Terms of Reference

Mental Health & Suicide Prevention Advisory Committee

Background
Primary Health Networks (PHNs) have been established with the key objectives of increasing the efficiency and effectiveness of primary health care services for individuals of each region, particularly people at risk of poor health outcomes.

CESPHN is committed to building a person centred, integrated system of mental health care in the central and eastern Sydney region, ensuring people with a mental health need can access timely and wellness-focused care that optimises recovery and supports self-management and enhanced mental health.

PHNs are funded to ensure a regional approach to mental health and suicide prevention by developing evidence-based plans and service mapping that identifies needs and gaps, increases efficiencies, and encourages the integration of mental health services and supports.

Purpose
The purpose of the Mental Health and Suicide Prevention Advisory Committee is to provide CESPHN with advice and input from a wide range of relevant stakeholders on the development of primary mental health care which meets the identified objectives.

Governance
The Mental Health and Suicide Prevention Advisory Committee is responsible for:

- providing strategic advice to CESPHN on the development of innovative services, implementation of new models of care and best practice models
- advising on how to best support the development of approaches to building regional integration, capacity, capability, quality and safety in local mental health and suicide prevention services
- advising on mental health and suicide prevention commissioning activities and priorities
- contributing to and supporting the development of regional mental health and suicide prevention strategies
- supporting the co-design of mental health and suicide prevention programs
- advising on how to better support local primary care providers to improve client outcomes and experiences with their health care within a Stepped Care approach
- providing advice and communication channels for the flow of information about current initiatives.

Chair and Secretariat
The Chair and Secretariat are appointed by CESPHN.

The Chair is responsible for:

- Leading discussions in line with the Committee's responsibilities and Purpose
- forming the agenda in consultation with the Secretariat
- liaising with committee members regarding the submission of items for inclusion on the agenda.

The Secretariat is responsible for:

- preparing and distributing the agenda and any supporting documentation for meetings
- recording discussions during meetings
- preparation and distribution of minutes from all meetings, once approved by the Chair
- following up on any matters arising from meetings

- communicating with members on relevant matters relating to the business and conduct of the meetings.

The Advisory Committee may form focused working groups or subcommittees to investigate issues in more detail, as required by the PHN.

Membership composition
CESPHN is committed to ensuring diversity of perspectives and seeks to appoint members reflective of diversity in age, gender, geographical and cultural background.

Membership consists of but is not limited to:

- People with lived or living experience, carers and family members, and lived experience advocates
- Local Health District and Network representatives
- Clinicians
- Community Managed Organisations
- GPs
- Allied Health Professionals
- Relevant individuals or organisations pertinent to the region
- CESPHN representatives including an Executive Leadership Team (ELT) representative

Appointed members must live or work within the Central and Eastern Sydney catchment.

The committee will not exceed 15 members excluding CESPHN representatives.

Terms of Appointments
Members will be invited to join the committee through an open expression of interest process undertaken by CESPHN. Each expression of interest will be viewed fairly and without judgement, whilst meeting the needs of the organisation. Local health district/network representatives will be nominated by their respective CEO. CESPHN members will be appointed by senior CESPHN employees.

Members are appointed for a period of 2 years. Members who complete their term are required to re-apply by submitting an expression of interest.

Membership will cease when:
- A member resigns
- A member has not attended three consecutive meetings without suitable delegation or apology
- The maximum term has been reached
- A member breaches confidentiality and/or the law; or
- Does not adequately declare conflicts of interest.

CESPHN, at its discretion:
- Will consider appointments to vacancies, as appropriate
- May terminate a member's appointment at any time and for whatever reason.

A representative from the EIS Health Board and CESPHN Executive may attends meetings from time to time.

Members
A list of members is at Appendix 1: Members of the Mental Health & Suicide Prevention Advisory Committee.

An CESPHN Executive Leadership Team (ELT) representative will attend each meeting to support organisational alignment, provide strategic oversight, and facilitate escalation of emerging issues, risks and opportunities where required.

Conflict of interest
All members are required to declare any conflict of interest or a potential and or perceived conflict of interest upon applying to and throughout their term on the committee.

Confidentiality
All information shared and discussions held during meetings must be treated as confidential and must not be disclosed to anyone outside of the committee, unless otherwise specified by CESPHN.

Timeframes
The current Committee is established until December 2026. The new Committee will be established until December 2028.

The Terms of Reference will be reviewed every two years or at CESPHN discretion.

Meeting format

Frequency
Meetings are held quarterly, no fewer than 3 times per year in addition to out of session work as required. Meetings are held for a minimum of 1.5 hours. Extraordinary meetings may be called with a minimum 2 weeks' notice.

Format
Meetings will either be held online via videoconference or face-to-face in the CESPHN office, or a hybrid of online and face-to-face.

Meeting Minutes
The agenda and any meeting papers will be circulated five working days before each meeting. Minutes will be recorded and produced for each meeting.

Minutes of the meeting will be circulated after the meeting as soon as practicable, once approved by the Chair.

Remuneration
Eligible members are remunerated by CESPHN for meeting attendance as per the CESPHN Representation Policy. If members are salaried and or remunerated by other organisations for their time on the Committee, then no further remuneration from CESPHN will apply.

Quorum
At least six members, one of whom must be the Chair, must be in attendance for a quorum to be achieved. A quorum must consist of at least five (5) members who are not CESPHN employees.

Reporting
Committee meeting discussions and actions are summarised and submitted to the EIS Health Board annually.

Data governance
All information including personal details is treated as confidential and managed in line with CESPHN's *Privacy Policy*, which complies with the Privacy Act 1988 (Cth), Australian Privacy Principles 2014; Privacy Amendment (Enhancing Privacy Protection) Act 2012, Privacy Amendment (Notifiable Data Breaches) Act 2017 and the Health Records and Information Privacy Act 2002 (NSW).

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Central and Eastern Sydney PHN is a business division of EIS Health Limited.
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Review

Date of last review: August 2024
Date of next review: August 2026