24 May 2021

9(2)(a)

## **RE Official Information Act request WCDHB 9545**

I refer to your email dated 27 March 2021 to the Ministry of Health which they subsequently transferred to us 21 April 2021 requesting the following information under the Official Information Act from West Coast DHB regarding Mental Health (compulsory assessment and treatment) Act 1992. Specifically:

1. What is the ethnicity of psychiatrists currently working in the DHB psychiatric inpatient units and what is the ethnicity of allied clinical staff working in DHB inpatient psychiatric units?

There is one psychiatrist working in the DHB psychiatric inpatient unit and we are declining to provide their ethnicity pursuant to section 9(2)(a) of the Official Information Act to protect their privacy,

Manaakitanga is the only 'Inpatient' Mental Health Unit, there is one Allied Health Staff member specifically assigned to it.

Allied Health Staff work predominantly in the Community for Mental Health, however will, on occasion, work within the hospital setting if necessary. There is one Allied Health member, a Social Worker, who is employed to work within the Inpatient Mental Health unit. Please refer to **Table two** (below).

**Table one: Ethnicity of Allied Health Staff** 

Indian / Middle Eastern / other	3
NZ European	7
NZ Maori	5
Refused to answer / Unknown	11
Total:	26

## 2. What DHB protocols are there for ensuring Maori clinical staff care for Maori tangata whaiora?

All Māori inpatients have access to our Te Rauawa o te Waka Hinengaro Hauora (Māori Mental Health) service, regardless of mental health act status. This service comprises the Kaiārahi (Clinical Manager Māori Mental Health Service), Pūkenga Tiaki (2.75 FTE) and Kaumatua. The service aims to support tangata whaiora and their whanau with their cultural needs.

The service can advocate on behalf of the tangata whaiora, such as in multidisciplinary team discussions where they can advocate for a Kaupapa Māori focus for care and treatment.

Our Pūkenga Tiaki are working, where possible, with the crisis response team, to facilitate and support transitions into the acute inpatient unit, as well as in the transition into the community following discharge from the inpatient unit

I trust this satisfies your interest in this matter.

Please note that this response, or an edited version of this response, may be published on the West Coast DHB website after your receipt of this response.

Yours sincerely

Ralph La Salle

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Planning, Funding & Decision Support