



Mental Health Information Development Expert Advisory Panels - National Panel and Population Specific Panels

A. Terms of reference

The *National Mental Health Policy 2008*¹ highlights a key policy direction in regard to ensuring that mental health services are of high quality and achieve positive outcomes for those people with mental health problems. Central to this is the need to have “...comprehensive processes for gathering and feeding back information to continuously improve service performance, including articulating lines of responsibility and accountability”.

To support this work and general national health policy directions such as those arising from the COAG National Partnership on Hospitals and Health Workforce reform, the National Mental Health Information Development Expert Advisory Panel (NMHIDEAP) will be established to provide clinical and technical advice to the Mental Health Information Strategy Subcommittee (MHISS) on issues and priorities that guide the development of the national mental health information agenda.

In addition to the NMHIDEAP, four population specific Panels will be established, and convened by the relevant Chair of each of those Panels. The other Panels will be: Child and Adolescent Mental Health Information Development Expert Advisory Panel (CAMHIDEAP), Adult Mental Health Information Development Expert Advisory Panel (AMHIDEAP), Older Persons Mental Health Information Development Expert Advisory Panel (OPMHIDEAP), and Forensic Mental Health Information Development Expert Advisory Panel (FMHIDEAP).

In addition, other task specific panels may be created to consider cross-cutting issues, including the information development implications of services for youth and indigenous people.

¹ *National Mental Health Policy 2008*. National Mental Health Strategy, 2009.



The Advisory Panels will consider and provide advice on mental health information development activities, as they particularly relate to the four main target population areas within the sector.

The NMHIDEAP and its Advisory Panels will give clinical and user advice on implementation issues and the impact of mental health information development activities within organisations, services and teams. While the Panels provide advice and recommendations to MHISS, jurisdictions will continue to have key responsibility for the dissemination of information and the management of change associated with the implementation of mental health information development initiatives.

The primary function of the National Panel and Advisory Panels is to provide:

- advice on the continued implementation, use and modification of routine outcome measurement in Australia's specialist mental health services, particularly in regard to training, service and workforce development issues and advice on analysis and reporting of National Outcomes and Casemix Collection data to advance the understanding and application of outcomes and casemix concepts.

Other functions include the provision of:

- advice on specific issues referred by MHISS for expert opinion, particularly in regard to information activities that enhance the capacity of the mental health sector to improve service delivery;
- advice that will inform issues being deliberated by the National Mental Health Performance Subcommittee, the Mental Health Standing Committee, the Safety and Quality Partnership Subcommittee (SQPS) and the National Minimum Data Set (NMDS) Subcommittee, as referred by MHISS;
- advice to the Australian Mental Health Outcomes and Classification Network (AMHOCN) on work program related to casemix and mental health consumer and carer outcome issues;
- advice on mental health benchmarking activities and the application of performance indicators;
- advice on specific major information development projects e.g. Mental Health Intervention Classification (MHIC) 09; and



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- advice on emerging issues pertaining to the information development agenda in mental health.

To ensure that advice to MHISS has both clinical and service level relevance, jurisdictions are encouraged to nominate clinicians or team / service managers who demonstrate understanding and leadership in the use of mental health information to improve the quality of mental health care.

Although the National Panel and the other Advisory Panels will provide advice to MHISS on issues referred to them from MHISS, they can independently raise issues that they believe require MHISS consideration or action.

The Chair and Deputy Chair of each of the population specific Advisory Panels will liaise with the National Panel Chair and the Secretariat to ensure that program specific issues are referred to the National Panel. The Chair and Deputy Chair will then report back to the respective Advisory Panels on issues discussed at the National Panel.

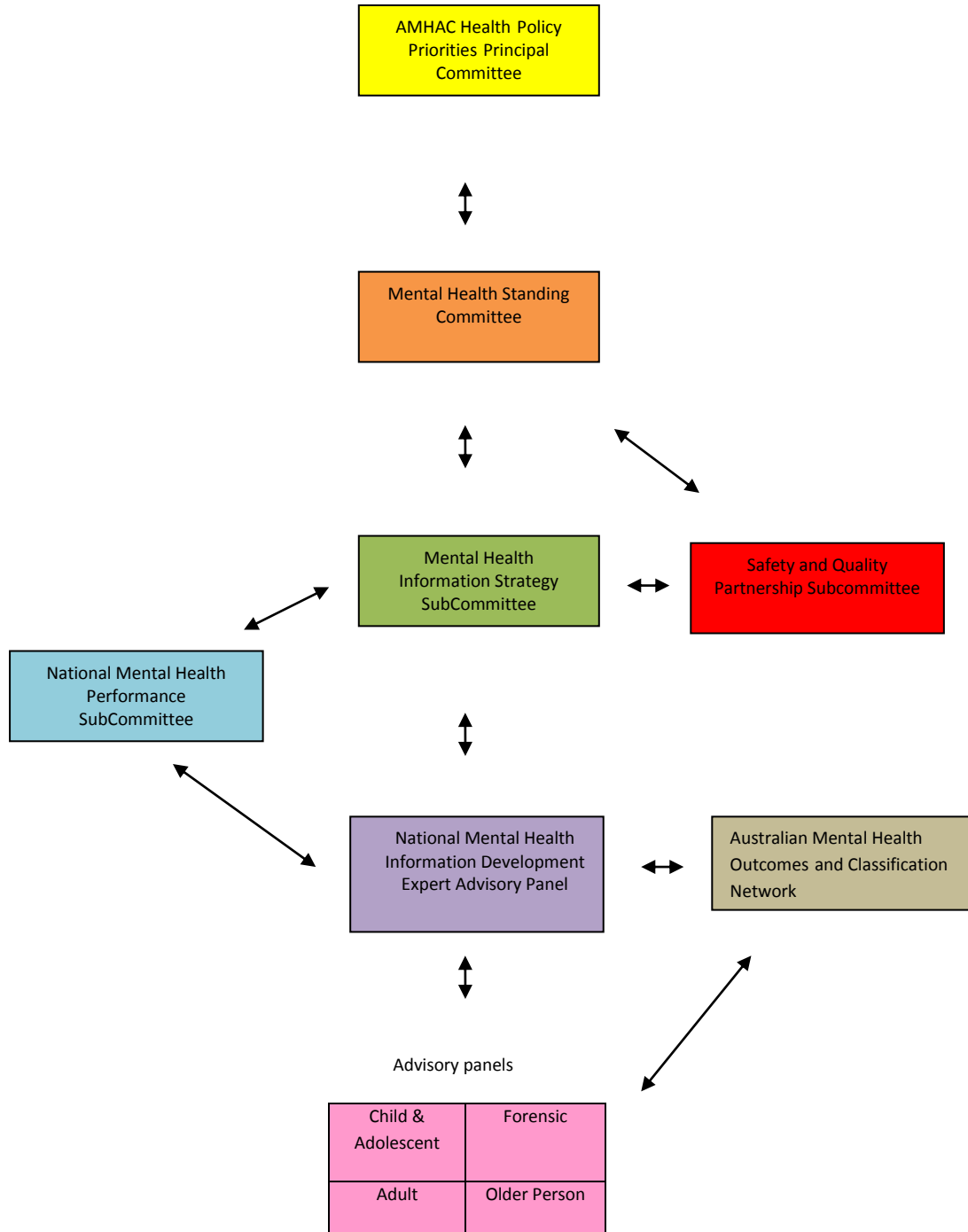
The relationships and flow of information between various committees and the panels are described below.



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B. Membership

i. National panel

MHISS will ensure that, when selecting members to NMHIDEAP, a balance of expertise across the four Advisory Panels is maintained. The membership will include a Chair and Deputy Chair.

Membership of the NMHIDEAP will comprise:

- the Chair and Deputy Chair of the Child and Adolescent Mental Health Information Development Expert Advisory Panel;
- the Chair and Deputy Chair of the Adult Mental Health Information Development Expert Advisory Panel;
- the Chair and Deputy Chair of the Older Persons Mental Health Information Development Expert Advisory Panel;
- the Chair and Deputy Chair of the Forensic Mental Health Information Development Expert Advisory Panel;
- one consumer representative to be selected from the Advisory Panels;
- one carer representative to be selected from the Advisory Panels;
- one representative from MHISS;
- one representative from the Australian Government;
- one representative from the Private Mental Health Alliance;
- one AMHOCN representative and observer and the Secretariat;
- one New Zealand observer; and
- up to four additional experts appointed by MHISS to supplement the expertise of the panel.

ii. Advisory panels

Membership of the population specific Advisory Panels will include a Chair and Deputy Chair and will comprise:

- Child and Adolescent Mental Health Information Development Expert Advisory Panel (CAMHIDEAP):
 - one member from each of the jurisdictions who is nominated by the jurisdictions;
 - one consumer representative appointed by MHISS;
 - one carer representative appointed by MHISS;
 - one AMHOCN representative and observer and the Secretariat;



- other experts, appointed by MHISS, with knowledge of child and adolescent mental health issues; and
- other experts, appointed by MHISS in consultation with the Advisory Panel Chair, with knowledge of specific issues under consideration and who participate on an ad-hoc basis
- **Adult Mental Health Information Development Expert Advisory Panel (AMHIDEAP):**
 - one member from each of the jurisdictions who is nominated by the jurisdictions;
 - one consumer representative appointed by MHISS;
 - one carer representative appointed by MHISS;
 - one AMHOCN representative and observer and the Secretariat;
 - other experts, appointed by MHISS, with knowledge of adult mental health issues; and
 - other experts, appointed by MHISS in consultation with the Advisory Panel Chair, with knowledge of specific issues under consideration and who participate on an ad hoc basis.
- **Older Persons Mental Health Information Development Expert Advisory Panel (OPMHIDEAP):**
 - one member from each of the jurisdictions who is nominated by the jurisdictions;
 - one consumer representative appointed by MHISS;
 - one carer representative appointed by MHISS;
 - one AMHOCN representative and observer and the Secretariat;
 - other experts, appointed by MHISS, with knowledge of older persons mental health issues; and
 - other experts, appointed by MHISS in consultation with the Advisory Panel Chair, with knowledge of specific issues under consideration and who participate on an ad hoc basis.
- **Forensic Mental Health Information Development Expert Advisory Panel (FMHIDEAP):**
 - one member from each of the jurisdictions who is nominated by the jurisdictions;
 - one consumer representative appointed by MHISS;
 - one carer representative appointed by MHISS;



- one AMHOCN representative and observer and the Secretariat;
- other experts, appointed by MHISS, with knowledge of forensic mental health issues; and
- other experts, appointed by MHISS in consultation with the Advisory Panel Chair, with knowledge of specific issues under consideration and who participate on an ad hoc basis.
- Cross Advisory Panels:
 - as these groups are time limited, membership of the Cross Advisory Panels will be determined according to expertise in the specific issues under consideration and will be drawn from the relevant population specific Advisory Panels. Members will be appointed by MHISS in consultation with the Chairs of the relevant Advisory Panels.

C. Panel organisation

i. National panel

The Chair and Deputy Chair of the National Panel will be appointed by the Mental Health Information Strategy SubCommittee for a period of two years, finishing in June 2011. These positions will be drawn from one of the four invited experts appointed to the National Panel by MHISS.

ii. Advisory panels

The Chair and Deputy Chair of each of the Advisory Panels will be appointed by the Mental Health Information Strategy SubCommittee for a period of two years, finishing in June 2011. The Chair and Deputy Chair positions will be drawn from the membership of each Advisory Panel i.e. from any of the jurisdictional representatives, invited experts, consumer representative, or carer representative on each advisory panel.

iii. Cross advisory panels

The Chair and Deputy Chair of the Cross Panels will be appointed by MHISS and will be drawn from the membership of the Cross Panel.

D. Meeting schedule

i. National panel

The National Panel will meet up to three times a year. The meetings will be aligned with other meetings on the calendar e.g. MHISS, NMHPSC.



MHISS will endorse a work plan each year for the NMHIDEAP to guide their activities and meetings across the year. Changes may be made to the work plan as required by MHISS.

ii. Advisory panels

It is expected that the four population specific Advisory Panels (Child and Adolescent, Adult, Older Persons and Forensic) will principally engage in non face-to-face communication via teleconference and supplemented by email. However, the Advisory Panels will meet face-to-face, as determined by the Secretariat in consultation with the Chair and the jurisdictions. It is envisaged that this would not be more than once per year. An introductory meeting might be held following the formation of the population specific Advisory Panels. This introductory meeting for each Advisory Panel might form part of a larger joint meeting which would include all Advisory Panel members.

iii. Cross advisory panels issues

In consultation with the relevant Chairs, the Secretariat will convene time limited, issue focussed Advisory Panels e.g. to consider specific issues relating youth mental health services. Cross Advisory Panels will principally meet via teleconference.

E. Costs

i. National panel

The Panel Secretariat will be responsible for travel and accommodation costs for the following participants:

- Chairs and Deputy Chairs representing each of the four population specific Advisory Panels;
- Consumer representative;
- Carer representative; and
- Invited Experts.

Representation by the remaining members (MHISS, Australian Government, AMHOCN) will be funded through their own arrangements.

The Panel Secretariat will also be responsible for the costs associated with organisation of the NMHIDEAP meetings – venue, catering, etc.



ii. Advisory panels

The Panel Secretariat will be responsible for costs associated with Advisory Panel communication and consultation via teleconferences and supplemented via email e.g. internet and telephone call costs. Where face to face meetings are required, jurisdictional members nominated for their expertise will be supported by their jurisdiction for travel and accommodation incurred in attending the population specific Advisory Panel meetings. All other costs will be met by the Panel Secretariat.

F. Conduct of meetings

i. National panel

- There will be a maximum of three meetings per year for the National Mental Health Information Expert Advisory Panel.
- Meetings will be chaired by the appointed Panel Chair, with the Deputy Chair taking on this responsibility in his/her absence.
- Meetings will follow an agreed agenda guided by MHISS deliberations, and may include updates from MHISS, the NMHPSC, SQPS and NMDS SubCommittee as necessary.
- The agenda and associated papers will be distributed to Panel members at least two weeks prior to the meeting.
- MHISS (via the MHISS Secretariat), will advise of items to be placed on the agenda for discussion at the Panel meeting. The population specific Advisory Panels might also provide recommendations for items to be placed on the agenda for discussion at the Panel meeting. The Panel Secretariat will then refer all items to the Chair.
- The meetings will be held in a location and venue to minimise travelling time for participants, e.g. a conference facility either at an airport or at an hotel near to an airport.

ii. Advisory panels

- Communication between Advisory Panel members will principally be via email or teleconference, supported by the Panel Secretariat.
- Teleconferences will be held on an agreed schedule, notionally three per year; recognising, however, that issues may sometimes arise that require an ad hoc teleconference.



- The Advisory Panels will be chaired by the appointed Advisory Panel Chair, with the Deputy Chair taking on this responsibility in his/her absence.
- The agenda will be determined by the Advisory Panel Chair and informed by the National Panel agenda and contributions from Advisory Panel members.

G. Reporting arrangements

i. National panel

The NMHIDEAP will provide comment and recommendations to the Mental Health Information Strategy SubCommittee and other related SubCommittees e.g. National Mental Health Performance SubCommittee (NMHPSC), on issues referred to them.

The Chair of the National Panel will be a member of the National Mental Health Performance SubCommittee.

ii. Advisory panels

The Advisory Panels will advise and make recommendations to the National Panel via their Chair or Deputy Chair or directly to MHISS and other SubCommittees e.g. NMHPSC as required.

The Chairs of the Advisory Panels will be members of the National Mental Health Performance SubCommittee.

H. Review of Panels

The structure and processes of the National Panel and the Advisory Panels will be reviewed at the end of two years to ensure that they provide an effective model for the provision of frontline clinical advice to MHISS in regard to mental health information development initiatives.

I. Secretariat processes

Secretariat work for the National Panel and Advisory Panels will be handled by the Network Coordinator of the Australian Mental Health Outcomes Classification Network, hereafter referred to as the "Panel Secretariat".

The duties of the Panel Secretariat will be to:

- liaise with National Panel and Advisory Panel Chairs and the Australian Government in regard to the development of agendas for meetings or teleconferences;



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- draft agenda papers for meetings;
- record and distribute Minutes of meetings and teleconferences of the National and Advisory Panels, including recommendations and actions arising;
- organise National and Advisory Panel meetings: date, venue, catering when required;
- organise and coordinate teleconference and email communications across the four Advisory Panels;
- provide administrative support and maintain relevant documentation associated with the National and Advisory Panels;
- distribute papers and resources to members at least two weeks prior to meetings;
- distribute out-of-session requests for advice and recommendations and report outcomes back to members;
- organise travel and accommodation for relevant Panel members (where appropriate);
- organise payments (where appropriate);
- develop and refine business rules; and
- liaise with Panel and Advisory Panel members.