Navigation, Innovation and Strategy

RBWH

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Consumer engagement expression of interest

# Steering Committee for Enhancing Mental Health care for Families in Metro North Hospital and Health Service (MNHHS) project

Please complete this form to express your interest in participating in the Project Steering Committee for the MNHHSat **the Royal Brisbane and Women’s Hospital**. Applications close **5pm Thursday 11 July 2019**. Please email the completed form to helen.funk@health.qld.gov.au

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| **Personal Details** |
| Given Name: | Surname: |
| Address: | Postcode: |
| Phone Number:Mobile: | Email: |
| Organisation (if any): |
|  |
| **Other needs and requirements** |
| Do you require support to attend the activity? Yes / NoI*f yes, please provide details on support that you require, for example, assistance with child care, disability support worker, interpreter.*  |
|  |
| **Affiliations and memberships to other organisations** (please detail below) |
| Consumer organisation/s:  |
| Professional or academic bodies: |
| Advocacy or rights-based organisations:  |
| Human or community service or welfare organisations: |
| Hospital and health service board or health advisory groups |
| Other (please specify) |

**Please outline how you meet the key attributes in the space provided below.**

**Key attributes**

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| 1. Experience with engaging with maternity services (eg. attending antenatal appointments as an expectant father, being present at labour/birth or during postnatal period).
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| 1. Ability to articulate a consumer perspective and respect and appreciate different perspectives expressed within the activity.
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| 1. Ability to commit sufficient time to participate fully in the work of the activity, for example, read papers and attending meetings.
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**Other attributes**

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| 1. A knowledge of mental health or willingness to learn about mental health challenges experienced fathers.
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