



Project Title	Midland Region Mental Health Service for Older People Continuum
Prepared by	Eseta Nonu-Reid, Midland Regional Director –MH&A MR MHSOP Clinical Directors
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Version	4

Project Statement

The MoH Mental Health and Addiction Services for Older People and Dementia Services: Guideline for District Health Boards was released on 6 July 2011. The guideline aims to improve access to services and provide consistency across all District Health Boards and aged care providers. A key area of focus is the need for greater coordination particularly at the transitions between at primary, secondary and tertiary levels of care.

There is a clear need for both Older People and Mental Health & Addictions services to work in an integrated way to ensure the needs of this growing population are addressed. This project proposes:

1. A regional Swap Shop day that confirms the needs, and identifies innovative and creative cross sector best practice, including integrated service models to address current and future need.
2. A strategic development stakeholder consultative process that builds on work commenced at the Swap Shop day, bringing together and confirming common themes across the region.
3. A further Swap Shop day to critique the draft report capturing the themes and proposing recommendations.
4. Submission of the Final report.

Objectives

The objective is to deliver, by 15TH April 2012 a report with recommendations for the Midland region which will provide an evidence base to inform and support the following work, with specific focus on mental health and addiction of older people and dementia.

Managers, Planners and Funders – regional and local:

- strategic planning
- prioritisation decisions
- identifying specific requirements for new or existing contracts
- workforce development planning
- funding bids

Service managers and clinical leaders (provider arm and NGOs)

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- identifying gaps in their own services
 - identifying particular quality or responsiveness issues in their own services
 - identifying services or approaches that may be needed to meet the particular demographic needs in their area
 - workforce development planning
 - funding bids

Consumers

- advocacy for re-focusing or re-designing funding and services to provide a more user-centred approach
- advocacy for meeting service gaps
- advocacy for addressing service responsiveness or quality

Family/Whanau

- advocacy for meeting service gaps
- advocacy for addressing service responsiveness or quality

Local, regional and national workforce planners

- local, regional and national workforce development planning
- competencies that require particular attention

Policy makers at the local, regional and national level

- advice to government on services
- information to support budget bids at a local, regional and national level

Strategic Accountability

The project will be guided by:

- Ministry of Health: Mental Health and Addiction Services for Older People and Dementia Guidelines, 2011
- Ministry of Health: Health of Older Peoples Strategy, 2001
- Ministry of Health: Guidelines for People with Dementia, 2007
- Ministry of Health: National Service Specifications for Mental Health Services for Older People, 2010
- Ministry of Health: Te Tahuhu, Improving Mental Health 2005-2015, The Second NZ Mental Health and Addiction Plan, 2005.
- Ministry of Health: Te Kokiri, The Mental Health and Addiction Action Plan 2006-2015
- Midland Region Mental Health and Addiction Needs Assessment 2010.
- Midland Region Mental Health and Addictions Strategic Plan 2008-2015.
- Midland Region Mental Health Workforce Development Plan 2010 – 2014
- Midland Regional Clinical Services Plan 2010
- Midland Regional District Annual Plan 2011/12
- Ministry of Health: Te Rau Hinengaro, The New Zealand Mental Health Survey 2006
- Te Pou: Mental Health and Addiction Services for Older People: Workforce Survey, 2011

Background

The Midland region completed a regional mental health and addiction needs assessment in January 2011. Within the report it identified that across the Midland region services for older people based on Blueprint benchmarks, were overprovided. However it was later confirmed that this was not the

case. It is recognised that the Blueprint benchmarks are outdated and that Te Rau Hinengaro provides more up to date benchmarks. It is also recognised that within the Midland region the most significant growth over the next 10 years will be in the older population. Given this, the need to undertake a specific project to clearly identify MHSOP future needs will allow planning and funding to have a clear direction and influence the Ministry of Health.

Approach

The approach will include the following processes:

- Approval of the project scope and the proposed content of the report
- Identifying a key Clinical Reference Group to support the Project Consultant
- Bringing the MHSOP sector together to recognise and celebrate innovation
- Consulting with key stakeholder groups on current services, gaps, needs, priorities and risks
- Collecting, analysing and presenting the information to stakeholders and the key reference group
- Report writing and editing
- Ongoing checking of processes to ensure that the information, and the way it is presented is going to be useful for those in the Midland region
- Regular reporting to the project sponsor
- Submitting the final critiqued report to the project sponsor

Options Considered

1. *Do nothing*

Regionalisation is one of the main drivers of the current government. It is likely that there will be more expectation to regionally develop strategies that are well connected to all stakeholders. The Midland Needs Analysis 2011 provides the most up to date national and regional information but is based on outdated benchmarks. For that reason it is seen to be of limited use for this client group.

2. *Each Midland DHB gather its own information as required*

This option is not as cost effective as carrying out this work once for the whole region.

3. *Undertake a Midland Regional Project*

This option is seen by the region to be a cost effective way of providing all Midland DHBs with good regional and local information for planning and funding decisions.

Option 1 would result in decisions being based on out of date information. Option 2 would result in high cost to individual DHBs and could result in inconsistent decision making across the region. Option 3 is a cost effective way to carry out this work.

The project will include

Key areas to be covered in the report include (*this is subject to discussion with the key stakeholder groups*):

- Mental Health and Addiction of Older People and Dementia
- Interfaces with other areas of health that affect people with mental health and addiction issues

Work already undertaken in this area by DHBs in the Midland region will be collated and considered within the parameters of this project.

The project will not include

The report will not, include information about DHBs from outside the region.
The project will exclude doing original research.
The project will not conduct a prioritisation process based on the information.

Completion Criteria

The project will be completed once the final report is signed off by the project sponsor

Internal Stakeholders

Project Sponsor, Eseta Nonu-Reid
Project Reference Group to provide direction and advice to the project

External Stakeholders

Midland region has a number of existing regional groups representing key stakeholders who will be consulted as part of the project:

- He Tipuana Nga Kakano "Growing the Seeds". The Midland Regional Consumer Advisory Group
- Nga Purei Whakataa Ruamano. The Midland Regional Maori Advisory Group. Established early in 2001 this forum meets four times a year
- The Midland Regional Clinical Leadership Forum. A forum of Clinical Directors and Provider Service Managers to provide clinical leadership to the Midland Region
- The Midland Regional Generating Action for Families. A forum to provide peer support and mentorship to Family advisors, advocates and peer support workers working in the sector
- The Midland Regional Mental Health & Addictions Portfolio Managers Group. A forum to provide support and operationalise activity across the region
- The Midland Regional Addictions Forum
- Midland Region Workforce Strategic Advisory Group
- Others as identified during the process.

Key stakeholders will be invited to identify, from their knowledge and experience, the gaps, needs, priorities and risks for the region and for their particular DHBs.

The Ministry of Health, Mental Health Commission and other Government agencies as required e.g. Public Health

Implications for Maori

Maori are over-represented in prevalence data and in mental health and addiction services. This project will ensure that good information is provided to support planning to meet the needs of Maori in the Midland region.

IM Implications

The regional network meetings, email and Midland website will be utilised to convey information about the project to the sector.

Resources and

The project will be led by a project consultant who will be responsible for carrying out the work,

Project Structure

consultation, communication and writing the report. The project consultant will report directly to the Midland Region Director, Mental Health and Addiction Service Development.

Midland/DHB staff to be involved in this project are:

- Belinda Walker (Midland region) who will provide project advice and assistance, administrative support, minute taking, peer review etc

A reference group to provide advice and direction to the project will be established through an expression of interest (EOI) which will be sent to the regional advisory groups/forums.

Key milestones and timeline

Date	Deliverable
End of October 2011	Initial teleconference with Clinical Directors
31 October	Draft project scope/communication plan to Clinical Governance – CDs & P&F Portfolio Managers
4 November	Plan signed off by project sponsor
7 November	Project Consultant contracted
21 November	Reference Group members will be identified utilising a competency skill set criteria
29 November	Present process to Portfolio Managers
2 December	Reference Group established and meeting dates set
8 December	MHSOP Swap-shop day- info gathering
12 December	Further stakeholder discussions as required
19 December to 2 February 2012	Draft report prepared
26 February	MHSOP Swap-shop day to critique draft
15 March	Final draft report to project sponsor for regional consultation
15 April 2012	Final report signed off by project sponsor

Project relationships and linkages

Other projects or initiatives that this project relates to and key contact people that provide liaison:

Project	Contact
Link with other individual DHB or regional projects relevant to this project	Midland Portfolio Managers
Midland Region Clinical Plan	Midland Regional Director

Financial Summary

Budget (one-off costs)

The project consultant will be contracted for up to 360 hours.

In addition to the project consultant, other costs are estimated as follows:

Costing Activity	Indicative Costs
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Travel	\$2,500
Meeting costs	\$2,000 (nil if the project uses existing meetings)
Accommodation/meals	\$1,000
Printing/Publication	\$2,000 (nil if the project uses electronic distribution only)

Ongoing cost: Nil

Cost Savings: The cost of carrying out this project as a regional project will be significantly less than the cost of all 5 DHBs carrying out their own projects.

Risk management

Risks associated with the project.

1. Too much information available resulting in a document that is difficult to use - **Medium**
2. Stakeholder meetings do not match up with project timeframe - **Medium**
3. Delays in receiving information from the various information sources – **Medium**
4. Information about workforce may be difficult to access or not available – **Medium**
5. Not using the blueprint model (while there is yet no model replacing it), will mean that a key planning tool is not available and will make the document less useful - **Medium**

Risk Mitigation

- Assess which information is most useful for the purposes of the report. Distinguish between performance information and needs assessment information. Discuss this with the Reference Group.
- Build timeframes for project around and consistent with stakeholder meeting times
- Build sufficient time into project plan or renegotiate timeframes with project sponsor
- Start collecting workforce information early in the project
- Discuss this with the Reference Group and in the document.

Risks the region is exposed to if the project does not proceed.

- The Midland DHBs continue to have out of date information on which to base their planning and funding decisions.
- There will be an inconsistent basis for decision-making across the region.
- Adhoc DHB responses to the Ministry of Health Guideline for DHBs on Mental Health and Addiction Services for Older People and Dementia Services. There is an expectation that DHBs will utilise the Guideline.

Quality

Quality will be facilitated through

- Establishment of a small focused Clinical Reference Group with representation from the regional stakeholder groups
- Sector involvement throughout the project
- A project consultant who has knowledge of mental health and addiction and is able to access information from key stakeholders
- A signoff process for both the project scope and the final document following final consultation

Project Opportunities and benefits

DHBs are at different stages of developing their services to better meet the needs of older people with mental health and addiction issues and dementia. At a national level systematic reviews on these matters have been undertaken, Dementia Behavioural Advisory Services have been established, including one specifically for the Midland region, and revised national service specifications have been developed for implementation. This project has the opportunity to build on these national initiatives, to draw together the local DHB and Midland regional initiatives and facilitate service developments that lead to more effective services.

Assumptions

The following assumptions have been made:

- The project will be funded by Midland Regional Network, Mental Health and Addictions
- The project will be sponsored by Midland Regional Director, Mental Health and Addiction Service Development
- The project is supported by Midland GM Planning and Funding
- The Midland regional networks will actively participate in and support the project

Constraints

There are no particular constraints.

Communication Plan

There will be at least two written communications with stakeholders, one at the start of the project, outlining the project and its objectives (and seeking representation on the Reference Group) and another at the end of the project, thanking stakeholders for their contribution to the project and providing the final report.

During the project, stakeholders will be consulted at their scheduled meetings on gaps, needs, priorities and risks.

Some of the key messages to be included in communications with stakeholders will be:

- The purpose of this project
 - We want this to be a report that is well used and contributes to meeting the identified needs in the region
 - Consultation will occur across the Midland region in each of the five DHB areas.
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**Sign-off (signatures
required)**

Project Consultant: Roz Sorensen

Project Sponsor: Eseta Nonu-Reid

GM Planning & Funding Lakes DHB: Mary Smith

Date: