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|  | **All District Health Boards** |
| **EATING DISORDER SERVICES –** **CONSULTATIVE SERVICE WITHIN A SPECIALIST EATING DISORDER 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 MHE28S purchase unit code, 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>

**EATING DISORDER SERVICES-**

**CONSULTATIVE SERVICE WITHIN A SPECIALIST EATING DISORDER SERVICE**

**MENTAL HEALTH AND ADDICTION SERVICES**

**TIER THREE SERVICE SPECIFICATION**

**MHE28A, MHE28B, MHE28C, MHE28S**

This tier three service specification for Consultative Service within a Specialist Eating Disorder Service (the Service) is linked to tier two Mental Health and Addiction Services service specification and tier two Eating Disorder Services.

**1. Service Definition**

This Service will be provided as part of the specialist eating disorder service. Depending on how services are configured, this specification accompanies the eating disorder inpatient and/or residential and/or outpatient clinical service specification.

The Service will have specialist knowledge, expertise and experience in the management and treatment of eating disorders. The Service will operate as a hub in a hub and spoke model.

The Service provider will be up to date with eating disorder research and treatments, and link with other eating disorder services on a national and international level.

**2. Service Objectives**

**2.1 General**

The Service, acting as a hub to other spoke DHBs, will provide:

* consultation, resources and expert advice to clinicians to allow them to support Service Users in their own communities
* advice on referrals when a higher level of care/treatment is required
* provision of case discussions, team meetings and regular telephone contact with spoke DHBs
* training and supervision to spoke DHBs
* specialist advice to general medical and psychiatric wards in regions where clients may have been admitted
* advice on eating disorder treatments across the age groups.

**2.2 Māori Health**

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

**3. Service Users**

The Service Users will be DHBs accessing advice from the Eating Disorder Service.

**4. Access**

**4.1 Entry and Exit Criteria**

The lead DHB Provider will negotiate with other DHB Providers the Service provided.

**5. Service Components**

**5.1 Processes**

The processes include but are not limited to: assessment; treatment, intervention and support; review; discharge; consultation and liaison.

**5.2 Settings**

The Service will be community based and the provider will advise providers in Community or hospital based settings.

**5.3 Key Inputs**

A multi-disciplinary team of people with skills and experience in eating disorder intervention, treatment and support, made up of: health professionals 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 Care Providers and other agencies  | Referrer | Refer Service Users for assessment and treatment  |
| Other DHBs where Eating Disorder inpatient and consultation and liaison service not provided | ReferrerReceiver of consultation and advisory service | Refer for inpatient servicesSeek advice regarding clinical management  |

**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 Purchase Units apply to this Service.

| **PU Code** | **PU Description** | **PU Definition** | **Unit of Measure** |
| --- | --- | --- | --- |
| MHE28A | Consultative service within a specialist eating disorder service - Senior medical staff | Service provided as part of the specialist eating disorder service, acting as a hub to other spoke DHBs. The service will provide consultation, resources and expert advice to clinicians to allow them to support service users in their own communities. The service is provided by senior medical staff, a component of the multidisciplinary team. | FTE |
| MHE28B | Consultative service within a specialist eating disorder service - Junior medical staff | Service provided as part of the specialist eating disorder service, acting as a bub to other spoke DHBs. The service will provide consultation, resources and expert advice to clinicians to allow them to support service users in their own communities. The service is provided by junior medical staff, a component of the multidisciplinary team. | FTE |
| MHE28C | Consultative service within a specialist eating disorder service – Nursing/allied health staff | Service provided as part of the specialist eating disorder service, acting as a bub to other spoke DHBs. The service will provide consultation, resources and expert advice to clinicians to allow them to support service users in their own communities. The service is provided by nurses and allied health staff, a component of the multidisciplinary team. | FTE |
| MHE28S | Consultative service within a specialist eating disorder service | Service provided as part of the specialist eating disorder service, acting as a hub to other spoke DHBs. The service will provide consultation, resources and expert advice to clinicians to allow them to support service users in their own communities. The service is provided by a multidisciplinary team. | 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

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)