Mental Health and Addiction Services
Kaupapa Māori Mental
Health and Addiction
Services
Service Specification
Tier 2

# Contents

1.	Status	2		
2.	Review History	2		
3.	Introduction	3		
4.	Service Definition			
5.	Service objectives	4		
6.	Service Users			
7.	Access	6		
8.	Service Components			
9.	Service Linkages	6		
10.	Exclusions	7		
11.	Quality Requirements	7		
12.	Purchase Units and Reporting Requirements	7		
1	2.1 Purchase units	7		
1	2.2 Tier Three Service Specifications	7		

### 1. Status

#### MANDATORY ☑ RECOMMENDED ☑

It is compulsory to use this nationwide service specification when purchasing this service.

## 2. Review History

Review History	Date
First Published on NSFL	November 2009
<b>Amended</b> : page 2 wording clarified to support use with any other tier three service specifications. Section 10	February 2012
Amended: clarified reporting requirements	March 2013
Amended: added purchase units MHK "S" series	April 2017
Consideration for next Service Specification Review	Within five years
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

**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 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 here

### 3. Introduction

This tier two service specification for Kaupapa Māori Mental Health and Addiction Services (the Service) is the overarching document for a range of Kaupapa Māori Mental Health and Addiction services.

This service specification must be used in conjunction with the tier one Mental Health and Addiction Services specification and tier three Kaupapa Māori Mental Health and Addiction service specification(s) listed in section 10 below. Local District/Regional service specifications may also be included under this service specification as appropriate.

Mental Health and Addiction Services for Māori are underpinned by the following Ministry of Health strategic documents:

- Te Tāhuhu: Improving Mental Health 2005-2015 (2005)
- Te Kokiri: The Mental Health and Addiction Action Plan 2006-2015 (2006)
- Te Puawaiwhero: The Second Māori Mental Health and Addiction National Strategic Framework 2008-2015 (2008).

This service specification translates the national health strategies into service delivery that is:

- aligned with Government policy
- meets the legislative requirements and the Health and Disability Service Standards 2008, and
- can be purchased to respond appropriately to the needs of Māori.

These strategies recognise that there are significant disparities between the mental health of Māori and non-Māori, and what can be done to address these disparities. It is important therefore, that all mental health and addiction services are responsive to the needs of Māori.

## 4. Service Definition

Kaupapa Māori specialist mental health and addiction services are those services that have been specifically developed and are delivered by providers who identify as Māori. Providers of these services maybe within a District Provider Arm, a community or iwi organisation, and maybe be accountable to local, whānau, hapū, iwi, Māori communities and the District.

The Service includes but is not limited to:

- linkage with Māori whānau, hapu, iwi community organisations
- supported by manawhenua and/or the local Māori community
- utilisation of Māori derived beliefs, values and practice

- staff more likely to be of Māori descent
- aims that are consistent with wider aims and aspirations of Māori development
- facilitation of access to, and support of, kaumātua (male and female)
- there is an emphasis on whakawhanaunatanga.

Service providers are expected to use a Māori framework and models of care that encompass a holistic approach to health, and are cognisant of the requirements of Māori.

Common elements of Māori models include:

- Taha tinana
- Taha whānau
- Taha hinengaro
- Taha wairua
- Turangawaewae
- Te Reo Māori
- Tikanga Māori.

Underpinning these elements are the concepts of mana, tapu and mauri. Services will be responsive to those people with more complex needs and co-existing illnesses or issues and ensure relationships with other organisations and referral pathways are in place, to support good access.

Services will be cognisant of the specific needs and service settings of different age groups within the whānau including pēpi, tamariki, taiohi, pakeke, and Kaumātua. There will be flexibility at the service interfaces recognising both age and developmental needs. Those specific needs may be more complex and include coexisting illness or issues. Providers will broker access to the services required.

## 5. Service objectives

#### 5.1.1 General

The objectives of the Service are to:

Recognise that culture and health for Māori are inextricably linked

- commitment to advancing the health of Māori linking the health response to the Māori paradigm
- achieving a balance between gaining wellness and managing illness
- establishing and maintaining collaborative relationships with other health and social agencies eg. housing, education, employment, and social services

- supporting integrated service provision that responds to a range of needs holistically
- embracing the elements of a Māori setting and a safe cultural environment for whānau.

#### Prioritise Māori and Māori Responsiveness

- providing a range of services and interventions that support early identification and improve access to services for Māori
- promoting choice through relationships and partnerships with other providers both in Māori services and non Māori services
- strengthening responsiveness through workforce development initiatives and engagement of Māori in leadership activities.

## Deliver Services for Māori by Māori

- engaging with other Māori organisations, and between Māori and non Māori organisations
- identifying and implementing specific Māori roles to respond to the needs of Māori including securing their identity as Māori, and the strengths derived from this
- deploying Māori service navigation specialists where required to assist with accessing services and to navigate whaiora and whānau through the health and social systems in order for their needs to be met
- enhancing the role of kaumātua within the services with relationships with local iwi, hapū and whānau.

### Build On and Improve Māori Health Gain

- identifying the strengths of whānau
- working with whānau, building on established foundations and gains already achieved
- fostering and encouraging Māori in developing their own solutions and following their aspirations
- promoting whānau working alongside other whānau such as peer support.

#### Achieve Whānau Ora

- placing Māori as a priority, at the centre of planning, service delivery, review and evaluation of services
- supporting a paradigm shift from individualised western models of care to collective holistic models of wellbeing that contribute to whānau ora.

In addition, refer to the tier one Mental Health and Addiction Specialist Services service specification.

## 6. Service Users

This Service is specifically developed for Māori but not exclusively delivered to Māori.

## 7. Access

### 7.1.1 Entry and Exit Criteria

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

## 8. Service Components

### 8.1.1 Settings and Facilities

The Service may be provided in the community including marae and home, and hospital based settings.

#### 8.1.2 Processes

The processes include but are not limited to the following: health education; health promotion; engagement; assessment including cultural assessment; diagnosis; treatment; rehabilitation; case management; consultation; liaison; support; review process; and discharge.

Key Inputs

#### 8.1.3

The key input for Kaupapa Māori services is the workforce.

## 9. Service Linkages

Linkages include, but are not limited to the following:

Service Provider	Nature of Linkage	Accountabilities
Māori Providers	Facilitate Service access and participation	Liaise with local iwi and Māori groups and communities to ensure cultural appropriateness and accessibility to services.
		Liaise with other Māori providers to ensure access pathways to services are known.

Service Provider	Nature of Linkage	Accountabilities
Other service providers	Referral Liaison processes	Establish relationships and referral pathways and liaison processes to promote timely access to services.

### 10. Exclusions

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

## 11. Quality Requirements

The Service must comply with the Provider Quality Standards described in the Operational Policy Framework<sup>1</sup> or, as applicable, Crown Funding Agreement Variations, contracts or service level agreements.

## 12. Purchase Units and Reporting Requirements

#### 12.1 Purchase units

Purchase Unit Codes are defined in Health New Zealand's Nationwide Service Framework Purchase Unit Data Dictionary.

Specific reporting requirements for Kaupapa Māori services apply at tier three service specifications.

## 12.2 Tier Three Service Specifications

To fund a comprehensive service or a specific role that sits within a mainstream setting, Districts may select any other relevant tier two and their tier three service specification(s) to sit alongside the tier two and three service specifications for Kaupapa Maori Mental Health and Addiction Services<sup>2</sup>.

This range of tier three service specifications for Kaupapa Māori Mental Health and Addiction services has been developed to meet varied service needs.

<sup>&</sup>lt;sup>1</sup> https://www.health.govt.nz/about-us/new-zealands-health-system/overview-and-statutory-framework/accountability-arrangements

<sup>&</sup>lt;sup>2</sup> The decision to fund a comprehensive service or specific role within a mainstream setting is based on based on factors such as size of population to be served, geographical location, workforce and the alignment with current services.

Title	Purchase Unit Codes
Kaupapa Māori Package of Care	MHK58, MHK58C, MHK58D, MHK58E,MHK58S
Kaupapa Māori Community Based Clinical and Support Service	MHK59A,MHK59B,MHK59C,MHK59D,MHK59E, MHK59S
Kaupapa Māori Whānau Ora Worker Service	MHK60C,MHK60D,MHK60E, MHK60S
Kaumātua Roles	MHK61E, MHK61S
Kaupapa Māori Consultation, Liaison and Advisory Service	MHK62C,MHK62D,MHK62E MHK62S