



# NSW CAG INFO\_LINK

AN INITIATIVE OF NSW CONSUMER ADVISORY GROUP  
MENTAL HEALTH INC.

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## CHAIRPERSON'S REPORT

Hello everyone and welcome to the second edition of the NSW CAG INFO\_LINK. It's busy as usual at NSW CAG and a big thank you to the staff who keep the wheels turning over. Since the last edition we have been busy with a number of projects and initiatives at a state level as well as continuing to have a voice at a national level (see On the National Front!). I have outlined just some of the activities that NSW CAG is currently involved in below.

In NSW, NSW CAG is participating in the NSW Department of Health Consumer and Community Ministerial Advisory Committee, an exciting initiative of the Minister from Health, Craig Knowles, in which a number of peak groups and individuals are working together to implement the Community and Consumer Participation Plan in NSW. There are a number of mental health representatives on the committee, a testament to the achievements that have been made in consumer participation.

NSW CAG continues to represent consumers and carers at a range of avenues including the Joint Guarantee Of Service (Health, Housing And DoCS), Carers Coalition, NSW Department of Health Violence Taskforce, Welfare Reform Initiatives, the Self-Help Consortium, Human Service Standards Working group, NSW Mental Health Promotion Advisory Committee, the Bipolar Disorder Treatment Guideline Working Group, the Association for Mental Health small grants and Mental Health Matters judging, Mental Health Systems review working group, TheMHS Sydney programme organising committee.

Recently the current and previous members of NSW CAG met to discuss elements of the NSW

CAG Strategic Plan. It was a great opportunity for new and previous members to share their knowledge and learn from each other as well as a chance to discuss the future directions and membership needs of NSW CAG. It was a very productive day and it was hopefully the first of many meetings of this type. More details will be provided in future INFO\_LINKs.

A comprehensive submission to the Select Committee on Mental Health of the Legislative Council, NSW Parliament, was compiled. It was titled "A Time for Action". Contact the office or see [www.parliament.nsw.gov.au](http://www.parliament.nsw.gov.au) for the submission and response. The submission outlined what NSW CAG believes are the 23 major issues facing the Mental Health service provision in NSW. NSW CAG held a consultation where consumers expressed their views and these were taken into account in the submission.

A second submission was compiled for the NSW Senate Inquiry into the Department of Community Services (DoCS) detailing problems consumers face when dealing with the DoCS.

We are also actively involved in giving voice to consumers and carers through presentations and awareness raising. Earlier this year NSW CAG had a stall at the Western Sydney Area Mental Health Service "Working in Partnerships" conference. In August NSW CAG will be presenting at the theMHS Carer Day, giving a workshop on "How to set up a Network" during the Conference as well as displaying the National Standards for Mental Health Services Quilt. Later in the year a paper will be given in Washington, USA on the uniqueness of the consumer and carer partnership, and a poster portraying NSW CAG and its activities will be presented at the "Innovations" conference in Boston USA.

Finally, a big thank you to everyone who has taken time to contribute to the body of knowledge that is NSW CAG. We appreciate all the comments, surveys and information that you have been providing us with and look forward to working with you in the future. Please don't hesitate to contact the office if there is an issue or problem we may be able to help you with.

Jodie Brown

### **ON THE NATIONAL FRONT!**

A lot has been happening at the national level. It has been an exciting 6 months.

#### **NOAC**

Rumors have abounded that the National Organisation of Australian Community Groups (NOAC) has ceased to exist, and that there will be no CAG's after 2003. It is with great pleasure that we are able to report that as far as NSW CAG is aware both of these rumours are unfounded. NSW CAG, as you would be aware, has recently been through an extensive planning process that will guide the organization through 2003-2005. NOAC is also continuing with CAGs in NSW, Victoria, Western Australia, Tasmania, Northern Territory and the ACT all committed to continuing the consumer and carer partnership at a national level. NOAC continues to have input into service delivery and reform through the Mental Health Council of Australia.

#### **Private Sector**

Recently a national consumer and carer network of private sector representatives was established. This is an exciting initiative showing the commitment of the private sector psychiatric services to consumers and carers participation. Ms Janne Mc Mahon has represented this group at a national level on NOAC in recent years and is now Chairperson of this network. **Good Luck**, we look forward to working with you in the future!

#### **NCCF**

The National Consumer and Carer Forum had the inaugural meeting on the 15<sup>th</sup> and 16<sup>th</sup> of April in Canberra. It was an exhilarating meeting

with lively discussion and an encouraging sense of camaraderie present. Almost 30 delegates attended, with a consumer and carer being sent from each state, representatives from the private sector, Beyond Blue and a number of other national organizations including GROW, and the Health Consumers Forum. Many issues were raised and discussed and the forum will focus on the Review of the 2nd National Mental Health Plan and development of a 3<sup>rd</sup> plan, training and education of consumers and carers as well as consumer and carer participation. Further updates will be provided after the next meeting.

#### **International CAG**

An international CAG is currently being established, although details are not to hand at time of printing. Please contact the office for further information.

Jodie Brown

### **THOUGHTS FROM THE EXECUTIVE OFFICER**

#### **A Time for Action**

I have been fortunate to come into NSW CAG as the Executive Officer at the beginning of a positive and active growth stage for consumer and carer participation across NSW.

NSW CAG has been engaged in a strategic planning process during the last 18 months that will provide a platform for the future. It gives a clear direction for action.

The plan addresses the issues surrounding the existence of NSW CAG, and documents what we do, where are we now, how did we get here, why are we in business, where are we going, how will we get there, when will we get there and what will it cost.

We will share the outcomes of our planning with all our stakeholders during 2002.

This plan is a living document. It will not be brought out each year to shake off the dust for

our planning sessions. Rather, it will be used as the basis to guide us during the year, and measure our successes as we review the year.

The emergence of consumer and carer participation has created unique challenges for mental health services particularly in relation to quality and the National Standards for Mental Health Services.

*"One of the most striking discoveries of companies in the past twenty years is the power that comes from enabling all employees to become involved in quality control and improvement. It seems obvious that assuring and improving in quality cannot be made the job of any single department, but for years companies (and health organisations) tried to do just that. Organisations are now using increasingly innovative ways to encourage participation and capture ideas from all employees, not just managers"*

*U.S. Presidents Advisory Commission  
(Chapter 12. page 9)*

The following goals are long term ones (five to ten years) that support our mission. They will tend to remain constant unless there is a major environmental movement such as a removal of funding following a change of government.

**Strategic Goal 1 – A Sound Organisation;**  
Build an organisation that is governed well and has good practices.

**Strategic Goal 2 – A Knowledge Base;**  
Provide leadership and an independent, strong, informed voice for the diversity of consumers and carers in NSW in all policy and service development, implementation and evaluation.

**Strategic Goal 3 – Working Together;**  
Facilitate inter-sectoral linkages and operate as an information resource on consumers and carers.

**Strategic Goal 4 – Advocacy;** Articulate and defend the rights of consumers and carers

During the next 12 months we will:

- consolidate the unique role of the NSW CAG as a peak consumer and carer advisory organisation in NSW;

- create and encourage intersectoral links between consumers and carers across the state to reflect the community, through Network NSW;
- develop cost effective projects that maximise consumer and carer participation in NSW;
- provide a consumer and carer centre providing information and networking opportunities.

Douglas Holmes

## ***Disability Support Pensions***

The Mental Health Council of Australia (MHCA) is the independent, non-government peak body established under the National Mental Health Strategy to represent and promote the interests of the mental health sector.

Some of the main activities of the MHCA include the management and facilitation of various national projects, for example, World Mental Health Day and the National Consumer and Carer Forum. The MHCA also provides representation on governmental and inter-sectoral committees including the Australian Health Ministers Advisory Committee, National Mental Health Working Group and members of the Council are asked at various times to provide representation at other inquiries.

The MHCA also participates in the development of policies and submissions to numerous inquiries by Federal Government. A current example is the introduction, by the Federal Government of budget measures including changes to the Disability Support Pensions (DSP).

### **Some background to the DSP**

The Invalid Pension (IP) was introduced in 1910, and had no substantial changes until 1991. IP was paid to a person who was *permanently incapacitated for work*, and in 1941, this was changed to a degree that did not exceed 15% incapacity. Various changes occurred over the years, which referred to how incapacity was

measured, and the removal of social references, such as, education, environment and labour market factors.

In 1991, the IP was replaced by DSP, which saw a need for a more active approach to DSP. The DSP Impairment Tables were developed and were designed to focus specifically on inability to work and not labour market disadvantage. Recipients must also be unable to work at least 30 hours a week at award wages. The main change for DSP was that its main focus was now on training and rehabilitation in the belief of maximising labour market participation whilst retaining the safety net.

### **What is being proposed to change now?**

1. Decrease the continuing inability to work test from 30 hours to 15 hours.
2. Change the inability to work test for recipients aged over 55 to include the labour market more generally and not as at present, the local labour market.
3. 73 000 new places in disability employment assistance programs over three years, although this applies to existing programs only.

On Thursday 27 July, 2002 the Government reintroduced the Bill, albeit amended. The Bill now has a grandfather provision, which stipulates that only new DSP applicants will have to satisfy the new requirements.

### **How will this effect DSP recipients?**

The MHCA is concerned with the impact these changes will have on DSP recipients who fail to meet the new criteria. Recipients will generally transfer to the Newstart Allowance (NSA), at a net loss of \$52 per week. Recipients will also have to meet the more stringent criteria of NSA, such as activity tests and other mutual obligation requirements. Failure to comply with NSA could constitute a breach. A key concern raised by the MHCA is that shifting people with psychiatric and psychological disabilities onto NSA with its more stringent requirements could lead to an increased risk of mental illness relapse and hospitalisation.

*Mr. John McGrath, (Chair, MHCA), stated:*

*“NSA allowance is not designed for people with mental illness, it ignores the episodic nature of mental illness and puts an expectation that a person who is intermittently capable of work should go off DSP to face the impersonal and overly rigorous requirements of NSA.”*

As people with psychiatric and psychological disabilities make up the second largest proportion of people currently accessing the DSP, the MHCA considers these changes, both in the first and now second Bill, prove the complete lack of consultation and understanding of the mental health sector by the Government.

The MHCA concluded the Bill does not ensure the maximum participation of people with a mental illness in the workforce, but only serves to punish those accessing the Disability Support Pension - especially as the corresponding funding for specialist psychiatric employment services is completely missing in the current legislation.

The MHCA supports the need for welfare reform, but the Government must consult with the mental health sector in this reform process.

If you would like further information on the MHCA or the DSP bill, contact the MHCA on 02 6285 3100 or [admin@mhca.com.au](mailto:admin@mhca.com.au) or visit our website: <http://www.mhca.com.au>

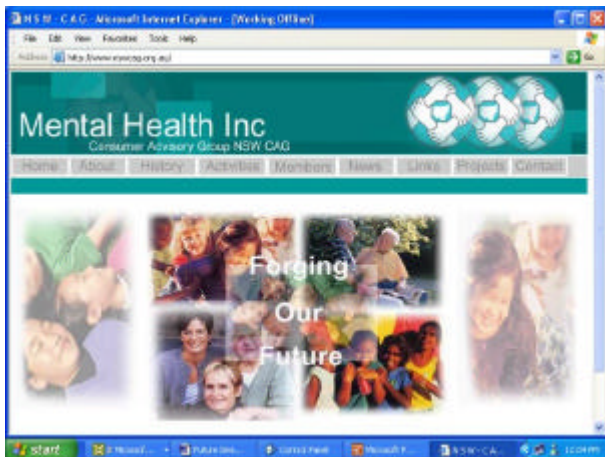
## ***NEW WEB PAGE FOR NSW CAG in the making***

Irene Vasilas, a year 12 student from Riverside Girls High School, is very kindly designing the new NSW CAG web site. It is not yet complete but it can be viewed at [www.nswcag.org.au](http://www.nswcag.org.au).

The new web site will have 9 sections: Home; About; History; Activities; Members; News; Links; Projects; Contact. The first few sections contain general information about NSW CAG. There is a section where all of the past newsletters will be available to read and print out. In addition, there will be a section for upcoming events, and a section for NSW CAG projects including the National Standards Quilt.

We hope that the WEB site will attract more people to NSW CAG and spread the word about what NSW CAG is all about.

A reference group of NSW CAG members is working on the WEB site with Irene. We would appreciate your comments on the new web site as it is developed. Here is the opening page:



## ***NEW NEWSLETTER for NSW CAG***

A survey was sent to 60 NSW CAG members and associate members about what sorts of things they would like to see in the new NSW CAG newsletter. There were 21 replies and reference group of 11 has been formed to help one of the NSW CAG information officers to work on this. One teleconference has been held so far. If any one would like a copy of the newsletter results or would like to comment about future newsletter contact NSW CAG.

### ***Send us your views and news, info etc for the new NSW CAG newsletter!***

Some of the items that were identified as high priority for the new NSW CAG newsletter from the survey results were:

1. News about developments in consumer participation

2. Info about how consumers and carers can become involved in advocacy, focus groups etc
3. News about what NSW CAG is doing
4. Diary Dates
5. Issues in Mental Health
6. Info about support groups for consumers and carers

This list is not exhaustive of all the sorts of things that will be included. It is what the 21 survey respondents rated most highly. It is important that there will be some space allocated in the new newsletter for readers' contributions. This might be a page for letters to the editor and a page for longer contributions, for example. So start writing now!

You might have views on a particular mental health issue that you would like to express. For example, what do you think about the proposed changes to the Disability Support Pension that may affect people who apply for DSP after July next year? What do you think of the idea of electronic health records? Where do you think money should be spent as a priority: more hospitals or better community services for mental health?

## ***NSW CAG Resource Library***

One of the Information Officers from NSW CAG has been working on cataloguing the NSW CAG Resource Library. There is a wide range of information in the library. Come to NSW CAG and have a browse.

### ***“The KIT”***

NSW CAG is a free Access Centre for “The KIT. A guide to the advocacy we chose to do. A resource Kit for consumers and carers” The kit has five chapters:

1. Advocacy and the individual  
This section is about personal and interpersonal skills. For example, one section of this chapter focuses very importantly on looking after yourself.

## 2. Getting organised

This section concentrates on preparation and organisation so that individuals or groups can be involved in effective advocacy. There is a good section on finding relevant information from medical records, libraries and Internet, for example.

## 3. Some Specific Activities

Have you ever wanted to be involved in educational activities, public speaking or wanted to organise a workshop? This is the chapter for you. It has lots of practical tips and ideas.

## 4. Advocacy and the organisation

Advocacy can involve groups and organisations. This chapter focuses on strategies that promote equality and empowerment. For example, there is a section on worker selection and recruitment.

## 5. Getting Strategic

Advocacy can involve specific tactics at achieving a specific goal. This may include linking individuals, groups and communities. This section has practical advice about tactics like working with the media, for example.

## **NSW Consumer Advisory Group Youth Project**

The NSW CAG Youth Project commenced on March 18 2002 with the employment of Joey Nipperess as Youth Project Officer. The project initially had a short time frame of 15 weeks. For various reasons the time frame of the project was extended and the project is now due to be completed by 31<sup>st</sup> August 2002.

The aim of the project is to document the experiences of young people in accessing Mental Health Services at the individual, local and state levels and to explore what kinds of innovative programs currently exist for adolescents with a mental illness.

Joey had the opportunity to attend the 3<sup>rd</sup> International Conference on Child and Adolescent Mental Health (ICCAMH) in Brisbane. There he was able to network with consumers and workers and seek out various

innovative programs, which will be included in his report. It is hoped that information exchange from the conference will be forthcoming over the next few weeks.

In addition, a trip to the O'Brien centre in Orange afforded the opportunity to meet some other CAG members and to see a very different CAG set up. For instance, the O'Brien centre have the makings of an excellent permaculture garden, while other members are actively involved in their own rock and roll band. They were belting out the Troggs "Wild Thing" at the time.

So far the project has contacted approximately 56 youth based service providers (i.e. High St Youth Health Service) with either a generic or mental health focus, as well as a further 18 service providers and individuals with interests in child and adolescent mental health provision (i.e. Australian Clearing House for Youth Studies). Initial contacts were made by telephone (cold-call method) followed by a fax comprising:

- A covering letter
- A project outline
- An "About NSW CAG" information sheet
- A 'flyer' advertising the project's desire to organise consumer directed and focused youth groups

During weeks four and five a follow up mail out was undertaken and hard copies of forum flyers were posted out to the youth services contacted during the initial first fortnight of the project.

In summarising the responses, approximately 12 individuals contacted the project autonomously, with one person contacting the project through word of mouth, and the remainder through youth services. A consumer consultant (Kylie White) has been invaluable in respect to negotiating focus groups and providing general support and feedback. Four focus groups have been conducted, with a total of 31 respondents, bringing the overall sample to 51 participants.

At the time of writing data analysis was still incomplete, but initial perusal of thematic responses suggest that young people:

- **Feel they have little control over their mental health admissions;**
- **Have little or no say or input into their treatment and subsequent discharge;**
- **Feel that doctors don't listen;**
- **Feel that there are not enough adolescent specific services (issues surrounding age)**

Recommendations from the project will include those offered up by young people as well as those of the author. For instance, several young people suggested a need for a "mental health focused/specific youth advisory committee". One recommendation of the author is that the research in itself merits further funding pursuant to the examination and initiation of positive consumer involvement from within the adolescent demographic.

A rough first draft of the final report has been submitted to the NSW CAG committee and a brief overview of the ICCAMH seminar has been prepared to be included in the final report.

Promotional materials have been designed (by Angela Finney) and distribution is currently underway.

It is envisioned that the final report will be uploaded onto the NSW CAG web site in both an academic and lay version.

Joey Nipperess  
Youth Project Officer



## ***NSW Mental Health Outcomes and Assessment Tools and Training (MH-OAT)***

MH-OAT is an important initiative that aims to improve the quality and effectiveness of mental health services in NSW. It is assisting Area Health Services to train all clinical mental health staff in mental health assessment, standard documentation and the implementation of routine collections of standard outcome measures.

The proposed terms of reference for the initiative standing committee for MH-OAT are as follows:

- Standardised assessment documentation in NSW mental health services and overseeing and monitoring a quality framework of assessment and documentation.
- Standardised outcome measures in NSW mental health services on evaluation of the extent/penetration and effectiveness of the initiative.
- The consultation process with consumers regarding the implementation of uniform assessment documentation, consumer and clinician rated outcome measures and the Mental Health Consumer Perception and Experience of Mental Health Services (MH-CoPES) project.
- The training of all Area Mental Health Services direct care mental health staff in mental health assessment standardised assessment documentation and mental health outcome and casemix measurement.
- The development of strategies to promote the inclusion of appropriate assessment training in undergraduate, new graduate and postgraduate/ continuing education curricula in the longer term.
- The development of strategies for the analysis and use of the outcomes and casemix data.

- The mainstreaming of MH-OAT activities into local quality and information development strategies.

The aim of the Mental Health Consumer Experience and Perception of Services (MH-CoPES) is:

- To develop or identify an appropriate, effective and efficient instrumentation and process to measure consumers and carers perceptions and experiences of adult, child and adolescent and older peoples mental health services, reflecting recent trends in health related surveys and other methodologies available to elicit information relating to service use experience.
- This process would seek consumer and carer opinion to allow for quantitative and qualitative assessment of their perceptions and experiences of each of the following aspects of mental health service delivery
  - Availability of services
  - Getting treatment
  - Treatment and assistance
  - Staff
  - Participation
  - Hospital care

The project will have a reference committee of 6-8 consumers and expressions of interest are being discussed. The selection criteria for the working group will be:

- Be a consumer
- Be a service user
- Have an established network to feedback to (either in terms of consumer participation, advocacy or support)
- Knowledge of MH-OAT, National Standards and Policy and NSW Mental Health Policy
- An understanding of surveys or reviews of health services

George Dibley represents NSW CAG on the initiative standing committee for MH-OAT. George Dibley and Douglas Holmes gave a presentation to the MH-OAT state coordinators

steering committee on the 30<sup>th</sup> May, which was well received.

## **DIARY DATES**

### **Consumer Advocacy Training**

Are you interested in learning more about how you can participate actively in service planning, advisory groups, and to work in partnership with Mental Health services as a consumer representative or advocate?

Three workshops are being run for consumers who are entering the roles of consumer representatives or working as consumer advocates. The aim of the workshops is to help consumers perform these roles equipped with the necessary knowledge and skills.

Three workshops are planned for 2002. Each is over three consecutive days (10am – 3:30pm).

The course coordinator is Sandy Watson who has had an extensive and varied work background in mental health and involvement in the consumer movement and broader disability sectors.

Workshop 1 was held in May.

Workshop 2  
Dates: 28-30 August, 2002  
Full Fee: \$144.00  
Due in full: 21 August 2002

Workshop 3  
Dates: 6-8 November, 2002  
Closing: 14 October, 2002  
Full Fee: \$144.00  
Early Bird: \$125  
Due in full: 30 October 2002

Contact the NSW Institute of Psychiatry for more details on 02 9840 3833. This course is for consumers only.

## Carer Advocacy Training

This three-day workshop, which is designed for VETAB accreditation, is for carers of people with a mental illness.

Applicants should be -

- \* Carers of people with a mental illness who are interested in developing confidence and advocacy skills
- \* Carers who are interested in becoming carer representatives on Area Health committees, NGO committees, state and federal policy making bodies

Two workshops are planned for 2002 and each will be conducted over three consecutive days. Attendance is full-time and participants are expected to attend all sessions.

The course is designed to enhance advocacy skills. Carers can choose to use those skills to work for change for themselves and their family members or friends by contributing to management plans for example. Others may opt for change in the 'bigger picture' by contributing to change in government policy in the delivery of mental health services. Speaking with confidence will assist carers to have their valuable knowledge and experience recognised and will contribute to the implementation of policies mandating carer participation.

### Aims

- \* To give carers specific skills and confidence to speak up on behalf of themselves and the people for whom they care
- \* To contribute, through the education of carers, to the introduction of a carer perspective into mental health service delivery, quality assurance, staff training and research
- \* To assist carers to achieve collaborative partnerships with mental health professionals
- \* To assist carers to educate the community about mental illness and reduce stigma.
- \* Assessment in competency-based training is an integral part of the learning process. Assessments have been devised to enhance the learning experience, and to allow students to judge for themselves whether they have achieved the learning outcomes.

### Content

- \* Module 1: Getting Ready for Advocacy
  - \* concepts of self and systemic advocacy; resources carers need
- \* Module 2: Speaking Out
  - \* working with health professionals; participation in treatment and care plans; contribution to Area Health Services' planning; using the media to advantage
- \* Module 3: Building Relationships and Influencing People
  - \* effective communication; speaking to an audience; problem solving
- \* Module 4: Family Involvement in Service Delivery
  - \* government policies; MH legislation; Guardianship and protection services; legalities and contracts
- \* Module 5: Effective Carer Representation
  - \* codes of conduct; contributing to committees; influencing decisions
- \* Module 6: Surviving Advocacy
  - \* Emotional and other risks of advocacy; understanding emotions; managing emotional responses; managing stress responses.

The Rotary Clubs of Eastwood and Rydalmere have again, graciously donated funds for the sponsorship of carers attending this course - check with the Institute for details concerning how to apply for funding support and application forms. The course coordinator is Laraine Toms.

Delivery	Workshop #2
Dates	18-20 September, 2002
Closing	20 August, 2002
Full Fee	\$ 341.00
Early Bird	\$ 295.00
Due in full	11 September, 2002

Contact the NSW Institute of Psychiatry on 9840 3833 for more details.

## ***The National Standards Quilt***

The National Standards Quilt Project came from an idea of Ms Mary Beth Allen during the planning for the National Standards Festival held on 7<sup>th</sup> October 2000. The National Standards Festival Committee convened by the NSW Consumer Advisory Group thought that a quilt could be a discussion point and a way of educating consumers, carers and service providers about the National Standards for Mental Health Services. Mary Beth developed the centerpiece, which was displayed at the Festival. A list was compiled, distributed and groups and individuals from all over NSW chose some squares. The original plan consisted of 18 quilt squares.

By June 2001 most of the squares were still sitting in sewing baskets, but members of the NSW CAG began a push to have the Quilt completed for the Forging Our Future II Forum on the 9<sup>th</sup> and 10<sup>th</sup> of November 2001. Joan Wakeford became co-ordinator with Desley Casey, and as Tamworth has a thriving fibre-craft network the remaining standards were placed there – and suddenly the Quilt comprised all of the Standards and became a set of panels! Prue Campese, who did all the machine sewing, completed the assembling while stories about each square were being collected and written down.

The creative way that people have depicted the National Standards is testament to the regard consumers, carers and service providers have for them. Many of the people sewing the squares had very stressful events occurring in 2001 (including the co-ordinators!) yet the quilt project brought people together in very supportive ways. Tears were often shed over these squares as stories were shared. Yet the most used word on them is “hope”. Over one hundred people contributed to the planning and making of this Quilt. Your stories are beyond measure.

We now invite all people to share their stories on how they perceive the quilted National

Standards and to write their comments in the book that will travel with the quilt when they have the opportunity. We hope the Quilt will make a difference and lives will continue to be enriched by the impact of this beautiful work.

*These words are from the introduction of the catalogue “National Standards Quilt”. This catalogue has colour photos of each of the quilt panels with written information about each square. This catalogue will be available for people to take away from the viewings of the quilt.*

*So far the quilt has travelled to Northern Sydney and Tamworth, where it received a lot of media attention with full-page articles in The Northern Daily Leader. Further viewings are planned for the TheMHS conference in Sydney in August and the Shoalhaven Area during Mental Health Week.*

*The Commonwealth Department of Health has also asked NSW CAG to develop a series of posters that will be distributed across Australia to the following groups: Mental Health Workforce; Consumer and Carer groups; Community health centers; and Libraries.*

*A letter of thanks is being sent to all those who participated in the making of the quilt from NSW CAG.*

*More information about the National Standards for Mental Health Services will be available on the new NSW CAG website [www.nswcag.org.au](http://www.nswcag.org.au). This is the centerpiece:*



## **Summary of Participants Evaluations**

### **NSW CAG 'Forging our Future' Conference 9<sup>th</sup> & 10<sup>th</sup> November 2001.**

**The participants at the Forging Our Future Conference came from diverse backgrounds of consumers, carers and service providers. There were people from the Sydney metropolitan and good representation from rural, regional and remote Areas. People from 12 out of the 17 Area Health Services across NSW attended.**

Participants were provided with evaluation forms for each day and asked to complete them prior to leaving each day. A total of 40 evaluations were returned for the Friday (with 220 in attendance) and 47 for Saturday (from 189 attendees) with a total of 87 returned evaluations.

The evaluation forms consisted of questions 1-7 (Friday) and 9-14 (Saturday), with a comments section for each day. The ratings were established on a 5-point likert scale with 1=excellent and 5=poor.

From the 87 evaluations received the general organisation question (q7 and q14) received an excellent rating by 55%, very good (31%), good and satisfactory (10%) of participants. Combining the excellent and very good ratings the following sessions were considered highly by the participants:

Arana Pearson Keynote 80%  
Standards Quilt 93%  
Nick Yu 81%  
Dance 96%

From the evaluations received there was few negative comments with the majority of the feedback being overwhelmingly positive and encouraging for NSW CAG. People commented on the venue, food and overall success of the conference as excellent. One comment identified the conference as the best ever attended, with reference to people speaking from the 'heart'. Keynote speakers Arana Pearson and Nick Yu received particular comment as inspirations.

Issues of concern identified included the time factor in a number of sessions, in particular the 'From Consumer to Citizen' and the concurrent sessions where people may not of had enough time to ask questions. One person requested that NSW CAG broaden their consultation process by conducting forums in rural and regional Areas. NSW CAG would like to thank all who attended the 'Forging Our Future' Conference and for taking the time to complete the surveys and evaluations which will assist NSW CAG to provide a more informed service to the consumers and carers in NSW.

Paula Hanlon  
Member NSW CAG  
'Forging Our Future' Conference Committee

*Paula's complete report of feedback and participants evaluations of the conference is available from NSW CAG*

*The book of proceedings, with complete papers from the presentations, will be available later in the year.*

## **Words from the Conference Organiser**

In his introduction to the book of proceedings Chris Cunliffe- Jones had the following to say about his involvement with the organisation of the Conference: "*In mid November 2001 I was asked to assist the NSW CAG with their conference **Forging Our Future**.....The subsequent months gave me one of the most personally and professionally satisfying assignments in a long career". He said that "*The energy, passion and creativity of everyone involved coupled with their action in embracing and valuing everyone and every opinion made the CAG conference very special. It was a genuine celebration of life and the struggles and triumphs of people with a mental illness or caring for a person with a mental illness*".*

Mr. Cunliffe-Jones also acknowledged the importance of the "*sensitive and challenging*" opening addresses of the NSW Health Minister Craig Knowles MP and Professor Beverley Raphael, Director, NSW Centre for Mental Health and also their "*genuine interest in the conference and its outcomes*". He also thanked the conference committee





# Network NSW Registration or Update Form

NSW Mental Health Consumers, Carers and others with an interest in mental health across NSW can apply to participate in Network NSW a NSW CAG communication strategy for developing consumer and carer involvement in mental health service policy and service provision.

*By completing this form you will be placed on a listing of people interested in either actively participating in or receiving information on the development of consumer and carer participation across NSW*

## **Please tick type of Registration required:**

**Consumer**       **Carer**       **Group**       **Other**

**Name:** \_\_\_\_\_ **Date:** \_\_\_\_\_

## **Postal address:**

\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

**Group REGISTRATION** Name of Group \_\_\_\_\_

## **Postal address:**

\_\_\_\_\_

Phone: \_\_\_\_\_ Fax: \_\_\_\_\_ Email: \_\_\_\_\_

Group contact person: \_\_\_\_\_ - Phone No: \_\_\_\_\_

Any Comments: Use back of sheet if necessary

- Network NSW has three types of registration. There is no cost or charge involved with either registration

### Full

- **Consumer:** Either current, past or eligible users of mental health services in NSW.
- **Carers:** family members or close friends who accept primary responsibility for the non-professional care of a person with mental illness.

### Group

- **Groups** Any groups that have mental health consumers or carers as members or Associates

### Other

- Organisations or individuals may join as other members. This will entitle people to attend **NETWORK NSW** meetings to and obtain information and attend activities.

**Send information back to:**  
**NETWORK NSW Project**  
NSW CAG  
PO Box 1108  
ROZELLE NSW 2039

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