



South Australian Government

Interim Response to the
Report into Mental Health
Governance in South Australia

March 2019



Government
of South Australia

SA Health

Introduction

In September 2018, the Government engaged an independent consultant to review the governance of Mental Health Services (MHS) in South Australia.

In South Australia, MHS functions are delivered by:

- Department for Health and Wellbeing (Office of the Chief Psychiatrist and Mental Health Unit)
- South Australian Mental Health Commission
- Principal Community Visitor and Community Visitor Scheme
- Health and Community Services Complaints Commissioner
- Public Advocate, Office of the Public Advocate.

These departments, officers and agencies are all involved in setting policy, planning, strategy, the commissioning of services, safety and quality, the setting of standards, performance monitoring of services and the system as a whole, responding to complaints and regulatory visits and inspections.

The key purpose of the review was to ensure the most effective governance and safeguards are in place that deliver the highest quality MHS for all South Australians. Furthermore, to minimise duplication and gaps between policy development, commissioning of services and the role of the regulatory bodies.

It was also important that the review build on the recommendations of the Oakden Report and the Independent Commissioner Against Corruption's (ICAC) report into Oakden services.

The specific advice sought needed to address the following:

1. The necessity of the above bodies in providing oversight of the Mental Health system in South Australia, and the best delineation of roles and functions between these bodies
2. The optimal co-location, integration and coordination of administrative functions of the above roles, that maintains the independence of statutory officers, while enhancing collaboration, and sharing of administrative support
3. The ideal structure within the Department for Health and Wellbeing for oversight of MHS
4. The suitability of the functions of the Chief Psychiatrist and the Director, Mental Health Strategy roles within the Department, and the degree to which the functions can be combined in a single incumbent or should be separated.

The review process included an analysis of MHS policies, plans and regulatory measures in place in South Australia, as well as engagement with a range of stakeholders in South Australia and Victoria.

Interim SA Government Response

The South Australian Government broadly accepts the five recommendations contained in the report.

The review identified several key issues, which will need to be addressed in both the short and long-term, to ensure effective governance and safeguards for MHS in South Australia. The issues relate to leadership, structure and reporting lines within the Office of the Chief Psychiatrist and Mental Health Strategy Unit in the Department; and opportunities for gaps and similarities across the statutory bodies, including the role of the South Australian Mental Health Commission, to be improved.

Since the Chief Psychiatrist role was established in 2010, a range of governance models has been adopted. This has ranged between the amalgamation and separation of the Chief Psychiatrist and Director, Mental Health Strategy roles, along with changes in reporting lines. The structure of the Mental Health Strategy Unit in the Department has also experienced resourcing tensions to meet the requirements of the Chief Psychiatrist, as needed, together with that of the unit to provide administrative and policy oversight of MHS.

The Government's review of the broader reforms to SA Health will have an impact on the roles and responsibilities of the Department and the Local Health Networks, and will have relevance in relation to the recommendations contained in the report. For the system itself, considerations will be needed and further consultation on the intersections between the Commission on Service Excellence and Innovation in Health and Wellbeing SA in relation to performance monitoring and the clinical quality and safety assurance roles, along with health promotion activities.

There are a number of statutory officers and bodies, which provide oversight of the Mental Health system in South Australia. The ICAC Commissioner's report into Oakden titled, "Oakden: A shameful Chapter in South Australia's History" highlighted several potential shortages in the identification, notification and escalation of complaints. Improved formal mechanisms will be embed to strengthened collaboration and improve communication between these bodies to achieve better outcomes for clients.

The Government is committed to making changes to improve MHS and accepts the recommendations contained in the report.

Interim Response to Recommendations

Objective	Recommendation	Government position
<p>The suitability of the functions of the Chief Psychiatrist and the Director, Mental Health Strategy roles within the Department for Health and Wellbeing, and the degree to which the functions can be combined in a single incumbent or should be separated.</p>	<p>Recommendation 1</p> <p>Short/Medium term recommendations</p> <p>In the absence of role separation, it is preferred that each of the following approaches is implemented in combination:</p> <ul style="list-style-type: none"> ▪ Implement a transparent Reporting and Decision-making Framework (option 1) ▪ Amend reporting by the Chief Psychiatrist/Director, Mental Health Strategy to the Chief Executive (option 2) ▪ Appoint a Deputy Chief Psychiatrist - inspections and investigations (option 3) ▪ Appoint a Director, Mental Health Strategy, Performance and Evaluation (option 3). 	<p>Recommendation 1 is broadly supported.</p> <p>It is acknowledged that in order for the Chief Psychiatrist to fulfil his statutory role, a transparent <i>Reporting and Decision-making Framework</i> will be necessary. SA Health will work with the Office of the Chief Psychiatrist to develop and implement the Framework.</p> <p>The reporting line of the Chief Psychiatrist will be amended to report directly to the Chief Executive, Department for Health and Wellbeing. This will ensure reporting is based on functional roles, which would reduce the potential for stakeholder concerns regarding perceived conflict of interest issues in the role.</p> <p>The need to appoint a Deputy Chief Psychiatrist – inspections and investigations will be further considered.</p> <p>The Director, Mental Health Planning, Policy and Safety role has been created and advertised. An announcement is anticipated in early 2019.</p>

Objective	Recommendation	Government position
	<p>Recommendation 2</p> <p>Long-term recommendations</p> <ul style="list-style-type: none"> ▪ Appoint separate officeholders for the Chief Psychiatrist and Executive Director, Mental Health Strategy roles, with clear job descriptions and delineation of reporting lines (option 4) ▪ Mental Health Strategy Unit restructure to align with functional portfolios. This also requires a separate office to support each role. It is proposed that a Director, Legislation and Safety, would report to the Chief Psychiatrist, while a Director, Mental Health Strategy, Performance and Evaluation would report to the Executive Director, Mental Health Strategy. 	<p>Recommendation 2 is broadly supported.</p> <p>The longer-term structural changes, proposed in the report, to the role of the Chief Psychiatrist and the Mental Health Strategy Unit will be implemented in the future and are not proposed during the term of the current incumbent.</p>

Objective	Recommendation	Government position
<p>The ideal structure within the Department for Health and Wellbeing for oversight of mental health services.</p>	<p>Recommendation 3</p> <p>Consideration is to be given to:</p> <ul style="list-style-type: none"> ▪ Mental Health Strategy Unit – seek internal assessment of all roles that report within the Mental Health Strategy Unit and the optimal accountability, reporting lines and physical location. ▪ Local Health Networks – adoption of Statement of Priorities or similar and transparent reporting mechanisms and performance monitoring for Local Health Networks. ▪ Commission for Excellence and Innovation in Health – establishment of the Commission as the lead agency for clinical quality and safety performance monitoring, including Mental Health. ▪ Wellbeing SA – development of an integrated role in promotion, prevention and early detection of both mental and physical health, with a remit for community engagement. Consolidation of existing ‘health promotion’ resources within the Department for Health and Wellbeing is also recommended. 	<p>Recommendation 3 is broadly supported.</p> <p>As part of the Government’s reforms to SA Health, a detailed design and consultation process will be undertaken to determine the ideal structures within the Department and across Local Health Networks, including for the delivery of Mental Health Services.</p> <p>For example, elements of promotion, prevention and early detection of both mental and physical health will be included as part of the consultation phase for the establishment of Wellbeing SA.</p>

Objective	Recommendation	Government position
<p>The necessity of the identified bodies in providing oversight of the Mental Health System in South Australia, and the best delineation of roles and functions between these bodies.</p> <p>The optimal co-location, integration and coordination of administrative functions of the roles, which maintains the independence of statutory officers while enhancing collaboration and sharing of administrative support.</p>	<p>Recommendation 4</p> <p>Statutory officers</p> <p>The statutory functions of the Health and Community Services Complaints Commissioner, Principal Community Visitor and Public Advocate are transparent and meet the community needs. No changes to the statutory roles or functions are recommended. Recommended system improvement initiatives include:</p> <ul style="list-style-type: none"> ▪ SA Health to embed formal mechanisms between entities to drive timely identification, notification and escalation of complaints. ▪ SA Health to seek the development of an inter-agency protocol relating to identified individual or systemic issues, including findings relating to complaints, investigations or reviews. ▪ Co-locate the Statutory Officers outside of the Department for Health and Wellbeing. It is recommended the Attorney-General be consulted regarding the inclusion/exclusion of the Public Advocate in co-location. 	<p>Recommendation 4 is broadly supported.</p> <p>Further work will be undertaken to determine strategies to embed formal mechanisms to drive timely identification, notification and escalation of complaints across statutory bodies. This will include the development of inter-agency protocol to improve the management of complaints.</p> <p>Considerations of the co-location of statutory offices will be subject to further consideration by government.</p>

Objective	Recommendation	Government position
	<p>Recommendation 5</p> <p>SA Mental Health Commission</p> <ul style="list-style-type: none"> ▪ Scoping of Wellbeing SA is to consider the key functions of stakeholder engagement/coordination; Mental Health leadership, advocacy and education; and workforce development. ▪ Bringing the SA Mental Health Commission into the new agency is recommended. ▪ If integration is not supported, tangible outputs and outcomes relating to the key functions for the SA Mental Health Commission must be agreed and supported by the necessary Government commitments. 	<p>Recommendation 5 is supported.</p> <p>The functions of the SA Mental Health Commission, in particular, those related to health promotion, are well aligned with the tenets of Wellbeing SA.</p> <p>The merger of the Commission into Wellbeing SA will be subject to the consultation process, which has already commenced in relation to the creation and establishment of the new entity.</p> <p>The other functions of the Commission will be realigned with the Office of the Chief Psychiatrist, particularly to support the resourcing requirements of the Office of the Chief Psychiatrist.</p> <p>This will be achieved by 1 July 2019.</p>

For more information

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