



**Private Mental Health
Consumer Carer Network (Australia)**
engage, empower, enable choice in private mental health

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THIRTY SECOND MEETING
PRIVATE MENTAL HEALTH CONSUMER CARE NETWORK (AUSTRALIA)
NATIONAL COMMITTEE

**MONDAY, 28 AND TUESDAY 29
SEPTEMBER 2015**

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

ENDORSED REPORT AND RESOLUTIONS

Glossary of Terms and Acronyms commonly used in this Report

ACSQHC	Australian Commission on Safety and Quality in Healthcare
AMA	Australian Medical Association
APHA	Australian Private Hospitals Association
APS	Australian Psychological Society
BPD	Borderline Personality Disorder
CDMS	PMHA's Centralised Data Management Service
Health Insurer(s)	Private Health Insurer(s) that pay benefits for psychiatric care
Hospital(s)	Private Hospital(s) that provide mental health services
MHA	Mental Health Australia
NC	National Committee of the Private Mental Health Consumer Carer Network (Australia)
Network	Private Mental Health Consumer Carer Network (Australia)
NMHC	National Mental Health Commission
NMHCCF or Forum	National Mental Health Consumer Carer Forum
PHA	Private Healthcare Australia
PMHA	Private Mental Health Alliance
RANZCP	The Royal Australian and New Zealand College of Psychiatrists

1 **1. OPENING AND WELCOME**

2 The Chair of the Private Mental Health Consumer Carer Network (Australia) [the
3 Network or PMHCCN], Ms Janne McMahon OAM, opened the Thirty Second (32nd)
4 Meeting of the Network's National Committee (NC) at 9:30 AM on Monday 28
5 September 2015 (the Meeting). The Meeting was held over two days 28/29 September
6 2015, at the headquarters of the Royal Australian and New Zealand College of
7 Psychiatrists (RANZCP), 309 La Trobe Street, Melbourne, Victoria.

8 **1.1 Present**

9 The following representatives attended

- 10 1. Ms Janne McMahon OAM Network Chair
- 11 2. Mr Patrick Hardwick Network Deputy Chair
12 Network Coordinator Western Australia
- 13 3. Mr Evan Bichara Network Multicultural Adviser
- 14 4. Mr Norm Wotherspoon Network Coordinator Queensland
- 15 5. Ms Simone Allan Network Coordinator New South Wales (Day 1)
- 16 6. Ms Judy Bentley Network Coordinator Australian Capital Territory
- 17 7. Professor Sharon Lawn Network Coordinator South Australia
- 18 8. Mr Darren Jiggins Network Coordinator Tasmania
- 19 9. Mr Phillip Taylor Minutes Secretary
20 Director, Private Mental Health Alliance (PMHA)

21 **1.2 Observers**

- 22 1. Dr Bill Pring Alternate for Mr Phillip Plummer

23 **1.3 Apologies**

- 24 1. Mr Philip Plummer PMHA Independent Chair
25 2. Ms De Backman–Hoyle Network Coordinator Victoria (Vic)
26 3. Ms Simone Allan Day 2

27 **1.4 Changes in Representation and related matters**

28 In opening the Meeting, the Chair offered a vote of thanks to Ms Kim Werner, who
29 recently resigned from the position of Network Governance and Policy Officer to tend
30 to family responsibilities. The position has been held in abeyance, as Kim may wish
31 to return at a later stage.

32 By acclamation, the NC also congratulated Sharon Lawn on her appointment as a full
33 Professor at Flinders University.

34 **1.5 2015 TheMHS Award**

35 The Network has received a most auspicious award at The Mental Health Services
36 (TheMHS) Learning Network Conference 2015 held in Canberra from 25 to 28
37 August. The Award was presented by The Hon Dr Kay Patterson, National Mental
38 Health Commissioner. Ms McMahon reported that the award was within the
39 'Consumer Led' category and the notation read, *Significant and sustained consumer*
40 *and carer advocacy*. This has special significance for the Network in that consumer
41 led services are quite prominent in Australia and New Zealand and to be judged the
42 winner in this category is an outstanding achievement. Congratulations has gone to
43 the Network team that made this award possible.

44 **2. REPORT OF LAST MEETING**

45 A copy of the endorsed report of the Thirty First (31st) meeting of the Network's NC,
46 held on 12/13 March 2015 in Canberra, was noted. The Report has been posted on
47 the Network's website and electronic copies have been provided to the PMHA and the
48 RANZCP

49 **3. PROGRESS REPORT AND MATTERS ARISING**

50 The NC updated the following Table of Progress.

TABLE OF PROGRESS			
MEETING	ACTIONS ARISING FROM PREVIOUS NC MEETINGS	RESPONSIBILITY	STATUS
25 th NC	Invite representative of ACSQHC to appropriate meeting	Ms McMahon	Pending
26 th NC	Review, <i>Network Policy 12: Training and skills development for consumer and carer representatives</i> , to focus on skills development	Ms McMahon/Mr Wotherspoon	Pending
ITEM #	ACTIONS ARISING FROM THE LAST (29 TH) NC MEETING	RESPONSIBILITY	STATUS
	Report of the 30th Network NC Meeting		
	Draft Report of 30th Meeting	Mr Taylor	Done
	Circulate Draft Report to NC for comment/correction	Mr Taylor	Done
	Prepare final for endorsement via email	Mr Taylor	Done
	Agenda Item 31st NC Meeting	Mr Taylor	Done
7	NETWORK WORK PLAN 2013-15		
	Seek Meetings with the following organisations		
	▪ Australian College of Mental Health Nurses	Ms McMahon/Mr Hardwick/Ms Werner	Pending
	▪ Carers Australia	Ms McMahon/Mr Hardwick/Ms Werner	Pending
	▪ Mental Health in Multicultural Australia	Ms McMahon/Mr Hardwick/Ms Werner	Pending
8	NETWORK MEMBERSHIP OFFICER REPORT		
	Develop a promotional Network email aimed at attracting new Members	Mr Wotherspoon	Done
	Discuss corporate Network membership and sponsorship at 31 st meeting	NC	Pending
12	DOCTOR/PATIENT CONFIDENTIALITY		
	Convene teleconference with: Drs. Gary Galambos, (RANZCP) Prof Jeffrey Looi, (PMHA) Dr Caroline Johnson (RACGP), and Mr Harry Lovelock (APS) and Network Executive Officer	Ms McMahon	Pending
13	PATIENT CENTRED CARE		
	Develop and discussion paper on Patient Centred Care	Ms Mc Mahon/NC	Done

51

52

53

ITEM #	ACTIONS ARISING FROM THE LAST (29 TH) NC MEETING (continued)	RESPONSIBILITY	STATUS
14	CONSUMER CARER ADVISORY COMMITTEE SURVEY		
	Write to Hospital Corporate Groups concerning consumer carer engagement	Ms McMahon	Done
	Email Hospital CEOs to scope current situation at facility level	Ms McMahon/Mr Taylor	Done
16	ADVANCE DIRECTIVES		
	Revise External Policy No. 3 – Advance Directives and develop template as an addendum to the Policy	Ms McMahon/A/P Sharon Lawn	Done
17.1	Publication of key issues emerging from the BPD Surveys		
14	CONSUMER CARER ADVISORY COMMITTEE SURVEY		
	Write to Hospital Corporate Groups concerning consumer carer engagement	Ms McMahon	Done
	Email Hospital CEOs to scope current situation at facility level	Ms McMahon/Mr Taylor	Done
16	ADVANCE DIRECTIVES		
	Revise External Policy No. 3 – Advance Directives and develop template as an addendum to the Policy	Ms McMahon/A/P Sharon Lawn	Done
17.1	Publication of key issues emerging from the BPD Surveys		
	Seek publication	A/P Lawn	Done
18	CONSUMER CARER WORKERS AND SELF CARE		
	Develop into an on-line Resource	Ms McMahon	Done
19	CHILDHOOD TRAUMA AND PARENTS AS CARERS		
	Contact South Pacific Private Hospital for assistance in development of short paper	A/P Lawn/Ms McMahon/Ms Werner	Done
	Develop short paper on key issues for discussion with 31 st NC Meeting	NC	Pending
	Discuss paper with Dr Bill Pring and Dr Jeffrey Looi after discussion with NC	Ms McMahon	
23	PROPOSED ONLINE RESOURCES FOR ORIENTATION FOR CONSUMER AND CARER WORKERS		
	Ascertain if national learning and assessment resources for the Certificate IV in Mental Health Peer Work CHC42912 can be used by the Network, as online orientation resources.	Mr Hardwick /Mr Wotherspoon	Pending
	Approach APHA re proposal to develop online PDF resources for the orientation of consumers and carers who are engaged by private psychiatric hospitals	Ms McMahon	Done
26	NEXT MEETING		
	Organise 31st Network NC Meeting for 12/13 March 2015 in Canberra	Ms McMahon	Done
	Develop and circulate Agenda and Papers for 31st Meeting	NC Executive/Mr Taylor	Done

54

Ms McMahon spoke briefly about the following outstanding matters.

55 3.1 Australian Commission on Safety and Quality in Health Care (ACSQHC) 56 Invitation

57 Ms McMahon will continue to pursue an invitation for an ACSQHC representative to
58 attend an NC meeting. This is particularly relevant now that ACSQHC have released
59 the [Consultation Draft Version 2 of the National Safety and Quality Health Service](#)
60 [\(NSQHS\) Standards](#). Submissions close on 30 October 2015 and ACSQHC is
61 encouraging submissions from anyone involved in health care including individual
62 submissions, or that of constituencies.

63 Ms McMahon has accepted an invitation to participate on a steering committee looking
64 at the review and has noted reports that the National Standards for Mental Health
65 Services (NSMHS) will be incorporated into the NSQHS Standards. Dr Bill Pring, as
66 the PMHA Representative on the Australian Governments Safety and Quality
67 Partnership Standing Committee (SQPSC), reported that it is felt the NSMHS can be
68 incorporated into the NSQHS Standards. It will depend on how this is done as to
69 whether it will be satisfactory or not. Ms McMahon will monitor developments closely
70 and keep NC Members informed. The Network will also make a submission to the
71 review.

72 **3.2 Carers Australia**

73 Ms McMahon will pursue a meeting with Carers Australia during one of her next visits
74 to Canberra.

75 **3.3 Doctor/Patient Confidentiality**

76 A teleconference to discuss the increasing trend toward third parties seeking to gain
77 access to detailed and potentially sensitive personal information contained in a
78 patient's record is yet to be convened with representatives from the following
79 organisations.

- 80 ▪ Network
- 81 ▪ RANZCP
- 82 ▪ Australian Medical Association (AMA) Psychiatrists Group (AMAPG)
- 83 ▪ Royal Australian College of General practitioners (RACGP)
- 84 ▪ Australian Psychological Society (APS)

85 In his capacity as member of the AMAPG, Dr Pring reported that there is now a
86 process underway within the RANZCP to address this issue led by Dr Peter Jenkins.
87 AMAPG has offered an observer to attend any official negotiations undertaken by the
88 RANZCP. After discussion, Ms McMahon agreed to follow up with Dr Jenkins,
89 rather than convene a teleconference.

90 **3.4 Childhood Trauma and Parents as Carers**

91 Ms McMahon is waiting to hear back from South Pacific Private Hospital for
92 assistance in development of short paper on this issue.

93 **4. RISK MANAGEMENT PLAN**

94 Ms McMahon reported that the services funding agreement between the AMA, the
95 Australian Private Hospitals Association (APHA), Private Healthcare Australia (PHA)
96 and the Commonwealth Department of Health has been signed to support the activities
97 of the Network, the PMHA and its CDMS, from 1 July 2015 to 30 June 2016. Mr Phillip
98 Taylor reported that, at this stage, the Commonwealth Department of Health only has
99 Ministerial approval to offer extensions to existing contracts within the 2015–16
100 Financial Year (FY) funding envelop. Decisions relating to funding beyond 30 June
101 2016 are to be considered as part of broader mental health reform process that is
102 underway. It is anticipated that more will be known about the Commonwealth's
103 position later this year.

104 Ms McMahon reported that the RANZCP has paid in full its donation to the Network
105 for the following FYs.

- 106 1. FY 2015–16 \$17,755
- 107 2. FY 2016–17 \$18,287
- 108 3. FY 2017–18 \$18,836

109 APS has confirmed its donation of \$5,000 for FY 2015–16.

110 The Meeting then reviewed and updated the Network’s Risk Management Plan. A
111 new column titled “Mitigation” will be added.

112 5. NETWORK BUDGET UPDATE

113 The Chair reported on the summary statement of income and expenditure for FY 1
114 July 2015 to 30 June 2016, prepared for the Network by the AMA. The Network
115 Budget is tracking well.

116 6. INCORPORATION OF THE NETWORK

117 The Chair reported on the correspondence from the AMA Secretary General, Ms Anne
118 Trimmer, strongly recommending that the Network seek to be incorporated by the end
119 of the current AMA Agreement for Services 2015–16, which expires on 30 June 2016.
120 After responding in writing, Ms McMahon subsequently met on 14 August 2015 with
121 the PMHA Independent Chair, Mr Phillip Plummer, to discuss incorporation in more
122 detail. Mr Plummer was very helpful and offered his assistance not only in the setup
123 of any future accounting systems, but any other services he might be able to provide
124 in his capacity as a chartered accountant

125 On 26 August 2015, Ms McMahon and Ms Werner met with Ms Trimmer at the
126 offices of the Federal AMA in Canberra to explore incorporation of the Network
127 further. Issues discussed included the following.

- 128 1) Incorporated associations versus companies limited by guarantee
- 129 2) Constitution
- 130 3) Membership and how the Network deals with its Members.
- 131 4) How the Board can be configured and appointed
- 132 5) Terms of appointment
- 133 6) The status of Network State Advisory Forums
- 134 7) Gift deductibility, or charitable status
- 135 8) Ongoing funding through the AMA Agreement for services

136 Ms Trimmer has offered to peruse the necessary draft documents of incorporation prior
137 to actioning or registering of any entity.

138 The Meeting then discussed the incorporation of the Network in detail. During this
139 substantive discussion, NC Members with an understanding of how to establish
140 incorporated bodies and the responsibilities and reporting requirements of company
141 directors, shared their experiences. The Meeting also referred to and worked through
142 the following documents during the course of deliberations.

- 143 *How to Incorporate: A Guide to the Associations Incorporation Act 1985*
- 144 *Fact Sheet 1 Thinking of joining the Committee*
- 145 *Fact Sheet 2 Your relationship to the Association*
- 146 *Fact Sheet 3 The association’s money*
- 147 *Fact Sheet 4 The legal environment*
- 148 *Fact Sheet 5 Your legal liability as a board member*
- 149 *Fact Sheet 6 Disputes in the association*
- 150 *Fact Sheet 7 Running the association*
- 151 *Good Governance check list*

152 *Network Operating Guidelines 2015–16*

153 Some of the considerations canvassed during discussion are briefly set out below.

- 154 ▪ The risks and benefits of incorporation.
- 155 ▪ Incorporation as an association versus a company limited by guarantee.
- 156 ▪ Rules of association and incorporation in South Australia.
- 157 ▪ Constitution of the Board and possible processes for appointment of Board
158 members that will reflect the current integrity of the Network's NC and strength
159 of its current executive structure.
- 160 ▪ Responsibilities of Board members, including declarations of conflicts of
161 interest.
- 162 ▪ Board member training as soon as possible after incorporation.
- 163 ▪ Indemnity and Insurances for Directors and Officers.
- 164 ▪ Intellectual Property rights.
- 165 ▪ Financial record keeping and auditing requirements, including acceptance of Mr
166 Plummer's offer and his inclusion on the Network Board, most likely as
167 Treasurer, to assist with probity and financial matters.
- 168 ▪ Annual General Meetings and Annual Reports. The NC noted that the Network
169 has been providing a comprehensive form of Annual Report for many years in
170 accordance with the reporting requirements of the AMA services agreements.
- 171 ▪ The use of the Network's Operating Guidelines in the development of a
172 Network constitution. The Meeting compared the Operating Guidelines to
173 constitution requirements noting the Guidelines already include many of the
174 elements required.
- 175 ▪ The importance of discussing the incorporation of the Network with the
176 representatives of the Network's other funding organisations (APHA, PHA and
177 the Commonwealth) at the 16 October 2015 meeting of the PMHA.
- 178 ▪ Related discussions between the AMA Secretary General and the CEOs of the
179 APHA and PHA concerning the feasibility of incorporating the PMHA, at some
180 stage in the future.
- 181 ▪ The need to obtain legal assistance, firstly on what sort of incorporated structure
182 will best suit the Network and then secondly to assist in the drafting of the
183 Network's constitution and rules. After that work is completed, Ms Trimmer
184 should review the documents.
- 185 ▪ Charitable status.

186 At the end of this discussion there was consensus that Ms McMahon should continue
187 to progress the incorporation of the Network with the assistance of the NC following
188 the 16 October 2015 PMHA meeting.

189 **RESOLVED (Chair) carried without dissent**

190 1. *That the NC of the Network requests the Chair progress incorporation of the*
191 *Network following the next meeting of the PMHA.*

192 **Action: Ms McMahon**

193 2. *That the National Committee (NC) of the Private Mental Health Consumer Carer*
194 *Network (Australia) [Network] requests that the correspondence from the AMA*
195 *Secretary General concerning incorporation of the Network be forwarded to the*
196 *Private Mental Health Alliance as additional information for the Network report*
197 *to the 16 October 2015 meeting of the PMHA.*

198 **Action: Mr Taylor**

199 3. *That the NC of the Network accepts Mr Philip Plummer's offer of assistance in the*
200 *setup of any future accounting systems for an incorporated Network and any other*
201 *services Philip might be able to provide in his capacity as a chartered accountant.*

202 **Action: Ms McMahon**

203 **7. NETWORK ADVISORY FORUM REPORTS**

204 In accordance with its Terms of Reference, the Network has established a State Advisory
205 Forum (SAF or Forum) in all jurisdictions, except the Northern Territory. The Forums
206 bring together consumers and carers who use private psychiatric services. The primary
207 purpose of the SAFs is to provide the Network's NC with consumer and carer
208 perspectives on issues of national significance. They also provide an opportunity for
209 Network Coordinators to discuss Network activities with Forum participants.

210 The Chair invited the Network's Coordinators to report on SAF activities in each of their
211 respective jurisdictions.

212 **7.1 Queensland (Qld)**

213 The Meeting noted a copy of the report on the Network's Qld SAF held on 17 March
214 2015 at Greenslopes Private Hospital. The Network's Qld Coordinator, Mr Norm
215 Wotherspoon, provided a briefing on the Forum, which included discussion of the
216 following issues.

- 217 ▪ Dealing with patient complaints – how can the process be improved?
- 218 ▪ Smoking bans in private psychiatric facilities – are they fair?
- 219 ▪ How can we deal better with discrimination and stigma?
- 220 ▪ Inadequacy of services available to many people, including the limit of five
221 sessions with a psychologist for a young person experiencing traumatic

222 problems, or for adults suffering stress, depression or other mental health
223 disorders.

224 ▪ Report on Network activities

225 ▪ Issues arising from Private Hospitals Association of Queensland Psychiatric
226 Committee Meetings. This included concerns regarding the tightening of
227 health fund benefits in relation to mental health.

228 Norm also briefed the Meeting on the following other relevant activities.

- 229 ▪ Post–Traumatic Stress Disorder (PTSD) Congress Brisbane in September
- 230 ▪ Liaison with the Commonwealth Department of Veterans’ Affairs
- 231 ▪ Speech for Toastmasters on Mental health
- 232 ▪ Belmont Hospital Art Exhibition
- 233 ▪ Meet and Greet with patients at Belmont Private Hospital
- 234 ▪ Forum at Sunshine Coast Private Hospital
- 235 ▪ Sunshine Coast Private Hospital Art Exhibition
- 236 ▪ Resources for consumers and carers on available services.
- 237 ▪ Stigma and discrimination

238 The next Network Qld SAF will be held on Tuesday, 6 October 2015 at Belmont
239 Private Hospital in Carina. The agenda includes a guest speaker from Stepping Stone
240 Clubhouse Coorparoo.

241 Norm then discussed the need to provide information for consumers and their carers on
242 available services, particularly those services that can be accessed after discharge from
243 hospital. There was a range of suggestions including:

- 244 ▪ requesting private hospitals to provide information on the services they refer
245 their patients to;
- 246 ▪ a jurisdiction specific survey to gather information on available state–based
247 services; and
- 248 ▪ review of the Lifeline resources library.

249 Norm thanked the NC for these suggestions and agreed to begin initiating some work
250 in Qld first in consultation with Ms McMahon.

251 The Chair thanked Norm for his excellent work in Qld.

252 **7.2 New South Wales (NSW)**

253 The Network’s NSW Coordinator, Ms Simone Allan, convened a SAF for NSW on
254 20 July 2015 at St Vincent’s Hospital in Sydney. The Forum focussed on determining
255 short–term goals for the NSW Forum including increasing representation for private
256 hospitals. Simone is also working on succession planning.

257 During her report, Simone mentioned the research commissioned by South Pacific
258 Private Hospital that highlights some important trends in the nature of recovery from
259 alcohol and drug addiction. The final report titled, [*Australian Life in Recovery Survey*](#),

260 should encourage greater support and awareness of the value of private mental health in
261 Australia.

262 The following meeting schedule for NSW SAFs has been agreed.

Date	Venue	Topic/Guest Speaker
16 th October 2015	L6 80 William Street Sydney	Lucy Brogden
5 th February 2016	Phone Skype	TBA
13 th May 2016	St John of God Richmond	TBA
12 th August 2016	Phone Skype	Spreadsheet
11 th November 2016	South Pacific Private Hospital	TBA

263 Ms McMahon will attend the 16 October Forum.

264 **7.3 Australian Capital Territory (ACT)**

265 Ms Judy Bentley reported that she is working with Ms McMahon toward holding an
266 ACT SAF, now that there are several new ACT Network Members.

267 **7.4 South Australia (SA)**

268 The Meeting noted a copy of the agenda and report on the SA SAF held on 26 March
269 2015 at the Adelaide Clinic in Adelaide. The Network's SA Coordinator, Professor
270 Lawn, provided a briefing on issues for SA including the following.

- 271 ▪ Waiting times for private beds in SA and other states' experiences
- 272 ▪ Older people and mental health
- 273 ▪ National Disability Insurance Scheme and Partners in Recovery
- 274 ▪ Peer Workforce Modules
- 275 ▪ National Carer Project
- 276 ▪ Online Resources
- 277 ▪ Membership
- 278 ▪ Scamming activity that exploits vulnerable people

279 After discussion, Ms McMahon agreed to include a factual article in an appropriate
280 edition of the Network's e-News Alert on scamming activity, which also needs to
281 have details of the Credit Ombudsman included. A disclaimer will also be included.

282 Under this agenda item, there was a brief discussion of domestic violence. There was
283 consensus that early intervention is critical in approaching this problem.

284 Waiting times for private beds in SA is an ongoing issue. After discussion, it was
285 agreed that the Chair write to Ramsay Healthcare SA Mental Health Services Chief
286 Executive Officer Ms Carol Turnbull to clarify the situation.

287 At the end of her report, Professor Lawn circulated via email a copy of the article she
288 had co authored titled, *The Lived Experience of Caring for an Australian Military*
289 *Veteran with Posttraumatic Stress Disorder*.

290 **RESOLVED (Chair) carried without dissent**

291 1. *That the National Committee (NC) of the Private Mental Health Consumer Carer*
292 *Network (Australia) [Network] requests the Chair write to Ms Carol Turnbull to*
293 *clarify the following: waiting time for admissions, nurse specialising, access to*
294 *other hospitals and whether someone with specific diagnoses eg paranoid*
295 *schizophrenia .*

296 **Action: Janne McMahon**

297 2. *That the NC of the Network requests Mr Norm Wotherspoon access Lifeline*
298 *resources library with a view to review content.*

299 **Action: Norm Wotherspoon**

300 3. *That the NC of the Network requests the Chair prepare an article for the eNews*
301 *Alert regarding scamming activities and vulnerable people.*

302 **Action: Janne McMahon**

303 **7.5 Western Australia (WA)**

304 In his capacity as the Network Coordinator for WA, Mr Patrick Hardwick reported on
305 the meeting between representatives from the Marian Centre, Abbotsford Private
306 Hospital, Hollywood Private Hospital and Joondalup Health Campus Mental health
307 Unit. All were keen to attend a WA SAF in November. Patrick is arranging for the
308 SAF to be held at Abbotsford Private Hospital.

309 **7.6 Tasmania (Tas)**

310 The Meeting noted a copy of the report provided the Network's Tas Coordinator, Mr
311 Darren Jiggins, on activity undertaken in that state, which includes the following.

312 ■ Promotion of the Network through an article in the local newsletters of the
313 Tasmanian consumer organisation Flourish, and carer organisation Mental
314 Health Carers Tas (MHCT). The article encouraged people to join the
315 Network.

316 ■ A successful tour of the following private psychiatric facilities and other
317 relevant organisations across Tasmania with Ms McMahon.

- 318 (1) The Hobart Clinic
319 (2) St Helens Private Hospital.
320 (3) MHC
321 (4) Flourish
322 (5) Calvary Healthcare
323 (6) North West Private Hospital.
324 (7) Carers Tasmania

325 The meetings were productive at every level. Hospital staff were particularly
326 interested in supports the Network might be able to offer, to assist facilities
327 with complying with the mandatory National Safety and Quality Health

328 Service (NSQHS) Standards *Standard 2 Partnering with Consumers*.
329 Standard 2 is intended to create a health service that is responsive to patient,
330 carer and consumer input and requirements. Standard 2 provides the
331 framework for active partnership with consumers by health service
332 organisations and covers consumer partnership in service planning, in
333 designing care, and in service measurement and evaluation. Hospitals staff
334 responsible for consumer/carer engagement asked many questions and were
335 pleased with the materials provided for them, including the Network Template
336 on Standard 2. Ms McMahon was also able to offer her services at the national
337 level, while Mr Jiggins volunteered to meet and support any state
338 representatives.

339 ▪ Both Flourish and MHCT have started promoting the Network's online
340 training resources and feedback has been positive. The resources were also
341 received with interest in a meeting with the Director of Mental Health, Alcohol
342 and Drug and Forensic Health Services in Tasmania.

343 ▪ The sole consumer representative from St Helens Private Hospital is pleased
344 to link in with the Network and Darren is looking forward to building any
345 supports that he can offer.

346 The next Tas SAF will be held in October.

347 **8. NETWORK MULTICULTURAL ADVISER REPORT**

348 People who access private mental health services come from a variety of backgrounds
349 including culturally and linguistically diverse (CALD). To ensure the Network
350 encompasses the issues and needs of these consumers and their carers, Mr Evan
351 Bichara (previously the Network's Victorian Coordinator) was appointed as the
352 Network's Multi-cultural advisor in 2014. Evan has a high level of expertise and
353 experience with multicultural mental health.

354 At the last meeting of the Network, Evan provided a detailed plan of how multicultural
355 issues could be better addressed within the private sector. In discussions with the
356 Network Chair, it was agreed that an external Network policy statement, might be the
357 best way to begin addressing this issue. The development of the draft policy has been
358 the Network task undertaken since the last NC meeting in relation to this issue. Evan
359 briefed the Meeting on the policy and other activities including the presentations he
360 had given at TheMHS Conference, educational videos he has been involved in
361 developing and activity at the national level representing and mentoring Australia's
362 multicultural mental health consumer and carers.

363 Ms McMahon congratulated Evan on his tireless efforts.

364 Mr Bichara asked the other Network Coordinators to forward any ideas on how he
365 might assist the Network's Coordinators with multicultural issues.

366 **8.1 Network Policy Statement 14 Multicultural Private Mental Health**

367 The Meeting then considered and amended a copy of the draft *Network Policy*
368 *Statement 14 Multicultural Private Mental Health*, prepared by Evan for the private
369 sector.

370 **RESOLVED (Chair) carried without dissent**

371 1. *That the National Committee (NC) of the Private Mental Health Consumer Carer*
372 *Network (Australia) [Network] requests the Network Chair circulate the final*
373 *version of the Network Policy Statement 14 Multicultural Private Mental Health*
374 *for any further amendment and then endorsement out-of-session.*

375 **Action: Ms McMahon**

376 9. NETWORK MEMBERSHIP OFFICER REPORT

377 In his capacity as the Network's Membership Officer, Mr Wotherspoon briefed the
378 meeting on current Membership. The following breakdown of Network Members
379 currently registered on the Network database (PMHCCNdb) was noted.

Location	Network Members
Queensland	319
New South Wales	182
Australian Capital Territory	26
Victoria	173
Tasmania	40
South Australia	80
Western Australia	80
Northern Territory	2
NZ	3
USA	1
Malaysia	1
Not Provided	6
Total	913

380 In considering the creation of a category for corporate or organisational Network
381 membership, it was felt that further discussion should be postponed until after the
382 negotiations concerning Network incorporation have been completed.

383 At the end of this agenda item, it was noted that Network brochures are in short supply.

384 **RESOLVED (Chair) carried without dissent**

385 1. *That the National Committee (NC) of the Private Mental Health Consumer Carer*
386 *Network (Australia) [Network] requests the Network Chair arrange to supply*

387 *Network Coordinators with Network brochures, which include membership*
388 *application form.*

389 **Action: Ms McMahon**

390 **10. EMERGING ISSUES**

391 The Chair advised that there are a number of emerging issues that have implications for
392 the private sector. Ms McMahon invited Dr Bill Pring to discuss these with NC
393 members. A brief overview of the discussion is set out below.

- 394 ■ *The private sectors views on the report and recommendations of the National*
395 *Mental Health Commission’s review of mental health programmes and services*
396 *across Australia.*

397 The PMHA has advised the Commonwealth that, in suggesting major reform
398 plans for mental health, there has been a call for more data measurement in
399 mental health services. There is reliable data available from the PMHA’s
400 CDMS comprehensive outcomes data collection, which has been in operation
401 since 2002. Information derived from that collection shows that the private
402 sector is working with high levels of clinical acuity and complexity for
403 consumers on admission. In addition, the data shows excellent outcomes and
404 high levels of patient satisfaction. Mental Health reforms in the last ten years
405 have focussed on Primary Mental Health funding and Prevention strategies.
406 This has led to very successful and much greater case identification, but there
407 has been no similar focus on enhancing the capability of treatment services to
408 meet the increased demand. It is time to enhance treatment capability, and the
409 private sector, being very cost effective, would be a good place to start.

410 It is also important to recognise in the reform process the important role of
411 Clinical Governance and referral mechanisms in the provision of mental health
412 treatment. There are a large number of flexibly organised multidisciplinary
413 teams working with private psychiatrists in the community already. It would be
414 useful to include these teams in overall mental health planning, preferably
415 enhanced to treat more people.

- 416 ■ *Medicare Benefits Schedule (MBS) Review.*

417 All MBS Items will be reviewed, with a view to increased value from services
418 and a reduction in the number of MBS Items. MBS Items will be reviewed in
419 terms of obsolescence, indication creep, inappropriate frequency and intensity,
420 pricing failure, and consideration of bundling and unbundling MBS Items. A
421 focus of the Review appears to be on reducing volume of services on the
422 assumption that increasing volume is implicitly undesirable and unsustainable,
423 without any clear evidence-based justification. The Review appears to
424 specifically exclude the consideration of new MBS items. In this context, it is
425 difficult to understand how a review intended to reform the MBS can totally
426 exclude consideration of new items, with the apparent consequence that items
427 can only be re-defined or removed.

- 428 ▪ *The Australian Government's changes to new Medicare Safety Net announced*
429 *in the 2014–15 Budget.*

430 These changes will take effect from 1 January 2016 and have implications for
431 MBS Item 316, whereby only wealthier patients will be able to afford this
432 treatment after 50 sessions. This change effectively denies access to a
433 vulnerable group of patients, many of whom have suffered abuse or have
434 histories of complex trauma that require treatment with Item 316.

435 Toward the end of this agenda item, Dr Pring also discussed some of the anomalies in
436 the way data was presented in the recent ABC Four Corners report on wastage in the
437 Australian health care system, which can be viewed at:
438 <http://www.abc.net.au/4corners/stories/2015/09/28/4318883.htm>

439 Dr Pring also felt that euthanasia and its future implications for mental health was an
440 emergent issue recently highlighted by an SBS program titled, Allow Me To Die,
441 which can be viewed at: <http://www.sbs.com.au/news/dateline/story/allow-me-die>.
442 The program deals with choosing to die when you do not have a terminal illness. This
443 powerful special gets rare access to film the journeys of two people in Belgium –
444 going behind the most liberal euthanasia laws in the world.

445 Ms McMahon thanked Dr Pring for a most enlightening discussion.

446 **11. NATIONAL MENTAL HEALTH CONSUMER CARER FORUM AND**
447 **MENTAL HEALTH AUSTRALIA REPORTS**

448 Mr Hardwick represents the Network on both the National Mental Health Consumer
449 Care Forum (NMHCCF or Forum) and the Board of Mental Health Australia (MHA).

450 **11.1 NMHCCF**

451 The Meeting firstly discussed the need for clarity around the appointment processes
452 for the NMHCCF and the Forum's relationships with the consumers and carers that
453 make up the National Consumer Carer Register. Mr Hardwick noted these issues and
454 Ms McMahon agreed to write to the Forum Chair.

455 **RESOLVED (Chair) carried without dissent**

- 456 1. *That the National Committee (NC) of the Private Mental Health Consumer Carer*
457 *Network (Australia) [Network] requests that the Chair write to the Chair of the*
458 *National Mental Health Consumer Carer Forum with the need for clarity around*
459 *the appointment processes for the NMHCCF and the Forum's relationships with*
460 *the Consumers and Carers that make up the National Consumer Carer Register.*

461 **Action: Ms McMahon**

462 Mr Hardwick then reported on the last meeting of the NMHCCF held on 10/11
463 September 2015 in Melbourne. The NC noted the following.

- 464 ▪ The CEO of the National Mental Health Commission (NMHC), Mr David
465 Butt, attended the Forum to provide an update on the work of the NMHC and

466 its 2015–16 work plan. The Memorandum of Understanding between the
467 NMHCCF and the NMHC to work together to promote and improve mental
468 health outcomes for all Australians, was renewed.

469 ▪ Marlene Krasovitsky and Donna Purcell from the Australian Human Rights
470 Commission attended the meeting to facilitate a consultation on the current
471 [Willing to Work: National Inquiry into Employment Discrimination against](#)
472 [Older Australians and Australians with Disability](#). The National Inquiry
473 examines practices, attitudes and Commonwealth laws that deny or diminish
474 equal participation in employment of older Australians and Australians with
475 disability and makes recommendations as to Commonwealth laws that should
476 be amended, or action that should be taken, to address employment
477 discrimination against older Australians and Australians with disability.
478 NMHCCF will be making a formal submission.

479 ▪ The Project Manager for [Mental Health in Multicultural Australia](#) (MHiMA),
480 Hamza Vayani, provided an update on the work of MHiMA, with a particular
481 focus on the implementation of the *Framework for Mental Health in*
482 *Multicultural Australia: Towards culturally inclusive service delivery*.

483 ▪ The new NMHCCF website, <http://nmhccf.org.au>, and its online resources
484 went live in April 2015.

485 ▪ The website [PeerForce Australia](#) has been established to assist Peer Workers
486 to navigate and share the plethora of Peer Resources available worldwide.

487 ▪ The Forum has established a working group to address issues related to use of
488 psychotropic medication with a view to drafting an advocacy brief or position
489 statement on their impact on mental health consumers and their carers.

490 ▪ Janet Meagher gave a presentation on a proposal to acknowledge the
491 contribution of specific consumers in Australia on part of the Forum's website.
492 At present, the Forum is unable to support the proposal for a range of reasons,
493 but it may be explored at some stage in the future.

494 ▪ An adviser to the Commonwealth Minister for Health, The Hon. Susan Ley
495 MP, was scheduled to attend the Forum. In preparation, the CEO of Mental
496 Health Australia (MHA), Mr Frank Quinlan, assisted the NMHCCF in
497 preparing the following key topics for discussion.

- 498 1. Peer Workforce
- 499 2. Regional and Remote areas
- 500 3. Evaluation and Monitoring
- 501 4. Primary Health Networks
- 502 5. Early warning systems

503 Unfortunately, the Ministers Adviser was a late apology.

504 ▪ NMHCCF Membership changes include appointment of Mr Dean Barton
505 Smith to represent Victorian consumers, Luella Lazzarini to represent

506 GROW and Simon Williams is the Aboriginal and Torres Strait Islander
507 Carer representative.

508 ■ NMHCCF is working on some governance issues including trial of a new
509 meeting schedule for 2016, the development of a risk management register,
510 and member reporting requirements.

511 ■ The Forum is seeking appropriate representatives to participate on a refugee
512 and asylum seeker advocacy brief working group. There are also several
513 other briefs in the pipeline.

514 ■ NMHCCF is seeking to establish an MoU with the Australia Federation of
515 Disability Organisations (ADFO).

516 The next meeting of the Forum will be held on 7/8 March 2016.

517 **11.2. MHA**

518 Mr Hardwick reported on the recent meeting of the MHA Board. Some of the main
519 issues considered by the Board are summarized below.

520 ■ Policy related to director eligibility and MHA Board composition, records
521 authority, and Board skills sets management.

522 ■ MHA has been commissioned by the Commonwealth Department of Health
523 to take on a large contract urgently.

524 ■ MHA is seeking an extension of its funding which expires at the end of this
525 year.

526 ■ The Board took reports from the MHA's key themes including policy,
527 projects, communication and consumers and carers.

528 ■ Discussion of governance issues included records management policy and
529 procedures, risk management and environmental scans etc.

530 At the end of this Agenda Item, Mr Hardwick mentioned he is also attending the
531 meetings associated with the Carer Project, which is being managed by Ms McMahan.

532 **12. PRIVATE HEALTH INSURANCE**

533 The Meeting discussed the ongoing concerns consumers and carers are reporting with
534 regard to their private health insurance. A brief summary of these concerns is set out
535 below.

536 ■ Many consumers have difficulty in accessing accurate and complete
537 information about their private health insurance policies and feel they are not
538 fully informed about the extent of exclusions in their insurance coverage for
539 psychiatric care.

- 540 ▪ It comes as a surprise for some people with private health insurance to learn that
541 their insurance does not cover psychiatric admission to a private psychiatric
542 facility. This then necessitates referral to the public system.
- 543 ▪ Some health funds do not make it clear what is not covered under their private
544 health insurance policies in terms of psychiatric care.
- 545 ▪ Some health funds do not pay a full rebate for psychiatric readmissions within
546 days of a previous admission. Most people are not aware of this limitation.
- 547 ▪ Health funds cover day admission programs, however, consumers are confused
548 as to what kind of day programs and the number of sessions are covered under
549 their health insurance policies.
- 550 ▪ Consumers are not always informed that they cannot access outreach and day
551 programs simultaneously.
- 552 ▪ Some insurance funds do not explain that their psychiatric cover is capped. For
553 example, many consumers do not realise that their health fund only covers a
554 limited number of ECT treatments per year.
- 555 ▪ Less than half of all policies currently offered by major insurers cover the cost
556 of an admission to private psychiatric hospitals.
- 557 ▪ Some insurers have recently moved psychiatric treatment from full benefits to
558 restricted benefits on some of their policies.
- 559 ▪ Consumers have limited ability to compare policies, particularly as they pertain
560 to psychiatric care.

561 At the end of this discussion, Dr Pring agreed to refer the concerns of the NC to the
562 16 October 2015 meeting of the PMHA.

563 **RESOLVED (Chair) carried without dissent**

- 564 1. *That the National Committee (NC) of the Private Mental Health Consumer Carer*
565 *Network (Australia) [Network] requests that its concerns regarding private health*
566 *insurance be referred to the Private Mental Health Alliance.*

567

Action: Dr Pring

568 The Meeting noted that a new Network member had recently brought to the attention
569 of the Private Health Insurance Ombudsman (PHIO) the information on one major
570 brokerage website concerning waiting periods for pre-existing psychiatric conditions.
571 The PHIO review of the matter agreed that the information had the potential to mislead
572 a consumer into thinking that a twelve-month waiting period applied to pre-existing
573 psychiatric conditions that required in-patient treatment. The office of the PHIO
574 requested the broker to update the information to ensure that it was clear to consumers
575 that a maximum two-month waiting period applied for in-patient psychiatric
576 treatment, even if it was a pre-existing condition. The broker actioned this request
577 and amended the information on their website to read as follows.

578 *Whether it is your first health insurance policy or you're upgrading,*
579 *you're required to serve waiting periods before you can start to claim.*
580 *All health funds have them. Note that the maximum waiting period a fund*
581 *can impose for In-hospital Psychiatry, In-Hospital Rehabilitation, and*
582 *Palliative care is 2 months. All other services will attract a 12 month*
583 *waiting period for pre-existing conditions.*

584 The NC felt that this was an excellent result.

585 **12.1 Survey of Network Members with who have private health insurance and have**
586 **experience of being admitted to a public hospital**

587 Following a request from the PMHA's health fund representatives, the Network
588 undertook a brief survey, between 20 to 27 January 2014, to elicit some information
589 from both consumers and carers about their experiences of admission to a public
590 hospital as a private patient. The survey was administered through SurveyMonkey,
591 with a link sent out to the Network's database of members via its electronic newsletter.
592 Twenty-seven people entered the survey site. Of these, 25 people proceeded to answer
593 survey questions, with some respondents being selective in which questions they
594 responded to.

595 The Meeting noted a copy of the report on the survey results prepared by Professor
596 Lawn.

597 Ms McMahon will circulate the report to the PMHA, PHA's Mental Health Committee,
598 PHIO and the AMA Psychiatrists Group.

599 **RESOLVED (Chair) carried without dissent**

600 *1. That the National Committee (NC) of the Private Mental Health Consumer Carer*
601 *Network (Australia) [Network] requests that the final report on the Survey of*
602 *Network Members with who have private health insurance and have experience of*
603 *being admitted to a public hospital, be circulated to the following.*

- 604 *▪ Private Mental Health Alliance*
605 *▪ Private Healthcare Australia's Mental Health Committee*
606 *▪ Private Health Insurance Ombudsmen*
607 *▪ AMA Psychiatrists Group*

608 **Action: Ms McMahon**

609 **13. TRAINING AND EDUCATION – ENHANCED UNDERSTANDING OF THE**
610 **NEEDS WITHIN PRIVATE PSYCHIATRIC HOSPITALS**

611 One of the first initiatives of the Network was a survey of private hospital consumer and
612 carer representatives/volunteers in terms of their training needs to undertake their
613 representational activities. The Meeting noted the copy of the last survey and its results
614 circulated with the agenda papers.

615 After discussion, NC Members agreed to advise Ms McMahon within two weeks as to
616 whether the survey should be repeated to gain some knowledge of how current training

617 and education is being undertaken.

618 **RESOLVED (Chair) carried without dissent**

619 1. *That the National Committee (NC) of the Private Mental Health Consumer Carer*
620 *Network (Australia) [Network] requests NC Members to advise the Chair by COB*
621 *Friday, 16 October 2015 as to whether the Network's Training Needs Survey*
622 *should be repeated and, if so, whether any amendments are required. If an NC*
623 *Member chooses not to respond it will be considered the Member has no objection*
624 *to the survey being repeated.*

625 **Action: NC Members**

626 **14 ON-LINE RESOURCES FOR CONSUMER AND CARER**
627 **WORKERS/ADVOCATES**

628 The 17 April, 2014 meeting of the Victorian SAF strongly supported the development
629 of an external policy on *Consumer and Carer Workers and Self Care*. This is an issue
630 that all consumer and carer advocates need to be aware of in the work they undertake.
631 Self-monitoring for stress, increased work load, insufficient support for example, are
632 fundamental if burn-out is to be avoided. *The Kit, the Advocacy we Choose to do* was
633 developed in 1998 specifically to guide consumers and carers.

634 At the 24 September 2014 NC meeting, it was agreed that rather than an external
635 policy, online resources would provide greater support for the uniqueness of the
636 private sector to both private providers and consumers and carers.

637 Since that time, five training resources have been developed as PDFs with an
638 accompanying DVD. The DVDs were funded from the Network's budget surplus and
639 undertaken by *Inspired Workforce Performers*, a well respected professional company
640 who develop these sort of products. The resources can be view on the Network's
641 website www.pmhccn.com.au Resources tab, Training Resources.

642 The Chair noted that she had reported the availability of the Training Resources to the
643 APHA Psychiatry Committee with a view to inclusion of information regarding the
644 resources in an edition of the APHA newsletter.

645 **15. CROSS BORDER ARRANGEMENTS, COMMUNITY TREATMENT**
646 **ORDERS AND INVOLUNTARY ADMISSION DAY LEAVE**

647 The Meeting considered the issue of cross border arrangements, community treatment
648 orders and involuntary admissions based on the submission provided by a Network
649 Member that highlighted the difficulties that arise when mental health services
650 between states do not work together and pass on information. The Chair reported that
651 the establishment of comprehensive interstate agreements continues to be complex and
652 subject to delays due to legal, operational and resource issues between jurisdictions.
653 The Meeting noted the work that had been undertaken in 2012 by the then
654 Commonwealth Mental Health Standing Committee (MHSC) to begin addressing these
655 issues. Mr Taylor provided some background material for Ms McMahon via email.

656 Ms McMahon agreed to raise this issue with SA Health's Chief Psychiatrist, Dr Aaron
657 Groves, who had been involved with the MHSC work in this area during Dr Grove's
658 term as Qld Health's Director of Mental Health Services.

659 **RESOLVED (Chair) carried without dissent**

660 1. *That the National Committee (NC) of the Private Mental Health Consumer Carer*
661 *Network (Australia) [Network] requests that the Chair discuss cross border*
662 *arrangements, community treatment orders and involuntary admission, with the*
663 *South Australia Health's Chief Psychiatrist, Dr Aaron Groves.*

664 **Action: Ms McMahon**

665 **16 NEXT MEETING**

666 The next Meeting of the Network NC is scheduled to be held as follows.

667 33rd Network NC Meeting

668 Day 1: Monday, 22 February 2016 (9:30 AM to 4:30 PM)

669 Day 2: Tuesday, 23 February 2016 (9:30 AM to 3:30 PM)

670 Level 2, RANZCP Headquarters

671 309 La Trobe Street

672 Melbourne, Victoria

673 The Meeting concluded at 2:15 PM.

674 Janne McMahon OAM

675 Chair

Phillip Taylor
Minutes Secretary