

Access and Choice Programme: Update April 2023

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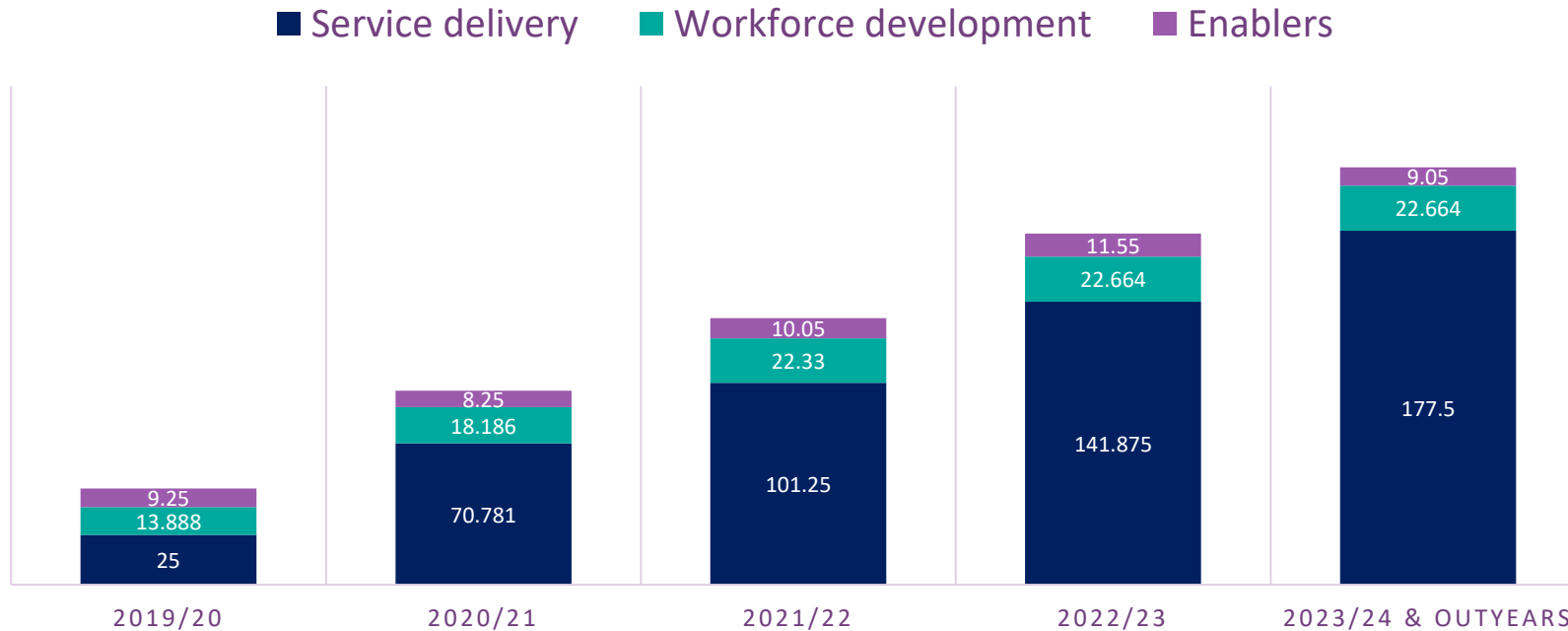
Access and Choice

Primary mental health and addiction services

Free to anyone whose thoughts, feelings or behaviours are affecting their health and wellbeing

- Support is available in many different settings and is flexible to meet people's holistic needs.
- The programme reflects local community needs but provides consistent support across the country.
- No referral criteria
- Easy to access early intervention

Access and Choice Funding Profile – 5 Years (and ongoing)



Implementation

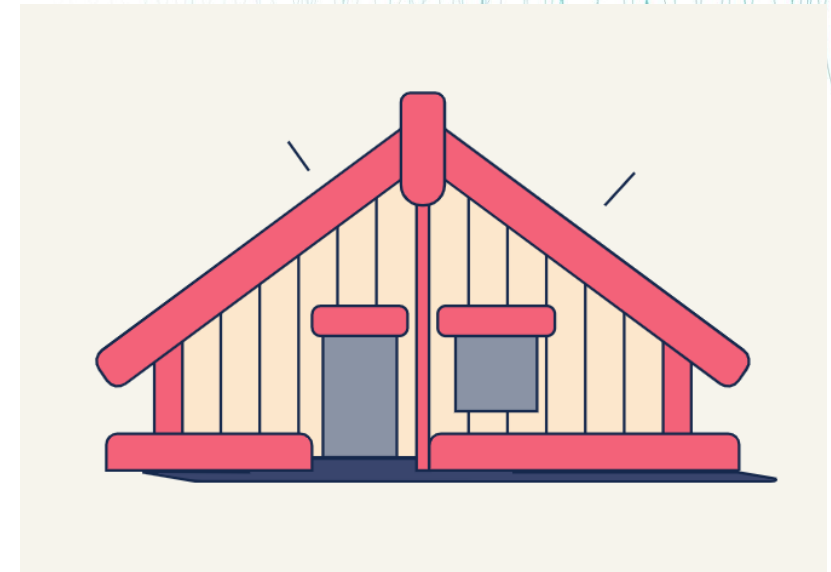
- Phased roll out over 5 years
- Final year 2023/24
- Providers selected/sequenced via RFP
- Funding allocated on a population basis

The background is split into two main horizontal sections. The top section is a light teal color and features a repeating geometric pattern of white lines forming diamonds and zig-zags. The bottom section is a dark blue color and features a pattern of white, thin, vertical lines that appear to be hanging down from the top section, resembling a fringe or a curtain. The text 'The services' is centered in the dark blue section.

The services

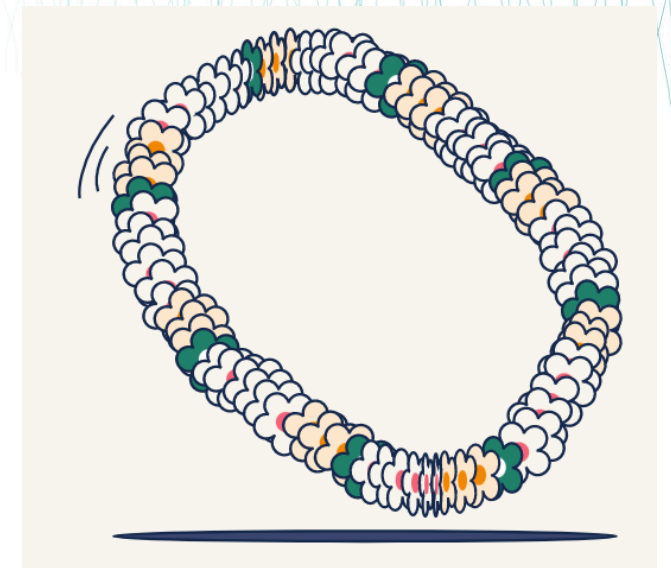
Kaupapa Māori wellbeing services

- Design Informed by a series of hui Māori-a-motu
- For all Ages
- Throughout the country
- Delivered from a Māori world view – Te Ao Māori



Pacific-led wellbeing services

- **Design based on series of Fono**
- **For all Ages**
- **Targeting areas with largest Pacific Populations**
Counties Manukau, Auckland, Waitemata, Waikato, Hawkes Bay, Capital and Coast, Hutt Valley, Canterbury and Southern Districts
- **Integrate Pacific cultural and spiritual values, protocols and practice, with clinical evidence informed practice.**



Youth wellbeing services

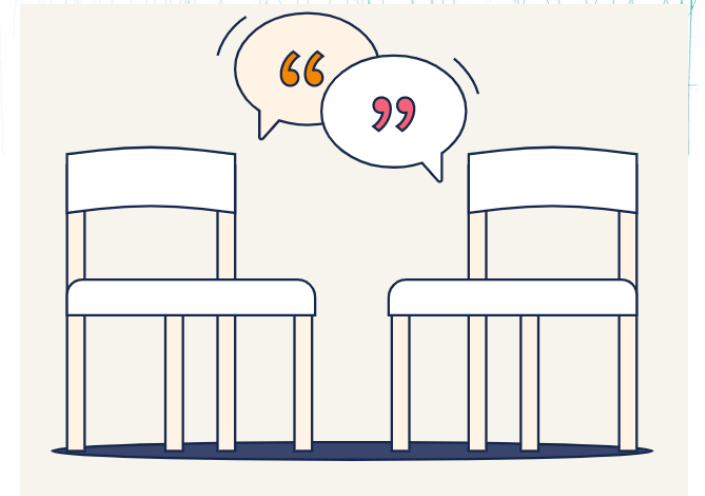
- **First point of contact services for young people aged 12-24 years**
- **Variety of service options**
- **Throughout the country**
- **Includes Rainbow Youth peer services**



Wellbeing services in general practice

(Integrated Primary Mental Health & Addiction Services)

- Led by each area's DHB/Te Whatu Ora district
- Characteristics
 - Expanded general practice team
 - Enhanced confidence and competence of team
 - Strengthened integration between general practice & secondary services
 - Strengthened links with social services



Other primary level initiatives

- **Piki Pilot** Integrated therapies for 18-25 year olds in Wellington, Wairarapa and Hutt Valley
- **Mana Ake** School based mental health and wellbeing supports for years 0-8 in Canterbury and Kaikoura – with co-design commencing in 5 new areas
- **School Based Health Services** Expanded to decile 5 schools
- **Telehealth** Significant uplift to telehealth call volumes

Why general practice?

(Integrated Primary Mental Health & Addiction Services)

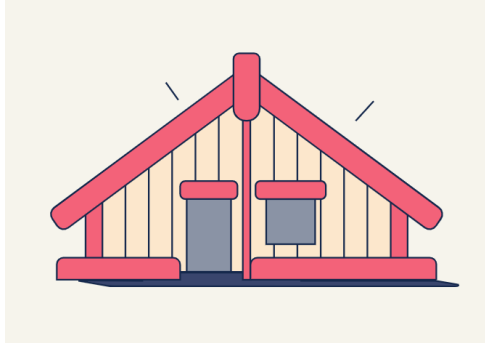
- 4.8 million enrolled population
- Estimated 74% access services annually
- Ideal opportunity to uncover issues early, even before people are aware, during routine care
- Psychological wellbeing, health behaviours, physical and social wellbeing are not separate
- Leverage ongoing contact to check in on progress
- Build general practice awareness and responsiveness



Reach and Impact

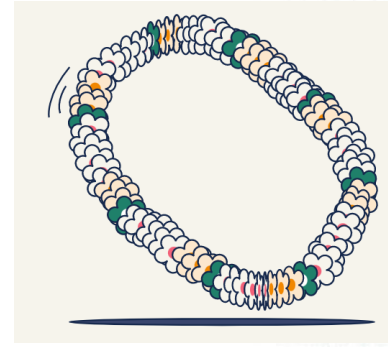
Access and Choice Programme

- Over 710,000 sessions to date
- Based on second quarter, estimated annual access of 160,000 people
 - Māori 26%
 - Pacific people 11 %
 - Aged 12 – 24 (youth) 20%



Kaupapa Māori Services

- 29 services across 19 DHB areas
- Over 52,000 sessions to date
- 4,400 people seen in December



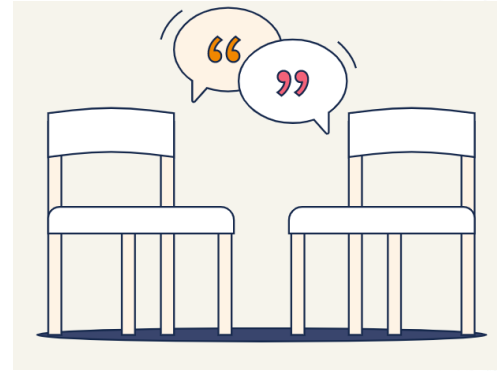
• Pacific Services

- 9 services in the 7 DHB areas with the highest Pacific Population (including a perinatal service)
- Around 36,000 sessions to date
- Around 1,000 people seen in December



Youth Services

- 21 services across 19 DHB areas
- 1 national service
- Over 64,000 sessions delivered to date
- Around 1,600 young people seen in December



Integrated Primary MH&A Services

- Services established in 19 DHB areas
- 436 practices (56% of enrolled population)
- Over 560,000 sessions to date
- Around 15,600 people seen in December

IPMHA Nationwide coverage

2.7 million enrolled
population

- Area outside functional urban area
- Small regional centre
- Medium regional centre
- Large regional centre
- Metropolitan area



IPMHA evaluation quotes

Decreased AOD use

But the best thing for me was I didn't revert back to my old drug taking ways... cannabis was a big thing, too. Yeah, in all honesty, I did that when my grandad passed away. ... So I just eliminated that. So I'm on top of a quite a lot of it now, aye.

Reducing isolation

We also did the walking group around the lake it was the same group of ladies, I've met some amazing people through that group.

Helping with Whanau

She helped out my 10 year old, ... made her feel like there was some one she could talk to if needed.

Building skills and resilience

[The HIP] gave me exercises, like the grounding techniques and movement exercises that work with your nervous system. Doing those gave me a really big sense of relief, especially initially when I was definitely not feeling very good. The relief in that was so helpful

Positive life changes

A long time I had a dream and it was to change careers. So I took her (HC) advice and I went around to [businesses] put my name out there, told them ... it's something I've always wanted to do all my life. I'm actually there now. ... I love it.

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Some key considerations

Some key considerations for Addiction Leadership

- Opportunity for earlier recognition and to enhance readiness for change
- Avenue for building general practice capability in IPMHA
- Expanded AOD practitioner opportunities in primary services
- Frequency of work on AOD issues unknown

Some key considerations for Addiction Leadership

Data capture limitations

- Summary level data reporting only for KM, P, youth but NHI-based reporting planned
- NHI-based reporting for IPMHA
 - Single presenting issue historically
 - Anecdotally under-reporting for AOD contribution to issues
 - Potential for future improved reporting

Some key considerations for Addiction Leadership

**Building a seamless
continuum of services:
How can you help?**

- Know the services available (website)
- Build relationships and share information
- Develop pathways for seamless access
- Contribute to capacity building:
access to your advice/support/skill-
building

The background features a dark blue field with teal and white geometric patterns. The top half is filled with a repeating pattern of concentric diamonds and triangles. The bottom half is filled with a dense, vertical pattern of thin white lines that resemble grass or reeds.

Thank you

For further information
<https://www.wellbeingsupport.health.nz/>