

27 August 2019

[REDACTED]

Dear [REDACTED]

Re: OIA request – CAMHS whānau disclosure policy

Thank you for your Official Information Act request received by Waitematā District Health Board (DHB) on 8 August 2019 enquiring about information with regard to our Child and Adolescent Mental Health Services (CAMHS) providers' policy.

Before responding to your specific questions, it may be useful to provide some context about our services to assist your understanding. Waitematā DHB serves a population of 630,000. The Specialist Mental Health and Addiction Services is the largest service of this kind in the country, by volume of service-users seen. The speciality comprises Child Youth and Family Mental Health Services, Adult Mental Health Services, Takanga a Fohe (Pacific mental health and addictions), Whitiki Maurea (Kāupapa Māori mental health and addictions), the Regional Forensic Psychiatry Service (covering Northland and greater Auckland regions) and Community Alcohol and Drug Services (CADS). All of our addictions services cover the Auckland region.

CAMHS for Waitematā District Health Board is a portfolio of services including Marinoto North, Marinoto West, Marinoto Rodney, Infant Mental Health (Mātua Tuhonongā) and the Early Psychosis Intervention team (EPI). The age range seen in the Infant and Marinoto services is 0 – 18 years-of-age. The upper age limit can be flexible dependent on the developmental stage of the young person i.e. if still attending high school and living at home, we may see up to 19-year-olds. The EPI service sees young people from 16 to 25 years-of-age. In all cases from infant through to age 16, the service requires the involvement of family/ whānau / caregivers.

We have endeavoured to answer all of your questions below. We have explained where information cannot be provided because it is not collected by Waitematā DHB.

1. When/if they disclose to family that they are assessing/treating a young person

All CAMHS services require a referral from a GP or other professional, such as a school guidance counsellor. On occasion, we accept self-referrals. All of the referring agents are required to seek caregiver consent prior to referring. For a young person over the age of 16 years who self-referred and specifically requested no family/ whānau involvement, a decision would be made in consultation with a multi-disciplinary team regarding the risk the young person presented with. If the service considered there was sufficient risk to override the young person's request, they would endeavour to do this sensitively and in conjunction with the young person. In some cases, if a young person was considered to be at imminent risk of harm to themselves or of doing harm to others, we would inform caregivers immediately along with other appropriate agencies.

2. Whether they require caregivers' consent for a young person to access services (if so, what occurs if whānau does not consent)

As above, for young people under 16 years-of-age, family/whānau consent is requested at referral. If a referrer was particularly concerned and family/whānau did not consent to a referral, the CAMHS service would not be in a position to act. Instead, we would develop an action plan together with other agencies such as Oranga Tamariki-Ministry for Children on a case-by-case basis.

For a young person over 16 years-of-age who self-referred, we would consider their individual situation and would, throughout all sessions with the young person, be mindful of risk and endeavour to involve family/whānau.

3. Whether there are additional considerations made e.g. the age of the young person, their capacity to consent, cultural considerations

In all cases where there is any question of family/whānau consent vs the young person's wishes, consideration is made for the young person's capacity to consent. This can be a complex issue and senior staff and clinical leadership would be involved in any discussion regarding capacity in a young person. There is also consideration for culture and recognising different cultural viewpoints of gender and age. Again, this would involve senior staff and cultural advice balanced against risk.

I trust that this information meets your requirements. Waitematā DHB, like other agencies across the state sector, supports the open disclosure of information to assist the public's understanding of how we are delivering publicly-funded healthcare.

This includes the proactive publication of anonymised Official Information Act responses on our website from 10 working days after they have been released.

If you feel that there are good reasons why your response should not be made publicly available, we will be happy to consider this.

Yours sincerely



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Waitematā District Health Board