

Briefing

Meeting with Te Hiringa Mahara Mental Health and Wellbeing Commission

Date due to MO:	22/03/2023	Action required by:	31/03/2023
Security level:	UNCLASSIFIED	Briefing number:	BN2023-013
To:	Hon Dr Ayesha Verrall - Minister of Health		
Copy to:			

Contact for Telephone Discussion

Karen Orsborn Chief Executive	Name	Position
	Karen Orsborn	Chief Executive
Wayne Verhoeven Director, Corporate Services	Wayne Verhoeven	Director, Corporate Services

Minister's Office to Complete

□ Approved	□ Decline	□ Noted
□ Needs change	□ Seen	□ Overtaken by event
□ See Minister's note	□ Withdrawn	
Comment:		

Meeting with Te Hiringa Mahara Mental Health and Wellbeing Commission

Security level:	UNCLASSIFIED	Date:	31/03/2023
To:	Hon Dr Ayesha Verrall - Minister of Health		

Purpose

This briefing supports your meeting with Te Hiringa Mahara - the Mental Health and Wellbeing Commission on 31 March 2023, between 2:00pm – 2:45pm. The attendees will be Hayden Wano, Board Chair and Karen Orsborn, Chief Executive.

Executive Summary

- 2. This is our first opportunity to meet you, discuss our work programme and further progress towards better mental health and wellbeing for Aotearoa. We propose the following agenda:
 - Your priorities
 - Our view on progress with transformation and immediate priorities
 - Our immediate work programme
 - Letter of Expectations and Statement of Performance Expectations 2023/24
 - Advising you regularly.

Recommendations

We recommend you:

a)	note Te Hiringa Mahara intends to proactively release this briefing as	Yes / No
	part of our proactive release policy	
b)	note that this briefing will shape the discussion on 31 March 2023	Yes / No



Karen Orsborn Hon Dr Ayesha Verrall

Chief Executive Minister of Health

Date: 22/03/2023 Date:

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- 3. Congratulations on your appointment as Minister of Health and Minister for Research, Science, and Innovation.
- 4. Te Hiringa Mahara was established as an independent Crown entity with the objective of contributing to better and equitable mental health and wellbeing outcomes for all people in Aotearoa. Our role is to provide oversight of the mental health and wellbeing system, monitor system performance, and advocate for improvement.
- 5. We would like to work with your agencies to ensure population groups that are most vulnerable are getting the right support, at the right time, for their needs.

Your Priorities

- 6. We have a shared interest in lifting mental health and wellbeing outcomes. We have welcomed your attention on responding to the cost-of-living pressure families are facing, the additional mental health support available in schools and expanded school-based health services that will help vulnerable populations most at risk, have access to services and support they need.
- 7. The recruitment of the workforce to deliver mental health and addiction services is a perpetual challenge; we have noted that this is particularly challenging across IPMHA, Youth and Pacific Access and Choice services. There are substantial vacancies in the employed workforce compared to the number of funded positions in services. Focused attention is required to address this issue.
- 8. Pressures on hospital bed capacity remains a significant problem in New Zealand's healthcare system. Mental health inpatient services also experience this pressure. The solution is not necessarily more hospital beds. The solution must consider the many people (approximately 30% of all mental health inpatients) who are in those beds due to the lack of appropriate community supports. Furthermore, community acute services and supports are a more appropriate and acceptable response for many people experience acute mental illness or distress.
- 9. The wellbeing effects of cyclone Gabrielle and other recent weather events have created immediate priorities for action. Backing communities and community providers who we know have been pivotal in supporting their communities is welcomed. This additional support will help marae, iwi, Pacific, ethnic and recognised rural and community groups to continue delivering essential support to people, whānau, families and their households, who have been impacted in the flood and cyclone regions.

Our view on progress with transformation and priorities

- 10. You have an opportunity to make meaningful improvement to mental health and wellbeing in Aotearoa. Key points of focus should be:
 - Ensuring mental health is a priority through the health reforms, to build on the strengths of the mental health and addiction sector and implement a workforce plan
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- to meet growing demand and new ways of working.
- Ensuring wider wellbeing is supported by cross-government action, with a particular focus on addressing the impacts of cyclone Gabrielle and other recent weather events.

Ensuring mental health is a priority

- 11. Improved mental health and addiction outcomes will require ongoing and focused leadership. This is particularly important to ensure they are not lost amongst the broader health system reforms.
- 12. It is important that decision making in the health reforms, and across the sector more generally, is well informed by the voices of those who often are underserved, underrepresented, or disadvantaged by existing systems that support mental health and wellbeing. This includes Māori and the services that support them, Pacific peoples, and those with lived experience of mental distress or addiction in particular. Te Hiringa Mahara is legislated to reflect and lift these voices, and we will provide you with independent advice that supports your leadership and decision-making, to improve mental health and wellbeing outcomes for all.
- 13. Transforming our mental health law is a once-in-a-generation opportunity. We urge the Government to be bold in creating change that is grounded in Te Tiriti o Waitangi and ends human rights violations evident under our current outdated law. We have provided a range of detailed advice on the proposals, and want to see the transformation that has been consistently called for rather than 'improvement to existing law'.
- 14. There has been some progress on ensuring a range of appropriate services are available, but the access and choice programme, and broader improvements, need to be scaled up:
 - As of 30 June 2022, 1,021 positions were funded across the four services there were 828 FTE employed into those positions. An additional 798 full-time staff are required by 30 June 2024 to fully implement Access and Choice services.
 - Recruitment of the workforce to deliver services is challenging across IPMHA,
 Youth and Pacific services. The challenges are particularly concerning for Pacific
 services with only 50% of the funded positions filled. It is reassuring to see some
 workforce development initiatives aimed at increasing the Pacific workforce, but
 focused attention is required to address this issue.

Ensuring wider wellbeing is supported

- 15. In April 2023 we will publish a report on youth wellbeing, and the calls for action we have heard from extensive engagement with young people. The report outlines the following general social determinants as prominent causes of distress among young people:
 - Uncertain futures
 - Racism and Discrimination
 - Harm from digital communication (including social media)
 - Intergenerational Connection.

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- We have established an advocacy plan to take these and other insights and promote them with a range of decision-making stakeholders over the next year.
- 17. Crises like the pandemic have shown us that supporting wellbeing requires reestablishing and strengthening local social infrastructure that supports connection and communities [BN2023 - 012 refers].

Our immediate workplan

- From April to June, we will release a series of monitoring reports looking at key elements of the mental health and addiction system in Aotearoa – under the name Te Huringa Tuarua 2023:
 - A youth services report will shine a light on the practice of admitting young people (aged 12 to 17 years) to adult inpatient mental health services (adult services) in Aotearoa New Zealand.
 - A summary monitoring report will cover the performance of mental health and addiction services from July 2017 to June 2022. This will include specialist services funded through Te Whatu Ora, telehealth and digital services and primary care. A dashboard with monitoring data will also be published.
 - A report on the use of Compulsory Community Treatment Orders (CCTOs and the identification of directions for meaningful action that can be taken towards upholding 'rights' pending the full replacement of the outdated Mental Health Act 1992.
 - A Kaupapa Māori report that will provide insights about Kaupapa Māori service investment and the experiences of tangata whaiora.
- As outlined in the previous section, we will release a youth wellbeing report in May. This report is supported by a literature review carried out for us by Koi Tū, which will be published alongside our report. The literature review has already been shared with other agencies, as part of our ongoing youth advocacy work, which will be expanded on in 2023/24.
- 20. We have released five of eight COVID-19 insights reports focused on wellbeing. These are short reports that primarily use existing data, report six and seven of the series will focus on Māori expressions of rangatiratanga through the pandemic, and Pacific experiences of wellbeing, respectively. Report eight will bring together the common findings and recommendations across all reports in the series, complemented by additional information on key communities.

Accountability

- 21. At this meeting we are hoping you will have completed the Letter of Expectations for 2023/24. This will shape our Statement of Performance expectations 2023/24 (SPE 2023/24) and the work priorities and deliverables we have outlined within this document. The 2023/24 SPE is currently with Manatū Hauora for review.
- We would like to have an update on the Board appointments. We note four of the seven Board members have terms that expired in February 2023.

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Next steps

- 23. We will brief you on the work outlined in this briefing and discuss where we can assist you in your areas of priority.
- 24. We would like to schedule in regular meetings with you to update you in more detail on the progress of our work.

ENDS

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