

Canterbury

District Health Board

Te Poari Hauora o Waitaha

CORPORATE OFFICE

Level 1
32 Oxford Terrace
Christchurch Central
CHRISTCHURCH 8011

Telephone: 0064 3 364 4160
Fax: 0064 3 364 4165
carolyn.gullery@cdhb.health.nz

14 November 2019

9(2)(a)

RE Official Information Act request CDHB 10208

I refer to your email dated 17 October 2019, requesting the following information under the Official Information Act from Canterbury DHB regarding regional mental health services provided by the Specialist Mental Health Service (SMHS) i.e. Child and youth inpatient, Maternal mental health, Eating Disorders and Detox Services etc. Specifically:

1. A list of the services in broad terms. (If the four above is a correct list, this will suffice).
2. Total annual usage (probably bednights) for each.

Please refer to **Table one** (below) for a list of Regional mental health services provided by the Canterbury DHB Specialist Mental Health Service (SMHS).

Table one: Total bed nights (July 2018 – June 2019)

Wards	Bednights
Child & Adolescent Unit	3259
C Ward Eating Disorders	2363
C Ward Mothers & Babies	2200
Kennedy Detox	1724
Grand Total	9546

Note: Bed night totals are based on a midnight count of all patients present.

3. Total annual budget for each.

Please refer to **Table two** (below) for the current financial year budget for these services (2019/2020)

Table two:

Wards	Amount \$\$
Child and Adolescent Unit	\$4,036,749
C Ward	\$2,513,472
Kennedy Detox	\$1,258,666
Grand total	\$7,808,887

4. Usage by people resident around the Southern District Health Board.

Please refer to **Table three** (below) for the usage by people resident around the Southern District Health Board and other South Island districts.

Table three:

All Admissions - July 2018 – June 2019							
Wards	CDHB	SDHB	NMDHB	SCDHB	WCDHB	Other	Grand Total
Child & Adolescent Unit	229	17	4	6	7	2	265
C Ward Eating Disorders	33	9	9		2		53
C Ward Mothers & Babies	110	14	1	2	2	1	130
Kennedy Detox	265	39	25	17	8		354
Grand Total	637	79	39	25	19	3	802

Note: Total admissions of all types including companion babies in C Ward. Some consumers will have multiple admissions within the period, all admissions are counted separately.

5. Any information about non inpatient service offered, and also into the Southern District Health Board Area

6. Any other information that helps in terms of cost and usage.

Model of Care

The South Island Mothers & Babies Service is a specialist perinatal mental health service providing perinatal mental health care to the five District Health Boards of the South Island, incorporating inpatient and outpatient care, education, training and consult liaison, for the treatment of mothers who are pregnant or have babies up to 1 year old. The service operates as a hub and spoke model, with the Mothers and Babies Service acting as a centre of expertise, providing treatment, supervision, clinical consultation and input into workforce development in perinatal care in the South Island. The goal is that every mother with severe mental health problems in the South Island has access to appropriate specialised care.

The Mothers and Babies Service has a strong regional component which includes an active 'outreach' service consisting of at least two visits a year for education and training to all the DHBs which are often attended by NGOs, midwives and other professions.

The service provides availability for consultation by phone or videoconference for example, prescribing during pregnancy and breastfeeding is a medically specialist area. Our psychiatrists routinely receive queries from regional colleagues. Videoconferencing is also used for supervision to local teams. We

provide monthly videoconferences for all the districts and have flexibility to provide extra if required. These usually involve clinical case discussion or training on specific topics e.g. health anxiety in mothers.

Video or telephone conferencing are routinely part of admission planning.

Each DHB has 1-2 local District Liaison Clinicians who are the main contact point with Mothers and Babies, acting as a local point of expertise, facilitating communication with Mothers and Babies, disseminating information/training provided by Mothers and Babies.

There is an annual review of the services that have been delivered and discussion of the following year's needs for the district clinicians.

Workforce Development is a primary focus of Mothers and Babies. Multidisciplinary teams are vital for perinatal mental health and must be able to offer appropriate treatment with an understanding of the challenges and opportunities that occur at this time in a woman's life, and the impact of this on her mental and physical health.

Supervision is provided to local teams e.g. PNAPP (Plunket Post Natal Adjustment Programme), and district Mothers and Babies liaison clinicians on an as required basis via videoconference.

The South Island Eating Disorders Service (SIEDS) is the tertiary level provider of eating disorders treatment for the five DHBs in the South Island. We provide specialist inpatient beds for the South Island alongside specialist outpatient treatment, training, supervision and consultation. This service considers the needs of consumers and their family/whanau across the age span whilst working at each level of the health care sector, i.e., primary and secondary care.

The South Island Eating Disorder Service operates in both a local (Canterbury DHB) and a regional (South Island wide) context. We have a major focus on a sustainable workforce throughout the South Island providing a high standard of care. Research suggests that most Eating Disorders can be treated on an outpatient basis. All South Island districts have staff trained in evidenced based treatment modalities.

The exception to this workforce plan is for the treatment of binge eating disorder with ongoing work required to improve provision.

The evidence for anorexia nervosa is the earlier the illness is detected and treated the more chance the young person has of a full recovery. Given this evidence the South Island has had a focus on ensuring each district's capacity in the treatment of this illness, known as Maudsley Family Based Therapy.

Each district has an Eating Disorders Liaison (EDL) person who manages eating disorders cases in their area. This may mean treating cases and provides the vital role of liaison between the services including co-ordinating telemedicine, training dates, and information about referral pathways. The Canterbury DHB regional service includes a 0.5FTE regional liaison person whose role it is to co-ordinate the training and supervision across all the South Island. Each EDL local district person attends monthly telemedicine conferences and has contact as needed with the SIEDS regional liaison person between these conferences. In order to continue to have a sustainable workforce training needs are examined annually. SIEDS has developed to respond flexibly to the needs of each district based on its workforce status at that point in time.

The Child and Family Service provides an occasional consult liaison role or will travel to a districts when there is a need to consider if admission is required.

I trust that this satisfies your interest in this matter.

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

A handwritten signature in blue ink, appearing to read 'Melissa Macfarlane', with a long horizontal flourish extending to the right.

Melissa Macfarlane
Acting Executive Director
Planning, Funding & Decision Support