

Working Group: ACT Child and Youth Mental Health Sector Alliance

MINUTES

9:30am – 11:30am, Tuesday 4 June 2024
Youth Coalition of the ACT: 46 Cliathus St, O'Connor

Attendees:

- Erin Barry, Youth Coalition of the ACT
- Jean Fitzroy, Marymead Catholic Care
- Josephine Brogden, Office for Mental Health and Wellbeing / Coordinator of the Youth Reference Group
- Laura Eason, Mental Health Policy and Strategy, ACT Health
- Paul Spooner, Mental Health Policy and Strategy, ACT Health
- Stephanie Hodson, Relationships Australia Canberra and Goulburn
- Stephanie Lentern, Capital Health Network (Chair)
- Tamzin Oliver, CYPS (Melaleuca Place), Community Services Directorate

<p>1 9:30 – 9:45am</p>	<p>Welcome and Introductions</p> <ul style="list-style-type: none"> • Acknowledgement of Country • Acknowledgement of Lived Experience • Previous Minutes were approved • Members agreed that the endorsed meeting minutes from the March meeting will be uploaded to the Alliance website. • Members introduced themselves 	<p>Stephanie Lentern</p>
<p>2 9:45 – 10:15am</p>	<p>Project Update: Service readiness to collect and use service feedback – clinical and non-clinical services</p> <p><i>Aim:</i> To provide a brief update on the 'service readiness' project; including the consultation at the Alliance Forum in April, and current scoping survey.</p> <p>Following the initial consultation with the Working Group at the March meeting (see March Minutes), the refined consultation questions and processed were successfully used at the April Forum. The findings will be captured in the forthcoming Forum Summary Paper. Emerging themes included differentiating between children's experiences and adolescents/older young people's experiences. For young people, this included the importance of data security and privacy; and understanding how feedback will be used.</p> <p>The scoping survey has received a small number of service responses and is still open for consultation.</p>	<p>Erin Barry</p>



	<p>The lead agencies are seeking to progress a literature review to understand what the evidence says in relation to best practice principles and processes for young people towards providing service experience feedback. As Relationships Australia are nationally progressing work in this area to understand the child’s voice in service delivery, the Alliance project will seek to dovetail and complement Relationships Australia’s work.</p> <p><i>Next steps:</i> The lead agencies will continue to progress commissioning the literature review; and will draw together findings from this, and from the Alliance consultations. A YRG consultation will also occur later in this project, to hear YRG members’ own views on the topic, and also their views on the emerging themes and findings.</p>	
<p>3 10:15 – 10:45am</p>	<p>Other related initiatives</p> <p><i>Aim:</i> To provide an opportunity for members to update on other initiatives, and/or identify potential tasks the WG could undertake to contribute to other initiatives.</p> <p>Mental Health Commissioning: The Insights Report from the Design phase of commissioning has been released, and feedback is welcome to inform the draft Investment Strategy, by 1 July. It is intended the draft Investment Strategy will be open for consultation in late August; with a final Strategy released towards the end of the year (after the caretaker period within ACT Government). Grant opportunities will be open from March.</p> <p>CYFSP Commissioning: Feedback has closed on the draft Investment Strategy, and we are awaiting the final Investment Strategy.</p> <p>Members discussed the funding limitations of both sectors, and the impact of this on service delivery; as population demand increases.</p> <p>Youth Reference Group: The YRG launched the ‘Our Say’ Youth Lived Experiences FAQs document, which aims to provide services and stakeholders with answers to the commonly-asked questions they are asked. This resource aims to support improved consultation processes with the YRG, but is also a valuable document for anyone planning, designing or seeking to improve their service or practice with young people. It is a living document, and feedback is welcome.</p> <p>The YRG is also developing a Guidance Toolkit, which will collate the existing evidence, and engage in consultation with YRG members (and other YRGs and young people) to create a</p>	<p>All members</p>



	<p>comprehensive and accessible resource for services. They will soon be delivering a survey for service providers, on the types of resources they would like to see included in the Toolkit and are open to feedback and recommendations.</p> <p>ACT Scoping Study on people with complex needs: Lee-Anne Rogers from OMH&W consulted with the Youth Housing and Homelessness Forum members to add a youth perspective to this project.</p> <p>MindMap: The team is negotiating with ACT Digital regarding website improvements, following feedback from young people; and identifying ways to ensure that the portal feels like a safe online space for young people.</p> <p>Minimum Age of Criminal Responsibility: The new Chair of the Therapeutic Support Panel, Dr Justin Barker, presented at the Alliance Forum, and highlighted early challenges regarding the intersection between MACR and the mental health system; particularly pertaining to the continuing issue of the ‘missing middle’.</p> <p><i>Actions:</i></p> <ul style="list-style-type: none"> • Youth Coalition to explore options to host child/youth mental health consultations to inform the Mental Health commissioning process 	
<p>4</p> <p>11-11:30am</p>	<p>Project Discussion: Information-sharing, privacy and consent</p> <p><i>Aim:</i> To workshop opportunities to improve service provider practices for information-sharing, privacy and consent with regard to:</p> <ol style="list-style-type: none"> Practices / processes between service providers Practices / processes with parents / carers and families of children and young people Talking to young people about consent and information-sharing. <p>Due to key member absences, the Working Group had a broader discussion regarding the future focus and direction of this project.</p> <p>Members discussed that barriers to information-sharing was highlighted in the MH Commissioning Design Insights report; and that there is a lack of clarity regarding the legislation and policy context. It was felt that at an operational level, if practitioners don’t understand the legislation, they err on the side of being risk-averse. It was agreed that there is a need to better understand and clarify the legislation and policy context; however, this may not be the best time to do so due to the forthcoming changes in</p>	<p>Stephanie Lentern and Erin Barry</p>



mandatory reporting and CYF reforms. It was also noted that in some contexts (e.g. child protection concerns) that over-sharing may occur, due to a similar lack of understanding about the legislative context in relation to mandatory reporting.

Members discussed that the intended outcomes we are trying to achieve through this work, include (for example): Continuity of support for children and young people as they transition between services (e.g. safety planning); improved ability of parents/carers to support their children and young people; improved capability for services to engage with young people effectively in relation to discussions about consent and information-sharing.

Barriers to communication between government and non-government services was noted as especially challenging.

It was noted that a key practice barrier, is a perceived lack of empathy or human approach, to support young people transparently without being dismissive.

Members discussed the opportunity to focus on empowering young people to own their own mental health information, building on Ian Hickie's work in this area. It was noted that people don't share their information and distress in order for nothing to happen. Safety planning can occur collaboratively with young people; as can co-designing and co-writing information about what care has occurred or is needed. Frustrations for young people include sharing their stories over and over.

It was noted that sometimes young people will be prescribed medication but not given information about their mental health diagnosis. Further, children may be unaware of diagnoses (e.g. neurodiversity) if their parents have not shared this with them.

Innowell was noted as a tool that gathers individuals' personal outcome measurement data and medications, and allows individuals to answer questions about their mental health; that their clinician can access in real time.

Consent (to share information):

It was noted that young people need clarity about what the information-sharing and consent processes are *before* they seek help to access services: some young people do not access services at all, because they are concerned that what they share will not be kept confidential (e.g. school counsellors). This has implications for how young people come into and access services.

Members discussed that consent is not 'black and white'. Different children and young people will have different needs, depending on their circumstances.



	<p>It is also important for this to be considered in relation to age and developmental stage. Processes for children, adolescents, and older young people will each look different. Adolescents and young people know and understand more than are often given credit for.</p> <p>The timing of consent-seeking is important: it is not necessarily appropriate to do so when young people are angry and in distress.</p> <p>Summary of key issues discussed related to:</p> <ul style="list-style-type: none"> • Individuals owning their own information, and knowing what their treatment/care has been • Planning with individuals regarding what should happen with this information; including safety planning and sharing with the right people at the right time. <p><i>Actions:</i></p> <ul style="list-style-type: none"> • Lead agencies to convene to discuss next steps. • It was discussed that it would be helpful to better understand and clarify the legislation and policy context, but this may need to occur at a later stage in this project. • A starting point for this project may be to better understand young people's preferences in relation to consent and information-sharing; and to use this as a foundation from which to identify and discuss best practice for services. 	
<p>5 11:25 – 11:30am</p>	<p>Next Steps</p> <ul style="list-style-type: none"> • Meeting minutes will be drafted and sent to working group members for comment. • Youth Coalition to explore options to host child/youth mental health consultations to inform the Mental Health commissioning process • Lead agencies to convene to discuss next steps in relation to information-sharing and consent project. • Next meeting: Friday 19 July 2024 	<p>Stephanie Lentern</p>
<p>11:30am</p>	<p>Meeting Close</p>	