Item No	Topic	Action	Comm'ee member	Due date
	high level discussions held between the DDG of Health (Michael Cleary) and the DG of Education. 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 After Care as a preferred provider and are progressing discussions. Asked how the transition services would be funded. LG advised that WM HHS received a		member	date
	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	18/1
7.	Matters for Noting			
7.1	 Major correspondence 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	Send recent letter to Steering Committee	IA	18/11
	will be circulated to the Steering Committee, and sent to the Mental Health Commissioner for her information.	Send copy of letter to Mental Health Commissioner	JK	18/11
	For Information			
8.1	 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.			

Meeting Agenda

State-wide Adolescent Extended Treatment and Rehabilitation Implementation Strategy

Date:	2 nd December 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:	Stephen Stathis	Clinical Director CYMHS CHQ HHS
Secretariat:	Ingrid Adamson	SW AETR Project Manager
Attendees:	Amelia Callaghan	State Manager Headspace
y y are was a my area a fall ann aireachta d'a mh' ann a' fhaidh ann a mhair a fha chlàn ain ann ann a mar ann	Amanda Tilse	Operational Manager Alcohol, other Drugs & Campus, Mater Hospita
**************************************	Deborah Miller	A/Executive Director Office of Strategy Management, CHQ HHS
	Elisabeth Hoehn	Director Queensland Centre for Perinatal and Infant Mental Health
aus deur vertreten er verget in Willestein aus deur deutsche erstellt wird er springeliere des gesche der der	Josie Sorban	Director of Psychology, CHQ HHS
nar kara yana kisani anda ^{angan} an <mark>a karang angan karang angan karang angan karang angan karang angan angan ang</mark>	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:	Judi Krause	Divisional Director CYMHS CHQ HHS
Observers / Guests:		

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

1. Presentations

Item no Item

1.0 . Ni

Action Officer



Children's Health Queensland Hospital and Health Service Assessment of the Assessmen

2.	Meeting Opening	
Item no	ltem	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 (attached)	Chair
2.4	Statement of achievements	Chair
3. 1 (2.)	Business Arising from previous minutes	e de la companya de l
ltem no	Item	Action Officer
3.1	• Nil	
4.	Matters for Decision	
Item no	Item	Action Officer
4.1	Steering Committee Meetings for 2014	SS
. 5.	Matters for Discussion	
Item no	Item	Action Officer
5.1	Board feedback on draft SW AETR Model of Care	SS
5.2	Consumer/Family/Carer Communication Approach re Model of Care	IA
5.3	WM HHS Transitional Service Plan Update	LG
6.	Standard Agenda Items	
Item no	Item	Action Officer
6.1	Service Options Working Group Update	
	Status Update	SS
6.2	Clinical Care Transition Panels Update	
6.2	Clinical Care Transition Panels Update Status Update	LJ
6.2 6.3		LJ
	Status Update	LJ IA
	Status Update Risk Management	
6.3	 Status Update Risk Management Nil changes to the Risk Register 	
6.3	 Status Update Risk Management Nil changes to the Risk Register Progress of key milestones and deliverables 	IA
6.3 6.4	 Status Update Risk Management Nil changes to the Risk Register Progress of key milestones and deliverables SW AETRS Project Status Report (refer progress against Project Gantt) 	IA
6.3 6.4 6.5	 Status Update Risk Management Nil changes to the Risk Register Progress of key milestones and deliverables SW AETRS Project Status Report (refer progress against Project Gantt) Other business 	IA
6.3 6.4 6.5 7.	 Status Update Risk Management Nil changes to the Risk Register Progress of key milestones and deliverables SW AETRS Project Status Report (refer progress against Project Gantt) Other business Matters for Noting Item	IA IA
6.3 6.4 6.5 7. Item no	 Status Update Risk Management Nil changes to the Risk Register Progress of key milestones and deliverables SW AETRS Project Status Report (refer progress against Project Gantt) Other business Matters for Noting	IA IA
6.3 6.4 6.5 7. Item no	 Status Update Risk Management Nil changes to the Risk Register Progress of key milestones and deliverables SW AETRS Project Status Report (refer progress against Project Gantt) Other business Matters for Noting Item Major correspondence 	IA IA Action Officer
6.3 6.4 6.5 7. Item no	 Status Update Risk Management Nil changes to the Risk Register Progress of key milestones and deliverables SW AETRS Project Status Report (refer progress against Project Gantt) Other business Matters for Noting Item Major correspondence BAC Fast Fact Sheet #10 	IA IA Action Officer LG
6.3 6.4 6.5 7. Item no 7.1	 Status Update Risk Management Nil changes to the Risk Register Progress of key milestones and deliverables SW AETRS Project Status Report (refer progress against Project Gantt) Other business Matters for Noting Item Major correspondence BAC Fast Fact Sheet #10 Web Content for SW AETRS 	IA IA Action Officer LG



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Next Meeting

Date: Monday 16th December 2013

Time: 9am - 10.30am

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

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 = Significant 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	Establish web page for SW AETR Initiative - part of CHQ Communications Strategy	Ingrid Adamson	31/10/13	Underway	
21/10/13	6.5	Project Milestones	Circulate completed Gantt Chart	Ingrid Adamson	04/11/13	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	Completed	Total Control
18/11/13	4.1	CHQ Comms Plan	Incorporate changes into Communications Plan	Ingrid Adamson	18/11/13	Completed	1
18/11/13	6.3	Financial Data	Follow up BAC operational budget figures	Leanne Geppert	22/11/13		and the second
18/11/13	6.3	Working Group	Advise Financial and Workforce Planning Working Group of Steering Committee decision to disband	Ingrid Adamson	22/11/13	Completed	
18/11/13	6.6	Other Business	Circulate WM HHS Transitional Service Plan Proposal to Steering Committee	Ingrid Adamson	18/11/13	Completed	
18/11/13	7.1	Major Correspondence	Circulate recent response letter to Steering Committee for information	Ingrid Adamson	18/11/13	Completed	

Minutes

State-wide Adolescent Extended Treatment and Rehabilitation Implementation Strategy

Date:	02/12/2013	Time:	09:00am	Venue:	Rm 30 CYMHS Cnr Rogers & Water Streets, Spring Hill
Chair:	Cli	nical Director	CYMHS CHO	HHS (SS)	

Chair:	Clinical Director CYMHS CHQ HHS (SS)
Secretariat:	SW AETR Project Manager (IA)
Attendees	SW AETR Project Officer (LJ)
	A/Executive Director Office of Strategy Management, CHQ (DM)
	Director Queensland Centre for Perinatal and Infant Mental Health (EH)
	Carer Representative
	Operational Manager Alcohol, other Drugs & Campus, Mater (AT)
	Director of Psychology, CHQ HHS (JS)
	Clinical Services Program Manager, Metro South Addiction and Mental Health Service (RH)
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	Divisional Director CYMHS CHQ HHS (JK)
	State Manager Headspace (AC)
	A/Director Planning & Partnership Unit MHAODB (MK)
	Consumer Representative
Observers/ Guests:	

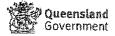
Item No	Topic	Action	Comm'ee member	Due date
1.	Presentations			
	Ni			
2.	Meeting opening			
2.1	Welcome and Apologies	Nii	Chair	
2.2	Statement of Conflict/Interest	Nil	Chair	
2.3	Confirmation of Minutes	Confirmed		
2.4	Statement of achievements	Covered below	Chair	
	Business			
3.	Business Arising from Previous Meetings			
3.1	• Nil			
4.	Matters for Decision			
4.1	 It was agreed that the first steering committee meeting for 2014 will be 13th January 2014. The second meeting will be on Tues 28th in lieu of the public holiday on the 27th. Steering committee meetings will be scheduled fortnightly from then. 	Circulate 2014 meeting appointments	IA	6/12
5.	Matters for Discussion			
5.1	Draft Model of Care The CHQ Board has endorsed the model of care as well as the immediate transition service planning work underway.			



Item No	Topic	Action	Comm'ee member	Due date
	 CHQ is now proposing to distribute the proposed model to networks, with funding sections removed. AT raised concerns with the risk of releasing the full 			
	model in the event it is misinterpreted by staff.			
	 EH suggested a fact sheet instead. 			
	DM noted that the areas/locations for services are			
	where we know the need is however they will only be implemented if funding is secured, so the model	-		
	could be provided with these sections removed. DM noted Peter Steer is keen to get the detail out to people, with qualifiers, rather than providing less			The state of the s
	information.			
	 EH suggested changing on-site education to in- reach otherwise it may confuse the Department of 			
	Education messages regarding their approach			
	going forward. LG advised that Education is looking			
	at a decentralised service model.			
	 DM suggested meeting with Education regarding the model, to see reach agreement, before 			
	circulating more broadly.		,	
	DM agreed that the concerns regarding location are			
	valid and perhaps we the detail could be reduced to areas rather than specific locations.			
	DM advised that Peter Steer and the CHQ Board			
	Chair are meeting with the Minister today to present			
	the proposed model. It is hoped that early			
	indications of what is possible might come to light.			
	 SS noted the interim subacute inpatient unit being 			
	discussed with the Mater. It is hoped that it will be			1
	in place until the Mater Unit closes in November 2014.			
	 LG advised the 4-bed Resi accommodation will be for 16 to 21yo. 			
	 SS noted that the smaller unit is more manageable 		-	
	while this service is piloted. Next step is to		-	
	determine how consumers are referred in. BAC consumers will have first preference, rolling out			
	beds to other consumers as needed.			
	 SS then discussed the proposed ACTS teams, to 			
	be supported by psychiatric positions. This service		1	
	element still requires further work, with further			
	decisions regarding the role of the psychiatrists.			
	JS raised some concerns about the size of the			
	ACTS and the ability to recruit for them. EH noted			
	that they are part of a continuum and it should be noted that there wouldn't be a sole reliance on			
	these teams. Other services would support their			
	work.			
	 AT noted that the Mater has an extended hours 			
1	team and they feel the next step would be to move			
	them to an ACTS team, to address youth that don't			
	attend their appointments.			
	SS advised that the model of care is broad and			
	HHSs should be able to mould elements to suit their			
	requirements. PH noted that HHSs should aim to modify services			
	 RH noted that HHSs should aim to modify services into a spectrum that will appropriately service their 			
	consumers.			-

Item No	Topic	Action	Comm'ee member	Due date
	 EH discussed the National Perinatal Depression Initiative and suggested a similar approach, regarding the parameters of services, could be taken with the SW AETRS. DM discussed the budget cycle process and stated that we won't know what new funding will be provided until the next funding cycle mid-2014. AT asked about the Step Up / Step Down Units. SS advised that they would be the last service option to roll out, if we can get funding. 	Send through information on the NPDI parameters	EH	6/12
5.2	Communications Approach			
	 IA asked the Committee for guidance in regard to communicating the model of care. EH noted that the age limits and Education approach should be clarified before circulation. AT feels that it should be indicated that the SU/SD won't be implemented until later. There is potential for the model to infer that there are more services available than there really is. This could create false hope amongst consumers and their families. EH suggested we wait and circulate a document outlining the ideal position (A3 diagram) together with the reality in the near future. advised that, as a carer, thinks the model looks fantastic but as a Steering Committee member understands the reality of implementation. cautioned that carers/consumers hold onto anything as hope and there could be massive disappointment if all of the services don't come through. agrees that some information needs to be released but finding the right balance will be difficult. It was agreed that the model should include a qualifier that the model will be progressively funded and implemented. RH asked what would be the preferred process noting that it doesn't matter what information we release, there will be people who will be unhappy with the information shared. hinks transparency is very important but perhaps a refined version of what has been presented to the Steering Committee. DM suggested including a row on patient safety to identify what will happen if all services are not implemented, to communicate how risk will be managed across the service spectrum. SS noted that we could communicate what will be implemented from the \$5.6m operational funding. RH also suggested face-to-face forum for families. SS confirmed a presentation will be made on the 11th December to BAC families. AT also noted that something needs to be communicated to the Service Options Working Group Representatives, so they know where 			
	developments go to. IA asked about whether to engage other families outside of the BAC. EH suggested a Ministerial			

Item No	Topic	Action	Comm'ee member	Due date
	 announcement regarding what is under development and what will be implemented in early 2014. DM will ask Peter Steer to suggest a ministerial announcement at his meeting with the Minister today. 	Raise the idea of a ministerial announcement in late December	DM	02/12
	Resolution Agreement was reached to: Hold off communicating the model of care to families and staff until further clarification reached. Circulate the service elements to the Service Options Working Group for review/comment.	Circulate model of care and service elements to WG1	IA	06/12
5.3	 WM HHS Transitional Service Plan Update LG provided an update on the Transitional Service Plan. WM HHS has submitted the plan to the DG for approval. The plan proposes 3 phases: 1. activity-based holiday program run at the BAC; 2. beginning February, to roll out a day program and supported accommodation; and 3. transition consumers into long term services. The key focus is to ensure there are no gaps to service delivery, including for consumers on the waitlist. This will Involve partnering with an NGO – After Care After Care have been chosen because they are a local NGO who have a significant foot hold in HHSs around the state; have experience in residential programs (e.g. TOHI); and are the lead agency in a number of consortia regarding headspace. It was felt that they could hit the ground running in a short time frame. The transition services were presented to WM HHS Board and subsequently endorsed. As the service is new to Queensland, governance is of key consideration. WM HHS would like to pull together a panel to consider clinical, strategic and operational issues. It is proposed that the core panel involve WM HHS, MHAODB, and CHQ, which will meet weekly. LG confirmed that the panel could report back to the Steering Committee, as it is an evolving panel and concept. SS supported the idea of the panel reporting back to the Steering Committee given the risks involved. The panel is meeting weekly on Wednesday afternoons. 			
6.1	Standard Agenda Items Service Options WG, including finance and workforce, Update			
6.2	 Refer above. Clinical Care Transition Panels Update Status Report will be sent out of session 		la de la companya de	



Item No	Topic	Action	Comm'ee member	Due date
6.3	Risk Management	A CONTRACTOR OF THE CONTRACTOR		
	There are no new risks or risks for escalation.	The second secon		
6.4	Progress of key milestones and deliverables			
	Committee is asked to note the SW AETRS Project Status Report and progress against the Project	Transport of the Control of the Cont		
	Gantt.			
6.5	Other Business			
	• Nil		1	
7.	Matters for Noting			
7.1	Major correspondence			
	Committee has received a copy of BAC Fast Fact Sheet #10.			
	Regarding the CHQ web content proposed for SW AETRS, IA noted the inclusion of the 4 tiers of service. Committee supported the information being presented.			
8.	For Information			
8.1	· Nii	-	Silver 6	
M. Mall	ting: Monday 16 th December 2013, 9am – 10.30am, CY	MUS Spring Lift		

Meeting Agenda

State-wide Adolescent Extended Treatment and Rehabilitation Implementation Strategy Steering Committee

Date:	16 th December 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:	Stephen Stathis	Clinical Director CYMHS CHQ HHS
ena antari de angan lindag sa angan sa talang an ana ana ana angan angan angan angan angan angan ang	Judi Krause	Divisional Director CYMHS CHQ HHS
Secretariat:	Ingrid Adamson	SW AETR Project Manager
Attendees:	Amelia Callaghan	State Manager Headspace
-tanker to Comme of Matthiag of Parameter (Matthiag Comme on the Comme of C	Amanda Tilse	Operational Manager Alcohol, other Drugs & Campus, Mater Hospital
	Elisabeth Hoehn	Director Queensland Centre for Perinatal and Infant Mental Health
AND AND ASSESSMENT OF THE PARTY	Laura Johnson	Project Officer, SW AETR, WM HHS
A can de caración de Control compaño está como como está como está como está como está como está como está como	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
-		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:	Josie Sorban	Director of Psychology, CHQ HHS
	Deborah Miller	A/Executive Director Office of Strategy Management, CHQ HHS
		Carer Representative
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	to the control of the
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 (attached)	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	
ltem no	Item	Action Officer
4.1	•	
5.	Matters for Discussion	
ltem no	Item	Action Officer
5.1	•	
6.	Standard Agenda Items	
Item no	Item	Action Officer
6.1	Service Options Working Group Update	
	Status Update	SS
6.2	Clinical Care Transition Panels Update	, ,
	Status Update	LJ
6.3	Risk Management	IA
<i>c</i> 4	Nil changes to the Risk Register	144
6.4	Progress of key milestones and deliverables Refer progress against Project Gantt	IA
0 5	Other business	IO.
6.5	Other pusitiess	
7.	Matters for Noting	
Item no	Item	Action Officer
7.1	Major correspondence	
	CHQ Web page is now live:	IA
	http://www.health.gld.gov.au/rch/families/cymhs-extendedtreat.asp	
8.	For Information (papers only)	
Item no	Item	Action Officer
8.1		
	Next Meeting	
Date:	Monday 13 th January 2014	
Time:	9am - 10.30am	
Venue:	Seminar Room, CYMHS Cnr Roger & Water Streets Spring Hill	

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	Establish web page for SW AETR Initiative - part of CHQ Communications Strategy	Ingrid Adamson	31/10/13	Completed	
04/11/13	5.1	Matters for Discussion	Add Lesley van Schoubroeck to BAC distribution list	Leanne Geppert	08/11/13	Completed	
18/11/13	6.3	Financial Data	Follow up BAC operational budget figures	Leanne Geppert	22/11/13		
02/12/13	4.1	Committee Meetings	Circulate the Steering Committee appointments for 2014	Ingrid Adamson	06/12/13	Completed	
02/12/13	5.1	Model of Care	Send through information on NPDI parameters to Stephen and Ingrid	Elisabeth Hoehn	06/12/13		
02/12/13	5.2	Communication of Model	Raise the idea of a ministerial announcement in late December	Deb Miller	02/12/13	Completed - scheduled for 10/01/14	
02/12/13	5.2	Communication of Model	Circulate model of care and service elements to the Service Options Working Group	Ingrid Adamson	06/12/13	Completed	11.00 11.00 11.00

Minutes

State-wide Adolescent Extended Treatment and Rehabilitation Implementation Strategy Steering Committee

Date: 16/12/2	013 Time: 09:00am Venue: Rm 30 CYMHS Cnr Rogers & Water Streets, Spring Hill
Chair:	Clinical Director CYMHS CHQ HHS (SS) Divisional Director CYMHS CHQ HHS (JK)
Secretariat:	SW AETR Project Manager (IA)
Attendees Teleconference	SW AETR Project Officer (LJ) A/Director of Strategy, Mental Health & Specialised Services WM HHS (LG) A/Director Planning & Partnership Unit MHAODB (MK) Director Queensland Centre for Perinatal and Infant Mental Health (EH) Clinical Services Program Manager, Metro South Addiction and Mental Health Service (RH) Operational Manager Alcohol, other Drugs & Campus, Mater (AT) State Manager Headspace (AC)
Apologies	Director of Psychology, CHQ HHS (JS) A/Executive Director Office of Strategy Management, CHQ (DM) 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) Carer Representative Consumer Representative
Observers/ Guests:	

Item No	Topic	Action	Comm'ee member	Due date			
	Presentations						
	NT.			(S) County			
2.	Meeting opening						
2.1	Welcome and Apologies	i Nil	Chair				
2.2	Statement of Conflict/Interest	Nil	Chair				
2.3	Confirmation of Minutes	Confirmed	EH, RH				
2.4	Statement of achievements	Covered below	Chair				
	Business						
3.	Business Arising from Previous Meetings		<u> </u>				
3.1	• Nil						
4.	Matters for Decision						
4.1	• NII						
5.	Matters for Discussion						
5.1	• NII						
6.	Standard Agenda Items						
6.1	Service Options Working Group Update		ĺ				
	SS updated the Committee on the feedback						
	received on the proposed model of care and service						
	elements. Two responses so far. One response						
	pertained to drug and alcohol, which will be						
	revisited in each of the services, including						



Item No	Topic	Action	Comm'ee member	Due date
	 involvement of services such as Dovetail, Hot House, etc. MK advised that MHAODB is going out to RFO in February and would like further information regarding these services for inclusion in that process SS and JK noted that further information regarding funding opportunities to provide an integrated service with youth drug and alcohol would be welcomed. Drug and alcohol services have a different framework to mental health and further integration is required. SS noted that given the fractured nature of services, up-skilling in-reach services would be of benefit. AC noted that Headspace would be willing to discuss further involvement also. 	Organise meeting to discuss funding opportunities	MK	13/01
6.2	Clinical Care Transition Panels Update			
	 BAC School has now closed and it was noted as an unsettling experience for consumers. Barrett Special Purpose School is being established at Yeronga. LG advised that schools have to be gazetted before they can officially close, which takes between 6 to 8 months (in this instance, from the date of the Minister's announcement until about Feb/March). They are looking at recruiting a special nursing position to support staff at the school. They will not be taking any high risk consumers. It will mostly cater for the day patients/students. Anne Brennan and EH spoke with the principal of the RCH school, who is offline to work on this, and went through the case load. It was identified that only a small group of consumers that would be suitable for the school. The special purpose school will not be providing vocational education. WM HHS is still working toward an end of January closure date. LG noted that WM HHS and CHQ will have to work very closely to ensure no gap in service, which will be most likely on a daily basis given the speed of change around services and consumers. LG also noted there could be some media regarding the transition process for consumers. WM HHS have more resources coming in from After Care, who have good energy and new ideas, which is positive. Consumers and staff have engaged well with the After Care staff. The holiday program is being provided to BAC consumers only, approximately 9, at this stage. 			
6.3	Risk Management There are no new risks or risks for escalation.			
6.4	Progress of key milestones and deliverables Committee is asked to note progress against the Project Gantt.			



Item No	Topic	Action	Comm'ee member	
6.5	Other Business	AMAZIAN KARANTAN PANTAN MENTENDEN PANTAN	Made compression of the second contract of th	T
Harman James & Maria Dennis and	• Nil			
7.	Matters for Noting		a la distribuição	
	 CHQ web page has gone live. Refer to: http://www.health.qld.gov.au/rch/families/cymhs-extendedtreat.asp Presentation to BAC families was delivered on 11th. LG spoke about the transition services, SS spoke about the future model of service, and Sandra Radovini spoke to a number of services presented and how they worked in Victoria. Overall, the presentations were well received by the BAC parents/family that attended. Sandra discussed the risk of the IMYOS service 			
	 Sandia discussed the risk of the IMTOS service being watered down where the role and purpose is not clearly identified. It is recommended to have dedicated people in these roles, with a maximum caseload of 8-10 consumers. Discussion was then had on the importance of this service and the role in collaborating with other service providers, e.g. schools, police, and other care providers in the community, etc. 			
3.	For Information	I George		
3.1	N₽			

^{**} A special thanks to Judi Krause for supplying Christmas cupcakes - they were enjoyed by all! **

Meeting Agenda

State-wide Adolescent Extended Treatment and Rehabilitation Implementation Strategy Steering Committee

Date:	13 th January 2014
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**

A/Chair:	Elisabeth Hoehn	Program Director, Early Intervention Specialist Programs, CYMHS
Secretariat:	Ingrid Adamson	SW AETR Project Manager
Attendees:	Amelia Callaghan	State Manager Headspace
	Amanda Tilse	Operational Manager Alcohol, other Drugs & Campus, Mater Hospital
nakan arawa ny kalinina ni anganina katangan katangan katangan katangan kananan na mananan na nganggang ng katina ma	Deborah Miller	A/Executive Director Office of Strategy Management, CHQ HHS
	Laura Johnson	Project Officer, SW AETR, WM HHS
aldia	Leanne Geppert	A/Director of Strategy, Mental Health & Specialised Services, WM HHS
	Raymond Ho	Clinical Services Program Manager, Metro South Addiction and Mental Health Service, Metro South HHS
The field to make the second control of the second	Kristen Breed	For Marie Kelly, A/Director Planning and Partnership Unit, MHAODB
		Consumer Representative
and a large to the second sec	***************************************	Carer Representative
Apologies:	Stephen Stathis	Clinical Director CYMHS CHQ HHS
	Judi Krause	Divisional Director CYMHS CHQ HHS
uvalingisti. Adminimisi on inggyggapatathidhidi e assusiyy mingg	Marie Kelly	A/Director Planning and Partnership Unit, MHAODB
	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
	Josie Sorban	Director of Psychology, CHQ HHS
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 and the service of the s

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 (attached)	Chair
2.4	Statement of achievements	Chair
3.	Business Arising from previous minutes	March 1980
item no	Item	Action Officer
3.1	• Nil	
4.	Matters for Decision	
Item no	Item	Action Officer
4.1	YPETRI Terms of Reference for endorsement	LG
5.	Matters for Discussion	
Item no	Item	Action Officer
5.1	•	
6.	Standard Agenda Items	
Item no	Item	Action Officer
6.1	Service Options Working Group Update	
-,-	Status Update	SS
6.2	Clinical Care Transition Panels Update	
	Status Update	LJ
6.3	Risk Management	•
	Nil changes to the Risk Register	IA
6.4	Progress of key milestones and deliverables	
	 Refer progress against Project Gantt and Monthly Status Report 	IA
6.5	Other business	
· <u></u>		
7.	Matters for Noting	A
Item no	Item	Action Officer
7.1	Major correspondence Nil	
	• IVII	
8.	For Information (papers only)	
Item no	Item	Action Officer
8.1		
	Next Meeting	
Date:	Tuesday 28 th January 2014	
Time:	9am – 10.30am	
Venue:	Seminar Room, CYMHS Cnr Roger & Water Streets Spring Hill	Marie Ma
	Page 2 of 3	Queensland
		Chart Poseument

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 Hem	Action Officer	Due Date	Status Update	Status
18/11/13	6.3	Financial Data	Follow up BAC operational budget figures	Leanne Geppert	22/11/13		Marin II
16/12/13	6.1	Service Options Update	Organise meeting to discuss drug and alcohol funding opportunities that could be integrated with the proposed adolescent mental health model of care	Marie Kelly	13/01/14		in the second

Minutes

State-wide Adolescent Extended Treatment and Rehabilitation Implementation Strategy Steering Committee

Date: 13/01/2014 Time: 09:00am Venue: Rm 30 CYMHS Cnr Rogers & Water St Spring Hill	treets,
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Chair:	Program Director, Early Intervention Specialist Programs, CYMHS (EH)
Secretariat:	SW AETR Project Manager (IA)
Attendees Teleconference	SW AETR Project Officer (LJ) A/Director of Strategy, Mental Health & Specialised Services WM HHS (LG) A/Director Planning & Partnership Unit MHAODB (KB) A/Executive Director Office of Strategy Management, CHQ (DM) Carer Representative Consumer Representative Clinical Services Program Manager, Metro South Addiction and Mental Health Service (RH)
Apologies	Clinical Director CYMHS CHQ HHS (SS) Divisional Director CYMHS CHQ HHS (JK) Director of Psychology, CHQ HHS (JS) A/Director Planning & Partnership Unit MHAODB (MK) 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) State Manager Headspace (AC)
Observers/ Guests:	

Item No	Topic	Action	Comm'ee member	Due date
1.	Presentations			
	Nil		and defined	
2.	Meeting opening			
2.1	Welcome and Apologies	Nit	Chair	
2.2	Statement of Conflict/Interest	Nil	Chair	
2.3	Confirmation of Minutes	Confirmed	LJ, DM	
2.4	Statement of achievements	Covered below	Chair	
	 EH acknowledged the work undertaken by SS, IA, 			
	LJ and LG.			
	Business			
3,	Business Arising from Previous Meetings			
3.1	 Discussed the need for a meeting with MHAODB and CHQ regarding NGO arrangements for alcohol and other drugs – Kristen will follow up with an email. EH suggested inviting AT, from the Mater, to attend the meeting in light of her experience in this space. MHAODB is still finalising details around NGO engagement – Kristen will provide more details about the process once clarified with the DG. 	Organise meeting between MHAODB and CHQ	КВ	31/01
4.	Matters for Decision			
4.1	YPERTI Terms of Reference were presented to the Steering Committee for endorsement.			·



Item No	Topic	Action	Comm'ee member	Due date
	 RH queried the practicality of a monthly rotation of the chairperson – LJ confirmed that the group had decided on this to share responsibility for the role across all partners to the initiative – Aftercare, MHAODB, CHQ, and WM HHS. LG feels the membership needs to be revisited – inclusion of Divisional Director, CYMHS, and removal of CNC BAC. LG also advised that LJ is going on maternity leave at the end of January. WM HHS will look for a replacement due to the number of activities carrying over after BAC closure. Committee agreed to the transfer of secretariat to CHQ over the course of the coming weeks. Committee endorsed Terms of Reference subject to the above changes. 	Update Terms of Reference	LJ	17/01
5.	Matters for Discussion			
5.1	• Nil			
6. 1	Standard Agenda Items Service Options Working Group Update IA advised that the Business Case is currently under development and nearing finalisation. There will be a meeting of the CE Oversight Committee on 22 nd January to look at the proposed budget and discuss funding options.			
6.2	Clinical Care Transition Panels Update Committee is asked to note the December status Report WM HHS is currently balancing the provision of ongoing care with reducing numbers of consumers to ensure clinically appropriate care. WM HHS is remaining engaged with consumers as they transition to alternative arrangements. The engagement with Metro South has worked very well to date.		-	
	Confidential	Follow up DG office regarding meeting	DM	17/01
6.3	Risk Management There are no new risks or risks for escalation.			
6.4	Progress of key milestones and deliverables Committee is asked to note the December Status Report and progress against the Project Gantt. There has been a small slippage in business case development otherwise the project is on track.			



BH raised the issue of finances. LG will follow up on BAC operational funds and suggested that CHQ also complete an Amendment Window form to move funds. LG confirmed that WM HHS has agreed to fund the holiday program separate from the Redlands funding. EH asked if figures for transition support are known. LG advised that they have asked HHSs to provide details of support required. An email was sent to Townsville HHS to confirm their funding requirements. Metro North has submitted their requirements. Other Business Work is progressing on the YPERTI model of service and the referral process into the residential rehab accommodation. This needs to be finalised in the coming weeks in preparation for the unit opening on the 3 rd February. While the Resi Rehab targets 16 to 21yo, a conservative approach is being adopted and it has been decided to not fill all beds in the Resi in the first instance, and to keep the age limit to 18yo. EH suggested revisiting the BAC wait list to see if there are any other consumers requiring referral. Matters for Noting Major correspondence No major correspondence No further discussion regarding a ministerial media release. Revisit BAC waitlist for potential resi consumers No major correspondence No further discussion regarding a ministerial media release. For Information No Watnesday 28 January 2013, 32m 10:30am, CAMHS Spring Hill.	Item No	Topic	Action	Comm'ee member	Due date
Other Business Work is progressing on the YPERTI model of service and the referral process into the residential rehab accommodation. This needs to be finalised in the coming weeks in preparation for the unit opening on the 3 rd February. While the Resi Rehab targets 16 to 21yo, a conservative approach is being adopted and it has been decided to not fill all beds in the Resi in the first instance, and to keep the age limit to 18yo. EH suggested revisiting the BAC wait list to see if there are any other consumers requiring referral. Matters for Noting Major correspondence No major correspondence received since last meeting. No further discussion regarding a ministerial media release. For Information Nil		 on BAC operational funds and suggested that CHQ also complete an Amendment Window form to move funds. LG confirmed that WM HHS has agreed to fund the holiday program separate from the Redlands funding. EH asked if figures for transition support are known. LG advised that they have asked HHSs to provide details of support required. An email was sent to Townsville HHS to confirm their funding requirements. Metro North has submitted their 		LG	17/01
 7.1 Major correspondence No major correspondence received since last meeting. No further discussion regarding a ministerial media release. 8. For information 8.1 Nil 	6.5	 Work is progressing on the YPERTI model of service and the referral process into the residential rehab accommodation. This needs to be finalised in the coming weeks in preparation for the unit opening on the 3rd February. While the Resi Rehab targets 16 to 21yo, a conservative approach is being adopted and it has been decided to not fill all beds in the Resi in the first instance, and to keep the age limit to 18yo. EH suggested revisiting the BAC wait list to see if 	for potential resi	LG	31/01
 7.1 Major correspondence No major correspondence received since last meeting. No further discussion regarding a ministerial media release. 8. For information 8.1 Nil 	7.5	Matters for Noting			
8.1 • Nil	7.1	Major correspondence No major correspondence received since last meeting. No further discussion regarding a ministerial media			
	8.	For Information			
		1.7**			

Status Report – Barrett Adolescent Centre (BAC) Clinical Care Transition Pane

Reporting Period: December 2013

Overview: BAC Patients (Inpatient, Outpatients and Day patients) and Waltlist



EXHIBIT 122 DSS.001.001.211

Waitlist and Assessment List

The Panel is finalising follow up with the referring CYMHS of all young people on the BAC Waitlist and Assessment List.

Update:

- The Clinical Care Transition Panel was convened for the first time on 15 October 2013 and since then has met eight times.
- At present the Panel has reviewed all of 16 patients at BAC. The transition plans for all day and out
 patients has been finalised including the preparation of clinical documentation (eg. CIMHA) for handover
 to identified service providers.
- Work is still ongoing to finalise the transition plans for the inpatients as there have been a number of barriers particularly around sourcing appropriate accommodation for these patients. The Panel has escalated these issues and continues to seek appropriate solutions for these patients.
- The Panel continues to work finding solutions for the more complex cases including working alongside with other hospital and health services, government departments and non-government organisations.

Issues:

Ongoing - the Panel has identified a number of challenges associated with the transition planning for the young people at BAC. This includes access to appropriate supported accommodation and mental health trained support workers. One strategy that has been identified to assist with this would be to provide strategic communication on what is happening at BAC to upper management of key organisations and government departments including meetings at the Director-General level. Another strategy identified was to invite the key NGO stakeholders to BAC to discuss what services they could potentially provide to the target group. This meeting was held on Monday 28 October 2013.

Risks:

Please note this risk is unchanged - the Panel has identified significant clinical risks for BAC. The Panel is currently mitigating this by seeking expert opinion from statewide senior mental health clinicians. It should be noted that there may be some delays in the transition process for some of the more complex cases.

Prepared by:

Laura Johnson, Project Officer, West Moreton Hospital and Health Service.

Endorsed by:

Dr Anne Brennan, A/Clinical Director, West Moreton Hospital and Health Service.



Meeting Agenda

State-wide Adolescent Extended Treatment and Rehabilitation Implementation Strategy Steering Committee

Date:	28 th January 2014
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**

A/Chair:	Stephen Stathis	Clinical Director CYMHS CHQ HHS	
Allera Mariana (non mariang ang ang Alaha 1976), atau atau atau atau atau atau atau ata	Judi Krause	Divisional Director CYMHS CHQ HHS	
Secretariat:	Ingrid Adamson	SW AETR Project Manager, CHQ HHS	
Attendees:	Deborah Miller	A/Executive Director Office of Strategy Management, CHQ HHS	
T/C	Elisabeth Hoehn	Program Director, Early Intervention Specialist Programs, CYMHS	
and the second section of the second second second second second second second section second	Josie Sorban	Director of Psychology, CHQ HHS	
nauchinales (A. C.	Marie Kelly	A/Director Planning and Partnership Unit, MHAODB	
	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	
	Raymond Ho	Clinical Services Program Manager, Metro South Addiction and Mental Health Service, Metro South HHS	
ATTENDED OF THE STATE OF THE ST	Amanda Tilse	Operational Manager Alcohol, other Drugs & Campus, Mater Hospital	
es una egazio (grande de del despera, y o un un estra de la seguinta de seguinte de seguinte de seguinte de se		Consumer Representative	
		Carer Representative	
Apologies:	Amelia Callaghan	State Manager Headspace	
uuunuungga 956 Milyhii Ciir Milykuur	Leanne Geppert	A/Director of Strategy, Mental Health & Specialised Services, WM HHS	
Observers / Guests:			

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

1. Presentations Item no Item

Action Officer





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 (attached)	Chair
2.4	Statement of achievements	Chair
3.	Business Arising from previous minutes	
Item no	Item	Action Officer
3.1	6	
4.	Matters for Decision	
ltem no	Item	Action Officer
4.1	0	
5.	Matters for Discussion	
Item no	Item	Action Officer
5.1	 SW AETR Model of Care Budget Paper 	IA
5.2	 Progression of Service Implementation – Phase 1 	JK
6.	Standard Agenda Items	
Item no	Item	Action Officer
6.1	Service Options Working Group Update	
	Status Update	SS
6.2	Clinical Care Transition Panels Update	1.0
	Status Update	LG
6.3	Risk Management	IA
. 4	Nil changes to the Risk Register	IA.
6.4	Progress of key milestones and deliverables	IA
6.5	Other business	,
0.0	Initiative name change	IA
7.	Matters for Noting	
ltem no	Item	Action Officer
7.1	Major correspondence	
	• NII	
8.	For Information (papers only)	
Item no	Item	Action Officer
8.1		
	Next Meeting	
Date:	Monday 10 th February 2014	
Time:	9am – 10.30am	
Venue:	Seminar Room, CYMHS Cnr Roger & Water Streets Spring Hill	. Wh
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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 Updete	Status
18/11/13	6.3	Financial Data	Follow up BAC operational budget figures	Leanne Geppert	22/11/13	Raised again at meeting on 13/01/14 - item 6.4 - awaiting notification of 2013/14 amount to be transferred in next window	
16/12/13	6.1	Service Options Update	Organise meeting to discuss drug and alcohol funding opportunities that could be integrated with the proposed adolescent mental health model of care	Marie Kelly	13/01/14	Raised again at meeting on 13/01/14 - item 3.1	
13/01/14	4.1	YPETRI ToR	Update Terms of Reference to reflect changes in membership and secretariat function.	Laura Johnson	17/01/14		
13/01/14	6.5	Waitlist	Revisit consumers on wait list for suitability in admission into residential rehab accommodation	Leanne Geppert	31/01/14		

Minutes

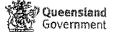
State-wide Adolescent Extended Treatment and Rehabilitation Implementation Strategy Steering Committee

Date: 28/01/2	014 Time: 09:00am Venue: Rm 30 CYMHS Cnr Rogers & Water Streets, Spring HIII				
Chair:	Clinical Director CYMHS CHQ HHS (SS)				
Secretariat:	Divisional Director CYMHS CHQ HHS (JK) SW AETR Project Manager (IA)				
Attendees:					
Teleconference	Program Director, Early Intervention Specialist Programs, CYMHS (EH) Clinical Services Program Manager, Metro South Addiction and Mental Health Service (RH)Operational Manager Alcohol, other Drugs & Campus, Mater (AT) Carer Representative Consumer Representative				
Apologies:	A/Director of Strategy, Mental Health & Specialised Services WM HHS (LG) A/Executive Director Office of Strategy Management, CHQ (DM) A/Director Planning & Partnership Unit MHAODB (MK) 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) State Manager Headspace (AC)				
Observers/ Guests:					

Item No	Topic	Action	Comm'ee member	Due date
1.	Presentations NI			
2.	Meeting opening			
2.1	Welcome and Apologies	Nil	Chair	<u> </u>
2.2	Statement of Conflict/Interest	Nil	Chair	
2.3	Confirmation of Minutes	Confirmed		
2.4	Statement of achievements	Covered below	Chair]
	Business			
3.	Business Arising from Previous Meetings	T	ļ	}
3.1				
4.	Matters for Decision			
4.1	*		}	
5.	Matters for Discussion			
5.1	SW AETR Model of Care Budget Paper IA provided an overview of the budget paper and how the figures were arrived at, emphasising that the first phase of services (2014 A) is all that will be implemented with existing operational funds. New recurrent funding will be sought to implement additional services. Committee was informed of the Step Up/Step Down Unit being built in Cairns.		,	
5.2	Progression of Service Implementation – Phase 1 JK advised that the CE has given approval to progress with the first phase of services. It is proposed that CHQ retrain funding until positions are appointed for each of the services.			



Item No	Topic	Action	Comm'ee member	Due date
	 JK is trying to secure a part-time resource to assist with documenting the models of services in detail and to draft up position descriptions for the AMYOS teams. JK proposed that a small working group be formed to progress this body of work quickly. This recommendation was supported by the Committee. JK would also like to conduct site visits of existing Day Programs, and asked AT if it would be possible to visit the Mater to which she agreed. JK recommended that AT and JS be a part of the working group, which was also agreed. 	Establish Service Implementation Working Group	IA	07/02
6.	Standard Agenda Items			
6.1	Service Options Working Group Update Now that the initiative has progressed, it was agreed to adjust this standing agenda item to "Service Implementation Update"	Adjust agenda	IA	07/02
6.2	Clinical Care Transition Panels Update DGs met on Wednesday 22 nd Jan. Accommodation arrangements have now been reached for the were discharged Thursday and Friday last week. All day program patients also transitioned out of the BAC on Friday. EH advised that the BAC will close on 31 st January. The assessment list and waiting list now needs to be handed over to CHQ. JK agreed further discussion was needed about this.	CHQ review of assessment and wait lists	SS/JK	07/02
6.3	Risk Management There are no new risks or risks for escalation.			
6.4	Progress of key milestones and deliverables			
6.5	 Other Business JK advised that CHQ Board Chair wants the initiative name changed to Adolescent Mental Health Extended Treatment Initiative. Documentation will be changed to reflect this. Now that Phase 1 of service implementation is moving forward, it is important to re-engage with Education to advise of the model of care. Following the closure of BAC and the end of her mediation role, EH has motioned to step down from the Committee. This motion was supported. The Chair thanked Elisabeth on behalf of the group for her contribution to the project and her commitment to the process. JK suggested revisiting the timing of the Steering Committee, changing it to monthly in future. The Committee will make a decision on this at the next meeting on 10th February. 	Organise meeting with Peter Blatch, Education	IΑ	07/02
7. 7.1	Matters for Noting Major correspondence No major correspondence received since last			



Children's Health Queensland Hospital and Health Service Apparent Company of the Company of the

Item No	Topic	Action	Comm'ee member	Due date
	 meeting. An update will be given to the Minister regarding the Barrett closure and new service implementation. CHQ Board Chair will also advise of a media announcement. 			
8. 8.1	For Information		(

STEERING COMMITTEE PAPER

January 2014

Agenda Item:

5.1

Agenda Title:

Statewide Adolescent Extended Treatment and Rehabilitation Initiative Budget

Sponsor: Peter Steer, Chief Executive, Children's Health Queensland

Background:

At the November meeting, a proposed model of care outlining five service options for extended treatment and rehabilitation, was presented and included:

- Assertive Mobile Youth Outreach Service (AMYOS) (note name change from Assertive Community Treatment Service to better reflect the scope of the service) – a new service option providing mobile interventions in community or residential settings; ideally resourced with a minimum of two full time employees per AMYOS team;
- 2. Day Program an expansion of existing services with additional day program units proposed in the South-East Queensland region; treating up to 15 adolescents per day per unit;
- Step Up / Step Down Unit a new service option providing short-term residential treatment by mental health specialists in partnership with a non-government organisation (NGO); up to 10 beds per unit located where there is NGO support;
- 4. Subacute Bed-based Unit a new service providing medium-term, intensive, hospital-based treatment in a secure and safe 4-bed unit located within the CHQ catchment; and
- 5. Residential Rehabilitation Unit a new service providing long-term accommodation and recovery-oriented treatment in partnership with NGOs together with in-reach services provided by mental health specialists; 5 to 10 beds per unit located where there is NGO support.

By February 2014, a 5-bed residential rehabilitation unit at Greenslopes and an interim subacute bed-based unit at the Mater will be in place. At the same time, recruitment for the Statewide Panel, AMYOS Teams, and Psychiatrists will have commenced with the first appointments being made from March. The AMYOS Teams will be located in Metro North, Metro South, Townsville, Darling Downs, Gold Coast, and Redcliffe/Caboolture. And finally, a new Day Program Unit will be established in north Brisbane by June 2014.

A Business Case, including indicative implementation, has been developed, and a summary of this is provided in the table below. The first tier of implementation (2014 A in blue) identifies services recommended for implementation utilising existing operational funding. This is based on an estimate of what CHQ understands is available. This is awaiting confirmation of Barrett operational funds to transition from West Moreton Hospital and Health Service (WM HHS) and the Redlands Operational Funding to transition from the Mental Health, Alcohol and Other Drugs Branch.

Successful implementation of the full model of care; however, is dependent upon new operational and capital funding. A proposed rollout plan for all services, from the end of 2014 B, 2015 and 2016, is provided below (highlighted in green, pink and yellow respectively). It is important to note that services identified from 2014 B onward will be dependent on the allocation of new funding by the Department of Health, including the subacute bed-based unit.

An estimate for capital costs has also been included. The Capital Fit-Out Costs are based on the assumption of leasing premises and adjusting these premises to be fit for purpose; whereas, the Construction Costs are based on the assumption of building fit-for-purpose premises. Where premises are constructed, operational costs will reduce by rent and other items accordingly. These capital figures are indicative only and require further analysis to determine more accurate costs.

The closure of the BAC is still on track for the 31st January and CHQ HHS is continuing to support WM HHS throughout the transition process. Any consumer who requires services, previously provided by the BAC, will be supported by wrap around services through their local HHS. These wrap around arrangements are supported and coordinated by the lead psychiatrist from BAC, who will continue to maintain oversight of the consumers under the governance of CHQ, post the January closure.



Statewide Adolescent Extended Treatment and Rehabilitation Strategy Business Case Summary:

Service	Funding Options	Commence	2013/14	2014/15	2015/16	2016/17
2014 A	Transition Case Management Panel	February	\$144,533	\$0	\$0	\$0
	Statewide Assessment Panel	February	\$0	\$0	\$0	\$0
	Residential Rehabilitation Unit + Activity Program	February	\$592,767	\$1,475,336	\$1,588,214	\$1,629,536
	Interim Subacute Bed-Based Unit	February	\$200,000	\$100,000	\$0	\$0
	AMYOS Psychiatrists x 2.4 + admin	Aprîl	\$251,601	\$995,387	\$1,020,364	\$1,045,968
	AMYOS x 6 Teams	March	\$267,732	\$1,675,204	\$1,692,369	\$1,735,320
	New Day Program (North Brisbane)	June	\$333,780	\$1,306,162	\$1,340,375	\$1,375,490
	TOTAL		\$1,790,413	\$5,552,089	\$5,641,322	\$5,786 <i>,</i> 314
2014 B	AMYOS Psychiatrists x 2	From	\$0	\$723,468	\$733,160	\$751,542
	AMYOS x 12 Teams (rest of Qld)	Jul-14	\$0	\$3,399,849	\$3,384,739	\$3,470,640
	TOTAL		\$0	\$4,123,317	\$4,117,899	\$4,222,182
2015	Subacute inpatient unit (4 bed unit)	From	\$0	\$577,027	\$1,186,466	\$1,216,644
	New Day Program (Logan)	Jan-15	\$0	\$676,359	\$1,340,375	\$1,375,490
	Resi Rehab Unit x 1 (North Cluster)		\$0	\$857,148	\$1,588,214	\$1,629,536
	Step Up/Step Down Unit x 1		\$0	\$1,731,515	\$1,744,053	\$1,790,780
	TOTAL		\$0	\$3,842,049	\$5,859,108	\$6,012,450
2016	New Day Program (Gold Coast)	From	\$0	\$0	\$1,364,352	\$1,375,490
	Resi Rehab Unit x1 (Central Cluster)	Jul-15	\$0	\$0	\$1,685,817	\$1,629,536
	Step Up/Step Down Units x 2		\$0	\$0	\$1,778,002	\$3,616,527
	TOTAL	Matematika (Matematika) yang daga kana kana kana kana kana kana kana k	\$0	\$0	\$4,828,171	\$6,621,553
्र स्थान	GRAND TOTAL	ranzi yn daz sejet.	\$1,790,413	\$13,517,455	\$20,446,500	\$22,642,499

Capital Fit-Out Costs (\$2,000/sqm)	17/5/2 1/24/2	2013-14	rue suprepiu	2014-15	i - skyme 🖠	2015-16	2016-17
Bed-base Fit Out (1 unit)			\$	150,000			
Day Program (3 units)	\$	450,000	\$ 4	463,500	\$ 4	477,405	
Step Up/Step Down Unit (3 units)			\$ 2,4	400,000	\$ 2,4	472,000	\$ 2,546,160
Total	\$	450,000	\$ 3,1	013,500	\$ 2,9	949,405	\$2,546,160
Capital Construction Costs (\$3,200/sqm)	., *** * . :	Signal Commercial	17710140	orzetzen	Bezer Si	ar variotis (The section of the section of the
Day Program (2 units)			\$!	988,800	\$1,0	018,464	
Step Up/Step Down Unit (3 units)			\$5,	120,000	\$5,2	273,600	\$5,431,808
Total			\$6,:	108,800	\$6,2	292,064	\$5,431,808

The next step for this initiative is to confirm the operational funds to transfer to CHQ HHS and the availability of new recurrent funding and capital funding to enable service implementation over a four year timeframe. Delivery of services identified in 2014 B onward will require new recurrent funding. The Business Case will be submitted to the Department of Health Service Agreement Unit through the next Relationship Management Group Meeting on the 14th February 2014.



The following people have been involved in the preparation of this paper:

Minutes 1	Ingrid Adamson
^p osition;	Project Manager, SW AETRS
Harries	Stephen Stathis
Position.	Clinical Director, CYMHS
Name:	Judi Krause
Position	Divisional Director, CYMHS
Name:	Deb Miller
Position:	A/Executive Director, Office of Strategy Management, CHQ HHS



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Meeting Agenda

Adolescent Mental Health Extended Treatment Initiative Steering Committee

Date:	10 th February 2014
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 **

A/Chair:	Stephen Stathis	Clinical Director CYMHS CHQ HHS
	Judi Krause	Divisional Director CYMHS CHQ HHS
Secretariat:	Ingrid Adamson	SW AETR Project Manager, CHQ HHS
Attendees:	Deborah Miller	A/Executive Director Office of Strategy Management, CHQ HHS
у докумунун (1984 - 1984 ж.) байн байн байн байн байн байн байн байн	Leanne Geppert	A/Director of Strategy, Mental Health & Specialised Services, WM HHS
the control of the co	Josie Sorban	Director of Psychology, CHQ HHS
Teleconf	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
Teleconf	Raymond Ho	Clinical Services Program Manager, Metro South Addiction and Mental Health Service, Metro South HHS
Teleconf	Amelia Callaghan	State Manager Headspace
	anna an i dende gaja gang gang gang di Sila Panganan an an an an ang gang di Afrika dan di Afrika an an an ana	Carer Representative
Apologies:	Amanda Tilse	Operational Manager Alcohol, other Drugs & Campus, Mater Hospital
agant ann aige an t-air an t-air the ar a ceann ann a ceann aine ann agus agus ann an t-aire a	Marie Kelly	A/Director Planning and Partnership Unit, MHAODB
		Consumer Representative
Observers / Guests:	STATE A	

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

1.	Presentations	
Item no	Item	Action Officer
1.0	• Nil	
2.	Meeting Opening	
ltem 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 (attached)	Chair
2.4	Statement of achievements	Chair
	Page 1 of 3	Queenstand



EXHIBIT 122

Time:

Venue:

9am - 10.30am

Children's Health Queensland Hospital and Health Service

3.	Business Arising from previous minutes	
Item no	Item	Action Officer
3.1	Establishment of Service Implementation Working Group	JK ·
3.2	Review of Assessment and Wait Lists	SS
4.	Matters for Decision	
Item no	Item	Action Officer
4.1	s	
5.	Matters for Discussion	
item no	Item	Action Officer
5.1	SW AETR Model of Care Business Case - update	IA
6.	Standard Agenda Items	
ltem no	Item	Action Officer
6.1	Service Implementation Update	
	Status Update – refer Monthly Status Report	IA
6.2	Clinical Care Update	
	Status Update refer Monthly Status Report	LG
6.3	Risk Management	IA
	Nil changes to the Risk Register	IA .
6.4	Progress of key milestones and deliverables	IA
C E	Refer Project Gantt Other havings and	in.
6.5	Timing of future Committee Meetings – move to monthly	JK
	Turning of factore committee weedings — move to monthly	UI.
7.	Matters for Noting	i da
item no	Item	Action Officer
7.1	Major correspondence	
	• Nil	
8.	For Information (papers only)	
Item no	Item	Action Officer
8.1		
	Next Meeting	
Date:	Monday 10 th March 2014	



Seminar Room, CYMHS Cnr Roger & Water Streets Spring Hill

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
18/11/13	6.3	Financial Data	Follow up BAC operational budget figures	Leanne Geppert	22/11/13	Raised again at meeting on 13/01/14 - item 6.4 - awaiting notification of 2013/14 amount to be transferred in next window	
16/12/13	6.1	Service Options Update	Organise meeting to discuss drug and alcohol funding opportunities that could be integrated with the proposed adolescent mental health model of care	Marie Kelly	13/01/14	Raised again at meeting on 13/01/14 - item 3.1	
13/01/14	6.5	Waitlist	Revisit consumers on wait list for sultability for admission into residential rehab accommodation	Leanne Geppert	31/01/14		
28/01/14	5.2	Service Implementation Working Group	Establish Service Implementation Working Group	Ingrid Adamson	07/02/14		- 10 m
28/01/14	6.1	Service Options Working Group Update	Adjust agenda item	Ingrid Adamson	08/02/14	Completed	
28/01/14	6.2	Clinical Care Transition Panel Update	CHQ to review assessment and wait lists	Stephen Stathis	08/02/14		
28/01/14	6.5	Other Business	Organise meeting with Peter Blatch, Education re Phase 1 of service implementation	Ingrid Adamson	07/02/14		

Minutes

Adolescent Mental Health Extended Treatment Initiative Steering Committee

Date: 10/02/2014	Time: 09:00am	Venue:	Rm 30 CYMHS Cnr Rogers & Water Streets, Spring HIII
	and with the contract of the c		

Chair:	Clinical Director CYMHS CHQ HHS (SS)
	Divisional Director CYMHS CHQ HHS (JK)
Secretariat:	SW AETR Project Manager (IA)
Attendees:	Director of Psychology, CHQ HHS (JS)
	A/Director of Strategy, Mental Health & Specialised Services WM HHS (LG)
	A/Executive Director Office of Strategy Management, CHQ (DM)
Teleconf.	Clinical Services Program Manager, Metro South Addiction and Mental Health Service (RH)
Teleconf.	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)
Teleconf.	State Manager Headspace (AC)
	Carer Representative
Apologies:	A/Director Planning & Partnership Unit MHAODB (MK)
	Operational Manager Alcohol, other Drugs & Campus, Mater (AT)
	Consumer Representative
Observers/	
Guests:	

Item No	Topic	Action	Comm'ee member	Due date
1.	Presentations			
	Ni		and a second	
2.	Meeting opening			
2.1	Welcome and Apologies	Nil	Chair	
2.2	Statement of Conflict/Interest	Nil	Cha <u>ir</u>	
2.3	Confirmation of Minutes	Confirmed		
2.4	Statement of achievements	Covered below	Chair	
	Business			
3.	Business Arising from Previous Meetings		<u> </u>	10/05
3.1	 The Service Implementation Working Group is still to be formally established – people interested in being involved included AT, JS, SS, JK, and IA SS, JK and IA visited a potential site for the new north Brisbane Day Program Unit. Work has also commenced on role descriptions for the AMYOS positions. Committee agreed that an action list needed to be developed for this Working Group as opposed to ToR. WM HHS is looking at a review of the initiative to date, including ECRG work, the BAC closure, and transition services. LG advised that the Mental Health Commission have indicated that they would be interested in conducting an independent assessment. JK raised that there is another piece of research around documenting the impact of new services. Some work is needed now to document current state in terms of service data. SS supported this by adding that it is important to determine what new 	Formally establish working group Develop action list	JK IA	21/02



Item No	Topic	Action	Comm'ee member	Due date
	services are needed, especially in regard to a subacute bed-based inpatient unit. There is value in asking the Mental Health Commission to look at this independently, given some services are political. SS proposed that another area to evaluate included the clinical outcomes of the BAC inpatients. LG expressed reservation regarding this. LG advised that there is a scoping meeting with the MH Commission scheduled for 14/02/14 from 2-3pm at the Park. These suggestions could be raised then. LG to confirm whether CHQ could attend the meeting.	Advise on CHQ attendance at MH meeting	LG	13/02
3.2	 SS and LG conducted a review of the Assessment and Wait Lists, together with Anne Brennan, Acting Clinical Director, BAC. There are a number of people that no longer require follow up. There are others that Anne will be following up. The Wait List is now being actively managed. 			
4. 4.1	Matters for Decision			-
5.	Nil Matters for Discussion			
5.1	SW AETR Model of Care Business Case			
	 The draft Business Case is being finalised for presentation at the Relationship Management Group meeting on 14/02/14 with Department of Health. A key challenge has been providing data to support the increase in funding required for new services, such as quantitative data in: Retention in education and vocation Staying with the family Reduced 28 day re-admission 1-7 day follow up Reduced burden on Adult Mental Health sector Reduced burden on society 			
6,	Standard Agenda Items	The state of the s		TO THE SE
6.2	 Service Implementation Update Activities are on track, despite small slippage in Business Case development. SS, JK and IA had a site visit of the Mater Day Program followed by a visit to the Salvation Army site at Stafford, as a potential site for the Day Program Unit on the north side of Brisbane. The Salvation Army facility has an industrial kitchen and cafe, sporting facilities, and appropriately sized rooms for therapeutic programs and education. It is co-located with the Everton Park State High Alternative Curriculum Environment (ACE) program. Salvation Army also house their Youth Outreach Services in the same building. Awaiting information from the Salvation Army regarding lease costs and room availability. 			
3,2	LG advised that a couple of consumer transitions need to be finalised – securing service team and funding. Otherwise all is on track.			de Laboration de la constitución



Item No	Topic	Action	Comm'ee member	Due date
	Committee agreed to change this standing agenda item to Consumer Update.	Change standing agenda item.	IA	14/02
6.3	Risk Management			
	\$ There are no new risks or risks for escalation.			
6.4	Progress of key milestones and deliverables			
	As noted above, Service Implementation Working			
	Group Action Items are to be added to Project Gantt.			
6.5	Other Business			
	 JK suggested revisiting the timing of the Steering Committee, changing it to monthly in future. The Committee supported this decision. 	Send out updated monthly Committee invites	IA	14/02
7.	Matters for Noting			
7.1	Major correspondence			
	• NIL			
8.	For information			
8.1	• NI			
Je 35 met	ting: Monday 10" March 2014, 9am – 10.30am, CYMH:	S Spring Hill		10 m

Meeting Agenda

Adolescent Mental Health Extended Treatment Initiative Steering Committee

Date:	10 th March 2014
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**

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

^{*} 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

2.1 Welcome and Apologies

Chair

Action Officer



2.2	Statement of Conflict/Interest	Chair
2.3	Confirmation of the minutes from the previous meeting (attached)	Chair
2.4	Statement of achievements	Chair
3.	Business Arising from previous minutes	The second secon
Item no	Item	Action Officer
3.1	 Establishment of Service Implementation Working Group 	JK
3.2	AMHETI Business Case Update	IA
4.	Matters for Decision	
Item no	ltem .	Action Officer
4.1	•	
5.	Matters for Discussion	
Item no	Item	Action Officer
5.1	Statewide communication regarding available services and referral pathways	SS
6.	Standard Agenda Items	
Item no	İtem	Action Officer
6.1	Service Implementation Update	
	Status Update	IA
	 Update on meetings with Department of Education 	
6.2	Consumer Update	
	Status Update	SS
6.3	Risk Management	
	Number of risks removed following BAC closure	IA
	Risk of sufficient funding escalated to very high	
6.4	Progress of key milestones and deliverables	
	Refer Project Gantt	IA
6.5	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		
	Next Meeting	
Date:	Monday 7 th April 2014	
Time:	9am - 10.30am	
	and the contract of the contra	

Seminar Room, CYMHS Cnr Roger & Water Streets Spring Hill

Venue:

Children's Health Queensland Hospital and Health Service Statewide Adolescent Extended Treatment & Rehabilitation Implementation Steering Committee Action Item Register

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
18/11/13	6.3	Financial Data	Follow up BAC operational budget figures	Leanne Geppert	22/11/13	Raised again at meeting on 13/01/14 - item 6.4 - awaiting notification of 2013/14 amount to be transferred in next window	
16/12/13	6.1	Service Options Update	Organise meeting to discuss drug and alcohol funding opportunities that could be integrated with the proposed adolescent mental health model of care	Marie Kelly	13/01/14	Completed	YI .
28/01/14	5.2	Service Implementation Working Group	Formally establish Service Implementation Working Group	Judi Krause	07/02/14	Raised again at meeting on 10/02/14 - Item 3.1	
10/02/14	3.1	Service Implementation Working Group	Develop action list - add to Project Gantt	Ingrid Adamson	21/02/14	Completed	
10/02/14	3.1	Service Implementation Working Group	Advise CHQ participation in scoping meeting with Mental Health Commission on 14/02/14	Leanne Geppert	13/02/14	Completed	

Minutes

Adolescent Mental Health Extended Treatment Initiative Steering Committee

Date: 10/03/2	2014 Time: 09:00am Venue: Rm 30 CYMHS Cnr Rogers & Water Streets, Spring Hill			
Chair:	Medical Director CYMHS CHQ HHS (SS) Divisional Director CYMHS CHQ HHS (JK)			
Secretariat:	AMHETI Project Manager (IA)			
Attendees:	Director of Psychology, CHQ HHS (JS) A/Director of Strategy, Mental Health & Specialised Services WM HHS (LG) A/Executive Director Office of Strategy Management, CHQ (DM)			
Teleconf.	Clinical Services Program Manager, Metro South Addiction and Mental Health Service (RH)			
Teleconf.	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)			
Teleconf.	A/Director Planning & Partnership Unit MHAODB (MK) Operational Manager Alcohol, other Drugs & Campus, Mater (AT) Consumer Representative Carer Representative (State Manager Headspace (AC)			
Apologies:				
Observers/ Guests:				

Item No	Topic	Action	Comm'ee member	Due date
4.	Presentations			1
	NI			
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	
	 Thanks to AT, SS, and IA for conducting site visit at 			
	short notice.			
	Business			
3.	Business Arising from Previous Meetings			
3.1	 The Service Implementation Working Group is still to be formally established although informal communications with members are underway. Another site visit to Stafford was conducted last week – like all sites that are not purpose-built, there are aspects which work well and others which are not ideal but this site is workable. 	Formally establish working group	JK	07/04
	 IA showed the committee photos of the Stafford Site. Have now commenced negotiations with Salvation Army to modify areas of the site and stipulate exclusive-use areas. There were concerns raised by a Salvation Army officer regarding the need to 	Email photos of site to teleconferencing members	IA	07/04



Item No	Topic	Action	Comm'ee member	Due date
	occasionally use a room within the exclusive-use area. Usage expectations are trying to be clarified to see if the Day Program could work around this. One approach proposed is to test the arrangement through the signing of a 6 month lease as opposed to 12 months or longer. This could also serve to reassure the Salvation Army that sharing of space is manageable.		14.60	57/04
	 Unsure about education classes. Will need to have a conversation with Education Qld regarding provision of education services into the facility or offsite. 	Discuss education provision at day program.	IA/SS	07/04
	 LG suggested a carer and/or consumer conduct a site visit with CHQ to put a human element to the service. JS supported this idea. AT suggested that current day program participants at the Mater could be possible – seeking their input on how they would use the space would be useful. AT also suggested Kerry also join us as a carer in the day program. IA showed committee photos of the Stafford Site. 	Mater to see if some day program consumers and a carer consultant might be available to attend a site visit	АТ	14/03
	 IA noted that the action list for Service Implementation has been included in the Project Gantt – input welcome on comprehensiveness of list. 			
	 LG provided an update on the outcome of their meeting with the Mental Health Commission (MHC). Original aim was to seek their support in conducting an evaluation of the project. The MCH would like to reconsider their direct involvement in the evaluation process, so now looking at alternatives for project evaluation. 			
	 JK said that it would be a missed opportunity to not review the project. SS noted that MHAODB might be able to fund a research/evaluation officer. It was noted that funds for this could move money across in the 4th amendment window. It would require a business case. 			
	 DM suggested an email to Helen Cerron (cc MK) to advise of the necessary funding transfer. It was agreed LG and IA would work on a business case for a resource to undertake research and evaluation (e.g. AO7). 	Contact Helen Cerron re funding required for research officer.	IA	21/03
	The A/Clinical Director of BAC has followed up with each past BAC consumer that has transitioned to other services (including outpatients and day patients). It was noted that each consumer has moved successfully to other services with about a third citing that they no longer require mental health support. are now living semi-independently.			
	 asked if this information would be made public. LG said it would be something that WM HHS would need to do if they agreed. She will investigate this further. 	Explore message regarding ex-BAC young people.	LG	21/03

Item No	Topic	Action	Comm'ee member	Due date
3.2	 AMHETI Business Case has been presented to the Department of Health Policy and Planning Unit. They have advised that there are no new funds for 2014/15. They have some questions regarding the business case, which they will email through to CHQ. Following answering of these questions, CHQ will provide a revised business case with new funding from 2015/16. In the meantime, it was recommended that the outcomes of established services be measured over the coming financial year to support the business case recommendations. CHQ are now looking at other funding sources to establish more services, such as Medicare Locals and private corporations that operate in regional and rural areas of Qld. 			
4.	Matters for Decision			
4.1	• Nil			
5.	Matters for Discussion			
5.1	Statewide Communication of Services			
	 We are now at a point where new services and their referral pathways need to be communicated to other HHSs. Message needs to clarify how HHSs access services – what the clinical pathway is now that the Barrett is closed. MK suggested tabling the process at the CD/ED meeting organised by MHAODB – JK said it would be a good forum to communicate to. It was also suggested that services are communicated to community CYMHS, for onforwarding of information to families, community, and private providers. It has been identified that there is a need for different messages for different recipients, e.g. families and consumers versus community CYMHS It was noted that and a Townsville journalist have been making enquiries. AC noted that a new youth hub is opening in Townsville – this message together with the opening of the Townsville day program would be positive news for the journalist. IA to advise CHQ Media and Communications. 	Advise CHQ Media and Comms re Townsville youth hub	IA	14/03
6.	Standard Agenda Items			
6.1	 Service implementation Update Conducted another site visit of the Salvation Army site at Stafford. Refer points above. Have met with Education Qld twice now — explaining the model of care and education aspects of each service elements. Meeting again on Thursday morning to further discuss the model and Education's involvement. LG answered Peter Blatch's enquiry regarding an ECRG report – LG advised that there was no report per se but rather a list of recommendations. Peter 			



Item No	Topic	Action	Comm'ee member	Due date
	already has a copy of these.			
6.2	Consumer Update Nil issues to raise with the Committee. Waitlist has been reviewed and all consumers are being managed. There has been a plan put in place for each consumer. Some consumers were not on CIMHA or their case had been closed. Data on these consumers has been kept separately and now needs to be stored in the one document/location. LG will determine the best storage option. JS raised that there is a risk that people won't know to refer to the document. Committee discussed the feasibility of attaching a note onto the CIMHA file for each consumer. SS raised a concern that this might not be possible if the consumer file was closed. Committee agreed it was important to see if notes can be attached to the consumer file.	Advise how documentation is stored and if a file note can be added to CIMHA	LG	21/03
6.3	Risk Management Following the closure of the BAC, a number of risks have also been closed. The risk of insufficient funding has been escalated to Very High following advice of no new funding. Mitigation strategies are now being implemented, which include exploring alternative funding sources.			
6.4	Progress of key milestones and deliverables IA provided the committee with a high level overview of the next phase of project activities. Input and feedback on the project activities are welcomed. The Mater subactute inpatient beds were briefly discussed and it was confirmed that the Mater is setting up two "swing" beds. SS noted there are four actions needed to formalise the beds, which will be progressed by the Service Implementation Working Group: Terms of reference Referral pathway Communication to other HHSs Service Agreement with the Mater			
6.5	Other Business)		
7 .1	Matters for Noting Major correspondence IA advised that CHQ has received an email from one interested parent wanting to support the initiative and hoping to receive information on where services are at. A response has been sent			
<u>ම</u> . 8.1	to this parent For Information			
	· Nil (ting: Monday 7 th April 2014, 9am — 10.30am, CYMHS S	ວເຕັກງາ £HII		



Meeting Agenda

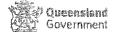
Adolescent Mental Health Extended Treatment Initiative Steering Committee

Date:	7 th April 2014
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**

A/Chair:	Stephen Stathis	Clinical Director CYMHS CHQ HHS
	Judi Krause	Divisional Director CYMHS CHQ HHS
Secretariat:	Ingrid Adamson	SW AETR Project Manager, CHQ HHS
Attendees:	Deborah Miller	A/Executive Director Office of Strategy Management, CHQ HHS
	Raymond Ho	Clinical Services Program Manager, Metro South Addiction and Mental Health Service, Metro South HHS
Teleconf.	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
Teleconf.	Amelia Callaghan	State Manager Headspace
	Amanda Tilse	Operational Manager Alcohol, other Drugs & Campus, Mater Hospital
		Consumer Representative
Apologies:	Josie Sorban	Director of Psychology, CHQ HHS
	Leanne Geppert	A/Director of Strategy, Mental Health & Specialised Services, WM HHS
drighted to the second of the	Marie Kelly	A/Director Planning and Partnership Unit, MHAODB
And Annual and the Control of the Co		Carer Representative
Observers / Guests:	TO COMMON TO THE COMMON TO THE PARTY OF THE	

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

1. Item no 1.0	Presentations Item Nil	Action Officer
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 (attached)	Chair



Research Children's Health Queensland Hospital and Health Service (1994) of the second
3. Item no	Business Arising from previous minutes	Action Officer
3.1	 Establishment of Service Implementation Working Group 	JK
3.2	Stafford Site Update	JK
3.3	Research and Evaluation Officer	IA
4.	Matters for Decision	
item no	Item	Action Officer
4.1	•	
5.	Matters for Discussion	
Item no	item	Action Officer
5.1		
6.	Standard Agenda Items	
Item no	Item	Action Officer
6.1	Service Implementation Update	IA
	Resi Rehab operations	
	Day Program establishment ANNOR counting and	
	 AMYOS recruitment Funding options 	
6.2	Consumer Update	
V.4	Status Update	SS
6.3	Risk Management	
0.0	Risk of meeting timeframes – refer updated Risk Register	IA
6.4	Progress of key milestones and deliverables	
	Refer Monthly Project Status Report	IA _
6.5	Other business	
	e	
7.	Matters for Noting	and the second of the second
Item no	Item	Action Officer
7.1	Major correspondence	
	Ministerial Correspondence	IA
8.	For Information (papers only)	
Item no 8.1	Item	Action Officer
	Next Meeting	
Date:	Monday 5 th May 2014	
Time:	9am - 10.30am	
Venue:	Seminar Room, CYMHS Cnr Roger & Water Streets Spring Hill	



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
28/01/14	5.2	Service Implementation Working Group	Formally establish Service Implementation Working Group	Judi Krause	07/04/14	Informally established.	
10/03/2014	3.1	Service Implementation	Email photos of potential day program site at Stafford	Ingrid Adamson	14/03/14	Site may no longer be suitable - exploring another option.	1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1
10/03/2014	3.1	Service Implementation	Discuss education provision at day program	Stephen Stathis Ingrid Adamson	07/04/14	Completed	
10/03/2014	3.1	Service Implementation	Mater to identify day program consumers for site visit to prospective day program site at Stafford	Amanda Tilse	14/03/14	Completed; however, site visit may not go ahead	
10/03/2014	3.1	Service Implementation	Contact Helen Cerron re funding of research officer	Ingrid Adamson	21/03/14	Completed - no longer required due to CHQ funding identified	
10/03/2014	3.1	Service Implementation	Explore communication regarding progress of ex-BAC consumers	Leanne Geppert	21/03/14		
10/03/2014	5.1	Communication of Services	Advise CHQ Media and Comms regarding Townsville Youth Hub opening	Ingrid Adamson	14/03/14	Completed	
10/03/2014	6.2	Consumer Update	Advise how documentation of waitlist consumers is to be stored - can a file note be added to CIMHA?	Leanne Geppert	21/03/14	Completed - notes can be captured in CIMHA after a client file is closed. Waitlist client files will now be updated.	Commence of the Commence of th

07/04/2014

Minutes

Guests:

Adolescent Mental Health Extended Treatment Initiative Steering Committee

**			
Chair:	Medical Director CYMHS CHQ HHS (SS)		
	Divisional Director CYMHS CHQ HHS (JK)		
Secretariat:	AMHETI Project Manager (IA)		
Attendees:	A/Executive Director Office of Strategy Management, CHQ (DM)		
	Clinical Services Program Manager, Metro South Addiction and Mental Health Service (RH)		
	Operational Manager Alcohol, other Drugs & Campus, Mater (AT)		
Teleconf.	State Manager Headspace (AC)		
Teleconf.	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:	Director of Psychology, CHQ HHS (JS)		
	A/Director of Strategy, Mental Health & Specialised Services WM HHS (LG)		
	A/Director Planning & Partnership Unit MHAODB (MK)		
	Carer Representative		
	Consumer Representative		
Observers/			

Rm 30 CYMHS Cnr Rogers & Water Streets,

Item No	Topic	Action	Comm'ee member	Due date
1.	Presentations Nil			
2.	Meeting opening			
2.1	Welcome and Apologies	MI	Chair	- Control of the Cont
2.2	Statement of Conflict/Interest	Nil	Chair	
2.3	Confirmation of Minutes	Confirmed	SS.AT	
	Business			· · · · · · · · · · · · · · · · · · ·
3.	Business Arising from Previous Meetings			
3.1	The Service Implementation Working Group: to date have made contact informally. JK raised whether a working group is needed. Until a site for the day program is found, there is little to consult with a working group on. Noted that a Team Leader would be recruited to establish the day program once a site is found and they would drive consultation around that. JK proposed the working group no longer be progressed and this was supported by the committee.			
3.2	Update on the proposed site at Stafford was given. Due to increasing demands on the exclusive-use areas being sought, it was decided to not progress with the Stafford facility. The site does offer some excellent options for external activities for the day program, which may be progressed once a new			



Item No	Topic	Action	Comm'ee member	Due date
	site is found. JK, SS, IA, and AT visited a CHQ-owned site at Ferny Hilfs. There were positives and negatives about the site. The main negatives being in a location that is difficult to access and in a very poor condition. It would require significant refurbishment to occupy. IA has requested a condition report to determine the level of work required, including an asbestos report. IA will continue working with the Qld Government Accommodation Office to identify other options. SS and JK visited the day program in Townsville, which was helpful in understanding what a purpose-built facility comprised. JK saw a site in Spring Hill however it is co-located near Department of Corrections, which is not ideal, and too close to the city, which makes accessibility challenging. It was noted that the time taken to identify a suitable site will impact on the ability to deliver a day program by 30 June 2014.			
3.3	 IA provided an update on the recruitment of a Research and Evaluation Officer – a candidate has been identified and will commence on 15th April 2014. Her name is Susan Hunt and she has worked both at ADAWS at the Mater and in the Townsville Mental Health service. 			
4.	Matters for Decision	-		
4.1	• Nil			
5.	Matters for Discussion			
5.1	• Nil		A	
6. 1	Standard Agenda Items Service Implementation Update Resi Rehab: in the process of finalising the referral pathway and referral panel protocol this week. Day Program establishment: refer notes above. AMYOS: recruitment closes 8 th April for the three Brisbane-based teams. SS noted that there are currently ten applications. Finalising the Service Agreement and Model of Service for circulation to HHSs this week. Recruitment of AMYOS psychiatrists is proving challenging – only two applicants received to date and not suitable for the roles. Have extended the application date to 28 th April in the hope of attracting some more applicants. May have to put in interim measures for AMYOS team supervision. Funding Options: IA noted that a revised business case has been resubmitted to the Policy and Planning Unit in Department of Health in the hope of securing some funds in 2014/2015. Will keep the committee updated on progress.			



Item No	Topic	Action	Comm'ee member	Due date
6.2	Consumer Update Nil update.			
6.3	Risk Management The risk of meeting timeframes has been escalated to Very High due to slippages in service establishment.			
6.4	Progress of key milestones and deliverables Presented Monthly Status Report.			
6.5	Other Business		-	***********
<i>†</i> .	Matters for Noting			e programa de la composição de la compos
7.1	Save the Barrett correspondence has been received by the Minister's Office. Consequently, updating the public facing website with information on service establishment. With the current political environment, we will not progress a formal media announcement at this time. The website update will be a soft launch approach. At the same time, CHQ will be updating the CYMHS web pages on QHEPS so mental health staff can access more information on the services and their referral pathways.			
8.	For Information			
8.1	• N			

Meeting Agenda

Adolescent Mental Health Extended Treatment Initiative Steering Committee

Date:	2 nd June 2014
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**

A/Chair:	Stephen Stathis	Clinical Director CYMHS CHQ HHS
	Judi Krause	Divisional Director CYMHS CHQ HHS
Secretariat:	Ingrid Adamson	SW AETR Project Manager, CHQ HHS
Attendees:	Deborah Miller	A/Executive Director Office of Strategy Management, CHQ HHS
	Raymond Ho	Clinical Services Program Manager, Metro South Addiction and Mental Health Service, Metro South HHS
Control of the Contro	Josie Sorban	Director of Psychology, CHQ HHS
	Leanne Geppert	A/Director of Strategy, Mental Health & Specialised Services, WM HHS
Teleconf.	Marie Kelly	A/Director Planning and Partnership Unit, MHAODB
Teleconf.	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
	Amanda Tilse	Operational Manager Alcohol, other Drugs & Campus, Mater Hospital
AND THE PROPERTY OF THE PROPER		Consumer Representative
		Carer Representative
Apologies:		
Guests:	and the state of t	

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

1.	Presentations
Item no	ltem

1.0 • Nil

Action Officer

Action Officer

Chair

2. Meeting Opening

Item no Item2.1 Welcome and Apologie

Welcome and Apologies

Introduce Susan Hunt, Project Officer, AMHETI

2.2 Statement of Conflict/Interest Chair



EXHIBIT 122

Date:

Time:

Venue:

To be confirmed

9am - 10.30am

Children's Health Queensland Hospital and Health Service

2.3 Confirmation of the minutes from the previous meeting (attached) Chair 3. **Business Arising from previous minutes Action Officer** Item no Item 3.1 Nil 4. **Matters for Decision** Item no **Action Officer** Item 4.1 Nil Matters for Discussion 5. **Action Officer** Item no Item 5.1 Nil 6. Standard Agenda Items **Action Officer** item no Item 6.1 Service Implementation Update Chair AMYOS recruitment Resi Rehab operations Day Program establishment Funding options Consumer Update 6.2 SS Status Update 6.3 Risk Management IA · Risk of meeting timeframes - refer updated Risk Register Progress of key milestones and deliverables 6.4 IA · Refer Monthly Project Status Report 6.5 Other business Matters for Noting **Action Officer** Item no 7.1 Major correspondence Nil 8. For Information (papers only) **Action Officer** Item no Item 8.1 **Next Meeting**

> Queenstand Government

Seminar Room, CYMHS Cnr Roger & Water Streets Spring Hill

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
			Nil				

Minutes

Adolescent Mental Health Extended Treatment Initiative Steering Committee

Date: 02	706/2014 Time: 09:00am Venue: Rm 30 CYMHS Cnr Rogers & Water Streets, Spring HIII
Chair:	Medical Director CYMHS CHQ HHS (SS)
<u> </u>	Divisional Director CYMHS CHQ HHS (JK)
Secretariat:	AMHETI Project Manager (IA)
Attendees:	A/Director of Strategy, Mental Health & Specialised Services WM HHS (LG)
Teleconf.	A/Director Planning & Partnership Unit MHAODB (MK)
	Clinical Services Program Manager, Metro South Addiction and Mental Health Service (RH) Operational Manager Alcohol, other Drugs & Campus, Mater (AT)
Teleconf.	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)
	Director of Psychology, CHQ HHS (JS)
	Carer Representative
Apologies:	Consumer Representative
	State Manager Headspace (AC)
	A/Executive Director Office of Strategy Management, CHQ (DM)
Guests:	

Item No	Topic	Action	Comm'ee member	Due date
1.	Presentations			
	NI		- Contraction	
2.	Meeting opening			
2.1	Welcome and Apologies Informed the committee of Susan Hunt's commencement	Nit	Chair	
2.2	Statement of Conflict/Interest	Nil	Chair	
2.3	Confirmation of Minutes	Confirmed	SS, LG	
	Business			
3.	Business Arising from Previous Meetings			
3.1	• Nii			
4.	Matters for Decision			***************************************
4.1	• Nil			
5.	Matters for Discussion			
5.1	• Nil			
8.	Standard Agenda Items			
6.1	Service Implementation Update AMYOS: interviews have been conducted for the three Brisbane-based teams. Initial indications are that further recruitment activities will be needed to fill all positions. Found four suitable applicants; however, require six staff to fill all positions.			



Page 1 of 4

Children's Health Queensland Hospital and Health Service | Service

Item No	Торіс	Action	Comm'ee member	Due date
	 Also still in negotiations with HHSs regarding the AMYOS Service Agreements. There have been some concerns regarding the terms of the agreement and finances, which are being worked through. This has delayed the appointment of AMYOS teams in the regions. Two AMYOS psychiatrists (1.3 FTE) have been successfully recruited, Dr Michael Daubney and Dr Anne Brennan, and they will commence in July and August respectively. 			
	 Resi Rehab: there are currently the Resi. The Service Manager has visited some community CYMHS to promote the service. Feedback received is that people are interested in going below 16yo to 15yo plus. There are other consumers currently being assessed for referral. The Referral Panel Protocol and Pathway has now been endorsed by the YPETRI Governance Committee, and is published on QHEPS for all staff to access. 			
	JK noted that a CYMHS statewide clinical meeting is coming up next week, which awareness can again be raised at.			
	 SS noted that the Statewide Referral Panel is also still under review (in partnership with the Mater) and it is anticipated that the YPETRI Referral Panel will be subsumed by the Statewide Panel over time. LG has suggested that the next governance 			
	meeting be held at YPETRI House to re-engage with the service providers and have an opportunity for a first-hand look at the service.			
	Day Program: Conducted two more site visits on 27 th May. Identified a suitable site at Stafford, round the corner from the Salvation Army previously visited. It is a shell at this stage with the ability to tailor the internal build to suit our needs. It is adjoining another Qld Health Unit, which means ICT can be leveraged resulting in potential savings for CHQ.			
	 Now looking at recruiting the team leader for the unit so they can lead the site fit out and recruitment of other staff. JK noted that they are looking at bringing the team across through a matched process, which would alleviate the need for a full open merit recruitment process. 			
	 Subacute Beds: Service Agreement is still being finalised by the CHQ Chief Financial Officer prior to sending to the Mater. 			
	 AT confirmed that the beds are available at the Mater. 			
	 Further communication around the beds is needed. There have been no referrals to date and, if the beds are not used, it will make it difficult to get further funding for the beds planned for at the Lady Cilento. It is unclear whether these consumers are being treated at acute inpatient units or if there is 			

Item No	Topic	Action	Comm'ee member	Due date
	no need in the sector. AT enquired as to whether it would be worthwhile enquiring what is happening at the adolescent acute inpatient units regarding length of stay. LG suggested having the Project Officer conduct a structured evaluation around communication and level of awareness – do staff know what is available and how they are able to use it. Funding Options: Still awaiting feedback on the revised business case – have put forward a revised request for funding in 2014/15.	Survey re knowledge of model of care and the current use of acute inpatient beds.	SH	07/07
6.2	Consumer Update Nil update.			
6.3	Risk Management The risk of meeting timeframes has been escalated to Very High due to slippages in service establishment.			
6.4	Progress of key milestones and deliverables • Presented Monthly Status Report.			
6.5	 Other Business AT raised the Barrett School – noted that the school is asking for psychiatry time. LG asked why the young people there are not engaged with their local community CYMHS. The Mater agrees with this position and has been advising such. The Barrett School has engaged a nurse to work onsite but she finishes up at end of June 2014. SS met with Peter Blatch from Dept. of Education. The plan is that the Barrett School will merge with the Tennyson School, and next year move into the Yeronga Tafe premises. It will be aimed at working with young people who are difficult to engage or have some mental health problems. The new school will be given an indigenous name. SS has been encouraging the Dept. of Education to engage with the Mater regarding services, as it is within their catchment. SS also encouraged the Dept. of Education to provide a model of care so mental health can determine how best to support it. SS will raise this again with Peter Blatch once 			
	details regarding the Day Program are confirmed and discussions are to be had around Day Program education provision.			,
7.	Matters for Noting			
7.1	Major correspondence			
	 The external website and CYMHS pages on QHEPS have been updated with information regarding service implementation. 	Addison	1.0	10100
	 LG enquired as to how many hits there have been 	Advise number of	IA	13/06



Item No	Topic	Action	Comm'ee member	Due date
	on the website.	web hits.		
8.	For Information (
8.1	· NII			
Next me	rting: Monday 30 th June 2014, 9am – 10.30am, Level 2,	Butterfield Street, He	rston.	

Meeting Agenda

Adolescent Mental Health Extended Treatment Initiative Steering Committee

Date:	30 th June 2014
Time:	9am - 10.30am
Venue:	Conference Room 2.2, Level 2, Butterfield Street, Herston (Parking via Butterfield St)
Video/ Teleconference Details:	Teleconference Details: ** Please advise secretariat if you want to dial in **

A/Chair:	Stephen Stathis	Clinical Director CYMHS CHQ HHS
Secretariat:	Ingrid Adamson	AMHETI Project Manager, CHQ HHS
Attendees:	Leanne Geppert	A/Director of Strategy, Mental Health & Specialised Services, WM HHS
	Raymond Ho	Clinical Services Program Manager, Metro South Addiction and Mental Health Service, Metro South HHS
	Josie Sorban	Director of Psychology, CHQ HHS
the state of the s	Marie Kelly	A/Director Planning and Partnership Unit, MHAODB
	Amanda Tilse	Operational Manager Alcohol, other Drugs & Campus, Mater Hospital
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Apologies:	Judi Krause	Divisional Director CYMHS CHQ HHS
	Deborah Miller	A/Executive Director Office of Strategy Management, CHQ HHS
	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
		Carer Representative
Guests:	Susan Hunt	AMHETI Project Officer, CHQ HHS

^{*} 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
• Introduce Susan Hunt, Project Officer, AMHETI



EXHIBIT 122

Action Children's Health Queensland Hospital and Health Service agreement and the action of the control of the

2.2 Statement of Conflict/Interest Chair 2.3 Confirmation of the minutes from the previous meeting (attached) Chair 3. **Business Arising from previous minutes** Item no **Action Officer** Item 3.1 Number of Web Hits IA Survey regarding awareness of model of care and service options 4. Matters for Decision Item no ltem **Action Officer** 4.1 Nil **Matters for Discussion** Item no ltem Action Officer Service Evaluation Plan Chair Standard Agenda Items Item no **Action Officer** 6.1 Service Implementation Update Chair AMYOS recruitment Resi Rehab operations Day Program establishment Subacute inpatient beds Funding update 6.2 Consumer Update SS Status Update 6.3 Risk Management IA No new risks Progress of key milestones and deliverables 6.4 Refer Monthly Project Status Report ΙA Other business 6.5 7. **Matters for Noting** Item no Item **Action Officer** 7.1 Major correspondence 8. For Information (papers only) **Action Officer** Item no Item 8.1 **Next Meeting**



4th August 2014

9am - 10.30am

To be confirmed

Date:

Time:

Venue:

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
2/06/2014	6.1	Service Implementation Update	Survey awareness of model of care and service options	Ingrid Adamson	07/07/14	Decided email survey wouldn't reach intended audience - progressing different approach	
2/06/2014	7.1	Correspondence	Advise number of web hits	Ingrid Adamson	13/06/14	Completed	

Minutes

Adolescent Mental Health Extended Treatment Initiative Steering Committee

Date: 30/06/	2014 Time; 09:00am Venue: Conference Room 2.2, Butterfield St, Herston
Chair:	Medical Director CYMHS CHQ HHS (SS)
Secretariat:	AMHETI Project Manager (IA)
Attendees:	A/Director of Strategy, Mental Health & Specialised Services WM HHS (LG) A/Director Planning & Partnership Unit MHAODB (MK) Clinical Services Program Manager, Metro South Addiction and Mental Health Service (RH) Operational Manager Alcohol, other Drugs & Campus, Mater (AT)
Apologies:	Divisional Director CYMHS CHQ HHS (JK) A/Executive Director Office of Strategy Management, CHQ (DM) Program Manager Rural, Remote and Indigenous Mental Health Services & Child, Adolescent and Young Adult Services/ Assistant Director of Alied Health, Mental Health Service Group, Townsville Hospital and Health Service (CM) Director of Psychology, CHQ HHS (JS) State Manager Headspace (AC) Carer Representative Consumer Representative
Guests:	

Item No	Topic	Action	Comm'ee member	Due date
1.	Presentations			
	NI			
2.	Meeting opening			
2.1	Welcome and Apologies	MI	Chair	
2.2	Statement of Conflict/Interest	NI	Chair	
2.3	Confirmation of Minutes	Confirmed	MK	
	Business			7 . 2 . 7
3.	Business Arising from Previous Meetings			
3.1	 IA provided an update on the number of web hits since January 2014 – on the externally facing website there has been 672 visits and on the internally facing website, QHEPS, there have been 132 visits. At the last meeting it was raised that we should survey staff to determine level of awareness of the AMHETI model of care and service options. It was decided that an email survey would not be the best mechanism in light of the fact that all information about the services has previously been emailed – if an information email isn't reaching staff, then it is unlikely an email survey would reach the same cohort. In the meantime, JK has spoken with the CYMHS Statewide Clinical Network to determine how best to reach staff. Will obtain an update from her on their feedback. 	Follow up with JK in regard to approach for reaching CCYMHS staff	SS/JK	11/07



Item No	Topic	Action	Comm'ee member	Due date
4.	Matters for Decision			
4.1	• Nil			
5.	Matters for Discussion			
5.1	 Service Evaluation Plan and BAC Review: Barrett Review – LG noted that further work on this is held with WM HHS. Susan Hunt has revised the concept brief to mirror conversations with WM HHS. LG is not sure; however, if they have confirmed who the stakeholders would be; and whether contacting ex-BAC consumers would be in the best interests of consumers. It is now with WM HHS to consider the revised concept brief. SS felt there would be benefit from doing the review from the perspective of understanding the closure process, and using this opportunity to publish the findings. AT noted that the focus of the review needs to be clear before it progressed. 	Follow up at WM HHS about progressing the BAC review	LG	04/07
	 Conversation turned to the Resi and Subacute Beds and the lack of apparent demand for these. A query was raised as to whether there are any young people who have been in an inpatient unit for an extended period of time who might be suitable for the Resi or subacute beds. It was agreed this might be a useful avenue to explore for the subacute beds or Resi. SS provided an update on the service evaluation process – it is going to involve all new services, and the NEAF will cover these. 	Investigate length of stays in adolescent inpatient units for consumers who may be suitable for the Resi or subacute beds	SS	11/07
	 SS noted that it would be helpful to have a letter of support from the MHAODB for the NEAF. The Evaluation Plan is still under development but will be circulated to the Committee out-of-session for review and comment. It was noted that the Resi Contract with Aftercare expires in December 2014. MK suggested CHQ consider a Type 4 contract process to extend the service for another 6 months, to provide a greater time period to assess the service. SS agreed this would also avoid a lengthy tender process at the same time of transition to LCCH. Further discussion was had with regard to the level of use of the Resi: feedback suggests that some staff feel their consumers don't meet the criteria; another perspective is a lack of confidence in NGOs to deliver services; yet another perspective is that staff may not yet fully understand how the new services fit within the current way of doing business (how their clients would fit). Agreed more education and information is needed for staff. AT also raised whether Evolve may be caring for 	MHAODB to provide a letter of support for the evaluation	SS/MK	11/07
	 AT also talsed whether Evolve may be carried to some of the target cohort for the new services. LG suggested a video or footage of the Resi that CCYMHS staff could look at. She suggested that the young people residing there could create the footage. 	Raise the idea of Resi footage with YPETRI Governance Committee	SS/IA	04/07

Item No	Topic	Action	Comm'ee member	Due date
6, 6.1	Standard Agenda Items Service Implementation Update • AMYOS: Two positions for one of the Brisbane-based teams are being readvertised.			
	Revised service agreements have been sent to HHSs – now awaiting return of signed agreements. Gold Coast and Townsville are in the process of signing. Metro South would like the location of the AMYOS to be updated in the Agreement, from Logan to Metro South. SS is to follow up with Darling Downs.	Update Service Agreement for Metro South	IA	04/07
		Follow up Darling Downs re Service Agreement	SS	04/07
	 Resi Rehab: there are currently in the Resi, and other consumers being assessed for referral. 		,	
	 Day Program: The site found at Stafford is potentially being sold and all lease negotiations are now on hold. 			
	 CHQ will recommence the search for a suitable site. Recruitment of the team leader will be part of the Phase 2 recruitment for the LCCH. This has alleviated the need for a full open merit recruitment process. The Team Leader would then assist with the Day Program fit out. 			
	 Subacute Beds: Service Agreement has been sent to the Mater – awaiting the return of signed copies. There have still been no referrals to date. 			
	 Funding Options: The Children's Hospital Foundation (CHF) have advised that the AMHETI Business Case fits within their Major Campaign Proposal – work continues on how to integrate this. 		•	
6.2	Consumer Update Nil update.		4.	
6.3	Risk Management No new risks have been identified or change to existing risks.			
6.4	Progress of key milestones and deliverables Presented Monthly Status Report and Project Gantt.			
6.5	Other Business			
7	Matters for Noting			2 P 4 P 4
7.1	WM HHS received a letter from the Commissioner for Children, Young People, and Child Guardian (CCYPCG). Concerns have been raised by parents and the CCYPCG is responding in an advocacy role. CCYPCG have requested a review of the AMHETI services and that the response be			
	sent to the ombudsman. Items raised included	B. 4		

Children's Health Queensland Hospital and Health Service (a) management of the property of the service of the s

Item No	Topic	Action	Comm'ee member	Due date
	transition planning, efficacy of new services, and risks to ex-BAC consumers. WM HHS and CHQ HHS have prepared a joint response outlining the steps taken and services being provided. The Mental Health Commissioner was copied into the CCYPCG letter and is supportive of the response sent in reply.			
8.	For Information			
8.1	• NII		-	