Terms of Reference: Mental Health Service Coordination Alliance Governance Committee

Mental Health Service Coordination Alliance Governance Committee

Terms of Reference

February 2024

1. Purpose

The Mental Health Service Coordination Alliance (MHSCA) Governance Committee has been established to lead strategic direction and to provide operations oversight of Eastern and North East Mental Health Service Coordination Alliances (known as EMHSCA and NEMHSCA).

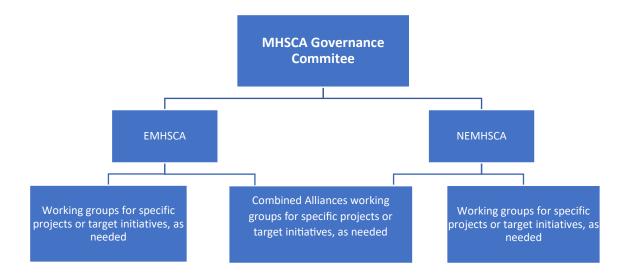
The purpose of the MHSCA Governance Committee is to:

- Ensure that EMHSCA and NEMHSCA Alliance and Working Group activities align with the stated purpose and strategic directions.
- Ensure appropriate governance arrangements are in place with respect to funding and budgetary planning.
- Generate and / or endorse MHSCA's positions on issues of relevance to the sector.
- Oversee, review and provide ongoing recommendations for enhancement regarding future MHSCA focus and functioning.

2. Relationship between the MHSCA Governance Committee and EMHSCA/NEMHSCA

The MHSCA Governance Committee provides governance for the Alliances known as EMHSCA and NEMHSCA. Members on the Governance Committee represent the constituents of EMHSCA and NEMHSCA and are informed by them as well as being responsible for providing direct feedback to them.

3. Governance Structure



A dedicated advisory group will not be established as part of the Governance structure. The membership and expertise within the EMHSCA and NEMHSCA will be utilised as the advisory group as needed.

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4. Membership

- The MHSCA Governance Committee shall be comprised of:
 - One representative from Eastern Melbourne Primary Health Network (funder)
 - One representative from Banyule Community Health (Auspice agency and Manager of the 'Alliance Project Coordinator' role)
 - EMHSCA co-chair
 - o EMHSCA co-chair
 - NEMHSCA co- chair
 - NEMHSCA co-chair
 - Lived experience advisor client perspective
 - Lived experience advisor carer perspective.
- "Ex officio" member without voting rights administrative coordination of meetings:
 - Alliance Project Coordinator
- Chair of the North East Metro Interim Regional Body (guest)
- At least one member (Chair) of the Governance Committee must be a representative from a tertiary hospital in the Eastern Region and one from the North East Region.
- At least one member (Chair) of the Governance Committee must be a representative from a community mental health service.
- For members who sit on both EMHSCA and NEMHSCA, only one nomination can be submitted to sit on the Governance Committee.
- Lived experience advisors will be recruited purposefully and through targeted processes to ensure
 that the representatives are experienced lived experience advisors/representatives who can
 operate at governance levels. Lived experience advisors is inclusive of conveners of lived experience
 advisory groups who can bring the perspectives of a broader group of people with lived and living
 experience of mental health.
- At the commencement of the MHSCA Governance Committee, committee members will vote to elect 2 Co-Chairs for a 24-month period:
 - o *Note:* Both the funder and Auspice are ineligible for the role of Co-Chair.
 - For continuity purposes, the Co-Chairs will perform 24 months in the role. At the conclusion
 of the 24-month term, new Co-Chairs will be elected.
 - To ensure balance one Co-Chair will represent community mental health service and one will represent tertiary hospital.
- Transition clause: It shall be at the discretion of the existing steering committees for EMHSCA and
 NEMHSCA as to whether the Alliance undertakes a re-election of Co-chairs prior to the transition to
 the combined governance model. For continuity purposes, the Co-chairs for EMHSCA and
 NEMHSCA as of January 2024 will be transitioned to the MHSCA Governance Committee. After 12 –
 24 months there will be staggered election process to allow the continuity of at least one Co-Chair.

5. Decision Making

 A quorum of half (50%) of members plus one further member must be present before decisions of the meeting can be made.

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- If a quorum is not in attendance, then the meeting may proceed, however, decisions may not be endorsed at the meeting. In such cases, and in between Governance Committee meetings, Governance Committee decisions and endorsements can be made using an email feedback process. The process for urgent decision making is by email, with nominated response timelines and by majority of members responding indicating agreement. In the event that a Governance Committee member is unavailable, decisions are able to be delegated to their allocated deputy/proxy.
- If vacancies on the Governance Committee are not filled, then the accepted quorum will be 50% plus one of the currently filled positions.
- The Governance Committee is committed to working within a decision-making model that
 promotes full and fair discussion based on adequate information and encourages full participation
 and ownership of decisions. The aim is to reach resolutions by consensus. If consensus cannot be
 reached, then the decision will be cast to a vote.

6. Dispute Resolution

- EMHSCA and NEMHSCA will operate as a forum in which Member Agencies are encouraged to
 openly express and discuss their concerns and hesitations seeking consensus and agreement as part
 of the overall decision making process. The Governance Committee recognises the diversity of its
 Partners and seeks to anticipate and resolve differences in this spirit.
- Where a dispute occurs within an Alliance/Working Group and cannot be resolved by the Co-Chair or Co-Chair of the relevant Working Group, the matter will be referred to the Governance Committee for resolution.
- The Governance Committee will ordinarily determine the course of action to be taken in relation to dispute resolution. Where the issue cannot be resolved by the Governance Committee, or a dispute occurs within the Governance Committee, the Governance Committee will decide on whether the issue is referred to:
- The Eastern Melbourne PHN or;
- Another appropriate course of action, such as an independent mediator, dependent on the nature of the dispute.

7. Meeting Attendance and Frequency

- Attendance at meetings may be virtual via MS Teams, with one in-person meeting encouraged to take place annually or as required.
- Governance Committee Members must be prepared to attend 75% of all meetings each year.
- If a member (excluding lived experienced advisors) is unable to attend a Governance Committee meeting, they will be responsible for nominating a proxy:
 - The proxy should be a member from the same Region and mental health sector.
 - The Co-Chair are encouraged to identify a nominated ongoing proxy to ensure consistency of representation.
 - The Alliance Project Coordinator may not attend as a proxy.

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- The Governance Committee may invite other people to attend meetings as guests or speakers at their discretion.
- The MHSCA Governance Committee shall meet bi-monthly. Most meetings will take place virtually via MS Teams, except one in-person meeting to take place annually.

8. Role of the Co-Chairs, MHSCA Governance Committee

The role of the Co-Chairs, MHSCA Governance Committee is to:

- Be the first point of contact for discussion and representation on issues relating to EMHSCA and NEMHSCA Alliances and Working Groups.
- Represent the MHSCA at relevant forums and meetings
- Be a supportive leader for EMHSCA and NEMHSCA Alliances, Working Groups, MHSCA Member Agencies and the Alliance Project Coordinator.
- Work closely with the Governance Committee and Alliance Project Coordinator to manage workload and priorities for the Eastern Region MHPs.
- Direct and oversee the Alliance Project Coordinator in meeting convening, agenda preparation, minutes, report preparation and action follow up.
- Ensure that planning and budgeting for the future is carried out in accordance with the wishes of MHSCA.
- Co-Chair MHSCA Governance Committee meetings and forums for the elected 24-month period.
- Undertake the role of Member, MHSCA Governance Committee (as below).

(Note: Both the funder and Auspice are ineligible for the role of Co-Chair).

9. Role of Members, MHSCA Governance Committee

The role of Members, MHSCA Governance Committee is to:

- Provide feedback to the Alliance Project Coordinator on agenda items and meeting papers required for the Governance Committee meetings.
- Provide a point of contact for their Member Agencies / communities to feed into the Governance
 Committee regarding the collective view of regional mental health issues.
- Participate in the development and approval of MHSCA Strategic Plan/s, in collaboration with EMHSCA and NEMHSCA.
- Provide strategic oversight of the MHSCA, ensuring EMHSCA and NEMHSCA Alliance and Working Group activities align with the stated purpose and strategic directions.
- Participate in the review and approval of required reporting to the Eastern Region MHPs.
- Oversee and approve MHSCA budget and professional development spending.
- Participate in the endorsement of MHSCApositions on issues of relevance to the sector.
- Participate in the review and approval of ongoing recommendations for enhancement regarding future MHSCAfocus and functioning.
- In conjunction with the Alliance Project Coordinator, communicate as appropriate to the Member Agencies / communities they represent.

10.Role and Management of the Alliance Project Coordinator

Role:

The role of Alliance Project Coordinator is to:

- Have an administrative function only on the MHSCA Governance Committee.
- Undertake meeting convening, agenda preparation, minutes, report preparation and action follow up at the direction of the Co-Chairs.

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Support lived experience members to ensure they are appropriately briefed and supported.

11. Role of the Auspice

- The Auspice agency will be responsible for managing accurate records of funding and reporting to the project funder in line with the project contract.
- The Auspice is responsible for all employment related functions including line-management of Alliance Project Coordinator.
- The Auspice will conduct regular supervision and annual performance reviews in line with internal staff management procedures.

12. Planning and Reporting

The Co-Chairs will be responsible for communicating key strategic decisions of the Governance Committee to relevant stakeholders. This will include decisions impacting on cost and strategic direction relating to the activities of MHSCA.

The Alliance Project Coordinator is responsible for regular reporting of Eastern Region MHPs activities to all Member Agencies. A key function of this reporting is to keep Partners engaged and well informed about matters relevant to the MHSCA.

13. Review of Terms of Reference

A partnership review of the Governance Committee will be conducted every 12 months to ensure effective functioning.

The proposed governance structure is acknowledged to be an interim structure for the next 12-24 months whist the Alliances are re-establishing their partnerships and strategic plans in light of the ongoing mental health system reforms. As new pieces of the reform are rolled out, the structure shall be continually reflected upon to ensure that it and the Alliances are still operating effectively within the changing service system.

The Terms of Reference shall be reviewed on an annual basis and endorsed at the Governance Committee meeting.

Date Endorsed:

25 January 2024

Review date:

November 2024