

Australasian College for  
Emergency Medicine

Australian and New Zealand  
College of Anaesthetists

College of Intensive Care  
Medicine of Australia and New  
Zealand

New Zealand College of Public  
Health Medicine

Royal Australasian College of  
Medical Administrators

Royal Australasian College of  
Surgeons

Royal Australian and New  
Zealand College of Obstetricians  
and Gynaecologists

The Royal Australian and New  
Zealand College of  
Ophthalmologists

The Royal Australasian College  
of Physicians

The Royal Australian and New  
Zealand College of Psychiatrists

The Royal Australian and New  
Zealand College of Radiologists

The Royal College of  
Pathologists of Australasia

The Royal New Zealand College  
of General Practitioners

Royal New Zealand College of  
Urgent Care

Australasian College of Sport  
and Exercise Physicians

# Council of Medical Colleges in New Zealand

## Te Kaunihera o Ngā Kāreti Rata o Aotearoa

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22 June 2020

Robyn Shearer  
Deputy Director-General Mental Health and Addiction  
Ministry of Health  
PO Box 5013  
Wellington 6140

By email: [MHAD-responses@health.govt.nz](mailto:MHAD-responses@health.govt.nz)

Tēnā koe Ms Shearer,

### **Re: COVID-19 Kia Kaha, Kia Māia, Kia Ora Aotearoa: Psychosocial and Mental Wellbeing Recovery Plan (the Plan)**

Thank you for the opportunity to provide feedback on the above plan. The Council of Medical Colleges (CMC) is the collective voice for the medical colleges in New Zealand and through its members aims to improve, protect and promote public health via a well-trained medical workforce and high-quality medical care. CMC brings together 15 member medical colleges who provide support to over 9000 general and specialist medical practitioners working in a range of 36 specialties in the New Zealand health system. The medical colleges' role is also to advocate for appropriate quality health services in New Zealand.

The above plan is relevant to the CMC, as all colleges have a role in supporting the mental and social wellbeing of patients, whānau and communities throughout Aotearoa New Zealand. This submission collates the perspectives of some member colleges of CMC, who will also be making their own more detailed submissions highlighting specific feedback from their speciality.

Overall, the CMC commends the Ministry for developing the above Plan, and considers this a critical piece of work in guiding a coordinated national approach to supporting people's mental and social wellbeing in the wake of the COVID-19 pandemic. We also acknowledge the short space of time in which the Plan would have been developed.

The Plan has a number of strengths, in particular:

- The Plan's six guiding principles of being people and whānau-centred; community-led; upholding Te Tiriti o Waitangi; achieving equity; protecting human rights; and working together, are sound.
- The Plan has a strong equity focus, including acknowledgement that iwi, hapū, whānau and Māori organisations need to be supported to respond to increasing health needs as a result of the pandemic. The CMC commends the Ministry for acknowledging the cumulative impact of pre-existing, historic and generational inequities; the need to address institutional racism and discrimination; and the need for tailored support for Māori, Pacific Peoples, people with disabilities, and children/young people.
- The Plan articulates well how the secondary impacts of COVID-19 will affect mental wellbeing, including financial hardship; unemployment; disengagement from education; homelessness; the impact of stress on family relationships; and compounding existing mental health problems. The CMC also commends the acknowledgement that health workers may be at an increased risk of mental distress during the COVID-19 pandemic, particularly post-traumatic stress.
- The Plan acknowledges that robust data collection will be needed to monitor the impact of COVID-19 on communities, emerging psychosocial needs, at-risk groups, and workforce pressures.

There are however a number of areas where CMC considers the Plan should be strengthened. These are set out below under headings and focus areas used in the consultation document.

### **1. 'Who is impacted'**

The CMC supports the Royal Australian and New Zealand College of Psychiatrists (RANZCP) submission that older people; people in the criminal justice system; migrants; and people living with complex mental health and addiction issues should be included as groups who may be disproportionately impacted by COVID-19. RANZCP also highlights that people with existing mental health and addiction issues may be less likely to have strong community connections, and may struggle to access support through community networks.

The CMC also recommends that pregnant women and new mothers are added as a group that is disproportionately impacted by COVID-19. As outlined in the submission from the Royal Australian and New Zealand College of Obstetricians and Gynaecologists (RANZCOG), maternal mental health is a serious issue in New Zealand. Pregnant women and new mothers were impacted by the COVID-19 pandemic and the lockdown in a number of ways, including increased anxiety; reduced face to face antenatal care; restrictions on the number of support people during labour and antenatally; and reduced social support from friends and family due to the lockdown restrictions. The COVID-19 pandemic led to severe disruption to the normal health and social supports women and whānau rely on. As suggested in RANZCOG's submission, funding should be made available for maternal mental health, particularly for underserved groups including young women, Māori, Pacific, and women living rurally.

The CMC also notes that the Royal Australasian College of Physicians has suggested the Plan could take a life-course approach to mental health and wellbeing, to recognise how different population groups will be impacted in different ways, and to acknowledge that the pandemic could have both immediate and more cumulative impacts on infant, child and adolescent development.

## **2. Focus area 4: Strengthen primary mental health and addiction support in communities**

The CMC supports the Royal New Zealand College of General Practitioners' (RNZCGP) submission that highlights general practice is a significant provider of mental health services in communities across New Zealand. The Plan needs to acknowledge the role general practice plays in addressing and assessing mental health and wellbeing concerns in the community, and that general practitioners are often where patients present first for support with mental health. Acknowledging the role of general practice in the Plan is essential for highlighting to patients a significant source of support available in the community.

## **3. Focus area 5: Support specialist services**

A number of medical specialties interact with and provide support for people with mental health needs.

The Royal Australian and New Zealand College of Psychiatrists (RANZCP) highlights that the mental health and addiction sector suffers from chronic workforce capacity and capability issues, and better funding and resourcing will be needed to achieve the outcomes of the Plan. Workforce shortages need to be acknowledged in the plan, and actions to support workforce development identified.

As outlined in the submission by the Australasian College for Emergency Medicine (ACEM), the Plan also needs to acknowledge that Emergency Departments are integral in supporting patients with mental health crises. ACEM's submission notes that "EDs are currently the only location that people can receive acute, unplanned face-to-face mental health consultation and support outside of 'office hours,'" and that mental health presentations at Emergency Departments have been increasing over recent years. The CMC recommends that the Plan include actions to increase resourcing for mental health services across Emergency Departments, as well as in hospitals and the community.

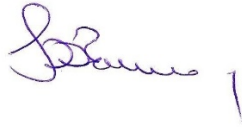
## **4. Implementation**

A number of colleges have highlighted that for successful implementation, further detail and examples are needed in the Plan. In particular, the Plan makes no mention of how delivery will be funded, and what workforce development initiatives will be undertaken to support implementation or address existing areas of workforce shortage.

Also, as highlighted by the Royal Australasian College of Physicians, the Plan should link to the Budget 2020 funding announcements for Whānau Ora to help whānau respond, recover and rebuild from the COVID-19 pandemic. Whānau Ora will be a key partner in supporting psychosocial and mental wellbeing over the coming months, and this needs to be reflected in the Plan.

Once again, thank you for the opportunity to comment on the COVID-19 Kia Kaha, Kia Māia, Kia Ora Aotearoa: Psychosocial and Mental Wellbeing Recovery Plan. If you have any questions about this submission, please contact [virginia.mills@cmc.org.nz](mailto:virginia.mills@cmc.org.nz) in the first instance.

Ngā mihi nui,

A handwritten signature in blue ink, appearing to read 'John Bonning', with a vertical line extending downwards from the end of the signature.

Dr John Bonning, Chair