeting		
➤	Routinely circulate endorsed reports of Network meetings to beyondblue.	Phillip Taylor	Done
5.1	Operating Guidelines		
➤	PMHA Director undertake preliminary rewrite	Phillip Taylor	Done
➤	Ms Werner to undertake complete draft review and rewrite	Ms Werner	Done
➤	Further refinement by Ms Hill and Ms Carson	Ms Hill/Ms Carson	Done
5.2	Call for Expressions of Interest for Position of Deputy Chair	Chair	Done
➤	Ms Kim Werner appointed		
5.3	Possible Patrons of the Network		
➤	Approach: Her Excellency Ms Quentin Bryce AC, Mr Michael Slater, Prof. Geoff Gallop AC, Prof. Alan Fels AO, and Mr Peter Fitchner	Chair	Pending
6	Engagement of grass roots consumers and carers		
➤	Develop preliminary email for distribution to members	Mr Phillip Taylor/Chair	Done
13	Policies of the Network		
➤	Undertake progressive review of current documentation which exists in all submissions, position statements etc. to be used to develop a Network Manual.	Ms Werner	Ongoing
13	Information Sheets		
➤	As endorsed at 20 th meeting and include on website following signoff by email of National Committee members	Chair/Members	Done
15	PMHA Collaborative Care Models Working Group		
➤	Amend consumer and carer section in accordance with views of the 20 th meeting	Mr Phillip Taylor/Chair	Done
16.	Consumer and Carer Workforce		
➤	Position Statement on Consumer and Carer Participation	Chair Ms Hill/Mr Chamley	Done

Ms McMahon advised that most outstanding matters had been incorporated into the appropriate agenda items for this Meeting.

3.1 Network Deputy Chair

Ms McMahon reported that Ms Kim Werner had accepted the offer of appointment as Deputy Chair of the Network. No other expressions of interest were received. The Meeting congratulated Kim on her appointment.

3.2 Possible Patrons for the Network

That Meeting considered progress with approaches to the following eminent Australians to ascertain whether they might be interested in becoming a patron of the Network.

- Professor Geoff Gallop AC
- Professor Alan Fels
- Mr Michael Slater
- Mr Peter Hitchener
- Her Excellency, Ms Quentin Bryce AC

After discussion, it was agreed that the Chair should approach Professor Geoff Gallop in the first instance.

Resolved (unanimous)

That the National Committee (NC) of the Private Mental Health Consumer Carer Network (Australia) [Network] requests that Chair approach Professor Geoff Gallop as a possible patron for the Network.

Action: Ms Janne McMahon

4 NETWORK WEBSITE

The Networks website was discussed and it was agreed that there were several ways the performance of the website might be able to be enhanced.

Resolved (unanimous)

1. *That the National Committee (NC) of the Private Mental Health Consumer Carer Network (Australia) [Network] requests that the PMHA Director investigate analytical tools that would enable the utilisation of the Network website to be determined.*

Action: Mr Phillip Taylor

2. *The NC requests that the Network Administrative Officer develop a list of other relevant organisations for the NC to consider approaching with a view to establishing an interlinkage between the Network's website and their websites.*

Action: Ms Terri Burgess

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5. NETWORK BUDGET

The Chair explained and discussed the AMA Statement of Network Budget Activity for the Network, for the period 1 July 2009 to 30 November 2009, which had been circulated with the agenda and papers for this Meeting.

The Meeting noted the budget was tracking well.

Under this Agenda Item, the issue of the payment of sitting fees and other reimbursements for consumers and carers attending State-based Committee Meetings was raised. After discussion, State-based Co-ordinators agreed to investigate the current situation in their jurisdictions further, taking into account the subtle differences that can exist between salaried and non-salaried consumers and carers.

Mrs Ruth Carson raised another issue under this Agenda Item, concerning the time spent by the Network Chair on project work. There was consensus that, in future, the salary and oncosts for the Network Chair should be factored into any project budget to reimburse the Network for the Chair's time spent on additional project work.

Resolved (unanimous)

That the National Committee (NC) of the Private Mental Health Consumer Carer Network (Australia) [Network] requests that its State-based Co-ordinators investigate whether any sitting fees, or other reimbursements, are being paid to the consumers and carers attending the State-based Committee Meetings they host in their respective jurisdictions.

Action: State-based Co-ordinators

6. STATE COMMITTEE REPORTS (hereafter State Committees)

The Meeting noted the self-explanatory minutes of meetings held by the National Network's, State-based Co-ordinators that had been circulated with the agenda and papers for the Meeting. Each Co-ordinator spoke to their minutes and briefed the Meeting further "in committee" on the key issues being discussed. In summary, some of those issues included the following.

- Smoking in private hospitals.
- Consent and ECT.
- Consumer Carer Consultants versus Consumer Carer Committees.
- The need to address and fund Carer involvement, representation, and support.
- Insurance company requests for a treating psychiatrist to provide the full medical records for applications for life and income protection insurances.
- Requirements for appointment as a Carer Consultant in SA's public mental health sector.
- Suicide Inquiry
- Progress with recruiting a Tasmanian State Co-ordinator.

Each State Co-ordinator agreed to liaise with Ms McMahon and Ms Terri Burgess concerning arrangements for their forthcoming State-based Committee meetings.

7. ENGAGEMENT WITH GRASS ROOTS CONSUMERS AND CARERS

At the February 2009 meeting of the Network, it was suggested that a survey of the Network Members be conducted at regular intervals to canvas the issues and concerns of consumers and carers. It was also suggested that members who might be interested in coming to State Committee meetings could also be canvassed as to whether they had a preference for day or evening meetings and how they might wish to be contacted in this regard.

A survey was subsequently conducted via email of Network members in November 2009.

The Meeting considered the results of the survey and also discussed the wide range of other available means and processes that could be used to obtain feedback from consumers and carers. It was agreed that the Network e-News and Newsletter could be used as a vehicles for regularly gathering input through the inclusion of a *have your say* section with an appropriate email link back to the Network Chair. It was further agreed that the Chair should write to all those Network Members without email addresses encouraging them to obtain an email address, so that they can receive information electronically on Network activity. This raised the general issue of the mechanism for reaching Members and a query that had been raised as to whether it may be better for the Network Member database, currently held at the Federal Offices of the AMA in Canberra, to be moved to the home offices of the Network Chair. Mr Taylor reported this issue had been raised with the Federal AMA and the following advice was provided for this Meeting.

The database should remain under the control of the AMA to protect those individuals making up the database and to minimise the likelihood of breach of privacy or confidentiality. While the current *AMA Agreement for Services 2009-11*, executed by the AMA and the parties to the PMHA, its CDMS and the Network, does not refer specifically to the existing or any other database, the Agreement does place full responsibility on the AMA for the “safe keeping” of information. Any delegation of responsibilities to others would require the AMA to ensure that the primary responsibilities over information that falls to the AMA under the Agreement are maintained. The AMA has the security and the processes in place to manage these issues. This advice was discussed and accepted by the NC. Mr Taylor was asked to investigate what the situation with the database would be if the Network was to incorporate.

Resolved (unanimous)

1. *That the National Committee (NC) of the Private Mental Health Consumer Carer Network (Australia) [Network] requests that a “have your say section” should be included in the Network’s Newsletter that enables recipients to respond to the Network Chair directly via email.*

Action: Ms Janne McMahon/Mr Phillip Taylor

2. The NC requests that relevant issues arising from the 2009 email survey be included on the agenda for the next meeting of the NC, together with any matters arising from the ongoing "have your say" survey.

Action: Ms McMahon/Mr Taylor

3. The NC requests that the Chair write to those Network Members who have not provided an email address encouraging them to provide an email address, so that they can receive information electronically on Network activity.

Action: Ms McMahon/Mr Taylor

4. The NC requests that the AMA provide advice as to whether the contact details of Network Members held by the AMA would be able to be transferred to the Network if it were to become an incorporated body.

Action: Mr Taylor

8. NETWORK OPERATING GUIDELINES

The Meeting considered and further amended a copy of the Draft Operating Guidelines for the Network, which had been revised following the last meeting of the Network.

The NC agreed to endorse the Guidelines acknowledging that the issue of voting rights may need to be revised in the future, as the composition of the NC evolves over time.

The Chair thanked Members for their input.

Resolved (unanimous)

That the National Committee (NC) of the Private Mental Health Consumer Carer Network (Australia) [Network] endorses the draft Operating Guidelines for the Network's NC, as revised and amended by the 21st Meeting of the NC held on 18/19 February 2010 in Melbourne.

9. IDENTIFYING THE CARER PROJECT (ICP)

The Chair reported that in mid 2007 the Network was funded by the Department of Health and Ageing to conduct the *Identifying the Carer Project (ICP)*. The issues examined in consultations included the processes for identification, determination of extent of engagement, processes for review of engagement, and identification of issues of concern for consumers and possible solutions. The final report of the ICP identified the following.

- Carers have an important role to play in all situations where a person has an ongoing mental illness,

- Practice varies significantly from one location to another. In general, health services make little effort to identify or involve carers.
- Identification is hampered by lack of policies and protocols to guide practice and appropriate information to provide to carers.
- Clinical practice standards, which promote an inclusive approach to identifying and working with carers, need to be established by all public and private mental health services. This approach will promote identification and engagement to enable carers' strengths to be promoted, their difficulties to be acknowledged and to encourage empowerment.
- Change in clinical practice will take time and may be assisted by the following:
 1. Nationally consistent carer identification and participation policies and good practice protocols to be developed for implementation in all public and private mental health services.
 2. Development of carer packs of information for distribution by public and private mental health services, carer organisations, non-government organisations, pharmacies, and for downloading by carers from identified web sites.

In looking at ways in which to take forward the Recommendations of the ICP, the Mental Health Information Strategy Sub-Committee advised that, in light of the lack of any existing nationally consistent good practice protocols or guidelines, a number of the key Recommendations could not be taken forward by the States and Territories. DoHA has, however, since provided some funding for the Network to undertake a six month project, which is scheduled to provide the following deliverables to the Australian Government by 31 May 2010.

1. A brief summary report for DoHA and the Network written by the Project Officer, Ms Judy Hardy.
2. Draft good practice policy regarding nationally consistent identification policies and good practice protocols.
3. Draft generic wording for printed information to be provided at the time of admission, to carers of people with a mental illness. This may comprise the following.
 - (a) Pro-formas illustrating how the service might be described to carers.
 - (b) Pro-formas designed to introduce carers to relevant Mental Health Legislation.
 - (c) Carers rights and responsibilities.
 - (d) Suggested questions carers may wish to use in liaising with service providers.

(e) Suggestions for additional assistance for carers.

In order to meet DoHA's completion deadline of 31 May, 2010, work on the project began in December 2009. To assist with this project, the Network has established a small Reference Group to oversee the project with all but one representative based in Adelaide.

The Network acknowledged Mr Allen Morris–Yates and his private company, Data Systematics, in acting as the auspicing entity for this work.

10. NETWORK WORK PLAN REVIEW

Each year, the Network determines a work plan for the ensuing twelve month period to guide the activities to be undertaken and outline the deliverables expected within the context of its agreed overarching *Strategic Plan for 2009–2012* (Strategic Plan).

The Chair reported on progress with the Network's Work Plan. Some of the issues discussed included the following.

- The Chair continues to negotiate for better alignment between bluevoices and the Network.
- Attendance at the THeMHS conference is becoming increasingly expensive for Network representatives. In some jurisdictions, peak bodies do have funding available and the Chair agreed to follow–up this matter, where possible.
- The Chair distributed sample tote bags, which will be provided to NC Members for them distribute as they see fit.
- The Network has been successful in having a psychiatrist appointed to the PBAC, which was a significant achievement.
- Health Insurers are yet to invite the Network Chair to a meeting of the AHIA Mental Health Committee.

11. NATIONAL MENTAL HEALTH CONSUMER CARER FORUM & THE MHCA'S NATIONAL REGISTER OF CONSUMER AND CARER

The Network's representative on the National Mental Health Consumer Carer Forum (NMHCCF or Forum), Mr Patrick Hardwick, reported on the following activities currently being undertaken by the NMHCCF.

- The NMHCCF representative for Tasmania is now Mr Darren Jiggins.
- Ms Kylie Wake is the new Executive Officer for the NMHCCF.
- The Australian Government's Mental Health Standing Committee (MHSC) is considering expanding the Forum to include indigenous, CALD, and youth representatives. MHSC has requested a scoping exercise on the appropriateness of the current membership of the NMHCCF. MHSC will consider existing and potential representatives from organisations and specific population groups. A survey is being conducted by the NMHCCF via email.

The NC expressed some concerns over how the survey process was being conducted, particularly in relation to the non-consumer organisations that were being asked to respond.

- The issue of smoking on in-patient units has been raised at the MHSC. In NSW, the Disability Discrimination Commissioner believes mental health consumers may have a case for human rights discrimination.
- The needs of people experiencing co-morbid intellectual or development disability and mental illness were discussed at MHSC. MHSC Members agreed to be mindful of this issue in developing policies and strategies.
- The National Advisory Council on Mental Health (NACMH) update resulted in discussion of the quality of the GP referral process under the Better Access Initiative, noting there is little accountability of psychologists and psychiatrists. This matter will be included on the agenda for the next NMHCCF. A background papers is being prepared.
- NMHCCF business plan has gone to the Executive for sign off.
- NMHCCF Secretariat is developing a template for recording the hours volunteers spend working on NMHCCF and other bodies and is also developing a response to the National Hospitals and Health Reform Commission (NHHRC) Report.
- A copy of the Mental Health Workforce Advisory Committee's terms of reference will be uploaded onto the NMHCCF website.
- There will be a push to use more non-government service as part of mental health service delivery.
- The NMHCCF website and its Statement on Seclusion and Restraint was launched at the TheMHS conference in September 2009 by The Hon. Senator Clair Moore MP.
- There may some review of TheMHS conference consumer carer day to include a consumer, carer, and clinician perspectives.
- MHCA is impressed with the NMHCCF and its achievements over the past few years.
- The Operating Guidelines of the NMHCCF are being revised and the election process is under review. The Executive will be broadened to include an Executive Committee comprised of six positions: Consumer and Carer Co-Chair; Deputy Co-chair; and Ordinary Executive Committee Members. The Executive will be selected on the second day of the next NMHCCF meeting.
- There was a presentation Mr Julian Thomas on the National Justice Mental Health Initiative.
- NMHCCF's forward plan for 2009-11 includes the following projects.

1. A national audit on the effectiveness of consumer and carer participation.
 2. Development of a national consumer carer accountability framework.
 3. Consumer and carer participation in the mental health workforce.
- Advocacy briefs have been included on the NMHCCF website concerning supported housing and homelessness, and privacy and confidentiality.
 - A watching brief will be kept on any discriminatory practices with regard to criminal records checks for volunteers.
 - A draft research report, prepared by a PhD student, was tabled about the Forum regarding genuine participation and working relationships for positive change. NMHCCF will be responding to the report and its inaccuracies.
 - The work of the Network Chair in the area of Borderline Personality Disorder was fully supported by the Forum. NMHCCF will write to The Hon. Nicola Roxon MP re-affirming their support for this issue.
 - The national scoping project on the establishment of a peak consumer organisation is well underway. NMHCCF will be expressing the view that, until each state and territory are prepared to properly fund consumer organisations in their jurisdictions, they are not serious about a national organisation. There is an organisational structure being established in WA.

In closing, Mr Hardwick reported that the NMHCCF two day meeting is extremely busy. The agenda is largely devoted to work of the Forum. There is no time available to speak verbally to the written reports that are submitted by other groups. On that basis, Ms McMahon agreed to prepare a more comprehensive report of for the Forum.

12. MENTAL HEALTH COUNCIL OF AUSTRALIA (MCHA) REPORT

Mr Wayne Chamley, a Member of the MHCA Board, reported on the following activities being undertaken by the MHCA.

- MHCA has reduced the size of its Board to seven and is revising its constitution to include a sunset clause for Board Members. To date the focus has been on getting appropriate governance in place for the MHCA, which has grown over the past ten years to become an organisation now responsible for a multi-million dollar budget.
- A risk analysis has been completed directed toward enabling the MHCA to remain financially viable for one year so that the organisation can be properly wound up. The Board is also looking at investment and sponsorship strategies directed at increasing the sustainability of the MHCA.
- The MHCA is in the process of responding to the NHHRC Report. Ms Valarie Gerrand, who was recently elected to the Board, is working on a position paper

that shifts the focus from acute care and beds to community-based mental health services.

- MHCA wants to strengthen the role of its Members Policy Forum, so it becomes the strategic mechanism to inform the policy directions of the MHCA. There are, however, issues that need to be resolved for member organisations that are widely dispersed.

Under this Agenda Item Mr Chamley raised the Personal Helpers and Mentors Scheme (PHAMS) in which NGOs are being funded to employ people as personal helpers and mentors to support people with life and domestic skills. It is not limited to the public sector and some Healthscope facilities are participating in the private sector. The Chair agreed to bring PHAMS to the attention of the PMHA and the APHA.

Mrs Ruth Carson reported that the MHCA Carers Engagement Project Report was launched in October 2009 in Sydney.

Mr Hardwick reported that the MHCA National Register for Consumers and Carers was established two years ago as a resource register of people who are willing to participate on national committees and other bodies. While the long-term funding arrangements for the Register are not yet known, there will be a workshop in April for members.

Resolved (unanimous)

That the National Committee (NC) of the Private Mental Health Consumer Carer Network (Australia) [Network] requests that the Chair discuss the Australian Government Personal Helpers and Mentors Scheme (PHAMS) with the Private Mental Health Alliance and the Australian Private Hospitals Association.

Action: Ms Janne McMahon

13. RANZCP CHRONIC CONDITION SELF MANAGEMENT PROJECT

The Network has been involved with the RANZCP in a number of discussions involving the Education and Training of psychiatrists. The RANZCP has been successful in a tender process from the DoHA to develop a project on Chronic Disease Self-Management. The Chair of the Network and Dr Margaret Leggatt have been appointed as members of the Steering Committee overseeing this Project. Members of the Network have already participated in a teleconference to inform the Project in the earlier stages and an online survey was developed for further distribution to consumers, carers and psychiatrists.

Ms Adi Glancy joined the Meeting and discussed progress to date with the Project.

The views of NC Members concerning the terms Chronic, Disease, and Recovery were recorded electronically and Members participated in several role play sessions. These verbal interviews will be included with other training materials being developed for psychiatrists.

14. DISCUSSION PAPER – CONSUMER CARER ADVISORY COMMITTEES VS CONSUMER CARER CONSULTANTS

The Meeting reviewed its Discussion Paper titled, *Consumer Carer Advisory Committees Vs Consumer Carer Consultants*, and made further amendments to be more in keeping with what is intended.

Resolved (unanimous)

That the National Committee (NC) of the Private Mental Health Consumer Carer Network (Australia) [Network] endorses the Discussion Paper titled, Consumer Carer Advisory Committees Vs Consumer Carer Consultants, and requests the final version be included on the Network's website.

Action: Ms Janne McMahon/Mr Phillip Taylor

15. POLICIES OF THE NETWORK

The Meeting noted that the Network has endorsed a policy on smoking in private hospital settings and one on the selection process for consumer and carer state committee members.

The Meeting then discussed and, where necessary, amended the policy documents, prepared by the Deputy Chair, Ms Kim Werner, which had been circulated with the agenda and papers for this Meeting. Those documents included protocols for media and public statements, policies on consent, privacy and security of health information, and the sharing of health information.

The protocols for media and public statements and the policy on consent were endorsed.

The Meeting then discussed the issues that needed to be taken into consideration in relation to the privacy and security of health information, and the sharing of health information. Some of the issues discussed included the following.

- The right to quarantine a section of an individual's information.
- The sensitivity of the information held about a person's mental illness.
- The security of the system that is handling a person's health information.
- Medicare and the Pharmaceutical Benefits Schedule should remain unlinked databases.
- The security of the code a consumer uses to access their information.
- Consumers and carers need to recognise that when the right not to share information is exercised then they must take responsibility for not receiving complete treatment.

Ms Werner reported that remaining areas that have been identified for further development of Network policies included the following.

- Seclusion and restraint
- Employment, disability and mental health
- Consumer and carer support and participation
- Consumer and carer workforce
- Standards and accreditation
- Integration between private and public mental health services
- Best practice provision of private mental health services
- Development of a Network communication strategies

While no further areas were identified at the Meeting for specific policies to be developed, it was agreed that issues, such as online IT help services could be the subject of a discussion paper.

As part of this discussion, it was agreed that the Network website should continue to be devoted to providing information on the Network and its position on specific issues, rather than including internal working documents. It was further agreed, that the website should include information on contact details of established complaints organisations.

Resolved (unanimous)

1. *That the National Committee (NC) of the Private Mental Health Consumer Carer Network (Australia) [Network] endorses en bloc the following Network policy statements as agreed at the 21st Network Meeting held on 18/19 February 2010 in Melbourne*

- *Policy Statement 3: Medial Protocol*
- *Policy Statement 4: Public Statement Protocol*
- *Policy Statement 5: Consent*

2. *That the NC requests that the Deputy Chair further develop the draft Network Policy Statements on Health Information Privacy and Security, and on Health Information Sharing for comment and endorsement via email. To assist with further development of these Network policies, a watching brief will be kept on the work undertaken in this area by the National Mental Health Consumer Carer Forum (NMHCCF).*

Action: Ms Kim Werner

3. *That the NC requests that the issue of the privacy of carers in sharing information should be referred to the NMHCCF to consider as part of their processes.*

Action: Ms Janne McMahon/Mr Patrick Hardwick

4. *That the NC requests that the Chair develop the draft discussion paper on IT online help services.*

Action: Ms McMahon

5. *That the NC thanks Ms Kim Werner for her contribution to the development of Network policy.*

16. PHARMACEUTICAL BENEFITS SCHEDULE (PBS)

The issue of the listing of the newer atypical anti psychotic medications of the PBS has been an issues of importance to the Network for some time. The Meeting acknowledged that there are a number of diagnoses which respond well to a small amount of anti-psychotic medications, which are not listed on the PBS and are therefore not available to consumers. These include but are not limited to quasi-psychotic symptoms experience by some consumers who have major depression, Post Traumatic Stress Disorder and Borderline Personality Disorder. After discussion, it was agreed that the Chair should write to the psychiatrist on PBAC concerning the current situation.

Resolved (unanimous)

That the National Committee (NC) of the Private Mental Health Consumer Carer Network (Australia) [Network] request that the Chair draft a letter to the psychiatrist on the PBAC and raise the issue of the number of diagnoses which respond to a small amount of anti-psychotic medications which are not listed on the PBS and are therefore not available to consumers. The letter should copied to the RANZCP.

Action: Ms Janne McMahon

17. PMHA QUALITY IMPROVEMENT PROJECT

The Chair reported that, in 2009, an offer from the administrator of an anonymous donor of financial support was made toward work that the PMHA might undertake to improve mental health outcomes for consumers within the context of the mental health services that are provided by private hospital-based psychiatric services (Hospitals) and psychiatrists in private practice. The intention is for the funding available to be used to help achieve that goal by making better use of the mechanism of the PMHA and its Centralised Data Management Service (CDMS). The funding will be something of the order of \$250,000 that may be made available before June 2010. It is proposed that there will be three main areas of focus to be undertaken via this Project. These are:

1. Implementation of Consumer Perceptions of Care Measure (CPoC)

This first activity involves the implementation of a standardised measure of CPoC in all private hospital-based psychiatric services across Australia. This is the component missing from the outcomes data that is currently collected and reported by the PMHA's CDMS, under the PMHA's *National Model for the Collection and Analysis of a Minimum Data Set with Outcome Measures*. Collection of this measure will be a critical part of the quality assurance processes that operate in private hospitals to improve patient care.

2. Outcome Measures in Private Psychiatry Practice

Work on this second activity will establish a research network of psychiatrists using outcome measures within the context of their private psychiatry practice. This would be an important first step toward demonstrating how outcome data can be used in private psychiatry practice to better involve consumers and improve outcomes of care.

3. Internet Access to the PMHA's CDMS

This third activity involves a scoping exercise to determine the requirements for a model Agreement that would enable appropriate and secure internet-based access for participating stakeholders to the data currently held by the PMHA's CDMS. Internet-based access would not only streamline the provision of CDMS Standard Quarterly Reports, but also greatly enhance the capacity of the CDMS data to be used for clinical purposes to improve patient care.

4. Borderline Personality Disorder

This activity involves preliminary work to scope what models of care are currently being used for people with a BPD diagnosis. This would include information such as diagnosis of BPD, number of people being treated, types of treatment being used, involvement of other health professionals and any difficulties that might have been encountered. Such an exercise would provide information on what can currently be expected at each stage of the clinical care pathway and help to determine what might be required for the more in-depth work that would be necessary to establish a consistent approach for treatment.

Ms McMahon explained that it is required that the Project Brief be endorsed by the PMHA prior to presentation to the Administrator with all parties to the PMHA being in agreement with both the project focus and projected outcomes.

After discussion, it was agreed that the NC would provide a resolution of support for the Project.

Resolved (unanimous)

That the National Committee (NC) of the Private Mental Health Consumer Carer Network (Australia) [Network] endorses the PMHA Quality Improvement Project.

Action: Ms Janne McMahon

18. NEXT MEETING

The next face-to-face meeting of the Network will be held as follows.

Twenty Second (22nd) Network NC Meeting
Monday, 30 and Tuesday, 31 August 2010
RANZCP Headquarters
309 La Trobe Street
Melbourne, Victoria