

31 August 2020

[REDACTED]
Reporter
stuff.co.nz

Email: [REDACTED]

Dear [REDACTED]

Official Information Act Request for 'Perinatal Depression Post Coronavirus Lockdown'

I write in response to your Official Information Act request received by us **22 July 2020**, requesting the following information:

Wait times for perinatal depression assessments or programmes at the DHB have increased post the coronavirus lockdown. Mothers Helpers, an organisation that works to prevent perinatal depression and anxiety, who says the number of referrals has doubled again since lockdown began. Wait times for an assessment are about a month and women have to wait three months to take part in an online programme.

Can answers to the following questions please be attributed:

- 1) Is this something Counties Manukau DHB is experiencing in maternal mental health?
 - 2) What have wait times been in the last year? Can figures please be provided.
 - 3) Have these increased since lockdown? Can figures please be provided.
 - 4) Have the number of referrals increased since lockdown? Can figures please be provided. Can the number of referrals in the last year also be provided.
 - 5) Can the DHB confirm funding for maternal mental health is determined by the board, who are influenced by the CEO?
 - 6) How does the DHB therefore respond to comment maternal mental health is low on the DHBs list of priorities?
- Any further information or statement would be helpful.**

For context Counties Manukau Health (CM Health) employs over 7,500 staff and provide health and support services to people living in the Counties Manukau region (approx. 569,400 people). We see over 118,000 people in our Emergency Department each year, and over 2,000 visitors come through Middlemore Hospital daily.

Our services are delivered via hospital, outpatient, ambulatory and community-based models of care. We provide regional and supra-regional specialist services i.e. for orthopaedics, plastics, burns and spinal services. There are also several specialist services provided including tertiary surgical services, medical services, mental health and addiction services.

Counties Manukau DHB Response

1) Is this something Counties Manukau DHB (CM Health) is experiencing in maternal mental health?

CM Health Maternal Mental Health is a secondary mental health service that sees woman with moderate to severe mental illnesses whose mental health condition is exacerbated during the perinatal period. The Maternal Mental Health team see woman with a range of mental health presentations in the perinatal period; not exclusively postnatal depression and anxiety. Many women remain under their Lead Maternity Carer and their regular Mental Health Team. The Lead Maternal Carer or their Mental Health Team will access a specialist consultation from the Maternal Mental Health team if required. Our Specialist Maternal Mental Health Services seen by time (length of time from when the referral is opened to first face-to-face contact) was reduced during lockdown

Women seeking parenting programmes has not increased during lockdown; i.e. Mellow Bumps, Mellow Parenting and Triple P. In addition, referrals to these programmes have been slow to pick up following the lock down period. The feedback has been that it has taken women and their whaanau time to feel comfortable attending groups due to concerns related to social distancing.

Our respite facility, to whom we refer women, has noted an increase in demand and there has been an increase in the number of open cases in CM Health's Specialist Maternal Mental Health Services.

2) What have wait times been in the last year? Can figures please be provided.

Wait times vary depending on acuity and referral needs. A non-acute referral wait time varies from 3-4 weeks, whereas an urgent/acute presentation can be seen the same day. From the period of July 2019 to May 2020 the average per cent of service users referred seen in less than 3 weeks was 70%.

3) Have these increased since lockdown? Can figures please be provided.

Wait times for the months of March, April and May decreased from the months prior to the Covid-19 lockdown period. In March, 81% of service users referred were seen in less than 2 weeks. In April, this figure was 88% and, in May, 84%.

4) Have the number of referrals increased since lockdown? Can figures please be provided? Can the number of referrals in the last year also be provided?

- The numbers of referrals have increased since April 2020.
- New referrals were reduced during March and April.

Month	New Referrals
Mar 2020	36
Apr 2020	18
May 2020	40
June 2020	49

Table 1. Data as at 30 June 2020

5) Can the DHB confirm funding for maternal mental health is determined by the board, who are influenced by the CEO?

Funding is influenced by population health data indicators relating to the following DHB expectation: “It is expected that DHBs will focus on wellbeing and equity at all points of the system while continuing to focus on mental health promotion, prevention, and identification and early intervention.”

6) How does the DHB therefore respond to the comment maternal mental health is low on the DHBs list of priorities?

The DHB priority actions include Maternal Mental Health. These priority actions include comprehensive approaches to prevention and early intervention across pregnancy, parenting and Well Child Tamariki Ora services including integrated approaches with maternity care and mental and addiction services

You are entitled to seek a review of the response by the Ombudsman under section 28(3) of the Official Information Act. 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 may be published on the Counties Manukau DHB website.

Yours sincerely



**Pepulea'i Margie Apa
Chief Executive Officer
Counties Manukau Health**