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|  | All District Health Board**s** | |
| **FORENSIC MENTAL HEALTH SERVICES -**  **MENTAL HEALTH AND ADDICTION SERVICES**  **TIER TWO**  **SERVICE SPECIFICATION** | | |
| STatus: It is compulsory to use this nationwide service specification when purchasing this service. | | MANDATORY |
| **Review History** | | **Date** |
| First Published on NSFL | | June 2010 |
| Amendments: Removal of unapproved Purchase Units MHFK80A, MHFK83, MHFK84E, MHFK84C, MHFK84A, MHFK85C, MHFK86, MHFK86F. Minor editing changes for consistency. | | February 2011 |
| Amendments**:** clarified reporting requirements | | February 2013 |
| Amendments: added purchase units MHA ‘S’ series | | June 2016 |
| Amendments: Wording changes Service Definition (in-reach), Objectives (equitable health outcomes), Key inputs ability to work with individuals and their whānau and be sensitive to gender issues). Updated Department of Corrections to Ara Poutama Aotearoa. | | February 2020 |
| Consideration for next Service Specification Review | | Within five years |

**Note:** Contact the Service Specification Programme Manager, Ministry of Health [nsfl@health.govt.nz](mailto:nsfl@health.govt.nz) for queries about this service specification.

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

**FORENSIC MENTAL HEALTH SERVICES -**

**MENTAL HEALTH AND ADDICTION SERVICES**

**TIER TWO SERVICE SPECIFICATION**

This tier two service specification for Forensic Mental Health Services (the Service) is the overarching document for the range of tier three Forensic Mental Health service specifications. The service specification defines forensic mental health services and their objectives in the delivery of the Service.

This service specification must be used in conjunction with the tier one Mental Health and Addiction Services service specification and one of a range of tier three Forensic Mental Health service specifications listed in section 10 below. Local DHB service specifications may also be included under this service specification as appropriate.

**1. Service Definition**

The Service is facility centred with a range of in-reach services delivered in prisons, courts, community based and home-based settings, delivering safe, recovery focused, culturally responsive specialist forensic mental health care including effective assessment, treatment and rehabilitation for people with mental health and or co-existing (mental health and addiction) needs who are currently in the justice system and or who are:

special patients that are:

subject to an order made under section 24 of the Criminal Procedure (Mentally Impaired Persons) Act 2003, or

are detained in a hospital pursuant to section 45(4)(d) or 46 of the MH (CAT) Act

* mental health patients who are declared to be restricted patients under section 55 of the MH(CAT) Act
* remandees per SS 38/44 CPMIP Act 2003, Section 25s (CCPMIP 2003) or Hybrids ie, SS 34 i (b) 1 CPMIP 2003
* clients of General Mental Health Adult Services (GMHAS) that have behaviours that present a high level of risk to others and these behaviours cannot be managed safely within the resources of (GMHAS). Referrals from GAMHS to RFPS will be determined through regional agreements on a case by case basis.

The Service also includes prison in-reach services for service users who have severe mental health conditions who do not need the additional support of admission to an inpatient unit.

The Service sits at the interface of mental health and justice. The Service will provide:

* an assessment of the clinical intervention that is required and confirmation of the legal status and legal process to be followed
* access to services based on legal and clinical need
* preparation of Court reports as required under the Criminal Justice Act 1985 or other statutes
* establishment of the therapeutic relationship with a focus on ensuring recovery-focused intervention, crisis intervention and prevention of the escalation of the Service User’s illness, prevention of disability, treatment of offending related needs and support to minimise dependency
* treatment in the least restrictive environments as bed numbers allow in facilities that match Service User needs
* awareness of the safety needs of patients and the broader community, including staff, reflecting that some Service Users may present a risk of suicide, self-harm or danger to others (balancing the individual rights of the person against safety issues)
* engagement and responsiveness to the needs of family and whānau and consideration of Service User’s dependents and appropriate involvement
* targeted approaches to achieve equitable health and disability outcomes for specific groups such as: older people, women, people with disabilities and those people of ethnic minorities
* opportunities for Service user participation in the Service.

**2. Service Objectives**

* 1. **General**

The objectives of the Service are to provide timely, comprehensive, multi-disciplinary assessments, interventions and rehabilitation in a Forensic context. Service provision will be based on a process of assessment and will promote positive perceptions of people with mental illness including those who have both a mental illness and contact with the criminal justice system.

The fundamental principle for forensic mental health services is that all people have the right to expect the same level of mental health services, based on need, as others in the general population. People accessing forensic mental health services may present with complex issues due to socio-economic determinants, trauma, violence, alcohol and other substance misuse, offending and their illness. Services will assist them to meet these challenges establishing a sense of purpose and hope.

**2.2 Māori Health**

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

**3. Service Users**

The Service Users will be people that meet the assessment criteria for Forensic Mental Health services. Young people should be transitioning to adult services up to their 18th birthday until their 20th birthday if developmentally appropriate.

**4. Access**

**4.1 Entry and Exit Criteria**

Entry into and discharge or exit from the Service is determined on the basis of comprehensive assessment of need (ie, being an offender who is severely affected by a mental health or coexisting mental health and addiction problem).

Entry and exit criteria specific to the Service are described in the tier three service specifications.

DHBs will develop their own local policies and protocols for entry and exit.

**5. Service Components**

**5.1 Processes**

The processes include but are not limited to the following: triage (may be via court liaison) assessment, treatment, intervention, advocacy and support, review process, wellness management, rehabilitation, consultation, liaison and education, transitional planning and discharge.

**5.2 Settings**

The Service is provided in community, court, prison and hospital based settings.

**5.3 Key Inputs**

The Service is provided by a multi-disciplinary team of people with skills and experience in identifying and responding to the needs of offenders affected by mental health and addiction disorders, including an appropriate balance of:

* health professionals regulated by the Health Practitioners Competence Assurance Act 2003
* people regulated by a recognised health or social service professional body
* people who support Service Users and are supervised by appropriately trained and regulated health professionals.

The team must have competence in:

* psychiatry, alcohol and other drug identification and management, and forensic triage and assessment, interventions and treatment.
* the identification and treatment of co-existing disorders, and the identification and referral of other potentially unmet need such as: intellectual disability, other disabilities and physical health problems.

All staff will have an understanding of the legislative framework in which forensic services operate.

New staff will have appropriate orientation and training to meet the required competencies and supervision will be in place. This includes:

* cultural competency and have the ability to work with individuals and their whānau and
* be sensitive to gender issues.

Consumer and cultural roles are engaged in the delivery of this Service.

**5.4. Pacific Health**

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

**6. Service Linkages**

Refer to tier one Mental Health and Addiction Services. In addition, linkages include, but are not limited to the following:

| **Service Provider** | **Nature of Linkage** | **Accountabilities** |
| --- | --- | --- |
| Other providers of Mental Health and addiction services (particularly AOD, general adult mental health services and Youth Forensic services). | Referral, liaison, consultation and collaboration | Work with other relevant professionals and agencies in the care of the Service User.  Support effective transfer of Service Users from one service to another.  In the case of youth high tariff offending, work with Youth Forensic Mental Health services to ensure youth clinical and developmental needs are understood and are met. |
| General health services including primary care | Referral  Liaison  Collaboration | Work with relevant primary and secondary care services who are (or need to be) involved in the care of the Service User.  Support effective transfer of Service Users from one service to another. |
| NGO Providers | Referral Liaison  Collaboration | Work with NGOs to support the Service User in functioning (eg housing, income support entitlements, and education and employment opportunities). |
| Providers of Disability Support Services | Referral  Liaison  Collaboration | Work collaboratively with intellectual and other disability support services and facilitate access to those services when needed. |
| Vocational services  Education and employment | Consultation  Liaison  Collaboration | Work collaboratively with vocational services and facilitate access to those services when needed. |
| Police  Ara Poutama Aotearoa  Courts | Consultation  Liaison  Collaboration | Work collaboratively.  Provide advice.  Receive referrals. |

**7. Exclusions**

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

**8. Quality Requirements**

The Service must comply with the Provider Quality Standards described in the Operational Policy Framework[[1]](#footnote-1) or, as applicable, Crown Funding Agreement Variations, contracts or service level agreements.

**9. Purchase Units and Reporting Requirements**

Purchase Unit Codes are defined in the joint DHB and Ministry’s Nationwide Service Framework Purchase Unit Data Dictionary.

Specific reporting requirements apply at tier three service specifications.

**10. Tier Three Service Specifications**

Matching the Service User to the appropriate level will ensure a safe and secure environment for Service Users, their families and whānau and staff, and the facilitation of clinical treatments and rehabilitative activities.

This range of tier three service specifications below describes the services developed to meet the different levels of both clinical need and security that are required in Forensic Mental Health services.

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| **Title** | **PU Code** |
| Forensic Mental Health Community Service | MHF80A,MHF80B,MHF80C,MHF80D,MHF80E,MHF80F, MHF80S |
| Forensic Mental Health Extended Term Secure Service | MHF81 |
| Forensic Mental Health Medium Secure Service | MHF82 |
| Forensic Mental Health Minimum Secure Service | MHF83 |
| Forensic Mental Health – Prison Mental Health Service | MHF84A,MHF84B,MHF84C,MHF84D,MHF84E, MHF84S |
| Forensic Mental Health – Court Liaison Service | MHF85A,MHF85B,MHF85C,MHF85D,MHF85E, MHF85S |
| Forensic Community Based Intensive Service for Recovery | MHF86 MHF86A, MHF86B, MHF86C, MHF86D, MHF86E, MHF86F,MHF86S |

1. http://nsfl.health.govt.nz/accountability/operational-policy-framework-0 [↑](#footnote-ref-1)