Submissions: Psychosocial Recovery Planning Guidelines

Submissions close **14 July** 2006.

Please use the following detachable pages or email your response to <u>psychosocialrecovery@moh.govt.nz</u>

Responses in other formats will be considered separately from this consultation analysis.

You do not have to answer all the questions or provide personal information if you do not want to.

This submission was completed by: Address: (Street/box number)		:	Suzanne Rolls			
		r)	PO Box 2128,			
	(town	/city)	Wellington			
email: Organisation: (if applicable) Position: (if applicable)			suzanner@nzno.org.nz New Zealand Nurses Organisation Professional Nursing Advisor			
]				
]				
Are you submitting as: (Tick one box only in this section) An individual (not on behalf of an organisation) On behalf of a group or organisation Other: (please specify) Please indicate which sector your submission represents: (You may tick as many boxes as apply)						
District H	Iealth Board	En En	ergency planner		Cultural Advisor	
Governm	ent agency	Sei	vice provider		Individual	
NGO		Ho	spital service		Mental health service	
Crown er	ntity	Re	st home		Disability service	
\bigcirc Other – F	Please specify New Ze	aland Nu	rses Organisation is a prof	fessiona	al body of nurses and a union	

Please return one copy of your submission no later than 5pm on 14 July 2006.

Psychosocial Recovery Planning Guidelines Mental Health Directorate Ministry of Health PO Box 5013 WELLINGTON psychosocialrecovery@moh.govt.nz

All submissions will be acknowledged by the Ministry of Health and a summary will be sent to all those who request a copy. The summary will include the name of all those who made a submission, unless individuals request their name not be published.

Do you wish to receive a copy of the summary of submissions?

	Yes Yes	☐ No
Minist are an	submission may be requested under the Officitry of Health will release your submission to the individual as opposed to an organisation, the Memission if you check the following box.	e person making the request. However, if you
⊠ I do 198	o not give permission for my personal details to be re-	leased to persons under the Official Information Act
☐ I de	o not give my permission for my name to be listed in	the published summary of submissions.
Const	ultation Questions	
Part A	<u>A</u>	
1.	Do you find the principles and planning sty it useful? If not, can you suggest an alternatimprove Part A.	vle of this document useful? If so, how was ative? Please indicate any suggestions to
	Yes	☐ No
involve there	planning and principle styles are useful, there yed in the recovery phase. Many NGO will be is a potential issue on the workforce capacit D believes that there will be significant shorta	e used at all levels of the pandemic plan; y and resourcing this recovery phase.
2.	Are there key areas of evidence-based into issues that are not covered with respect to have you identified?	erventions and / or Pandemic Influenza psychosocial recovery? If so, what issues
	Yes	☐ No
the co Natior at risk	nents: discussion on the effects of recovery does community and health workers will be support nal Action Plan. However, there are significated from the pandemic. Health workers ow ealth workers do not survive a possible pandemic.	ed in the "recover from it" phase of the ant areas where healthcare workers will be in family needs will need to be addressed, if

Part B

Are the interests of your organisation represented adequately in this Psychosocial Recovery Planning Guidelines? If not, how could they be represented more fully?					
Yes	⊠ No				
ew Zealand Nurses Of lering a representative external nursing represented in the line and its implementation of the MOH that the left of the left in t	rganisation is disappointed with the Ministry of Health for not from its various speciality groups. NZNO has noted that there sentative on the advisory group. NZNO believes that the use of entation will be provided mostly by nurses, especially those in ntatives from Te Runanga O Aotearoa – NZNO and the Mental NO, would have been appropriate. NZNO is seeking it such lack of representation from NZNO will not occur in the tin the planning of these guidelines, NZNO will be sending hops and also sending representatives to the consultation untry in August and September. This feedback will be omissions.				
	re other organisations that are not included who should be? should they be included?				
Yes Yes	□ No				
ents:					
unanga O Aotearoa – al Health Nurses Sect					
This is representatio	a significant lack of nursing representation in the advisory n of nursing groups, not sole practitioners from a DHB for ing background employed by MOH.				
Is the structure of the more useful?	e operational elements of this plan helpful? How could it be				
Yes	☐ No				
ents:					
	Recovery Planning G Yes ents: ew Zealand Nurses Ordering a representative external nursing representative external nursing representative external nursing representative and its implementation of the MOH that the lack of involvementatives of the MOH that the entatives to the works ago throughout the could mented with those substitution are they? Why seems: ew Zealand Nurses Ordering O Aotearoa — all Health Nurses Section — all Health Nurses S				

6.	Is the content of the operational parts of this plan helpful? How could it be more useful?					
	⊠ Yes	☐ No				
		ions for providers to plan and also there is actual whole would work together.				
7.		rational planning that have not been included? If ey? Do you have any solutions you could share with				
	∑ Yes	☐ No				
		will ensuring in the consultation meetings that this will be				
Gene	e <u>ral</u>					
8.	Do you have any suggestions for Planning Guidelines? Please tell	additions or deletions to the Psychosocial Recovery us about them.				
	∑ Yes	☐ No				
Comm	ents:					
availal comm essen blackd comm	bility during a pandemic. There ne- dunication especially for those in qualitial to communicating to communition and flooding in 2006 gives evidualization being of use.	made upon the use of technology and its eds to be more work on other modes of arantine. The use of radio and television is es. New Zealand recent history during power dence to the lack of email, internet or other forms of insultation to give the MOH more details on the				

9.	9. Do you have any plans or ideas for post-recovery evaluation of your organisational Psychosocial Recovery Planning Guidelines?				
	_				
	⊠ Yes	☐ No			
in the during evider are po Zeala The country the repanded aged	D has concerns on the pandemic situation. g a pandemic. Attention of a pandemic of the state of	e recovery of all nurses, midwives and other health care. We believe that they are significantly at risk of mental hon to these health workers will need to be addressed. Indemic showed that many nurses died in the pandemic ving of colleagues and a redesign of workplaces prior to coming operational again. Will need significant attention and how we will be as a conly realised at that point. The evidence from the 1918 community took along time to recover. NZNO believes serious risk during a pandemic and families will need to	narm The There the New ountry in that the		
10.	Are there any other	comments you wish to make?			
	Yes Yes	☐ No			
believ	is looking forward to es that with working to	a closer relationship with the MOH on these guidelines ogether on this and during a pandemic we will be succe			

Thank you for taking the time to complete this submission.