

Mental Health and Addictions

Mental Health of Older People Services

Tier 2 Service Specification

September 2024

Contents

| | |
|--|---|
| 1. Status | 2 |
| 2. Review History | 2 |
| 3. Introduction | 3 |
| 3.1 Background | 3 |
| 4. Service Definition | 3 |
| 5. Service objectives | 4 |
| 5.1 General..... | 4 |
| 5.2 Māori Health | 4 |
| 6. Service Users | 5 |
| 7. Access..... | 5 |
| 7.1 General..... | 5 |
| 7.2 Entry and Exit Criteria..... | 5 |
| 7.3 Time | 5 |
| 8. Service Components..... | 5 |
| 8.1 Process | 5 |
| 8.2 Settings | 5 |
| 8.3 Key Inputs | 6 |
| 8.4 Pacific Health..... | 6 |
| 9. Service Linkages..... | 7 |
| 10. Exclusions | 7 |
| 11. Quality Requirements | 7 |
| 12. Purchase Units and Reporting Requirements..... | 8 |
| 12.1 Purchase units..... | 8 |

1. Status

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

MANDATORY RECOMMENDED

Mandatory- it is compulsory to use this Specification when purchasing services. No Districts should use a local service specification instead of this mandatory specification.

2. Review History

| Review History | Date |
|--|-------------------|
| First Published on NSFL | June 2010 |
| Amended: 5.3 Key Inputs corrected wording error | May 2011 |
| Amended: page 2 and Section 10 wording clarified to support use with any other tier three service specifications. | February 2012 |
| Amended: clarified reporting requirements, completed PU table. Corrected title, updated links to Tier one Community Health, Transitional and Support Services service specification, edited for consistency | March 2013 |
| Amended: added purchase units MHA “S” series | 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

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

3. Introduction

This tier two service specification for the Mental Health of Older People Service, (the Service) is the overarching document for a range of tier three Mental Health of Older People Services service specifications. This service specification defines Mental Health of Older People services and their objectives in the delivery of these services.

This service specification must be used in conjunction with the tier one Mental Health and Addiction Services specification and tier three Mental Health of Older People service specifications listed in section 12 below. Local District service specifications may also be included under this service specification as appropriate.

In addition this service specification must be used in conjunction with the tier one Community Health, Transitional and Support Services service specification and other relevant service specifications for older people, and the relevant disability services service specification.

3.1 Background

The key contextual factors underpinning the service specification include:

- the rapidly ageing population in New Zealand and the correspondingly large increases in current and projected community need for Mental Health of Older People Service
- the high and increasing prevalence of dementia in the community, especially but not solely among older New Zealanders, for whom inequities of service availability are particularly pronounced
- identify and utilise the engaged workforce with a skill base in mental health and the management of serious Behavioural Psychological Symptoms of Dementia
- the identification of other special population groups whose needs are currently not well met by other services.

4. Service Definition

The Service is a multi-disciplinary Specialist service for older people and includes but is not limited to the following:

- specialist input for older people with mental health and addiction problems and or serious Behavioural Psychological Symptoms of Dementia
- recovery-focused intervention and prevention of the escalation of the Service User's illness, prevention of disability, and support to maximise quality of life and ageing in place
- a focus upon enablement, prevention and recovery in addition to care provision, symptom reduction and rehabilitation
- awareness of the safety needs of patients and the broader community, including community and hospital based staff reflecting that some Service Users may present a risk of suicide, self-harm or danger to others
- community-focused approaches that support ageing in place¹

¹ The New Zealand Positive Ageing Strategy (2001)

- integration with primary health care
- partnership with families and whānau and carers and community groups
- provision of person-centred and recovery-focused care
- access to general mental health hospital liaison service
- early recognition of elder abuse and appropriate referral for intervention
- engagement with, and consideration of, family and whānau and carers needs and appropriate referral, advice and support provided
- information provision to families, client and or providers on medico-legal issues and establish and maintain relationships with legal structures and agencies.

5. Service objectives

5.1 General

The objectives of the Service are to provide a holistic approach to meeting the complex health and social mental health and addiction needs of older people, from initial engagement, assessment, and treatment through to transition and discharge.

Services recognise the significance of the family, whānau and carer and will engage with them from the outset.

5.2 Māori Health

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

Māori will be able to access Mental Health of Older People via a lower age boundary than non-Māori to recognise the higher prevalence at younger ages of 'age-related conditions' that act as common contributing factors to psychogeriatric disorders.

Māori Kaumatua represent a significant group of unmet need in terms of mental health and dementia services in New Zealand, and services must improve in terms of cultural appropriateness for Māori.

Services for older Māori should use age appropriate Kaumatua and Kuia to assist with the assessment, treatment and discharge planning.

Refer to the following tier three Kaupapa Māori service specifications:

- Kaupapa Māori Packages of Care
- Kaupapa Māori Community Based Clinical and Support Services
- Kaupapa Whānau Ora Worker
- Kaumatua Roles
- Kaupapa Māori Consultation, Liaison and Advisory Services.

6. Service Users

Service Users include people usually aged sixty five or over (allowing for some flexibility in age as appropriate) with significant mental health and or addiction problems and or serious Behavioural Psychological Symptoms of Dementia.

Service Users of Adult Mental Health Services upon turning sixty five years of age will not automatically be transitioned to Mental Health of Older People services but be reassessed and transitioned to the Service should their needs indicate.

7. Access

7.1 General

Access will be by triaged referral according to local or regional District protocols.

Some clients may benefit from a joint review from Health of Older People Services and Mental Health Services of Older People and this will be arranged on receipt of the referral.

7.2 Entry and Exit Criteria

Entry and exit criteria specific to the service are developed and implemented locally by the District.

7.3 Time

Services will be available Monday to Friday office hours, with after-hours back up support and urgent response provided by a local Adult Community Mental Health Service.

8. Service Components

8.1 Process

Refer to the tier one Mental Health and Addiction Services service specifications. In addition this Service includes rehabilitation and restorative approaches in the management of care.

8.2 Settings

The Service is provided in community, home and general hospital based settings dependent on the assessed level of Service User need.

8.3 Key Inputs

The Service is provided by a multi-disciplinary team of people with skills and experience in identifying and responding to the needs of those older people affected by mental health and addiction disorders, including an appropriate balance of:

- health professionals regulated by the Health Practitioners Competence Assurance Act 2003
- people regulated by a recognised health or social service professional body
- people who support Service Users and are supervised by appropriately trained and regulated health professionals.

The team must have competence in the assessment, management and interventions of mental health disorders in older people, and alcohol and other drug identification and treatment. They must also have competence in the identification and treatment of co-existing disorders, and the identification and referral of other potentially unmet need such as: intellectual disability, other disabilities and physical health problems.

- New staff will have appropriate orientation and training to meet the required competencies and supervision will be in place.
- Cultural competency is also a requirement of staff working in this Service.
- Consumer and cultural roles are engaged in the delivery of this Service.

8.4 Pacific Health

Pacific people should be able to access Mental Health of Older People services via a lower age boundary to recognise the higher prevalence at younger ages of 'age-related conditions' that act as common contributing factors to psycho-geriatric disorders.

Services for older Pacific people should use age appropriate Matua to assist with the assessment, treatment and discharge planning.

Refer to the tier one Mental Health and Addiction Services service specification and tier two and three Mental Health and Addiction service specifications for Pacific People:

- Community Mental Health and Addictions Services for Pacific People
- Matua – Senior Cultural Advisory Service
- Pacific Cultural Navigator Service
- Specialised Pacific Family Advisory Service.

9. Service Linkages

Linkages include, but are not limited to the following:

| Service Provider | Nature of Linkage | Accountabilities |
|---|--|---|
| Other providers of Mental Health and addiction services and general health General medical, gerontology Primary care services | Referral, liaison, and consultation Collaborative working | Work with other relevant professionals and agencies in the care of the Service User Support shared working, joint assessment, and effective transfer of Service Users from one service to another |
| Needs Assessment Co-ordination Service (NASC) | Referral Assessments Re-assessments | Work with NASC to ensure Service Users are assessed and access the appropriate level of care and support |
| Providers of Disability Support Services | Referral Liaison Collaboration | Work collaboratively with intellectual and other disability support services and facilitate access to those services when needed. |
| Non Government Organisations and Aged Residential Care Providers | Referral Liaison Collaboration | Work with Non Government Organisations and Aged Residential Care Providers to support the Service User in functioning (eg housing and accommodation options, income support entitlements, and education and employment opportunities. |

10. Exclusions

Refer to the 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 Framework² or, as applicable, Crown Funding Agreement Variations, contracts or service level agreements.

Services (Medical, Health of Older People and Mental Health of Older People) will work together to develop clinical pathways for the management of older people to ensure that there is a prompt response by the appropriate service with the necessary skills and expertise.

² <http://nsfl.health.govt.nz/accountability/operational-policy-framework-0>

12. Purchase Units and Reporting Requirements

12.1 Purchase units

Purchase Units are defined in Health New Zealand's Nationwide Service Framework Purchase Unit Data Dictionary³. The following Purchase Units apply to this service:

Specific reporting requirements apply at tier three service specifications.

Tier Three Service Specifications

To fund a comprehensive service or a specific role that sits within a mainstream setting⁴, 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 Mental Health of Older People.

The tier three service specifications for Mental Health of Older People services below has been developed to meet varied service needs:

| Title | Purchase Unit Codes |
|---|--|
| Mental Health of Older People Acute Inpatient Service | MHO98 |
| Mental Health of Older People Specialist Community Service | MHO99A, MHO99B, MHO99C, MHO99D, MHO99E, MHO99F, MHO99S |
| Mental Health of Older People Sub acute/Extended Care Service | MHO100, MHO100C, MHO100D, MHO100E, MHO100S |
| Mental Health of Older People - Dementia Behavioural Support Advisory Service | MHO101C, MHO101S |

³ www.nsf.health.govt.nz

⁴ 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.