

# MHCC Advisory Council

## Terms of Reference

### 1. Introduction

The Mental Health Complaints Commissioner (MHCC) helps people resolve complaints about public mental health services. It also provides information, education and advice to services about effective complaint resolution and recommends service and system improvements.

During our establishment consultations with consumers, family/carers and services, we heard a clear message about the need to listen to the voice of people with lived experience and to work in partnership with consumers, family/carers and services.

To support this approach, in 2016 we established an Advisory Council of people with lived experiences of mental health services and people working in services.

### 2. Purpose

The purpose of the MHCC Advisory Council (the Council) is to bring together representatives from the Victorian mental health community to provide advice and input to help drive the MHCC's work. This is achieved through contributing ideas and expertise, especially in areas of lived experience of mental health services, co-design and co-production, and cultural and practice change within services and sector engagement.

### 3. Role and Function

The Council will provide recommendations to the Commissioner on strategic areas such as:

- the needs and priorities of people with lived experience in relation to complaint processes and effective responses
- key messages and strategies to address barriers to making a complaint
- communication materials including brochures, education products and resources, website and use of social media
- education and engagement strategies and projects such as training and resources on effective responses to complaints and complaint resolution, and responding to common complaint themes
- ways of evaluating the impact and effectiveness of MHCC's work
- future and/or emerging issues in the sector relevant to the work of the MHCC, such as strategic projects or further research to promote service improvements
- review and development of strategic plans
- using their own networks to promote the MHCC across Victoria's mental health community
- recruitment of new staff through participation on interview panels.

The above may be undertaken during Council meeting time, email/Teams liaison outside of meetings or participation in project subgroups or focus groups.

## 4. Driven by Lived Experience: framework and strategy

As part of MHCC's commitment to being driven by lived experience, in October 2020 the MHCC launched the '[Driven by Lived Experience: framework and strategy](#)' (framework); a collaboration between MHCC staff and Advisory Council.

In accordance with our framework, we aim for everyone, including our staff, Advisory Council members, and anyone engaging with the MHCC, to have the following experiences:

- You feel safe
- You have a voice and choice
- You feel heard and valued
- Your individual needs are recognised and respected
- You influence positive change.

The MHCC demonstrates our commitment to lived experience through embedding the following in all our work:

- *We ensure that our work is influenced, informed and driven by the diversity of people's lived experiences and backgrounds. We ensure that participation creates value for everyone involved.*
- *We recognise that every person is unique and will have different ideas, experiences, backgrounds and cultures. We adapt our approaches to reflect people's strengths and their individual and changing needs.*
- *We acknowledge that safety is not the same for everyone, and includes physical, emotional, relational and cultural elements. We believe and acknowledge experiences of trauma and do all we can to ensure each person feels safe when engaging with the MHCC.*
- *We are clear in our role, we do what we say we will do, our process is transparent and we communicate regularly with all individuals involved.*
- *We acknowledge the experiences and insight of people who engage with our office and are led by the voice of people with lived experience in all aspects and stages of our work. We share with the sector any positive changes to our practice and processes from collaboration with people with lived experience.*

## 5. Responsibility

It is the responsibility of Council members to:

- promote the MHCC vision, principles, goals and lived experience values and to share relevant information and feedback to achieve these
- actively participate in the work of the Council and contribute to the development of co-design and co-production approaches to the MHCC's work that reflect the diversity of lived experience and backgrounds of people accessing mental health services.

The group will consider how best to do this and provide advice accordingly.

## 6. Chairing of Council

The Council will be co-chaired by the Commissioner and a chairperson appointed by the Commissioner. The Co-chairs will work together to ensure the smooth running of meetings with a focus on ensuring the driven by lived experience values are met.

The quorum for meetings will be 50 per cent of Council members. If less than 50 per cent of Council members are in attendance the Chair will decide whether to reschedule the meeting or to proceed but delay any endorsements until the next meeting.

## 7. Membership

Members will be selected on the basis of individual ability to contribute to the purpose of the Advisory Council as outlined in these Terms of Reference.

If members are participating in other groups, they will not represent those groups on the Council or expect to represent all consumers, carers, services or others.

Members will be informed by their individual experience, knowledge and skills and engage in a mutually valuable learning forum.

Desirable experience includes current or recent experience of being a member of a consumer/carer advisory group or equivalent body.

The MHCC Advisory Council will comprise:

- 4-5 consumer non-representative members, including two youth members
- 3 family/carer non-representative members
- 3 members working in services
- Aboriginal and Torres Strait Islander members.

The MHCC ensures the Council is comprised of diverse backgrounds and life experiences including cultural and linguistically diverse, LGBTQI+, and young and older people.

## 8. Secretariat support and reporting

The MHCC, through the Senior Advisor, Lived Experience and Education will act as secretariat. The secretariat will coordinate meetings and provide meeting communiques and associated papers to members in a timely manner.

## 9. Attendance and term of tenure

MHCC Advisory Council membership is for two years. At the end of two years, members can re-apply for a further two year membership. Maximum tenure of the Advisory Council is four years, subject to the extension provision set out below.

The current membership of the Council have accepted an extension of tenure until 10 February 2021. Planning for the new round of recruitment for members will begin in December 2020.

The Commissioner may offer extensions beyond the stated maximum four years in circumstances where an extension (of up to two years) of membership is warranted to ensure continuity of the Council, to meet current demands and priorities of the MHCC and/or to align with the Commissioner's term of appointment.

Members are expected to attend every meeting. If a member's availability to attend or participate changes, and a member misses three consecutive meetings or there are issues in their

participation in the meetings, their place may be made vacant by the Commissioner depending on the circumstances.

Members may resign during their term by writing to the Commissioner. In situations where a vacancy occurs, the MHCC may consider applicants from prior recruitment rounds or call for Expressions of Interest and undertake a new selection process to fill the vacancy. Where necessary, an Expression of Interest and/or recruitment for a Council member will take place, for example, where recruitment is targeting a particular priority population or areas of knowledge/experience.

## **10. Meetings**

There will be up to six scheduled meetings per year for two hours at the Mental Health Complaints Commissioner, Level 26, 570 Bourke Street, Melbourne. Video-conferencing or telephone conferencing options will be available.

Project subgroups or focus groups that form may have additional meetings outside of normal Advisory Council meeting times. Specially convened email/Teams liaison outside of meetings may also be called on an as needed basis.

## **11. Reimbursement and remuneration**

Members of the Council who are not service or sector employees who attend in their own time will receive a gratuity of \$165 for each meeting attended. This payment will cover preparation (e.g. reading), attendance at the meeting and travel to and from the meeting within 75kms of MHCC. We will make individual arrangements for members who travel beyond this distance or who have special travel needs.

Service/sector member employees are expected to attend meetings as part of their core working hours. The MHCC will liaise with the service/sector agency to facilitate this outcome. Where a service/sector member employee works part time, remuneration by the MHCC can be discussed on a case by case basis.

The secretariat for the Council will co-ordinate payments, reimbursements and remuneration to members.

Where a Council member is engaged by the MHCC on an ad hoc basis to provide input to, or advise on, for example a project, consultation or to attend an event, remuneration is at a rate of \$55 per hour.

The MHCC member of staff who engages the Council member on an ad hoc basis will co-ordinate payments, reimbursements and remuneration to members.

## **12. Privacy and confidentiality**

To comply with our privacy obligations information provided to Council members will not identify individuals. Members will need to comply with the disclosure of information provision in section 265 of the Mental Health Act and will be required to sign a confidentiality agreement and abide by its conditions.

## **13. Conflict of interest**

At times, Council Members may fall into the category where a perceived or an actual conflict of interest surfaces, due to employment changes or role changes or via association with others, groups, organisations or bodies related within the mental health field.

Council members are asked to declare these changes/possible conflicts of interest as soon as practicable and inform both the Commissioner and Co-chair. By declaring a perceived or actual conflict of interest, discussions may occur and a decision will be made by the Commissioner and the Co-chair to determine if an actual or perceived conflict of interest exists, and the appropriate course of action.

Possible courses of action may include processes for managing the perceived or actual conflict of interest with the Council members by the Council member removing themselves from particular discussions or agenda items during meetings. If it is assessed by the Commissioner and the Co-chair that the perceived or actual conflict of interest cannot be managed, a decision will be made that the member's position on the Council will be vacated and other forms of contribution to the work of the MHCC may be explored as outlined above.

## 14. Review of Terms of Reference

The MHCC Advisory Council Terms of Reference and participation by all Advisory Council members aim to reflect the requirements of the 'Partnering with Consumers Standard' set out in the Australian Commission on Safety and Quality in Health Care, National Safety and Quality Health Standards.

"...the Partnering with Consumers Standard aims to create health service organisations in which there are mutually beneficial outcomes by having:

- consumers as partners in planning, design, delivery, measurement and evaluation of systems and services
- people as partners in their own care, to the extent that they choose.

Terms of Reference will be reviewed every 12 months at the final convened meeting for each year. Version control will indicate reviewed Terms of Reference, effective dates and a summary of changes.

**To receive this document in an accessible format, phone 03 9032 3328, using the National Relay Service (13 36 77) if needed, or email [help@mhcc.vic.gov.au](mailto:help@mhcc.vic.gov.au).**

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### Document history and version control record

Version no.	Prepared by	Effective date	Approved by	Summary of changes
2	K Saltmarsh	18 June		TOR's Version 1 09.06.16 attached
3	Lynne Coulson Barr with input from Jennifer Black	28 June		Further details on the role, associate membership and conflicts of interest
4	Emma Bohmer and Jenna Montgomery	December 2020	Treasure Jennings, Commissioner	Reference to Driven by Lived Experience framework and strategy, inclusion of quorum, removal of Associate Members, inclusion of hourly ad hoc remuneration, update to 'Partnering with Consumers Standard'