

Canterbury

District Health Board

Te Poari Hauora o Waitaha

Specialist Mental Health Service

29th June 2011

Dear Colleague

Please find enclosed a proposal, released to staff and unions this week, which outlines a change in focus for Canterbury Adult Mental Health Services, in line with developments around the country.

A year ago, a 5-year framework for adult mental health was released that firmly acknowledged that the community is the centre of care provision. Since then, a team of clinical staff has worked together to develop a plan for adult general services that designs services based on the patient journey.

We know from experience that the ability to maintain community links for people experiencing periods of mental unwellness greatly enhances their recovery. This proposal is about shifting some of our resources from inpatient to community based settings, supporting service users as close to their home environment as possible. We acknowledge the strong base of existing community providers, many of whom are contracted by the DHB to support for people with specific mental health needs.

It is not anticipated there will be any loss of personnel once the finalised plan is implemented. We are keen to retain the skills and experience of our valued staff and much of the plan revolves around realigning mental health teams into four districts, each with inpatient capacity, but with a far greater community based presence.

The proposal builds on successful community led models of care in place around the country, and features crisis resolution teams that are mobile, and work extended hours. There will be a greater availability of community-based beds for people needing short-term respite and intervention, and more support for home-based care that maintains the traditional supports of the service user. Another feature is the enhanced support for other community based professionals involved in the care of people experiencing an episode of mental unwellness.

The major implications of this proposal are in the place of work and the way we work, and the facilities we use. There will be realignment of beds and some redevelopment of facilities, particularly at the Hillmorton site. Given the level of thinking that has gone into this proposal, we are looking forward to both the consultation process and the implementation of the finalised proposal.

We welcome your feedback as part of the consultation process. Details of how to provide feedback are at the back of the consultation paper.

Yours sincerely



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Canterbury District Health Board