



Applicant Information Package

Specialist Aboriginal Mental Health Advocate¹

About the Mental Health Advocacy Service

The statutory office of the Chief Mental Health Advocate is created by part 20 of the *Mental Health Act 2014* (the Act) as an independent body providing mental health advocacy services, and rights protection functions, to “identified persons”.

The Mental Health Advocacy Service (MHAS) was created by the Chief Mental Health Advocate who engages, under contracts for services, Mental Health Advocates to provide the services. MHAS commenced operation on 30 November 2015.

The Act allows the Chief Mental Health Advocate to engage Mental Health Advocates with particular qualifications, training or experience relevant to a particular group in the community. The Chief Mental Health Advocate considers that being Aboriginal or a Torres Strait Islander is a genuine occupational requirement under the *Equal Opportunity Act 1984*. The provision of mental health advocacy services under the Act to Aboriginal and Torres Strait Islander people can most effectively be provided by a person who is also Aboriginal or a Torres Strait Islander.

The Act defines the people who the Mental Health Advocates can assist as “identified persons”, and includes a requirement to contact or visit involuntary patients within 7 days of being made involuntary and children under 18 within 24 hours.

Identified persons are: a person referred for an examination by a psychiatrist, an involuntary patient (including people on Community Treatment Orders), a mentally impaired accused person in an authorised hospital or released under a release order, a resident of a private psychiatric hostel, or a voluntary patient who falls within a direction by the Minister for Mental Health which currently includes children in a public or authorised hospital or a child who has been assisted by an Advocate in the previous 6 months and is being treated, or is proposed to be provided treatment, by or in a clinic.

MHAS protects identified persons by:

- providing access to information about their rights
- providing support and advocacy to protect and exercise those rights (which in the case of Aboriginal and Torres Strait Islander includes a number of provisions under the Act relating to their assessment and care)
- inquiring into and investigating the extent to which rights have been observed
- pursuing and resolving their complaints

¹ Section 50(d) of the *Equal Opportunity Act 1984* and section 350(3) of the *Mental Health Act 2014*.

- advocating for and facilitating access to services
- supporting and representing them in Mental Health Tribunal and State Administrative Tribunal Hearings
- inquiring into and investigating matters relating to conditions of mental health services that is or might adversely affect their health, safety or wellbeing.

It also provides a systemic overview of services from an advocacy stance and promotes compliance with the Act and “Charter of Mental Health Care Principles”.

This includes:

- visiting or contacting all identified persons within specified timeframes of being made involuntary and certain specified other identified persons on request
- reporting to Parliament and the Minister.

The Chief Mental Health Advocate is also the Chief Advocate under the *Declared Places (Mentally Impaired Accused) Act 2015* and advocacy services are provided under that Act by Mental Health Advocates to residents of the Bennett Brook Disability Justice Centre.

Structure

The Chief Mental Health Advocate (the Chief), appointed by the Minister, is head of MHAS. The Chief is responsible for engaging Senior Mental Health Advocates and Mental Health Advocates including a Youth Mental Health Advocate and specialist Mental Health Advocates.

Senior Mental Health Advocates, although not separately defined in the Act, are Mental Health Advocates with the additional responsibility of carrying out functions delegated by the Chief. The Youth Mental Health Advocate must have qualifications, training or experience relevant to, and primarily work with, children (under 18 years) and youth (under 25 years). Aboriginal Mental Health Advocates may work with both Aboriginal and non-Aboriginal people but are primarily intended to work directly with Aboriginal and Torres Strait Islander people or to assist and guide other Advocates who may be working with Aboriginal and Torres Strait Islander people.

Mental Health Advocates, (including the Youth, Aboriginal and any other specialist Advocates) primarily report to and liaise with a Senior Mental Health Advocate, through delegation by the Chief. Senior Mental Health Advocates report directly to the Chief.

Mental Health Advocates visit identified persons in mental health services (for example, secure wards, psychiatric hostels, emergency departments etc) by themselves and do not work from an office but have training, support and guidance from the Chief, Senior Mental Health Advocates or other delegate.

How to submit an application and the information required

This document should be read with the Terms and Condition of Engagement of Mental Health Advocates, the Code of Conduct, the Payments and Availability Policy and s373 of the Act. Applicants need to:

1. be satisfied you can meet the requirements as set out in the Terms and Conditions of Engagement document attached as you will need to sign this document prior to being engaged to perform services for the mental health advocacy service
2. be satisfied that you do not have a conflict of interest under s373 of the Act (a copy of which is provided below) and, if you think you do, to enquire whether the conflict could be managed before applying and/or declare the potential conflict in the application form
3. complete the application form
4. attach written reasons, in no more than six pages, stating why you think you can provide the services required as set out in the Terms and Conditions of Engagement by addressing each of the work related requirements listed below
5. attach a resume detailing your employment and volunteer history and any relevant formal qualification or other training.

If you have taken a severance payment from the WA public sector there may be restrictions that apply to a contract as a Mental Health Advocate. Please refer to the conditions of your severance package and note this in your application form.

Remuneration and Hours

Specialist Aboriginal Mental Health Advocates are paid \$50.00 per hour plus superannuation for authorised work. Mileage is also paid for distance travelled. Travel time is only paid under exceptional circumstances. It is not an employment position so there are no leave payments or other entitlements. Working arrangements are flexible however hours vary and cannot be guaranteed.

Work Related Requirements for Specialist Aboriginal Mental Health Advocates

The following work related requirements will be assessed for suitability in the context of the services being provided by Specialist Aboriginal Mental Health Advocates and their Terms and Conditions of Engagement and should be addressed in the application.

1. **Have a knowledge and understanding of Aboriginal and/or Torres Strait Islander societies and cultures.** *This will include identifying as an Aboriginal or Torres Strait Islander and may include activities, past or present, in local Aboriginal communities.*
2. **Knowledge of, and/or experience dealing with, mental health issues and contemporary concepts in the context of and a strong commitment to human rights.** *This could be through the applicant's lived experience, work experience, training and/or other studies.*
3. **High level communication and interpersonal skills, including the ability to engage with Aboriginal and Torres Strait Islander people from all walks of life.** *Applicants should highlight their knowledge, understanding, skills and experience in interviewing, engaging with and presenting information (both verbal and written) tailored to suit different audiences, including people from different age groups, people with Aboriginal and / or Culturally and Linguistically Diverse backgrounds, sexuality and gender diverse individuals and individuals at different stages of their recovery journey.*

4. **High level advocacy, negotiation and investigative skills in a range of situations.** *This may include investigation reports and analytical and problem solving skills as well as the ability to make oral submissions to a legal tribunal.*
5. **Good letter and report writing skills.** *These are important skills in ensuring that written advocacy work is clear, complete and persuasive. Written submissions and investigation reports may need to be provided to legal tribunals and other agencies.*
6. **Good organisational and time management skills to work effectively both independently and as part of a team.** *Applicants will need to work independently taking responsibility for, and managing their work, to effectively prioritise and meet expected performance deadlines and outcomes with the direction, support and guidance of the Chief, Senior Mental Health Advocates or other delegate.*
7. **Good computer skills.** *Includes the ability to use the internet, email, smart phone, databases and case management systems. Mental Health Advocates are required to enter reports on all consumer contacts into a case management system and instructions and work tasks are provided on a dashboard which they need to access and check regularly while working in the field.*
8. **Strong commitment to working ethically with integrity, professionalism and commitment.** *Includes complying with the standards and protocols set by the Chief Mental Health Advocate, Senior Mental Health Advocates or other delegate.*

Conflict of Interest provisions: s373 of the Mental Health Act 2014²

Section 373 - Conflict of interest

- 1) A mental health advocate may be employed by, or have a disqualifying interest under subsection (3) in, a body or organisation that provides treatment or care for identified persons.
- 2) However, the mental health advocate cannot perform any functions under this Act as a mental health advocate in relation to an identified person who is being provided with treatment or care by the body or organisation.
- 3) For subsection (1), a mental health advocate has a disqualifying interest in a body or organisation if —
 - (a) the mental health advocate; or
 - (b) another person with whom the mental health advocate is closely associated, has a financial interest in the body or organisation other than a financial interest prescribed by the regulations for this subsection.
- 4) For subsection (3)(b), a person is closely associated with a mental health advocate if the person —
 - (a) is the spouse, de facto partner or child of the mental health advocate; or
 - (b) is in partnership with the mental health advocate; or
 - (c) is an employer of the mental health advocate; or
 - (d) is a beneficiary under a trust, or an object of a discretionary trust, of which the mental health advocate is a trustee; or
 - (e) is a body corporate of which the mental health advocate is an officer; or page 270 No. 24 of 2014 As at 03 Nov 2014
 - (f) (f) is a body corporate in which the mental health advocate holds shares that have a total nominal value exceeding —
 - (i) the amount prescribed by the regulations for this paragraph; or
 - (ii) the percentage prescribed by the regulations for this paragraph of the total nominal value of the issued share capital of the body corporate; or
 - (g) has a relationship specified in paragraphs (a) to (f) with the mental health advocate's spouse or de facto partner.

² Please note that in addition to s373 MHAS has a Conflict of Interest Policy.