

Executive Summary

Formative evaluation of Mirror HQ

1. Introduction

Young people in New Zealand face a number of risks as they transition from childhood to adulthood including risks associated with alcohol and other drugs (AOD). Reviews of New Zealand youth AOD services have found them to be ad-hoc, inconsistent and largely not addressing the needs of young people presenting with co-existing problems (CEP) such as depression or anxiety.

The Ministry of Health sought to strengthen services through the development of 'exemplar' youth AOD/CEP services that align with good practice guidelines. The purpose of the exemplar services is to inform the wider AOD sector on effective AOD and CEP service provision for young people.

In 2013, the Ministry of Health selected Southern DHB as the site for one of the two Exemplars, to be delivered by Mirror Services in Dunedin (the Aroha Ki Te Tamariki Trust referred to as Mirror HQ). In 2014, the Ministry of Health commissioned a formative evaluation to understand how the exemplar services are being delivered against their service design and how they can be improved.

The formative evaluation involved 39 qualitative interviews with providers, health and social services and community stakeholders, young people and their families/whānau in Dunedin, Balclutha and Oamaru service sites between 19 and 23 October 2015; review of documentation and policies; and analysis of collated and anonymous data from Mirror HQ's client database and the Ministry of Health's PRIMHD.

2. Developing the youth AOD/CEP service

Mirror Services established Mirror HQ as a standalone CEP enhanced service based on a multi-disciplinary and multi-skilled team focused on CEP speciality service provision for young people. Mirror HQ provides CEP AOD services for young people aged between 12 and 22 years.

The Mirror HQ service is for young people who have problematic to severe alcohol and/or other drug use, substance use and a suspected mental health issue/s or mental health diagnosis, gambling and/or internet addiction, require managed withdrawal, or are affected by a family member who has alcohol and/or other drug or mental health issues. The service is also available for parents of young people with problematic alcohol and drug use.

The service works with young people and their whānau to address alcohol and other drug related issues and reduce associated harm, improve wellbeing and mental health, to be in control of their lives, to clarify difficult situations and find new solutions, and improve their quality of life.

Mirror HQ is a mobile service, and offered in a range of environments to reduce barriers to service access. By November 2015, Mirror HQ was established in Dunedin, North Otago including Oamaru, and outreach services were in South Otago including Balclutha and Milton.

The establishment of Mirror HQ occurred over a 12 month period. Te Ariari O Te Oranga (Todd 2010) and Matua Raki's tools framed the development of the CEP service. A comprehensive staff development programme was undertaken to strengthen staff as Youth CEP practitioners and to be a culturally competent workforce. Existing policies and programmes were reviewed and adapted,

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and integrated in to the monthly quality improvement team meeting. Community engagement was an ongoing feature of the establishment and operation of Mirror HQ.

The successful establishment of Mirror HQ and its operation is underpinned by good governance and leadership, and Mirror Services' existing quality-focused and respected counselling services. A systematic and reflective change management process was adopted that enabled the strengthening and refinement of the service. Care was taken to recruit multi-disciplinary staff with aligned values and commitment to a youth CEP service. Time and investment was put into building a positive and empowering team culture.

Mirror HQ have an experienced, highly qualified team (8.7 FTE) from a range of disciplines including psychiatry, psychology, CEP health sciences, AOD counselling, nursing, occupational therapy and art therapy. Stakeholders describe Mirror HQ staff as very experienced, and skilled and competent in delivering a consistent and high quality service. Clinical leadership of the team is described as excellent both in managing the team and building collaborative and integrated services with other agencies.

Establishing Mirror HQ was not without its challenges. Stakeholder relations were initially tense. Other AOD providers were initially concerned the 'new' service would cannibalise their service and its funding. None of these concerns eventuated. However, it meant that Mirror Services had to undertake significant ongoing stakeholder engagement to ensure effective working relationships, and to gain shared understanding of how the services would work together.

3. Young people and whānau using Mirror HQ

More young people aged 12-22 years and more Māori young people are accessing Mirror HQ compared to the number accessing Mirror Counselling Services before the establishment of the CEP service. Young people using the service tend to be male and aged 16-19 years. Mirror HQ considers that more marginalised and disenfranchised families are now accessing the service. Clinical pathways have been established to retain families with generational substance abuse issues. Mirror HQ has increased access to children and young people of parents with mental illness and/or addiction (COPMIA) who are vulnerable to substance use issues and poor health outcomes.

Referral pathways are working well. Young people are referred to Mirror HQ from a range of differing sources. Most referrals are from the justice system, followed by self-referrals from whānau and young people. Between 1 July 2014 and 30 June 2015, 243 referrals were received and allocated to the CEP practitioners. Young people are assigned to a clinician that best fits with the young person's needs. The young person is seen within two weeks and a brief or comprehensive assessment is completed. When a referral is declined the person/whānau are informed of reasons for the decline and options of other alternate services are offered.

A stepped care approach has been adopted that offers a range of interventions with differing levels of intensity. The level of intensity of the interventions are matched to the needs of individual young people. Mirror HQ uses comprehensive case management in partnership with young people to assess and tailor the treatment plan. The case management approach enables the coordination of intervention and facilitates referrals to other Mirror HQ staff (e.g. psychiatrist, peer support worker) or to another agency including crisis services.

Of the 189 young people using the Mirror HQ services between 1 July 2014 and 30 June 2015, a third had alcohol issues and a third had cannabis issues, and many had multiple substance issues. Young people referred to Mirror HQ present with a range of CEP concerns including parent/young person relationships, aggression, violence and criminal offending, past traumas, AOD and mental health issues. Presenting concerns are more likely to be in the moderate to severe classification.

Between 1 July 2014 and 30 June 2015, 82 clients were discharged. Mirror HQ operates an easy-in, easy-out, and easy-back in policy for young people and whānau.

4. Alignment with key design features of a youth AOD/CEP service

Mirror HQ's service strongly aligns with the key design features of a youth AOD/CEP service.

Develop a youth friendly CEP service: Strongly aligned

Young people are very much at the centre of the service. Mirror HQ has a depth of understanding of young people's AOD and mental health needs relevant to their developmental age. Young people have been involved in the service design and implementation and have a leadership voice on the Board. All young people interviewed had a very positive service experience; noting the welcoming youth focused environment and positive, trusting and effective relationships with their CEP practitioner. Young people could articulate how the interventions and treatment received are assisting and supporting them to make positive changes in their lives.

Evidenced-based interventions: Strongly aligned

Mirror HQ has focused very deliberately on developing a CEP service that responds to the developmental needs and co-existing mental health and other concerns of young people; a service that is based on best practice models and approaches. A modified CAPA approach is being used, and screening assessments of young people are being used to inform their action wellbeing plans. Young people and whānau using the service tend to have a range of complex inter-related needs. Focus is placed on ensuring the least intrusive evidenced-based interventions and treatment options are offered, tailored to their needs.

Collaboration and integration of care in primary level settings: Some-strong alignment

Since its establishment Mirror HQ has systematically engaged with other youth and AOD primary care services. Following initial concerns about the new service, Mirror HQ has worked to ensure clear pathways and transitions across providers to achieve the best outcomes for young people. Mirror HQ has systematic discharge processes to primary care which involve young people and as appropriate whānau.

Developing the regional and national AOD/CEP workforce: strong alignment

Internally Mirror HQ has a tailored and consistent focus on staff development using tools that identify CEP gaps. Staff regularly receive professional and cultural supervision. Regionally, Mirror HQ is proactive in contributing to cross-agency multi-disciplinary forums and provides supervision, mentoring and reviews of other agencies. Mirror HQ has made a significant contribution to sector development at a national level.

5. Collection of process and outcomes data

Mirror HQ is capturing process and outcomes data to inform the service. In July 2014, Mirror HQ launched a custom-built electronic client management system. The client management system is an evolving one, and data quality is reasonable.

The client database contains the client contact details, their demographics, and referral information. Results from the screening assessments are loaded into the client management system so clients' progress can be monitored. At present, it is not possible to add the Health of the Nation Outcome Scale for children and adolescents (HoNOSCA) as this is not available to NGOs. Home, Education/Employment, Eating, Activities, Drugs and Alcohol, Sexuality, Suicide and Depression, Safety assessment (HEEADSSS) assessment is stored in the client file.

6. Conclusions

Mirror HQ has successfully implemented an AOD CEP service based on best practice. Quality improvement loops and ongoing professional and cultural training are in place to ensure the ongoing strengthening of the service. Mirror HQ through its development and service delivery offers the sector an exemplar AOD CEP service.

7. Recommendations

Given the success to date, it is recommended that Mirror HQ's positive journey is shared with the sector. As with any service, the development and maintenance of a high quality service is an ongoing journey. Areas of focus going forward:

- Increasing DHB and stakeholder understanding of the benefits offered by a quality AOD CEP service and its role with other AOD providers in achieving the goals of Southern DHB's strategy *Raise Hope - Hapai te Tumanako*.
- Ensuring stakeholders are aware of the range of services offered, Mirror HQ's relationship with other Mirror Services, and the linkages across wider services.
- Increasing the reach of the service into other rural areas such as Invercargill or Central Otago. The ability to increase reach is dependent on Mirror HQ's capacity, and other providers' recognition that a collaboration with the service will offer greater benefits to young people and whānau.
- Continuing work to build on cultural competencies of the service using the Takarangi Competency Framework, and considering the actions needed to develop cultural competencies for Pacific people using the service.
- Sustaining the CEP service focus as Mirror HQ reaches service capacity.