

TIME FOR **CHANGE** Te Hurihanga

.....
Year in Review
2022 Report
.....

December 2022

Te Whatu Ora
Health New Zealand
Southern

1. Mihi

E tū ake nei tō tātou whare whakahirahira
Ko Ranginui e tū ake nei hei tuanui
Ko Papatūānuku e takoto nei hei whāriki
Ko te reo me ngā tikanga hei tāhuhu
Ko te Iwi hei poutokomanawa
E tū e te whare e!
Hei whakairi i ō tātou wawata, ō tātou tūmanako,
ō tātou moemoeā!

There stands our house in all its grandeur
The sky is its roof
The earth is its carpet
Our language and culture is its ridge pole
And the people stand at its centre
Stand erect!
So that you may house our hope and dreams within!



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2. Chair and Executive Director's forward

Tēnā koutou,

“. a significant reframing of the mental health and addiction system that is person, whānau and community centred... embraces a modern, primary, and community-oriented system that not only harnesses the resources of people, their families and whānau but the skills of the entire workforce, whether they be peer workers, support workers or clinical staff. And a system that supports people to work together... as one system.”

The vision above is adopted from **Time for Change – Te Hurihanga**. It is our vision for the future of the Southern mental health and addiction system based on what many people told the reviewers during the independent review process in 2021. Southern people care deeply about mental health and addiction issues. More than 500 people were spoken to directly during the **Time for Change – Te Hurihanga** review process and written feedback was received from over 750 people with lived experience, whānau, carers and many others. The desire for change was strong and frustration with lack of change high, a strong level of emotion and sense of despair was very evident.

We are so pleased to now be ten months into the programme that continues to make practical changes to transition our current mental health and addictions system to a new future as told to us by our communities and tangata whaiora (those seeking wellbeing). The direction is set for our mental health and addiction services to work within communities, to help people develop their own capability to live well, and to deliver services in culturally responsive ways to meet the needs and priorities of local communities.

There are many people who have been, continue to be, and will be, involved in the changes needed to bring us ever closer to realising the **Time for Change – Te Hurihanga** vision. In particular we

wish to acknowledge the time and commitment of the Mental Health and Addictions Networks, the workforce, tangata whaiora (those seeking wellbeing) and whānau. We have all been living through extraordinary times due to the pandemic and its ongoing impacts. Thank you for all that you do to support mental health and wellbeing. Together we can make the changes needed to develop a more community oriented, engaged and integrated health system.

He aha te mea nui o te ao? He tāngata, he tāngata, he tāngata

What is the most important thing in the world? It is the people, it is the people, it is the people

Toni Gutschlag

Executive Director Mental Health, Addictions & Intellectual Disability
Te Whatu Ora

Nancy Todd

Interim Chief Māori Health Strategy & Improvement Officer
Te Aka Whai Ora

3. Introduction

The purpose of this report is to review what has been achieved, what is planned over the next months, and what we have learnt along the way. The programme team tasked with undertaking the various projects in the programme plan is now fully established and the names and roles are provided in Section 5 below.

Time for Change – Te Hurihanga was intended to be a year-long mental health and addictions programme to address health, equity, location, social and systemic issues, and put people at the centre of care. The programme has now been extended by four months to enable us to catch up following inevitable delays due to COVID-19 and ongoing sickness in the community. The programme will now end June 2023.

The programme was established after a comprehensive independent review in 2021 (the review report is titled **Time for Change – Te Hurihanga**) confirmed the mental health system was fragmented, overloaded, complicated and difficult for some people to navigate and access. It highlighted an uneven, inequitable distribution of resources across the district and a number of urgent issues that includes:

- Māori is significantly disadvantaged within the health system due to under investment in kaupapa Māori health and social services, limited Māori workforce capacity, fragmentation of hospital services
- Limited crisis options in some areas and a lack of local support options
- Lack of AOD (alcohol and other drug) addiction services
- Limited access to specialist advice and support from senior medical officers for mental health providers
- Some settings and facilities well past use-by-date
- Lack of peer support services for child, youth and whānau wellbeing.

The projects we are working on aim to further engage with communities, provide appropriate and affordable access and quality of care for all who receive services and address gaps in the community support system. These projects range from supporting 'by Māori for Māori' investment in mental health and addiction services, increasing local crisis support options and expanding AOD (alcohol and other drug services) to developing peer-led wellbeing centres.

Many of the projects include a collaborative design process to ensure there is cross-sector support and that appropriate community solutions can be developed closer to home, based on the needs of people with lived experience and whānau.

We want to acknowledge the Ministry of Health and Te Whatu Ora for its support and resourcing which is helping enable these collaborative design processes.

4. A roadmap for change

What has happened in the first ten months?

The key focus for the first ten months of the programme was completing the six steps for short term action identified in the Time for Change - Te Hurihanga report. Momentum grew as the Programme Team was established and tools were developed to ensure good processes. How the six steps were achieved was as important (and possibly more so) as the action itself. Time has been taken to develop and strengthen relationships and engagement across communities, Iwi, hapu and Māori communities and organisations. This included establishing groups to support the programme of work such as the Time for Change - Te Hurihanga Leadership Group¹, Time for Change - Te Hurihanga Cross Sector Group², and the Mental Health and Addiction Inter-Government Agency Group³, and working closely to support existing groups such as the Mental Health and Addictions Networks⁴. This level of engagement has been vital to building trust, strengthening relationships and supporting authentic change processes, and sustainable relationships into the future. Principles for investment were agreed by the Cross Sector Group at its workshop 25 February 2022 and guide our programme for change (Appendix 1). The following summarises our progress in terms of relationship building and project work. It also outlines future actions and reflections on what we have learnt so far.

SCOPE BY MĀORI FOR MĀORI INVESTMENT- AGREE THE INVESTMENT AND PROCESS IN PARTNERSHIP

Progress:

\$1m of the \$7m Time for Change – Te Hurihanga budget has been ring fenced for Kaupapa Māori services. Te Aka Whai Ora are leading a process of engagement with Iwi on priorities for this investment, supported by Te Whatu Ora.

Next steps:

Engagement/kaupapa korero with Iwi, Māori providers and wider Māori community.

Learnings:

Partnership is not an identity, it is a process and a practice. We will continue to challenge ourselves to ensure our processes and practice reflect a true partnership with Iwi.

SIGNAL THE CURRENT NETWORK LEADERSHIP GROUP (NLG) WILL BE DISESTABLISHED AND A NEW CROSS-SECTOR GROUP CREATED

Progress:

NLG has been disestablished. A Cross Sector Group was established and meets six-weekly. The purpose of this group is to be an advisory and communication network and to help maintain inter-organisational connections.

Learnings:

There is a lot of interest in mental health and addiction service developments across the Southern district. It has been important to support engagement and connection through a range of forums.

¹ The Governance group for the programme

² A representative reference group of Maori, consumers, providers, NGOs, and clinicians

³ A representative group of persons from Government agencies who provide services to tangata whaiora

⁴ Community forum for networking, advocacy and identifying and pursuing opportunities at a local level

COMMISSION EXTERNAL SUPPORT TO DELIVER ORGANISATIONAL DEVELOPMENT PROGRAMME

Progress:

Leadership Lab has been engaged, and a programme is underway with the Mental Health, Addictions and Intellectual Disability directorate (MHAIDS) to support cultural change and strengthen leadership. MHAIDS provide specialist services and was previously known as the Southern DHB MHAIDS.

Learnings:

MHAIDS has an extremely lean leadership structure which has constrained service development over the years and probably impacted on retention and job satisfaction. New clinical leadership roles are being established to address this.



Central Lakes Family Services Clinical Manager Fiona Young and General Manager Tina Mongston

INCREASE CRISIS SUPPORT OPTIONS TO SUPPORT THE QUEENSTOWN AND CENTRAL LAKES AND WAITAKI REGIONS

Progress:

Queenstown and Central Lakes: Completed. A codesign process was used to develop a model of care, engaging with clinicians, unions, NGO providers and many stakeholders across the community. The service was expected to be operational by the end of 2022 but has been delayed due to challenges with sickness and staffing. It will be commencing in early 2023 and will be provided by Central Lakes Family Services. Read more here.

"Since we began operating in 1992, we've adapted and grown our services to meet the changing needs of our local communities so offering a mental health support service feels like a natural expansion. We all care deeply about our communities and feel honoured to have the opportunity to help more people in their time of need."

Tina Mongston, General Manager of Central Lakes Family Services

Next steps:

Waitaki: A co-design process has been undertaken and the model of care is being developed. This will be further discussed with the community in early 2023. The information gathered will be used to secure an appropriate service provider.

Learnings:

The importance of engagement and tailoring and timing of engagement processes. The service models developed for crisis support are unique and designed by people in the Queenstown and Central Lakes and the Waitaki areas. The engagement process was flexible and enabled people to contribute in a range of ways – groups, individuals, and online.

SIGNAL EVENTUAL CLOSURE OF WARD 11. ESTABLISH PROJECT TO SUPPORT THE TRANSITION OF CLIENTS TO NEW SERVICES

Progress:

The review recognised that people were living in the long stay inpatient service because of a lack of appropriate community services. The eventual closure was signalled earlier this year and a project lead was engaged to commence the transition planning. Regular engagement is occurring with tangata whaiora, whānau and staff. Comcare Trust was announced as the new provider in December 2022 and will provide flexible, intensive community housing and support services. Comcare and Te Whatu Ora will work collaboratively and the first patients are expected to transition to a home of their own by April 2023. The entire transition process will be carefully planned and at this stage it is anticipated to take up to 18 months to complete. Read more here

"We are really looking forward to bringing our skills and experience to assist whaiora in the Southern region. We have long-standing relationships with many mental health and addictions and housing organisations and look forward to working alongside colleagues in the region."

Martin Cole, Chief Executive Officer for Comcare Trust

Next steps:

Work collaboratively with Comcare on engagement with whaiora/patients and whānau and planning for the transition out of hospital.

Learnings:

We are mindful that effective, regular communication and engagement with key stakeholders is critical. We continue to work hard on providing effective, timely and accurate information to ensure everyone with an interest has access to this.

Other recommendations progressed:

Other recommendations from the Time for Change - Te Hurihanga Review, and from MHAIDS, have also been progressed over the last ten months. These are summarised below:

EXPANSION OF ALCOHOL AND DRUG SERVICES IN DUNEDIN

Progress:

Completed: Completed: Community based alcohol and drugs services in Otago have expanded with an innovative new service provided by Te Kāika announced in October 2022. The contract funds an additional seven full time equivalent (FTE) staff, and includes wānanga, whānau ora approaches, therapeutic interventions and peer support all delivered within a Māori framework. It is available to all adults with moderate to severe and/or complex addiction issues, with a specific focus on connecting with Māori. The new service has been launched in a phased approach and is expected to be operational by the February 2023. Read more here.

"We are excited about providing new services and extending on our current ecosystem and infrastructure of Te Kāika."

Matt Matahaere, Chief Executive Officer for Te Kāika



Kylie McKay, Relationship Manager Southern District, Te Whatu Ora and Matt Matahaere, Te Kāika Chief Executive Officer

INCREASE CRISIS SUPPORT SERVICES, DUNEDIN

Progress:

Completed: A new five bed mental health crisis respite care home opened in Dunedin in September 2022 significantly increasing the city's capacity for emergency respite care. Dunedin has historically had a one-bed unit available for emergency respite care so the capacity expansion is addressing a long-standing service gap.

The service is run by Pact whose dedicated team of clinical staff and trained mental health support workers are providing adults experiencing acute mental distress with 24-hour residential support. Read more here.

"We anticipate it will help a number of people who otherwise might have been admitted or sent home to access short term support with clinical oversight in collaboration with Te Whatu Ora Southern mental health teams and the Emergency Psychiatric service."

Pact General Manager Thomas Cardy



EXPANSION OF DRUG AND ALCOHOL SERVICES FOR SOUTHLAND

Progress:

The need for expansion of community-based methamphetamine treatment and support services in Southland came out of the **Time for Change - Te Hurihanga** review. This is supported by Police data indicating a spike in methamphetamine use from mid-2021, with wastewater testing from October - December 2021 showing 81% methamphetamine content in Southland. This new capacity will enable the health system to be more responsive to community needs.

Next steps:

A process to enhance the alcohol and drug services in Southland will be undertaken in early 2023.

GROWING, DEVELOPING AND SUPPORTING THE CONSUMER, PEER SUPPORT, AND LIVED EXPERIENCE (CPSLE) WORKFORCE

Progress:

Stakeholders gave a very strong message through the **Te Hurihanga - Time for Change** process that they wanted to be able to access peer support. The workforce needs to be developed to enable this to happen and a co-design process is in progress to develop a CPSLE Workforce Development Action Plan.

"Clinical and lived experience can work well together, but its not the normal yet. Its extraordinary. We need to make it ordinary."

"Its not a clinical connection, Its a whakapapa connection."

Next steps:

Finalise the plan and start the process to secure a provider for provision of education/training services to develop the Southern CPSLE workforce.

IMPLEMENT PEER LED SERVICE IN AT LEAST ONE LOCATION

Progress:

A co-design process is in progress to develop a model of care for peer-led services in Southern.

“When we think about peer support it is in that holistic framework its part of all aspects of their life. Discovering new ways of thinking and reframing things.”

“It needs to be welcoming and accessible and to have a holistic view.”

Next steps:

Finalise the model of care and start the process to secure a provider in one or two locations.

CHILD AND YOUTH WELLBEING

Progress:

Te Hurihanga - Time for Change identified that existing infant, child and youth MH&A services are not able to respond to the increase in demand for services in their district. A co-design process for enhanced child and youth services is underway in Ōtākau and also in Waitaki.

Next steps:

The co-design workshops are scheduled for early 2023.

Activities which support the programme

The programme has also undertaken activities to support the various pieces of work, and sustain change and continuous improvement in the future. These are summarised as follow:

COMMUNICATION AND ENGAGEMENT

Progress:

A range of communication and engagement channels have been employed to regularly share information and seek feedback with key stakeholders and the wider public. These include regular in-person/online meetings, a dedicated web hub, newsletters, social media, and media opportunities.

ALIGNMENT WITH TE WAIPOUNAMU ALCOHOL AND DRUG NETWORK

Progress:

Underway: Participation in the South Island regional group to develop recommendations for Alcohol and Drug services across the region. Scheduled to take three months to complete. Discussions and findings will contribute to regional as well as local planning.

Next steps:

Contribute to, and participate in, the working group - a small group of system experts that can bring a wider range of perspectives to the discussion through engagement with their networks.

The purpose of the Working Group is to develop recommendations to strengthen Te Waipounamu AOD System so there is equitable access to information resources, services and supports for people who need them.

The scope includes local and regional responses to people with alcohol and drug issues including:

- Streamlining access with a ‘no wait’ philosophy
- Provision of consistent information, resources, services and support regardless of location
- Direct access pathways to Kaupapa Māori services
- Increased peer support, alongside and/or instead of clinical services
- Pathways for whānau
- Episodic treatment services available as part of a longer package of care
- More flexible use of residential capacity – respite, supported living etc.

Looking forward to the next six months

The Roadmap for the next six months outlines actions including:

INVEST IN TARGETED CRISIS SUPPORT OPTIONS IN THE WAITAKI REGIONS.

Plan:

Secure a new provider, support the transition to the delivery of the service, and commence a project to monitor progress and outcomes.

PROVISION OF SHORT TERM RESPITE IN A NEW FACILITY

Plan:

This is the second stage of implementation of the crisis support service in the Central Lakes region.

CO-DESIGN THE EVALUATION TOOL OF THE CRISIS SUPPORT SERVICE IN CENTRAL LAKES

Plan:

Monitor outcomes and integration of the new Central Lakes Crisis Response system as it is implemented to measure the outcomes and refine the new model of care with a focus on equity for Māori and rural tangata whaiora, and their experience of the new model of care as well as stakeholder integration.

A workshop to be scheduled for early 2023.

BEGIN THE IMPLEMENTATION OF PEER-LED SUPPORT SERVICES IN AT LEAST ONE SITE

Plan:

Begin the process in early 2023 to identify a provider(s) with implementation by June 2023.

GROW, DEVELOP AND SUPPORT THE CONSUMER, PEER SUPPORT AND LIVED EXPERIENCE (CPSLE) WORKFORCE

Plan:

Engage external contractors for education and training programmes for peer workforce.

BEGIN IMPLEMENTATION OF FIRST BY MĀORI FOR MĀORI INVESTMENT.

Plan:

A first draft Investment Framework has been completed. This will be further developed with wider consultation, and submitted for approval to the appropriate bodies.

“Some people don't want to go to clinical spaces for appointments because they don't feel space. They need a space where they can go to get support and where clinicians can go to them.”

Quote from stakeholder

5. Programme Team

There are eight people currently employed in the Programme Team. The roles are mostly part-time, with the exception of the Programme Manager and Pou Tataki – Project Manager.

Adell Cox, Pūkenga Kaupapa, Clinical Lead

Bronwyn Billingham, Pūkenga Kaupapa, Clinical Lead

Chris Crane, Kaiwhakahaere Te Hurihanga, Programme Manager

Daniel Tawaroa, Pou Tataki - Project Manager

Gemma Griffin, Pūkenga Kaupapa, Project Manager, with lived experience

Jenni Topliss, Pūkenga Kaupapa, Clinical Lead

Michelle Barron, Kaiwhakahaere Tari, Management Administrator

Virginia Irving, Pūkenga Kaupapa, Project Manager

Melissa Garry, Senior Communications Advisor

“One of the most powerful things you can do is ask - how was that for you?”

Quote from stakeholder

6. Experts and advisors

Leadership Group

Purpose

The MH&A Change Leadership Group has been brought together to initiate and lead the MH&A Time for Change – Te Hurihanga Programme, engaging in a collaborative way with all parties in the Southern Mental Health and Addiction System. It is a decision-making group, to lead and deliver the MH&A Change Programme and make recommendations through the Executive to the Southern District Health Board (SDHB) (Te Whatu Ora (Health NZ) from July 2022).

Membership

Clive Bensemann (Chair), Clinical Lead, Mental Health and Addiction quality improvement programme

Andrew Swanson-Dobbs, CEO, WellSouth

Donna Matahaere-Atariki, previous Iwi Governance Committee co-chair

Emma Hunter, National Consumer Advisor, Salvation Army

John MacDonald, Chair, Mental Health and Addictions Networks

Nancy Todd, Interim Chief Māori Health Strategy and Improvement Officer

Steve Bayne, General Manager, MHAIDS

Thomas Cardy, General Manager, PACT Group

Toni Gutschlag, Executive Director, MHAIDS

Toni Huls, Lived Experience Advocate

Southern Mental Health and Addictions (MH&A) Cross Sector Group

Purpose

The Southern MH&A Cross Sector Group is an advice and communication network. Members are expected to engage with their networks to share, disseminate and incorporate feedback to the change processes led by the project team.

Membership

Adell Cox, Director of Allied Health, MHAID

Barb Long, CEO, Corstorphine Baptist Community Trust

Carol Atmore, CMO, WellSouth

Chris Crane, Programme Manager

Clare Curran, Chair, Mental Health and Addictions Network, Ōtākou

Damion Rangitutia, Police

David Ihimaera, Regional Mahana Southern Mental Health and Addiction Manager – Nga Kete Matauranga Pounamu Charitable Trust

David Murray, Director of Strategies and Operations, Ashburn Clinic

Deb Fraser, Deputy Chair, Mental Health and Addictions Network, Ōtākou

Emma Hunter, Salvation Army

Evan Mason, Medical Director, MHAIDs

Fiona Fairbairn, Consumer representative

Mel Green, Nursing Director MHAIDS

Helen Algar, Chair, Mental Health and Addictions Network, Waitaki

Jenny Munro, Senior Practitioner, Otago Youth Wellness Trust

John MacDonald, Chair, Mental Health and Addictions Network, Central Lakes

Maya Fier, Youth Consumer

Paul Hooper, Oranga Tamariki

Ruth Manning, SDHB / Director of Area Mental Health Services

Sally Kirk, Future Directions Southland

Selina Elkington, Iwi representative - Programme Lead Trauma Informed Training, Tiaki Taoka Otakou

Steve Bayne, General Manager, MHAIDs

Tash Squire, Consumer representative

Thomas Cardy, General Manager, Pact Group

Toni Gutschlag, Executive Director, MHAIDs

Toni Huls, Lived Experience Advocate

Tracey Kubala, MSD

Tracey Potiki, Kaiwhakahaere for Te Rau Ora, on the panel of Te Wharetukutuku.

Mental Health and Addictions Networks

The Southern region has four Mental Health and Addictions (MH&A) Networks, as below:

Waitaki MH&A Network (Waitaki district). The Chair is Helen Algar.

Central Lakes MH&A Network (Queenstown Lakes and Central Otago districts combined). The Chair is John MacDonald.

Ōtākou MH&A Network (Dunedin City and Clutha). The Chair is Clare Curran.

Future Directions MH&A Network (Southland, Invercargill City and Gore). The Co-Chair is Sheree Gutsell (elections for co-chair(s) underway).

Each Network links to mental health and addictions providers and stakeholders that advocate for and improve equity of access, quality of service provision, and pathways to wellbeing for everyone in their area.

Consumer Advocates, Consumer Representatives

Becky Payne, Youth representative

Emma Hunter, Consumer representative

Fiona Fairbairn, Consumer representative

Maya Fier, Youth Consumer

Tash Squire, Consumer representative

Toni Huls, Lived Experience Advocate

Participation is also acknowledged and appreciated from various Community Groups, whānau and affected others, and people with lived experience.

7. Appendix 1

Principles

The following principles for investment were agreed by the Cross Sector Group at its workshop 25 February 2022 and guide our programme for change:

Principles of reinvestment

1. The changes will reduce inequity
2. Enable greater numbers of people to be supported
3. Are no less effective (or may be more effective) than other service models
4. Enable earlier intervention
5. Will not disadvantage those with severe and complex needs
6. Are in keeping with the Time for Change – Te Hurihanga report and recommendations.

Te Whatu Ora

Health New Zealand

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