

Strategic Coordination Group:

Brisbane North and Moreton Bay Mental Health, Suicide Prevention and Alcohol and Other Drug Treatment Services

Terms of Reference

Purpose

The purpose of Strategic Coordination Group is to oversee the development, implementation, monitoring, review and evaluation of the Regional Plan for Mental Health, Suicide Prevention and Alcohol and Other Drug Treatment.

The Regional Plan is a vital resource to local service providers, the HHS, PHN and state government to support the integrated delivery of mental health and suicide prevention services and drug and alcohol treatment services within the community. The Plan will identify needs and gaps, reduce duplication, remove inefficiencies and encourage innovation.

The Regional Plan drives the implementation, at a local level of the following national and state plans:

- 5th National Mental Health and Suicide Prevention Plan
- National Drugs Strategy 2017-2016
- Queensland Mental Health, Drug and Alcohol Strategic Plan 2015-2019
- Connecting Care to Recovery 2016-2021

Authority

The Coordination Group operates under the authority of Brisbane North PHN's Executive and Metro North Hospital and Health Service (MNHHS) Strategic Executive Team (SET). The group reports to the Executive and the SET through the provision of the communique following each meeting.

Decision making

Decisions of the committee will be regarded as its collective decision or advice unless there is material dissension.

If consensus cannot be reached, consideration is to be given to deferring the decision and subjecting the issue to further debate or handing the matter to a suitably constituted committee or working group who can work in detail through the issues and recommend solutions. Following that a three quarters majority (75%) is required to resolve the issue.

Any disputes should try to be resolved between the relevant parties. If this is not possible the issue should be tabled at a Strategic Coordination Group meeting. Failing that, the complaints policies of sponsoring organisation (Brisbane North PHN and Metro North HHS) will be activated.

Guiding principles

The following principles guide the work of the group

- work collaboratively
- actively engage and involve consumers and carers
- make decisions based on evidence
- have the courage to innovate to achieve outcomes
- trial new approaches and new ways of working

- continuously monitor and evaluate its work and share with others
- operate transparently and regularly communicate with relevant stakeholders.

Functions

The SCG will provide oversight of the development, implementation, monitoring and review of the region plan, including to:

- provide guidance and direction on the scope, expected outcomes and implementation of the Regional Plan
- identify issues or areas of strategic importance relating to the success of the Regional Plan
- review and approve key regional plan documentation
- monitor and support progress, and report key milestones as required
- act as representatives of major stakeholders by sharing Regional Plan information between areas they represent
- monitor and respond to risks related to the implementation of the Regional Plan
- escalate unresolved matters relating to the Regional Plan to relevant stakeholders/funders as required
- initiate and endorse a review of the Plan
- lead the development of future plans

Risk management

A proactive approach to integrated risk management will underpin the business of the Steering Group. The group will:

- identify risks and mitigating strategies associated with the implementation of the Regional Plan
- implement processes to enable the group to identify, monitor and manage critical risks as they relate to the functions of the group.

Conflicts of interest

A conflict of interest may be actual, potential or perceived and may be financial or non-financial. These situations present the risk that a person will make a decision based on, or affected by, these influences, rather than in the best interests of the Strategic Coordination Group and must be managed accordingly.

Conflicts will be managed by requiring members to:

- avoid conflicts of interest where possible
- identify and disclose any conflicts of interest
- carefully manage any conflicts of interest, and
- follow this policy and respond to any breaches.

Once the conflict of interest has been appropriately disclosed, the Strategic Coordination Group (excluding the member disclosing and any other conflicted member) must decide whether or not those conflicted board members should:

- vote on the matter (this is a minimum),
- participate in any debate, or
- be present in the room during the debate and the voting.

Subcommittees

As required subcommittees may be established on a time limited basis to support the functions of the group.

Membership

The membership of the Steering Group is described below:

- Consumer representative x 2
- Carer representative x 2
- Representative from Queensland Alliance for Mental Health
- Representative from Queensland Network of Alcohol and other Drug Agencies
- Representative of Suicide Prevention Australia (tbc)
- Representative from the Institute for Urban Indigenous Health
- Representative of the primary care sector
- Executive Director | Mental Health, MNHHS
- Executive Manager | Mental Health, Brisbane North PHN
- MHAOD Branch | Queensland Health
- Queensland Mental Health Commission (tbc)
- Director | Governance and Quality Management MNHHS
- Manager | Alcohol and Other Drugs MNHHS
- Manager | Priority Communities, Brisbane North PHN
- Manager | Mental Health Reform, Brisbane North PHN

Other members that may join during regional plan development and review periods:

- Member of the HHS's Health Service Strategy and Planning Unit
- Member of the PHN's Commissioning team

The Executive Director | Mental Health, MNHHS and Executive Manager | Mental Health, Brisbane North PHN will chair alternate meetings.

The maximum term of office for consumer and carer representatives is two years. To ensure continuity, one consumer and one carer representative position will be declared vacant annually (if or when they have served two years). Prior to a representative reaching two years an EOI process for the position will be held. Existing representatives can re-nominate.

Other participants

The Group may request external parties to attend a meeting. However, such persons do not assume membership or participate in any decision-making processes of the group.

Subject matter experts and representatives will be requested to attend to inform decisions and discussion as required.

Quorum

A quorum will comprise half of the actual members, including the Chair, plus one.

Out-of-session papers

Urgent matters can be progressed out-of-session with the agreement of the group.

Communication

A communique from each meeting will be posted on www.mymentalhealth.org.au and distributed through networks by members. Existing local and regional interagency meetings will be utilised to provide input into the deliberations of the *Strategic Coordination Group* and to communicate about its work. Members of the Group may be called on to make presentations about the work of the Group and the Plan, as agreed by the Group or Chairs.

If required, the Chairs are generally the media spokespeople for the Strategic Coordination Group, as per their organisations' media policies. They may authorise other members to take on this role as required. Any media enquiries should be directed to the Chairs via the secretariat. Media comment should be restricted to the collective work of the Strategic Coordination Group and not on behalf of individual organisational members.

Performance

The group will undertake an annual self-assessment of its performance to ensure that the group remains fit for purpose and to identify and action any areas in which the effectiveness of the group could be improved. The Terms of Reference and Membership of the group will also be reviewed at this time.

Confidentiality

Members of the group may from time-to-time be in receipt of information that is regarded as 'commercial in confidence', 'security in confidence' clinically confidential or have privacy implications. Members acknowledge their responsibility to maintain confidentiality of all information that is not in the public domain. Members will maintain the group papers in a confidential manner separate from any other business or responsibilities of the member.

Secretariat

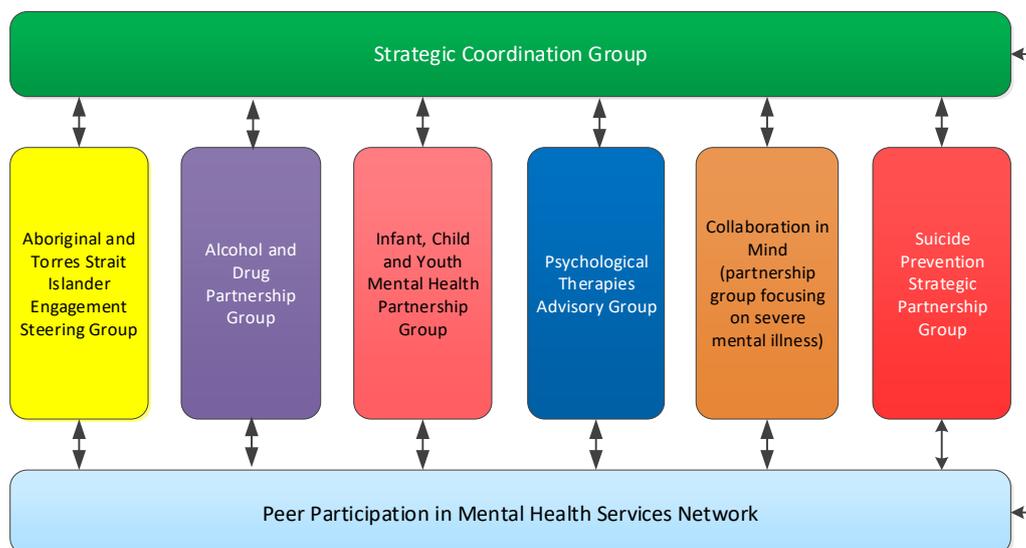
Secretariat support will be provided by the PHN. The Secretariat will be responsible for the preparation and circulation of the meeting agenda and accurately minuting all decisions of the group, in consultation with the Chair. The Secretariat will also be responsible for the timely tabling of all correspondence, reports and other information relevant to the group's activities.

Meeting Schedule

Meetings will be held bi-monthly. In addition, the Chair may call additional meetings as necessary to address any matters referred to the group or in respect of matters the group wishes to pursue within the terms of reference.

Relationship to other groups

A number of partnership groups exist to develop and implement parts of the regional plan. These groups will provide updates on progress to the Strategic Coordination Group and will be able to escalate issues to the SCG, particularly 'whole of system' issues.



Document History

Version	Date	Author	Nature of Amendment
1.0	21/11/17	Paul Martin	First Draft Release
1.1	30/1/18	Paul Martin	Revised by SCG
1.2	06/09/18	Paul Martin	Revised by SCG

Approval

Title	Name	Date