

3 September 2020

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Response to a request for official information

Dear [Redacted]

Thank you for your request for official information received 5 August 2020 by Nelson Marlborough Health (NMH)¹, followed by the necessary extension of time 1 September 2020, where you seek the following information:

1. How many Maori are referred to DHB MHAS services in the past year?

NMH response: 1,004 people, who identified as Maori, were referred to DHB Mental Health Assessment Services during the 2019/20 financial year.

Data Inclusion Rules

Wahi Oranga Adult Mental Health Inpatient Unit, Community Mental Health, Addictions, & Alexandra Hospital Older Persons Mental Health Inpatient Unit Referrals
Referrals Received between 01/07/2019 and 30/06/2020

2. What is the average length of engagement?

NMH response: 99 days.

3. What diagnoses do these people present with?

NMH response: Please see Table One for Inpatient Diagnosis Related Groups and Table Two for Community Referral Reasons.

TABLE ONE:

Inpatient: Diagnosis Related Groups (sorted by most to least common)

Schizophrenia Disorder
Major Affective Disorders Age <70
Personality Disorders and Acute Reaction
Drug Intoxication and Withdrawal
Other Affective and Somatoform Disorder
Paranoia and Acute Psychotic Disorder
Alcohol Intoxication and Withdrawal
Alcohol Use and Dependence

Data Inclusion Rules

Wahi Oranga Mental Health Inpatient and Older Persons Mental Health Inpatient Referrals
Inpatient Events Discharged between 01/07/2019 and 30/06/2020

¹ Nelson Marlborough District Health Board

TABLE TWO:

Community: SNOMED* Clinical Terminology Referral Reasons (sorted by most to least common)

Alcohol
Anxiety Disorder
Suicidal Thoughts
Situational Crisis
Depressed Mood
Methamphetamine
Self-harm
Cannabis
Problem Behaviour
Attention Deficit Hyperactivity Disorder
Family Problems
Aggressive Behaviour
Parental Concern about Child
Bizarre Behaviour
Psychotic Disorder

Data Inclusion Rules	Community Mental Health, Addictions and Older Persons Mental Health Referrals Referrals received between 01/07/2019 and 30/06/2020
Data Inclusion Notes	19% of Community Referrals in scope had SNOMED* Referral Reason Codes. SNOMED Codes are captured at the time of Referral, and may not be the same as the Diagnosis. Diagnosis coding information is not available for Community Referrals due to system functionality. More than one SNOMED Referral Reason may be assigned to each Referral.

NOTE: *SNOMED CT is the universal system of Clinical Terminology designed for capturing structured information about patients, conditions, interventions and outcomes at the point of care, and the Ministry of Health's preferred solution for capturing clinical content in electronic patient records within the New Zealand health system.

4. How many Maori are engaged in MHAS psychology services?

NMH response: 113 consumers have had one or more Community Contacts, including with a Psychologist during the 2019/20 financial year.

Data Inclusion Rules	Mental Health, Addictions and Older Persons Mental Health Community Contacts Appointment Start Date between 01/07/2019 and 30/06/2020
Data Inclusion Notes	Attended Community Contacts include direct contact with consumer (face-to-face or AV/video call) One of the Clinicians present was a Psychologist. More than one SNOMED Referral Reason may be assigned to each Referral. Does not include Non-Attendances or consumers with an open referral who are yet to be seen.

5. How many Maori have requested psychological input, but declined?

NMH response: Information at this level of granularity is not collected by the DHB.

6. How many Maori are on psychology waitlists?

NMH response: The Patient Administration System does not electronically capture waitlist information, and it would take a significant amount of time and resources to go through individual patient files. As such, NMH refuses this aspect of your request under section 18(f) as 'the information requested cannot be made available without substantial collation and research'.

7. What is the average waiting time for Maori on these psychology waitlists?

NMH response: The Patient Administration System does not electronically capture waitlist information, and it would take a significant amount of time and resources to go through individual patient files. As such, NMH refuses this aspect of your request under section 18(f) as *'the information requested cannot be made available without substantial collation and research'*.

8. How many Maori psychologists are employed by the DHBs?

NMH response: One.

9. How many Maori psychologists are employed in a leadership capacity? For example, team leader or above?

NMH response: Nil.

10. How many intern psychologist places do the DHB have?

NMH response: NMH does not have dedicated Intern Psychologist FTE. We utilise the Health Workforce Directorate (previously HWNZ) psychology intern partial funding. This year NMH has two Intern Psychologists working under this scheme in Mental Health services in Blenheim.

11. What is the supervision regime for the intern psychologists?

NMH response: Intern Psychologists have regular supervision from a Senior Psychologist in the team they are working in, and are only placed in teams that have this capacity. This ensures daily contact in addition to weekly supervision sessions.

12. What is the average length of service of psychologists within the DHB?

NMH response: 8.25 years.

13. How many Psychologists have left the DHB over the last twelve months, what was the reason given for leaving?

NMH response: Please see Table Three.

TABLE THREE:

Psychologists who left between 07-08-2019 and 06-08-2020	No.
END OF TEMPORARY POSITION	1
GOING OVERSEAS	1
NO REASON GIVEN	1
OTHER EMPLOYMENT	4
TOTAL	7

14. How many psychologists are on work visa's?

NMH response: Four.

15. How many vacancies for psychologists does the DHB have?

NMH response: 3.2 vacancies as at 24 August 2020.

16. How long have the vacancy's for psychologists been open?

NMH response: Since 18 June 2020.

17. What current initiatives are in place to provide education inhouse to Psychologists?

NMH response: Continued professional education is delivered in-house for Psychologists to access. Recent topics include trauma informed care, supervisory training (various levels), Mental Health Act, Te Reo, Tikanga Maori Best Practise, Treaty of Waitangi and Sensory Modulation. There is a weekly DHB Grand Round, and Psychologists can also access the weekly Canterbury DHB Grand Round, along with two education sessions per year on topics related to eating disorders and maternal – infant mental health from tertiary services in Christchurch.

NMH psychologists have strong links with the local branch of the New Zealand College of Clinical Psychologists (NZCCP), and joint education opportunities have been provided, for example a two day session plus webinar on Intensive Short-term Psychodynamic Therapy with Steve Arthey, utilising NMH facilities and open to external College members.

18. What plan is in place to expand FTE for the psychological services?

NMH response: The DHB priority is to support our existing psychology workforce and support them to work with our wider workforce to enable people to access psychological interventions when required.

19. Are there any psychologists at the DHB employed in the Emergency department?

NMH response: No. Psychologists in each Adult Community Team have dedicated time to provide rapid psychological interventions for referrals from the Crisis Team, most of which have come through the Emergency Department.

This response has been provided under the Official Information Act 1982. You have the right to seek an investigation by the Ombudsman of this decision. Information about how to make a complaint is available at www.ombudsman.parliament.nz or free phone 0800 802 602.

If you have any questions about this decision please feel free to email our OIA Coordinator OIArequest@nmdhb.govt.nz I trust that this information meets your requirements. NMH, like other agencies across the state sector, supports the open disclosure of information to assist the public's understanding of how we are delivering publicly-funded healthcare. This includes the proactive publication of anonymised Official Information Act responses on our website from 10 working days after they have been released. If you feel that there are good reasons why your response should not be made publicly available, we will be happy to consider.

Yours sincerely



Eric Sinclair
Acting Chief Executive