MHAP

Mental Health and Addiction Portal

Working Group
Terms of Reference

Version 1.0, February 2022

Queensland
Government

Introduction

The Mental Health Addiction Portal (MHAP) provides the capability for enhanced clinical and business decision support, analysis, reporting and access to information related to Queensland's mental health and alcohol and other drug services and consumers. The MHAP is a clinical and business intelligence digital solution, that leverages data warehouse functionality to collate, integrate and transform disparate data from multiple source systems.

Within the Department of Health, data is valued and is managed as a strategic asset to support delivery of health services. MHAP is utilised by both the Department of Health and Hospital and Health Services (HHS) to support a range of consumer centric processes and feeds into analysis and reporting mechanisms and activities. MHAP is also utilised to support state-wide and local planning, costing, funding analysis, benchmarking activities, data quality initiatives and to meet mandatory national reporting requirements.

The MHAP Working Group (MHAP WG) has been established to facilitate and guide the program of work associated with the ongoing development, maintenance and use of MHAP to ensure it can meet current and evolving clinical and business needs.

Purpose

The MHAP WG will provide clinical and business expertise, direction and definitive advice for the MHAP work program. The ongoing development of MHAP to support reporting, analytics and decision support will be an enabler for the delivery of quality, safe and efficient care and drive positive change for consumers.

The MHAP WG has been formed to ensure that the work program is aligned to the strategic intent for analytics and reporting as outlined in the [Digital Health Strategic Vision for Queensland 2026](#) and follows the [Clinical Intelligence and Business Intelligence Mandated Principles](#).

Key national and state policy and governance strategies, including the National Safety Priorities in Mental Health: Second Edition (under development), will inform clinical and business priorities. Once developed, the Mental Health Alcohol and Other Drugs Digital Information Strategy and Roadmap will be the key drivers for the MHAP work program.

Functions

It is the function of the MHAP WG to:

- identify clear objectives and priorities for the MHAP program of work that is in line with current strategic intent, considering both clinical and business requirements.

- identify and prioritise analytics that will support clinical care, business processes, service planning, monitoring and improvement, evaluation and research.

- identify and prioritise enhancements to the MHAP data warehouse, such as new data sources, data tables or data refresh schedule, that will enable the business capability to achieve these objectives.

- provide advice on how data and information can be presented in an innovative and practical way to support the use and interpretation of the information for different purposes and stakeholder groups.

- raise, filter and escalate issues associated with clinical and business intelligence as they relate to mental health and alcohol and other drug services

- share ideas, knowledge about other initiatives, research, tools and resources to support the further enhancement and development of MHAP in line with strategic priorities.

- seek advice and endorsement from relevant governance groups on recommended priorities of the MHAP work program as required.

Governance and Structure

Accountability

The MHAP WG will operate under the governance of the Mental Health Alcohol and Other Drugs Digital Specialty Group (MHAOD-DSG) for identification of significant development priorities content and prioritisations and the MHAP Delivery Board related to operational and technical delivery of the MHAP development program.

It is recognised that the MHAP program of work is subject to funding, policy and procedural boundaries and objectives. Priorities set by the MHAP WG may require endorsement and or approval at a more senior governance level.

Should the advice of the MHAP WG impact, require changes to other systems or applications, recommendations, advice and/or information will be referred to the relevant working or business groups for consideration.

Decision making

The MHAP WG will operate in accordance with approved terms of reference.

The MHAP WG is accountable to and reports to the MHAOD-DSG and the MHAP Delivery Board.

The MHAP WG is not a decision-making body however will provide informed advice and recommendations through identified governance structure. The MHAP WG will provide expertise, direction and definitive advice and recommendations for the MHAP work program.

If a consensus is not reached, a majority decision will be sought with a final decision made by the Chair and forwarded through relevant governance for approval.

Confidentiality

Proceedings and records of the MHAP WG will not generally be considered confidential. However, information may from time to time be provided 'in confidence'. Members and proxies acknowledge their responsibility to maintain confidentiality of any information that is deemed to be 'in confidence', or that is not otherwise in the public domain.

Membership

Chair

The Manager, Analysis and Accountability Team, Clinical Systems, Collections and Performance Unit will chair the working group.

Secretariat

The Secretariat will be provided by the Analysis and Accountability Team, Clinical Systems, Collections and Performance Unit, Mental Health Alcohol and Other Drugs Branch.

Members

Selection and appointment

Members will be representatives with expertise and interest in information utility in mental health and alcohol and other drug clinical service delivery, service quality improvement, business intelligence and analytics or evaluation and research, from:

- Clinical Excellence Queensland
    - Mental Health Alcohol and Other Drugs Branch
    - Statistical Services Branch
    - Office of the Chief Clinical Information Officer
- Lived experience representatives
- Metropolitan HHS
- Regional HHS
- Rural and Remote HHS
- Mental Health Information Management

- Clinical and Business Intelligence, eHealth Queensland

Members do not need to have a technical understanding of the infrastructure required to deliver the MHAP. Diverse representation from across both mental health and alcohol and other drug services, and clinical and business areas, will be important to ensure the work program delivers on the broad, and potentially disparate, needs of the sector.

Appointment of members will be approved by the MHAOD-DSG, with input from current membership and/or governance groups. Composition of membership may be expanded by the MHAOD-DSG.

Other persons may be invited or requested to participate and/or provide information to the working group from time to time. Guests and observers are bound by the relevant confidentiality provisions contained within this Terms of Reference.

Participation

On acceptance of appointment to the MHAP WG, members agree that they:

- will ensure they understand the strategic direction of mental health alcohol and other drug services.

- review the agenda, minutes and associated documentation prior to each meeting and follow through on action items in a timely manner.

- engage in meeting proceedings and will actively participate in the provision of advice, review of documentation and prioritisation of the MHAP work program.

- will attend at least 50 percent of scheduled meetings in the calendar year.

- will notify the Secretariat of meeting apology at least two days in advance (where possible) and where appropriate provide details of a nominated proxy.

- Will inform the proxy member of the meeting date, time, venue and pass on relevant information and materials to the proxy member.

Responsibilities

MHAP WG members will take into consideration feedback from clinical networks, working groups, site reference groups, and business groups within Queensland Health. Responsibilities include:

- canvas opinions/views/advice from relevant colleagues and subject matter experts regarding topics raised at MHAP WG meetings

- review and provide strategic direction, advice and support in relation to digital information and clinical care

- establish, coordinate and support working groups, as required

- promote and advocate for positive and effective change to support mental health and alcohol and other drugs services across Queensland

- promote consistency in the implementation of application changes across all sites and programs

The members of the MHAP WG shall be suitably informed and knowledgeable in relation to the matters to be considered by the MHAP WG to input and make informed decisions.

Conduct

MHAP WG members will conduct themselves in accordance with the Department of Health values and principles as outlined in the Code of Conduct for the Queensland public service.

Membership List

General Voting Members
Chair
Lived Experience Representatives
Metropolitan HHS Representatives
Regional HHS Representatives
Rural and Remote HHS Representatives
Mental Health Information Management Representative
MHAODB Representative(s)
Statistical Services Branch Representative
Office of the Chief Clinical Information Officer Representative
Clinical and Business Intelligence, eHealth Queensland Representatives
Observers
MHAP Delivery Manager
Secretariat

Other Participants and Proxy Attendance

Members who are unable to attend the meeting should nominate, where appropriate, a proxy to attend in their place. It is the member's responsibility to ensure the proxy attendee is fully briefed and advance notification is provided to the Secretariat and Chair.

At the discretion of the Chair, other individuals or groups may be invited to present at or observe meetings.

Where agreed by the Chair and with appropriate notice, members may invite guests to attend meetings to provide expert advice.

Term of Membership

Representatives, with exclusion of Chair and relevant technical/business experts, are appointed for two years, renewable to a maximum of two terms.

Membership is reviewed bi-annually by the Chair. There should be a minimum of 40% turnover of group members with every review.

Declaration of Conflict of Interest

To meet the ethical obligations under the *Public Sector Ethics Act 1994*, MHAP WG members and persons acting in a member's role must declare any actual, potential or perceived conflicts of interest and manage those in consultation with the MHAP WG Chair.

If, during the period of a member's appointment to the MHAP WG, a conflict of interest arises, whether actual, potential or perceived, or appears likely to arise, the member must notify the Chair immediately.

The MHAP WG Secretariat will record any declaration of conflicts of interest applicable to that meeting in the meeting minutes.

Meeting Protocol

Meetings will occur bimonthly or as required but no less than twice a year. The agenda and any pre-reading documentation will be distributed to the members of the working group by the Chair or Secretariat at least three days before a scheduled meeting.

Minutes of actions and key decisions will be kept of each meeting and circulated to all members in advance of the following meeting to allow for consideration of amendments that may be required.

Quorum

The quorum for the working group meetings will be a minimum of half of its voting members (or member's nominated proxy), plus one (more than 50%). In the absence of a quorum the meeting may continue at the chairs discretion with any items required decision to be deferred and circulated following the meeting, to members as an out-of-session item.

Out-of-Session Business

Items may be managed out-of-session where the:

- Item is urgent and must be considered before the next scheduled meeting.

- Meeting has been cancelled and the items are managed out-of-session to allow work to progress to plan.

The Secretariat will collate responses from the members and prepare for the chair's approval. The final recommendations, in respect to the item, will be documented in the minutes of the next meeting.

Secretariat

The Secretariat will co-ordinate meeting requirements including:

- scheduling meetings and book required resources no less than six months in advance.

- preparation and maintenance of electronic and hard copy records of the group's activities, including agendas, action items and related papers of all group meetings.

- prepare and maintain a corporate file of groups records in accordance with the requirements of the *Public Records Act 2002* and retain in accordance with Queensland Government's General Retention and Disposal Schedule for Administrative Records.

- support, in collaboration with the Chair, the lived experience representative by familiarising them with the meeting topics and agenda prior to the meeting.
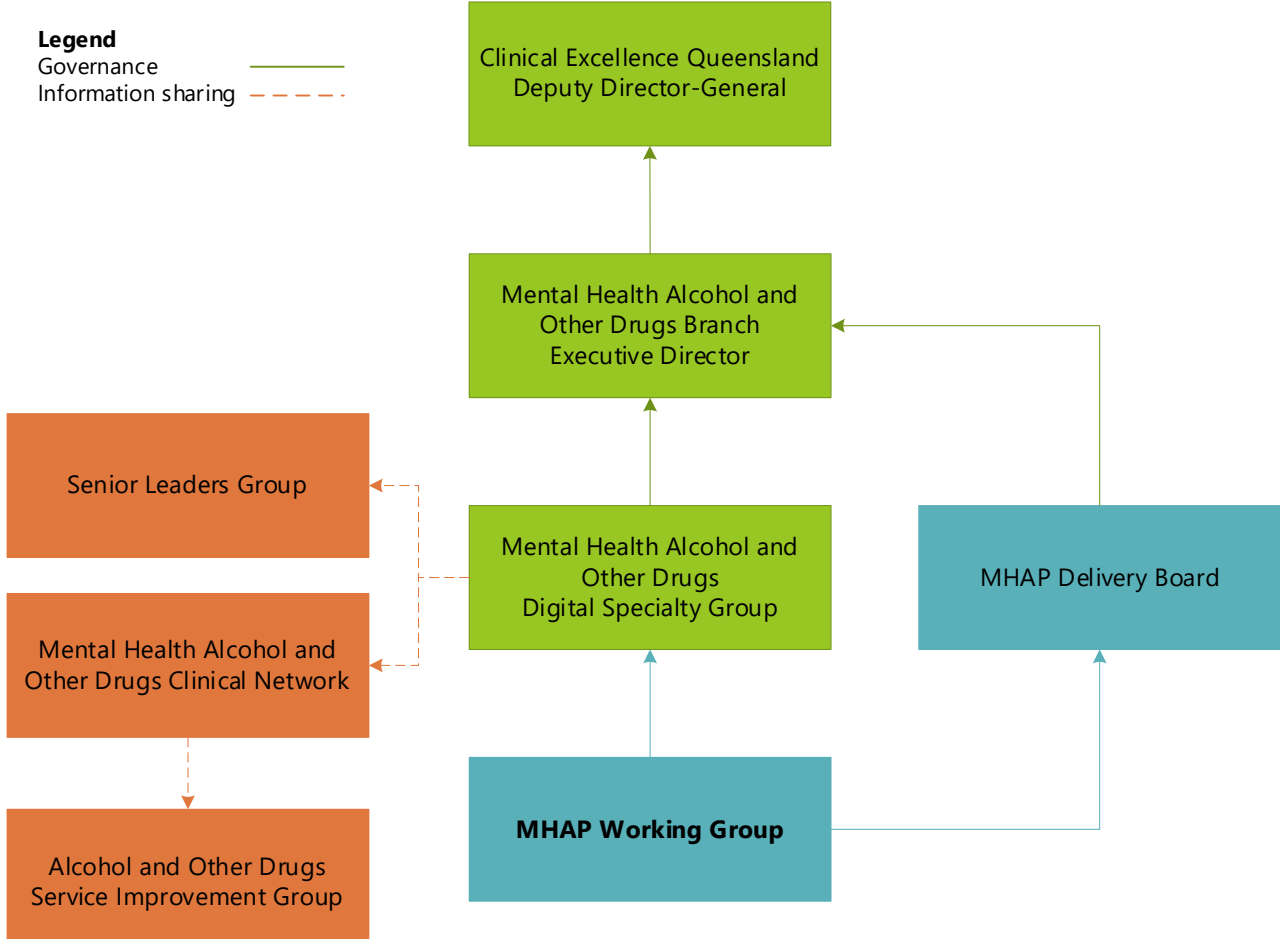
Review

The MHAP WG Terms of Reference will be:

- reviewed at the inaugural meeting with the initial membership, and subsequently endorsed by the MHAOD-DSG.

- reviewed at 24-month intervals.

Version Control

Version	Date	Status	Notes
0.8	15 April 2021	FINAL DRAFT	Draft agreed by Digital Specialty Group.
1.0	16 February 2022	FINAL (AGREED)	Agreed by MHAP Working Group

Appendix A – Governance

Legend
Governance ────────
Information sharing ─ ─ ─ ─ ─

- Clinical Excellence Queensland Deputy Director-General
- Mental Health Alcohol and Other Drugs Branch Executive Director
- Senior Leaders Group
- Mental Health Alcohol and Other Drugs Clinical Network
- Mental Health Alcohol and Other Drugs Digital Specialty Group
- MHAP Delivery Board
- Alcohol and Other Drugs Service Improvement Group
- **MHAP Working Group**

Appendix B – Membership, February 2022

Member	Position
Kristen Breed	Manager, Analysis and Accountability Team, Clinical Systems, Collections and Performance Unit, Mental Health Alcohol and Other Drugs Branch (Chair)
John Borovac	Lived Experience Representative
Melissa Pietzner	Lived Experience Representative
Emma Armitage	Service Development Coordinator, Metro North Mental Health - Alcohol and Drug Service, Metro North Hospital and Health Service
Nicki Filauer	Assistant Director of Nursing, Community, Adult and Older Persons Mental Health & Specialist Services, Gold Coast Hospital and Health Service
Zonia Weideman	Therapy Lead & Project Lead, Mental Health and Wellbeing Project Community and Acute Service, West Moreton Hospital and Health Service
Sandra Henderson	Team Leader, Adult Continuing Care Team Mackay Mental Health Mackay Hospital and Health Service
Tara Douglas	Aboriginal and/or Torres Strait Islander Cluster Coordinator Cairns and Hinterland Hospital and Health Service
Tanya Sorrell	Clinical Nurse Consultant, Mental Health Alcohol and other Drugs Service, Weipa Integrated Health Service, Torres and Cape Hospital and Health Service
Fiona Davidson	Research and Evaluation Manager, Queensland Forensic Mental Health Service, Metro North Hospital and Health Service
Dee Pratt	Mental Health Information Manager, Children's Health Queensland Hospital and Health Service
Kaala Murphy	Mental Health Information Manager, Torres and Cape Hospital and Health Service
Adam Connell	Principal Project Officer, Strategy Planning and Partnerships, Mental Health Alcohol and Other Drugs Branch
Anjuli Dudley	A/Principal Project Officer, Alcohol and Other Drugs Strategy and Planning, Mental Health Alcohol and Other Drugs Branch
Leigh Roberts	Principal Data collection Officer, System and Collections Team, Clinical Systems, Collections and Performance Unit, Mental Health Alcohol and Other Drugs Branch
Richard Bastida	Manager, Clinical Improvement Team, Clinical Systems, Collections and Performance Unit, Mental Health Alcohol and Other Drugs Branch
Kylie Burke	Principal Research Fellow, Mental Health, Metro North hospital and Health Service
Ben Wilkinson	Director, Statistical Reporting, Statistical Services Branch
Reece Chang	Clinical Technical Advisor, Office of the Chief Clinical Information Officer
Monika Ciurej	Principal Data Analyst, Office of the Chief Clinical Information Officer
Professor Chris Stapelberg	Medical Officer Integrated Mental Health, Robina Hospital, Gold Coast Hospital and Health Service

Member	Position
Cathi Ryan	Director, Clinical and Business Intelligence, Digital Strategy and Transformation Branch, eHealth Queensland

Observers	Position
Jennifer Hall	Senior Project Officer, Analysis and Accountability Team, Mental Health Alcohol and Other Drugs Branch
Amanda Franks	Delivery Manager (MHAP), Analysis and Accountability Team, Mental Health Alcohol and Other Drugs Branch
Lourdes Gomez	Principal Business and Policy Analyst, Office of the Chief Clinical Information Officer
Kylie Ullman	Senior Project Officer, Strategy and Performance Unit, Mental Health Alcohol and Other Drugs Branch
Ruth Fjeldsoe	Senior Director, Clinical Systems, Collections and Performance Unit, Mental Health Alcohol and Other Drugs Branch