

Bridging the gap



Adult Mental Health Nurse Practitioner:
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Agenda

- ↓ About me
- ↓ Primary care challenges
- ↓ Secondary mental health challenges
- ↓ Statistics
- ↓ GLMS
- ↓ Case Studies
- ↓ Questions

About me:



Primary Care challenges

I only have 15 minutes per consultation - how can I properly assess mental health?

The patient is Chinese. I am not sure if this is cultural issues or mental health?

Patients often present with multiple issues - where do I even start?

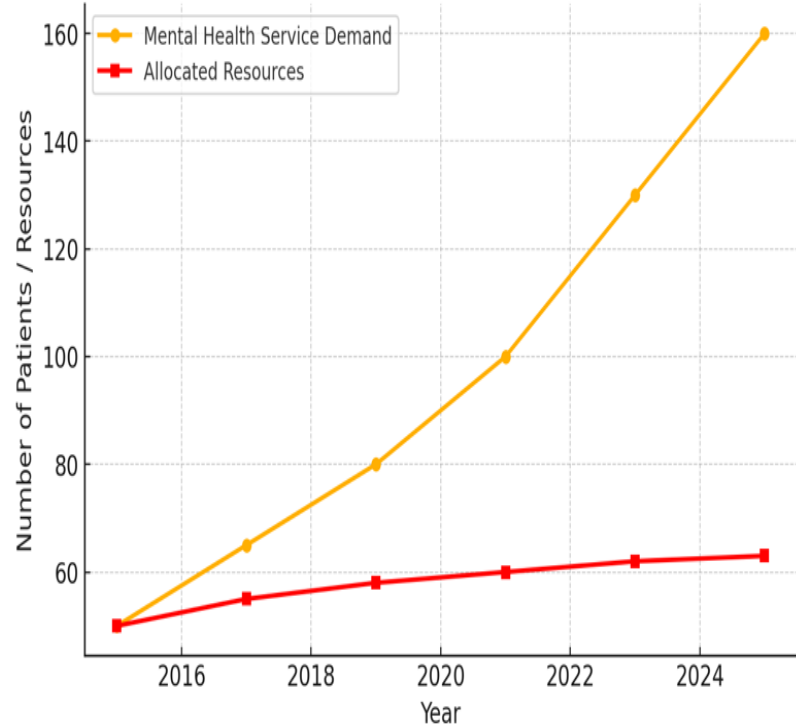
Referrals to secondary mental health have been declined. What to do ?

If I have the time to assess properly, I would have prescribed. But I do not have the time

Secondary mental health challenges

- ↴ Increased population
- ↴ Increased mental health awareness
- ↴ Same workforce

Increasing Demand vs. Limited Resource Allocation in Mental Health Services



Statistics

- ↴ 35-50% of people with mental illnesses receive no treatment in NZ. (Mental Health Inquiry Report, 2018)
- ↴ 1 in 3 adults (34.8%) reported experiencing mild or greater anxiety/depression symptoms in the past two weeks.
(NZ Health Survey 2021/22, 2022/23)
- ↴ Growing number of individuals (both adults & children) report needing professional help but not receiving it.
(Ministry of Health, 2023)
- ↴ The urgent need to bridge the gap between primary and secondary mental health services to ensure timely and effective support.**

GLMS- Adult Mental Health NP Clinic

✓ Criteria:

- ↓ Age: **17-65 years old**
- ↓ **Mild to moderate mental health issues**
- ↓ Covers **depression, anxiety, PTSD, psychosis, substance use disorder, ADHD, etc.**

⊘ Exclusion Criteria:

- ↓ **Currently under secondary mental health service**
- ↓ **Imminent risks (e.g. high suicide or violence risk)**

Case studies: Grace's Journey

 **Patient:** Grace, 26 years old

 **Presenting Issue:** Struggling with mood issues, impacting work and life. No imminent risks.

 **Referral Status:** Declined by secondary mental health services.


 **Assessment:** Diagnosed with **Premenstrual Dysphoric Disorder (PMDD)**.

 **Intervention:** Started on **sertraline one week prior to menstrual cycle**.

 **Outcome:** Significant improvement in mood and functioning.

 **Next Steps:** Care transitioned back to GP for ongoing management.


Case Study: Jacob's Journey

 **Patient:** Jacob, 20 years old

 **Presenting Issue:** Dropped out of university in the first year due to ongoing distraction and lack of focus.

 **Referral Status:** Declined by secondary mental health services due to lack of resources for ADHD assessment.


 **Assessment:** Diagnosed with **ADHD, Combined Type**.

 **Intervention:** Started on **medication for ADHD**.

 **Outcome:** Significant improvement in focus and planning to return to university in the coming semester.


 **Next Steps:** Ongoing support and medication monitoring through primary care.


Case Study: Carolyn's Journey

 **Patient:** Carolyn, 42 years old

 **Presenting Issue:** Seeking ADHD diagnosis after her son was diagnosed by a pediatrician.

 **Referral Status:** Placed on multiple specialist waiting lists since last August with no progress.

 **Assessment:** Clear **ADHD diagnosis** with a strong **family history** (brother also diagnosed with ADHD).

 **Background:** Dropped out after **6th form**, attempted university **three times** but could not complete.

 **Work History:** Had various jobs but never stayed in one for more than **two years**.

 **Intervention:** Confirmed **ADHD diagnosis** and started on **treatment**.

 **Outcome:** Improvement in daily functioning, ongoing management in primary care.

References

- ↓ Mental Health Inquiry Report (2018). He Ara Oranga: Report of the Government Inquiry into Mental Health and Addiction. Wellington, New Zealand.
- ↓ Ministry of Health (2022). New Zealand Health Survey 2021/22, 2022/23: Key findings on mental health. Wellington, New Zealand.
- ↓ Ministry of Health (2023). Unmet Need for Mental Health Services: Annual Report. Wellington, New Zealand.

Questions?

