## Mental Health governance.

Like many health and allied health practitioners I know that AHPRA, the HCCC and the Psych board need independent reviews urgently.

While oversight is important, what is more important is the methodology of these bodies which has proven to be non-evidence based, unscientific and reviews are conducted with confirmation bias in many cases.

## Structure

There is a problem with the structure of the review process which lacks natural justice and due process towards practitioners. 16 health care practitioners have died by suicide between 2018 and 2021 while under performance review. It is inherently biased with no investigation of the complainant and no attempt to verify the facts of their complaint, thus vexatious complaints go unchallenged.

## Lack of Diversity

AHPRA, HCCC and Psych board are majority white and middle class. There is no new blood. The oversight needs to better reflect the profile of the Australian population. 48% of Australians are either foreign born or have one parent who is foreign born. I think that socio economic status is vital to capture the nature of how mental health is practiced within diverse and regional groups. It seems that the same narrow set of names appear in various oversight roles, no doubt reappointing colleagues and friends to controlling positions within the mental health system. This has degenerated into a cult of personality. This has led to poor self-reflection and introspection into their own triggers, motives and drives.

## Lack of Support

The oversight bodies in mental health have a top-down command control versus a consultative/educational approach. This top-down approach requires copious amounts of records keeping and can use intimidatory approaches to performance reviews. Practitioners have no advocacy or support and live in constant fear of their clients (a frequently volatile and distressed population) lashing out and weaponizing the complaints process. There are so many rules and competencies laid down each year that no practitioner could possibly be able to flawlessly integrate them into their practice. These competencies are not operationalised and thus there is a broad scope of interpretation. This enables oversight to define these competencies to suit their own needs.