

# **Mental Health and Addictions Services**

## **Adult Planned Respite**

### **Tier 3 Service Specification**

**September 2024**

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## 1. Status

**Approved to be used for mandatory nationwide description of services to be provided.**

**MANDATORY  RECOMMENDED**

Recommended – these are centralized and recommended specifications to be used by Districts for purchasing services, they may be used to enable providers to transition to meeting a Mandatory specification over time. Districts are expected to move to a mandatory specification when renewing or varying an agreement].

## 2. Review History

Review History	Date
First Published on NSFL	June 2009
<b>Amended:</b> clarified reporting requirements	February 2013
<b>Amended:</b> added MHA17S purchase unit code, removed standard provider monitoring reporting tables. Minor editing.	April 2017
Moved to Health NZ template. Updated links for PUDD and NSFL only. Amended DHB to become District/Region where appropriate. No other changes to content made.	September 2024
Consideration for next Service Specification Review	Within five years

**Note:** In September 2024 a small programme of work moved all Service Specifications to Health New Zealand branded templates. No amendments were made to the body text or content of the Service Specification, so references to DHB, Ministry of Health or other pre-2022 reforms vocabulary will still exist. A larger programme of work to review and revise all Service Specifications is planned for late 2024 to early 2025.

**Note:** Contact the NSF Team, Te Whatu Ora | Health New Zealand to discuss proposed amendments to the service specifications and guidance in developing new or updating and revising existing service specifications. [NSF@tewhatuora.govt.nz](mailto:NSF@tewhatuora.govt.nz)

Nationwide Service Framework Library web site [here](#)

### 3. Introduction

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

This service specification may be used in conjunction with carer subsidy.

### 4. Service Definition

The Service will develop and maintain a range of options that will be implemented in accordance with the particular requirements of the Service User and their carers.

Options will include, but may not be limited to at least one of the following:

- provision of staff with skills appropriate to the circumstances, to monitor and support 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 defined period according to the needs of the Service User and/or their carers.

Treatment, therapy and support will be provided as required during the period of respite care.

The Service will create an environment of self-determination while also supporting the service user and their family/whānau.

This Service includes the supply of accommodation when required.

### 5. Service objectives

#### 5.1.1 General

To provide planned access to a service with an accommodation component to minimise the likelihood of admission to inpatient mental health services for people under the care of community mental health teams.

Planned respite services may also serve the function of providing carers with relief from the role of providing care for a defined period.

#### 5.1.2 Māori Health

Refer to the tier one Mental Health and Addiction Services and tier two Adult Mental Health service specifications.

### 6. Service Users

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

## **7. Access**

The use of respite services will be included as part of the recovery plan for people where it is anticipated that, from time to time, there will be a need to relieve other carers of the sole burden of care.

## **8. Service Components**

### **8.1 Processes**

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

### **8.2 Settings**

The Service is provided in community based settings.

### **8.3 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.

They will have appropriate qualifications, competencies, skills and experience in meeting the support needs of people with serious mental health problems/disorders.

## **9. Service Linkages**

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

## **10. Exclusions**

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

## **11. Quality Requirements**

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

## 12. Purchase Units

Purchase Unit Codes are defined in Health New Zealand's Nationwide Service Framework Purchase Unit Data Dictionary. The following codes apply to this Service.

PU Code	PU Description	PU Definitions	Unit of Measure
MHA17	Planned adult respite	A service to provide planned access to a service with an accommodation component to minimise the likelihood of admission to inpatient mental health services for people under the care of community mental health teams.	Occupied bed day
MHA17C	Planned adult respite – Nursing and/or allied health staff	A service by nurses and/or allied health staff to provide planned access to a service with an accommodation component to minimise the likelihood of admission to inpatient mental health services for people under the care of community mental health teams.	FTE
MHA17D	Planned adult respite – Non-clinical staff	A service by non-clinical support staff to provide planned access to a service with an accommodation component to minimise the likelihood of admission to inpatient mental health services for people under the care of community mental health teams.	FTE
MHA17E	Planned adult respite – Cultural staff	A service by cultural support staff to provide planned access to a service with an accommodation component to minimise the likelihood of admission to inpatient mental health services for people under the care of community mental health teams.	FTE
MHA17S	Planned adult respite	A service to provide planned access to a service with an accommodation component to minimise the likelihood of admission to inpatient mental health services for people under the care of community mental health teams.	Service

Explanations of the units of measure (UOM) from the purchase unit table.

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.
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
Service	Service purchased in a block arrangement uniquely agreed between the parties to the agreement

## 13. Reporting Requirements

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.

Unless otherwise specified in the agreement, the following reporting information will be emailed to The Performance Reporting Team at: [performance\\_reporting@health.govt.nz](mailto:performance_reporting@health.govt.nz)

The Performance Monitoring Reporting tables for the Mental Health and Addiction Service Specifications<sup>1</sup> may be used for performance monitoring if specified as agreed with the Funder.

## 14. Glossary

Not required

## 15. Appendices

Not required

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<sup>1</sup> 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.nsfh.health.govt.nz/service-specifications/current-service-specifications/mental-health-and-addiction-services](http://www.nsfh.health.govt.nz/service-specifications/current-service-specifications/mental-health-and-addiction-services)