

# The Treasury and Office of the Minister of Finance

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Reference: T2018/3542 DH-1-2-3-2-4-2018

Date: 30 November 2018

To: Minister of Finance (Hon Grant Robertson)

Deadline: Monday 3 December 2018

## **Aide Memoire: Initial Government Response to the Mental Health and Addiction Inquiry**

The Mental Health and Addiction Inquiry panel submitted their report to the Minister of Health on Wednesday 28 November. The Minister of Health is taking a paper to Cabinet on Monday 3 December seeking agreement to a phased response to the inquiry's recommendations and public release of the report following Cabinet.

We have not seen a final version of the Cabinet paper. This briefing provides you with an overview of the proposed response (based on a draft version of the paper) and key points we recommend you raise at the Cabinet discussion on Monday.

### **Summary of paper**

Overall, the inquiry confirms existing concerns around access to and delivery of mental health services, including key gaps around system oversight and leadership. The final report outlines 40 recommendations for consideration aimed at:

- Increasing access to and choice of mental health and addiction services, and more of a focus on prevention and early intervention;
- Stronger action on alcohol and drugs, taking a public health approach;
- Preventing suicide, including setting a 20% reduction target by 2030;
- Improving the regulatory environment and strengthening leadership, oversight and accountability across the sector; and
- Putting people with mental health needs at the centre through better coordination and integration of services between social sector agencies.

This paper seeks in-principle agreement to progress the following five key pieces of work as an initial response:

**Table 1: Overview of initial response to Mental Health and Addiction Inquiry**

Key area of work	What is being proposed?	Report back date
Undertaking further work on establishing a Mental Health and Wellbeing Commission	Further work is undertaken on the scope, functions and potential form of a Commission. Funding sought through Budget 2019 for establishment and ongoing operating costs.	[33]
Completing the suicide prevention strategy and implementation plan	Work on completing the suicide prevention strategy (which was consulted on publically in 2017) is progressed urgently to inform effective implementation and resourcing.	[33]
Scoping options for legislative reform	Further work is undertaken on options for repealing and replacing the Mental Health (Compulsory Assessment and Treatment) Act which is facing criticism for being non-compliant with international obligations and human rights.	[33]
Addressing system pressures and showing commitment to a transformed approach through Budget 2019 intentions	Agencies continue collaborating and working on a mental health package for consideration in Budget 2019 which focusses on accelerating transformation across sectors and enhancing current responses.	The Treasury submission deadline for mental health initiatives has been extended to <b>18 January 2019</b> , with placeholder initiatives submitted on 14 December.
Scoping of work to reduce the harm of addictions	[33]  [33] The Minister of Health is also taking a paper to Cabinet on Monday proposing a health-based prevention response to synthetic drug-related harm (T2018/3520 refers).	[33]

As part of the phased response to the inquiry (and in addition to the key focus areas above), the paper proposes a report back in March/April 2019 on each of the inquiry's 40 recommendations, covering:

- An evaluation of each of the recommendations, including potential cost implications and workforce impacts. This evaluation will include engagement with sector representatives, Māori and people with lived experience;
- Develop a plan for how to respond to each of the recommendations; and
- Outline a plan for monitoring progress on implementing the recommendations, including regular updates to Cabinet.

Cabinet agreement is also sought to publically release the inquiry's report and recommendations on Monday 3 December 2018.

### **Treasury comment**

We are yet to see a copy of the full report however, on balance, we support the five focus areas identified as part of an initial response to the inquiry. Our understanding is that these areas reflect the more significant recommendations that came out of the inquiry that are required to enable change and transform the system over the long term.

The paper is not seeking any substantive policy decisions in regards to these five focus areas but is seeking direction to undertake further scoping work on how they can be taken forward and be feasibly implemented, ahead of coming back to Cabinet for final decisions. This is important given the complex and multi-disciplinary nature of certain areas (<sup>[33]</sup> ) and interaction with other system level changes (e.g. machinery of government and establishment of a new Mental Health Commission).

While we support the areas of focus, we are concerned about the ambitious timeframes outlined in the paper to evaluate, consult and develop a plan for each of the inquiry's 40 recommendations by March/April next year (in addition to the work outlined in table 1). <sup>[34]</sup>

<sup>[34]</sup> It is also important that any consultation with the wider sector on the inquiry's recommendations is done well and helps to inform the Government's response. This will take time.

At the same time, we understand it is important to maintain momentum given the strong public interest in this space and need for change. This is why we think, in the short-term, the focus should remain on the five areas identified in table 1 above while the Government takes time to fully digest and respond to other recommendations. If there is a report back in March/April, we recommend this provides Cabinet with an update on work following the inquiry (and progress on the five focus areas) rather than trying to ensure a comprehensive plan is in place for all 40 recommendations.

The Wellbeing Budget will be a key opportunity to make progress on this priority. We recommend relevant agencies (and portfolio Ministers) focus on ensuring initiatives are cohesive and align with the inquiry's recommendations around urgent investment to

increase access and focus on early intervention and prevention. You have agreed to extend the submission deadline for mental health initiatives to Friday 18 January to enable this, with an expectation that placeholder initiatives are still submitted on 14 December.

### **Key points to raise at Cabinet**

We recommend you raise the following points at the Cabinet discussion on Monday:

- Timing of report back on recommendations: The five focus areas identified as an initial response are likely to require a lot of work across multiple agencies. Is it realistic to report back to Cabinet with a full plan for responding to the inquiry's 40 recommendations by March/April next year? Does this leave sufficient time for consultation with the sector and is there enough capacity in the system to deliver this?
- Alternative option on report back: In order to balance responsiveness with taking a more considered approach, one option is that the report back in March/April is focussed on the five significant areas identified in this paper with a general update provided on progress on other recommendations (including how a cross agency approach is being taken). Apart from the five focus areas, are there any other significant recommendations in the inquiry's report which require urgent attention?
- Budget 2019: The Wellbeing Budget is the first opportunity for the Government to make significant progress on mental health, and I expect agencies (including Treasury officials) to work collaboratively over the coming months on developing a cohesive package of initiatives that is aligned to the inquiry's recommendations. I have asked the Treasury to extend the submission date for mental health initiatives to Friday 18 January to support this process, with an expectation that placeholder initiatives are still submitted on Friday 14 December.

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