

Queensland Mental Health and Drug Advisory Council

Meeting Communiqué

10 November 2017

The Queensland Mental Health and Drug Advisory Council held its final meeting for the year on Friday, 10 November 2017 at the Mental Illness Fellowship Queensland, in Herston.

The meeting covered the implementation of the Independent Patient Rights Advisors; Mental Health and National Security, Foetal Alcohol Spectrum Disorder (FASD); and the implementation of the Government's response to the Barrett Adolescent Centre Commission of Inquiry recommendations.

The Council welcomed the attendance of the **following** guest presenters: Mr Scott James, Statewide Coordinator: Independent Patient Rights Advisors Network, Queensland Health; Ms Jeannine Kimber and Ms Katherine Moodie, Carer and Consumer Representatives, nominated by Health Consumers Queensland.

In the absence of an appointed Council Chair and Deputy Chair, Professor David Kavanagh was again nominated by the Council members to chair the meeting.

The meeting was followed by an afternoon tea with a number of local community stakeholders.

Implementation of the Independent Patient Rights Advisors

The Statewide Coordinator, Mr Scott James provided an overview of his role and responsibilities, the functions of the Independent Patient Rights Advisors (IPRAs), and the future direction for IPRAs' implementation.

The Council noted with interest the Statewide Coordinator's role and responsibilities in supporting the statewide network of IPRAs, and assisting the Chief Psychiatrist in protecting the rights of patients and their nominated support persons, family, carers and other support persons.

Mr James explained how his role interacts with a broad range of mental health stakeholders, including mental health consumer and carer groups, advocacy organisations, non-government organisations, and the staff of the Hospital and Health Services, and Authorised Mental Health Services (AMHS).

The Council noted that there are currently 28 IPRAs employed across the state, from various professional backgrounds including lawyers, social workers, consumers, psychologists, nurses, carers and allied health professionals.

Mr James advised that the future work includes embedding discussions on patient's rights as part of everyday service, and forming sub-working groups to consider child youth mental health, Transcultural and Aboriginal and Torres Strait Islander IPRA service delivery.

The Council noted that there is an external review planned in two years, which will focus on operational, qualitative and quantitative assessment criteria.

The Council applauded Mr James and the Chief Psychiatrist for their commitment to the protection of patient rights and agreed to continue monitoring the next phases of the IPRA implementation.

Mental health and national security

The Council noted a report summarising activity relating to mental health and counter-terrorism, which was prepared in consultation with the Department of the Premier and Cabinet.

The Council discussed the impact of mental health for the broader community; acknowledging the importance of supporting a trauma-informed approach to effectively address the impact of trauma, with an emphasis on physical, psychological, and emotional safety that support communities in rebuilding their sense of control and empowerment.

The Council acknowledged that the [Connecting care to recovery 2016-2021: A plan for Queensland's State-funded mental health, alcohol and other drug services](#) will enhance transcultural mental health in Queensland by: expanding the provision of specialist transcultural mental health services; supporting the implementation of National Frameworks to ensure culturally inclusive service delivery in mental health services in Queensland; and continuing to work with other Queensland Government departments on issues that include cultural diversity to ensure comprehensive cross-agency policy and planning for individuals with mental health and alcohol and other drug issues are developed and implemented.

The Council agreed to consider key learnings from the Queensland Health Disaster Recovery model and identify opportunities to apply these in supporting community wellbeing at the next Council meeting.

In addition, the Council also recommended that the Commission consult with a representative from the Queensland Fixated Threat Assessment Centre (QFTAC), and the successful Multicultural Mental Health Australia (MHiMA) provider, once announced, to raise this issue for their consideration.

Foetal Alcohol Spectrum Disorder (FASD)

The Council discussed FASD issues relating to promotion awareness, diagnostic assessments, potential barriers for parents seeking support, and the limited funded and community services.

It was acknowledged that a number of fundamental challenges exist in providing accurate and reliable diagnosis of FASD and that there are limited established programs to suitably address this disability across the community.

The Council noted the prevalence of FASD is likely to be underestimated by current measures and that certain populations, including children in contact with the youth justice system, are thought to include an over-representation of individuals living with an undetected FASD.

The Council agreed that tackling FASD requires focused and coordinated multidisciplinary and cross-sectoral approaches, across jurisdictions, including education, justice, health and communities.

The Council noted the National FASD Strategy 2018-2028 (currently being developed by the Commonwealth Department of Health) will provide a national approach for all levels of government, organisations and individuals on strategies to target the reduction of alcohol related harms relating to FASD. The Council also noted that the Commonwealth has released the [National Drug Strategy 2017-2026](#) that provides a long-term framework for the prevention and reduction of harms associated with alcohol and other drugs.



The Council acknowledged that there will be an opportunity to provide comment on the draft Strategy, which is expected to be released for public feedback in early 2018. The Commission will continue to consider the FASD issues raised by the Council.

Barrett Adolescent Centre Commission of Inquiry

Health Consumers Queensland (HCQ) invited Ms Jeannine Kimber and Ms Katherine Moodie to share their experiences as carer and consumer representatives on the Barrett Adolescent Centre Commission of Inquiry Implementation Steering Committee with the Council.

The Council was provided with the background on the Commission of Inquiry (COI) into the closure of the Barrett Adolescent Centre (BAC) that was established by the Queensland Government, the Government response to the six recommendations made by the COI; and the role of the COI Implementation Steering Committee.

Ms Kimber and Ms Moodie discussed how HCQ has worked collaboratively with the former patients of BAC and their families, and other mental health consumers to support Queensland Health with the co-design process for the detailed design, model of service and integrated educational/vocational services.

The Council noted the key learnings from the project, including: the importance of fostering relationships when dealing with people from all levels of government; the ability to engage consumers who have been damaged by past experiences; discover new and innovative ways to communicate and influence; and understand how to encourage others to look beyond the bureaucratic process to focus on outcomes that have genuine meaning for individuals and families.

The Council was provided with a snapshot of consumer and carer perspectives, gained from an online survey, conducted with former patients of BAC, their families, and other mental health consumers. The responses highlighted the importance of ensuring that the patient is the focus, and flexibility within the services is essential to deliver the best possible care.

The Council noted with deep concern that experiences of stigma and discrimination within clinical settings were also raised during the recent consultation process for renewal of the Strategic Plan.

The Council noted the implementation of the Government response to the BAC COI recommendations, and acknowledged HCQ for their outstanding role in supporting the ongoing engagement and participation of health consumers in the co-design process.

Next meeting

The dates for the 2018 Council meetings are still to be finalised.

For any enquiries relating to the Communique please contact the Council Secretariat:
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