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|  | **All District Health Boards** | |
| ADULT MENTAL HEALTH SERVICES -ADULT CRISIS RESPITE SERVICEMENTAL HEALTH AND ADDICTION SERVICES -Tier THREEService Specification | | |
| **STATUS: These service specifications may be amended to meet local agreement needs.** | | **NON-MANDATORY** |
| Review History | | Date |
| First Published on NSFL | | June 2009 |
| **Amended:** Removal of unapproved Purchase Units MHK03C, MHAK03. Minor editing changes for consistency. | | February 2011 |
| **Amended:** clarified reporting requirements | | February 2013 |
| **Amended:** added purchase unit code MHA03S, 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.

Nationwide Service Framework Library web site <http://www.nsfl.health.govt.nz>

**ADULT MENTAL HEALTH SERVICES - ADULT CRISIS RESPITE SERVICE**

**MENTAL HEALTH AND ADDICTION SERVICES-**

**TIER THREE SERVICE SPECIFICATION**

**MHA03, MHA03C, MHA03D, MHA03S**

This tier three service specification for Adult Mental Health Services - Adult Crisis Respite (the Service) is linked to tier one Mental Health and Addiction Services and tier two Adult Mental Health service specifications.

**1. Service Definition**

The Service will include a range of crisis respite options developed and maintained for adults in crisis requiring an alternative to an acute inpatient setting.

Options will include, but not be limited to:

provision of staff with skills appropriate to the circumstances, who will monitor and support the person in crisis, whether in their own home or elsewhere

short-term care in supervised accommodation

short-term care in a specifically dedicated respite facility.

Respite usage will be for as short a period as possible during the crisis period.

Cultural expertise is to be available in these situations to ensure satisfactory options are considered and to assist with crisis resolution.

Assessment, treatment, therapy and support will be provided in collaboration with the District Health Board (DHB) Provider Arm Clinical Team as required during the period of respite care with the aim of quickly resolving the need for the crisis service.

Respite providers will work in partnership with other Specialist Clinical Teams.

**2. Service Objectives**

**2.1 General**

To provide a home-based or residential service as an option for people who would otherwise require admission to acute inpatient mental health services.

**2.2 Māori Health**

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

**3. Service Users**

The Service Users are eligible adults as detailed in the tier two Adult Mental Health service specification.

**4. Access**

Access to the Service will be via community mental health teams.

**5. Service Components**

**5.1 Processes**

The following processes apply but are not limited to: assessment, treatment, intervention and support, review process and discharge.

**5.2 Settings**

The Service is provided in community based settings.

**5.3 Key Inputs**

The Service is provided by a multi-disciplinary team of people with skills and experience in mental health intervention, treatment and support, made up of:

health professionals regulated by the Health Practitioners Competence Assurance Act 2003

people regulated by a health or social service professional body

people who interact with Service Users and who are not subjected to regulatory requirements under legislation or by any other means.

Staff will require skills and experience in working with people in crisis.

**6. Service Linkages**

Linkages include, but are not limited to those described in tier one Mental Health and Addiction Services and tier two Adult Mental Health service specifications.

**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** |
| MHA03 | Adult crisis respite | A service that provides a home-based or residential service as an option for people who would otherwise require admission to acute inpatient mental health services. | Occupied bed day |
| MHA03C | Adult crisis respite – Nursing/allied health staff | A service that is provided by nurses and/or allied health staff, home-based or residential as an option for people who would otherwise require admission to acute inpatient mental health services. | FTE |
| MHA03D | Adult crisis respite – Non-clinical staff | A service that is provided by non-clinical support staff, home-based or residential as an option for people who would otherwise require admission to acute inpatient mental health services. | FTE |
| MHA03S | Adult crisis respite | A service that is home-based or residential as an option for people who would otherwise require admission to acute inpatient mental health services. | Service |

| **Unit of Measure** | **Unit of Measure Definition** |
| --- | --- |
| Occupied bed day | Total number of beds that are occupied each day over a designated period. For reporting purposes, count beds occupied as at 12 midnight of each day. Leave days, when the bed is not occupied at midnight are not counted. Counting formula is discharge date less admission date less leave days |
| 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](mailto:performance_reporting@moh.govt.nz)

The Performance Monitoring Reporting tables for the Mental Health and Addiction Service Specifications[[1]](#footnote-1) may be used for performance monitoring if specified as agreed with the Funder.

1. 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-1)