MINISTRY OF HEALTH
MANATŪ HAUORA

DHBNZ
on behalf of all DHBs

ADULT ACUTE HOME BASED TREATMENT

TIER LEVEL THREE

SERVICE SPECIFICATION

STATUS:

Approved for recommended use for nationwide non-mandatory description of services to be provided.

RECOMMENDED ☑

Review History	Date
Approved by Nationwide Service Framework Coordinating Group (NCG)	June 2009
Published on NSFL	June 2009
Working Party Review	April 2009
Consideration for next Service Specification Review	Within three years

Note: Contact the Service Specification Programme Manager, Sector Accountability and Funding, Ministry of Health to discuss the process and guidance available in developing new or updating and revising existing service specifications. Web site address Nationwide Service Framework Library: http://www.nsfl.health.govt.nz/

ADULT ACUTE HOME BASED TREATMENT
SERVICE SPECIFICATION
TIER THREE
MHA05A, MHA05B, MHA05C, MHA05D

This tier three service specification for Adult Acute Home Based Treatment (the Service) is linked to tier one Mental Health and Addiction Specialist Services and tier two Adult Mental Health service specifications.

1. Service Definition

The Service will include an urgent response to a mental health crisis including: assessment, monitoring, co-ordination of services, treatment and support/advice to family/whānau/ carers.

Home-based intervention includes:

- assessment
- assessment/formulation/management and development of an immediate treatment and recovery plan
- 24-hour support and treatment in the home
- performance of all tasks necessary in relation to processes required under the Mental Health (Compulsory Assessment and Treatment) Act 1992 (including tasks of Duly Authorised Officer, assessing psychiatrist and responsible clinician)
- implementation of treatment (including risk assessment/formulation/management and recovery plans, including referral to other services for ongoing treatment
- engagement of family/whānau and carers for sharing of information, advice and support.

The Service will be mobile and able to be provided at the location of the crisis. Where necessary, the Service will arrange for, or provide, transport of the person to the nearest acute treatment facility.

People will be assessed as to appropriateness of acute home-based treatment.

Interventions will be appropriate to the age of the individual concerned, and will be no more restrictive than necessary in each situation.

Access to crisis respite services is facilitated through the crisis intervention service or agreed alternative mechanisms.

The Service is to be provided in partnership with Specialist Clinical Teams.

2. Service Objectives

To provide acute responsive services that are highly mobile and available in the service user's home setting as an appropriate alternative to a service in an acute inpatient hospital-based setting.

2.1 Māori Health

An overarching aim of the health and disability sector is the improvement of health outcomes and reduction of health inequalities for Māori. Health providers are expected to provide health services that will contribute to realising this aim. This may be achieved through mechanisms that facilitate Māori access to services, provision of appropriate pathways of care which might include, but are not limited to, matters such as referrals and discharge planning, ensuring that the services are culturally competent and that services are provided that meet the health needs of Māori. It is expected that, where appropriate,

there will be Māori participation in the decision making around, and delivery of, the Service.

3. Service Users

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

4. Access

4.1 Entry and Exit Criteria

Access to the Service may be via a triage process within the DHB Community Mental Health Team.

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 community based.

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.

Where appropriate, arrangements are made to ensure two clinicians attend a call out.

6. Service Linkages

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

7. Quality Requirements

The Service must comply with the Provider Quality Standards (PQS) described in the Operational Policy Framework (OPF) or, as applicable, Crown Funding Agreement Variations, contracts or service level agreements.

8. Purchase Units and Reporting Requirements

Purchase Units are defined in the joint DHB and Ministry's Nationwide Service Framework Purchase Unit Data Dictionary. The following Purchase Units apply to this Service.

PU Code	PU Description	Unit of Measure	Reporting Requirements
MHA05A	Adult acute home based treatment - Senior medical staff	FTE	PRIMHD
MHA05B	Adult acute home based treatment - Junior medical staff	FTE	PRIMHD
MHA05C	Adult acute home based treatment - Nursing/ allied health staff	FTE	PRIMHD
MHA05D	Adult acute home based treatment - Non-clinical staff	FTE	PRIMHD

The Service must comply with the requirements of national data collections PRIMHD

After PRIMHD Reporting to Information Directorate, Ministry of Health:

Frequency	Data
Monthly	Group sessions delivered
Monthly	Consultation/liaison training sessions
Quarterly	Senior medical FTEs
Quarterly	Junior medical FTE
Quarterly	Nursing and allied FTE
Quarterly	Non clinical FTE
Quarterly	Cultural FTE
Quarterly	Peer support FTE
Quarterly	Staff turnover ratio
Quarterly	Number of suicides of current clients
Six monthly	Number of NGO Board member changes (NGOs only)
Six monthly	Number of NGO Governance meetings held (NGOs only)
Annually	Number. of FTEs in each of these groups: Medical Nursing Psychology Occupational Therapy Social Work Maori Mental Health Other

Prior to PRIMHD Reporting to Information Directorate, Ministry of Health:

Frequency	Data
Monthly	First face-to-face contact with individual/family
Monthly	Follow up face-to-face contact with individual/family
Monthly	Group sessions delivered
Monthly	Face-to-face contact group
Monthly	Consultation/liaison contact
Monthly	Consultation/liaison training sessions
Monthly	Number completed support needs assessments
Monthly	Number of people supported by services at end of period (by NZ Maori, Pacific Island, Other)
Monthly	Number of people supported by services during month (by NZ Maori, Pacific Island, Other)
Quarterly	Senior medical FTE
Quarterly	Junior medical FTE
Quarterly	Nursing and allied FTE
Quarterly	Non clinical FTE
Quarterly	Cultural FTE
Quarterly	Peer support FTE
Quarterly	Staff turnover ratio
Quarterly	Average length of stay
Quarterly	Number of suicides of current clients
Six monthly	Number of NGO Board member changes (NGOs only)
Six monthly	Number of NGO Governance meetings held (NGOs only)
Annually	Number of FTEs in each of these groups: Medical Nursing Psychology Occupational Therapy Social Work Maori Mental Health Other