

6th December 2021

s9(2)(a)

Email s9(2)(a)

Dear s9(2)(a)

Official Information Act Request for – Mental Health Waiting Lists – Follow Up

I write in response to your follow up email in relation to your Official Information Act response sent to you on the 6th October 2021, you requested the following follow up information:

- **Can you please provide me with the number of people on the following waitlists by Tuesday morning:**
- **For outpatient adult mental health services**
- **For outpatient youth/children mental health services**

Counties Manukau Health Response:

In our response letter to you on the 5th October 2021 we advised that, CMDHB Mental Health Services maintains a waitlist for clients following the first assessment appointment and recommended for individual or group psychological intervention however, these waitlists are maintained at a team level and not available as collected data. The following table provides the number of open referrals for outpatient services for both Adult Mental Health and Child and Youth Mental Health as at 30th November 2021. Please note that an open referral is defined as a request for service that has been received and accepted, with an intention to provide an appointment and/or offer a service.

During the Covid-19 lockdown period a number of clients who had been referred and accepted into the service (in both adult and child/ youth services) advised us that they preferred not to be seen face to face and instead opted for clinical appointments to occur via zoom or telephone (noting that zoom contacts are classed as face to face, but phone are not). There is wide variation across the Counties Manukau region in regards to accessibility to internet/ devices, therefore some clients only have access to telephone. Services have offered and continued to provide face to face appointments through lockdown (initially in level 4 alert level restriction, face to face contact was predominately for acute presentations, however availability of face to face appointments increased as the lockdown progressed).

Open referrals for Counties DHB outpatient services for Adult Mental Health and Child and Adolescent Mental Health services as at 30th Nov 2021.				
Service	Open referrals with no face-to-face contacts	Open referrals seen once and waiting for second appointment	Open referrals with more than two face-to-face contacts	Total open referrals
MH Adults Services	453	253	2836	3542
MH Child and Adolescent Services	237	195	923	1355
Total	690	448	3759	4897

This table shows that the Adult Mental Health Service had 3,542 service users with open referrals to the service as at 30th November 2021, 87% (n=3,089) of whom had been seen face-to-face. The Child and Adolescent Service had 1,355 service users with open referrals to the service as at 30th November 2021, 82% (n=1,118) of whom had been seen face-to-face. All referrals are triaged at the time they come into the service, urgency and time for response is determined accordingly.

Adult referrals are reviewed and triaged 7 days a week and depending on the triage pathway may go down the acute pathway (7 days a week) or be passed onto the Community Team for management (working week Monday-Friday), these service users may be seen by Mental Health Services or redirected to their General Practitioner. Referrals to the Child and Adolescent Mental Health service are reviewed daily, Monday-to-Friday, and urgency is determined by a team of mental Health professionals in discussion with the young person and/or their family/whaanau, acute Child and Adolescent referrals are reviewed and responded to 24/7.

It is important to note that not all people referred to mental health services require more than one contact. The needs of each individual are determined clinically, in consultation with the person (and, where appropriate, their family/whaanau). Some needs may be best met by another service or agency. Others may choose not to continue their contact with the service.

Access Wait Times

Access times for secondary MH&A services are listed below in table 2 for the period July 2021 to October 2021, this include percentages for both new referrals and all referrals. The target for the 3-week period is 80% and 8-week is 95%.

	Child & Youth		Adults	
	< 3 weeks	< 8 weeks	< 3 weeks	< 8 weeks
All Referrals				
Jul-21	72%	92%	87%	96%
Aug-21	79%	97%	87%	97%
Sept-21	71%	95%	91%	99%
Oct-21	77%	94%	91%	97%
New Referrals				
Jul-21	73%	90%	82%	93%
Aug-21	72%	90%	81%	93%
Sep-21	78%	93%	87%	97%

Oct-21	78%	93%	88%	97%
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Table 2

Adult Mental Health services receive the highest proportion of referrals for the division and have consistently achieved the 3-week target. In the last 6 months the service has fallen short of achieving the 95% of service users to be seen within 8 weeks. Majority of adult cases not seen within 8 weeks of referral were largely a result of the service not been able to successfully contact the person referred. At present the service initially contacts new referrals by phone followed by letter communication to the service user and the referrer i.e. General Practitioner.

The access times for Child and Adolescent Mental Health Service (CAMHS) have not been met in every area. Demand for CAMHS is increasing and the service is now receiving up to 220 new referrals a month. Furthermore, young people are increasingly presenting with significant self-harm and suicide ideation and the team are meeting response times for acute risks (24-72hours). As a result of this increased demand for acute response, non-urgent referrals are currently experiencing increased wait for initial assessment. Some inefficiency exists around screening questionnaires required to be completed by the family and school prior to an assessment for conditions such as Autistic Spectrum Disorder (ASD) or Attention Deficit Hyperactivity Disorder (ADHD). Collating this information is resulting in added delays for the initial assessment and the service is currently working to identify alternative ways to collate this information. A Neuro-developmental Pathway Working Group has been established to review the pathway and provide recommendations for streamlining and the CAMHS team are working on a joint project with Kidz First looking at a MH&A pathway whereby children between the age of 4 and 8 years referred for a neuro-developmental assessment will be seen by Kidz First.

I trust this information answers your request. You are entitled to seek a review of the response by the Ombudsman under section 28(3) of the Official Information Act. Information about how to make a complaint is available at www.ombudsman.parliament.nz or Freephone 0800 802 602.

Please note that this response or an edited version of this may be published on the Counties Manukau Health website. If you consider there are good reasons why this response should not be made publicly available, we will be happy to consider this.

Yours sincerely



Fepulea'i Margie Apa
Chief Executive Officer
Counties Manukau Health