



Perinatal Respite Service 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
Published on NSFL	June 2010
Amended: clarified reporting requirements	February 2013
Amended: added MHM93S purchase unit code, removed standard provider monitoring reporting tables.	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 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 three service specification for the Perinatal Respite Service (the Service) must be used in conjunction with tier one Mental Health and Addiction Services and tier two Perinatal Mental Health Services service specifications. In addition, it is linked to a range of tier three Perinatal Mental Health Services service specifications.

This service specification defines perinatal mental health respite service and its objectives in the delivery of services.

4. Service Definition

The Service will include a range of short term crisis or planned respite options developed and maintained for mothers in crisis who are pregnant or who are in the first year postpartum, and who require an alternative to an acute inpatient setting.

Options will include, but not be limited to the provision of staff who will monitor and support the mother and infant in crisis in:

- their own home or elsewhere
- supervised accommodation
- a specifically dedicated respite facility.

Cultural expertise is to be available in these situations to ensure satisfactory options are considered and to assist with the crisis resolution holistically.

Assessment, treatment, therapy and support will be provided in collaboration with the Specialist Clinical Team, as required during the period of respite care with the aim of quickly resolving the need for the crisis service.

Respite providers will work in partnership with other Specialist Clinical Teams.

5. Service objectives

5.1.1 General

The objective of the Service is to provide a home-based or accommodation based respite care service as an option for mothers and infants who would otherwise require an admission to an acute inpatient mental health service.

Respite usage will be for as short a period as possible, consistent with the goals of the episode of respite care, whether it be a crisis or a planned event.

5.1.2 Māori Health

Refer to the tier two Perinatal Mental Health Services service specification.

5.1.3 Pacific Health

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

6. Service Users

Refer to the tier two Perinatal Mental Health Services service specification.

7. Access

Refer to the tier two Perinatal Mental Health Services service specification.
Access will be via a referral from the Community Mental Health team or mental health acute inpatient unit.

8. Service Components

8.1.1 Settings and Facilities

Refer to the tier two Perinatal Mental Health Services service specification.
A separate facility away from other services such as adolescent or adult mental health services is recommended.

8.1.2 Processes

The Service is provided in community and home based settings.
The setting chosen will require measures in place to ensure the safety of mothers and infants.

8.1.3 Key Inputs

Refer to the tier two Perinatal Mental Health Services service specification.

9. Service Linkages

Linkages include, but are not limited to the following:

Service Provider	Nature of Linkage	Accountabilities
Perinatal Mental Health Clinical Service Provider	Shared Care	Work with the clinical service in partnership to meet health needs of mother and infant
Other providers of Mental Health and addiction services and general health services including: Lead Maternity Carer, Well Child Providers, General Practitioner, Nurse Practitioner, Infant Child and Adolescent Mental Health Service	Referral, liaison, consultation	Work with other relevant professionals and agencies in the care of the Service User
Social agencies such as Work and Income NZ, Ministry of Social development, Housing NZ	Access to entitlements and child protection	Broker access to other agencies to ensure that mother and infant are able to access other requirements

Service Provider	Nature of Linkage	Accountabilities
		that impact their mental well being

10. Purchase Units and Reporting Requirements

10.1 Purchase units

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

PU Code	PU Description	PU Definition	Unit of Measure
MHM93	Perinatal Mental Health Respite Service	Service to provide a home-based or accommodation based respite care service as an option for mothers and infants who would otherwise require an admission to an acute inpatient mental health service.	Client
MHM93C	Perinatal Mental Health Respite Service – Nurses & allied health	Service to provide a home-based or accommodation based respite care service as an option for mothers and infants who would otherwise require an admission to an acute inpatient mental health service. The service is provided by nurses and allied health staff	FTE
MHM93D	Perinatal Mental Health Respite Service – Non-clinical staff	Service to provide a home-based or accommodation based respite care service as an option for mothers and infants who would otherwise require an admission to an acute inpatient mental health service. The service is provided non-clinical staff.	FTE
MHM93E	Perinatal Mental Health Respite Service – Cultural staff	Service to provide a home-based or accommodation based respite care service as an option for mothers and infants who would otherwise require an admission to an acute inpatient mental health service. The service is provided by cultural staff.	FTE
MHM93F	Perinatal Mental Health Respite Service – Peer support staff	Service to provide a home-based or accommodation based respite care service as an option for mothers and infants who would otherwise require an admission to an acute inpatient mental health service. The service is provided by peer support staff.	FTE
MHM93S	Perinatal Mental Health Respite Service	Service to provide a home-based or accommodation based respite care service as an option for mothers and infants who would otherwise require	Service

PU Code	PU Description	PU Definition	Unit of Measure
		an admission to an acute inpatient mental health service.	

Unit of Measure	Unit of Measure Definition
Client	Number of clients managed by the service in the reporting period (period is annual 1st July - 30th June) i.e. caseload at the beginning of the period plus all new cases in the period. 'Client' and 'Service User' are interchangeable
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

10.2 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.

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@health.govt.nz The Performance Monitoring Reporting tables for the Mental Health and Addiction Service Specifications¹ 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.nsf.health.govt.nz/service-specifications/current-service-specifications/mental-health-and-addiction-services