Mental Health Policy Framework

1. Policy framework statement
The Mental Health Policy Framework specifies the legal, best practice, reporting and process requirements that all Health Service Providers (HSPs) must comply with in order to ensure effective and consistent provision of public mental health services across the WA health system.

2. Purpose
The Director General (DG) of the Department of Health is the System Manager responsible for the overall management, strategic direction and stewardship of the WA health system. The DG will use policy frameworks to ensure a consistent approach to a range of matters undertaken by HSPs. Policy frameworks must be complied with and implemented as a part of ongoing operations.

The purpose of this policy framework is to ensure:

- compliance with the legislative requirements under the Health Services Act 2016 and the Mental Health Act 2014
- service coordination and integration in the provision of mental health services
- the appropriate reporting of information to the Minister for Health, the Minister for Mental Health, the Mental Health Commission, the Chief Psychiatrist, the Health and Disability Services Complaints Office, and the System Manager.

3. Applicability
This policy framework is binding on each HSP to which it applies or relates.

4. Principles
The key principles that underpin this policy framework are:

**Accessibility**
Accessible and safe services that provide people experiencing mental health issues with timely treatment, care and support of a high quality, to promote recovery in the least restrictive manner that is consistent with their needs.

**Accountability and improvement**
Accountable services based on contemporary best practice and committed to continuous improvement.

**Consistency**
Consistency with State and Australian Government mental health policies and compliance with mental health legislation and standards, including upholding of the Charter of Mental Health Care Principles.

**Person-centred**
A person-centred focus with a view to obtaining the best possible outcomes for people experiencing mental health issues, including by recognising diverse individual
circumstances, life experiences, needs, beliefs, preferences, aspirations, values and skills, while delivering goal oriented treatment, care and support.

5. Legislative context
The Health Services Act 2016 refers to policy frameworks in ss. 26-27 and s. 34(2)(c). Other relevant parts in the Act that relate specifically to this policy framework include ss. 44-45.

The legislation below, may also apply:

- Mental Health Act 2014 and Mental Health Regulations 2015
- Criminal Law (Mentally Impaired Accused) Act 1996
- Guardianship and Administration Act 1990

6. Mandatory requirements
Under this policy framework HSPs must comply with all mandatory requirements* including:

- Alcohol and Other Drug Withdrawal Management Policy – MP 0062/17
- Chief Psychiatrist of Western Australia (2015). Chief Psychiatrist’s Standards for Clinical Care as required under Section 547 of the Mental Health Act 2014. Perth, Chief Psychiatrist of Western Australia.
- Chief Psychiatrist of Western Australia (2015). Chief Psychiatrist’s Practice Standards for the Administration of Electroconvulsive Therapy. Perth, Chief Psychiatrist of Western Australia.
- Community Mental Health Welfare Checks: Role of Mental Health Clinicians - OD 0644/16
- Department of Health (2012). Responding to an Allegation of Sexual Assault Disclosed within a Public Mental Health Service Policy. Department of Health, Western Australia.
- Further Opinions under the Mental Health Act 2014 - OD 0637/15
- Implementation of the WA Clozapine Initiation and Titration Chart in Mental Health Units - OD 0596/15
- Mandatory Reporting of Notifiable Incidents to the Chief Psychiatrist - OD 0635/15
- Mental Health Consumer Medication Information - OD 0591/15
- Missing Persons Policy – MP 0012/16
- Provision of Mental Health Emergency (Crisis) and Follow Up Information On Discharge From Hospital Emergency Departments - IC 0223/15
- Requesting Police Assistance for Transport under the Mental Health Act 2014 - OD 0664/16
• **Requesting Transport officers and WA Police Assistance in Transporting Mental Health Patients Policy – MP 0063/17**
• **State-wide Standardised Clinical Documentation (SSCD) for Mental Health Services - OD 0526/14**
• **Use of Physical and/or Mechanical Restraint during Road-based Transportation of Mental Health Patients Policy – MP 0060/16**
• **Use of Photographic Equipment in Mental Health Services - OD 0643/16**

*Any mandatory requirement document that references the *Hospitals and Health Act 1927* must be interpreted as a requirement under the *Health Services Act 2016*.*

7. **Supporting information**
The following documents support and inform the implementation of the mandatory requirements:

• **Addendum to Mental Health Complaints Partnership Agreement between Health and Services Disability Complaints Office, Department of Health, Council of Official Visitors, Office of the Chief Psychiatrist and Mental Health Commission (August 2015).**
• **Australian Commission on Safety and Quality in Health Care (2012). National Safety and Quality Health Service Standards. Sydney, ASCSQHC.**
• **Chief Psychiatrist of Western Australia (2015). Chief Psychiatrist’s Guidelines as required under Section 547 of the Mental Health Act 2014. Perth, Chief Psychiatrist of Western Australia.**
• **Mental Health Complaints Partnership Agreement between Health and Disability Services Complaints Office, Department of Health, Council of Official Visitors, Office of the Chief Psychiatrist and Mental Health Commission (August 2015).**
• **Stokes, B (2012). Review of the admission or referral to and the discharge and transfer practices of public mental health facilities/services in Western Australia. Perth, Government of Western Australia, Department of Health and Western Australian Mental Health Commission.**
• **Victorian Government Department of Health (2013). National Practice Standards for the Mental Health Workforce. Melbourne, State of Victoria, Department of Health.**

8. **Policy framework custodian**
Assistant Director General
System Policy and Planning Division

Enquiries relating to this policy framework may be directed to:

PolicyFrameworkSupport@health.wa.gov.au
9. Review
This policy framework will be reviewed as required to ensure relevance and recency. At a minimum this policy framework will be reviewed within two years after first issue and at least every three years thereafter.

<table>
<thead>
<tr>
<th>Version</th>
<th>Effective from</th>
<th>Effective to</th>
<th>Amendment(s)</th>
</tr>
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<tbody>
<tr>
<td>PF2016_01</td>
<td>1 July 2016</td>
<td>Current</td>
<td>Original version</td>
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10. Approval
This policy framework has been approved and issued by the Director General of the Department of Health as the System Manager.

<table>
<thead>
<tr>
<th>Approval by</th>
<th>Dr David Russell-Weisz, Director General, Department of Health</th>
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<tbody>
<tr>
<td>Approval date</td>
<td>1 July 2016</td>
</tr>
<tr>
<td>Published date</td>
<td>1 July 2016</td>
</tr>
<tr>
<td>Dept. File No</td>
<td>F-AA-40152</td>
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11. Compliance
This policy framework is binding on those to whom it applies or relates. Implementation at a local level will be subject to audit.

12. Glossary of terms

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<thead>
<tr>
<th>Term</th>
<th>Meaning</th>
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<tr>
<td>Applicability</td>
<td>Under Section 26 of the <em>Health Services Act 2016</em>, policy frameworks may apply to:</td>
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<td></td>
<td>• All Health Service Providers</td>
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<td></td>
<td>• A type of public health service facility</td>
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<td></td>
<td>• A type of public health service</td>
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<td>• A type of staff member of a health service provider.</td>
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<td>Health Service Provider</td>
<td>Health Service Provider means a health service provider established under s. 32 of the <em>Health Services Act 2016</em> and may include North Metropolitan Health Service (NMHS), South Metropolitan Health Service (SMHS), Child and Adolescent Health Service (CAHS), WA Country Health Service (WACHS), East Metropolitan Health Service (EMHS), Quadriplegic Centre and Health Support Services (HSS).</td>
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<tr>
<td>WA health system</td>
<td>The WA health system is comprised of the Department of Health, Health Service Providers (NMHS, SMHS, CAHS, WACHS, EMHS, Quadriplegic Centre and HSS) and to the extent that contracted health entities provide health services to the State, the contracted health entities.</td>
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