**Minutes**

**Agenda Item 1 Welcome, apologies and conflicts of interest**

Chair welcomed members, noted apologies from Megan Fry and asked any conflicts of interest. No conflicts raised from members.

Chair acknowledged resignation from Rachael Cosgrove-White. Chair thanked Rachael for her contribution to the committee.

Acknowledgement of country offered by Brad Murphy.

**Agenda Item 2 Action Items of previous meeting**

Deputy Chair addressed action item

**2024 – 07 -** Meeting to be arranged with Ministerial staff to discuss dates for 2025 and reporting preferences – Secretariat advised due to federal election in 2025, Minister office deferred until after election. – Ongoing

Chair acknowledged Terms of Reference on the agenda noting that regular review was required and proposed the following:-

1. Terms of Reference can be sent to members electronically and members to review and return any suggestions for discussion.
2. Addition of a point for First Assistant Secretary to update NAC members on operational and strategic issues relating to Open Arms

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| ***No.*** | ***Action*** | ***Assigned to***  |
| **2025 – 01** | Terms of Reference to be sent to all members | Secretariat |
| **2025 - 02** | Members to review Terms of Reference and return suggestions for discussion | All Members |

Chair provided members with the process for how the discussion with the Minister and Secretary will proceed.

**Agenda Item 3 Minister Keogh Remarks**

Minister Keogh and DVA Secretary Frame were welcomed to the meeting by NAC Chair.

Minister Keogh thanked members for travelling to Perth and the contributions they provide to Open Arms.

Minister Keogh asked members to discuss what he should as minister know about Open Arms, spoke about legislative reform and the work done to implement recommendations of the royal commission.

Members introduced themselves to both the Minister and Secretary.

Members discussed the following topics:

* Concerns regarding departmental influences on Open Arms – ***Minister Keogh*** confirmed that funding for Open Arms will be maintained separately.
* Identifying gaps within supports for families, especially children during transition
* Importance of Open Arms and DVA feeding into the National Suicide Strategy Framework
* The need for culturally competent counsellors
* How to evolve conversations and the active role clients need to take charge of their own healing
* Defence and Open Arms are finalising the agreement for service for current serving members
* The positive feedback members have received regarding Open Arms and the services provided
* DVA needs to be aware of using culturally sensitive wording, an example was provided by member
* Praised the leadership of Open Arms and the support provided to members
* The lack of knowledge in the public regarding Open Arms and services provided
* Access to Psychiatric treatment as an inpatient is difficult without a treating psychiatrist
* Question posed: Are transitioning members doing better than they were previously, how do we know we are making a difference? – ***Minister Keogh*** advised that views have shifted over the past 3 years. With extended support and expansion of services we are seeing and experiencing a positive change.
* Question posed: What is the update on data / IT systems? – ***Minister Keogh*** advised we have a road map for what is required for DVA IT systems. Getting systems to match ambition is a struggle, but there is an awareness of required IT systems

Minister thanked members for their discussion.

**Agenda Item 4 DVA Secretary Remarks**DVA Secretary Frame thanked members for the invitation to address them and the support, advice and expertise they provide. Secretary Frame explained her role within DVA and the requirement to elevate issues to government with expertise, forethought and insight.

Secretary Frame discussed with members the Open Arms’ model of care and supported the reform work undertaken and posed areas for consideration of further reform:

* Resourcing
* Formal Review (Royal Commission Recommendation 75)
* Data sharing
* Clarity of priorities
* Should we invite submissions and / or consultations from the community
* How do we ensure the Model of Care is agile and evolving

Secretary Frame reiterated the invitation and expectation that members bring expertise and suggestions to meetings and provide these to Open Arms’ leadership.

Secretary Frame and members discussed the DVA chaplaincy program and the good outcomes received so far.
DVA is committed to the program continuing and explained the program is voluntary. Discussions were held regarding the program and chaplains being part of a multi-disciplinary team.
Members were asked where the chaplaincy program is best placed within DVA.

Secretary Frame confirmed that Open Arms will remain Open Arms including their own branding and funding. However Open Arms will move groups within DVA to the Veteran Family and Stakeholder group to be better aligned with services already in DVA such as Veteran Access Network (VAN) and On Base Advisory Service (OBAS). There will be no changes to the Open Arms NAC.

Secretary Frame explained the issues relating to DVA having an unknown number on outbound telephone calls. DVA has a contract with Optus through Services Australia which does not allow DVA to have a designated outbound telephone number. DVA leadership along with Services Australia are investigating this issue.

Members raised the following items with Secretary Frame;

* People don’t have time to invest in Mental Health, use tools, apps etc as an alternative to long episodes of care
* How do we get services to clients in regional locations
* Need to communicate better with stakeholders – ***Secretary Frame*** advised we need to ensure the load is lifted from veterans and providers, use your touch points into the department and ensure veterans get the information required without the burden.
* Promoting DVA services especially Open Arms should be vital to all
* Appetite to change has to come from inside DVA and in large supporting the leadership of Open Arms more.

Secretary Frame thanked members for their contributions to the discussion.

**Agenda Item 5 Deputy Secretary Remarks**

Deputy Secretary Kefford advised members that the department is starting the year in a clearer and stronger position than we ended last year.

 Deputy Secretary Kefford updated members on the following items:

* The veteran wellbeing agency is a referral point but not the core of the delivery function of the department, it is an addition to, not the replacement for Open Arms
* Prime Minister and cabinet have stood up the Royal Commission task force
* Professional bodies for advocates are commencing,
* The veteran harmonisation bill has bipartisan support, new legislation will be in effect as of 1 July 2026
* No decline in claims, the backlog of unallocated initial liability claims is nil at present, there are 80,000 claims to be determined. As claims move through the DVA client pathway journey it adds pressure to other service delivery areas
* There has been $12.5 billion added to benefits available to veterans
* Outreach program counsellor superannuation payments
* Open Arms has had substantial growth in the workforce, the composition has changed overtime as part of the labour higher to non-ongoing contract process. With Australian Public Service legislation Open Arms is unable to employ non ongoing staff for longer than 18 months and the staff cannot be converted back to labour hire
* Open Arms will always have a blended workforce comprising of ongoing, non-ongoing and labour hire staff
* DVA have received approval from government to offer peers, clinicians and administration staff with contracts expiring in March and April ongoing roles
* DVA is not subject to a hiring freeze we, as with all government departments are to work within constraints regarding budget and size of the department

Deputy Secretary Kefford advised members that he would stay engaged with NAC members until the transition of reporting lines of Open Arms into the new group concluded

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| ***No.*** | ***Action*** | ***Assigned to***  |
| **2025 – 03** | Provide members and update figure on outstanding claims  | Deputy Secretary Policy & Programs via Secretariat |

First Assistant Secretary Nowland provided members with an update regarding the Open Arms client assist contact centre. Client assist is expanding across the country for better management of shift work, expanding phone capability and occupational health and safety issues.

Open Arms is researching an online self-referral process and advised members the peak period for calls into the call centre is 11:00 AM on Tuesdays.

Member posed the following question;

There is a shortage of psychiatrists available to veterans yet DVA requires a diagnosis from a psychiatrist for certain mental health conditions. United Kingdom DVA accept a diagnosis from a clinical psychologist will DVA Australia change the requirement from a psychiatrist to a clinical psychologist? - ***Chief Health Officer*** advised this is under consideration and has taken on notice.

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| ***No.*** | ***Action*** | ***Assigned to***  |
| **2025 – 04** | Provide Commissions advice regarding diagnosis requirements | Chief Health Officer via Secretariat |

**Agenda Item 6 First Assistant Secretary Update**

Held over until day 2

**Agenda Item 7 Defence and Veteran Mental Health & Wellbeing Strategy** Brigadier Langford presented to members on the Defence and Veteran Mental Health and Wellbeing Strategy.

The cultural change in Defence and DVA is emphasised by both department's working together to be more transparent. Wellbeing is now putting the person first and foremost.

See attached presentation

**Agenda Item 8 Regional Update**

Regional Director WA provided members an update on the geographical structure of staff within the region, the number of intakes processed by local staff, the office locations and requirement for further expansion, local group programmes and the peers visiting the for local prisons.

**Agenda Item 9 Lived Experience – Personal Account**

Assistant Director provided a personal account of their experience in the military and how those experiences have assisted with their role in Open Arms as a peer worker

Chair thanked members for their contributions throughout the day and closed day 1.

**DAY 2.**

**Agenda Item 1**

Chair welcomed members to day 2 and recap was provided, topics included:

1. **Minister Update**
2. **DVA Secretary Update**
3. **Deputy Secretary Update**
4. **Defence & Veteran Mental Health & Wellbeing Strategy**
5. **Regional update**

Chair noted change to agenda order to accommodate members’ travel.

**Agenda Item 2 The Model of Care – Clarification of the Policy re Limitations on Counselling Services**

Member provided feedback regarding the Open Arms episodic nature of the model of care, feedback included language aspect and terminology used was not easy to read for clients.

Member was advised that a frequently asked questions document has been drafted regarding the model of care and is currently in the clearance process. Members discussed how to socialise the document including social media, ESORT and the possibility of creating videos.

Clarification was provided on the requirement for written consent to provide services to be completed every 12 months and streamlined intake processes for clients representing within 6 months of ending a previous episode of care.

Brief discussion was held regarding Rehabilitation Providers both as part of a multidisciplinary team and in the wellbeing agency.
Consideration for rehabilitation providers to be on the agenda for the next meeting.

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| ***No.*** | ***Action*** | ***Assigned to***  |
| **2025 – 05** | Provide members with frequently asked questions document | Senior Director – Clinical Governance via Secretariat |
| **2025 – 06** | Create one page document to explain the Model of Care | Senior Director – Clinical Governance via Secretariat |

**Agenda Item 3 First Assistant Secretary Update**

First Assistant Secretary Nowland provided members an update, including that the number of clients over the past year has decreased by 2% whereas the number of sessions accessed by clients have increased.

The outcome measures able to be assessed by Open Arms are small due to the low level of compliance by clinicians. Members acknowledge that data is only as good as what is collected and is able to be used.

Member identified a barrier to completing Open Arms forms is the requirement to print, complete, scan and email or post back to Open Arms. One recommendation was to have an online version of forms where clinicians can send a link to clients via telephone. Second recommendation was to also acknowledge clinicians who have a high compliance of completed outcome measures and reports. First Assistant Nowland advised members that measures were being reviewed for use in family and relationship counselling.

Members were updated on the following items:

* Southern QLD region split
* Mandatory reporting for example security risk, deployability and reporting to ADF, GP or police
* Review and update to group programmes
* Psychiatric referrals
* Outreach programme counsellor superannuation
* Digital mental health strategy
* Accreditation against mental health standards
* Lived experience framework

**Agenda Item 4 Eligibility for ex partners**Member provided information regarding research project through Flinders university regarding partners of domestic violence

Question raised by member was regarding eligibility for a partner who is no longer co-parenting and has been separated longer than five years. Eligibility criteria was discussed and process explained regarding other eligibility and additional services which may be available.

**Agenda Item 5 Other Business**

First Assistant Secretary Nowland presented Chair Dr Andrew Khoo a certificate to recognise ten years of service to the National Advisory Committee

Member asked what happens if government changes at the federal election in 2025, advice provided was that appointments of members are until 31st of December 2025 and membership should not change but meetings may slow if a new government is elected.

Next meeting to be held 30th and 31st of July 2025 in location to be determined.

**Agenda Item 6 Final Comments**

Chair provided a summary of topics from meeting.

Thanked members for their contributions and wished everyone safe travels home.

**Meeting closed: 10:48 am**.

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| **Members**  |
| Dr Andrew Khoo | Chair |
| Ms Karen Bird  | Deputy Chair |
| Dr Richard Magtengaard  | Psychiatrist |
| Dr Brad Murphy | General Practitioner |
| Mr Max Ball  | Vietnam Veterans Association of Australia |
| Ms Lidia Hall | Lived Experience Family Member |
| Ms Jane Pool | Social Worker |
| Mr Dave Farrell (Virtual)  | Contemporary Veteran |
|  | Contemporary Veteran |
| **Ex-Officio Members** |  |
| Ms Leonie Nowland  | First Assistant Secretary, Open Arms |
| Dr Jon Lane | A/g Chief Psychiatrist, Department of Veterans’ Affairs |
| Dr Jenny Firman | Chief Health Officer, Department of Veterans’ Affairs |
| Ms Gwen Cherne  | Veteran Family Advocate  |
| BRIG Caitlin Langford  | Director General Mental Health and Wellbeing, Defence People Group |
| Ms Libby Cremen | Director General, Defence Members and Families Support |
| **Apologies** |  |
| Ms Megan Fry | Psychologist |
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| **Invited Guests** |  |
| The Hon. Matt Keogh | Minister for Veterans’ Affairs |
| Ms Alison Frame  | Secretary, Department of Veterans’ Affairs |
| Mr Andrew Kefford | Deputy Secretary, Policy & Programs Group DVA |
| Mr Michael Burvill | Assistant Secretary, Clinical Operations – Open Arms |
| Mr Ben Dalton (Virtual) | Assistant Secretary, Business Operations – Open Arms |
| Ms Brook Shearer | Senior Director, Clinical Governance and Programs – Open Arms |
| Mr Bucky Toller (Virtual) | Assistant Director, Strategic Communications – Open Arms |
| **Secretariat** |  |
| Ms Karen Humphreys | Executive Officer – Open Arms |
| Mr David Fedson | Assistant Director, Program & Insights – Open Arms |