Mental Health Alcohol and Other Drugs Branch

Leadership Matters:

The Fourteenth Forum for Senior Mental Health Leaders

Summary Report

Friday 9 August 2013 The Greek Club, Brisbane

Overview

The Fourteenth Leadership Matters: Forum for Senior Mental Health Leaders was held in Brisbane on 9 August 2013 with Senior Mental Health Leaders across Queensland in attendance *(see Appendix A – Attendance List).*

The purpose of the Forum is to provide an opportunity for mental health leaders to:

- > receive information on emergent health policy development and reforms,
- highlight and discuss significant health service initiatives,
- provide an opportunity to peer network and share achievements and challenges of the Hospital and Health Services (HHS)s.

This forum focused on a number of specific areas including the alcohol and other drugs service sector, child and youth mental health service sector, the newly established Queensland Mental Health Commission and an update on the Mental Health Alcohol and Other Drugs (MHAOD) Clinical Network incorporating a group session to provide feedback about the Network's future direction. *(see Appendix B - Agenda).*

Mental Health Alcohol and Other Drugs Branch Update

Dr Bill Kingswell Bill Kingswell -MHOADB Update.pdf

Dr Kingswell provided an overview of the priorities and major projects currently being undertaken by the MHAOD Branch.

Key points as highlighted by Dr Kingswell include:

Mental Health Act Review:

- The majority of on-site consultations with HHSs are completed except for Wide Bay and Sunshine Coast HHS.
- A Consultation Paper will be developed, followed by further consultations.
- Legislative outcomes will be finalised by the end of the 2013-14, enhancing the Act and clarifying issues such as forensic provisions.
- Get Involved website enables feedback until 23 August 2013. Website link below: <u>https://www.getinvolved.qld.gov.au/gi/consultation/1401/view.html</u>

Replacement services for Barrett Adolescent Centre (BAC):

- The Minister announced that replacement service for BAC will be in place in preparation for the school year start in late January 2014.
- \$2M recurrent funding allocated to the Redlands site is retained as a recurrent investment for replacement services.
- The closure of BAC will release recurrent funding to invest in future adolescent mental health service provision.

NGO sector:

- Open tender processes are planned to be undertaken for all community mental health, and alcohol and other drug treatment services with Requests for Offer (RFO) to be advertised.
- Responsibility for the community mental health programs and the contracts with NGOs came to Qld Health (QH) from Department of Communities (DOC) in December 2012.
- Existing NGO contracts are in place until 31 Dec 2013. New contracts are being developed for 2013-14.
- It is anticipated that the five service types to be purchased will include:
 - o Staff Residential Services,
 - o Adult Residential Services,
 - Personalised Support Other,

- Group Program, Mutual Support and Self Help, and
- Family and Carer Support.
- Queensland Centre for Mental Health Research (QCMHR) has been commissioned by MHAOD Branch to review the investment to NGOs delivering community mental health services across Queensland.
- Both this review and the draft NMHSP Framework will assist QH to inform their purchasing intent and service outcomes from 2014-15.
- The Commonwealth's National Partnership Agreement (NPA) on Mental Health Reform will deliver \$51M which will provide additional HASP and transitional recovery type services.
- The majority of HASP funding will be allocated to Baillie Henderson Hospital (BHH) and The Park Centre for Mental Health for decentralisation of their Extended Treatment and Rehabilitation beds.
- The funding for 13 HASP support packages for people residing in BHH has been approved.

Key Issues for the Alcohol and Other Drugs sector



Ms Hipper presented on the key issues in the alcohol and drugs service sector. She based her presentation on her work at the Metro South Addiction and Mental Health Service and on feedback from her consultation with Alcohol, Tobacco and Other Drugs Service (ATODS) contacts across the state.

Ms Hipper highlighted the fact that the ATODS sector is comparatively small, grossly underfunded and perceived as a highly stigmatised area of work. She stressed that QH needs to strengthen its AOD "voice", and acknowledge that it requires a different philosophical framework to mental health service provision. There is an urgent need to develop meaningful and consistent state-wide KPIs and sector-appropriate outcome data collection, reform the former AOD Services Improvement Group (SIG) and continue the work undertaken on the Clinical Service Capability Framework. Most importantly Ms Hipper advocated for the development of a state-wide action plan presenting a model of standardised care and a redefinition of the meaning of recovery in ATOD service provision.

Questions focused on:

- 1. The lack of opiate replacement services in correctional facilities for males, while these services are provided in women's facilities.
- 2. The high cost of transitioning the ATODS IS data collection to an existing framework like CIMHA. Ms Catchpoole discussed the ATODS IS database, the performance measures and the issues around the database release.
- 3. Intergovernmental Committee on Drugs (IGCD) have endorsed DA-CCP to inform service planning awaiting ministerial endorsement.
- 4. Dr Christie is re-establishing the Service Improvement Group (SIG).
- 5. Dr Heffernan highlighted the significant public health issue resulting from the 4,000 prisoners currently incarcerated in South East Queensland with no access to opiate replacement services and needle and syringe programs. Currently Queensland is the only state that does not have accessible programs for prisoners.

2010-2013 Disaster Response

Prof Brett McDermott



Dr McDermott began his presentation with the advice that this was his last leadership forum, as he is to be appointed as the Chief Executive Officer of MAYAC, the newly established adolescent service at Mater Private.

Dr McDermott provided an update on Disaster Recovery Implementation for the Child and Youth Sector. He discussed the challenges in managing young people with mild to moderate mental health issues emanating

from disaster and trauma, and the need for a flexible stepped care model with multiple entry points, as well as the need for an effective communication strategy (eg using podcasts, you tube, vodcasts, I-tunes).

He highlighted that post-disaster high risk kids are:

- Those who "thought they were going to die" during the disaster, and
- Those who were evacuated from their home during the disaster.

Successful interventions include:

- Positive parenting training e.g. Triple P (particularly parents that exhibit hyper vigilant, over-protective behaviour)
- Work with teachers and at school sites e.g. to enhance classroom management.
- Regular 3 yearly guidance officers training.
- Stepped care models.
- Acknowledgement that parents under-utilise CYMHS due to fear of being stigmatised,
- 2-staged mental health screenings to identify kids at risk of PTSD (At Grantham, 12 of 30 screened kids received intervention post screening, who may not have otherwise been identified.
- Trauma related CBT 8 sessions (Kids tell their story up to 6 times until it loses impact and emotional content)
- Swift access to a significant number of therapists in the disaster area (e.g. employ final year Masters Students using therapeutic protocols with payment for time and travel).
- Use of a robust model of care.
- Access to significant funds in a timely manner to purchase screening and treatment.

Queensland Mental Health Commission



Frances Hughes -OMHC.pdf

Ms Hughes explained that the Qld Mental Health Commission (QMHC) is only 39 days old. She advised that she is currently acting as the Queensland Mental Health Commissioner, temporarily caretaking the role until Dr van Schoubroeck, the newly appointed Commissioner returns from leave. She advised that her substantive position is Chief Nursing and Midwifery Officer, with a background in mental health in numerous workplaces including New Zealand government and university settings. Ms Hughes explained that the QMHC is the fourth to be established in Australia exemplifying a global trend. The Commission's current mantra is that "Leadership is the Commission's primary focus".

The development of a Strategic Plan is the first major task required to set the Commission's future direction, and enhance the unification of a fragmented sector to ensure maximum collective impact. The Strategic Plan will be the driving force behind the Commission's work, requiring extensive investigation, data review, listening, workshops, consultation, and interface at a local, state and national level. A Communications strategy is being developed, ensuring that the general public, government and the NGO sector will be engaged and encouraged to make contact or use available websites for their feedback. The Commission will also specifically target indigenous and CALD groups. Ms Hughes stated that place-based conversations will occur as well as ongoing opportunities and key conversations with representative groups. There is an expectation that the Plan will be completed by June 2014.

The Commission is required to comment on a wide range of media stories and is concentrating on developing and communicating their policy positions with policy options papers being produced.

Ms Hughes discussed the Commission's priority to establish the Queensland Mental Health and Drug Advisory Council, encouraging those interested to prepare CVs. The Council will be the first visible presence of the Commission, and will be a skill based advisory council rather than a representative group based entity.

MHAODB Clinical Network Update

Dr Ed Heffernan



Dr Heffernan, Statewide Director of Mental Health Services is currently acting as Chief Psychiatrist and Chair of the Clinical Network. Dr Heffernan provided an update on the current status of the Clinical Network, noting that its purpose is to harness clinical knowledge and to plan and champion the delivery of consistent, quality health care. Dr Heffernan acknowledged Dr Christie's role in setting up and implementing the Network activities.

He advised that the Clinical Network also reports to the Queensland Clinical Senate, which represents clinicians by providing strategic advice and leadership on patient care. Dr Kingswell and Dr Neillie are members of the Clinical Senate.

Dr Heffernan facilitated small group discussions to gather feedback re the groups insights, priorities and recommendations for future MHAOD activities. Their responses were focused on 4 questions presented by Dr Heffernan:

- What are three MHAOD clinical governance activities MHAOD services should progress in 2013-14?
- What are the top three current challenges MHAOD services are facing in HHSs?
- What activities do you think the MHAOD Clinical Network should prioritise in 2013-14?
- What are the top three workforce priorities for MHAOD services?

Child and Youth Mental Health

Professor Brett McDermott / Ms Erica Lee / Dr Stephen Stathis / Ms Judi Krause



This was a joint presentation delivered by Ms Judi Krause and Dr Stephen Stathis from Children's Health Queensland (CHQ) HHS and Professor Brett McDermott and Ms Erica Lee from Mater Health Services.

They discussed a range of topics including the Qld Children's Hospital (QCH) highlighting that it:

- Amalgamated the Mater Children's Hospital and Royal Children's Hospital.
- Won design awards after 7 years of planning
- Provides significant outreach services
- Aims to build capacity in local C&YMHS
- Coordinates specialist appointments to minimise family disruption.
- Increases clinical capacity with 20 per cent more beds and 18 short stay beds, and
- Is committed to research, training and education.

A tour of the QCH was organised prior to the forum, but unfortunately was cancelled due the contractors' construction issues.

A Roadmap for Queensland Child Protection

Mr Graham Kraak



Mr Kraak advised that the Hon Tim Carmody QC was appointed Commissioner of the Queensland Child Protection Commission of Inquiry. The Inquiry emanated from community and professional perceptions that the current system was failing children in protection. The Inquiry implemented 12 months of hearings, forums, consultations and processing submissions. The final reports of the Commission (http://www.childprotectioninquiry.qld.gov.au/publications) were delivered to the Queensland

Government on 1 July 2013. The outcome is the development of a 10 year plan of reform presenting 121 recommendations to facilitate change in the delivery of child protection services and care. In the main, the recommendations centre around 3 main areas:

- Legislative and policy changes;
- Dual referral pathways and
- Service delivery

There are 14 recommendations which are specifically directed at Queensland Health, which need to be implemented over the next 10 years. These include recommendations effecting new statutory arrangements and working with children in transition-from-care or in post-care programs. In addition contestability is to be a key feature in all public funded services to children.

The Queensland Government is yet to make official comment on the recommendations, but Mr Kraak believes that most recommendations will be accepted and will then be implemented in a sustainable manner. After the government submits an official response, an implementation plan will be developed.

Mr Kraak advised that the Commission promoted the strategy of "wherever possible it is better for the child to stay safely at home - better for the child, family and for society as a whole". The Commissioner believes that the state became involved too readily in distressed family situations.

Mr Kraak, as a Director of the Policy and Planning Branch informed the group that one of his unit's role is to consult with HHSs about the Qld Health related recommendations and their potential implementation.



Unfortunately, due to a competing work commitment, Dr Kingswell was unable to officially close the forum proceedings and conduct the evaluation. In his absence, Ms Foreman closed the forum.

The evaluation questions were emailed to participants after the Forum using a Survey Monkey format. The resulting survey responses are informing the next Forum content scheduled for 3 December 2013.

Tour of ADAWS

Dr Brett McDermott

Ten delegates participated in a tour of the Adolescent Drug and Alcohol Withdrawal Service (ADAWS) at South Brisbane. Dr McDermott coordinated and led the tour with Ms Amanda Tilse, ADAWS Operational Manager. All Forum delegates enjoyed the tour and greatly appreciated the opportunity to personally view the facility and learn about its range of innovative programs.

ADAWS is a voluntary program delivered from a purpose-built facility that provides support for adolescents aged 13 to 18 years to combat drug and alcohol addictions. The service is the only withdrawal program for adolescents in Queensland. ADAWS services are currently provided under the auspices of Mater Health Services, but when the Queensland Children's Hospital (QCH) opens in 2014, ADAWS will form part of the community-based services delivered by Children's Health Queensland. The ADAWS facility provides living quarters, kitchen facilities, a health clinic, space for outreach services and a range of creative arts and support facilities in a non-clinical, safe and secure environment.

Appendix A

Attendance List - 14th Senior Leadership Forum Friday 9 August 2013			
Name	Attendance	Apologies	
Anand Choudhary	V	Diana Grice	
Bill Kingswell	Presenter	Janet Bayley	
Brett Emmerson	V	Jill Mazdon	
Brett McDermott	Presenter	Mark Fakes	
Catherine Oelrichs	V	Mohan Gilotra	
David Crompton	V	Neeraj Gill	
Ed Heffernan	Presenter	William Brennan	
Emma Foreman	V		
Erica Lee	Presenter	-	
Frances Hughes	Presenter	-	
Fraun Flerchinger	Registered but did not attend	1	
Gail Robinson	V	1	
Graham Kraak	Presenter	-	
acinta Powell	V	-	
anet Ceron	Registered but did not attend	-	
ohn Reilly	√	-	
ludi Krause	Presenter	-	
Karlyn Chettleburgh	Registered but did not attend	-	
Kaye Carncross	V	_	
Kees Nydam	V	_	
Keryn Fenton	V	_	
Kevin McNamara	V	_	
Kim Erickson	V	_	
eane Christie	V	_	
eanne Geppert	V	_	
inda Hipper	Presenter	_	
indsay Farley	V	_	
Lisa Fawcett	V	-	
-ynne Halliday	V	-	
Varie Kelly	V V	-	
Matira Taikato	V V	-	
Monica O'Neill	Registered but did not attend	-	
Robyn Bradley	√	-	
Ruth Catchpoole	V	-	
Sandra Kennedy	V	-	
Sharon Kelly	V V	-	
Shirley Wigan	V V	-	
Simone Caynes	V V	-	
Stephen Stathis	Presenter	-	
Sue Burrough	√ V	-	
Ferry Stedman	V	-	
Fonya Plumb	V V	-	
/alda Mathewson	V V	-	
/ikas Moudgil	Registered but did not attend	-	

Appendix B

AGENDA			
Friday 9 August 2013			
8.30	Arrival, Registration and Informal Networking		
9.15 – 9.45	Welcome, Introduction and Statewide Update	Dr Bill Kingswell, Executive Director, MHAODB	
9.45 - 10.15	Key issues for the Alcohol and Other Drugs sector	Linda Hipper, Assistant Director, ATODS Metro South HHS	
10.15	Morning Tea		
10.45 - 11.15	Update on Disaster Recovery Implementation for the Child and Youth Sector	Dr Brett McDermott, Professor & Executive Director, CYMHS, Mater Children's Hospital, Metro South HHS	
11.15 – 11.45	Update from the Acting Commissioner on the Queensland Mental Health Commission	Dr Frances Hughes, Acting Commissioner, Queensland Mental Health Commission	
11.45 – 12.30	Current Issues & challenges facing HHSs – Input into planning for MHAOD Clinical Network	Small groups – feedback to wider forum Facilitated by Dr Ed Heffernan	
12.30	Lunch		
13.15 - 14.00	Challenges and contemporary issues in the Child and Youth Mental Health Service sector	Dr Brett McDermott, Executive Director, CYMHS, Mater Children's Hospital.	
		Erica Lee, Executive Manager, Mater CYMHS	
		Judi Krause, Divisional Director, CYMHS, Royal Children's Hospital	
		Dr Stephen Stathis, Associate Professor & Clinical Director, CYMHS, Royal Children's Hospital	
14.00 - 14.15	Update on the Queensland Child Protection Commission of Inquiry (Carmody Inquiry)	Graham Kraak, Director, Policy and Planning Branch	
14.15 - 14.30	Close and Evaluation	Dr Bill Kingswell	
14.30	Travel to site tour		
15.00 - 16.00	Tour of the Adolescent Drug and Alcohol Withdrawal Service (ADAWS)	Coordinated by Brett McDermott	