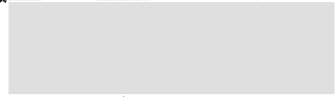



Children's Health Queensland Hospital and Health Service

Meeting Agenda

State-wide Adolescent Extended Treatment and Rehabilitation Implementation Strategy

Date:	26 August 2013
Time:	9am – 10am
Venue:	Rm 30, CYMHS Cnr Roger & Water Streets Spring Hill
Teleconference Details:	 ** Please advise secretariat if you are using T/C**

Co-Chair:	Judi Krause	Divisional Director CYMHS CHQ HHS
Co-Chair:	Dr Stephen Stathis	Clinical Director CYMHS CHQ HHS
Secretariat:	Jaimee Keating	ESO, CYMHS CHQ HHS
Attendees:	Dr Leanne Geppert	A/Director of Strategy, Mental Health & Specialised Services WM HHS
	Dr Trevor Sadler	Director Barrett Adolescent Centre, The Park Centre for MH
	Josie Sorban	Director of Psychology, CHQ HHS
		Carer Representative
	Deborah Miller	A/Executive Director Office of Strategy Management, CHQ
Apologies:	Amanda Tilse	Operational Manager Alcohol, other Drugs & Campus, Mater
	Marie Kelly	A/Director Planning & Partnership Unit MHAODB
	Amelia Callaghan	State Manager Headspace
	Richard Nelson	Queensland Alliance
Invitees		

* Attachments accompany this item papers to be tabled if available

1. Presentations			
Item no	Item	Time	Action Officer
1.0			

2. Meeting Opening			
Item no	Item	Time	Action Officer
2.1	Welcome and Apologies		Chair
2.2	Statement of Conflict/Interest		Chair
2.3	Confirmation of the minutes from the previous meeting –		Chair
2.4	Statement of achievements		Chair

3. Business Arising from previous minutes			
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Children's Health Queensland Hospital and Health Service

Item no	Item	Time	Action Officer
3.1	Nil.		

4. Matters for Decision			
Item no	Item	Time	Action Officer
4.1	Committee Objectives		
4.2	Committee TOR (meeting frequency/ dates)		
4.3	Committee Action Plan		
4.4	Working Group Membership and Objectives		
4.5	Communication Plan		

5. Matters for Discussion			
Item no	Item	Time	Action Officer
5.1	Overview of Child & Youth Mental Health System and Service Planning in Queensland to-date – presentation		LG
5.2	Overview of Expert Clinical Reference Group Recommendations and Media Announcement		LG

6. Standard Agenda Items			
Item no	Item	Time	Action Officer
6.1	BAC Consumer Transition Working Group update		
6.2	Financial and Workforce Planning Working group update		
6.3	Service Options Working Group update		
6.4	Risk Management		
6.5	Progress of key milestones and deliverables.		
6.6	Other business		

7. Matters for Noting			
Item no	Item	Time	Action Officer
7.1	Major correspondence		
7.2	Minutes of Working Groups		

8. For Information (papers only)			
Item no	Item	Time	Action Officer
8.1			

Next Meeting			
Date:	TBC		
Time:			
Venue:			

Children's Health Queensland Hospital and Health Service

Minutes

State-wide Adolescent Extended Treatment and Rehabilitation Implementation Strategy

Date:	26/08/2013	Time:	09:00	Venue:	Rm 30 CYMHS Cnr Rogers & Water Streets, Spring Hill
Co-Chair:	Divisional Director CYMHS CHQ HHS				
Co-Chair:	Clinical Director CYMHS CHQ HHS				
Secretariat:	ESO CYMHS				
Attendees:	A/Director of Strategy, Mental Health & Specialised Services WM HHS Director Barrett Adolescent Centre, The Park Centre for MH Director of Psychology, CHQ HHS Carer Representative A/Executive Director Office of Strategy Management, CHQ A/Divisional Director CYMHS CHQ HHS				
Observers/ Guests:	Enter name(s)				
Apologies:	Operational Manager Alcohol, other Drugs & Campus, Mater A/Director Planning & Partnership Unit MHAODB State Manager Headspace Queensland Alliance				

Item No	Topic	Action	Committee member	Due date
1.	Presentations			
	Nil			
2.	Meeting opening			
2.1	Welcome and apologies		DD CYMHS	
2.2	Statement of Conflict/Interest	Carer Representative advised that they would like anonymity outside of direct group and broader QH membership. Decision to make all correspondence of this group reflect positions and not names of individuals.		
2.3	Confirmation of Minutes	Nil.		
	Business			
3.	Business Arising from Previous Meetings			
	Nil.			
	Recommendation:	Discussion Points:		

Children's Health Queensland Hospital and Health Service

4.	Matters for Decision			
4.1	Committee objectives Recommendation: <ul style="list-style-type: none"> 	Discussion Points: Not discussed.		
4.2	Committee TOR Recommendation: <ul style="list-style-type: none"> Changes to TOR. 	Discussion Points: Include in TOR. <ul style="list-style-type: none"> Purpose: include oversight of development and adaptation of relevant Models of Service to fit Queensland's requirements for AET&R services. Authority: Chair has the authority to make final decisions if consensus is not reached. Member: include inviting experts in the field/ key stakeholders to provide guidance and direction where deemed necessary as ex officio members of the group. Meeting dates will be fortnightly, Mondays at 8.30am – 10am secretariat will send electronic appointments. 	Chair	9/9
4.3	Committee Action Plan Recommendation: <ul style="list-style-type: none"> Nil. 	Discussion Points: <ul style="list-style-type: none"> The draft project plan will be tabled and discussed at the next meeting. The branch is providing project funding for both CHQ and WM HHS's. CHQ have tentatively secured a project leader and the Clinical Director CYMHS will contribute .2 FTE. Update given next meeting. WM HHS will also host a project officer. 	Chair	9/9
4.4	Working Group Membership and Objectives Recommendation: <ul style="list-style-type: none"> Carer/Consumer reps to be included in W.G for Consumer Transition and Service Options Implementation 	Discussion Points: <ul style="list-style-type: none"> Discussed membership of working groups – draft membership to be disseminated to group for feedback. This is to include a brief outline of the purpose of each W.G. The TOR of W.G's are to articulate the role of each member, particularly cluster reps. Group requested the Expert Clinical Reference Group Recommendations (preamble) be circulated – this will be distributed individually in hard copy – not for further distribution 	Secretariat / A.Dir. Strategy WM HHS	9/9 9/9 9/9

Children's Health Queensland Hospital and Health Service

			A/Dir. of Strategy, Mental Health & Specialised Services WM HHS	
4.5	Communication Plan Recommendation: <ul style="list-style-type: none"> All communication is via the Co-chairs. All correspondence is confidential. 	Discussion Points: <ul style="list-style-type: none"> All correspondence is confidential and not for further distribution. All media/ community sector communication is via the co-chairs who will liaise with CHQ & WM Communication & Engagement teams. 		
5.	Matters for Discussion			
5.1	Overview of Child & Youth Mental Health System and Service Planning in Queensland to-date – presentation by LG attached Recommendation: <ul style="list-style-type: none"> New service options need to consider implications of ABF and other funding criteria. 	Discussion Points: <ul style="list-style-type: none"> Presentation ppt will be disseminated to the group. Any recommendations on alternative models of care for AET&R need to be in scope for Activity Based Funding to be eligible for Commonwealth growth funding. Send National Mental Health Service Planning Framework / Project Communiqué with minutes. 	Secretariat	Completed. Sent with minutes 30.8.13
5.2	Overview of Expert Clinical Reference Group Recommendations and Media Announcement – presentation by LG combined with previous agenda item	Discussion Points: <ul style="list-style-type: none"> Send Recommendations/ Ministerial media announcement with minutes. 	Secretariat	Completed. Sent with minutes 30.8.13
6.	Standard Agenda Items			
6.1	Service Options Working Group update	Discussion Points: Nil.		
6.2	BAC Consumer Transition Working Group update	Discussion Points: Nil.		
6.3	Financial and Workforce Planning Working group update	Discussion Points: Nil.		
6.4	Risk Management	Discussion Points: Nil.		
6.5	Progress of key milestones and deliverables.	Discussion Points: Nil.		
6.6	Other business	Discussion Points:		

Children's Health Queensland Hospital and Health Service

		Nil.		
7.	Matters for Noting			
7.1	Major Correspondence	Nil.		
7.2	Minutes of Working Groups	Nil		
8.	For Information			
8.1	YPARC Model	<ul style="list-style-type: none"> A recent site visit was conducted to Victoria to review the YPARC model of service and other contemporary models within the continuum of care for adolescent ET&R A brief description of the Y-PARC model will be disseminated with the minutes. A full report of the Victorian Site visits will be finalised today and forwarded to the CHQ CE and recommendations and findings discussed with the group at the next meeting. 	Secretariat	Completed. Sent with minutes 30.8.13
8.2	Sites	The Department of Health is negotiating with the CE's of CHQ, WM HHS and Metro South for an interim site for a bed based facility in Logan. Decisions re: governance and finances need to be decided at chief executive level. This group is not involved in influencing this interim planning.		Remove.
Next meeting 9 September 2013, 8.30 – 10am CYMHS Spring Hill				

ENDORSED BY:

Signature:

Date: /09/13

Name:

Position:



Children's Health Queensland Hospital and Health Service

Meeting Agenda

State-wide Adolescent Extended Treatment and Rehabilitation Implementation Strategy

Date:	9 September 2013
Time:	8.30am – 10am
Venue:	Rm 30, CYMHS Cnr Roger & Water Streets Spring Hill (parking via Roger St entrance)
Teleconference Details:	<div style="background-color: #cccccc; width: 150px; height: 30px; display: inline-block;"></div> <u>** Please advise secretariat if you are using T/C**</u>

A/Chair:	Dr Leanne Geppert	A/Director of Strategy, Mental Health & Specialised Services WM HHS
A/Secretariat:	Jainee Keating	ESO, CYMHS CHQ HHS
Attendees:	Ingrid Adamson	SW AETR Project Manager
	Dr Trevor Sadler	Director Barrett Adolescent Centre, The Park Centre for MH
	Josie Sorban	Director of Psychology, CHQ HHS
	<div style="background-color: #cccccc; width: 150px; height: 30px; display: inline-block;"></div>	Carer Representative
T/C	Deborah Miller	A/Executive Director Office of Strategy Management, CHQ
	Paul Letters	A/Divisional Director CYMHS CHQ HHS
	Amanda Tilse	Operational Manager Alcohol, other Drugs & Campus, Mater
	Marie Kelly	A/Director Planning & Partnership Unit MHAODB
	Amelia Callaghan	State Manager Headspace
Apologies:	Judi Krause (Co-chair)	Divisional Director CYMHS CHQ HHS
	Dr Stephen Stathis (Co-chair)	Clinical Director CYMHS CHQ HHS
	Richard Nelson	Queensland Alliance
Invitees		

* Attachments accompany this item papers to be tabled if available

1. Presentations			
Item no	Item	Time	Action Officer
1.0			

2. Meeting Opening			
Item no	Item	Time	Action Officer
2.1	Welcome and Apologies		Chair
2.2	Statement of Conflict/Interest		Chair
2.3	Confirmation of the minutes from the previous meeting 26/8/13 (attached)		Chair
2.4	Statement of achievements		Chair

Children's Health Queensland Hospital and Health Service

3. Business Arising from previous minutes			
Item no	Item	Time	Action Officer
4.2	TOR – for endorsement (<i>attached</i>)		Group
4.3	Draft Action Plan – <i>see</i> Item 4.3		Chair
4.4	Working Group Membership & Objectives (<i>attached</i>)		Group

4. Matters for Decision			
Item no	Item	Time	Action Officer
4.1	Draft Project Monthly Status report – for consideration (<i>attached</i>)		Chair
4.2	Draft Action Plan – for endorsement (<i>attached</i>)		

5. Matters for Discussion			
Item no	Item	Time	Action Officer
5.1	Project Plan (<i>will be available at the meeting</i>)		Chair

6. Standard Agenda Items			
Item no	Item	Time	Action Officer
6.1	Service Options Working Group update		
6.2	BAC Consumer Transition Working Group update		
6.3	Financial and Workforce Planning Working group update		
6.4	Risk Management		
6.5	Progress of key milestones and deliverables.		
6.6	Other business		

7. Matters for Noting			
Item no	Item	Time	Action Officer
7.1	Major correspondence - Discuss single point of responsibility for correspondence.		Chair
7.2	Minutes of Working Groups – nil.		

8. For Information (papers only)			
Item no	Item	Time	Action Officer
8.1			

Next Meeting	
Date:	23 September 2013
Time:	8.30am – 10am
Venue:	Room 30 CYMHS Spring Hill.

Children's Health Queensland Hospital and Health Service

Minutes

State-wide Adolescent Extended Treatment and Rehabilitation Implementation Strategy

Date:	09/09/2013	Time:	08:30	Venue:	Rm 30 CYMHS Cnr Rogers & Water Streets, Spring Hill
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A/Chair:	A/Director of Strategy, Mental Health & Specialised Services WM HHS (LG)
A/Secretariat:	ESO CYMHS (JCK)
Attendees	Director Barrett Adolescent Centre, The Park Centre for MH (TS) Director of Psychology, CHQ HHS (JS) Carer Representative [REDACTED] A/Director Planning & Partnership Unit MHAODB (MK) Operational Manager Alcohol, other Drugs & Campus, Mater (AT) SW AETR Project Manager (IA) A/Divisional Director CYMHS CHQ HHS (PL) Clinical Services Program Manager Child & Youth Academic Clinical Unit Metro South Addiction and Mental Health Service (RH)
Apologies	A/Executive Director Office of Strategy Management, CHQ (DM) State Manager Headspace (AC) Queensland Alliance (RN) Divisional Director CYMHS CHQ HHS (JK) Clinical Director CYMHS CHQ HHS (SS)
Observers/ Guests:	Nil

Item No	Topic	Action	Committee member	Due date
1.	Presentations			
	Nil.			
2.	Meeting opening			
2.1	Welcome and apologies <ul style="list-style-type: none"> Welcomed Ingrid Adamson, Project Manager CHQ HHS to group. The WM HHS Project Officer will be appointed shortly and will attend future meetings. 		Chair	
2.2	Statement of Conflict/Interest	Nil.		
2.3	Confirmation of Minutes	Confirmed	PL	
2.4	Statement of achievements	Nil.		
	Business			
3.	Business Arising from Previous Meetings			
3.1	Committee TOR Discussion Points: <ul style="list-style-type: none"> Discussed change to 4. Frequency of Meetings paragraph Need to review 8. Performance and Reporting to reflect both HHSs. 	Make changes to TOR as discussed. Endorse out of session.	LG LG	23/09 23/09

Children's Health Queensland Hospital and Health Service

Item No	Topic	Action	Committee member	Due date
	<ul style="list-style-type: none"> TS to follow up on Consumer rep for Steering Committee <p>Recommendation: Update and send for 'out-of-session' endorsement</p>	Follow up consumer rep for membership	TS	23/09
3.2	Draft Action Plan – carried over – see item 4.2 below			
3.3	<p>Working Group Membership and Objectives Draft membership listing tabled for discussion.</p> <p>Discussion Points:</p> <ul style="list-style-type: none"> No feedback received regarding draft Working Group membership. Group discussed and acknowledged the need for a balance of Steering Committee representation on Working Groups. <p>WG 1 Service Options Implementation</p> <ul style="list-style-type: none"> Discussion re DETE representation on WG. DETE have established a WG and have indicated that they will work with DoH and will develop a model to suit our recommendations. Committee agreed to invite a DETE W.G. member to a future meeting to exchange information on service option developments when further work has progressed (and prior to service model endorsement). LG to liaise with Janet Martin, WG 1 Chair, to establish membership (for approval via this group –out of session) and convene meeting within the week. Membership to include a Consumer rep and Carer rep and remove JK. WG is to base service option development on ECRG recommendations, site visits and NMHPF – LG clarified the WG would not be starting over but rather building on what has been developed/defined to date. Discussed relevance of contract management and contestability for the Service Options Implementation Strategy. Committee would benefit from a presentation regarding contestability at a later date – MK suggested someone from the Health Renewal Portfolio Office. Discussion held re: recommending models. This group should determine the best service model for adolescents needs, even if there is no capital to support recommendations at this point in time. The WG should not limit recommendations based on bed availability but rather on target group needs, contemporary and endorsed service models, and best practice. 	<p>Invite DETE WG member to share information at a future meeting.</p> <p>Contact each WG Chair to establish membership and convene meetings within the fortnight.</p> <p>Identify most suitable contact to provide presentation</p>	<p>LG</p> <p>LG</p> <p>MK</p>	23/09

Children's Health Queensland Hospital and Health Service

Item No	Topic	Action	Committee member	Due date
	<p><i>WG 2 BAC Consumer Transition</i></p> <ul style="list-style-type: none"> TS queried what is happening with the Logan Hospital consideration. LG advised that this is in the remit of the CE DoH Oversight Committee to decide. This Steering Committee will (for the interim) focus on service options and broader geographical locations, not on the particulars about specific sites. LG clarified that this WG is chartered with guiding and overseeing the progress of safe consumer transition planning. This includes ensuring a strong and clear communication plan. It is not the role of the Steering Committee to develop individual consumer discharge/transition plans. TS raised the need for good communication between this WG and the BAC team reviewing wait lists – recommended that there is a need to engage with Dr Darren Neillie A/Dir of Clinical Service WM HHS in the WG. <p><i>WG 3 Financial & Workforce Planning</i></p> <ul style="list-style-type: none"> TS raised BAC staff transition. LG advised that BAC staff (excl. DETE staff – this will be decided by DETE) will not be automatically relocated but rather will participate in the normal DoH HR processes. Details regarding transition will be defined through this WG. TS raised the risk of losing qualified and experienced staff which was noted by the Committee. HR advice and communication to WM HHS staff is a priority for this WG. <p>Recommendation:</p> <ul style="list-style-type: none"> LG to contact each WG chair to establish membership and convene meetings within the fortnight. Invite DETE rep to future meetings prior to recommended model being endorsed at this group. LG to contact Darren Neillie to determine communication channels between groups 	Invite DN membership	LG	23/09
4.	Matters for Decision			
4.1	<p>Project Monthly Status Report – for consideration Draft tabled.</p> <p>Discussion Points:</p> <ul style="list-style-type: none"> The Project Manager and Officer will update the status report on a monthly basis <p>Recommendation:</p>	Update monthly for committee	IA & WM HHS P.O.	

Children's Health Queensland Hospital and Health Service

Item No	Topic	Action	Committee member	Due date
	<ul style="list-style-type: none"> A Project Status Report will be tabled for the committee on a monthly basis. 			
4.2	Committee Action Plan Draft tabled Discussion Points: <ul style="list-style-type: none"> Planning and Definition Stage is near completion Execution Stage – the outputs from this stage will be recommended to the CE DoH Oversight Committee for endorsement. To maintain communication linkages, SS and DM will sit on both the SW AETR Steering Committee and the CE DoH Oversight Committee. Key priority areas are finalisation of the Project Plan and development of a Communication Plan and Risk Register. Approval to share Victorian site visit report will be sort from CHQ CE. Steering Committee to provide changes/ feedback to LG within 24hrs. If no feedback received, LG will consider plan to be approved and ready for submission to the CE DoH Oversight Committee for endorsement. Recommendation: <ul style="list-style-type: none"> Approve draft Steering Committee Action Plan. Submit Action Plan to oversight committee for endorsement. 	IA to liaise with Oversight committee re communication process for actions/decisions to this Steering Committee. Finalise Project Plan, and develop Risk Register & Comms Plan Seek approval from CHQ CE to disseminate Victorian Site Visit Report. Send LG feedback on action plan	IA IA IA Steering Committee	23/09 23/09 23/09 10/09
5.	Matters for Discussion			
5.1	Project Plan Draft Project Plan tabled – time restrictions prohibited this plan being discussed during the meeting. Discussion Points: <ul style="list-style-type: none"> Recommendation: <ul style="list-style-type: none"> Send draft project plan to Committee for review. 	Draft Project Plan will be disseminated to Committee out-of-session (<i>not for further distribution</i>)	IA	TBC
5.	Standard Agenda Items			
6.1	Service Options Working Group Update Discussion Points:	Nil.		

Children's Health Queensland Hospital and Health Service

Item No	Topic	Action	Committee member	Due date
	Recommendation:			
6.2	BAC Consumer Transition Working Group Update Discussion Points: Recommendation:	Nil.		
6.3	Financial and Workforce Planning Working Group Update Discussion Points: Recommendation:	Nil.		
6.4	Risk Management Discussion Points: Recommendation:	Nil.		
6.5	Progress of key milestones and deliverables Discussion Points: Recommendation:	Nil.		
6.6	Other Business Discussion Points: Recommendation:	Nil.		
7. Matters for Noting				
7.1	Correspondence Discussion Discussion Points: <ul style="list-style-type: none"> To date WM HHS has taken the responsibility of responding to correspondence. WM HHS has developed resources (fact sheets/ website) to assist in responding to correspondence. LG proposed revisiting which HHS will be single point of contact for all correspondence – WM or CHQ Decision to be referred to CE CHQ HHS. Recommendation:	Seek direction from CE CHQ HHS.	IA	23/09
8. For Information				
8.1				
Next meeting 23 September 2013, 8.30 – 10am CYMHS Spring Hill.				

Children's Health Queensland Hospital and Health Service

ENDORSED BY:

Signature:

Date: /09/13

Name:

Position:

Children's Health Queensland Hospital and Health Service

Meeting Agenda

State-wide Adolescent Extended Treatment and Rehabilitation Implementation Strategy

Date:	23 September 2013	
Time:	8.30am – 10am	
Venue:	Rm 30, CYMHS Cnr Roger & Water Streets Spring Hill (parking via Roger St entrance)	
Teleconference Details:		** Please advise secretariat if you are using T/C**

A/Chair:	Dr Leanne Geppert	A/Director of Strategy, Mental Health & Specialised Services WM HHS
Secretariat:	Ingrid Adamson	SW AETR Project Manager
Attendees:	Deborah Miller	A/Executive Director Office of Strategy Management, CHQ
	Paul Letters	A/Divisional Director CYMHS CHQ HHS
	Josie Sorban	Director of Psychology, CHQ HHS
		Carer Representative
	Elisabeth Hoehn	A/Clinical Director CYMHS CHQ HHS
	Marie Kelly	A/Director Planning & Partnership Unit MHAODB
	Amanda Tilse	Operational Manager Alcohol, other Drugs & Campus, Mater
	Richard Nelson	Queensland Alliance
	Amelia Callaghan	State Manager Headspace
Apologies:	Judi Krause (Co-chair)	Divisional Director CYMHS CHQ HHS
	Dr Stephen Stathis (Co-chair)	Clinical Director CYMHS CHQ HHS
	Raymond Ho	Clinical Services Program Manager, Metro South Addiction and Mental Health Service
Observers / Guests:		

* Attachments accompany this item; papers to be tabled if available

1. Presentations		
Item no	Item	Action Officer
1.0	Nil	

2. Meeting Opening		
Item no	Item	Action Officer
2.1	Welcome and Apologies	Chair
2.2	Statement of Conflict/Interest	Chair
2.3	Confirmation of the minutes from the previous meeting 09/09/13 (attached)	Chair
2.4	Statement of achievements	Chair

Children's Health Queensland Hospital and Health Service

3. Business Arising from previous minutes		
Item no	Item	Action Officer
3.1	Working Group Membership	Chair
3.2	Committee Action Plan	Chair
3.3	Draft Project Plan	IA
3.4	Single point of responsibility for correspondence decision	Chair

4. Matters for Decision		
Item no	Item	Action Officer
4.1	Steering Committee Terms of Reference	Chair
4.2	Working Groups Terms of Reference	Chair

5. Matters for Discussion		
Item no	Item	Action Officer
5.1	Chief Executive and Department of Health (CE DoH) Oversight Committee Terms of Reference	Chair
5.2	Barrett Centre Update	Chair

6. Standard Agenda Items		
Item no	Item	Action Officer
6.1	Service Options Working Group Update <ul style="list-style-type: none"> Memo sent to CEs of Mental Health Clusters seeking nomination of representative Service Options Overview 	Chair
6.2	BAC Consumer Transition Working Group Update	
6.3	Financial and Workforce Planning Working group Update	
6.4	Risk Management Risk register commenced – requires input from Working Groups	IA
6.5	Progress of key milestones and deliverables	
6.6	Other business	

7. Matters for Noting		
Item no	Item	Action Officer
7.1	Major correspondence	

8. For information (papers only)		
Item no	Item	Action Officer
8.1	Victoria Site Visit Report (<i>refer attached</i>)	Chair

Next Meeting	
Date:	Wednesday 9 th October 2013
Time:	8.30am – 10am
Venue:	Room 30 CYMHS Spring Hill.

Children's Health Queensland Hospital and Health Service

Children's Health Queensland Hospital and Health Service Statewide Adolescent Extended Treatment & Rehabilitation Implementation Steering Committee Action Item Register (Status Indicators: Red = Significant delay, Amber = Slight delay, Green = On Track and Blue = Completed)							
Meeting Date	Action Item #	Previous Meeting Reference	Action Item	Action Officer	Due Date	Status Update	Status
26/08/13	4.2	Committee TOR	Include changes to purpose; authority; membership; and meeting dates	Leanne Geppert	09/09/13	Completed	
26/08/13	4.4	Working Group Membership	Include Carer/Consumer Reps on Service Options and Consumer Transition Working Groups	Leanne Geppert	09/09/13	Completed	
26/08/13	4.4	Working Group Membership	Circulate hard copy of ECRG Recommendations	Leanne Geppert	09/09/13	Completed	
26/08/13	8.1	YPARC Model	Disseminate Victorian Site Visit Report	Leanne Geppert	09/09/13	Completed	
09/09/13	3.1	Committee TOR	Circulate final version for out of session endorsement	Leanne Geppert	23/09/13		
09/09/13	3.1	Committee TOR	Identify consumer representative for Steering Committee	Trevor Sadler	23/09/13		
09/09/13	3.3	Working Group Membership	Invite DETE WG representative to future steering committee meeting for information exchange	Leanne Geppert	TBC		
09/09/13	3.3	Working Group Membership	Contact each working group to establish membership and convene meetings	Leanne Geppert	23/09/13		
09/09/13	3.3	Working Group Membership	Invite Darren Neillie (wait list team) membership to WG 2	Leanne Geppert	23/09/13		
09/09/13	4.2	Committee Action Plan	Finalise Project Plan and develop Risk Register and Comms Plan	Ingrid Adamson	TBC	Work commenced	
09/09/13	4.2	Committee Action Plan	Submit feedback to LG	Steering Committee	10/09/13	Completed	
09/09/13	4.2	Committee Action Plan	Submit Action Plan to CE DoH Oversight Committee for endorsement	Ingrid Adamson	18/10/13		

Children's Health Queensland Hospital and Health Service

Minutes

State-wide Adolescent Extended Treatment and Rehabilitation Implementation Strategy

Date:	23/09/2013	Time:	08:30	Venue:	Rm 30 CYMHS Cnr Rogers & Water Streets, Spring Hill
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A/Chair:	A/Director of Strategy, Mental Health & Specialised Services WM HHS (LG)
Secretariat:	SW AETR Project Manager (IA)
Attendees	SW AETR Project Officer (LJ) A/Executive Director Office of Strategy Management, CHQ (DM) Director of Psychology, CHQ HHS (JS) Carer Representative [REDACTED] A/Divisional Director CYMHS CHQ HHS (PL) Operational Manager Alcohol, other Drugs & Campus, Mater (AT) State Manager Headspace (AC) Nurse Unit Manager, Mental Health, Metro South HHS (JB) A/Clinical Director CYMHS (EH)
Conf Call	A/Director Planning & Partnership Unit MHAODB (MK)
Apologies	Divisional Director CYMHS CHQ HHS (JK) Clinical Director CYMHS CHQ HHS (SS) Clinical Services Program Manager, Metro South Addiction and Mental Health Service (RH) Queensland Alliance (RN)
Observers/ Guests:	Nil

Item No	Topic	Action	Committee member	Due date
1.	Presentations			
	Nil	Nil		
2.	Meeting opening			
2.1	Welcome and Apologies • Welcomed Laura Johnston, SW AETR Project Officer, WM HHS		Chair	
2.2	Statement of Conflict/Interest	Nil		
2.3	Confirmation of Minutes	Confirmed		
2.4	Statement of achievements	Covered below	Chair	
	Business			
3.	Business Arising from Previous Meetings			
3.1	Working Group Membership and Objectives <i>Working Group 1 – Service Options</i> • Went through proposed membership – still need a consumer representative. • EH suggested the a representative could be sought from Beautiful Minds • AT will also have a talk to people at the Mater to source a representative • AT raised that Mater did not have a	EH to source a consumer representative	EH	27/09



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Children's Health Queensland Hospital and Health Service

Item No	Topic	Action	Committee member	Due date
	<p>nursing leads from CHQ HHS.</p> <p>Recommendation:</p> <ul style="list-style-type: none"> EH and AT to identify representatives for WG1 WG1 to meet in a series of half day workshops WG2 renamed to BAC Consumer Transition Panel WG2 membership altered to include BAC Staff only – HHS representatives will be involved on an 'as needs' basis. WG3 representatives still required - LG and IA to identify representatives within MHAODB and CHQ respectively 	and CHQ Nursing Lead representatives		
3.2	<p>Committee Action Plan</p> <ul style="list-style-type: none"> No feedback received so Action Plan is considered endorsed. This will now be incorporated into Project Plan. 	Incorporate into Project Plan	IA	09/10
3.3	<p>Project Plan</p> <ul style="list-style-type: none"> Project Plan, Risk Register, and Communications Plan are still under development. Draft Project Plan will be circulated to Committee members before the next meeting 	Finalise Project Plan	IA	09/10
3.4	<p>Single point of responsibility for correspondence decision</p> <ul style="list-style-type: none"> Committee was advised that WM HHS will retain responsibility of correspondence until SW AETR transition to CHQ HHS. LG still to speak with Lesley Dwyer to confirm this position. 	LG to speak with LD regarding correspondence position	LG	09/10
4.	Matters for Decision			
4.1	<p>Steering Committee Terms of Reference</p> <ul style="list-style-type: none"> DM confirmed the role of this Committee is to endorse and recommend options to the Oversight Committee (for decision making). The ToR have been adjusted to reflect this. Committee supported changes made and the ToR are now finalised. The identified Consumer Representative has since advised that they are unable to participate on Committee. Committee asked for suggestions for a replacement consumer representative. EH advised that CHQ has a parent group in Beautiful Minds. PL will speak with Sophie or Tamara about whether they could recommend someone. 	PL to advise of consumer rep for Committee	PL	09/10
4.2	<p>Working Groups Terms of Reference</p> <p><i>Working Group 1</i></p> <ul style="list-style-type: none"> Functions Dot Point 4: LG recommended change to <i>Develop an options paper for the Governance Model for SW AETR services</i> Nil other comments <p><i>Working Group 2</i></p> <ul style="list-style-type: none"> Changes as noted above in Item 3.1 	<p>Update TOR</p> <p>Update TOR</p>	<p>IA</p> <p>IA</p>	<p>25/09</p> <p>25/09</p>

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Item No	Topic	Action	Committee member	Due date
	Working Group 3 <ul style="list-style-type: none"> Functions Dot Point 1: EH asked whether the Workforce Strategy will impact DETE staff – ToR to note it excludes DETE staff although ongoing liaison and communication with DETE will occur. LG has spoken with Peter Blatch, from DETE. He has advised that he is not aware of any working group being established and that there should be no working group for DETE. He is happy for a DETE representative to attend the Steering Committee once a service options model has been developed – they will then develop their DETE models in synergy with the agreed model of service. They continue to be committed to being part of ongoing discussions. Nil other comments 	Update TOR	IA	25/09
5.	Matters for Discussion			
5.1	Chief Executive and Department of Health (CE DoH) Oversight Committee Terms or Reference <ul style="list-style-type: none"> ■ queried whether it was necessary for the Chair to appoint a Proxy in his absence. DM advised that the Proxy would most likely be Lesley Dwyer in all instances. LG advised that Lesley Dwyer thought the DDG would be chair. DM will confirm with DDG. LG queried whether bi-monthly meetings were frequent enough and whether the Oversight Committee meetings could be added onto the back of CE meetings. DM will speak with the DDG's office to see what frequency will work best. LG raised that Lesley Dwyer thought a CE from North Qld should also be included in the membership – CHQ will approach the CE Townsville HHS Nil other comments 	DM to confirm DDG as chair DM to confirm frequency of meetings with DDG office CHQ to approach Townsville HHS CE re Committee membership	DM DM IA	27/09 27/09 27/09
5.2	Barrett Centre Update <ul style="list-style-type: none"> LG confirmed that EH is standing in for TS while an investigation is underway. EH advised that the current focus is on ensuring continuity of care for consumers. Most communication undertaken in the past few weeks has been face-to-face or via phone with consumers, families, and staff. Another BAC Fact Sheet is due for publication soon. 			
6.	Standard Agenda Items			
6.1	Service Options WG Update <ul style="list-style-type: none"> LG advised that a memo was sent to CEs of Mental Health Clusters seeking nomination of representatives, which have now been received. LG took the committee through the Service Options Overview. Committee agreed the arrows in the diagram 			

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Item No	Topic	Action	Committee member	Due date
	<p>need to be two way.</p> <ul style="list-style-type: none"> LG advised that IMYOS is similar to our Mobile Intensive Treatment Teams (MITT) Streams however Qld doesn't currently have anything similar for Adolescents. LG also advised that Day Units work well in Qld and that we need more of them. LG advised that Resi Rehab is like the Therapeutic Residential Service (in Goodna, etc) however consumers need to be in the Child Safety stream to access that service. Discussed that Tier 2b could potentially be a residential-only model (focused on life skills building toward independent living) with no therapeutic service. This model doesn't necessarily need intensive in-reach from CYMHS but rather a focus on teaching adolescents how to access services they need from the community. LG also advised that components of the YPARC model are useful but not wholly suited to a statewide approach. It also targets a different age group. Committee commented that a statewide policy is needed on the Target Group. Further discussion is also needed regarding length of stay. IA raised the importance of showing the linkages with adult and paediatric MH – EH confirmed this was important particularly as consumers reach 18yo. JB asked if there was data on current BAC consumers that could be shared with the Committee. LG is progressing this with WM HHS following a request from CHQ HHS Board Chair. <p>Recommendation:</p>	<p>LG to provide data on current BAC consumers</p>	LG	27/09
6.2	<p>BAC Consumer Transition Panel Update</p> <p>Discussion Points:</p> <p>Recommendation:</p>	Nil		
6.3	<p>Financial and Workforce Planning WG Update</p> <p>Discussion Points:</p> <p>Recommendation:</p>	Nil		
6.4	<p>Risk Management</p> <p>Discussion Points:</p> <ul style="list-style-type: none"> IA advised that the Risk Register is under development however requires input from Working Groups before it can be finalised. <p>Recommendation:</p>			

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Item No	Topic	Action	Committee member	Due date
6.5	Progress of key milestones and deliverables Discussion Points: Recommendation:	Nil		
6.6	Other Business	Nil		
7.	Matters for Noting			
7.1	Major correspondence	Nil		
8.	For Information			
8.1	Victoria Site Visit Report circulated to the Committee with the meeting agenda.	Noted		
Next meeting Wednesday 9th October 2013, 9am – 10.30am, CYMHS Spring Hill.				

ENDORSED BY:

Signature:

Date: /09/13

Name:

Position:

Children's Health Queensland Hospital and Health Service

Meeting Agenda

State-wide Adolescent Extended Treatment and Rehabilitation Implementation Strategy

Date:	09 October 2013
Time:	9am – 10.30am
Venue:	Room 30, CYMHS Cnr Roger & Water Streets Spring Hill <i>(parking via Roger St entrance)</i>
Teleconference Details:	<div style="background-color: #cccccc; height: 20px; width: 100%;"></div> ** Please advise secretariat if you are using T/C**

A/Chair:	Dr Leanne Geppert	A/Director of Strategy, Mental Health & Specialised Services, WM HHS
	Judi Krause (Co-chair)	Divisional Director CYMHS CHQ HHS
	Dr Stephen Stathis (Co-chair)	Clinical Director CYMHS CHQ HHS
Secretariat:	Ingrid Adamson	SW AETR Project Manager
Attendees:	Deborah Miller	A/Executive Director Office of Strategy Management, CHQ HHS
	Paul Letters	A/Divisional Director CYMHS CHQ HHS
	Josie Sorban	Director of Psychology, CHQ HHS
	Elisabeth Hoehn	A/Clinical Director CYMHS CHQ HHS
	Marie Kelly	A/Director Planning and Partnership Unit, MHAODB
	Amanda Tilse	Operational Manager Alcohol, other Drugs & Campus, Mater Hospital
	Raymond Ho	Clinical Services Program Manager, Metro South Addiction and Mental Health Service, Metro South HHS
T/C	Cara McCormack	Program Manager Rural, Remote and Indigenous Mental Health Services & Child, Adolescent and Young Adult Services/ Assistant Director of Allied Health, Mental Health Service Group, Townsville Hospital and Health Service
	Amelia Callaghan	State Manager Headspace
	Laura Johnson	Project Officer, SW AETR, WM HHS
		Carer Representative
		Consumer
Apologies:		
Observers / Guests:		

* Attachments accompany this item; papers to be tabled if available

1. Presentations

Item no	Item
1.0	Nil

Action Officer

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2. Meeting Opening		
Item no	Item	Action Officer
2.1	Welcome and Apologies	Chair
2.2	Statement of Conflict/Interest	Chair
2.3	Confirmation of the minutes from the previous meeting 23/09/13 (<i>attached</i>)	Chair
2.4	Statement of achievements	Chair
3. Business Arising from previous minutes		
Item no	Item	Action Officer
3.1	Working Group Membership – update	Chair
3.2	Draft Project Plan - update	IA
3.3	Single point of responsibility for correspondence decision	Chair
4. Matters for Decision		
Item no	Item	Action Officer
4.1	Timing of future Steering Committee Meetings, proposing: 9am to 10.30am	Chair
4.2	Amendment of ECRG Target Group definition to include <i>Alcohol and Other Drugs</i>	Chair
5. Matters for Discussion		
Item no	Item	Action Officer
5.1	Victorian Contacts for Queensland visit	Chair
5.2	Communications Strategy	Chair
6. Standard Agenda Items		
Item no	Item	Action Officer
6.1	Service Options Working Group Update <ul style="list-style-type: none"> Update on Service Options Forum held 1st October Service Options Overview 	Chair
6.2	BAC Consumer Transition Panel Update	
6.3	Financial and Workforce Planning Working group Update <ul style="list-style-type: none"> 	
6.4	Risk Management	
6.5	Progress of key milestones and deliverables <ul style="list-style-type: none"> 	
6.6	Other business	
7. Matters for Noting		
Item no	Item	Action Officer
7.1	Major correspondence Barrett Adolescents Centre Fast Fact Sheets No. 6 and 7	Chair
7.2	Upcoming Meetings Meeting of the CE and Department of Health Oversight Committee on 17 th October Meeting of the CHQ HHS Board on 31 st October	IA IA

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8. For Information (papers only)

Item no Item

Action Officer

8.1

Next Meeting

Date: Monday 21st October 2013

Time: 9am – 10.30am

Venue: Room 30, CYMHS Cnr Roger & Water Streets Spring Hill

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Children's Health Queensland Hospital and Health Service Statewide Adolescent Extended Treatment & Rehabilitation Implementation Steering Committee Action Item Register (Status Indicators: Red = Significant delay, Amber = Slight delay, Green = On Track and Blue = Completed)							
Meeting Date	Action Item #	Previous Meeting Reference	Action Item	Action Officer	Due Date	Status Update	Status
09/09/13	3.1	Committee TOR	Identify consumer representative for Steering Committee	Paul Letters	09/10/13	Completed - A consumer representative will be joining the Committee from 9/10/13	
09/09/13	3.3	Working Group Membership	Contact each working group to establish membership and convene meetings	Leanne Geppert	23/09/13	Underway	
09/09/13	4.2	Committee Action Plan	Finalise Project Plan and develop Risk Register and Comms Plan	Ingrid Adamson	TBC	Work has commenced	
09/09/13	4.2	Committee Action Plan	Submit Action Plan to CE DoH Oversight Committee for endorsement	Ingrid Adamson	18/10/13	To be incorporated into Project Plan	
23/09/13	3.1	Working Group Membership	Identify consumer representative for the Service Options Working Group	Elisabeth Hoehn	27/09/13	Completed - A consumer representative has been identified	
23/09/13	3.1	Working Group Membership	Identify a Mater Hospital Representative for the Service Options Working Group	Amanda Tilse	27/09/13	Completed	
23/09/13	3.1	Working Group Membership	Identify MHAODB representatives - speak to Marie Kelly and Ruth Catchpoole for the Financial and Workforce Planning Working Group	Leanne Geppert	27/09/13		
23/09/13	3.1	Working Group Membership	Confirm Chair for Financial and Workforce Planning Working Group	Leanne Geppert	27/09/13		
23/09/13	3.1	Working Group Membership	Identify CHQ HHS HR representative	Ingrid Adamson	27/09/13	Completed	
23/09/13	3.1	Working Group Membership	Identify CHQ HHS nursing lead representative	Ingrid Adamson	27/09/13	Will be identified week commencing 8 th Oct.	
23/09/13	3.1	Working Group Membership	Identify WM HHS nursing lead representative	Leanne Geppert	27/09/13		

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Children's Health Queensland Hospital and Health Service Statewide Adolescent Extended Treatment & Rehabilitation Implementation Steering Committee Action Item Register (Status Indicators: Red = Significant delay, Amber = Slight delay, Green = On Track and Blue = Completed)							
Meeting Date	Action Item #	Previous Meeting Reference	Action Item	Action Officer	Due Date	Status Update	Status
23/09/13	3.4	Correspondence	Convey CHQ HHS position regarding single point of correspondence to Lesley Dwyer	Leanne Geppert	09/10/13		
23/09/13	4.2	Working Group Terms of Reference	Update Working Group Terms of Reference	Ingrid Adamson	25/09/13	Completed	
23/09/13	5.1	CE DoH Oversight Committee	Confirm with DDG the Chair of committee and frequency of meetings	Deb Miller	27/09/13	Completed - Dr Steer will Chair these meetings	
23/09/13	5.1	CE DoH Oversight Committee	Invite CE Townsville HHS as member	Ingrid Adamson	27/09/13	Completed	
23/09/13	6.1	Service Options WG Update	Circulate data on current BAC consumers to committee	Leanne Geppert	27/09/13		

Children's Health Queensland Hospital and Health Service

Minutes

State-wide Adolescent Extended Treatment and Rehabilitation Implementation Strategy

Date:	09/10/2013	Time:	09:00	Venue:	Rm 30 CYMHS Cnr Rogers & Water Streets, Spring Hill
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Chair:	Divisional Director CYMHS CHQ HHS (JK) Clinical Director CYMHS CHQ HHS (SS)
Secretariat:	SW AETR Project Manager (IA)
Attendees	A/Director of Strategy, Mental Health & Specialised Services WM HHS (LG) SW AETR Project Officer (LJ) A/Executive Director Office of Strategy Management, CHQ (DM) Director of Psychology, CHQ HHS (JS) Operational Manager Alcohol, other Drugs & Campus, Mater (AT) Clinical Services Program Manager, Metro South Addiction and Mental Health Service (RH) A/Director Planning & Partnership Unit MHAODB (MK) Carer Representative [REDACTED] Consumer Representative [REDACTED]
Teleconferenced	Program Manager Rural, Remote and Indigenous Mental Health Services & Child, Adolescent and Young Adult Services/ Assistant Director of Allied Health, Mental Health Service Group, Townsville Hospital and Health Service (CM)
Apologies	A/Clinical Director CYMHS (EH) State Manager Headspace (AC)
Observers/ Guests:	Nil

Item No	Topic	Action	Committee member	Due date
1.	Presentations			
	Nil	Nil		
2.	Meeting opening			
2.1	Welcome and Apologies		Chair	
2.2	Statement of Conflict/Interest	Nil	Chair	
2.3	Confirmation of Minutes • Correction made to item 3.1 – changed Minders Group to Beautiful Minds	Confirmed	JS	
2.4	Statement of achievements	Covered below	Chair	
	Business			
3.	Business Arising from Previous Meetings			
3.1	Working Group Membership Update <i>Working Group 1 (WG1)</i> It was decided to convene the group as a half day forum rather than a series of fortnightly meetings. There was good representation from around the state with 16 attendees. The first session looked at the current state of service delivery across the continuum. The second			

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Item No	Topic	Action	Committee member	Due date
	part of the forum looked at opportunities along the service continuum.			
	DM raised the possibility of sending out consumer scenarios to attendees to consider whether the different cases would fit what has been proposed for future state. SS agreed that sending out the scenarios via email would be a good option.	Email consumer scenarios to WG1 representatives for input	SS	21/10
	JK raised that the Statewide Advisory Group convenes at the end of the month and queried whether they could be engaged to review the service options.			
	LG shared concerns regarding scope and timeframes. Involving a new group at this time may impact these timeframes. The benefit of using WG1 participants is that they have the context. It was suggested that a presentation could be made to the Statewide Advisory Group instead.	Present to the Child and Youth Statewide Advisory Group	SS	31/10
	The forum highlighted that there is potential for greater utilisation of existing mental health services and community-based services. Greater understanding of the services available is also needed. It was agreed that understanding of the full range of mental health services could be improved.			
	AT raised the importance of keeping communication open and people informed. JK said she receives enquiries from the Mental Health Cluster and feels a one page briefing note update would be worthwhile. JK suggested getting the briefing note out as soon as possible.	Issue briefing note to Mental Health Cluster re forward direction when strategy in place	IA	31/10
	LG also raised the importance of CHQ developing a communication strategy for the statewide initiative. IA confirmed CHQ have a meeting with their Media and Communications team tomorrow to progress.			
	SS asked how we could also best reach consumers and carer. AT raised putting it on the CHQ site. DM confirmed that this could be done and would be looked at with the CHQ Media and Communications team.	Establish web page for Initiative	IA	31/10
	IA also confirmed that she is meeting a consumer representative tomorrow for potential participation on WG1.	Meet with consumer representative	IA	10/10
	<i>Working Group 2</i> LG confirmed that this working group has been converted to a Clinical Care Panel. They will report status, risks and issues to the Steering Committee. This is a WM HHS driven panel. EH and LJ are the conduits to the Steering Committee from the Panel. They will commence work next week.			

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Item No	Topic	Action	Committee member	Due date
	<p>When the A/Clinical Director, BAC, started, she reviewed every consumer's current individual needs, so work has already commenced in this space.</p> <p>A concern raised at the last meeting was that of putting pressure on other service areas. LG confirmed that this hasn't eventuated at this stage and status updates will be provided.</p> <p>LG confirmed that there have been no further admissions to BAC and that the wait list is currently being addressed. It was decided that further admissions would not be in the best interests of current consumers. It was noted that this decision has not been externally communicated at this stage.</p> <p>A community and staff factsheet have been released and advise that the BAC building will be closed by the end of January. It was agreed to advise of this decision as there was continuing distress and concern over not knowing when the facility would close. WM HHS has been clear that this is a flexible date dependent upon the needs of current consumers.</p> <p>JS asked if it is known across the state that BAC is not taking on more consumers. JK asked whether there should be a communication to the CYMHS sector. asked if families on the waitlist know as yet. LG confirmed this decision has not been communicated more broadly than BAC at this stage. JK recommended a brief be sent to MH Cluster and CEs advising of the current position regarding BAC closure and "no further admissions".</p> <p>LG advised that waitlist consumers stay with their respective HHS until taken on by BAC; however, they have found that, in some cases, either the HHS is discharging the consumer as soon as they are placed on the waitlist or that the family has disengaged from services and are assuming a "holding pattern" waiting for a place in BAC.</p> <p>AT asked if we are announcing a replacement service from 1st February 2014. JK advised there will be no one singular replacement service but rather a range of services, which we are incrementally working toward. LG advised that there will be additional service options; however, there won't be a bed based option in the short term – this is not possible to deliver in the next 3 months.</p> <p>For current consumers at BAC, WM HHS will utilise operational funds to support consumers in their home/community until extended service options are in place. JK asked about consumers on the waitlist – it was confirmed that the panel would review the waitlist and provide wrap around services where required. It was agreed that this needed to be</p>	Brief re current BAC position to MH Cluster and CEs	LG	18/10

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Item No	Topic	Action	Committee member	Due date
	<p>communicated to those families and staff by the Clinical Care Panel.</p> <p>LG noted that some bed-based care is needed; however, not as currently provided at BAC, e.g. 15 beds, 2 years stay. LG also noted that some participants in WG1 queried whether a bed-based option was needed at all. The WG1 forum did raise the need for a multi-disciplinary statewide panel to assess consumer needs to look at a range of options for consumers in the area. JK raised whether this fits in with Complex Care Coordination, being a similar concept. Other options proposed by WG1 were coordination roles, more Day Program Units, and mobile outreach services.</p> <p>JS commented that the way in which the waitlist is managed now is like a prototype for how services will be provided going forward – it would seem to be the structure that is underway.</p> <p>LG asked if a statewide panel should be established immediately. JS suggested that the current Consumer Care Panels being created to address the waitlist would identify commonalities, risks and issues that would help inform a statewide panel. It was broadly agreed to hold off announcing a single statewide panel until wait list consumer care panels could be observed further.</p> <p>█ asked how many consumers on the waitlist. LJ advised that the current number on the BAC wait list is between 10 and 20. <i>(On 8/10/13 it was confirmed that there are 8 consumers on the waitlist.)</i></p> <p>Working Group 3 WG3 will address workforce and financial implications of the initiative. There is a hold up on the establishment of this WG. LG advised that the membership has been elevated to a higher level of representation, so changes are being made. WM HHS has asked their Chief Financial Officer and Executive Director of Workforce to look at the Terms of Reference.</p> <p>Recommendation:</p> <ul style="list-style-type: none"> • JK proposes a presentation to the Child and Youth Statewide Advisory Group. SS agreed to provide the update to the group. • JK also proposed that a one page brief be sent to MH Clusters advising of the current position regarding BAC closure and "no further admissions". It was also recommended to communicate that there will be service options post January 2014, although a bed-based replacement will not be immediately available. • JK recommended an email from Sharon Kelly to EDs advising of no more admissions into BAC. 			

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Item No	Topic	Action	Committee member	Due date
3.2	Project Plan <ul style="list-style-type: none"> Project Plan, Risk Register, and Communications Plan are still under development. Draft Project Plan will be circulated to Committee members for the next meeting 	Finalise Project Plan	IA	21/10
3.4	Single point of responsibility for correspondence <ul style="list-style-type: none"> Correspondence has slowed down and is of similar content to what has been received to date. A variety of mechanisms have been used to communicate with community members. Most people sending through correspondence are past or present users of BAC services. Agreed it made sense for WM HHS to retain correspondence responsibility in regard to BAC. Only a small number of families have a significant investment in BAC and this is where most of the concerns are coming from. IA queried whether it is possible to communicate what interim wrap around services will "look like". [redacted] supported the view that currently it is a little challenging to draw the dots regarding service care. Consumers/carers learn what to expect in ED and Acute but when they get into extended rehabilitation, the services options are relatively unknown so, when there is a change of service, it is unclear where consumers go from there. [redacted] noted that it is difficult to know how much information to share while respecting confidentiality and without divulging too much so as to cause further confusion. [redacted] noted that it was really positive to hear that the Clinical Care Panel was working with consumers and carers in assessing consumer need – it is imperative as individual care plans are so important. [redacted] felt that some information is better than none at all. [redacted] queried how consumers and families could find information. Aside from the BAC site, additional information and communication is needed. It was noted that people accessing acute mental health services need more information, as do the staff that manage those services. JK agreed we need to inform the sector, and consider the broader communication strategy, including the message that this is an opportunity to do things better. Recommendation: <ul style="list-style-type: none"> CHQ to finalise broader communication regarding the statewide service development and approach for the community and consumers/carers in the near future. 	CHQ to finalise communications strategy	IA	21/10
4.	Matters for Decision			
4.1	Steering Committee Meetings <ul style="list-style-type: none"> LG proposed moving the timing of future meetings to 9am. Committee supported this change. 	Update committee meeting calendar appointment.	IA	11/10



Children's Health Queensland Hospital and Health Service

Item No	Topic	Action	Committee member	Due date
4.2	Target Group Definition <ul style="list-style-type: none"> During WG1 Forum, it was suggested that the ECRG Target Group definition be expanded to include Alcohol and Other Drugs. Recommendation: <ul style="list-style-type: none"> Committee agreed to amend wording with: "that may include co-morbid alcohol and other drug problems". 	Update target group definition	IA	11/10
5.	Matters for Discussion			
5.1	Victorian Contacts for Queensland Visit <ul style="list-style-type: none"> LG advised that she has been in touch with, Sandra Radovini, a Victorian Mental Health contact, who would be happy to come to Qld to discuss adolescent mental health services in Victoria. Sandra can come to Queensland in mid-November, which will suit the timing around service options development. It was suggested that she could also speak with target groups such as the Child and Youth Faculty and consumers, families, and carers Have started looking at dates (14th or 15th November). 	Confirm travel dates.	LG	31/10
5.2	Communications Strategy <ul style="list-style-type: none"> Addressed above 			
6.	Standard Agenda Items			
6.1	Service Options WG Update <p>Discussion Points:</p> <ul style="list-style-type: none"> Addressed above <p>Recommendation:</p>			
6.2	BAC Consumer Transition Panel Update <p>Discussion Points:</p> <ul style="list-style-type: none"> Addressed above <p>Recommendation:</p>	Nil		
6.3	Financial and Workforce Planning WG Update <p>Discussion Points:</p> <ul style="list-style-type: none"> Addressed above <p>Recommendation:</p>	Nil		
6.4	Risk Management <p>Discussion Points:</p> <ul style="list-style-type: none"> Risk Register is still under development and requires input from Working Groups before it can be finalised. <p>Recommendation:</p>	Continue register development	IA	21/10

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Item No	Topic	Action	Committee member	Due date
6.5	Progress of key milestones and deliverables Discussion Points: Recommendation:	Nil		
6.6	Other Business	Nil		
7.	Matters for Noting			
7.1	Major correspondence <ul style="list-style-type: none"> Barrett Adolescent Centre Fast Fact Sheets No. 6, 7, and 8 have been developed and distributed to consumers and families. A BAC Staff Communiqué has also been developed and distributed 	Circulate copies of the BAC Fast Fact Sheets to Committee Members	IA	21/10
8.	For Information			
8.1	Committee was advised that: <ul style="list-style-type: none"> The CE and Department of Health Oversight Committee will meet on the 17th October The CHQ HHS Board will meet on the 31st October. Updates on the SW AETRS will be provided to both groups.			
Next meeting Monday 21 st October 2013, 9am – 10.30am, CYMHS Spring Hill.				

ENDORSED BY:

Signature:

Date: /09/13

Name:

Position:

Children's Health Queensland Hospital and Health Service

Meeting Agenda

State-wide Adolescent Extended Treatment and Rehabilitation Implementation Strategy

Date:	21 October 2013
Time:	9am – 10.30am
Venue:	Seminar Room, CYMHS, Cnr Roger and Water Streets Spring Hill (parking via Roger St entrance)
Video/ Teleconference Details:	Details will be provided on request ** Please advise secretariat if you want to dial in **

Chair:	Judi Krause	Divisional Director CYMHS CHQ HHS
	Stephen Stathis	Clinical Director CYMHS CHQ HHS
Secretariat:	Ingrid Adamson	SW AETR Project Manager
Attendees:	Amanda Tilse	Operational Manager Alcohol, other Drugs & Campus, Mater Hospital
T/C	Amelia Callaghan	State Manager Headspace
T/C	Cara McCormack	Program Manager Rural, Remote and Indigenous Mental Health Services & Child, Adolescent and Young Adult Services/ Assistant Director of Allied Health, Mental Health Service Group, Townsville Hospital and Health Service
	Deborah Miller	A/Executive Director Office of Strategy Management, CHQ HHS
	Elisabeth Hoehn	A/Clinical Director CYMHS CHQ HHS
	Josie Sorban	Director of Psychology, CHQ HHS
	Laura Johnson	Project Officer, SW AETR, WM HHS
	Leanne Geppert	A/Director of Strategy, Mental Health & Specialised Services, WM HHS
T/C	Marie Kelly	A/Director Planning and Partnership Unit, MHAODB
	Raymond Ho	Clinical Services Program Manager, Metro South Addiction and Mental Health Service, Metro South HHS
		Carer Representative
		Consumer Representative
Apologies:		
Observers / Guests:		

* Attachments accompany this item; papers to be tabled if available

1. Presentations

Item no	Item
1.0	Nil

Action Officer

Children's Health Queensland Hospital and Health Service

2.	Meeting Opening	
Item no	Item	Action Officer
2.1	Welcome and Apologies	Chair
2.2	Statement of Conflict/Interest	Chair
2.3	Confirmation of the minutes from the previous meeting (<i>attached</i>)	Chair
2.4	Statement of achievements	Chair
3.	Business Arising from previous minutes	
Item no	Item	Action Officer
3.1	Working Group Membership: <ul style="list-style-type: none"> Service Options Working Group – consumer representative identified 	IA
4.	Matters for Decision	
Item no	Item	Action Officer
4.1	SW AETR Project Plan	IA
5.	Matters for Discussion	
Item no	Item	Action Officer
5.1	Presentation from Parent's re Service Options Submission	SS
6.	Standard Agenda Items	
Item no	Item	Action Officer
6.1	Service Options Working Group Update <ul style="list-style-type: none"> Status Update Service Options Overview 	SS
6.2	Clinical Care Transition Panels Update <ul style="list-style-type: none"> Status Update 	LG
6.3	Financial and Workforce Planning Working group Update <ul style="list-style-type: none"> Status Update 	LG / IA
6.4	Risk Management <ul style="list-style-type: none"> Review Risk Register 	IA
6.5	Progress of key milestones and deliverables	
6.6	Other business	
7.	Matters for Noting	
Item no	Item	Action Officer
7.1	Major correspondence	
8.	For Information (papers only)	
Item no	Item	Action Officer
8.1		

Children's Health Queensland Hospital and Health Service

Next Meeting**Date:** Monday 4th November 2013**Time:** 9am – 10.30am**Venue:** Seminar Room, CYMHS Cnr Roger & Water Streets Spring Hill

Children's Health Queensland Hospital and Health Service

Children's Health Queensland Hospital and Health Service Statewide Adolescent Extended Treatment & Rehabilitation Implementation Steering Committee Action Item Register (Status Indicators: Red = Significant delay, Amber = Slight delay, Green = On Track and Blue = Completed)							
Meeting Date	Action Item #	Previous Meeting Reference	Action Item	Action Officer	Due Date	Status Update	Status
09/09/13	3.3	Working Group Membership	Contact each working group to establish membership and convene meetings	Leanne Geppert	23/09/13	Finance and Workforce Working Group yet to convene	
09/09/13	4.2	Committee Action Plan	Finalise Project Plan and develop Risk Register and Comms Plan	Ingrid Adamson	21/10/13	With CE Oversight Committee	
23/09/13	3.1	Working Group Membership	Identify MHAODB representatives - speak to Marie Kelly and Ruth Catchpoole for the Financial and Workforce Planning Working Group	Leanne Geppert	27/09/13	Completed	
23/09/13	3.1	Working Group Membership	Confirm Chair for Financial and Workforce Planning Working Group	Leanne Geppert	27/09/13	Completed	
23/09/13	3.1	Working Group Membership	Identify CHQ HHS nursing lead representative	Ingrid Adamson	27/09/13	Completed	
23/09/13	3.1	Working Group Membership	Identify WM HHS nursing lead representative	Leanne Geppert	27/09/13	Completed	
23/09/13	3.4	Correspondence	Convey CHQ HHS position regarding single point of correspondence to Lesley Dwyer	Leanne Geppert	09/10/13	Completed	
23/09/13	6.1	Service Options WG Update	Circulate data on current BAC consumers to committee	Leanne Geppert	27/09/13	Completed - update circulated with 09/10 minutes	
09/10/13	3.1	Working Group Update	Email consumer scenarios to WG1 representatives for input	Leanne Geppert Stephen Stathis	21/10/13	Underway	
09/10/13	3.1	Working Group Update	Present to the Child and Youth Statewide Advisory Group at the end of the month	Stephen Stathis	31/10/13		
09/10/13	3.1	Working Group Update	Issue briefing note to Mental Health Cluster re forward direction	Ingrid Adamson	31/10/13	Completed - included with BAC brief	
09/10/13	3.1	Working Group Update	Establish web page for SW AETR Initiative - part of CHQ Communications Strategy	Ingrid Adamson	31/10/13		

Children's Health Queensland Hospital and Health Service

Children's Health Queensland Hospital and Health Service Statewide Adolescent Extended Treatment & Rehabilitation Implementation Steering Committee Action Item Register (Status Indicators: Red = Significant delay, Amber = Slight delay, Green = On Track and Blue = Completed)							
Meeting Date	Action Item #	Previous Meeting Reference	Action Item	Action Officer	Due Date	Status Update	Status
09/10/13	3.1	Working Group Update	Meet with consumer representative	Ingrid Adamson	10/10/13	Completed - consumer will be joining Service Options WG	
09/10/13	3.1	Working Group Update	Brief re current BAC position to MH Cluster and CEs	Leanne Geppert	18/10/13	Completed	
09/10/13	3.4	Correspondence	CHQ to finalise communications strategy	Ingrid Adamson	21/10/13	Underway	
09/10/13	4.1	Steering Committee Meetings	Update committee meeting calendar appointments.	Ingrid Adamson	11/10/13	Completed	
09/10/13	4.2	Target Group Definition	Update target group definition	Ingrid Adamson	11/10/13	Completed	
09/10/13	5.1	Victorian Visit	Confirm travel dates with Sandra Radovini	Leanne Geppert	31/10/13		
09/10/13	7.1	Correspondence	Circulate copies of the BAC Fast Fact Sheets to Committee Members	Ingrid Adamson	21/01/13	Completed	

Children's Health Queensland Hospital and Health Service

Minutes

State-wide Adolescent Extended Treatment and Rehabilitation Implementation Strategy

Date:	21/10/2013	Time:	09:00am	Venue:	Rm 30 CYMHS Cnr Rogers & Water Streets, Spring Hill
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Chair:	Clinical Director CYMHS CHQ HHS (SS)
Secretariat:	SW AETR Project Manager (IA)
Attendees	<p>A/Director of Strategy, Mental Health & Specialised Services WM HHS (LG)</p> <p>SW AETR Project Officer (LJ)</p> <p>A/Executive Director Office of Strategy Management, CHQ (DM)</p> <p>Operational Manager Alcohol, other Drugs & Campus, Mater (AT)</p> <p>Clinical Services Program Manager, Metro South Addiction and Mental Health Service (RH)</p> <p>A/Clinical Director CYMHS (EH)</p> <p>Carer Representative [REDACTED]</p> <p>Consumer Representative [REDACTED]</p> <p>Teleconferenced A/Director Planning & Partnership Unit MHAODB (MK)</p> <p>Teleconferenced State Manager Headspace (AC)</p> <p>Teleconferenced Program Manager Rural, Remote and Indigenous Mental Health Services & Child, Adolescent and Young Adult Services/ Assistant Director of Allied Health, Mental Health Service Group, Townsville Hospital and Health Service (CM)</p>
Apologies	<p>Divisional Director CYMHS CHQ HHS (JK)</p> <p>Director of Psychology, CHQ HHS (JS)</p>
Observers/ Guests:	Nil

Item No	Topic	Action	Committee member	Due date
1.	Presentations			
	Nil	Nil		
2.	Meeting opening			
2.1	Welcome and Apologies	Nil	Chair	
2.2	Statement of Conflict/Interest	Nil	Chair	
2.3	Confirmation of Minutes	Confirmed	SS	
2.4	Statement of achievements	Covered below	Chair	
	Business			
3.	Business Arising from Previous Meetings			
3.1	<p>Working Group Membership Update</p> <p><i>Working Group 1 (WG1)</i></p> <ul style="list-style-type: none"> IA met with a consumer representative who is keen to participate on WG1. This completes membership. 			
4.	Matters for Decision			
4.1	<p>SW AETR Project Plan</p> <ul style="list-style-type: none"> [REDACTED] noted the project plan was easy to understand and the risk management section covered every base, particularly 2.6. No other comments received. 			

Children's Health Queensland Hospital and Health Service

Item No	Topic	Action	Committee member	Due date
	Recommended <ul style="list-style-type: none"> Endorse project plan 			
5.	Matters for Discussion			
5.1	Presentation of Parent's Submission <ul style="list-style-type: none"> Noted that parents of current BAC inpatients have been invited to present their submission to the Steering Committee. The purpose of the presentation is to provide parents an opportunity to speak to their submission. RH asked for a copy of the submission before the presentation. █ noted that █ will join the Committee meeting after the parent submission. SS suggested that █ could teleconference in, if preferred. █ noted that █ is happy to be present IA will draft up a consumer engagement framework to provide to parents regarding the format and purpose of the presentation. AT asked whether we need to make someone available to debrief with parents after the session due to the emotion associated with this. LG suggested that further consideration is needed to determine the most appropriate person. EH noted that the parents will present their submission well but it will be important to provide them sufficient time to discuss their concerns. AT noted that the Steering Committee also needed to be clear about their role in the presentation. LG noted that Lesley Dwyer will formally respond to the parent enquiring about the opportunity to present, and will advise of the next steps. Recommended <ul style="list-style-type: none"> Parents will present at the next Steering Committee, from 9.15am, for half an hour with time for discussion afterwards. Next Committee Meeting is extended half an hour to address standard agenda items after the Parent Presentation. 	<p>Circulate Parent Submission to Committee members</p> <p>Draft consumer engagement framework</p> <p>CHQ have put forward Stephen Stathis – supported by Co-Chair</p> <p>Prepare guidelines for Steering Committee</p>	<p>IA</p> <p>IA</p> <p>IA</p>	<p>30/10</p> <p>25/10</p> <p>30/10</p>
6.	Standard Agenda Items			
6.1	Service Options WG Update <ul style="list-style-type: none"> It was noted that case scenarios have been circulated to WG1 Representatives for feedback and comment The Parent Submission received will contribute to the thinking around service options WM HHS are also sending a request for input to parents of consumers on the waitlist. Service Options Update Brief <ul style="list-style-type: none"> █ noted the length of stay – that rehabilitation 	Present findings from scenario work back to Committee	SS	04/11

Children's Health Queensland Hospital and Health Service

Item No	Topic	Action	Committee member	Due date
	<p>takes time; each consumer is different; and we need to be careful not to enforce strict timeframes on length of stay.</p> <ul style="list-style-type: none"> also noted that after hour support is absolutely vital to families and carers. Committee noted that the WG raised the need for services for the 18 to 25 years and that it now needs addressing. More clarity regarding how to transition adolescents into adult mental health services is also needed SS noted if we push the age limit up from 17 to 25yo, then we need to advocate for funding for those services. MK agreed, noting Victoria runs services from 16 to 25yo and it is about applying for funding to support services across this age range. EH noted that the model could consider some flexibility around age range as it does with length of stay. noted a new model could make it easier to transition to adult services. RH and both noted that it is not so much about the age as much as it is about the transition to other services. RH notes that the design of the service is important. EH notes that adult MH and CYMH need to discuss this topic further. 	Include Adult MH in service model discussions	SS	Ongoing
6.2	<p>Clinical Care Transition Panels Update</p> <ul style="list-style-type: none"> Panels are identifying plans for each individual and, although there have been challenges the panels are working through these. <p>Recommendation:</p> <ul style="list-style-type: none"> Monthly status update for inclusion in the SW AETR Project Status Report 	Provide status update for monthly report	LJ	31/10
6.3	<p>Financial and Workforce Planning WG Update</p> <ul style="list-style-type: none"> Good representation across WM and CHQ HHS This group is meeting tomorrow (22nd) and the majority of people are able to attend The group will be reviewing the Terms of Reference 			
6.4	<p>Risk Management</p> <ul style="list-style-type: none"> Risk Register will be developed from the Project Plan. Working Groups are invited to propose risks for inclusion, where needed The Committee will be notified of any risks that change in status to high or extreme; or any risks that eventuate 			
6.5	<p>Progress of key milestones and deliverables</p> <ul style="list-style-type: none"> An update on progress will be provided through the Project Gantt Chart at future meetings 	Complete Gantt Chart for next meeting	IA	04/11

Children's Health Queensland Hospital and Health Service

Item No	Topic	Action	Committee member	Due date
6.6	Other Business <ul style="list-style-type: none"> Nil 	Nil		
7.	Matters for Noting			
7.1	Major correspondence <ul style="list-style-type: none"> Nil 			
8.	For Information			
8.1	<ul style="list-style-type: none"> It was noted that the dates of 14th and 15th November have been tentatively set for Sandra Radovini's visit from Victoria. More information is to come on this visit. 			
Next meeting: Monday 4 th November 2013, 9am – 11am, CYMHS Spring Hill.				

ENDORSED BY:

Signature:

Date: /09/13

Name:

Position:

Children's Health Queensland Hospital and Health Service

Meeting Agenda

State-wide Adolescent Extended Treatment and Rehabilitation Implementation Strategy

Date:	4 November 2013
Time:	9am – 10.30am
Venue:	Seminar Room, CYMHS, Cnr Roger and Water Streets Spring Hill (parking via Roger St entrance)
Video/ Teleconference Details:	Details will be provided on request <u>** Please advise secretariat if you want to dial in **</u>

Chair:	Judi Krause	Divisional Director CYMHS CHQ HHS
	Stephen Stathis	Clinical Director CYMHS CHQ HHS
Secretariat:	Ingrid Adamson	SW AETR Project Manager
Attendees:	Amelia Callaghan	State Manager Headspace
T/C (not video)	Cara McCormack	Program Manager Rural, Remote and Indigenous Mental Health Services & Child, Adolescent and Young Adult Services/ Assistant Director of Allied Health, Mental Health Service Group, Townsville Hospital and Health Service
	Deborah Miller	A/Executive Director Office of Strategy Management, CHQ HHS
	Elisabeth Hoehn	A/Clinical Director CYMHS CHQ HHS
	Josie Sorban	Director of Psychology, CHQ HHS
	Laura Johnson	Project Officer, SW AETR, WM HHS
	Leanne Geppert	A/Director of Strategy, Mental Health & Specialised Services, WM HHS
	Marie Kelly	A/Director Planning and Partnership Unit, MHAODB
	Raymond Ho	Clinical Services Program Manager, Metro South Addiction and Mental Health Service, Metro South HHS
T/C		Carer Representative
		Consumer Representative
Apologies:	Amanda Tilse	Operational Manager Alcohol, other Drugs & Campus, Mater Hospital
Observers / Guests:		

* Attachments accompany this item; papers to be tabled if available

1. Presentations

Item no Item

Action Officer

1.0 Parents' Submission (9.30am to 10am)

Chair

Children's Health Queensland Hospital and Health Service

2. Meeting Opening		
Item no	Item	Action Officer
2.1	Welcome and Apologies	Chair
2.2	Statement of Conflict/Interest	Chair
2.3	Confirmation of the minutes from the previous meeting (<i>attached</i>)	Chair
2.4	Statement of achievements	Chair
3. Business Arising from previous minutes		
Item no	Item	Action Officer
3.1	• Nil	
4. Matters for Decision		
Item no	Item	Action Officer
4.1	• Nil	
5. Matters for Discussion		
Item no	Item	Action Officer
5.1	Visit to NSW Walker and Rivendell Units	SS / JK
5.2	Project staffing allocation post January 2014	Chair
6. Standard Agenda Items		
Item no	Item	Action Officer
6.1	Service Options Working Group Update	
	• Status Update	SS
	• Case Scenario Summary	
6.2	Clinical Care Transition Panels Update	
	• Status Update	LG
6.3	Financial and Workforce Planning Working group Update	
	• Status Update	LG / IA
6.4	Risk Management	
	• Nil changes to the Risk Register	IA
6.5	Progress of key milestones and deliverables	
	• Monthly Status Report	IA
6.6	Other business	
7. Matters for Noting		
Item no	Item	Action Officer
7.1	Major correspondence	
	• ABC – World Today Interview	SS
8. For Information (papers only)		
Item no	Item	Action Officer
8.1	Following discussions with Sandra Radovini, from Victoria, her visit is being scheduled for early December. An agenda for her visit is under development.	LG

Children's Health Queensland Hospital and Health Service

Next Meeting

Date: Monday 18th November 2013

Time: 9am – 10.30am

Venue: Seminar Room, CYMHS Cnr Roger & Water Streets Spring Hill

Children's Health Queensland Hospital and Health Service

Children's Health Queensland Hospital and Health Service Statewide Adolescent Extended Treatment & Rehabilitation Implementation Steering Committee Action Item Register (Status Indicators: Red = Significant delay, Amber = Slight delay, Green = On Track and Blue = Completed)							
Meeting Date	Action Item #	Previous Meeting Reference	Action Item	Action Officer	Due Date	Status Update	Status
09/09/13	3.3	Working Group Membership	Contact each working group to establish membership and convene meetings	Leanne Geppert	23/09/13	First meeting 22/10/13 - CE Oversight Committee direction required	
09/09/13	4.2	Committee Action Plan	Finalise Project Plan; and develop Risk Register and Comms Plan	Ingrid Adamson	21/10/13	Project Plan endorsed and Risk Register developed; Comms Plan still under development	
09/10/13	3.1	Working Group Update	Email consumer scenarios to WG1 representatives for input	Leanne Geppert Stephen Stathis	21/10/13	Completed	
09/10/13	3.1	Working Group Update	Present to the Child and Youth Statewide Advisory Group at the end of the month	Stephen Stathis	31/10/13		
09/10/13	3.1	Working Group Update	Establish web page for SW AETR Initiative - part of CHQ Communications Strategy	Ingrid Adamson	31/10/13		
09/10/13	3.4	Correspondence	CHQ to finalise communications strategy	Ingrid Adamson	21/10/13	Underway	
09/10/13	5.1	Victorian Visit	Confirm travel dates with Sandra Radovini	Leanne Geppert	31/10/13	Underway	
21/10/13	5.1	Parent Submission	Circulate Parent Submission to Committee Members	Ingrid Adamson	30/10/13	Completed	
21/10/13	5.1	Parent Submission	Circulate consumer engagement framework/Committee guidelines	Ingrid Adamson	30/10/13	Completed	
21/10/13	6.1	Service Options Working Group	Present findings from Case Scenario responses	Stephen Stathis	04/11/13	Underway	
21/10/13	6.2	Clinical Care Panel	Provide status update for monthly report	Laura Johnston	31/10/13	Completed	
21/10/13	6.5	Project Milestones	Present completed Gantt Chart	Ingrid Adamson	04/11/13	Underway	

Children's Health Queensland Hospital and Health Service

Minutes

State-wide Adolescent Extended Treatment and Rehabilitation Implementation Strategy

Date:	04/11/2013	Time:	09:00am	Venue:	Rm 30 CYMHS Cnr Rogers & Water Streets, Spring Hill
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Chair:	Divisional Director CYMHS CHQ HHS (JK) Clinical Director CYMHS CHQ HHS (SS)
Secretariat:	SW AETR Project Manager (IA)
Attendees	A/Director of Strategy, Mental Health & Specialised Services WM HHS (LG) SW AETR Project Officer (LJ) A/Executive Director Office of Strategy Management, CHQ (DM) Clinical Services Program Manager, Metro South Addiction and Mental Health Service (RH) A/Clinical Director CYMHS (EH) Director of Psychology, CHQ HHS (JS)
Teleconferenced	Carer Representative [REDACTED] Consumer Representative [REDACTED] A/Director Planning & Partnership Unit MHAODB (MK) State Manager Headspace (AC)
Apologies	Program Manager Rural, Remote and Indigenous Mental Health Services & Child, Adolescent and Young Adult Services/ Assistant Director of Allied Health, Mental Health Service Group, Townsville Hospital and Health Service (CM) Operational Manager Alcohol, other Drugs & Campus, Mater (AT)
Observers/ Guests:	[REDACTED]

Item No	Topic	Action	Committee member	Due date
1.	Presentations			
	Parent Presentation <ul style="list-style-type: none"> [REDACTED] and [REDACTED] presented to the Committee. They also distributed some handouts for the Committee's Information After the parents left, LG advised care planning is underway and that there is no imperative to have children out by 13th December. This date is the end of the school term. LG advised that, if at the end of January, they still have consumers then they will keep the BAC doors open to care for them. 	Distribute handouts provided by parents	IA	8/11
2.	Meeting opening			
2.1	Welcome and Apologies	Nil	Chair	
2.2	Statement of Conflict/Interest	Nil	Chair	
2.3	Confirmation of Minutes	Confirmed	LG, EH	
2.4	Statement of achievements <ul style="list-style-type: none"> LG wanted to acknowledge that the two districts are working well together as issues arise and appreciates the collaboration. 	Covered below	Chair	

Children's Health Queensland Hospital and Health Service

Item No	Topic	Action	Committee member	Due date
Business				
3.	Business Arising from Previous Meetings			
3.1	Nil			
4.	Matters for Decision			
4.1	Nil			
5.	Matters for Discussion			
5.1	<ul style="list-style-type: none"> JK has had communication with Lesley van Schoubroeck and she advised that she is receiving questions regarding BAC and asked if it would be ok to distribute the BAC Fact Sheets to her. LG agreed to add her to the distribution list so she receives the latest fact sheets as they are produced. <p>Visit to NSW Walker and Rivendell Units</p> <ul style="list-style-type: none"> JK shared information regarding the recent site visit to NSW. A site visit report will be circulated to the steering committee. RH raised the question: what are the resource differences for NSW families compared with QLD? JK stated further information could be collected on this. EH noted that the discharge experience at BAC has been challenging – not in so far as families not engaging but rather getting them involved in the ongoing management of their child post discharge. It was noted that education is a critical element in this and we need to look at how this is done. For example, Mater and RCH schools are identified as leaders nationally – need to look at what they are doing well. Also need to look at how Education complements the mental health service. <p>Project Staffing Allocation</p> <ul style="list-style-type: none"> Due to time constraints this item was not discussed. 	<p>Add Lesley to distribution list</p> <p>Distribute site visit report</p> <p>Seek further information regarding NSW services</p> <p>Explore education elements as part of service model</p>	<p>LG</p> <p>IA</p> <p>JK/SS</p> <p>SS</p>	<p>8/11</p> <p>18/11</p> <p>18/11</p> <p>Ongoing</p>
6.	Standard Agenda Items			
6.1	<p>Service Options WG Update</p> <ul style="list-style-type: none"> Due to time constraints this item, and the Case Scenario Responses, were not discussed 			
6.2	<p>Clinical Care Transition Panels Update</p> <ul style="list-style-type: none"> LJ briefly covered the Panel Status Report provided to the Committee 			
6.3	<p>Financial and Workforce Planning WG Update</p> <ul style="list-style-type: none"> Noted that agreement was not reached between WM HHS and CHQ HHS regarding the purpose and ToR for the WG. DM noted both HHSs needed to work together to collate current financial information and to inform workforce and financial requirements for future service options. Direction is now sought from the Steering 	Distribute Terms of Reference with comments and WG Minutes to Steering Committee for review	IA	8/11

Children's Health Queensland Hospital and Health Service

Item No	Topic	Action	Committee member	Due date
	Committee			
6.4	Risk Management • Nil risks to note			
6.5	Progress of key milestones and deliverables • An update on progress will be provided through the Project Gantt Chart at future meetings – still under development			
6.6	Other Business • Nil			
7.	Matters for Noting			
7.1	Major correspondence • Noted that several interviews have been held with ABC-World Today, including two with parents, one with SS on Wednesday 30 th and one with Sharon Kelly on Friday 1 st			
8.	For Information			
8.1	• It was noted that Sandra Radovini's visit will now take place in mid-December.			
Next meeting: Monday 18th November 2013, 9am – 11am, CYMHS Spring Hill.				

ENDORSED BY:

Signature:

Date: /09/13

Name:

Position:

Children's Health Queensland Hospital and Health Service

Meeting Agenda

State-wide Adolescent Extended Treatment and Rehabilitation Implementation Strategy

Date:	18 th November 2013
Time:	9am – 10.30am
Venue:	Seminar Room, CYMHS, Cnr Roger and Water Streets Spring Hill (parking via Roger St entrance)
Video/ Teleconference Details:	Details will be provided on request <u>** Please advise secretariat if you want to dial in **</u>

Chair:	Judi Krause	Divisional Director CYMHS CHQ HHS
	Stephen Stathis	Clinical Director CYMHS CHQ HHS
Secretariat:	Ingrid Adamson	SW AETR Project Manager
Attendees:	Amella Callaghan	State Manager Headspace
	Amanda Tilse	Operational Manager Alcohol, other Drugs & Campus, Mater Hospital
	Deborah Miller	A/Executive Director Office of Strategy Management, CHQ HHS
	Elisabeth Hoehn	A/Clinical Director CYMHS CHQ HHS
	Josie Sorban	Director of Psychology, CHQ HHS
	Laura Johnson	Project Officer, SW AETR, WM HHS
	Leanne Geppert	A/Director of Strategy, Mental Health & Specialised Services, WM HHS
	Marie Kelly	A/Director Planning and Partnership Unit, MHAODB
	Raymond Ho	Clinical Services Program Manager, Metro South Addiction and Mental Health Service, Metro South HHS
		Carer Representative
		Consumer Representative
Video Conf.	Cara McCormack	Program Manager Rural, Remote and Indigenous Mental Health Services & Child, Adolescent and Young Adult Services/ Assistant Director of Allied Health, Mental Health Service Group, Townsville Hospital and Health Service
Apologies:		
Observers / Guests:		

* Attachments accompany this item; papers to be tabled if available

1. Presentations

Item no	Item
1.0	• Nil

Action Officer

Children's Health Queensland Hospital and Health Service

2. Meeting Opening		
Item no	Item	Action Officer
2.1	Welcome and Apologies	Chair
2.2	Statement of Conflict/Interest	Chair
2.3	Confirmation of the minutes from the previous meeting (<i>attached</i>)	Chair
2.4	Statement of achievements	Chair
3. Business Arising from previous minutes		
Item no	Item	Action Officer
3.1	• Nil	
4. Matters for Decision		
Item no	Item	Action Officer
4.1	• SW AETRS Communications Plan	IA
5. Matters for Discussion		
Item no	Item	Action Officer
5.1	• Draft Service Model	SS
6. Standard Agenda Items		
Item no	Item	Action Officer
6.1	Service Options Working Group Update	
	• Status Update	SS
	• Case Scenario Summary	
6.2	Clinical Care Transition Panels Update	
	• Status Update	LG
6.3	Financial and Workforce Planning Working group Update	
	• Status Update	LG / IA
	• Seeking direction regarding Purpose and Terms of Reference	
6.4	Risk Management	
	• Nil changes to the Risk Register	IA
6.5	Progress of key milestones and deliverables	
	• Refer progress against Project Gantt	IA
6.6	Other business	
7. Matters for Noting		
Item no	Item	Action Officer
7.1	Major correspondence	
		SS
8. For Information (papers only)		
Item no	Item	Action Officer
8.1	Sandra Radovini's visit, from Victoria, is proposed for 10 th /11 th December. An agenda for her visit is under development.	LG

Children's Health Queensland Hospital and Health Service

Next Meeting

Date: Monday 2nd December 2013

Time: 9am – 10.30am

Venue: Seminar Room, CYMHS Cnr Roger & Water Streets Spring Hill

Children's Health Queensland Hospital and Health Service

Children's Health Queensland Hospital and Health Service Statewide Adolescent Extended Treatment & Rehabilitation Implementation Steering Committee Action Item Register (Status Indicators: Red = Significant delay, Amber = Slight delay, Green = On Track and Blue = Completed)							
Meeting Date	Action Item #	Previous Meeting Reference	Action Item	Action Officer	Due Date	Status Update	Status
09/09/13	3.3	Working Group Membership	Contact each working group to establish membership and convene meetings	Leanne Geppert	23/09/13	First meeting 22/10/13 - Steering Committee direction required	
09/10/13	3.1	Working Group Update	Establish web page for SW AETR Initiative - part of CHQ Communications Strategy	Ingrid Adamson	31/10/13		
09/10/13	3.4	Correspondence	CHQ to finalise communications strategy	Ingrid Adamson	21/10/13	Underway	
09/10/13	5.1	Victorian Visit	Confirm travel dates with Sandra Radovini	Leanne Geppert	31/10/13	Underway	
21/10/13	6.1	Service Options Working Group	Present findings from Case Scenario responses	Stephen Stathis	04/11/13	Ran out of time at meeting on 4/11	
21/10/13	6.5	Project Milestones	Present completed Gantt Chart	Ingrid Adamson	04/11/13	Underway	
04/11/13	1.1	Parent Presentation	Distribute handouts provided by parents	Ingrid Adamson	08/11/13	Completed	
04/11/13	5.1	Matters for Discussion	Add Lesley van Schoubroeck to BAC distribution list	Leanne Geppert	08/11/13		
04/11/13	5.1	NSW Visit	Distribute NSW Site Visit Report	Ingrid Adamson	18/11/13		
04/11/13	5.1	NSW Visit	Seek further information regarding NSW spectrum of services	Stephen Stathis	18/11/13	Completed - included in Site Visit Report	
04/11/13	6.3	Financial & Workforce Working Group	Distribute Terms of Reference with tracked changes and WG minutes to Steering Committee for review and comment	Ingrid Adamson	08/11/13	Completed	

Minutes

State-wide Adolescent Extended Treatment and Rehabilitation Implementation Strategy

Date:	18/11/2013	Time:	09:00am	Venue:	Rm 30 CYMHS Cnr Rogers & Water Streets, Spring Hill
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Chair:	Divisional Director CYMHS CHQ HHS (JK) Clinical Director CYMHS CHQ HHS (SS)
Secretariat:	SW AETR Project Manager (IA)
Attendees	SW AETR Project Officer (LJ)
Teleconference	A/Executive Director Office of Strategy Management, CHQ (DM) Director Queensland Centre for Perinatal and Infant Mental Health (EH) Carer Representative [REDACTED] Consumer Representative [REDACTED]
Teleconference	A/Director of Strategy, Mental Health & Specialised Services WM HHS (LG)
Videoconference	Program Manager Rural, Remote and Indigenous Mental Health Services & Child, Adolescent and Young Adult Services/ Assistant Director of Allied Health, Mental Health Service Group, Townsville Hospital and Health Service (CM)
Apologies	State Manager Headspace (AC) Operational Manager Alcohol, other Drugs & Campus, Mater (AT) Director of Psychology, CHQ HHS (JS) A/Director Planning & Partnership Unit MHAODB (MK) Clinical Services Program Manager, Metro South Addiction and Mental Health Service (RH)
Observers/ Guests:	

Item No	Topic	Action	Comm'ee member	Due date
1.	Presentations			
	Nil			
2.	Meeting opening			
2.1	Welcome and Apologies	Nil	Chair	
2.2	Statement of Conflict/Interest	Nil	Chair	
2.3	Confirmation of Minutes	Confirmed	LG, LJ	
2.4	Statement of achievements	Covered below	Chair	
	Business			
3.	Business Arising from Previous Meetings			
3.1	<ul style="list-style-type: none"> JK responded to RH's query regarding NSW's service offering. It was noted that they have a strong consultation liaison model supporting their paediatric services via their CAMHS service, although not many day programs, step up / step down, or residential units. Information about their service options is provided in the Site Visit Report to be distributed to the Committee. 	Distribute NSW Site Visit Report	IA	22/11
4.	Matters for Decision			
4.1	<ul style="list-style-type: none"> JK has provided her feedback by email. Specifically, noted that it would be appropriate to add JK as a spokesperson in light of the updates 	Incorporate changes into Communications	IA	18/11

Children's Health Queensland Hospital and Health Service

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	<p>being provided at the various forums she attends. IA to add JK to the spokesperson list.</p> <ul style="list-style-type: none"> EH noted that the Background section states that the BAC will close 31 January. Agreed to change this to close at the end of January 2014, noting that this is a flexible date and responsive to the needs of the consumer group. Nil other comments regarding the CHQ Communications Plan. 	Plan		
5.	Matters for Discussion			
5.1	<p>Draft Service Model</p> <ul style="list-style-type: none"> SS took the Committee through the elements of the proposed model of care. It was noted that the age range needs to be extended above 17yo. Moving forward, half of Grade 12 students will be 18yo. The majority of mental health consumers also typically repeat a year, extending them to 19yo. SS noted that the CE Oversight Committee was sympathetic to this. LG advised that Bill Kingswell was also very supportive of extending the age range for adolescent services. They did not, however, discuss how this would be funded. JK noted that this is an existing gap in the sector and it wouldn't be appropriate to seek funds from the adult mental health service but rather seek new funding to provide for this age group. EH queried whether Redcliffe and Caboolture could access the north Brisbane day program. SS confirmed this was the intent of a north Brisbane unit, and it could even accommodate the Sunshine Coast if families were willing to travel. Likewise, the south Brisbane day program could accommodate clients further south and west. EH noted that access to transport should be considered when determining the geographic placement of services, such as proximity to trains, etc. It was agreed that flexibility is needed so consumers can access day programs that are closest to them rather than within the specific HHS catchment they reside. One option proposed, to ensure this flexibility, is to highlight a cluster approach in service level agreements (versus a strictly HHS catchment-based approach). It was noted that the structure of service level agreements will be critical in ensuring funds are allocated to adolescent services once established. Need to give further consideration as to how this will be done. When discussing the Resi Rehab option, it was noted that NGO capability needs to be developed to provide this service and this will take time. JK noted that the Mental Health Plan is being re-written so queried whether the FTE planning targets are relevant. LG felt the targets were still relevant to include as a reference, as the MH plan has not 			

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	<p>been re-written yet. However, it should be noted that the model needs to be an outputs-based model moving forward.</p> <ul style="list-style-type: none"> SS advised that the projected funding requirements (\$17m) exceed current funds available and therefore proposed services cannot be implemented immediately, but rather will be rolled out over a period of time. JK noted, as a point of interest, that the Department of Communities pays Qld Health \$19m per annum for the Evolve program, which focuses on a reduced cohort as compared with the SW AETR target population. 			
6. Standard Agenda Items				
6.1	<p>Service Options WG Update</p> <ul style="list-style-type: none"> SS briefly covered the Case Scenarios and noted that the responses provided by WG1 participants informed the model of care. █ noted that there was a gap in the preventive side of service; however, there was a positive correlation between consumers/carers' responses and the clinicians' responses. 			
6.2	<p>Clinical Care Transition Panels Update</p> <ul style="list-style-type: none"> LJ noted that the care panels are progressing – they are undertaking significant intensive work across the districts to develop individualised transition plans. █ Approximately six to seven day patients will finish at the end of the school term. It was noted that a day program or rehab activity is important to help current consumers become more independent. School finishes on the 13th December, which will be a significant milestone for the centre. This will be an end point for education at the BAC building. EH noted that farewell activities were underway and also planned for the 13th. There is no education input over the school holidays. The BAC Education staff are going to stay together as a group, and are currently looking for a new facility (with Yeronga as an option). They intend to continue to support the existing BAC cohort going forward (and other mental health students identified). They are retaining the name <i>Barrett Adolescent School</i>. 			
6.3	<p>Financial and Workforce Planning WG Update</p> <ul style="list-style-type: none"> Noted that agreement was not reached between WM HHS and CHQ HHS regarding the purpose and ToR for the WG. JK was unclear as to whether the WG members were the most appropriate to comment on workforce needs for future service options as there 			

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	<p>high level discussions held between the DDG of Health (Michael Cleary) and the DG of Education.</p> <ul style="list-style-type: none"> WM HHS will establish a partnership arrangement with an NGO provider for the supported accommodation. It was noted that they don't have time for a full procurement process and, in lieu of, looked for a provider who had a history of delivering a similar service and experience of working with the cohort. They identified <i>After Care</i> as a preferred provider and are progressing discussions. IA asked how the transition services would be funded. LG advised that WM HHS received a commitment from Bill Kingswell that the Department of Health would provide bridging funds for these transition services. JK queried whether the services would be located in the WM HHS catchment. LG confirmed this is a case, but not on the Park premises. She advised that these services would transition within 12 months' time to where they were needed. LG noted that, due to the tight timeframes and service imperatives, it was not possible to explore another catchment option at this time. LG will send two documents regarding the transitional service plan proposal to IA for circulation to the CE Oversight Committee and Steering Committee. 	Circulate the WM HHS Transitional Service Plan Proposal	IA	18/11
7.	Matters for Noting			
7.1	Major correspondence			
	<ul style="list-style-type: none"> WM HHS has had a resurgence of letters and ministerials since Wednesday last week. Most of the correspondence is seeking a statement regarding the new service model, and whether it will include a Tier 3 inpatient component with onsite education. JK noted we can't respond with a statement about the new model of care until it has been endorsed by the respective HHS Boards. A recent draft letter in response to a similar enquiry will be circulated to the Steering Committee, and sent to the Mental Health Commissioner for her information. 	<p>Send recent letter to Steering Committee</p> <p>Send copy of letter to Mental Health Commissioner</p>	<p>IA</p> <p>JK</p>	<p>18/11</p> <p>18/11</p>
8.	For Information			
8.1	<ul style="list-style-type: none"> It was noted that Sandra Radovini's visit will now take place on 10th/11th December. LG provided an overview of the agenda. On the morning of the first day, Sandra will make a presentation to parents and consumers, followed by a presentation to staff in the afternoon. There will be a dinner on the first night, and members of the College of Psychiatry will be invited together with the CEs of WM HHS and CHQ HHS, and Bill Kingswell, MHAODB. The second day provides an opportunity for SS and JK to meet with Sandra to discuss the proposed model of care. 			
Next meeting: Monday, 2nd December, 2013, 9am - 10:30am, CYMHS Spring Hill				

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	<p>were no mental health representatives.</p> <ul style="list-style-type: none"> LG agreed with JK and reiterated that WM HHS will retain governance over the BAC workforce. LG noted that WM HHS will be handing over the BAC operational budget. IA commented that CHQ are still waiting on figures. LG agreed to follow up Ian Wright to have these sent through to CHQ. It was agreed that the financial element of the WG is still important but representation for the workforce elements is no longer appropriate. JK and SS proposed that the WG is no longer required. LG agreed with this position. <p>Recommended</p> <ul style="list-style-type: none"> It was agreed to disband the Working Group, with separate work to be undertaken on workforce and financial elements on an as-needs-basis, with progress reported back to the Steering Committee. 	<p>Follow up BAC operational budget.</p> <p>Advise Working Group representatives of Committee decision</p>	<p>LG</p> <p>IA</p>	<p>22/11</p> <p>22/11</p>
6.4	<p>Risk Management</p> <ul style="list-style-type: none"> Following the CE Oversight Committee on Friday 17th Nov, a new risk has been added to the risk register: <i>Availability of skilled workforce for future service options.</i> 			
6.5	<p>Progress of key milestones and deliverables</p> <ul style="list-style-type: none"> IA noted work is still underway on the Project Gantt and will be circulated out of session. 	Circulate Project Gantt out of session	IA	02/12
6.6	<p>Other Business</p> <ul style="list-style-type: none"> Due to the time frames regarding new service options, WM HHS is proposing to develop a transition plan of services and retain governance for these services until such time as consumers and new service options are ready for transition to occur. The first element is a time-limited, activity-based holiday program at the Park in December 2013 / January 2014. As of the beginning of February 2014, WM HHS proposes to establish a pilot day program and pilot community outreach team, and, if feasible, a supported accommodation option. All of which will be located in the WM HHS catchment. The intention is to ensure there is no gap in services provided to consumers. WM HHS presented the proposal to the CE Oversight Committee and it was agreed action needed to be taken. This work will align with the proposed service models. The target group will predominantly be current BAC consumers, and it is not intended that these services will interfere with the transition plans under development. LG noted that WM HHS needed to carefully consider the partnership with Education Qld for services provided moving forward – there will be 			