

## Key Messages for PRIMHD NGO Regional Coordinators

### Purpose:

The purpose of this document is to outline some key messages for the PRIMHD NGO regional coordinators to deliver to any relevant party. As much as possible the high level 'sound bites' are supported with the addition of some practical background information to increase the relevance of the message to mental health and addiction NGO providers.

### Background to PRIMHD:

PRIMHD was developed to combine a legacy national mental health data collection (MHINC) with a separate collection of local DHB outcome data (MH-SMART).

The vision for PRIMHD is to assist in the improvement of health outcomes for all Mental Health consumers in New Zealand by the provision a single rich data source of National Mental Health & Addiction information that can be used for multiple purposes.

### Key Message Objectives:

The main objective is that key stakeholders (e.g. NGO providers and DHB funders) know about, understand and support the improvements to the national mental health and addiction information collection called PRIMHD.

The focus is not on the Ministry web form, the various information systems used by providers to collect the data or the components of the actual data set, but about the benefits the sector will receive from collecting and using PRIMHD data.

### Key messages:

These messages have been specifically developed with mental health and addiction NGO providers in mind, but they can also be used with other key stakeholder groups as appropriate.

### Key messages

#### 1. PRIMHD will increase the visibility of NGO service provision.

The Ministry has estimated that up to 12.5% of mental health consumers seen by NGO services are not currently captured in the national mental health information collection. This is a significant number of consumers for whom the NGO contribution to their support and treatment has not been transparent.

Given that investment in the NGO sector is close to 30% of national funding for the mental health and addiction sector, it is important that this contribution is made visible.

#### 2. PRIMHD will support the development of a recovery focused sector.

Better information will help NGO providers to more accurately describe the services that they deliver to consumers. The question about 'who receives, what service, from whom, to what effect and at what cost, is as pertinent to individual NGO providers as it is to DHB planners and the Ministry of Health.

The data that we collect can also help the sector to focus on areas of inequality and will help influence service improvements over time. For example, by answering the question above, with a specific focus on the ethnic breakdown of the consumer group served, it will become evident if one ethnic group is achieving better outcomes than another. This kind of analysis helps service providers to assess their current performance, plan for change and then monitor the implementation of any changes.

NGOs will also improve their own business processes, as operational information will form part of an ongoing process of service improvement for providers. The information can be used to inform staff how well consumers are progressing or to prompt discussion within the organisation about the impact of different models of care.

## Key messages

### **3. PRIMHD is one of the main sources of information about mental health and addiction service delivery.**

PRIMHD is one of the main building blocks of an integrated set of information that supports the planning, funding and delivery of mental health and addiction services. It is different to the information that providers must report to their local DHB or to Sector Services (formerly HealthPAC) as part of their contract reporting requirements.

The main difference is that PRIMHD collects very specific data which is related to direct service delivery to individual consumers, using their NHI.

Contract reporting under the Nationwide Service Framework (NSF) asks for other information related to the organisation resources (e.g. FTE's, numbers of beds available), as well as some consumer specific information for a specified time period (monthly and quarterly reports). In some cases the DHB funder has also requested narrative reports from the NGO in order to capture information that is unique to that particular provider, and/or information that is of strategic importance to the DHB.

The Nationwide Service Framework (NSF) Project for the mental health and addiction sector is almost complete, with service specification revision and development now in its third and final phase. Once NGO providers are reporting to PRIMHD, the contract reporting to Sector Services will be reduced. However the Ministry is keen to reduce that reporting even further and will be forming a sub-group in 2010 to specifically look at those remaining reporting items.

*Note: The issue of duplicate reporting has been addressed to some extent by the NSF review and PRIMHD, but there is still more work to be done in this area.*

### **4. PRIMHD will contribute towards the achievement of the leading challenges set out in *Te Tahuu* (2005) and the actions detailed in *Te Kokiri* (2006).**

For the first time, PRIMHD will offer a cross-sector view of consumer utilisation of services (NGO and DHB) in New Zealand. This will enable significant future improvements in the way that the sector uses information to inform developments such as benchmarking activity, service planning, funding of services and changes in policy.

#### **Supplementary information:**

- In 2005 Platform published the results of the NgOIT Landscape Survey. This survey was the first of its kind and provided the sector with valuable information about the current NGO information infrastructure as well as the models that were already being used by NGO services to measure consumer outcomes within the sector.
- The findings from this survey indicate that many NGOs are already collecting valuable data about the consumers that they serve, both from administrative and clinical viewpoints.
- In 2007 the Ministry published a five-stage implementation strategy for PRIMHD in the NGO sector - refer to the Ministry's '*NGO Implementation of PRIMHD: Strategy and Approach*' paper.
- At the start of the PRIMHD project, only 29 out of an estimated 423 NGO providers reported data to the Mental Health Information National Collection (MHINC). These NGO providers became the priority group of providers for stage one of the PRIMHD NGO rollout.
- The Ministry's PRIMHD project team is continuing to work with those NGO providers identified in stages one and two of the NGO rollout.
- The PRIMHD NGO regional coordinators have been contracted to support the roll-out to those NGO providers identified in stages 3 to 5, but they also have obvious linkages with the stage one and two NGO providers in their area who are supported by the Ministry's PRIMHD project team.
- Stuart Bloomfield, on behalf of the Ministry of Health, undertook a mapping of the PRIMHD reporting requirements and the NSF service specification reporting clusters at the end of 2008. This information was used to inform the reporting components of the new tier 3 service specifications under the NSF.
- The work of the PRIMHD NGO regional coordinators is supported by the PRIMHD NGO User Group. This Group is responsible for monitoring the progress of the NGO implementation and reports to the PRIMHD Executive Steering Committee.