Te Whatu Ora Health New Zealand

Southern

Peer-support services FAQs

Invercargill

1. Who is the new provider for peer-led services in Invercargill?

Te Whatu Ora Southern has selected Mind and Body to be the provider of a new peer-led service in Invercargill.

Mind and Body is an established peer support organisation providing community-based peer-led services and support in Tāmaki Makaurau/Auckland, Te Whanganui-a-Tara/Wellington, and Ōtautahi/Christchurch, as well as nationally via phone through the 1737 helpline. They been an integral part of leading the national development, delivery, and growth of the peer workforce, particularly in the secondary mental health and addiction space, for 25 years.

2. What services will Mind and Body offer?

Mind and Body will provide peer support through a Whānau Ora approach, where an individual engages with the service, and their needs and aspirations are seen and addressed within the context of their whānau as a whole – where that is what the individual wants.

This means that, through the processes of mihi whakatau/pōwhiri and whakawhanaungatanga, guided by Te Whare Tapa Wha as a base, the peer worker will explore with the peer who they identify as their whānau; what roles and impacts these relationships may have in the peer's life, on their strengths and resources, and in their hopes and aspirations for the future.

This exploration may lead to whānau members being involved in aspects of the support the peer gains from the service and it may not; that decision is the peers to make. It is an ongoing kōrero between the peer and the peer worker.

The exploration may also lead to whānau members being signposted to other services where they need support for themselves. The peer support services provided will be aligned with national and local strategy for peer support services. Peer support will be offered individually, in groups and to any person with mental health and/or addiction challenges. The service will focus on supporting people aged 16 and above.

3. When will the service start?

The setting up of the service will be phased, starting in September 2023, with the service expected to be fully operational by early 2024.

4. What hours will the service be available?

The new service will provide peer support to people experiencing mental health and/or addiction challenges between the hours of 8am and 8pm, Monday to Saturday. Should peers and whānau require support outside of these hours, they will be directed to the 1737 phoneline.

5. How can people access the service?

People are able to self-refer, drop-in, contact Mind and Body by phone/text/email/online or be referred by another service.

Alongside the central hub, peer support workers will provide outreach support delivering services in locations of choice for peers and their whānau. Where peers and whānau live more rurally and cannot get to see peer support workers face to face, they will be invited to connect virtually, including to participate in group programmes.

6. How will the service fit in with other mental health services already available?

Mind and Body will work collaboratively with clinical and other services to ensure wraparound support for peers.

7. Who is a peer?

A peer means someone who has experienced mental health and/or addiction challenges. In peer support services the person accessing the service and the peer support worker may both be referred to as peers.

8. What is peer-support?

A peer support worker walks alongside a person experiencing mental health and/or addiction challenges. They share the knowledge and skills they have gained from their own experience of distress and from their peer support training. In peer support both people learn from each other. Peer support is based on key principles including respect, mutuality, choice, and hope.

9. Why are peer-support services being developed in Southern?

The need to develop more peer support services was identified in the national mental health inquiry, <u>He Ara Oranga.</u>, and stakeholders gave a very strong message through the 2021 <u>Te Hurihanga – Time for Change</u> review that they wanted to be able to access peer support.

10. How does this align with what national documents say about peersupport?

The development of peer- support services align with national documents including:

He Ara Oranga : Report of the Government Inquiry into Mental Health and Addiction 2018

<u>Kia Manawanui Aotearoa – Long-term pathway to mental wellbeing</u> (health.govt.nz)

He Ara Āwhina (Pathways to Support) framework

11. How are peer-support services being developed?

A model of care for peer-support services has been produced through a codesign process involving people with lived experience and our community. The co-design process was led by the Pūkenga Kaupapa, Project Manager, with lived experience.

A "model of care" is a way of describing what type of services we need, and how they should work.

The model of care was based on feedback from eleven workshops, written submissions, background papers and a literature review. Each workshop was cofacilitated by a facilitator with lived experience and a Māori facilitator with cultural expertise. The model is what our community has told us they want and need for peer-support services in Southern.

12. What does people with lived experience mean?

This means people with personal lived experience of mental health and/or addiction challenges.

13. What is the model of care?

The model of care can be read <u>here.</u>

The model of care for peer-governed and peer-led services sets out:

• The principles and values that peer-governed and peer-led services need to be based on.

- The objectives that peer-governed and peer-led services need to be working towards
- How peer-governed and peer-led organisations must commit to delivering equitable services and outcomes for Māori tāngata whaiora and whānau
- The types of organisations who will be eligible to be funded by Te Whatu Ora to deliver peer- governed and peer-led services
- The types of services peer-governed and peer-led organisations will provide, and how they will be provided
- Changes that are needed in the wider system to enable peer-governed and peer-led services to work well.

14. What else is happening to develop and support the peer-support workforce?

Alongside developing peer services, Te Whatu Ora Southern is supporting the development of the peer workforce and has completed a comprehensive Consumer, Peer Support, Lived Experience (CPSLE) Workforce Development Action Plan. The plan can be read <u>here</u>, and is based on feedback received during a <u>workforce survey</u> and consultation, as well as a background paper and literature review. It links strongly to the <u>Competencies for the Consumer</u>, Peer Support and <u>Lived Experience (CPSLE)</u> Workforce and the <u>National CPSLE Workforce</u> <u>Development Action Plan 2020 – 2025</u>.

It is a comprehensive plan that covers all five domains of workforce development. Some actions are focused on those who work in the CPSLE workforce or would like to do so. Other actions are focused on developing the mental health and addiction workforce, because we know from existing research that this is critical to ensuring that CPSLE roles are understood, appropriately utilised and ultimately successful.

An RFP for a 'hub' to connect CPSLE workers across the district, provide some training and supervision, and support good practice is progressing.

And soon, there will be a call for expressions of interest to join a Southern Peer Workforce Development Advisory Group. Establishing this group is one of the actions in the workforce plan.

15. Has peer support been introduced elsewhere in NZ?

Peer support is widely used throughout New Zealand. As of 2022 there were 425 FTE (full time equivalent) peer support workers working in NGOs.¹

16. What evidence is there for the use of peer support?

In July 2023 Te Hiringa Mahara | Mental Health and Wellbeing Commission released a report on the peer workforce.² They summarised the evidence as:

Available research findings from Aotearoa New Zealand as well as internationally show that the use of peer support within mental health services contributes to greater hope, satisfaction, and quality of life for tāngata whaiora. It also contributes to modest improvements in psychosocial outcomes and probably a small reduction in admission or readmission to crisis services, including hospital services.

17. How much is the peer support workforce expected to increase in Southern in the next few months?

The Southern CPSLE workforce is likely going to grow by around 18.5 FTE in the next few months. This will as a result of the Time for Change – Te Hurihanga peer support services project and another initiative. This is a significant increase and great news for our Southern community.

To put this increase into context the peer workforce grew by 64 FTE across New Zealand between 2018 and 2022. This data and other information about peer support and lived experience workforce can be found in the following summary by Te Hiringa Mahara | Mental Health and Wellbeing Commission released this month (July 2023):

https://www.mhwc.govt.nz/assets/Workforce-paper-/Overall-Summary-Peer-Support-Workforce-Insights-Paper.pdf

18. What information will peer support workers have access to?

Under our model of care, peer support workers will do collaborative note writing. This means that they will write notes about your peer support appointment together with you, so you will know what is in your file. If you don't want to be involved, then the peer support worker will write a summary about your time together. Peer support workers will not normally have access to clinical

¹ <u>https://www.mhwc.govt.nz/assets/Workforce-paper-/Overall-Summary-Peer-Support-Workforce-Insights-Paper.pdf</u>

² <u>https://www.mhwc.govt.nz/assets/Workforce-paper-/Overall-Summary-Peer-Support-Workforce-Insights-Paper.pdf</u>

information. You can share any information you would like with your peer support worker.

19. What is the training peer support workers receive?

For the new Invercargill service all peer support workers will complete foundational Peer Support training before working with people. There are a few common training courses for peer support workers, including some delivered by Mind and Body. They will also be supported to enrol in a National Certificate in Health and Wellbeing (Peer Support) (Level 4) qualification. This is an NZQA qualification that takes around 21 months to complete.

20. Can I have peer support worker as well as care from a clinical team? Yes, you can access more than one service.

21. What was the process to select a provider for peer-governed and peerled services?

Following the co-design of the model of care, the Time for Change project team has worked through a robust RFP process to increase peer support options, firstly in the Dunedin area, and then in Invercargill.

The RFP process asked providers to propose a service that would implement the new model of care. All providers had to answer 32 questions, and provide information on:

- How their proposed service would: meet the needs of the Waihōpai/Invercargill; be accessible to all people (including people with disabilities); work together with other services and supports; and support people to strengthen relationships with their whānau and community. Providers were required to provide information on a timeline for implementing their service, key people who would be leading the service, and significant risks associated with their proposal.
- Their organisation, including: how people with lived experience were involved in governance; the organisation's experience in service delivery; the values of the organisation (and alignment with the model of care); their size, structure and annual turnover; their operational and financial systems; their policies (including alignment with the Nga Paerewa Health and Disability Service Standards); how trauma responsive their organisation is and how it works to support the hauora (wellbeing) of people experiencing addiction. Organisations were required to explain how they valued lived experience at every level of their organisation and how feedback from tāngata whaiora influences their service delivery.

- Equity and cultural competence including: how they would support the right of Māori to be Māori in peer-governed services, what actions they would take to ensure equitable health outcomes, how they would provide tikanga Māori based options, and how they would meet the equity requirements in the model of care.
- Their peer practice including their practice framework and how they use the Competencies for the Consumer, Peer Support and Lived Experience Workforce.
- How they would support the peer workforce including: supporting people through recruitment, workforce diversity, staff wellbeing and external peer supervision. Providers were asked how they would support the learning and development of staff and to describe all training that staff would receive.
- Broader outcomes, including: whether they were Māori owned, how they would reduce barriers to employment, and promote human rights and non-health outcomes such as improved housing and employment.