



**National Mental Health
Consumer & Carer Forum**

Operating Guidelines

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1 The National Mental Health Consumer and Carer Forum

1.1 Introduction

The Operating Guidelines outline the objectives and purpose of the NMHCCF and clarify the roles and responsibilities of members.

The Operating Guidelines are provided to all NMHCCF members, states or territories and organisations responsible for appointing members. They are also available on the NMHCCF website <http://www.nmhccf.org.au>.

1.2 Background and overview to the NMHCCF

The NMHCCF was established by the Australian Health Ministers Advisory Council Mental Health Standing Committee (AHMAC MHSC)¹ in 2002, to ensure mental health consumer and carer involvement at the national level of policy development.

The NMHCCF is funded through state, territory and Australian Government contributions to be an independent voice for mental health consumers and carers. The small operating budget covers at least two face to face meetings per year as well as working group teleconferences and activities. The meeting schedule is reviewed annually.

1.3 Purpose of the NMHCCF

The NMHCCF aims to improve the safety, wellbeing and quality of life of mental health consumers and carers throughout Australia through promoting their rights; creating a responsive, recover focused service system; and through supporting innovation in service delivery across the life span. The NMHCCF is represented on many national committees and has produced a range of policy submissions, advocacy briefs and high quality, frequently referenced position statements on issues important to consumers and carers.

1.4 NMHCCF Business Plan, Strategy and Workplan

The NMHCCF Business Plan (see [NMHCCF Business Plan](#) on NMHCCF website) is an overarching document that highlights the NMHCCF strategic goals and guides the direction of core priorities and activities undertaken by Forum members.

The Business Plan was finalised in 2015 as well as the accompanying Strategy for 2015-17 (see [NMHCCF Business Plan Strategy 2014-2017](#) on NMHCCF website). The NMHCCF Strategy identifies six approaches, each with core activities and expected outcomes. These six approaches include collaboration, promotion, capacity, advocacy, practices and knowledge.

¹ AHMAC operates as a national forum for planning and information sharing and advises the Australian Health Ministers' Conference (AHMC) on strategic issues relating to the coordination of health services across the nation and, as applicable, with New Zealand. The then MHSC provided advice to AHMAC on issues pertaining to the mental health sector and developed and implemented policy and services under the strategic direction of AHMAC. In July 2012 a review of the AHMAC Committee structure was undertaken and it was agreed that the MHSC would not continue. The Mental Health, Drug and Alcohol Principal Committee (MHDAPC) took up the work of the MHSC.

More detailed information on the governmental processes associated with the development and implementation of national mental health policy can be found at Appendix A.

The NMHCCF Workplan is a living internal document which provides guidance for the work identified in the NMHCCF Strategy. The workplan identifies all proposed actions to achieve the core activities.

1.4 Terms of Reference

NMHCCF activities are guided by Terms of Reference, endorsed by the then AHMAC MHSC (now MHDAPC) in 2002, which are to:

- enhance, promote and progress genuine national partnerships and the recognition of mental health consumers and carers at all levels of government and community
- provide ways to improve access to and sharing of relevant information between national networks and organisations
- strengthen and develop the mental health consumer and carer focus of entities at the national, state and local levels
- increase meaningful opportunities for and capacity of mental health consumers and carers to advocate for and participate in legislation, and policy development, implementation and evaluation at all levels
- provide an informed strong and unified voice on consumer and carer issues to government, the mental health sector and other stakeholders
- identify best practice, protect human rights, highlight deficiencies and influence positive systemic change for the recognition and benefits of consumer and carer participation at all levels
- participate in the development and implementation of principles and priorities of action and strategies in national policy directions.

1.5 NMHCCF relationship with Mental Health Australia

The NMHCCF is auspiced by Mental Health Australia and remains an independent voice for consumers and carers. The NMHCCF has a Memorandum of Understanding and Auspicing Agreement which is reviewed every two year.

Mental Health Australia provides the following:

- secretariat support provided by the NMHCCF Executive Officer and Project/Administration Officer
- oversight and additional support to the NMHCCF Secretariat by the Director of Consumer and Carer Programs
- administration, finance, policy and communications support.

2 Code of Conduct

2.1 Introduction

NMHCCF members are required to abide by the below Code of Conduct.

The Code of Conduct is available on the NMHCCF website. It is provided to members at NMHCCF face to face meetings and is referred to at the start of all meetings. If a NMHCCF member breaches the Code of Conduct, there is an expectation it will be brought to the attention of the individual in a respectful manner or raised as an issue with the NMHCCF Co-Chairs. There is also the option of following the Complaints Procedure (see [15 Complaints and Conflict Resolution](#)).

2.2 Code of Conduct

Members must uphold the integrity of the NMHCCF at all times, including the following actions:

Behaviour

- Behave honestly and with integrity
- Respect:
 - Each person's privacy in relation to their diagnosis and personal story
 - Each person's right to have an opinion, which may differ from my own
- Act with due care and diligence
- Comply with all applicable Australian laws
- Provide brief comments at meetings so that everyone has an opportunity to make comment
- Support the Executive Committee and Secretariat or anyone else to ensure respect for this Code of Conduct in any activities undertaken by the NMHCCF

Conflict of Interest

- Declare the potential for conflict of interest and to stand aside when conflict of interest exists or may be perceived
- Pass on relevant information relating to conflict of interest of others

Anti Discrimination

- Show respect for all persons equally without distinction whatsoever of race, gender, religion, colour, national or ethnic origin, language, marital status, sexual orientation, age, socio-economic status, health status, disability, political conviction, or any other distinguishing feature.

Confidentiality

- Maintain confidentiality of information, including but not limited to:
 - Treating as confidential appropriate information
 - Using discretion with regard to confidentiality

Representation

- Not provide false or misleading information in response to a request for information
- Not make improper use any of a NMHCCF member's position or information

Use of Resources

- Use the NMHCCF and other organisation's resources in a proper manner

Publications

- Acknowledge the contribution of co-workers in publication of original material
- Apply standards relating to copyright and intellectual property

Communication with the Secretariat

- Respect Secretariat at all times.
- When making requests of the Secretariat, take into account competing priorities *and* capacity

3 NMHCCF Secretariat and Administration Support

3.1 Overview

The Australian Government Department of Health funds an Executive Officer position and a Project/Administration Officer position to support the work of both the NMHCCF and the National Register of Mental Health Consumer and Carer Representatives.² The Executive Officer and Project/Administration Officer are employees of Mental Health Australia.

3.2 Executive Officer

The Executive Officer manages the business of the NMHCCF under the direction of the Executive Committee and with guidance from the Mental Health Australia Director of Consumer and Carer Programs, when necessary. This includes carrying out all instructions of the Executive Committee, all agreed procedures covered in these Guidelines, financial management, initiating and monitoring progress of NMHCCF activities, and representation of the NMHCCF at external events where requested by Executive Committee.

The Executive Officer also supports members as much as possible in their conduct of NMHCCF business.

3.3 Project/Administration Officer

The Project/Administration Officer works directly with, and provides administrative and project support to the Executive Officer and NMHCCF members.

The Project/Administration Officer also assists the Executive Officer to provide secretariat support to the NMHCCF, including liaising with NMHCCF members, preparing meeting materials, managing the organisation of meetings, coordinating travel and venue requirements, and maintaining the NMHCCF website.

² The National Register (a Mental Health Australia project) was developed in 2007 to provide a pool of trained consumer and carer representatives to national mental health policy initiatives. There are currently places for 60 consumers and carers to be members of the National Register.

4 Membership of the NMHCCF

4.1 Overview of membership

The NMHCCF is made up of one mental health consumer representative and one mental health carer representative from each Australian state and territory and representatives from major population groups and the following national health consumer and carer projects/organisations:

- blueVoices, the consumer and carer reference group for *beyondblue*
- Carers Australia
- Consumers Health Forum of Australia
- GROW Australia
- Mental Health Carers Arafmi Australia
- Private Mental Health Consumer Carer Network (Australia)
- Former Australian Mental Health Consumer Network³
- Mental Health in Multicultural Australia (MHiMA) Project
- Aboriginal and Torres Strait Islander population

There are no proxies for members on the NMHCCF, unless specifically requested.

In addition, appropriate expertise may be recruited for time limited periods to assist with projects and working group activities.

4.2 Roles and responsibilities of NMHCCF members

NMHCCF members are expected to participate in NMHCCF activities by:

- responding to requests within the timeframes specified by the Secretariat
- preparing for meetings by completing all pre-reading and activities
- timely attendance at meetings
- preparation and participation in teleconferences
- active participation in discussion within all meeting environments
- contributing ideas and expertise to the development of NMHCCF activities, meeting agendas, policy and planning
- participation in a minimum of one working group per annum
- following up identified actions within the specified timeframe
- representing the NMHCCF in a professional manner at all external meetings

Each member has a responsibility to report back to their organisation or state/territory Liaison Officer about NMHCCF activities, and vice versa. This information exchange assists

³ Original membership included the Australian Mental Health Consumer Network (AMHCN), which ceased operations in 2008. In principle agreement was provided that the former AMHCN representative should remain on the NMHCCF as a consumer representative until the new national consumer organisation is established.

members to promote the work of the NMHCCF and informs the NMHCCF and organisations, states and territories about relevant issues (see [7 Reporting requirements for NMHCCF members](#)).

Members are not limited in the number of activities they participate in, however consideration should be given to ensuring a fair distribution of responsibilities and encouragement of new members.

4.3 Selection of NMHCCF members

The selection of consumer and carer representatives to the NMHCCF from states and territories is the responsibility of the relevant state/territory government.

For those members who are not representing a state or territory, the selection of a consumer or carer representative for the NMHCCF is the responsibility of the organisation that member is representing.

The nationally consistent process for NMHCCF consumer and carer selection and representation, including position descriptions and selection criteria can be found here on the Mental Health Australia website.

4.4 Length of membership on the NMHCCF

There is no maximum length of tenure for NMHCCF consumer and carer representatives. NMHCCF members are initially appointed for a four year term and then their appointment is reviewed by their nominating state/territory or organisation. If reappointed, their membership is then reviewed every two years.

4.5 Orientation for new NMHCCF members

The Executive Officer ensures that each new member receives the NMHCCF Operating Guidelines and an information pack prior to their first NMHCCF meeting. Where possible, the Executive Officer will also organise a face to face orientation session for new members prior to their first meeting, with at least one member of the Executive Committee. At the orientation session the following will be discussed:

- NMHCCF Operating Guidelines
- format of NMHCCF meetings
- overview of workplan activities and working groups
- representative opportunities
- reporting requirements
- importance of advocacy and utilising networks.

The orientation session will also provide new members with the opportunity to ask questions.

4.7 Resignation from the NMHCCF

Notice of resignation from the NMHCCF must be provided to the Executive Officer in writing, via an email. The resigning member must also inform their nominating state, territory or organisation, as they are responsible for seeking a replacement representative.

4.8 NMHCCF members not able to attend meetings

Where participation or attendance at NMHCCF meetings is not possible, members are required to notify the Executive Officer and their nominating agency as soon as is practical. The Executive Officer will seek feedback from these members on meeting papers out of session to raise at the meeting on behalf of the member.

Members who are unable to attend at least one NMHCCF face to face or teleconference meeting during any 12 month period will be asked to review their position as a NMHCCF member with their nominating organisation or state and territory Liaison Officer.

4.9 Performance management

All NMHCCF members are expected to fulfil their roles and responsibilities as outlined in these Operating Guidelines. If a NMHCCF member neglects their roles and responsibilities, or breaches the code of conduct (see [2 Code of Conduct](#)), an Executive member will raise the issue with the member involved in a sensitive and compassionate manner, providing any support necessary. If the member wishes to talk to someone outside the Executive Committee, that will be facilitated if the nominated person agrees.

If the performance management issue is related to an Executive Committee member, the Executive Officer will seek the appointment of a third party, which could include Executive Committee members not associated with the identified issue.

See also [15 Complaints and Conflict Resolution](#).

5 NMHCCF Executive Committee

5.1 Overview of the NMHCCF Executive Committee

The Executive Committee comprises:

- a Consumer Co-Chair and Carer Co-Chair
- a Consumer Deputy Co-Chair and a Carer Deputy Co-Chair
- a Consumer Ordinary Executive Member and a Carer Ordinary Executive Member.

5.2 Length of tenure as an Executive Committee member

The Executive Committee is elected by the NMHCCF on a two yearly basis (see [6 Election of the Executive Committee](#)).

5.3 Roles and responsibilities of Executive Committee members

In addition to the roles and responsibilities expected of all NMHCCF members, Executive Committee members are expected to:

- exemplify the behaviour and supportive interactions set out in these guidelines
- attend one regular teleconference prior to each NMHCCF face to face meeting
- negotiate chairing arrangements and chair NMHCCF meetings and teleconferences
- participate in NMHCCF working groups – at least one Executive member per working group

- be available by email or teleconference to deal with ongoing policy decisions and information queries (these occur regularly and will involve at least 1.5 hours work per week)
- pro-actively ensure that all members are aware of and contributing to key identified issues across the NMHCCF agenda
- participate in consumer and carer representative selection for external committees/consultations – Co-Chairs where possible (these occur regularly and may involve 0.5 to 1.5 hours work per week)
- approve correspondence and media releases in consultation with the Forum where possible, when quick decisions are required (see [9.2 Decision making for quick decisions](#))
- address any issues identified in the face to face meeting evaluation surveys
- investigate and deal with complaints against NMHCCF members (see [12 Complaints and conflict resolution](#)).
- delegate Executive representative responsibilities to NMHCCF members and the Executive Officer where appropriate and as required (see [9.2 Decision making for quick decisions](#) and [9.3 Utilising the NMHCCF Secretariat discretion](#))
- oversee the NMHCCF budget with advice from the Executive Officer
- attend Mental Health Australia events and Members Policy Forum meetings, when appropriate, and participate in meetings with the Chair, Deputy Chair and CEO of Mental Health Australia as outlined in the Memorandum of Understanding between the NMHCCF and Mental Health Australia
- advise the Secretariat if they are unable to perform their Executive Committee duties for an extended period of time (e.g. whilst on leave or unwell).

The Executive Committee is committed to encouraging open and honest input to and from NMHCCF members and to sharing relevant information with one another and the NMHCCF.

5.4 Communication practices

The Executive Committee communicates regularly via email or phone to monitor the progress of NMHCCF business and projects, and to plan for NMHCCF meetings. Executive Committee meetings are face to face where feasible, and by teleconference at other times.

Significant work is undertaken by the Executive Committee via email.

5.5 Decision making for the Executive Committee

All Executive Committee members are involved in decision making where possible and each has voting rights. Any decisions/recommendations made by the Executive Committee are shared with a unified voice, even if individually a member may not agree with the decision. Executive Committee decisions can be made on a majority vote.

5.6 Executive Committee working practices

Upon appointment, Executive Committee members are to sign an agreement outlining roles, responsibilities and communication practices within the Executive Committee.

Executive Committee members are expected to:

- work in a collaborative manner and demonstrate the ability to understand and tolerate differing views
- show respect to each other at all times
- demonstrate a willingness to undertake work responsibilities and adhere to agreed activity timeframes
- communicate in a suitable and appropriate manner to a range of key stakeholders, including NMHCCF members and Secretariat
- represent the NMHCCF as a cohesive Executive Committee when at official events or activities
- understand the requirements of conducting a NMHCCF meeting and participate in the meeting as a chairperson or time keeper
- respond to any issues brought to the attention of the Executive Committee within 48 hours, even if it is just an interim response to say the correspondence has been received and is being addressed.

Executive Committee members are also encouraged to inform their fellow colleagues when they may need to step down from the role due to personal circumstances and/or health reasons.

5.7 Roles and Responsibilities of the Co-Chairs

Co-Chairs are expected to:

- open and close NMHCCF meetings
- participate in consumer and carer representative selection processes for external requests for consumer and carer participation opportunities and committees
- sign all external correspondence, following Executive Committee and/or Forum endorsement (see [9.2 Decision making for quick decisions](#))
- represent the NMHCCF at external events
- delegate NMHCCF representative opportunities to other Executive Committee members or NMHCCF members, as required and where appropriate.

5.8 Roles and responsibilities of the Deputy Co-Chairs

Deputy Co-Chairs are expected to:

- take on the responsibilities of Co-Chair when their respective Co-Chair is unavailable
- chair a session at NMHCCF face to face meetings.

5.9 Roles and responsibilities of the Ordinary Executive Members

Ordinary Executive members are expected to:

- step up into Deputy Co-Chair positions if a Co-Chair or Deputy Co-Chair is not available for a short period of time
- be responsible for time-keeping at NMHCCF meetings.

5.10 Training and succession planning

To further develop Executive Committee members' capabilities, once elected each Executive Committee member may have an opportunity to have a skills/learning needs assessment and be given training and development opportunities if they wish.

This will build capacity within the NMHCCF and ensure that if a Co-Chair or Deputy Co-Chair steps down other Executive Committee members are ready to take on their role.

Individual Executive Committee members can raise this with the whole Executive Committee. If agreed, the Executive Officer will liaise with the member and consider appropriate development opportunities.

6 Election of the Executive Committee

6.1 Overview of election processes and length of tenure

Executive Committee members are elected for two year terms. All six Executive Committee positions are elected at the same time and become vacant at the end of the two year cycle (i.e. all positions are spilled at this time).

All Executive Committee positions become vacant every two years, those who seek to serve another term must renominate at each election.

All NMHCCF members have a responsibility to vote in Executive Committee elections.

Carer members can only nominate, second and vote for **carer** Executive Committee positions.

Consumer members can only nominate, second and vote for **consumer** Executive Committee positions.

Tenure:

- There is a maximum tenure of two consecutive terms as an Ordinary Executive member.
- There is a maximum tenure of two consecutive terms in the Co-Chair and Deputy Co-Chair positions.
- If positions are filled between spills/terms, they are still eligible for two consecutive terms.

6.2 Nominations

Nominations for Executive Committee positions are open to all NMHCCF members who have served twelve months or more as a NMHCCF member.

Approximately 6 weeks prior to the first face to face meeting in an Executive Committee election year, the Executive Officer will email information to members about Executive Committee positions and the election, and call for nominations for Co-Chairs, Deputy Co-Chairs and Ordinary Executive Members.

Members can nominate/be nominated for any number of Executive Committee positions.

All nominations must be made by completing a nomination form. The nomination form will be emailed to all NMHCCF members by the Secretariat.

Nominations must include a brief 1-2 paragraph biography of the nominee, describing the nominee's experience, achievements and reasons for wanting the position(s). Nominations received will be sent to all NMHCCF members during the voting stage to assist them in making a decision.

Nominations must be seconded by a fellow NMHCCF member, who is to be identified on the nomination form. Seconders must email a notification to the Executive Officer confirming they second the nominee. Seconders can second more than one Executive Committee nominee.

Approximately 5 weeks prior to the meeting, the Executive Officer will email a nomination reminder to NMHCCF members.

Approximately 4 weeks prior to the meeting, the Executive Officer will advise via email that the call for nominations is closed.

Should more than one nomination be received for any position, an election will be required and an independent Returning Officer will be nominated (e.g. the Mental Health Australia Deputy CEO or their delegate).

Please note: Nominees can withdraw their nomination at any stage of the Executive election process.

6.3 Election process

The Executive Officer will circulate information about all nominees and the voting process to NMHCCF members by email once nominations have closed.

If a vote is required for more than one position a series of votes may need to be conducted (staggered voting) only if the person/people going for the Chair are also nominating for other positions. The election process may take up to 3 weeks (7 days per vote).

6.4 Voting in the Election

The Executive Officer will circulate voting information to members via email. Members are to email the Returning Officer within 7 days indicating which candidate they are voting for. Phone votes to the Returning Officer will be accepted in extenuating circumstances only. The Executive Officer will liaise with the Returning Officer to ensure all members have voted. The Secretariat will contact members who have not voted.

All votes will be counted by the Returning Officer; the Executive Officer will inform members of the result by email.

After each vote, successful nominees' names will be removed from the next round(s) of voting papers (if they have nominated for more than one position on the Executive Committee).

6.5 Event of a tied vote

In the event of a tied vote for any position votes will be recounted by the Returning Officer and independent scrutineer.

If the vote remains tied preferential voting will be used for the second round of voting.

If the vote remains tied after the second vote the Returning Officer will break the deadlock by tossing a coin, observed by the independent scrutineer.

6.6 Invalid election

An election will be considered invalid if the voting process has been compromised, for example if:

- A consumer casts a vote in a carer election (or vice versa).
- More votes are received than there are members.
- Votes are lost (e.g. if the Returning Officer is away unexpectedly and voting information is not handed over to a replacement Returning Officer).

Once an election or vote (if only one voting round is affected) has been declared invalid another vote(s) will be called.

6.7 Unexpected Executive Committee vacancies

Unexpected vacancies will be filled through an out of session election via email, using a similar process to the unsuccessful election outcome process.

- The Executive Officer will call for nominations for the vacant Executive Committee position(s).
- Nominations will close after 2 weeks, at which time information about nominees will be circulated by the Executive Officer.
- Members will have 1 week to email their vote to the Returning Officer.
- The Returning Officer will count the votes. The Executive Officer will inform members of the result by email.

These positions will only be filled for the remainder of the two year Executive Committee term.

7 Reporting Requirements for NMHCCF members

7.1 Overview

Reporting by NMHCCF members to and from their states, territories and organisations will occur on a regular basis.

The Executive Officer will ensure information and support is provided to members in an efficient and timely manner as per the policies and procedures outlined in these Operating Guidelines.

7.2 State/territory and organisation reporting

To ensure effective reporting mechanisms, each member is required to maintain a working relationship with their nominating organisation or state/territory liaison officer/s, so they can provide a conduit for information exchange with the NMHCCF ([see 4.2 Roles and responsibilities of NMHCCF members](#)).

NMHCCF members are required to:

- provide a written report about current activities and issues in their state/territory or organisation to the NMHCCF for each face to face meeting. The Executive Officer will email a reporting form to all NMHCCF members prior to NMHCCF meetings. The reporting form is to be completed and returned to the Executive Officer at least two weeks before meetings.
- provide a report to the entity they represent after each NMHCCF meeting, teleconference or other major activity. To assist members in reporting to their constituency, the Executive Officer provides a summary of NMHCCF meeting discussions and outcomes within three weeks of the conclusion of each face to face meeting. Members may choose to use this summary as the basis of their report to their constituency if they wish.
- provide a report following committee meetings, working groups, etc. where they are participating as a NMHCCF representative. This report is to highlight any issues of concern to mental health consumers and carers, and share information regarding mental health reform and policy developments.

7.3 Discussing issues and activities with consumer and carer networks

NMHCCF members are expected to report or discuss issues and activities with their local consumer and carer networks, wherever possible. Discussing NMHCCF projects, activities and positions on issues with local mental health consumer and carer networks helps strengthen and unite the sector. NMHCCF members can also circulate information on issues of national importance to mental health consumers and carers through the information e-bulletin compiled by the Secretariat.

7.4 Mental Health Drug and Alcohol Principal Committee

The NMHCCF is invited to all MHDAPC stakeholder engagement sessions, when held as a component of their meetings. A written update is prepared by the Executive Officer and presented to MHDAPC by the NMHCCF Co-Chairs. If the NMHCCF Co-Chairs are unable to attend these sessions then other members of the NMHCCF Executive Committee are asked (Deputy Co-Chairs, then Ordinary Executive members). The Executive Committee members attending represent consumers and carers as their constituents; this includes the interests of the NMHCCF as well as members' own individual consumer and carer networks.

8 NMHCCF Meetings

8.1 Overview and purpose of meetings

Historically, the NMHCCF have met four times a year; two face to face meetings and two teleconferences. In September 2015, members agreed to trial a new meeting schedule for 12 months which would replace the two full membership teleconferences with an additional one day face to face meeting. This additional meeting is to focus on working group activities and progressing priority actions according to the workplan. The face to face meeting schedule is to be reviewed annually alongside the NMHCCF budget, with the commitment of at least two 2 day face to face meetings per year.

8.2 Attendance at meetings

It is expected that NMHCCF members will attend all face to face meetings.

In the event that an NMHCCF member is unavailable for a meeting, that member should notify the Secretariat at the earliest possible time.

8.3 Venue booking and individual requirements

The Secretariat will organise all meeting venue requirements within the allocated budget. It is the responsibility of individual members to provide the Secretariat with special requests and needs, including dietary requirements so these can be accommodated.

8.4 Face to face meetings: Procedures and setting the agenda

For face to face meetings, the following process is used:

- 6 weeks prior to the meeting the call for agenda items are emailed to NMHCCF members.
- 4 weeks prior to the meeting members' agenda items are received by the Executive Officer.
- 3 weeks prior to the meeting the agenda is finalised by the Executive Officer and NMHCCF Executive Committee.
- 3 weeks prior to the meeting RSVPs close.
- 2 weeks prior to the meeting the Secretariat uploads all meeting papers to the members section of the NMHCCF website and posts hard copy documents as requested.

NMHCCF Meeting Preparation Timeline – Face to face Meetings						
	6	5	4	3	2	1
NMHCCF face to face meeting	Call for agenda items		Agenda items due	Agenda finalised Confirm attendance Send travel form	Meeting documents uploaded	

8.5 Teleconferences: Procedures and setting the agenda

To be used for whole NMHCCF teleconferences, when required.

For teleconferences the following process operates:

- 4 weeks prior to the meeting the call for agenda items and the agenda pro forma are circulated amongst the NMHCCF membership.
- 3 weeks prior to the meeting members' agenda items are received by Executive Officer.
- 2 weeks prior to the meeting Executive Committee finalise agenda by email.
- 1 week prior to the meeting confirm attendance.
- 1 week prior to the meeting the Executive Officer circulates all documentation relevant to the meeting electronically.

- If requested, hard copies of meeting papers can be circulated prior to the teleconference.
- During the teleconference meeting:
 - there will be an introduction of the Chairperson/people and welcome of participants.
 - “mute” button should be used on speaker phone unless speaking.
 - name is stated by each NMHCCF member prior to comment.
 - comments to be addressed through the Chair.
 - comments to be succinct and relevant and speakers respectful and inclusive of other participants, including time to speak.
 - allocated time limit of meeting should be adhered to.
 - NMHCCF members to promptly disconnect from teleconference at meeting close.

NMHCCF Meeting Preparation Timeline – Teleconferences				
	4	3	2	1
NMHCCF teleconferences	Call for agenda items	Receive agenda items	Finalise agenda via email	Confirm attendance Circulate all relevant documentation

8.6 The decision making process at meetings

At NMHCCF meetings decisions are made as follows:

- Proposed decision/action items are identified in meeting agenda papers for NMHCCF members’ consideration and discussion. Decision/action items may also arise through discussion at the meeting.
- For each decision/action item a motion must be made and then seconded. The membership then votes on the motion and it is passed based on the majority.
- The Secretariat records all agreed decisions and actions in the minutes of the meeting.

The Secretariat enacts NMHCCF decisions and actions on behalf of the NMHCCF Executive Committee.

8.7 Meeting outcomes

Draft minutes are compiled by the Secretariat and circulated at the earliest opportunity and within six weeks of the meeting.

The NMHCCF Actions Arising table is updated following each meeting and circulated to members within two weeks. The Executive Officer is delegated to carry out the decisions and activities of the NMHCCF.

After each face to face meeting the Executive Officer develops a summary report to inform consumers and carers and other NMHCCF stakeholders about NMHCCF meeting activities.

This meeting summary is distributed within three weeks of the face to face meeting, uploaded to the NMHCCF website and shared with other consumer and carer groups.

9 Business between NMHCCF Meetings

9.1 Overview and purpose

The NMHCCF also makes business decisions and undertakes activities outside of face to face meetings. The below outlines the processes to ensure business can continue outside scheduled meetings.

9.2 Quick decisions

If an action occurs due to unexpected or changed circumstances, or if a quick decision needs to be made on an issue, the following process will be used:

- All Executive Committee members will be contacted by the Executive Officer to seek their approval where a quick response is required.
- If not all Executive Committee members are available, a quorum of at least one carer and one consumer executive representative will provide feedback.
- A decision will be made by majority vote.
- If no Executive Committee members can be reached in the required time, the Executive Officer will be empowered to respond to the unexpected or changed circumstances informed by the following NMHCCF resources:
 - Advocacy briefs;
 - past decisions and discussions of NMHCCF members and the Executive Committee; and
 - NMHCCF Business Plan and Strategy, Operating Guidelines and the objectives outlined in the Workplan.

Where matters have been actioned by the Executive Committee, these will be reported to all NMHCCF members as soon as practicable and subject to discussion at the next available meeting if necessary.

9.3 Whole of NMHCCF membership decisions

Where the matter is not urgent or requires consideration of all members, the issue should be circulated to all NMHCCF members for decision. If endorsement is sought from members within a reasonable timeframe (one-two weeks), the Executive Officer may stipulate 'nil response is considered endorsement'. This is not implied if it is not stated in the correspondence.

A decision can only be actioned or considered endorsed if there is a clear majority from members.

9.4 NMHCCF Secretariat discretion

The Secretariat is empowered to make decisions on behalf of the NMHCCF at the discretion of the Executive Committee. This includes, but is not limited to, decisions about correspondence, invitations to comment on external requests for input, attendance at

meetings, representative selection if appropriate, funding expenditure, including sitting fees or other allowances, project proposals and reports, and other issues as they arise.

The Executive Committee will be informed of decisions made by the Secretariat on behalf of the NMHCCF.

9.4 Correspondence

Letters from the NMHCCF are drafted by the Secretariat. All correspondence is approved by the Executive Committee and signed by the Co-Chairs. When correspondence goes out under the Co-Chairs signatures it only needs to be approved by the majority of Executive Committee members, at least 2 consumers and 2 carers. All correspondence will be drafted as per the NMHCCF Style Guide (see [11.6 NMHCCF Style Guide](#)).

9.5 Submissions

The NMHCCF regularly provides feedback on matters of relevance, including consultations on national mental health initiatives and policies. When consultation timeframes permit, NMHCCF members can discuss these opportunities and potential NMHCCF feedback at NMHCCF meetings, or via email between meetings. The Secretariat uses feedback from these discussions to develop NMHCCF responses.

If there are a number of members with expertise in the area related to a submission, a time-limited working group may be formed or a teleconference convened to discuss and assist the Secretariat in drafting a response.

When there is a limited timeframe for feedback the Secretariat will draft the response and seek comments from members by email.

Where possible the Executive Committee approves final NMHCCF responses prior to submission. The Secretariat is also empowered to respond on behalf of the NMHCCF (see [9.3 Utilising the NMHCCF Secretariat discretion](#)).

9.6 Advocacy briefs

The NMHCCF develops advocacy briefs to enable consumers and carers to better understand and comment on key issues in mental health. Advocacy briefs are available to NMHCCF members and to reviews, services and the general public through the NMHCCF website.

Advocacy briefs are written by NMHCCF members and reviewed annually. Draft advocacy briefs are initially reviewed by the Advocacy Brief Editorial Working Group before being circulated to all NMHCCF members for comment/endorsement. Following this process the author(s) have final sign off. The Secretariat and Working Group will facilitate this process and original authors, if possible, will make any necessary revisions.

Advocacy briefs are living documents; formal review does not preclude nominated brief coordinators from updating the documents on an ongoing basis.

NMHCCF members will be advised when briefs are updated and if changes are substantial a formal review by all NMHCCF members may be required.

9.7 Working Groups

NMHCCF working groups operate as advisory groups responsible for drafting policies and papers (e.g. planning documents, advocacy briefs) or for progressing particular priority actions of the NMHCCF Workplan. Any work produced is then provided to all members for their feedback and endorsement.

Membership of working groups is voluntary, but each must include at least one NMHCCF Executive Committee member in an ex officio capacity. Each working group has Co-Chairs, preferably a Consumer Co-Chair and a Carer Co-Chair. Working groups can co-opt external expertise to assist on projects as required, which includes involving members of the National Register of Mental Health Consumers and Carers when appropriate. In general, support for working group activities is available through the Secretariat and related funding is sourced through NMHCCF savings.

If project work expenditure is above \$5,000 a formal budget proposal is required. The budget proposal will be put to all NMHCCF members for discussion and approval.

If project work expenditure is less than \$5,000 a proposal will still need to be drafted but it can be approved by the NMHCCF Executive Committee rather than the full NMHCCF membership.

Working group's terms of reference are agreed by all NMHCCF members and include consideration of the lifespan of the working group and the budgetary implications of the project.

Working groups can progress priorities and actions by participating in teleconferences, out of session emails and face to face meetings where appropriate. The Secretariat will help facilitate these processes and work with the working group Co-Chairs to set up meetings and progress actions. Sitting fees will be paid for working group meetings and all members are expected to participate, or provide feedback out of session. The Secretariat will distribute brief meeting notes following working group meetings.

Working group activities are reported to NMHCCF members at each face to face meeting and the work of each working group is reviewed annually.

9.8 Documentation of volunteer hours

To assist business planning it is useful to collect data on the actual amount of time spent on NMHCCF processes. NMHCCF members are required to estimate the hours they provide to the NMHCCF on NMHCCF business where they do not receive sitting fees, for example reading time or feedback provided by email. These estimated hours are recorded on the reporting form members complete prior to NMHCCF meetings (see [Appendix A](#)).

NMHCCF members report these hours to provide an indication of commitment from the NMHCCF.

10 Representation opportunities

The NMHCCF is regularly asked to provide consumer and carer representatives for external participation opportunities and committees.

The NMHCCF utilises Mental Health Australia’s selection process for the selection of members to provide representation (see Appendix B):

Generally, the NMHCCF only provide consumer and carer representatives if there is fair and equitable remuneration for their involvement. If sitting fees for representation are not provided and NMHCCF members consider the representation opportunity is of national importance, the Executive Committee, in consultation with the Secretariat, may choose to meet the sitting fees from within the NMHCCF budget, to allow member participation. If it is not possible for the NMHCCF to meet sitting fees (due to budgetary constraints etc), NMHCCF members will be given the opportunity to voluntarily apply for these positions.

If NMHCCF members are unavailable to attend representation opportunities that specifically require NMHCCF representation, the Executive Committee may consider requesting the Executive Officer attend on behalf of the NMHCCF. In this situation the Executive Officer would:

- undertake the role of ‘participant’ rather than ‘representative’ on behalf of the NMHCCF and this would be made clear.
- ensure that information gained at the consultation is reported back to the NMHCCF.

11 Communication

11.1 Communications Strategy

The NMHCCF has a Communications Strategy which determines how the NMHCCF communicates externally and internally. NMHCCF communications activity is driven by the following ethos:

Listen – Learn – Advocate – Influence.

The following Communication Principles will be applied:

Principle	Reason
1. Consultative & transparent	Facilitates open stakeholder engagement.
2. Credibility	Ensures communication source is authoritative and reliable.
3. Consistent messages	Ensures dependability and professionalism of the NMHCCF.
4. Respond to information requests	Ensures professional and accessible engagement.
5. Accessible language	Ensures language is easy to understand and appropriate for all stakeholders.
6. Listen to feedback and respond/act	Demonstrates acknowledgement and appropriate action

All written correspondence will be designed and developed in accordance with these guidelines and the NMHCCF Style Guide (see [11.6 NMHCCF Style Guide](#)).

11.2 Member contact details

All members are given a NMHCCF members contact list containing email addresses and phone numbers. This list will be updated and redistributed as required. NMHCCF members are expected to use member's contact information appropriately, for NMHCCF business. This contact list is not for further distribution and NMHCCF members should be considerate of other NMHCCF members' privacy and their time zone.

11.3 Emails to NMHCCF members

Most NMHCCF communication is conducted via email. To assist NMHCCF members identify the nature and importance of emails, each should contain one of the following statements in the *Subject:* field;

- Urgent Decision
- Decision
- For Feedback / Advice / Action
- For Information

Emails referring to specific documents should contain web links where possible. Large documents for NMHCCF members' consideration will be placed in the Members Only Area of the NMHCCF website.

NMHCCF members should be considerate of internet download restrictions other NMHCCF members may have. If an email has been sent to all NMHCCF members, members are encouraged to send private replies to relevant individual(s). "Reply All" should only be used when it is appropriate to reply to the whole membership.

The Secretariat will remind NMHCCF members of this agreed policy whenever necessary.

11.4 NMHCCF website

The NMHCCF website <http://www.nmhccf.org.au> provides information about NMHCCF activities and a range of publications (including these Operating Guidelines, the Business Plan and Strategy for 2015-17, submissions, advocacy briefs and position statements). The names of NMHCCF members and contact details for the Secretariat are also available on the website as well as useful national and local links and news items.

The Secretariat will maintain the website, including the Members Area and liaise with the service providers and website designer.

11.5 Members Area

The Members Area of the website contains NMHCCF meeting papers, working group documents, forms, templates and other items for consultation or information.

Each NMHCCF member is given login details for the Members Area. The NMHCCF Secretariat can advise login details on request.

11.6 Facebook Guidelines

The NMHCCF Facebook page has been designed as a promotional tool, for use in disseminating NMHCCF information e.g. updates on relevant NMHCCF work, meeting outcomes, national events etc.

The page will be administrated by the NMHCCF secretariat. Similarly to the regular consumer and carer news updates, members should contact the secretariat with any suggested posts or content. All posts by external persons will also be moderated by the secretariat. The secretariat will check the Facebook page on a regular basis (daily-weekly during business hours, dependent on capacity), to monitor content and any messages received.

The Facebook page indicates that the NMHCCF is not a service provider, and provides links to appropriate mental health services if needed

11.7 NMHCCF Style Guide

The website and all NMHCCF publications will use the approved NMHCCF logo and Arial font size 11.

See [Appendix C](#) for the endorsed NMHCCF Style Guide.

11.8 NMHCCF media releases

Where NMHCCF activities require media attention, for example launches or comment on national policy, media releases will be drafted by the Secretariat, in consultation with the Mental Health Australia Communications team, and considered and approved by Executive Committee members, or Co-Chairs if there is limited time.

11.9 Use of NMHCCF logo

The NMHCCF logo is copyrighted and may only be used as a part of identifiable NMHCCF work. Generally, members will not have a need to use the logo. If an exceptional circumstance arises then permission and endorsement to do so from the Secretariat and the Executive will be required. This includes all or any of (and not limited to) the following:

- correspondence
- presentations
- media
- articles
- submissions
- publications
- as part of a signature block

The logo, in correct format (JPEG file) will be supplied, post endorsement, by the secretariat, for the sole purpose of the approved use. The copying of the logo from another document is not permitted under any circumstances, and further use will be in accordance with the above guidelines.

11.10 Guidelines for using electronic communication

The NMHCCF considers email as an important means of communication and recognises the importance of appropriate content and prompt replies in sharing information in a timely manner with members across the country. NMHCCF members should adhere to the following guidelines:

Writing emails

Write in a well-structured manner and use short, descriptive subjects paying particular attention to the following:

1. If you forward emails, state clearly what action you expect the recipient to take. As per 11.3 please use the following statements in the *Subject:* field;
 - a. Urgent Decision
 - b. Decision
 - c. For Feedback / Advice / Action
 - d. For Information
2. Do not send unnecessary attachments.
3. Do not overuse Reply to All.
Only use Reply to All if you really need your message to be seen by each person who received the original message.
4. Do not write emails in capitals.
5. Be careful with formatting.
Other NMHCCF members may not be able to view formatting, or might see different fonts than you had intended. When using colours, use a colour that is easy to read on the background.
6. Only forward emails related to NMHCCF work or of interest to NMHCCF members.
7. Use cc: field sparingly.
Try not to use the cc: field unless the recipient knows why they are receiving a copy of the message and if action is required.
8. Only mark emails as high priority if they really are important.
9. Avoid long sentences and take care not to send emails that are too long.
10. Do not use email to discuss confidential information. If unsure, mark the email as confidential and specifically request it not be forwarded or shared further.
11. Be sure the wording in your email does not breach the Code of Conduct.

12 Budget

All NMHCCF operational expenses are sourced from the NMHCCF budget provided by the states and territories. The salaries of the Executive Officer and Project/Administration Officer are provided by the Australian Government Department of Health through the Mental Health Australia budget (see [3 NMHCCF Secretariat and Administration Support](#)).

In principle, approval of expenses and monitoring of the NMHCCF budget lies with the Executive Committee. The Executive Officer provides advice and support to the Executive Committee to assist them in this role. The Executive Committee have a delegated authority to spend up to \$5,000 at their discretion for NMHCCF work, without consulting the whole membership. Larger expenses need endorsement from all NMHCCF members.

Under direction of the Executive Committee, the Executive Officer manages the financial business of the NMHCCF, with support from the Mental Health Australia Finance Manager.

As the auspicing body for the NMHCCF, the final authorisation of budget and expenditure lies with the Mental Health Australia CEO or their delegate.

13 Sitting Fees Policy

13.1 Sitting fees policy

Consistent with the *NMHCCF Consumer and Participation Policy - a framework for the mental health sector*

<https://nmhccf.org.au/sites/default/files/docs/consumerandcarerparticipationpolicy.pdf>, the NMHCCF demonstrates its commitment to consumer and carer participation by meeting the expenses incurred by consumer and carer representatives and remunerating them for their time.

While this policy aims to ensure full and broad participation, the NMHCCF has a limited funding base and is not in a position to provide sitting fees for members' participation in every activity.

13.2 When sitting fees will be paid

Sitting fees will be provided for formal NMHCCF activities including teleconferences, face to face meetings, and identified out of session representative activities.

13.3 When sitting fees will not be paid

Although members do a large amount of NMHCCF work by email, they cannot claim sitting fees for these email discussions and decisions. Nor can they claim for informal discussions held between NMHCCF members or with other persons who may contact them in relation to NMHCCF matters.

NMHCCF members who are involved in consultations or business external to the NMHCCF are not eligible to claim sitting fees from the NMHCCF under this policy. It is expected that functions/forums external to the NMHCCF requiring consumer and carer participation will provide appropriate sitting fees to consumer and carer representatives. In these instances, the Executive Officer will ascertain the availability of sitting fees and advise potential participants prior to their acceptance of an invitation to participate.

13.4 Budget for sitting fees

Sitting fees are drawn from the NMHCCF budget.

Any disputes over payment of sitting fees are to be discussed with the Executive Officer in the first instance, and then if not resolved presented to the Executive Committee for their determination.

13.5 Rates of Payment

Historically, sitting fees for members were remunerated according to the Australian Government Remuneration Tribunal *Remuneration and Allowances for Holders of Part Time Public Office*, Part 2.3, Table 2A Daily Fees, at the category 2 rate. The Remuneration Tribunal conducted a review in 2014 resulting in a collapsing of the three tiers of payment in 2014/15 into one single payment amount for members of unspecified committees and working groups.

As the 2014/15 sitting fee rate was lower than the rate the NMHCCF used previously, NMHCCF members agreed to freeze the NMHCCF sitting fee rate at the 2013/14 rate until the Remuneration Tribunal rate becomes equal. This only relates to payments for participating in NMHCCF meetings or NMHCCF teleconferences.

NMHCCF members will be paid an hourly rate (currently \$85.80) up to five hours. A daily rate (currently \$429) applies to work/meetings that exceed five hours.

The sitting fee for a formal meeting includes a component to cover normal preparation time, but where the Executive Committee considers the period of preparation time involved is so unusual as to warrant recognition, that period may be included as eligible for remuneration.

The sitting fee for consumers and carers who are acting in the role of Co-Chairs will be consistent with the amount set by the Remuneration Tribunal in 2013/14 for Chairpersons (currently \$115.60 per hour or \$578 per day). This is applicable only when they are acting as meeting Chairpersons and not “ordinary” members (e.g. Chairperson rates would not be paid for their participation in working group meetings, or for a NMHCCF face to face meeting day where they have no chairing role).

Disclaimer

The NMHCCF has voluntarily adopted the rates of remuneration set by the Australian Government Remuneration Tribunal in 2013/14. The ability of the NMHCCF to meet these rates is dependent on available funding, and therefore the NMHCCF reserves the right to review remuneration rates at any time.

13.6 Procedure for Receiving Payment

Application forms for sitting fees will be available at all formal NMHCCF activities, and will be forwarded to individuals eligible for sitting fees at their request. Claim forms are available from the Secretariat and in the Members Area of the NMHCCF website.

Claim forms for sitting fees must be signed and dated by the claimant and should be forwarded to the Project/Administration Officer who will process the relevant approval.

13.7 NMHCCF member responsibility

It is the responsibility of the individual eligible for sitting fees to submit a claim for sitting fees. It is not the Secretariat's responsibility to follow up with NMHCCF members regarding sitting fee forms.

14 Travel Expense Policy

14.1 Travel expense policy

The NMHCCF will endeavour to meet all reasonable travel costs associated with member attendance at NMHCCF meetings, teleconferences and any other major activity agreed by the Executive Committee.

The Project/Administration Officer will provide NMHCCF members with optimal travel arrangements within the constraints of the NMHCCF budget.

14.2 Out of pocket travel costs

All NMHCCF members will be reimbursed for all reasonable 'out of pocket travel costs' associated with their attendance at formal NMHCCF meetings such as any motor vehicle, taxi or other mode of transport expenses and parking costs.

Depending on individual circumstances and when agreed with the Executive Officer prior to travelling, the NMHCCF will reimburse petrol costs associated with the use of a NMHCCF member's personal vehicle for the purposes of attending NMHCCF meetings. Travel will be reimbursed on petrol receipts, not mileage.

Appropriate supporting documentation needs to be provided to the Project/Administration Officer before any reimbursements will be made. Examples include receipts, tickets (parking, train ticket, etc).

14.3 Airfares

Flights for NMHCCF meetings will be booked by the Project/Administration Officer and airfare costs met through the NMHCCF budget. It is the responsibility of the Project/Administration Officer to purchase the most efficient and economical tickets for NMHCCF members.

It is the responsibility of NMHCCF members to notify the Project/Administration Officer immediately if they need to make changes to their flight details.

Expenses incurred due to cancellation or changes to flights are to be met by the NMHCCF member, unless there are extenuating circumstances.

14.4 Meal allowance

Travel expenses related to meals paid by NMHCCF members will be reimbursed in accordance with the Australian Government Remuneration Tribunal determination on *Official Travel by Office Holders* for holders of Part Time Public Office <http://remtribunal.gov.au/offices/part-time-offices>.

The allowance will only include meals not already provided at the meeting / function or as part of associated travel.

Exceptions to the above rates may be made in the case where the traveller is required to dine at a specific venue with others to continue NMHCCF business discussions. Reimbursement of these costs (excluding alcohol) will only be made with the prior agreement of the Executive Committee and on receipt of supporting invoices.

Meal reimbursement is to be included on the sitting fee form. It remains the responsibility of the NMHCCF member to submit claim forms and provide necessary tax invoice receipts.

14.5 Extraordinary out of pocket expenses

Consideration will be made for NMHCCF members to be reimbursed for reasonable extraordinary out of pocket expenses, including respite care, which may be needed in order for members to be able to attend NMHCCF face to face meetings, teleconferences and other nominated activities of the NMHCCF.

Requests for reimbursement of reasonable extraordinary out of pocket expenses will be emailed to the Executive Officer.

14.6 Timeline for Payment

The Secretariat will process and pay all valid remuneration and reimbursement claims within one calendar month. NMHCCF members must submit claims within a reasonable timeframe. Claims for activities that occurred in previous financial years (excluding activities that occurred within the month before the end of the most recent financial year) will not be accepted by the Secretariat.

15 Complaints and Conflict Resolution

15.1 Principles underpinning the Complaints Procedure

The NMHCCF complaints procedure stipulates that all complaints are dealt with confidentiality, promptly and objectively both with the Executive Committee and Mental Health Australia.

Any member making a complaint has the right to have an advocate of their choice assist them during the process of making a complaint.

15.2 Complaint about another NMHCCF member

All NMHCCF members are expected to fulfil their roles and responsibilities as outlined in these Operating Guidelines and particularly in line with the Code of Conduct. If a NMHCCF member neglects their roles and responsibilities, breaches the code of conduct, or creates any other concern, the issue is to be dealt with using the below procedure.

In the first instance, the member making the complaint should try to informally resolve the issue with the NMHCCF member(s) they have the complaint with. This should occur within seven days of the incident. If possible, the discussion should take place in person (in preference to teleconference or email) in a quiet, private area. If necessary, both people can have a support person with them. The feelings of each person involved in the discussion should be respected.

If the above fails to resolve the issue or if the member making the complaint does not wish to take the above steps, then the following steps should be taken:

1. The complaint is to be put in writing to the Executive Officer. The member making the complaint will receive a written acknowledgement regarding receipt of the complaint within 3 business days of lodgement.

2. The Executive Officer will forward the complaint to the Executive Committee. If the complaint is about an Executive Committee member, the Executive Officer will seek the appointment of an agreed third party, which could include Executive Committee members not associated with the complaint.
3. Each member involved in the complaint will have an opportunity to speak to the Executive Committee or the agreed third party. The member making the complaint must provide relevant evidence (where available) to substantiate their complaint. They may also bring an advocate (support person) to this meeting.
4. Once the complaint has been investigated, the Executive Committee or agreed third party should communicate the results to both parties along with any recommendation(s) for resolving the issue(s). This needs to be done compassionately and in a trauma-informed manner.
5. Once both parties have received the above report, they then formally accept the recommendations or decide what alternative actions, if necessary, need to be taken.
6. The Executive Committee will determine appropriate sanctions, including the option of approaching the nominating body/state for the member's removal from the NMHCCF if the matter is of serious concern.
7. Feedback will be sought from both parties as to whether or not they are satisfied with the result and recommendations of the Executive Committee and/or the agreed third party.

15.3 Complaint from a member against the NMHCCF Executive Committee

If a NMHCCF member feels that an Executive Committee member is not meeting their roles and responsibilities or has breached the code of conduct, or have any other concern, the Executive Committee member's behaviour will be raised and dealt with in accordance with the NMHCCF complaints procedure as explained above.

15.4 Complaints from outside the NMHCCF

Any external complaint about the NMHCCF or a member in their role as a NMHCCF member must be forwarded to the Executive Officer, for investigation and resolution by the Executive Committee.

15.5 Feedback or complaints about Mental Health Australia

If a member of the NMHCCF has a complaint about Mental Health Australia, the process is explained in Mental Health Australia's Feedback and Complaints Policy

https://mhaustralia.org/sites/default/files/docs/mental_health_australia_feedback_and_complaints_policy.pdf.