Minister of Health

Quarterly Mental Health Report Quarter 4 2022/2023

16 October 2023

This document has been proactively released by the Ministry of Health on behalf of the Minister of Health, Hon Dr Ayesha Verrall:

• Quarterly mental wellbeing report (as at 30 June 2023)

Quarterly mental wellbeing report: Overview (as at 30 June 2023)

Legend: ✓ Completed; ● On track; ● Some aspects need attention; ● Aspect(s) require significant attention or action; ● Off track

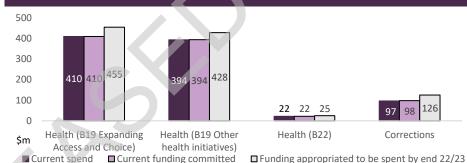
Overview of progress

- This update focuses on progress implementing the cross-government Budget 2019 mental wellbeing package and Budget 2022 Vote Health mental wellbeing investment initiatives that are still in a rollout phase.
- Implementation of Budget 2019 initiatives is broadly on track.
- Progress implementing Budget 2022 initiatives is largely slower than originally
 planned. This is largely due to ongoing systemic workforce shortages. Recruitment
 to new roles has generally taken longer than anticipated. There have also been
 ongoing impacts from the North Island weather events. Sustained focused
 attention on recruitment and addressing workforce challenges is required.
- 5 initiatives are rated as 'requiring significant attention or action'. This is the same number as in Q3 2022/23 and reflects the impact of workforce recruitment and retention challenges experienced by most of the Budget 2022 initiatives.
- 10 initiatives are rated as 'having some aspects that need attention'. This is one
 more than in Q3 2022/23 and includes 2 initiatives upgraded from being rated as
 requiring 'significant attention or action'.

Delivery risks and mitigations

Delivery risk	Mitigation
Service delivery levels not meeting expected levels due to providers facing challenges recruiting and retaining staff.	Focus on workforce development, including targeted support for specific providers, initiatives to expand certain professions (for example, psychologists), and cross-agency collaboration to identify common barriers and solutions.
Te Whatu Ora change process placing pressure on services and health sector.	Support districts and providers to share challenges and solutions and work together to ensure business continuity.
Lack of robust or complete data for some initiatives/ providers.	Focus across affected initiatives/ providers on enhancing data collection and robustness.

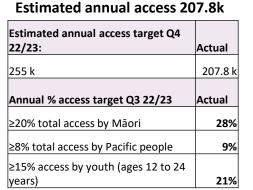
Funding by agency: 2019/20 – 2022/23

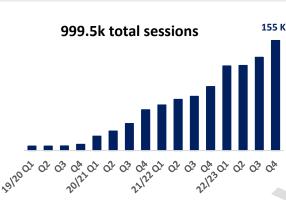


*Note: The figure above reflects best available information on the financial position for operating funding from 2019/20 to 2022/23. It shows how much of the appropriated funding has been spent and committed to be spent as at 30 June 2023. Some figures are estimates as agencies track funding in different ways, and some agencies are unable to track funding commitments against specific Budget sources. Funding appropriated does not reflect funding transfers or Ministerial-directed reprioritisation.

Expanding Access and Choice of Primary Mental Health and Addiction Support

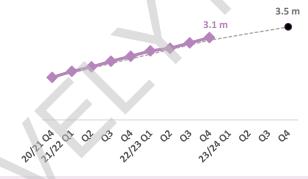
Access





Sessions delivered

Enrolled population coverage (integrated services in general practice)



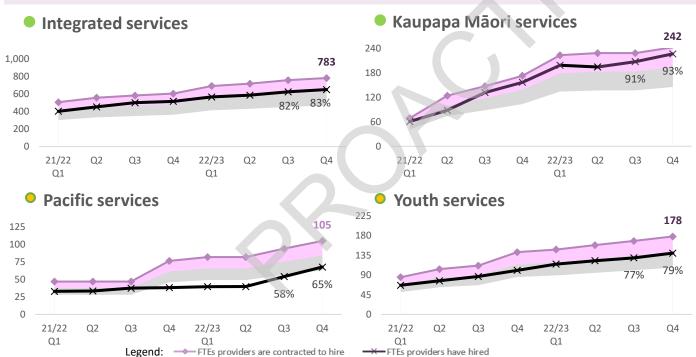
Initiatives requiring significant attention or action

Expanding the Pregnancy and Parenting Service (PPS) – service delivery levels (number of whānau groups seen) have increased since Q3 22/23 but remain behind acceptable levels. There also continues to be workforce recruitment and retention issues. Work is underway with key stakeholders to improve and increase awareness of services offered and number of whānau supported, and to recruit new FTEs, supported by Te Whatu Ora.

Forensic mental health services for young people — primarily requires attention due to provider reporting issues in one region. Te Whatu Ora and Te Aka Whai Ora are working to resolve these issues. Overall, the other 4 areas are currently performing at an acceptable level, however one of these areas has been experiencing ongoing recruitment and retention challenges. Te Whatu Ora continues to work with providers and has broader workforce development work underway, including cross-agency work to explore ways to increase shared workforces.

Specialist mental health and addiction services: eating disorders services/ community-based crisis services/child and adolescent mental health – these initiatives all have delays in putting in place service agreements and commencing service delivery primarily due to ongoing recruitment challenges and workforce shortages. Workforce development and training initiatives are in place, including to support workforce retention and experience.

Workforce: Aim to maintain range of 60 −100% of contracted FTE filled with actual FTE

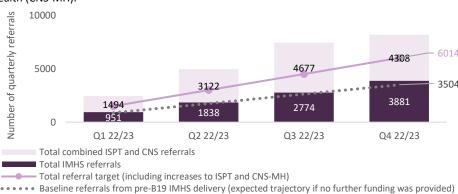


Te Whatu Ora gives funding to providers for FTEs and providers are responsible for recruitment. These graphs show hiring progress against what has been contracted.

Providers are at different stages of rollout. As providers are growing services the aim is to maintain an average of 60-80% of contracted FTE filled with actual FTE (grey shaded area) across all providers. Once the rollout has been completed, the expectation is that actual FTE will maintain within an average of 80-100% (light purple shaded area).

Corrections

Budget 2019 invested \$128 m in Vote Corrections to increase access to MHA support for people in Corrections' care. A key part of this investment is the delivery of Improving Mental Health Services (IMHS), Intervention and Support Practice Teams (ISPT) and Clinical Nurse Specialists - Mental Health (CNS-MH).



*Note: Corrections has identified an error in previously reported referral numbers for ISPTs and CNS-MH. This has been corrected for Q4 2022/23 and shows that the total referral numbers for ISPTs and CNS-MH are lower than previously reported. Overall, these initiatives continue to exceed targets. By the end of Q4 2022/23, there were 4,308 combined ISPT and CNS-MH referrals. The referral numbers reported for IMHS remains accurate and by the end of Q4 2022/23, 3,881 IMHS referrals had been made. Corrections continues to work on improving data integrity and work on a new data reporting system has recently been completed.

Achieved (end Q4 22/23)

Forecast milestone (end Q1 23/24)

Quarterly mental wellbeing report: Initiative detail (as at 30 June 2023) Legend: Completed; On track; Some aspects need attention; Aspect(s) require significant attention or action; Off track

Status Commentary on status

Budget 2019 Primary and community supports									
Expanding access and choice: Integrated primary mental health and addiction services (MHA) (accessed through general practice)	Health	- \$455.1 m -	•	Enrolled population coverage increased from 2.900 m in Q3 22/23 to 3.100 m at the end of Q4 22/23. Percentage of actual FTE remains at 83% of contracted FTE.	Estimated enrolled population coverage 3.000 m	• Enrolled population coverage of 3.100 m • Over 47,000 unique individuals seen during Q4	• Estimated enrolled population coverage 3.125 m		
Expanding access and choice: Kaupapa Māori services	Health		• •	There is a new service in South Canterbury, and 2 new services are being established in Waikato/Hauraki. Percentage of actual FTE has increased from 91% in Q3 22/23 to 94% in Q4 22/23.		 Actual FTE at 94% of contracted FTE Over 11,300 new people seen during Q4 Over 26,600 sessions delivered during Q4 			
Expanding access and choice: Pacific services	Health			Actual FTE increased from 57% in Q3 22/23 to 64% in Q4 22/23. Majority of vacancies are with a provider servicing 3 districts. Te Whatu Ora is working with the provider on solutions, including workforce development.	ng with • Maintain actual FTE at 60–80% of contracted FTI covering	Over 5,600 sessions delivered during Q4	Maintain actual FTE at 60–80% of contracted FTE		
Expanding access and choice: Youth services	Health		•	With the Tairāwhiti district service now established, there are contracts covering all districts (22 local youth services and 1 nationwide service). Actual FTE has increased from 77% in Q3 22/23 to 79% in Q4 22/23.		Actual FTE at 79% of contracted FTE Over 2,000 new people seen during Q4 Over 13,400 sessions delivered during Q4			
Well Child Enhanced Support Pilots (ESP)	Health	\$10.0 m	•	The new Counties Manukau provider was onboarded this quarter, with services expected to go live by July 2023. Lakes and Tairāwhiti are progressing well and maintaining enrolment levels.	 Maintain enrolment levels in Lakes at 40 whanat and Tairāwhiti at 30 whānau Onboarding for Counties Manukau provider 	Lakes has 124 mothers enrolled in the service Tairāwhiti offer support to 60 whānau Counties Manukau provider onboarded	 Maintain Lakes and Tairāwhiti enrolment Counties Manukau enrolment level at approx. 60 whānau 		
Preventing suicide and supporting people bereaved by suicide	Health	\$40.0 m	•	Referrals connected and sessions delivered have increased from Q3 to Q4 22/23. Both exceed the planned milestones.	• ~180 referrals to bereavement support sessions • Deliver ~490 bereavement support sessions	• 186 referrals to bereavement support • Delivered 660 bereavement support sessions	• This is the last report for the contract period ending 30 June 2023		
Budget 2019 Addiction services									
Enhancing primary addiction responses.	Health	\$14.0 m	•	on expanding capacity in existing services. The contracts are now in place for 3	• 8 sites operating at full scale • ~3,800 drop-ins at Haven Recovery Café • All 23.2 FTEs contracted in place • Commence service delivery in Sites 9 and 10	9 sites are operating at full scale 3,865 drop-ins at Haven Recovery Café 21.5 FTE (93%) of contracted FTE in place Contracts in place for Sites 9 and 10 and service delivery has commenced	• 10 sites operating at full scale • 3,800 drop-ins at Haven Recovery Café • All 23.2 FTE in place		
Enhancing specialist alcohol and other drug (AOD) services	Health	\$42.0 m	•	Service delivery across 6 active services progressing well, some services are still upscaling. There are risks regarding staff vacancies, however, this is not unexpected given the state of the Addiction Workforce. Services are taking actions to mitigate the risks associated with the vacancies.	 150 people supported by 6 new services in the North Island 100 people seen per quarter in South Island Managed Withdrawal 5.5 FTE in South Island network (full scale) 	 179 people seen by 6 new services in the North Island 100 people seen in South Island Managed Withdrawal 5.5 FTE in South Island network 	 50 people supported by 6 new services in the North Island 100 people seen per quarter in South Island Managed Withdrawal Network 5.5 FTE in South Island network (full scale) Service delivery to commence on site 7 		
Expanding the Pregnancy and Parenting Service (PPS)	Health	\$7.0 m	0	Both services are continuing to upscale and continue to work in collaboration with external stakeholders to support whānau, retain staff, and fill vacant roles.	• Maintain support for ~100 whānau per site per annum	• 66 whānau groups Whanganui and 49 whānau groups in the Bay of Plenty supported this quarter	• Maintain support for ~100 whānau per site per annum		
Budget 2019 Specialist mental health supports						<u> </u>	·		
Forensic mental health services for adults	Health	_			• 18.5 – 24.6 FTE in place by Q4 22/23 (60–80%)	• 27 FTEs in place (87%)	• 18.5 – 24.6 FTE in place by Q1 23/24		
Forensic mental health services for young	Health	\$34.0 m	0	FTEs acceptable for 4 areas. Currently no data for 1 area (Waikato) due to provider reporting issues. Te Whatu Ora is leading work to resolve these issues.	•28.2 – 37.6 FTE in place by Q4 22/23 (60–80%)	• 23.8 FTEs in place (50.1%) (excluding Waikato FTE this equates to 66% from 36.2 FTE).	• 28.2 – 37.6 FTE in place by Q1 23/24		
people Improving support for people experiencing a mental health crisis	Health	\$7.0 m	•		 Maintain ~400 peer contacts per quarter Maintain full crisis capability plan recruitment 10.7 FTEs across all districts 	• 470 peer contacts • 10.1 of 10.7 FTEs in place (94.4%)	 Maintain ~400 peer contacts per quarter Maintain full crisis capability plan recruitment 10.7 FTEs across all districts 		
Budget 2019 Corrections									
. ,	Corrections	\$23.2 m	•	Referral numbers for IMHS have exceeded the forecast milestone for Q4 22/23	• 3,504 IMHS referrals by end of Q4 22/23	• 3,881 IMHS referrals by end of Q4 22/23	• 876 IMHS referrals by end of Q1 23/24		
New intensive multidisciplinary mental health services delivered by Intervention and C Support Practice Teams (ISPTs)	Corrections	\$6.5 m	•	Corrections has identified an error in previously reported referral numbers for ISPTs and CNS-MH, which has been corrected in this report. Referral numbers—continue to exceed the forecast milestone for Q4. Workforce shortages have	 2,510 combined ISPT and CNS referrals by end of Q4 22/23 25 FTE ISPT positions filled (full scale) 	 4,308 combined ISPT and CNS referrals by end of Q4 22/23 16.3 FTE ISPT positions filled (8.7 vacancies) 	 793 combined ISPT and CNS referrals by end of Q1 23/24 25 FTE ISPT positions filled (full scale) 		
New clinical nurse specialists in mental health (CNS-MH) roles	Corrections	\$2.3 m	•	affected recruitment and the percentage of roles filled remains at 68%.	• 7 FTE CNS-MH positions filled (full scale)	• 5.6 FTE CNS-MH positions filled (1.4 vacancies)	• 7 FTE CNS-MH positions filled (full scale)		
Addictions Services Programme (Drug Treatment Programme [DTP] and Intensive C Treatment Programme [ITP])	Corrections	\$24.5 m	•	Operational challenges continue to impact ITP referrals in Invercargill, and Corrections is working with the provider to minimise barriers to referrals. Timeframes for establishment of brief AOD interventions for populations in remand has been extended to Q1 23/24, to prioritise a new programme for long-term AOD treatment for women in prison.	 12 additional new starters at Tongariro DTP Maintain full capacity at Invercargill ITP (12 participants) 12 new starters at new Rolleston AOD service 	 13 new starters at Tongariro DTP Invercargill ITP supported 3 participants in prison, 3 in community and 5 whānau members 13 new starters at Rolleston AOD service 	 12 new starters at Tongariro DTP Maintain full capacity at Invercargill ITP (12 participants) 12 new starters at Rolleston AOD service 4 Remand AOD services established 		
AOD aftercare support services C	Corrections	\$11 m	•	Reporting on this initiative focuses on establishing 15 Aftercare FTE in 8 provincial communities. Agreements for 7 FTE are in place.	Agreements drafted with 4 providers for 7 Aftercare Worker FTE	 Agreements drafted with 4 providers for 7 Aftercare Worker FTE 	• 7 Aftercare Worker FTE established		
Budget 2022 Mental wellbeing									
	Health and Education	\$90 m	•	Services have started in 1 additional area (Lakes/Bay of Plenty [BoP]), with initial focus on BoP. Recruitment challenges and impacts from the cyclone has delayed service delivery in the other 2 areas.		 Phased service delivery in 3 areas Promotion/engagement with schools in remaining areas 	 Service delivery to commence in Northland Actual FTE at 50% of contracted FTE across the 4 new areas; 80–100% in Canterbury 		
Specialist mental health and addiction services: eating disorders services	Health	\$4 m	0	Recruitment underway in all 4 districts but there are delays due to workforce shortages. Workforce development and training initiatives in place to support the retention and experience of the workforce. No new services being delivered.	20% FTEs in place across all 4 districts Phased service delivery commenced	Recruitment is underway in all 4 districts Phased service delivery has not yet commenced	• 25% FTE in place by the end of Q1 23/24 • Phased service delivery in all 4 districts		
Specialist mental health and addiction services: maternal mental health services	Health	\$10.1 m	0	progress. Phased service expansion has commenced in 3 districts. Workforce development, training assessment and delivery in progress.	Agreements signed and recruitment/phased service delivery commenced in 9 districts Regional implementation funding finalised	the 4 regions	· ,		
Specialist mental health and addiction services: community-based crisis services	Health	\$27.5 m	0	MidCentral; Southern; BoP; and Capital, Coast and Hutt Valley).	 Agreements in all 6 districts, with recruitment and phased delivery in 5 districts 	 Agreements have been finalised in all 6 districts. Recruitment is still to commence 	• 20% of FTE in place by the end of Q1 23/24 • Some phased service delivery in all 6 districts		
Specialist mental health and addiction services: child and adolescent mental health	Health	\$18.7 m		Bay) due to the cyclone. One-off funding has been made available to Taranaki. Phased service delivery has not yet started.	4 agreements finalisedPhased service delivery in at least 2 areas	 3 agreements finalised (Northland, MidCentral and Taranaki) Recruitment commenced in 2 areas Phased service delivery has not yet commenced 	8 agreements finalised 20% of FTE in place in Northland and MidCentral		
Specialist mental health and addiction services: Kaupapa Māori specialist services	Health	\$14.3 m		Contracts signed with 5 partners. Quarterly hui with providers to start next	• Contracts with 5 partners in place • Service delivery to commence	Contracts with 5 partners in place Service delivery commenced	• ~20 packages of care per quarter (80 packages of care delivered by 30 June 2024)		

Planned milestone (end Q4 22/23)