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05 FEB 2013

HEALTH AND COMMUNITY
SERVICES COMMITTEE

Submission to the Health and Community Services Committee – Queensland Mental Health Commission Bill 2012.

CheckUP welcomes the decision by the Health and Community Services Committee to invite comment and feedback on the draft Queensland Mental Health Commission Bill 2012. CheckUP see significant value in the role of the Commission as a driver of mental health system improvement and integration of services, however would like to ensure that the operations of the Commission are undertaken in a transparent, inclusive and consultative manner. As such, we provide the following comments for consideration:

General Observations

Linkages and inclusiveness

It is noted that links with public and publically funded not-for-profit agencies are referred to throughout the document. It will also be essential to clarify the link between the Commission, the Advisory Council and key stakeholders *other than* those public and publically funded agencies, particularly primary health care organisations and stakeholders including General Practice and allied health, to ensure inclusiveness and transparency in the operation of the Commission and related structures. As the forefront of health care, it will be imperative to ensure these stakeholders are adequately involved and consulted on the activities of the Commission.

Definitions

Definitions provided in the schedule are somewhat ambiguous and repetitive, in particular:

- those definitions which refer to organisations and services, for example “mental health service”, “relevant agency”, “relevant service” and “service delivery agency”. The distinction between these terms is unclear, as is the scope. For example, where does a non-service delivery primary health care organization fit into these definitions?
- the term “mental health or substance misuse issue” is used throughout the document, however no definition is supplied. Given the diverse nature of mental health and substance misuse issues, it is essential that this term is defined to avoid misinterpretation of the Bill and its scope.

Specific Comments

Inclusiveness

- Refer to Section 5, Subsection 3a – *Aboriginal or Torres Strait Islander people should be provided with treatment, care and support in a way that recognizes and is consistent with Aboriginal tradition or Islander custom and is culturally appropriate and respectful.*

CheckUP welcomes the specific reference to Aboriginal and Torres Strait Islander people and acknowledges the importance of culturally appropriate care for this population; however there is some concern over the omission of a reference to Culturally and Linguistically Diverse populations in this

section. Given the relatively poor mental health status of this population, and the growing numbers of this population, it is essential that the culturally specific needs of these people are also recognised at an early stage and services aligned to address these needs.

- Section 5, Subsection 5(b) – *An effective mental health and substance misuse system is the shared responsibility of the government and non-government sectors and requires –*

(b) a commitment to communication and collaboration across public sector and publically funded agencies, consumers and the community

CheckUP agrees in principle with this clause, and understands the crucial role of cross-sectoral communication in driving health system improvements. To this end, CheckUP questions the omission of private and non-publically funded not-for-profit organisations from this clause. In order for true integration and communication to occur, and for the government and non-government sectors to take shared responsibility, communication will need to occur across all sectors. This should be clearly stated in the Bill.

- Section 25, Subsection 2 – *In preparing the whole-of-government strategic plan the commission must consult with relevant persons and relevant agencies.*

CheckUP welcomes the consultative approach to the development of the whole-of-government strategic plan proposed in Section 25, Subsection 2; however there is some concern over the scope and definition of the terms “relevant persons” and “relevant agencies”. As this plan is fundamental to the operation of the Commission, it will be necessary to ensure that all sectors and stakeholders are engaged in its development. This should be clearly stated in the Bill by defining the scope and meaning of the terms “relevant persons” and “relevant agencies”.

- Section 39, Subsection 2 – *Regarding membership of the Advisory Council*

CheckUP appreciates and agrees with the need for diversity of membership on the Advisory Council; however, more detail is required regarding the structure of that membership and the sectors and stakeholders that are required to be represented. CheckUP feels that there is a risk of under-representation by certain sectors and stakeholders if this is not clearly articulated in the Bill. The link between this Committee and other existing mental health forums, for example the Queensland Mental Health Reform Committee, is also unclear and needs to be clarified.

Commission functions and powers

- Section 11 – *Commission’s functions*

While CheckUP agrees with and sees the value in the development of a whole-of-government strategic plan, it is unclear how the additional functions listed under this section will be achieved and linked with the objectives of the plan. More detail is required.

- Section 27, Subsection 1(a)(i) – *The Commission must –*
(a) review the whole-of-government strategic plan -

(i) at least once every five years

CheckUP welcomes the regular review of the whole-of-government strategic plan, however would question the timeframe of this review. In the context of a rapidly changing environment in terms of policy, reform, population demographics, economics, health literacy and service demand, it is felt that the strategic plan will need to be subject to a more regular review to ensure alignment with the dynamic needs and attributes of the target population.

- Section 34, Subsection 4 – *The commission and relevant agencies must work cooperatively in the exercise of their respective functions.*

...

(4) However, this section is directory only and does not create rights or impose legally enforceable obligations on the State, a relevant agency or anyone else.

CheckUP understand the difficulties in granting legal powers to the commission in order to perform its functions; however more clarification is needed to identify how the commission will ensure its directions are complied with if no legal obligation exists.

- Section 42 Subsection 3 – *The Minister may direct the council about the conduct of its business, including its meetings.*

CheckUP recognise the importance of high level contribution to the operation of the advisory council, and understand the need for an overarching governance arrangement. There are, however, concerns over how the council will maintain its independence in light of this clause. It will need to be ensured that processes are implemented that allow for independent resolution of any disagreements between the council, the Minister, and the commission regarding the conduct of the council's business.

- Section 50, Subsection 3 – *Commission must respond to council's recommendation*

(1) This section applies if the council makes a recommendation about matters relating to a function of the commission.

(2) The commission must respond to the council in writing within a reasonable period –

a. Detailing the steps it has taken, or plans to take, in relation to the recommendation

b. advising that it has decided not to take any action in relation to the recommendation

(3) If subsection (2)(b) applies, the commission must provide the council with reasons for its decision

CheckUP understand that there will be times when the commission are unable to act upon or disagree with the recommendations of the advisory council, and agree that processes should be implemented which allow the commission to respond accordingly to the recommendations of the council. It will be



necessary, however, to ensure that such responses and decisions are independently reviewed to ensure decisions have been made in the best interests of consumers. Again, processes will need to be implemented to allow for independent resolution of disputes between the council and the commission where council recommendations are concerned.

Who is CheckUP?

CheckUP is the new name for General Practice Queensland.

The launch of CheckUP marks the culmination of the organisation's transition into an independent, not-for-profit industry body dedicated to advancing primary health care.

Building on General Practice Queensland's unique strengths and unrivalled reputation, CheckUP fosters innovation and integration, working collaboratively to deliver practical solutions focused on best practice outcomes—for a better primary health care sector and better health for all.

Because together we can build a better health system.

For further information

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