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14 February 2022

9(2)(a)



RE Official information request CDHB 10793

I refer to your email dated 28 December 2021 requesting the following information under the Official Information Act from Canterbury DHB.

<https://www.stuff.co.nz/national/health/127387515/mental-health-hospital-beds-could-be-closed-due-to-severe-staff-shortages-in-christchurch>

- **Can CDHB please release correspondence with unions and staff (not individual staff, but group messages), in the 2021 calendar year, about staffing of mental health facilities.**

Please refer to **Appendix 1** that is an email sent to all staff from the Specialist Mental Health Service General Manager Greg Hamilton on 22 December 2021 with the subject Update on staffing.

There has been no other correspondence that is group correspondence. However, going out to individual staff members to determine whether or not the Union has sent group correspondence would be substantial collation and is therefore declined pursuant to 18(f) of the Official Information Act. Any correspondence between unions and staff would be to individual union members.

I trust that this satisfies your interest in this matter.

You may, under section 28(3) of the Official Information Act, seek a review of our decision to withhold information by the Ombudsman. 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 response, may be published on the Canterbury DHB website after your receipt of this response.

Yours sincerely



Ralph La Salle
Senior Manager, OIAs
Canterbury DHB & West Coast DHB

From: Greg Hamilton
Sent: Wednesday, 22 December 2021 5:09 PM
Subject: Update on staffing

Follow Up Flag: Follow up
Flag Status: Completed

Categories: GM - Shared Comms

Tēnā koutou katoa

As many of you will be acutely aware, SMHS currently has significant staffing issues, across both inpatient and community teams. A combination of factors has resulted in significant gaps across the service, in particular, challenges to attract experienced staff across all disciplines. This combined with high demand for services, high acuity in people seeking our assistance and increasing complexity is putting SMHS and whole system under stress.

Firstly, we want to acknowledge and thank-you, we know that you are all going above and beyond to continue to provide services, with many of you working additional shifts, showing willingness to work in areas outside of your usual workplace and those of you in leadership positions are regularly on numbers. You have our absolute and sincere thanks for this. Your commitment to deliver services to people that are experiencing significant mental illness and distress makes all the difference.

We wanted to take this opportunity, to share with you some of the work that the operational leadership and service leadership teams are doing to try and address the issues that we are experiencing in a planned manner. We are also keen to hear from you any ideas that you might have to work collectively to a more sustainable workforce. We will be looking to host some staff forums in the new year, to discuss some of the activities below and get feedback from you. In the meantime, feel free to email members of the Divisional Leadership Team with any other suggestions you may have.

For the immediate response to relieve the pressure, we are focused on two main streams of activity; recruitment, retention and reallocation of resource and managing demand/reducing service delivery. Alongside this, we are also focused on the longer-term opportunities to grow and nurture our people, as well as exploring how we can attract and encourage new talent to study towards becoming our future mental health workforce.

A summary of the activities that we are undertaking in each of these areas is below. What we do know is that any decisions made, particularly in relation to managing demand and reducing service delivery, has consequences for the people that need to access our services. We are also aware that this may cause you concern, in relation to not being able to meet consumer need. These are complex decisions and we do not take these lightly, we are trying to balance the needs of our people and the needs of consumers. We look forward to working with you to try and balance these issues as much as we can.

Recruitment, retention and reallocation of resource:

- **Increase nursing staff recruited into SMHS:**
 - International recruitment campaign, in conjunction with other DHB's
 - Roll out of experienced nurse pathway
 - Rolling advertising for nursing vacancies
 - Engaged with a number of recruitment agencies, nationally and internationally
 - Talent pooling and talent search through Seek Talent Search moving towards an SMHS Nursing talent pool
- **Strengthening of the talent pipeline into SMHS**

- SMHS financially supporting an increase of NESP positions over and above Te Pou funding with enhanced preceptorship support
- Excellent support for students on placement, to encourage return once qualified
- Developing a process of support to single scoped nurses to extend to Mental Health and/or Intellectual Disability nursing scope
- Offers to upskill staff who are interested in temporarily or permanently working in alternative services or clusters

▪ **Review Model of Care:**

- Use of Calderdale Framework to explore options for allied health and other staff groups to further support nursing roles
- Active conversion of RN positions to EN / Hospital Aide (where direction and delegation allows) and moving towards team nursing where appropriate.
- Consideration of flexible rostering practices, ensuring upskilling where needed to allow for people to work across multiple areas in a managed and sustainable way

▪ **Workforce Education, Development and Support:**

- Supporting professional development at all levels of nursing through clinical papers and courses, leadership courses and gaining breadth of experience
- Contracting an alternative provider option for supervision training – both in individual and in group supervision
- Launch next month of Maori Mental Health Nurses Rōpu – Ngā Toka o Te Aratika

Managing Demand / Reducing service delivery:

- Service Leadership teams pro-actively reviewing referral / acceptance criteria
- Service Leadership teams looking at clinical activity that can be put on hold / minimised for a period of time
- Development of an escalation framework to guide increasingly strong steps aligned to variance response management. We are currently consulting with our union partners on this framework
- Divisional and Operational Leadership looking at bed reduction/closure options.

Planned temporary service delivery changes:

These are particularly difficult decision processes due to the impact on consumer care, impact on staff asked to relocate (even temporarily) to other areas and the potential impact on community services when capacity is reduced, however given the current status of staffing the decision has been made to actively look at temporary bed closures and ward relocations. The service leadership teams are working through the implications of this and we will open up discussions with staff and union partners before progressing this.

Thank you again for your ongoing support of the people accessing our services. We welcome any questions or feedback and look forward to seeing you at the forums in the New Year.

Ngā mihi nui

SMHS Divisional Leadership Team: