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|  | **All District Health Boards** | | |
| **EATING DISORDER SERVICES –**  **DHB LIAISON SERVICE**  **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 NSF Library | | June 2009 |
| Amended: clarified reporting requirements | | March 2013 |
| Amended: added MHE31S purchase unit code, removed standard provider monitoring reporting tables. Minor editing. | | July 2016 |
| 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>

**EATING DISORDER SERVICES - DHB LIAISON SERVICE**

**MENTAL HEALTH AND ADDICTION SERVICES**

**TIER THREE SERVICE SPECIFICATION**

**MHE31A, MHE31B, MHE31C, MHE31S**

This tier three service specification for Eating Disorders DHB Liaison Service (the Service) is linked to tier one Mental Health and Addiction Services service specification and tier two Eating Disorders service specification.

**1. Service Definition**

The Service supports staff working to treat eating disorders in their DHB area, including staff in primary services. The Service also acts as a liaison on behalf of the local DHB Community Mental Health Team with the lead DHB specialist eating disorder provider.

This Service is only for DHBs when there is no specialist clinical eating disorder service (ie, this is for spoke DHBs in the hub and spoke model).

**2. Service Objectives**

**2.1 General**

The Service is likely to be based in the Community Mental Health Team of a DHB, and will include responsibility for eating disorders services within that DHB. The DHB liaison service will:

* facilitate clear communication between the DHB and eating disorders services, and between DHBs
* be the key DHB linkage between primary and secondary services, particularly in providing general practitioners and other primary care practitioners with advice, support and assistance with referrals and with supporting family/whānau
* advise, guide and support staff in primary care services
* assist with the supervision and professional development of staff involved in providing eating disorders services in their DHB
* be involved in referrals and transitions of Service Users to and from medical and psychiatric settings
* provide liaison/advice/input to medical and psychiatric services treating those with eating disorders
* receive support and education from tertiary eating disorders services.

**2.2 Māori Health**

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

**3. Service Users**

The Service Users will be others within the district, both DHB and Primary Care Providers requiring advice and support with the management of Eating disorders Service Users.

**4. Access**

**4.1 Entry and Exit Criteria**

This Service will be accessible to primary care and DHB workers, supporting those Service Users who experience anorexia, bulimia and EDNOS, and their family/whānau and carers.

**5. Service Components**

**5.1 Processes**

The processes include but are not limited to consultation and liaison.

**5.2 Settings**

The Service is provided in a community based or hospital setting.

**5.3 Key Inputs**

The Service is provided by Health professionals appropriately trained in the field of eating disorders regulated by the Health Practitioners Competence Assurance Act 2003.

**6. Service Linkages**

Linkages include, but are not limited to the following:

| **Service Provider** | **Nature of Linkage** | **Accountabilities** |
| --- | --- | --- |
| Primary and Secondary Services | Consultation/liaison | Providing General Practitioners, other primary health care practitioners and DHB staff with advice, support and assistance with referrals and with supporting Service Users, family/whānau. |

**7. Purchase Units and Reporting Requirements**

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** |
| --- | --- | --- | --- |
| MHE31A | Eating disorders DHB liaison - Senior medical staff | A liaison role based in the Community Mental Health Team of a DHB, provided by senior medical staff to support primary care workers working to treat eating disorders (Anorexia, Bulimia and EDNOS). The service is only for DHB's when there is no specialist clinical eating disorder service. | FTE |
| MHE31B | Eating disorders DHB liaison - Junior medical staff | A liaison role based in the Community Mental Health Team of a DHB, provided by junior medical staff to support primary care workers working to treat eating disorders (Anorexia, Bulimia and EDNOS). The service is only for DHB's when there is no specialist clinical eating disorder service. | FTE |
| MHE31C | Eating disorders DHB liaison – Nursing and/or allied health staff | A liaison role based in the Community Mental Health Team of a DHB, provided by nurses and/or allied health staff to support primary care workers working to treat eating disorders (Anorexia, Bulimia and EDNOS). The service is only for DHB's when there is no specialist clinical eating disorder service. | FTE |
| MHE31S | Eating disorders DHB liaison | A liaison role based in the Community Mental Health Team of a DHB, to support primary care workers working to treat eating disorders (Anorexia, Bulimia and EDNOS). The service is only for DHBs where there is no specialist clinical eating disorder service. | Service |

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| --- | --- |
| **Unit of Measure** | **Unit of Measure Definition** |
| 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)