

Te Huringa: Change and Transformation

Mental Health Service and Addiction Service

Monitoring Report 2022



The Commission independently monitors mental health services and addiction services in Aotearoa, and advocates for improvement to these services

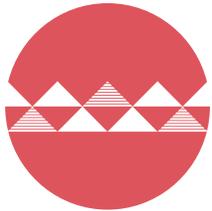
The Mental Health and Wellbeing Commission (the Commission) was set up as one of the recommendations of **He Ara Oranga: Report of the Government Inquiry into mental health and addiction (He Ara Oranga)**. One of the Commission's functions is to monitor and report on mental health services and addiction services, and advocate for improvements to those services.

This is our first monitoring report on the performance of mental health services and addiction services

Te Huringa: Change and Transformation. Mental Health Service and Addiction Service Monitoring Report 2022 (Te Huringa) focuses on the performance of mental health

services and addiction services between 2016 / 17 and 2020 / 21, and outlines what is currently working well with services, what is not working well, and how this has changed over time. **Te Huringa** also highlights examples of services and programmes that exemplify the vision of **He Ara Oranga**, and outlines calls to action that provide key points of direction for the mental health and addiction system during the upcoming health reforms.

Te Huringa is a transitional report, using a Service Quality Framework adapted from one used by the former Mental Health Commissioner while we develop our own framework to monitor the mental health and addiction system, **He Ara Āwhina (pathways to support)**. This framework consists of six domains: equity, access and options, partnership and leadership, safety, effectiveness, connected care.



The transformation of the mental health and addiction system must remain a priority for Government

He Ara Oranga envisioned a holistic mental health and addiction system, focused on what everyone needs to achieve good mental wellbeing. It imagined that people who are experiencing mental distress or addiction will have the resilience, tools, and support they need, and a greater choice of supports.

The Government has made a promising start to addressing the recommendations made in **He Ara Oranga**, with the cross-agency \$1.9 billion package for mental wellbeing in the 2019 Wellbeing Budget. We commend this investment, particularly the addition of much needed primary and community services, but more is needed to address the pressure on

specialist services. We have seen little change in wait times, with continued concerning wait times for young people. Specialist services continue to feel pressured in meeting the volume of need and in recruiting and retaining the workforce required for current models of care.

Transformation is a complex process of change that includes strong and committed leadership at the highest level. The will for improvement and good intent is not enough – transformation requires strong leadership and a well-managed plan to execute change. There is an opportunity for the health reforms, and the newly established Health NZ and the Māori Health Authority, to enhance the focus on mental health and wellbeing, and embed strong leadership in their operating models.



To transform the system toward the vision of He Ara Oranga, the Commission wants to see the improvements for mental health services and addiction services

These improvements include:

- government, service commissioners, and providers uphold Te Tiriti o Waitangi obligations. This includes prioritising funding for a range of holistic services and supports that reflect whānau, hapū, and iwi aspirations, and requiring all mental health, addiction, and wellbeing services to be culturally, spiritually, and physically safe for Māori, and acknowledge wairuatanga as a key contributor to mental wellbeing
- further investment and development for peer services, youth services, and other community-based specialist services
- services maximise tāngata whaiora autonomy and uphold rights by decreasing compulsory treatment orders
- policy that informs the Mental Health Act repeal and replace does not discriminate based on having a ‘mental disorder’, and is designed with tāngata whaiora
- services are supported to develop positive risk-taking approaches, including strong leadership from the Government on the He Ara Oranga recommendation for a national discussion to reconsider beliefs, evidence, and attitudes about mental health and risk
- measures of treatment effectiveness that reflect the things most important to tāngata whaiora – including outcome tools that are relevant to tāngata whaiora and whānau, culturally appropriate, nationally consistent, and reliable, and a continued focus of the holistic health needs of tāngata whaiora
- ensure people have access to connected supports – including additional supports that address the social and economic determinants of health that impact on people experiencing distress and harm from substance use and gambling
- strengthening the connection between inpatient and community care and between specialist and primary care.