



# What's New



**20 July 2012**

An update of information, events and resources from established New Zealand websites, relevant to the mental health & addiction sector

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## What's New – 20 June 2012

### **1. Health Quality & Safety Commission New Zealand**

#### **Free Online Course on Cultural Competency Released**

An online foundation on cultural competency, designed specifically for health workforce professionals, was released in July. The Foundation Course in Cultural Competency provides a basic understanding of cultural competency and health literacy.

The multimedia, interactive course is a voluntary programme and has three modules. They provide an understanding of New Zealand's culturally diverse population with an in-depth emphasis on Māori culture. The modules also focus on the importance of health literacy and how health professionals can make a difference to outcomes.

Each training module is supported by videos, video transcripts, additional reading resources and library references.

For more information, and to register, go to [www.mauriora.co.nz](http://www.mauriora.co.nz)

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#### **Sponsorship available for APAC Forum on Quality Improvement in Health Care**

##### **NEW PERSPECTIVES – NEW CONNECTIONS – NEW SOLUTIONS**

The Commission is offering a number of two-day full and part sponsorships to the APAC Forum on Quality Improvement in Health Care on 19 and 20 September 2012. The conference is being hosted in Auckland by IHI and Ko Awatea and features a number of international experts. The event aims to bring health care professionals together to spark new ideas, share stories and discuss new opportunities to improve health care in today's changing environment. Attendees will learn to recognize and implement the habits that support patient-centred care and develop an understanding of how to transform an organization.

Health sector workers can apply for sponsorship to attend the conference by completing the attached form. Successful applicants will be involved in improvement projects which fit the Commission's strategic direction and priorities.

#### **Who should attend**

The event is aimed at the following people

- Front-line staff
- Quality Staff
- Safety Professionals
- Physicians
- Nurses
- Medical and health professions students
- Leadership

Sponsorship submission **opens on 10 July and closes on 6 August 2012**. Successful applicants will be notified by 13 August 2012.

More information, sponsorship flyer and application form – <http://www.hqsc.govt.nz/news-and-events/news/507/>

## **2. Ministry of Health**

### **New Zealand ShakeOut for the Health and Disability Sector**

New Zealand ShakeOut is a nationwide exercise taking place at 9.26 am on 26th September 2012. The target is to have one million people participate by practicing Drop, Cover and Hold – the right action to take in an earthquake.

Resources and more information about New Zealand ShakeOut, for individuals, families and organisations is available at Get Ready, Get Thru, including information for people with disabilities or special requirements.

<http://www.health.govt.nz/our-work/emergency-management/new-zealand-shakeout-health-and-disability-sector2>

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### **New Regulatory Regime for Psychoactive Substances**

Current legislation has proved ineffective in dealing with the rapid growth in new psychoactive substances, such as party pills and other legal highs, which can be synthesised to be one step ahead of existing controls. Cabinet has agreed to new legislation to address this by prohibiting the sale of all psychoactive substances unless approved by a regulator. The new legislation will reduce risks to the public by removing untested and potentially harmful products from being sold and introducing a pre-market approval scheme with testing requirements and retail restrictions for low-risk psychoactive substances.

The Cabinet Paper provides recommendations for the policy approach for the new regime, including the new regulator, funding, importation, legislative implementation, and separate report-backs on retail restrictions, fee-setting, and offences and penalties.

The Regulatory Impact Statement considers options for the approval criteria, the establishment of a regulator to carry out assessments and make approvals, and the process for importation.

<http://www.health.govt.nz/about-ministry/legislation-and-regulation/regulatory-impact-statements/new-regulatory-regime-psychoactive-substances>

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### **Long-Term Residential Care for Older People: What you need to know: 2012**

Published online: 01 July 2012

This booklet explains both the needs assessment process for aged residential care and the financial means assessment for eligibility for the Residential Care Subsidy.

The booklet also provides information about what the older person can expect when they go into an aged care facility, how much they have to pay and where they get more information if they need it.

**Note:** From 1 July 2012, the asset threshold used to assess a person's eligibility to the Residential Care Subsidy will increase by the Consumers Price Index (CPI). Please go to [Changes to the Residential Care Subsidy asset threshold](#) for more information.

<http://www.health.govt.nz/publication/long-term-residential-care-older-people-what-you-need-know-2012>

### **Next Steps In Tobacco Control**

From July 23 retailers will have to ensure that tobacco products are not visible to the public, either from the inside or the outside of a premise. A fine of up to \$10,000 exists for breaching the new law.

Read more about the Guidelines for Implementing the Prohibition on the Display of Tobacco Products. <http://www.health.govt.nz/publication/guidelines-implementing-prohibition-display-tobacco-products>

Removing tobacco from public view is an important step to prevent the promotion of tobacco products and close a gap in the otherwise comprehensive ban on tobacco advertising.

The Government is also considering other steps to stop the promotion of tobacco products including introducing plain packaging of tobacco in alignment with Australia. A public consultation on the plain packaging proposal will begin soon.

<http://www.health.govt.nz/news-media/news-items/next-steps-tobacco-control>

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### **3. National IT Health Board**

#### **HINZ Conference 2012 - Call for Papers**

HINZ is now inviting submissions for the HINZ 2012 Conference.

This year's theme, Health Informatics into Clinical Practice, acknowledges how critical health informatics is and can be in everyday care. They are looking for your stories, your research, and your leadership to make 2012 the Year of Health Informatics in New Zealand.

Please note these key dates for submitting Papers:

- Submissions close **27 July 2012**
- Authors of accepted papers notified by 31 August 2012
- Final papers to be submitted by 14 September 2012

<http://www.hinz.org.nz/page/conference/conference-2012-cfp>

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#### **Clinicians' Challenge Launches for 2012**

Are you a clinician with a day-to-day 'work-related' problem? Might innovative information technology help solve it? If so, the Clinicians' Challenge is for you!

The Clinicians' Challenge is run by Health Informatics New Zealand (HINZ), the New Zealand Health IT Cluster (NZHITC) and the National Health IT Board (IT Health Board).

Entries from clinicians **open on 2 July and close on 17 August.**

See [www.hinz.org.nz](http://www.hinz.org.nz) or [www.ithealthboard.health.nz](http://www.ithealthboard.health.nz) for more information

## **4. Mental Health Foundation**

### **Mental Health Foundation Joins Campaign to Save Auckland Disability Law**

People with experience of mental illness are likely to be disadvantaged due to funding cuts proposed by the Ministry of Justice.

The ministry has proposed reduced funding for specialist disability services offered by Mangere-based Auckland Disability Law (ADL) from next June.

The Mental Health Foundation supports the campaign to save ADL which offers services to people with mental illness free of charge.

While people with experiences of mental illness can have a lawyer appointed to them under the Mental Health Act, many have additional and often complex unmet legal needs and ADL has been able to help. The reduction in funding means this service is likely to be lost.

“Some people with experiences of mental illness find it difficult to find a lawyer due to stigma, miscommunication and other barriers,” Mental Health Foundation chief executive Judi Clements says.

“ADL assists a number of people with mental health diagnoses who are experiencing difficulties with things like welfare, housing, employment, discrimination, problems with neighbours, privacy and education. We absolutely support the campaign to keep this service,” she says.

The Mental Health Foundation is one of more than 100 individuals and organisations that have supported the campaign Save Disability Law, which was launched on 5 July.

<http://www.mentalhealth.org.nz/page/1206-media-releases-2012+mental-health-foundation-joins-the-campaign-to-save-auckland-disability-law>

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## **5. SPINZ (Suicide Prevention Information New Zealand)**

### **New YouTube playlist: Suicide Prevention in Pacific Communities**

<http://www.youtube.com/playlist?list=PL717B16715DD8EB47>

### **Suicide Screening and Triage Training in Auckland**

Auckland DHB are asking professionals to register their interest in attending an all-day **QPR Suicide Screening & Triage training** on Thursday 2 August 2012 at the Crowne Plaza, Auckland Central.

The Screening & Triage workshop is designed for professionals who may have first contact with people at risk for suicidal behaviours. It will prepare participants to make an initial assessment of risk for suicide and to "triage" the at-risk person to a professional for further assessment and care.

For more information about the training day, download the training flyer and registration form.

ADHB require a minimum number of registrations in order for the training to proceed. If you are interested in registering for the course, please email Anna Robertson, [aroberton@adhb.govt.nz](mailto:aroberton@adhb.govt.nz) by **4 pm Thursday 26 July 2012**, and include your phone number.

<http://www.spinz.org.nz/page/187-news#qprtraining>

## **6. Health & Disability Commissioner**

## **Consumer-centred Care: Seamless Service Needed**

*This issue, Health and Disability Commissioner Anthony Hill discusses a recent case that highlights what can be required to deliver a seamless, consumer-centred service for a patient with both aged care and mental health needs.*

Patients will often move from one part of the health care system to another, and back again, as they access the various services they need. It is common for patients to have more than one issue or diagnosis. For example, a patient with an intellectual disability may also suffer from mental illness, or an elderly patient may have co-morbidities which are not related specifically to age.

In order for patients with complex needs to receive appropriate services there must be a series of systems, including skilled people, all working together to deliver a seamless service to that patient. Where any one or more of these safeguards does not operate optimally there is the potential for delivery of appropriate services to be compromised.

The importance of ensuring a seamless consumer-centred service for a patient with complex needs was highlighted for me in a recent case they considered.

<http://www.mhc.govt.nz/media/184717/consumer-centred%20care%20-%20seamless%20service%20needed.pdf>

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## **The Mental Health Commissioner**

Dr Lynne Lane brings expert knowledge to the role of Mental Health Commissioner based on 18 years experience in health services strategic planning, funding and service management in both the public and private sector.

As Chair Mental Health Commissioner for the Mental Health Commission before its disestablishment in June 2012, Dr Lane was instrumental in the development of the Blueprint II for Mental Health.

A key driver of her career and her voluntary work has been a commitment to serving the public to improve their health and well-being.

<http://www.hdc.org.nz/about-us/mental-health-and-addictions/about-us/the-mental-health-commissioner>

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## **Monitoring and Advocacy**

With the addition of the advocacy and monitoring functions, the Health and Disability Commissioner is now additionally tasked with:

**Advocating at all levels in the sector, including providing advice to the Minister of Health** for the interests of people with mental health and/or addiction problems and their families/whānau generally (rather than for individuals or groups), while taking into account the interests of other stakeholders

**Monitoring** and reporting on matters relating to the implementation of the national mental health strategy <http://www.mhc.govt.nz/core-functions>

It is the Mental Health Commissioner who is largely responsible for the performance of those functions under delegation from the Health and Disability Commissioner.

## **Sector Visits**

The Mental Health Commissioner will continue to undertake sector visits to District Health Boards throughout the year, to assess how well mental health and addiction services in that district meet the needs of the needs of people and their families/whānau and to provide direct feedback to the DHB CEO at the end of each visit to help guide service improvements.

Visits to DHBs are a key part of the Health and Disability Commissioner's monitoring and advocacy activities. The visits are an opportunity to share innovation across services and consult on work in progress.

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## **Supporting Consumers and Their Families/Whānau**

The journey to recovery and development of resilience to deal with future life challenges involves the consumer and their family whānau as active partner in decisions on their treatment and social supports. The development of peer support workers has strengthened the recovery process.

In order to support ongoing service improvements the Mental Health Commissioner will work to strengthen the systemic advisory role of consumers and families/whānau by providing support and leadership; encouraging the development of national bodies that represent consumers and families on national policy and strategy matters.

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## **Service Development Plan**

The Mental Health Commissioner will continue to support the MOH to complete the National Service Development Plan for Mental health and Addiction Services (SDP) due to be released in October 2012 which will set out the Governments Priorities for the next 3-5 years for investment in service development. Following completion of the SDP, the Mental Health Commissioner will monitor service delivery against the objectives in the plan.

<http://www.hdc.org.nz/about-us/mental-health-and-addictions>

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## **HDC Consumer Advisory Group**

The role of the Consumer Advisory Group is to provide timely advice and feedback to the Commissioner on strategic issues:

- Handling of consumer complaints about health and disability services
- How to improve the quality of health and disability services
- Public interest issues where the Health and Disability Commissioner can take a lead
- Policy issues raised by the Commissioner
- Promotion and education.

Terms of Reference: Revised TOR coming soon.

### **Members**

- The group meets three times a year. The members are:
- Disability - Martine Abel, David Corner, Beverley Grammer, Pati Umaga
- Health - Neil Hatcher JP, Barbara Robson (Co-Convenor), Suzy Stevens
- Pacific - Molly Pihigia, David Talitu, Frances Hartnell
- Iwi - Ramari Maipi, Fiona Pimm, Naida Glavish

<http://www.hdc.org.nz/about-us/hdc-consumer-advisory-group>

## **7. Te Pou**

### **Matua Raki Joins Te Pou**

New beginning for Te Pou and Matua Raki as they've now formally merged. Matua Raki is now based at our Tory Street office in Wellington.

### **National Outcomes Forum 2012 – Videos**

Te Pou held a national mental health and addictions information forum. The purpose of this forum was to give district health boards (DHBs) and non-government organisations (NGOs) a platform to describe and share how they implement innovative service delivery solutions.

The theme of the 2012 forum was 'Collaborating with information to support resilient and sustainable services'.

Both international and local experts featured at the forum to share their experiences of how information and outcomes can sustain resilient services.

<http://www.tepou.co.nz/library/tepou/national-outcomes-forum-2012---videos>

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### **“You don’t look like one of them”: Disclosure of Mental Illness in the Workplace as an Ongoing Dilemma.**

Principal contact: Debbie Peterson

Email: [debbie.peterson@otago.ac.nz](mailto:debbie.peterson@otago.ac.nz)

Author: Peterson D, Currey N, Collings S.

Summary: The decision to disclose a mental illness is a dilemma throughout the employment process, not just a problem for the beginning of an employment relationship.

Objectives: The purpose of this study was to describe the pressures surrounding disclosure of a mental illness in the New Zealand workplace.

Study design: Using qualitative methods and general inductive analysis, the study included twenty-two employed New Zealanders with experience of mental illnesses.

Results: Fear of discrimination, and legal, practical and moral pressures contributed to tension between workplace disclosure and non-disclosure of a mental illness.

Conclusions: Employees with experience of mental illnesses and their employers need to be able to access advice throughout this process on disclosure issues. Disclosure is irreversible; therefore, the decision to disclose, and its timing, must remain at the discretion of the employee.

<http://www.tepou.co.nz/library/research/87>

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### **Latest Te Pou Resources**

National Outcomes Collection: Clinicians Reference Guide Version 2.0 (2012)

<http://www.tepou.co.nz/library/tepou/national-outcomes-collection-clinicians-reference-guide-version-20-2012>

Published 16 July 2012 by **Te Pou**

GPS 2012 National Fono Outcomes Summary Report

<http://www.tepou.co.nz/library/tepou/gps-2012-national-fono-outcomes-summary-report>

Published 2 July 2012 by **Te Pou**

## Latest Additions to Database of New Zealand Mental Health Research

[Could an advance practice nurse improve detection of alcohol misuse in the emergency department?](#)

3 July 2012 by **Anthony O'Brien**

[Predictors of Inadequate Prenatal Care in Methamphetamine-Using Mothers in New Zealand and the United States](#)

3 July 2012 by **Min Wu**

[Transition to parenthood and substance use disorders: Findings from a 30-year longitudinal study](#)

3 July 2012 by **David M. Fergusson**

[Harmful drinking and talking about alcohol in primary care: New Zealand population survey findings](#)

3 July 2012 by **James Foulds**

[Future of God in recovery from drug addiction.](#)

3 July 2012 by **Doug Sellman**

[Is routine alcohol screening and brief intervention feasible in a New Zealand primary care environment.](#)

10 July 2012 by **Heather Gifford**

[A Literature Review: Mental health & alcohol and other drug screening, assessment and treatment](#)

10 July 2012 by **The Werry Centre**

[Mental Health and Alcohol and Drug Co-existing Disorders: An Integrated Experience for Whaiora?](#)

10 July 2012 by **Ian MacEwan**

["You don't look like one of them": disclosure of mental illness in the workplace as an ongoing dilemma.](#)

10 July 2012 by **Debbie Peterson**

[Patterns of mental health service contact before and after forensic mental health contact in New Zealand](#)

10 July 2012 by **James Cavney**

[Factors affecting the practice of seclusion in an acute mental health service in Southland, New Zealand](#)

10 July 2012 by **Stephen Tyrer**

[Which family – What therapy: Maori culture, families and family therapy in New Zealand](#)

10 July 2012 by **Shailesh Kumar**

[A Humanistic Approach to Addressing the Needs of Maori Homeless People With Mental Health Concerns](#)

10 July 2012 by **Darrin Hodgetts**

[The Acute Impact of Risk Information for Schizophrenia: Ethical Implications of Psychometric Screening](#)

11 July 2012 by **Richard Linscott**

[Modeling the geographic distribution of serious mental illness in New Zealand](#)

11 July 2012 by **Christopher G. Hudson**

[Chaplaincy and Mental Health Care in Aotearoa New Zealand: An Exploratory Study](#)

11 July 2012 by **Lindsay B. Carey**

[Body checking and avoidance in women: Associations with mental and physical health-related quality of life](#)

11 July 2012 by **Janet D. Latner**

[Negative childhood experiences and mental health: theoretical, clinical and primary prevention implications](#)

11 July 2012 by **John Read**

[The New Zealand Index of Neighbourhood Social Fragmentation: integrating theory and data](#)

11 July 2012 by **Vivienne Ivory**

[How to use interpreters in general practice: the development of a New Zealand Toolkit](#)

11 July 2012 by **Ben Gray**

[Understanding inpatient violence in a New Zealand child and adolescent psychiatric setting](#)

11 July 2012 by **Kirsten van Kessel**

[Access to Private and Confidential Health Care Among Secondary School Students in New Zealand](#)

11 July 2012 by **Simon Denny**

[An examination of Child and Adolescent Mental Health Services for Maori rangatahi \[youth\]](#)

17 July 2012 by **Kahu McClintock**

["Confronted with paperwork": Information and documentation in peer support](#)

17 July 2012 by **Anne Scott**

[Should New Zealand introduce mandatory reporting by general practitioners of suspected child abuse? No](#)

17 July 2012 by **Felicity Goodyear-Smith**

## **8. Matua Raki**

### **Specialty Nursing Competency Framework**

These documents have been the collaborative work of a number of dedicated nurses working in and supporting the addiction sector.

The concept of the *Aotearoa New Zealand Addiction specialty nursing (knowledge and skills) competency framework (Addiction nursing framework)* arose in 2008 out of the Matua Raki report: *Development of the advanced practice nursing strategy for the addiction treatment sector: a discussion document* (Deering, 2008).

A key recommendation in this report was the need to develop addiction specialty advanced practice nursing standards whilst describing the continuum of nursing practice and the role of the specialist level nurse within the addiction treatment context.

This framework has now received endorsement from the New Zealand National Nursing Consortium: Practice Standards Endorsement Committee.

*The Implementation of Advanced Practice Roles (Nurse Specialist and Nurse Practitioner) in Addiction Treatment Guidance for Service Managers and Directors of Mental Health Nursing* is an accompanying document highlighting the requirements for implementation of advanced nurse practitioners. This includes:

- the identification of the educational pathway for nurse specialist and nurse practitioners
- the need for a supportive organisation/service
- a developmental pathway for nurses on entry to working in the addiction specialty field.

<http://www.matuaraki.org.nz/AOD-Nursing/specialty-nursing-competency-framework.html>

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### **Guide to the Addiction Sector**

Matua Raki has developed the Guide to the Addiction Sector guideline to reflect current practice and service delivery in Aotearoa New Zealand. This guideline has been written for people new to the sector and the allied workforce. For a hard copy please contact [patricia.rainey@matuaraki.org](mailto:patricia.rainey@matuaraki.org) This e-mail address is being protected from spambots. You need JavaScript enabled to view it or download

<http://www.matuaraki.org.nz/images/stories/projects/Guidelines/a-guide-to-the-addiction-treatment-sector-in-aotearoa-new-zealand.pdf>

### **Consumer Involvement in Education**

The presentations used in the 2012 Leadership Seminars provided by Matua Raki and NCAT are now available for download.

This discussion paper about consumer involvement in the training of addiction practitioners has been developed and published for education and tertiary training providers. The aim of the paper is to acknowledge current consumer participation and to explore areas for future development. It is hoped that the paper will encourage debate about the need to involve consumers in education in a supported, comprehensive and planned manner.

[http://www.matuaraki.org.nz/images/stories/projects/Consumer/consumer%20involvement%20in%20education\\_finalmay2012.pdf](http://www.matuaraki.org.nz/images/stories/projects/Consumer/consumer%20involvement%20in%20education_finalmay2012.pdf)

## **9. Werry Centre**

### **Skate into Skills...Cognitive Behaviour Therapy Skills for Therapists who work with Kiwi Kids and Teens**

Friday 5 October 2012, 9am – 4pm, Te Puke (Venue to be confirmed)

CBT is an evidence based therapeutic approach focusing on thoughts, emotions and behaviours to address mental health issues. Traditionally CBT training has been adult focused. Here is an opportunity to learn CBT skills for working with children and adolescents in the New Zealand context.

Closing dates for registrations **Wednesday 26 September 2012**

For more information, please go to

[http://www.werrycentre.org.nz/site\\_resources/library/Training\\_and\\_Events/CBT-Training.pdf](http://www.werrycentre.org.nz/site_resources/library/Training_and_Events/CBT-Training.pdf)

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### **Midlands CAMHS Regional Forum Rotorua**

Friday 26 October 2012, 9am – 4pm, Venue to be confirmed

A full programme will be available shortly. Cost : Free

Registration is essential.

Closing dates for registrations **Wednesday 17 October 2012**

[http://www.werrycentre.org.nz/site\\_resources/library/Training\\_and\\_Events/Midlands-Forum-Rotorua.pdf](http://www.werrycentre.org.nz/site_resources/library/Training_and_Events/Midlands-Forum-Rotorua.pdf)

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### **Navigating Pasifika Wellness: Integrating Knowledge and Skills into Practice**

Wednesday 14 November 2012, 8.30am – 4pm

University of Auckland Tamaki Campus, Building 730 – Room 220, 261 Morrin Road, St Johns, Auckland

[http://www.werrycentre.org.nz/site\\_resources/library/Training\\_and\\_Events/2012\\_11\\_14\\_Pacific\\_CAMHS\\_Fone.pdf](http://www.werrycentre.org.nz/site_resources/library/Training_and_Events/2012_11_14_Pacific_CAMHS_Fone.pdf)

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### **Young People, Mental Illness and Employment**

Tuesday 07 August 2012, 1.30pm – 3pm, Auditorium, 3rd Floor, Ministry of Social Development, Bowen Street, Wellington

The global economic crisis has shown a startling rise in youth unemployment. We ignore the social costs of high youth unemployment at our peril, particularly for young people with mental health issues. Youth with mental health needs often face unemployment, under-employment and difficulties when they enter the workforce. If you are a practitioner, policy maker or concerned citizen you are invited to attend a presentation by Associate Professor Eoin Killackey and take part in conversation on this topic.

[http://www.werrycentre.org.nz/site\\_resources/library/Training\\_and\\_Events/Youth/YouthEmploymentinvite.pdf](http://www.werrycentre.org.nz/site_resources/library/Training_and_Events/Youth/YouthEmploymentinvite.pdf)

## **“In Confidence: Confidentiality and Social Work with Young People”**

Date: 3 July 2012 Masters student seeking social workers to participate in a research project.

Helena Cody, a masters student in social work would like to invite social workers in your network to participate in an exploratory study of how social workers make decisions, and what resources they access, when faced with a dilemma that may necessitate a breach of confidentiality. This will be a general discussion and does not ask for specific case examples or details of times when a breach of confidentiality occurred.

Please feel free to contact Helena if you have any queries or concerns regarding the request or research.

[helenaauton@hotmail.com](mailto:helenaauton@hotmail.com)

0212241646.

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## **10. New Zealand Guidelines Group**

### **Practice Tools**

#### Autism Spectrum Disorder

This website contains information drawn from the evidence based guideline 'New Zealand Autism Spectrum Disorder Guideline'. In particular, it provides guidance on recognition and referral of autism spectrum disorder (ASD) for people working in health, disability, education and community settings

<http://www.asdguideline.com/>

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## **11. Skylight**

### **Supporting Siblings**

Skylight knows that the brothers and sisters of children or teens who have a serious illness, a chronic health condition or a disability have their own unique needs too. Research from around the world lets us know that supporting them well is very, very important.

On this page we have brought together all kinds of information that may be helpful for siblings - and those who care about them

- [I have a Special Brother or Sister...and I'm Going to Tell You About Me](#) Skylight (NZ) - an interactive booklet for children to work through with a caring adult. For children 4 - 14 yrs.
- [A Pocket Size Guide to Brothers and Sisters](#) (NZ) by IHC
- [Side by Side](#) (Australia - NSW) Growing up with a brother or a sister with a disability - a handbook
- [Go back to the Jungle Tiger!](#) for younger children (Skylight - Carol Jenkins)  
[It's Mostly Good Having Lucy for a Sister](#) for children 6-12 (Skylight - Carol Jenkins)  
[Jamie - a story about a sister leaving home](#) for young people 12-18 (Skylight - Carol Jenkins)

<http://www.skylight.org.nz/Siblings+Support+Page>

## **12. Kina Trust**

### **Seminars, Trainings, and Additional Services**

Kina Trust views addictions as family and community issues and aims to promote Family Inclusive Practice (FIP) through a number of mechanisms.

These include:

- Advocacy at policy and practitioner levels.
- Programme and service development.
- Accessing and distributing resources.
- Accessing and aligning with current research.

Email: [info@kinatrust.org.nz](mailto:info@kinatrust.org.nz)

<http://www.kinatrust.org.nz/>

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## **13. ALAC**

### **Changes for ALAC**

From 1 July 2012, the new **Health Promotion Agency (HPA)** took over the functions of ALAC, the Health Sponsorship Council (HSC) and some programmes previously delivered by the Ministry of Health.

The Crown Entities Reform Bill authorising the changes to ALAC has now been passed by Parliament. The Bill was split into three parts. The part containing the changes for ALAC is known as the New Zealand Public Health and Disability Amendment Act 2012.

The Act establishes the HPA and disestablishes ALAC and the HSC. The Board of HPA will have at least five and not more than seven members all appointed under Section 28(1) (a) of the Crown Entities Act 2004.

The functions of HPA are that it will lead and support activities for the following purposes:

- promoting health and wellbeing and encouraging healthy lifestyles
- preventing disease, illness, and injury
- enabling environments that support health and wellbeing and healthy lifestyles
- reducing personal, social, and economic harm.

The HPA also has the following alcohol-specific functions:

- giving advice and making recommendations on the sale, supply, consumption, misuse and harm of alcohol
- undertaking or working with others to research the use, public attitudes, and misuse of alcohol.

For a copy of the new Act go to <http://www.legislation.govt.nz/act/public/2012/0041/latest/DLM4047310.html>

<http://www.healthpromotion.org.nz/>