
Mental Health Advisory Council

Terms of Reference

1.0 Preamble:

- 1.1 Traditionally, the relationship between health service providers and the public has been one of expert to client. However, the need for much greater participation in prioritizing, planning, and implementation of health services and programs is recognized by the Interlake Regional Health Authority Board as a cornerstone for health reform. The best interests of health restructuring are achieved by the broadest possible input. Regional Mental Health Advisory Councils (RMHACs) are one important mechanism for participation in the planning of our health system.
- 1.2 Like many boards with overall responsibility for governance and decision-making, the Interlake Regional Health Authority cannot do it alone. To plan effectively and meet the goals that have been set, a wide variety of people need to get involved. It is important that health providers and community members to work together, give sound advice to the IRHA Board, and most important, recommend practical community solutions.
- 1.3 The support of citizens is essential to the development of a continuum of Health Services that reflects Regional conditions and needs.
- 1.4 The purpose of the Mental Health Advisory Council is to act in an advisory capacity and to encourage citizens to participate in the development of recommendations for comprehensive and cost effective Mental Health Services. It will develop recommendations for the setting of mental health priorities and resource coordination in the Region.

2.0 Purpose:

The responsibilities of the Mental Health Advisory Council shall include:

- 2.1 Provide a forum for discussion of a broad range of health and service issues that impact on the lives of people with mental illness and their support networks from the perspective of consumers, family members and other natural supports.
- 2.2 Develop strategies in regard to involving persons with mental illness to play an increasing role into the planning, implementation, and evaluation of regional mental health services and initiatives.
- 2.3 Gain the knowledge of and have the ability to provide information to consumers and their families on mental health programs.

2.0 Purpose: - cont'd

- 2.4 As an Advisory Council to the IRHA, Council members are expected to understand and accept the mandate, goals, values, mission and vision of the IRHA and to provide advice on mental health matters to the IRHA Board of Directors.
- 2.5 The Mental Health Advisory Council provides an avenue for communication for community members to become involved in health issues. For the Council to succeed, it has to develop positive working relationships and open lines of communications with both the IRHA Board of Directors and with their community.
- 2.6 The Mental Health Advisory Council will provide advice to the IRHA in the development of their plans for meaningful consumer participation that will:
- a) improve the quality of services and consumer satisfaction through effective mental health service planning, implementation and evaluation; and
 - b) enhance opportunities to work towards an authentic partnership among consumers, family members, service providers, mental health managers and system planners and policy makers.
- 2.7 The Mental Health Advisory Council does not make decisions about implementing new programs or services, particularly if funding is required, and they do not get involved in delivering actual programs or services unless they are specifically asked to do so.

3.0 Committee Membership:

- 3.1 The Mental Health Advisory Council members will:
- be committed to mental health reform;
 - be interested in health generally and in the mental health of the community¹;
 - be committed to a constructive, collaborative approach to health planning and delivery;
 - be a resident of the Region.
- 3.2 The composition of the Mental Health Advisory Council will reflect a broad and balanced spectrum of mental health consumers, their families, regional service providers, including funded agencies and other interested members of the community.

¹ The term "community" should not be interpreted solely as a geographic entity such as a town or municipality. Rather, it should be interpreted to include the broader concept and could include the community of seniors, the community of health providers, the community of aboriginal people, etc.

3.0 Committee Membership: - cont'd

- 3.3 The Council shall have nine (9) appointed members with voting privileges. These members shall be consumers; family members; or natural supports.
- 3.4 Voting Members shall be appointed from the following:
- 1) Community
 - 2) Crisis Services Unit
 - 3) Canadian Mental Health Association
 - 4) Interlake Psychogeriatric Advisory Council
 - 5) Interlake and Region Support Centre
 - 6) Self Help
- Ex-officio members
- 1) A representative from the Interlake Regional Health Authority Board of Directors
 - 2) A representative from the Selkirk Mental Health Centre Planning Team
 - 3) The IRHA Mental Health Program Manager(s)
 - 4) The IRHA Mental Health staff representative
 - 5) Staff representatives from appointment agencies.
- 3.4 Meetings are open to the public and consumers and their families are invited and encouraged to attend.
- 3.5 If possible, the Council will have at least one Aboriginal representative and one representative with an interest in spiritual care.

4.0 Executive Committee:

- 4.1 The Executive Committee may consist of a Chairperson, Vice-Chairperson, and Secretary. The Council shall annually elect the Executive Committee from the voting membership.

5.0 Appointment of Membership:

- 5.1 Council Members representing mental health consumers and families will be appointed by the IRHA Board from applications from individuals, or nominations, or direct appointments. Appointments will consider geography as well as the age, gender, culture and ethnicity of the Region.
- 5.2 Representatives from mental health care providers, as outlined in section 3.3), shall be nominated by their agency and appointed by the IRHA.
- 5.3 Any resident of the Region may nominate a candidate for membership, including himself or herself.

6.0 Terms of Membership:

- 6.1 Initial membership terms will be for two and three years.
- 6.2 Those members appointed to two-year terms will have the option of having their term renewed to a second term of three years. Thereafter, all terms will be for three years.
- 6.3 A member can serve no more than two consecutive terms.
- 6.4 A member may be removed from the Council if the member misses two consecutive regular meetings without explanation and approval by resolution of the Council.
- 6.5 In the event that a member is unable to complete his/her term of appointment or is no longer eligible for membership, the Council will actively seek another member and make a recommendation for appointment to the IRHA.
- 6.6 A member may resign by notifying the Chair of Interlake Regional Mental Health Advisory Council. A copy of the resignation will be provided to the IRHA.
- 6.6 New Council Members will be provided an orientation.

7.0 Meetings:

- 7.1 Meetings will be held at least quarterly.
- 7.2 A quorum shall be a simple majority of members of the Council.
- 7.3 Roberts' Rules of Order will guide the Council.
- 7.4 Meetings will be open to the public.
- 7.5 Members, Management, and Board liaisons will be given adequate notice of all meetings.

8.0 Minutes:

- 8.1 Minutes will be taken at all meetings and copies of the minutes will be distributed to the IRHA Board (through the IRHA office), the IRHA Chief Executive Officer, IRHA VP Planning and Council Members.

9.0 Communication:

- 9.1 Communication between the Council and the IRHA will be through their respective Chairpersons or Board Liaison.
- 9.2 Resource support for Council will be provided by the IRHA.
- 9.3 The IRHA Program Manager will serve as an ex-officio non-voting member to provide information pertaining to operational matters.
- 9.4 The IRHA Board Member will serve as an ex-officio non-voting member to provide information related to IRHA policy matters.
- 9.5 The SMHC Representative will serve as an ex-officio non-voting member to provide information related to SMHC policy matters.
- 9.6 The IRHA Board may meet with the Regional Mental Health Advisory Council as requested.
- 9.7 A member may, if all members present at the meeting consent, participate in Council meeting by means of such telephone or other communication facilities as permit all persons participating in the meeting to hear each other, and a member participating in the meeting by that means is deemed to be present at the meeting.
- 9.8 All written communication will be copied to the IRHA Board, Chief Executive Officer and VP Planning.

10.0 Remuneration and Reimbursement:

- 10.1 Membership on the Mental Health Advisory Council is voluntary and members will not receive remuneration for their time or participation.
- 10.2 Reasonable out of pocket expenses will be paid by the Mental Health Advisory Council in accordance with expense guidelines approved by the IRHA.

11.0 Authority:

- 11.1 The committee has no authority to spend or commit funds of the IRHA.

12.0 Expected Activity:

- 12.1 Council Members are expected to:
 - understand and accept the Mission, Vision and Values of the IRHA;
 - listen, talk and learn about health issues in the Region and identify the most pressing mental health issues and priorities;

12.0 Expected Activity: - cont'd

- provide advice and make recommendations to the IRHA Board on actions that should be taken to address mental health issues
- assess and report back to the IRHA Board on impact and outcomes of IRHA decisions related to mental health;
- bring mental health issues and concerns to the attention of the IRHA.
- Will have a link with the Provincial Mental Health Advisory Council.

13.0 Review/Evaluation of the Terms of Reference:

- 13.1 Recognizing that these Terms of Reference are interim in nature, they will be reviewed on an annual basis.