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|  | **All District Health Boards** |
| **CHILD, ADOLESCENT AND YOUTH –** **PLANNED RESPITE FOR MENTAL HEALTH AND ALCOHOL AND OTHER DRUG/CO-EXISTING DISORDERS****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 2009 |
| **Amended:** clarified reporting requirements | March 2013 |
| **Amended:** added MHI52S & MHDI52S purchase unit codes, 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>

**CHILD, ADOLESCENT AND YOUTH –**

**PLANNED RESPITE FOR MENTAL HEALTH AND ALCOHOL AND OTHER DRUG**

**CO-EXISTING DISORDERS**

**MENTAL HEALTH AND ADDICTION SERVICES**

**TIER THREE SERVICE SPECIFICATION**

**MHI52, MHI52C, MHI52D, MHI52E, MHI52S**

**MHDI52, MHDI52C, MHDI52D, MHDI52E, MHDI52S**

This tier three service specification for Child, Adolescent and Youth Planned Respite for Mental Health and Alcohol and Other Drug Co-existing Disorders (the Service) is linked to tier one Mental Health and Addiction Services and tier two Infant, Child, Adolescent and Youth service specifications.

**1. Service Definition**

This Service will include a range of options that will be developed and maintained. These will be implemented in accordance with the particular requirements of the eligible person /Service User and their carers.

Options will include, but may not be limited to:

* provision of staff with skills appropriate to the circumstances to supervise the person in respite care 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 a planned period.

Treatment will be provided as required during the period of respite care with the aim of quickly resolving the need for respite care.

**2. Service Objectives**

2.1 General

To provide a service that is home based or has a home-like accommodation component to be accessed as a planned event to avoid exacerbating the risk of needing an admission to an inpatient mental health service or alcohol and other drugs for children, adolescents and youth under the care of community mental health teams.

**2.2 Māori Health**

Refer tier one Mental Health and Addiction Services service specifications.

**3. Service Users**

The Service Users are eligible infants, children, adolescents and youth.

**4. Access**

**4.1 Entry and Exit Criteria**

The use of respite services will be included as part of the management plan for Service Users where it is anticipated that, from time to time, there will be a need for respite by the child, adolescent or youth, or to relieve other carers of the provision of care.

Access will be co-ordinated by the usual community mental health service key worker or care co-ordinator from child and adolescent mental health services.

**5. Service Components**

**5.1 Processes**

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

**5.2 Settings**

The Service is provided in community based settings.

**5.3 Key Inputs**

The Service is provided by:

* 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 have suitable child and youth training and expertise and the ability to recognise underlying mental health and developmental issues.

**6. Service Linkages**

Linkages include, but are not limited to the following as described in tier one Mental Health and Addiction and tier two Infant, Child, Adolescent and Youth 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** | **PU Measure** |
| --- | --- | --- | --- |
| MHDI52 | Child, adolescent and youth planned respite home based facility | A home-based or home like accommodation service, accessed as a planned event to avoid the risk of needing an admission to inpatient mental health, or alcohol and other drugs for children, adolescents and youth under the care of community mental health teams. The service is delivered by staff with skills to supervise the person in respite care in their own home or elsewhere. It includes, but not limited to short-term care in specifically dedicated respite facility. | Occupied bed day |
| MHDI52C | Child, youth & adolescent respite home facility – Nursing/allied health | A home-based or home like accommodation service, accessed as a planned event to avoid the risk of needing an admission to inpatient mental health, or alcohol and other drugs for children, adolescents and youth under the care of community mental health teams. It includes, but not limited to short-term care in specifically dedicated respite facility. The service is provided by nurses and/or allied health staff with social support to supervise the person in respite care in their own home or elsewhere. The nurses will be trained in mental health intervention, treatment and support. | FTE |
| MHDI52D | Child, adolescent and youth planned respite home facility - Non-clinical staff | A home-based or home like accommodation service, accessed as a planned event to avoid the risk of needing an admission to inpatient mental health, or alcohol and other drugs for children, adolescents and youth under the care of community mental health teams. It includes, but not limited to short-term care in specifically dedicated respite facility. The service is provided by non-clinical support staff to supervise the person in respite care in their own home or elsewhere. Non-clinical staff are not subjected to regulatory requirements under legislation or by any other means. | FTE |
| MHDI52E | Child, adolescent and youth planned respite home facility - Cultural staff | A home-based or home like accommodation service, accessed as a planned event to avoid the risk of needing an admission to inpatient mental health, or alcohol and other drugs for children, adolescents and youth under the care of community mental health teams. It includes, but not limited to short-term care in specifically dedicated respite facility. The service is provided by cultural support staff to supervise the person in respite care in their own home or elsewhere. | FTE |
| MHDI52S | Child, adolescent and youth planned respite home facility  | A home-based or home like accommodation service, accessed as a planned event to avoid the risk of needing an admission to inpatient mental health, or alcohol and other drugs for children, adolescents and youth under the care of community mental health teams. It includes, but not limited to short-term care in specifically dedicated respite facility.  | Service |
| MHI52 | Infant, Child, adolescent and youth planned respite  | A home based service with/or a home-like accommodation component to be accessed as a planned event to avoid exacerbating the risk of needing an admission to an inpatient mental health service or alcohol and other drugs for children, adolescents and youth under the care of community mental health teams. | Occupied bed day |
| MHI52C | Child, youth & adolescent respite home facility – Nursing/allied health | A home based service with/or a home-like accommodation component to be accessed as a planned event to avoid exacerbating the risk of needing an admission to an inpatient mental health service or alcohol and other drugs for children, adolescents and youth under the care of community mental health teams. The service is provided by nurses and/or allied health staff trained in mental health intervention, treatment and support. | FTE |
| MHI52D | Child, adolescent and youth planned respite home facility - Non-clinical staff | A home based service with/or a home-like accommodation component to be accessed as a planned event to avoid exacerbating the risk of needing an admission to an inpatient mental health service or alcohol and other drugs for children, adolescents and youth under the care of community mental health teams. The service is provided by nurses and/or allied health staff trained in mental health intervention, treatment and support. | FTE |
| MHI52E | Child, adolescent and youth planned respite home facility - Cultural staff | A home based service with/or a home-like accommodation component to be accessed as a planned event to avoid exacerbating the risk of needing an admission to an inpatient mental health service or alcohol and other drugs for children, adolescents and youth under the care of community mental health teams. The service is provided by nurses and/or allied health staff trained in mental health intervention, treatment and support. | FTE |
| MHI52S | Child, adolescent and youth planned respite home facility - | A home based service with/or a home-like accommodation component to be accessed as a planned event to avoid exacerbating the risk of needing an admission to an inpatient mental health service or alcohol and other drugs for children, adolescents and youth under the care of community mental health teams. | Service |

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| **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

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)