

A Scoping Exercise for High and Complex Needs (Mental Health) Provision in the Waikato District Health Board Area

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Introduction

This project arose as part of the Request for Proposal process regarding the Mental Health Blueprint allocation 2003 / 2004 for the Waikato District Health Board. Te Runanga o Kirikiriroa ('the Runanga') was short listed for this project in October 2003. A presentation was made to the Waikato District Health Board ('Waikato DHB') on November 26 2003 regarding how the Runanga would complete this project. Waikato DHB contacted the Runanga as a successful applicant in mid-December 2003. While the Runanga began to establish documentation for this project shortly after notification, the formal signed agreement did not occur until the middle of February between the Waikato DHB and the Runanga. The project ended with the completion of this report.

Aims

The overarching aims of the High and Complex Needs ('HCN') Project ('the project') are to:

- Investigate the establishment of better services for people with high and complex needs; and,
- To provide local options to address the needs of an identified group of high and complex service users in the Waikato DHB.

Objectives

In order to complete the aims, the project focused on 8 key objectives. These were:

- To identify key stakeholders and collaborators for the purposes of the project;
- To organize and implement stakeholder's and collaborators hui;
- To identify people with HCN by description and definition;
- To identify people with HCN by quantity;
- To identify people with HCN regarding their needs;
- To investigate current HCN service provision;
- To detail local options and guidelines for future and improved service provision to people with HCN and within the geographical boundaries of the Waikato DHB; and,
- To produce a report detailing all of the above information to the Waikato DHB.

Research Methodologies

There were three key approaches used to complete this project. These were:

- The kaupapa Maori approach (the predominant method used);
- Key qualitative components; and,
- Key quantitative components.

Key Research Steps

Upon commencement, the project was organised into key research steps. These included:

- A scoping exercise;
- Literature review;
- Identification of service providers;
- Regional hui;
- Focus groups;
- Interviews;
- Data analysis; and,
- Findings.

Data Collection Methods

Data collection for this project occurred in three distinct ways. Firstly, through the review of literature, secondly, through information from focus groups held at four regional hui and thirdly, through the use of interviews of both service providers and clients of services in the Waikato DHB catchment area.

Key Findings

Based on the evidence and the data analysis, there were some clear indications regarding HCN clients. These findings have been separated into the following key categories.

- *Definition* - On a broad basis, HCN were seen as involving a range of factors and not solely dependent on a clinical focus.
- *Quantity* - It was revealed that a proportion of 228 clients in the Waikato DHB were identified as having HCN and that this population generally did not have dedicated resources for staffing.
- *Client Assessment* - Of the services surveyed, a 'general form of assessment' was the predominant method used. The majority of service providers lacked any 'specific form of assessment' for this client group.
- *Modes of Delivery* - Generally, service providers were able to identify a broad range of service options available to HCN clients.
- *Trends* - Generally there had been an increase in HCN cases. Predominant reasons for this center around social and clinical factors.
- *Collaboration* - Generally there were a range of strengths identified regarding collaborative service provision. However, the key limitation to this has been a lack of a coordinated approach of the same.
- *Future Options* - Future options center on seven key areas ranging from accommodation through to the independence of the client.

In conclusion it is clear that there are a range of positive components regarding service provision to this specific population. In order to increase effective and appropriate service provision in this area, a range of options and key issues to address have become evident. This is the focus of the final section regarding recommendations.

Recommendations

Based on data collation and analysis of information regarding the issue of high and complex needs, we recommend the following:

- 1) High and complex need is defined more broadly than the Working Group definition;
- 2) That a greater ability for input by service providers in the mental health area be provided, to determine a definition that will be widely used and accepted across service providers of the Waikato DHB region;
- 3) Consideration is given to an inclusive definition regarding high and complex needs that considers a clinical, Maori, community and rural approach equally;
- 4) That an overall scoping exercise, identifying quantity and quality of mental health services is conducted to fully ascertain service provision in the Waikato DHB area. We recommend this in order to ascertain whether or not there is an appropriate number and quality of services for the purposes of the high and complex needs population;
- 5) Once the above scoping exercise is completed, that a carefully co-ordinated approach to service delivery in this area be developed, based on general agreement across providers;

- 7) Further work be conducted in the area of assessment, once a definition suitable to mental health providers generally is completed. In particular that the viability of assessment options appropriate to services be the focus of such work;
- 8) The issue of staffing be given further consideration when looking broadly at the issue of high and complex needs populations in the Waikato DHB area;
- 9) A further study regarding rationale for high and complex needs increases is conducted to further ascertain reasons for an increase in this sector of the population;
- 10) Further work is completed to support a collaborative approach to service provision in the area of both mental health and high and complex needs. In particular, that focus is given to appropriate coordination across services;
- 11) Further investigation occur regarding the efficacy of current rural service provision in the mental health
- 12) sector to determine whether there are adequate resources and services in these areas; and,
- 13) Careful consideration is given to future treatment options as outlined by service providers of the Waikato DHB area.