

Rapua Te Āhuru Mōwai - ADHB Mental Health Homelessness Pilot

Governance Group meeting minutes

25 March 2022

Present:

Hineroa Hakiaha	Co-Director Māori MHA	ADHB
Segina Te Ahuahu	Principal Advisor Maori/Project Lead	MoH
Adam Bouman	Consumer Advisor Manager	ADHB/Kāhui Tū Kāha
Teremoana Te Hira	Service Manager	Mahitahi
Stephen Hart	Operations Manager	CORT
Katie Ferguson	Service Clinical Director	ADHB
Kirsty Buggins	Manager Support Service Design and Implementation	HUD
Zoe Truell	Project Manager	ADHB
Alison Hudgell	General Manager, Mental Health	ADHB
Raewyn Allan	CEO	Mahitahi
Kara Beckford	Consumer Advisor Manager	DHB/Kāhui Tū Kāha
Jan O'Donoghue		Kāinga Ora

Guests:

Billie Morgan	Rapua Team Leader	Mahitahi
Jade Thorne	Head of Tenancy	CORT

Apologies:

Mark Goldsmith	Regional Commissioner	MSD
Jacqui Matthews	Senior Advisor	Te Puni Kokiri
Cinnamon Whitlock	Pouwhakahaere Matua – Hauora	Mahitahi
Kate Sladden	Manager, Planning and Funding	ADHB

1. PROJECT MANAGER UPDATE

1.1 Update on numbers, demographics and progress of whaiora actively engaged with the service

Referrals Accepted:

- 19 whaiora are currently in the Rapua Te Āhuru Mōwai service.

Demographics of those accepted:

- *Gender:* 9 women, 10 men
- *Ethnicity:* 9 Māori, 7 Pākēhā, 1 Pasifika, 2 African.
- *Current accommodation:*
 - 11 in permanent Rapua homes
 - 4 in Buchanan Rehabilitation Centre
 - 3 in interim housing situations waiting to move into their new Rapua homes
 - 1 is in Prison

One person [REDACTED], withdrew from the programme on [REDACTED] March 2022. She and her whānau have decided that she will return to her hometown to live with her whānau when she is discharged [REDACTED].

There are currently four further permanent homes being lined up for whaiora on the pilot. It is expected they will be able to move in over the coming weeks.

1.2 Referrals

Mahitahi and CORT have space available for more referrals; however, there have been some difficulties in getting referrals made due to staffing shortages in Te Whetu Tawera social work team. Some whaiora are only in the unit for a short period and it has been challenging to assess suitability and complete screening and referrals before they are discharged. These issues are currently being addressed.

Requests for referrals to Rapua continue to be tightly screened and managed by the ADHB Service Clinical Directors of the inpatient units. To date, 11 requests have not been approved to go forward as a referral. These have mainly been due to insufficient history of homelessness or inadequate housing, and/or the whaiora have not been very high users of inpatient services. In all 11 cases it was recommended that there are other housing options available in the community that should be explored.

This tight scrutiny of referrals ensures that the pilot is used only for the target group intended. It was noted recently that a significant number of whaiora who were long term subjects of the High and Complex Needs Forum have been accepted into the pilot and no longer need to be discussed or subject to intensive planning, resourcing and assessment.

1.3 Interim Housing

Progress is being made to explore the potential of ring fencing some Transitional Housing Units for interim Rapua accommodation. Discussions are currently underway with one community provider regarding a collaboration to make up around three units available for this purpose. HUD will be brought into these preliminary discussions to consider what support is required to execute this as a trial.

1.4 Developing the Service

The Steering Group continues to oversee the operations, interface and development of the service.

- a. Developing processes to gather feedback from service users and staff on the service to support the learning and iterative development of the service.
 - i. This work has been delayed due to the staffing shortages through the Omicron outbreak. It will be picked up again as soon as possible.

- b. Communication and relationship building with the ADHB Community Mental Health Centres (CMHCs). A flyer about Rapua has been produced by the Steering Group to assist the wider teams in understanding the programme and gaining their support to work in partnership with the whaiora and staff in the programme. A flyer aimed specifically for whaiora and their whānau will also be produced. Additionally, a roadshow for the CMHCs is planned once staffing starts to return to normal following the omicron outbreak.
- c. Obtaining and establishing the transitional housing to improve the service experience for whaiora who need interim accommodation while waiting for their permanent housing. Discussions are underway with a community provider to explore a collaboration to provide around 3 Transitional Housing units ring fenced for Rapua.

1.5 Evaluation

Awa Associates have scheduled a workshop with the key partners in the Auckland pilot on 28 April to develop the evaluation framework.

2. CORT REPORT

Stephen Hart reported that all is going well with the pilot from their perspective, with no challenges of note currently.

3. MAHITAHİ REPORT

Raewyn also reported that Mahitahi are happy with progress and are not encountering any problems.

4. KĀİNGA ORA

Jan O'Donahue who was standing in at the meeting for John Tubberty, said that the two sites being developed for the pilot are on track to be delivered in October 2022.

5. PRESENTATION FROM MAHITAHĪ and CORT ON PILOT LEARNINGS AND PROGRESS

Jade Thorne and Billie Morgan gave a presentation on the progress, approach and learnings for Rapua Te Āhuru Mōwai to date.

They described the pilot as a whaiora led programme, where the whaiora are the bosses. Even when there are limitations whaiora are still presented with options. It is a bespoke service. Staff figure out with each person what it is they want and how to make that happen.

Relationship building and building trust is key so that whaiora can develop the confidence to say what they want. Rapua staff build rapport and talk with people, not at people and are able to fully listen and respond. They are honest and make whaiora aware of anything they need to know.

Billie and Jade said they have enjoyed working collaboratively with the whole team as a collective with the voice of whaiora saying that they want and need at the centre.

They acknowledged that whaiora on the pilot are coming from a long history of using services and medications, and are used to being told what to do generally. Whaiora experience the Rapua approach of asking them what they want, as new and different.

There is a lot of emphasis put on whanaungatanga, getting to know each other, sharing something to eat. This builds a foundation to move forward. Whaiora choose their own furniture and household goods. Choice is important with the support offered as well. Whaiora can choose what type of support they want, and when they receive it.

Trust is also built by kaimahi doing what they say they will, when they say they will do it. Whaiora also appreciate support being available when they need it – 24/7.

Housing is a home, not just a house for each whaiora. This is the first opportunity most whaiora have had to have a real home.

It is OK if whaiora fall over, it is all learning. They are supported to get back up and try again. There is a commitment from staff to hearing and supporting their dreams.

Billie and Jade are seeing marked increases of confidence and self esteem with the whaiora.

Two whaiora have made decisions about changes to their medication and Rapua staff are supporting them to work that through with their clinical team. This is working really well, particularly with ACOS and Manawanui teams who are really on board with the Rapua approach.

Some whaiora are now looking at education. Two whaiora are now working part time.

