

Aide-Mémoire

Yellow Brick Road meeting on 29 February 2024

Date due to MO:	26 February 2024	Action required by:	29 February 2024
Security level:	IN CONFIDENCE	Health Report number:	H2024035207
То:	Hon Matt Doocey, Minister for Mental Health		
Consulted:	Health New Zealand: □ 1	Māori Health Authority: □	

Contact for telephone discussion

Name	Position	Telephone
Robyn Shearer	Deputy Director-General, Clinical, Community and Mental Health Te Pou Whakakaha	s 9(2)(a)
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Date due: 26 February 2024

To: Hon Matt Doocey, Minister for Mental Health

Security level: IN CONFIDENCE Health Report number: H2024035207

Details of meeting:

9-9.45am, Thursday, 29 February 2024, 4.1R EW Parliament

Purpose of meeting:

Yellow Brick Road is a national organisation providing mental health support for families/whānau that have a loved one experiencing mental health challenges. John Moore, CEO, will be attending.

Yellow Brick Road would like to discuss: family/whānau voice in the health system; a national approach to family/whānau support; prevention services and wellbeing promotion; and quality of life approaches to suicide prevention.

Comment: About Yellow Brick Road

Yellow Brick Road is a national organisation offering mental health support for families/whānau that have a loved one experiencing mental health challenges. It was formerly known as Supporting Families/Whānau NZ, and Schizophrenia Fellowship prior to that. It has over 40 years of experience working with people across New Zealand, with eight regional offices.

What it delivers

Yellow Brick Road provides a variety of support options and educational resources for families/whānau, including:

- one-on-one and group support services
- educational programmes on mental health and wellbeing
- advocacy for whānau having difficulty accessing services
- sector intelligence
- peer support groups
- suicidal distress and postvention support
- wellbeing webinars and guides
- workforce education around the needs and experiences of families/whānau.

An example of Yellow Brick Road's work is a trial of two collaborative pilots in the Canterbury region that support families/whānau, where a child or young person is engaged with specialist child and adolescent services or on a waiting

Aide-Mémoire: H2024035207

list. This involves Yellow Brick Road, Pathway's Real service¹, and Health New Zealand's Child, Adolescent and Family (CAF) services. Yellow Brick Road indicates this service has strengthened relationships between organisations and produced better outcomes for young people and their families/whānau.

Relationship with health entities

Prior to the health reforms, Yellow Brick Road was contracted to provide the Ministry with sector intelligence. Shortly it will be providing its final report summarising the perspectives of whānau and whānau support providers on the state of mental health services during 2023. This and other sector intelligence supports the Ministry in its monitoring and oversight role.

Historically, Yellow Brick Road received a substantial proportion of its funding through District Health Board contracts, and it continues to receive funding from Health New Zealand at a District level. The work has included family/whānau support embedded within specialist services.

Topics Yellow Brick Road is likely to raise

Issues for their organisation/ national voice

As a national voice for whānau, Yellow Brick Road will likely speak to the value of family/whānau perspectives being included in the work of the Ministry and Health New Zealand. Both agencies strongly endorse the importance of whānau voice and a coordinated national approach, with Yellow Brick Road a contributor to the Ministry's mental health and addiction Lived Experience Knowledge Network.

Yellow Brick Road may raise concerns about its ability to influence government without a national health contract, and it has previously advocated for national-level funding from Health New Zealand rather than District-level contracts. Its overall service provision is also affected by increases in costs required to provide these services, as well as a decrease in its ability to secure philanthropic funding.

Funding for community-based organisations falls within the remit of Health New Zealand. This includes development of eligibility criteria and processes to meet the Government's commitment to establish a Mental Health Innovation Fund. If the issue of funding is raised, we recommend you encourage Yellow Brick Road to continue to engage with Health New Zealand in relation to operational matters and future funding opportunities.

Whānau voice in the health system

Yellow Brick Road will likely raise concerns that individuals, particularly those with complex and enduring needs, and their families/whānau, are not sufficiently able to influence their care and support.

1

¹ https://www.pathways.co.nz/real

In particular, Yellow Brick Road may raise perceptions that, when tāngata whaiora² are placed under the Mental Health (Compulsory Assessment and Treatment) Act 1992, the Privacy Act 2020 becomes a barrier to family/whānau engagement with health professionals. Lack of open communication reduces preparedness for a return to the community.

Work to repeal and replace the Mental Health Act includes attention to more robust involvement of family members in a person's care. This will include respecting the views of tangata whaiora as to who they identify as their family, and how they want them to be involved.

Prevention, services and wellbeing promotion

Concerns that Yellow Brick Road may raise on behalf of families/whānau include:

- insufficient resourcing levels in clinical and community services
- lengthy wait times for GP appointments and other services, including dental care and optometry, resulting in issues and needs worsening
- need to train health workforce in meeting family/whānau needs
- family/whānau sense of abandonment when, on discharge, they feel they are left 'holding all the risk' with limited support
- the shortage of housing and respite facilities.

Your priorities around improving access and timeliness, growing and sustaining a quality workforce, and strengthening prevention and early intervention, as well as working across government in areas such as housing, will ensure a focus on a number of these concerns.

Quality of life approach to suicide prevention

Yellow Brick Road's reference to a quality of life approach may mean attending to the underlying pressures in people's lives which cause distress (such as unemployment and financial insecurity). Suicide prevention takes into account the value of strong communities and whānau that are equipped to recognise and support people experiencing mental distress. Your interest in cross-agency work, community-based responses, and the development of a new suicide prevention plan link to this.

Robyn Shearer

Deputy Director-General

Clinical, Community and Mental Health | Te Pou Whakakaha

Date: 26 February 2024

Aide-Mémoire: H2024035207

3

² People who experience mental distress, gambling or substance-related harm and are seeking wellness or recovery.

Yellow Brick Road talking points

The work of Yellow Brick Road

- It's good to meet with you today. I strongly appreciate the work of community organisations in supporting people and families who are experiencing mental health challenges.
- I know that your organisation has been around for a long time, and I am interested to hear how your work and approach has evolved over that time.
- I have heard that Yellow Brick Road has a collaborative pilot in Canterbury with Pathway and Health New Zealand's Child, Adolescent and Family services. I would like to know more about your goals and learnings from this work.
- I would like to hear your views on the issues families are experiencing in engaging with health services, and what needs to happen to improve family participation in health services.

Priorities for the Mental Health portfolio

- The new Ministerial position for mental health reflects the priority this Government gives to addressing increasing mental health and addiction needs in New Zealand.
- I am committed to ensuring we make traction, with three key priorities being paramount:
 - increasing access to services including improving wait times for health services, supporting community-based responses, and working across government agencies to tackle the broad issues that impact mental wellbeing
 - growing the mental health and addiction workforce including increasing training for core professions such as clinical psychologists, and increasing the important role of newer workforces such as the peer workforce
 - strengthening prevention and early intervention including health promotion, supporting people before their issues escalate, and developing a new suicide prevention plan.
- I recognise that effective engagement between family members and health services is vital, to ensure clinicians get an accurate understanding of the context in which issues are arising, and to ensure that families are best equipped and supported to help their loved ones.

Resourcing for national voice

- I appreciate the role of national community organisations such as yourselves in both providing services and a voice for the populations they serve. I understand you are a valued contributor to the Ministry of Health's mental health and addiction Lived Experience Knowledge Network.
- I am aware that Health New Zealand is currently in the process of recruiting for Lived Experience roles at the national level, which will support considerations about how they will focus on consumer and whānau engagement in the future.
- In terms of funding and contracts for community organisations such as yours, these are operational decisions of Health New Zealand.
- I have asked for a mental health innovation fund to be developed which will support community organisations and look forward to confirming details of this in due course.