



Australasian College for Emergency Medicine

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Tēnā koe Robyn

Re: Kia Kaha, Kia Māia, Kia Ora Aotearoa - COVID-19 Psychosocial and Mental Wellbeing Recovery Plan

The Australasian College for Emergency Medicine (ACEM; the College) would like to commend the Ministry of Health on the development of *Kia Kaha, Kia Māia, Kia Ora Aotearoa - COVID-19 Psychosocial and Mental Wellbeing Recovery Plan* (the Plan). As the peak body for emergency medicine in New Zealand and Australia, ACEM has a vital interest in a coordinated approach across the health system and social sector to respond to the mental health impacts of the COVID-19 pandemic. In response to the Ministry of Health's call for feedback on the Plan, we have outlined our feedback below, and would welcome an opportunity to discuss this with you further.

Feedback on the COVID-19 Psychosocial and Mental Wellbeing Recovery Plan

ACEM welcomes the principles and focus areas set out in the Plan. In particular, we are pleased to see that the gathering and sharing of mental health and wellbeing data is recognised as a key enabler for all actions in the Plan. As we discussed in our meeting on 9 December 2019, strengthening mental health data collection and reporting will be key to understanding mental health-related presentations to Emergency Departments (EDs) and the impact of actions to improve mental health outcomes. We look forward to seeing the progress of actions in the Plan to measure and track mental health and wellbeing in the population and share data with policy-makers across government and other agencies, and to include mental wellbeing in the evaluation of policy implementation.

However, we are concerned that the Plan does not recognise EDs as a key part of the Government's response to the mental health impacts of the pandemic. Even with additional funding committed to prevention and community support signalled by the Government, EDs will continue to have a core role in supporting people experiencing mental health crises particularly during and after the COVID-19 pandemic when mental health issues are predicted to increase. EDs often act as a "front door" to the health system due to their 24/7 and undifferentiated nature, and our members report that many patients present to the ED in mental health crisis who have not previously accessed mental health services. EDs are currently the only location that people can receive acute unplanned face-to-face mental health consultation and support outside of 'office hours'. In addition, patients experiencing acute mental health crises often have concurrent medical issues, such as an overdose, which require a holistic approach not limited to psychiatric care.

ACEM data provides strong evidence that there is an increasing demand on EDs to support people with mental health needs. The number of mental health-related presentations to EDs in New Zealand doubled between 2017-2018, from 3.7% of all presentations in 2017 to 7.4% in 2018.¹ This increase has been seen particularly outside of 'office hours' and is becoming increasingly challenging for EDs and mental health services. This data also shows a dramatic increase in the time people with a mental health condition are waiting to receive finalised assessment and disposition (either discharge or admission to an inpatient bed) upon presenting to the ED, with the proportion of these patients waiting eight or more hours rising from 4.5% in 2017 to 27.5% in 2018. Long waits and access block are associated with poorer patient outcomes, and now also presents an additional risk of exposure to COVID-19.

¹ ACEM. [Mental Health Service Use: A New Zealand Context](#). Melbourne: ACEM; 2019.

Whilst overall ED presentations dropped during the peak of COVID-19, our members across New Zealand and Australia tell us that mental health presentations have continued at similar rates to pre-COVID-19 and are surging in some locations. We also expect that the decreased up-take of community mental health services during COVID-19 will result in more mental health presentations to the ED in the coming months.

In addition to providing people experiencing mental health crises with alternative and more appropriate community and home-based services, the Government must ensure that EDs are properly resourced to enable them to cope with existing and future demand, and address the dangerously long waits faced by people who need emergency mental health care. It is particularly important that high levels of long waits and overcrowding are minimised during the COVID-19 pandemic so that EDs can safely manage patient numbers and reduce the risk of infection.

Recommendations

We understand the next iteration of the Plan is anticipated in September 2020. ACEM urgently call on the Ministry of Health to include in the next Plan specific actions to:

- address unacceptably high rates of access block for people presenting to the ED with mental health needs, especially outside of 'office hours', through increasing the resourcing, capacity and integration of mental health services across EDs, inpatient facilities and the community;
- deliver and monitor the impact of initiatives aimed at improving services for people experiencing mental health crises who come to EDs, particularly activities delivered as part of the \$8 million funding earmarked in the 2019 Budget for this purpose;
- boost current actions listed in the Plan to strengthen mental health data and reporting by ensuring there is nationally consistent, detailed and accessible data across New Zealand on mental health-related presentations to the ED; and
- increase clinical engagement with frontline ED staff to achieve the objective of an accessible, equitable, high quality and safe health system. EDs have played a leading role in the medical response to the pandemic. As noted in ACEM's [response](#) to the NZ Government's recently announced 2020/2021 Budget, the expertise of emergency physicians must be incorporated as a key component of New Zealand's response to improved models of health care across the whole health system.

Next steps

As noted in our letter dated 5 February 2020, we would like to arrange a second meeting to discuss the plan for the implementation of the 2019 Budget funding earmarked for improving services for people who come to EDs experiencing a mental health crisis. At this meeting, we would also like to discuss our other recommendations as outlined above, and any support ACEM can provide the Ministry of Health with in strengthening responses to acute mental health needs.

We look forward to meeting and will contact your office to arrange a time. In the mean-time, please do not hesitate to contact Nicola Ballenden (Nicola.Ballenden@acem.org.au; +61 3 9320 0479) if you have any questions about the above or any other matters related to emergency medicine.

Nā mātou noa, nā



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