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|  | **All District Health Boards** |
| **ADDICTION SERVICES-** **ALCOHOL AND OTHER DRUG SERVICES OPIOID SUBSTITUTION TREATMENT –** **SPECIALIST SERVICE AND SHARED CARE WITH PRIMARY HEALTH CARE****MENTAL HEALTH AND ADDICTION SERVICES****TIER THREE****SERVICE SPECIFICATION** |
| **STATUS: These service specifications may be amended to meet local agreement needs.** | **NON-MANDATORY** |
| **Review History** | **Date** |
| First published on NSFL | June 2010 |
| Amended: clarified reporting requirements | February 2013 |
| Amended: added MHD69S & MHD70S purchase unit code, removed standard provider monitoring reporting tables. Minor editing. | April 2017 |
| Consideration for next Service Specification Review | Within five years |

**Note:** Contact the Service Specification Programme Manager, Service Commissioning, Ministry of Health to discuss proposed amendments to the service specifications and guidance in developing new or updating and revising existing service specifications.

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**ADDICTION SERVICES- ALCOHOL AND OTHER DRUG SERVICES**

**OPIOID SUBSTITUTION TREATMENT – SPECIALIST SERVICE AND SHARED CARE WITH PRIMARY HEALTH CARE**

**MENTAL HEALTH AND ADDICTION SERVICES**

**TIER THREE SERVICE SPECIFICATION**

**MHD69, MHD69A, MHD69B, MHD69C, MHD69D, MHD69S,**

**MHD70 MHD70A MHD70B, MHD70C, MHD70D, MHD70S**

This tier three service specification for Opioid Substitution Treatment – Specialist Service and Shared Care with Primary Health Care must be used in conjunction with tier one Mental Health and Addiction Services and tier two Addiction Services service specifications. Additionally, it is linked to other tier three Addiction service specifications.

Opioid Substitution Treatment (OST) is provided to a complex client group who experience changes in their level of functioning and in the levels of support they require. The service specification defines the objectives of Opioid Substitution Treatment as delivered by the Specialist Service (the OST Specialist Service) in its own capacity or working in a shared care arrangement with Primary Health Care (the Service).

1. **Service Definition**

The Service provides OST for opioid dependence where treatment includes necessary supportive services, such as psychosocial interventions in accordance with the *Practice Guidelines for Opioid Substitution Treatment in New Zealand 2008* (Ministry of Health).

Programmes will be cognisant of the changes that clients experience in their level of functioning, and in the levels of support that they require. Programmes will accept those with co-existing mental health problems.

***1a OST Specialist Service***

The OST Specialist Service will:

* provide information on the risks and benefits of OST
* refer clients to any medical service required eg, dental, nursing, treatment for hepatitis, etc as required
* facilitate access to any other health and social service agencies, including peer support and advocacy services
* beyond the first year of receiving a OST Specialist Service, facilitate the stable client’s transition to primary health care for continued prescribing and shared care
* provide ongoing treatment and care for clients who, at the expiration of the one year period in the OST Specialist Service, are assessed as unsuitable for transition or return to primary health care
* provide support, liaison, information, advice and training to primary health care practitioners including:
* fulfilment of obligations according to the Misuse of Drugs Act 1975
* developing protocols for shared care
* sharing relevant health information
* ensuring timely prescriptions to community pharmacists for opioid substitution medications and providing ongoing support, liaison, consultation and training to pharmacists.
* facilitate ongoing prescribing and support for clients transferred to or from or residing in prison services in accordance with the Prison Opioid Substitution and Detoxification Protocol
* provide clinical advice to other health services that clients receiving OST may access, eg hospitals, rest homes, etc.

***1 b. OST Specialist Service support of Primary Health Care***

The Service provided is the Opioid Substitution Treatment Specialist Service (OST Specialist Service) for (and with) Primary Health Care. This is described as Shared Care and is for contracting OST Specialist Services to provide support for individual clients, as Primary Health Care Support Places.[[1]](#footnote-1)

OST Specialist Service support of Primary Health Care will consist of:

* working with Primary Health Care to provide opioid substitution medication for individual clients in accordance with relevant legislation (refer the *Practice Guidelines for Opioid Substitution Treatment in New Zealand 2008* (Ministry of Health)) for example, granting an authority to prescribe for opioid dependence
* providing a liaison and consultation through the OST Specialist Service’s dedicated primary health care clinical coordinator role and/or designated case manager function
* supporting the client in an outreach capacity by:
* facilitating the client’s transition to shared care
* supporting a client who is at risk of becoming unstable
* supporting sustained recovery through the provision of psychosocial support and liaison services where indicated
* supporting planned withdrawal from opioid substitution medication
* completing annual (minimum) case reviews with the client.
* ensuring that shared care tasks are formally arranged with all relevant parties including:
* writing of timely opioid substitution medication prescriptions
* facilitating prescription changes where necessary
* client / prescriber face to face consultations
* maintaining at minimum six-monthly contact with and treatment updates from the pharmacist and general practice
* supporting the client, primary health care and the pharmacy to address potential or actual client instability (eg. reports of diversion[[2]](#footnote-2))
* where practicable, facilitating emergency responsiveness, including after-hours, access to opioid substitution treatment
* where, practicable accessing funding streams that can support eligible clients receiving OST in a primary health care or other clinical setting
* taking responsibility for accepting the return to acute or long-term specialist care of clients who cannot be jointly supported within the primary health care setting.

**Service Activities**

The activities of this Service are to:

* provide OST for individual clients in accordance with relevant legislation (refer *Practice Guidelines for Opioid Substitution Treatment in New Zealand 2008* (Ministry of Health))
* facilitate psychosocial support and interventions with a focus on the client’s immediate needs (for example, housing) and retention in treatment
* foster shared understanding about the patient journey with the client including the expectation of eventual transition to primary health care and through early facilitation of a client/General Practitioner relationship.
* accept people who experience co-existing mental health problems
* provide OST for people with opioid dependence by incorporating it into a total health treatment plan administered by a General Practitioner or other primary health care practitioner (with support from the OST Specialist Service) in accordance with the *Practice Guidelines for Opioid Substitution Treatment in New Zealand 2008* (Ministry of Health).

(The target is for 50 percent of referred clients to receive OST in Primary Health Care and 50 percent referred clients to receive OST in an OST Specialist Service).

**2.1 Māori Health**

Refer to tier one Mental Health and Addiction Services service specification.

**3. Service Users**

Refer to the tier one Mental Health and Addiction Services service specification.

**4. Access**

**4.1 Entry Criteria**

***4.1 a. OST Specialist Service***

* Access[[3]](#footnote-3) to the Service may be from any source, including by clients directly or upon referral from primary health care practitioners, family, caregivers, and community members, and from inpatient, community or intensive treatment services.
* The Service will assess the client to determine the person’s suitability for OST within two weeks of the client presenting at the service.
* The clients who are assessed as needing OST will commence on opioid substitution medication within two weeks of assessment.
* Where possible, the Service will facilitate emergency, including after-hours, access to OST for both specialist service and primary health care clients.

***4.1 b OST Specialist Service support of Primary Health Care***

Referrals are on a case-by-case basis as negotiated and agreed between the OST Specialist Service and Primary Health Care providers.

* + 1. **Exit Criteria**

In the event of planned or unplanned discharges the OST Specialist Service will offer post discharge support to the client.

**5. Service Components**

**5.1 Processes**

The key processes in addition to those included in the tier one Mental Health and Addiction Services service specification and tier two Addiction Services service specification, are:

* information provision on the risks and benefits of the OST
* assessment and treatment provision
* facilitation to access a range of physical and mental health and social services to assist with stabilisation, behavioural changes and lifestyle improvements
* transition to shared care in an outreach capacity.
	1. **Settings**

***5.2 a. OST Specialist Service***

This Service may be provided within alcohol and other drug treatment and or care facilities, or within a range of other community settings including inpatient hospital, marae or specifically designated OST settings.

***5.2 b. OST Specialist Service support of Primary Health Care***

This Service may be provided within primary health care practices, or within a range of other community settings including marae or specifically designated OST settings.

**5.3 Key Inputs**

The OST Specialist Service team will provide clinical oversight of this service. The Service will be delivered by:

* at least one registered medical practitioner specifically available at the Specialist Service and one other health professional available during hours of service delivery
* dedicated primary health care clinical coordinator or dedicated function within Service case manager role descriptions providing shared care in an outreach capacity to clients receiving OST in primary health care
* consideration of a dedicated social worker / Toia Whānau Ora practitioner as part of the multidisciplinary team to assess immediate needs and provide consultation, liaison, brokerage and referral to allied professionals in other health care and social services including iwi social services
* a multi-disciplinary team of people with skills and experience in alcohol and other drug interventions, including the treatment of opioid dependence, and who belong to or are working towards belonging to one of the following categories:
* health professionals regulated by the Health Practitioners Competence Assurance Act 2003
* people regulated by the Drug and Alcohol Practitioners Association Aotearoa New Zealand (DAPAANZ) or another health or social service professional body
* fellows of the Australasian Chapter of Addiction medicine
* Nurse Practitioners working in collaboration with a registered Medical Practitioner.

**6. Service Linkages**

Linkages include, but are not limited to the following:

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| **Service Provider** | **Nature of Linkage** | **Accountabilities** |
| Other providers of Mental Health and addiction services and general health | Referral, liaison, consultation  | Work with other relevant professionals and agencies in the care of the service user |
| Other service providers involved in OST, eg GPs, Pharmacists | Referral, liaison, consultations shared care | Work collaboratively with other providers involved in OST. |

**7.** **Purchase Units and Reporting Requirements**

**7.1** Purchase Unit (PU) codes are defined in the DHB and Ministry’s Nationwide Service Framework Purchase Unit Data Dictionary. The following codes apply to this Service.

| **PU Code** | **PU Description** | **PU Definition** | **Unit of Measure** |
| --- | --- | --- | --- |
| MHD69 | Alcohol & Other Drugs Service - Opioid Substitution Treatment – Primary Care Support Places | Service to provide opioid substitution treatment (OST) for people with opioid dependence incorporating it into a total health treatment plan administered by a General Practitioner or other primary health care practitioner with the support from the Specialist OST. The Service will also include people who experience co-existing mental health problems. This service excludes administrative requirements defined in the Misuse of Drugs Act 1975. | Client |
| MHD69A | Alcohol & Other Drugs Service - Opioid Substitution Treatment – Primary Care Support Places – Senior Medical | Service to provide opioid substitution treatment (OST) for people with opioid dependence incorporating it into a total health treatment plan administered by a General Practitioner or other primary health care practitioner with the support from the Specialist OST. The Service will also include people who experience co-existing mental health problems. The service is provided by senior medical staff, part of a multidisciplinary team. This service excludes administrative requirements defined in the Misuse of Drugs Act 1975. | FTE |
| MHD69B | Alcohol and other Drugs Service - Opioid Substitution Treatment – Primary Care Support Places – Junior Medical | Service to provide opioid substitution treatment (OST) for people with opioid dependence incorporating it into a total health treatment plan administered by a General Practitioner or other primary health care practitioner with the support from the Specialist OST. The service is provided by junior medical staff, part of a multidisciplinary team. This service excludes administrative requirements defined in the Misuse of Drugs Act 1975. | FTE |
| MHD69C | Alcohol and other Drugs Service - Opioid Substitution Treatment – Primary Care Support Places – Nurses & allied health | Service to provide opioid substitution treatment (OST) for people with opioid dependence incorporating it into a total health treatment plan administered by a General Practitioner or other primary health care practitioner with the support from the Specialist OST. The service is provided by nurses and allied health staff, part of a multidisciplinary team. This service excludes administrative requirements defined in the Misuse of Drugs Act 1975. | FTE |
| MHD69D | Alcohol and other Drugs Service - Opioid Substitution Treatment – Primary Care Support Places – Non clinical | Service to provide opioid substitution treatment (OST) for people with opioid dependence incorporating it into a total health treatment plan administered by a General Practitioner or other primary health care practitioner with the support from the Specialist OST. The service is provided by non clinical staff, part of a multidisciplinary team. This service excludes administrative requirements defined in the Misuse of Drugs Act 1975. | FTE |
| MHD69S | Alcohol and other Drugs Service - Opioid Substitution Treatment – Primary Care Support  | Service to provide opioid substitution treatment (OST) for people with opioid dependence incorporating it into a total health treatment plan. This service excludes administrative requirements defined in the Misuse of Drugs Act 1975. | Service |
| MHD70 | Alcohol & Other Drugs Service – Opioid Substitution Treatment – Specialist Service | Service to provide specialist opioid substitution treatment to a complex client group who experience changes in their level of functioning and in their support they require. This service excludes administrative requirements defined in the Misuse of Drugs Act 1975. | Client |
| MHD70A | Alcohol & Other Drugs Service – Opioid Substitution Treatment – Specialist Service – Senior medical  | Service to provide specialist opioid substitution treatment to a complex client group who experience changes in their level of functioning and in their support they require. The service is provided by senior medical staff part of the multidisciplinary team. This service excludes administrative requirements defined in the Misuse of Drugs Act 1975. | FTE |
| MHD70B | Alcohol & Other Drugs Service – Opioid Substitution Treatment – Specialist Service – Junior Medical | Service to provide specialist opioid substitution treatment to a complex client group who experience changes in their level of functioning and in their support they require. The service is provided by junior medical staff part of the multidisciplinary team. This service excludes administrative requirements defined in the Misuse of Drugs Act 1975. | FTE |
| MHD70C | Alcohol & Other Drugs Service Opioid Substitution Treatment Specialist Service Nurses & allied | Service to provide specialist opioid substitution treatment to a complex client group who experience changes in their level of functioning and in their support they require. The service is provided by junior medical staff part of the multidisciplinary team. This service excludes administrative requirements defined in the Misuse of Drugs Act 1975. | FTE |
| MHD70D | Alcohol & Other Drugs Service Opioid Substitution Treatment Specialist Service Non clinical | Service to provide specialist opioid substitution treatment to a complex client group who experience changes in their level of functioning and in their support they require. The service is provided by non medical staff part of the multidisciplinary team. This service excludes administrative requirements defined in the Misuse of Drugs Act 1975. | FTE |
| MHD70S | Alcohol & Other Drugs Service – Opioid Substitution Treatment – Specialist Service | Service to provide specialist opioid substitution treatment to a complex client group who experience changes in their level of functioning and in their support they require. This service excludes administrative requirements defined in the Misuse of Drugs Act 1975. | Service |

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| **Unit of Measure** | **Unit of Measure Definition** |
| Client | Number of clients managed by the service in the reporting period (period is annual 1st July - 30th June) i.e. caseload at the beginning of the period plus all new cases in the period. 'Client' and 'Service user' are interchangeable. |
| FTE | Full-time equivalent staff member (clinical or non-clinical) involved in direct delivery of services to consumers. Exclude time that is formally devoted to administrative or management functions e.g. half-time coordination of a community team. |
| Service | Service purchased in a block arrangement uniquely agreed between the parties to the agreement |

**7.2. Reporting**

The Provider must comply with the requirements of national data collections: PRIMHD.

Additional information to be reported and the frequency of collection are specified by the Funder in the Provider Specific Terms and Conditions as agreed with the Service Provider.

The information required by the Funder will be sent to:

Performance Reporting

Sector Operations

Ministry of Health

Private Bag 1942

Dunedin 9054

Email performance\_reporting@moh.govt.nz

The Performance Monitoring Reporting tables for the Mental Health and Addiction Service Specifications[[4]](#footnote-4) may be used for performance monitoring if specified as agreed with the Funder.

1. Primary Care Support Places refers to the key focus of this specification and the title of the purchase unit, ie support to Primary Care for those receiving OST in a Primary Care setting. [↑](#footnote-ref-1)
2. Drug diversion is the transfer of a prescription drug from a lawful to an unlawful channel of distribution or use. [↑](#footnote-ref-2)
3. Refer also to access criteria in *Practice Guidelines for Opioid Substitution Treatment in New Zealand 2008* Sections 2.1 – 2.3. [↑](#footnote-ref-3)
4. Performance Monitoring Reporting cluster tables for Mental Health and Addiction Services are published on the Nationwide Service Framework Library, Mental Health and Addiction Service specifications page, Downloads section www.nsfl.health.govt.nz/service-specifications/current-service-specifications/mental-health-and-addiction-services [↑](#footnote-ref-4)