

Mental Health and Addiction Services

Infant, Child, Adolescent and Youth Community Mental Health Services

Tier 3 Service Specification

September 2024

Contents

1. Status	2
2. Review History	2
3. Introduction	3
4. Service Definition	3
5. Service objectives	4
5.1 General.....	4
5.2 Māori Health	4
6. Service Users	4
7. Access	4
8. Service Components.....	4
8.1 Processes.....	4
8.2 Settings	4
8.3 Key Inputs	5
9. Service Linkages.....	5
10. Exclusions	5
11. Quality Requirements	5
12. Purchase Units	5
13. Reporting Requirements.....	7
14. Glossary	7
15. Appendices	7

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
Amendments – Removal of unapproved Purchase Units MHIK44A, MHIK44C, MHIK44D. Minor editing changes for consistency.	February 2011
Amendments: clarified reporting requirements, edited for consistency.	March 2013
Amendments: added MHA44S 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

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

3. Introduction

This tier three service specification for Infant, Child, Adolescent and Youth Community Mental Health Services (the Service) is linked to tier one Mental Health and Addiction Services and tier two Infant, Child, Adolescent and Youth service specifications.

4. Service Definition

The Service will include, but will not be limited to:

- specialist assessment and diagnosis
- provision of medication (including any new agents that are approved for use in accordance with funding and safety protocols) and other treatment in accordance with a documented comprehensive management plan with identified desired outcomes
- provision of appropriate psychotherapies
- ongoing monitoring of symptoms and regular review of progress and treatment at specified intervals
- attention to matters concerning early intervention, maintenance of health, relapse prevention, problem prevention and promotion of good mental health
- provision of consultation and liaison services to primary care providers and other relevant agencies providing services to infants, children, adolescents and youth.

These services will be fully integrated with other mental health services.

Provision will be made for specialist mental health assessments for particular sub-groups, including:

- infants, children, adolescents and youth with attention deficit hyperactivity disorders
- children, adolescents and youth with eating disorders
- infants, children, adolescents and youth with autism spectrum disorders
- infants, children, adolescents and youth with combined problems of mental illness plus drug and alcohol use, or intellectual disability, or brain injury
- refugees.

These services will also provide specialist advice and information to primary care providers who retain responsibility concerning the care of specific individuals with a mental illness. They will also respond to acute mental health problems.

The Service will include, but will not be limited to:

- regular telephone consultation for professionals involved in the care of infants, children, adolescents and youth
- face-to-face consultation service with professionals offering advice and supervision may be delivered in primary care settings, for example, Youth One Stop Shop
- joint working offering primary care professionals direct experience in mental health
- networking that promotes sector linkage
- training in infant, child, adolescent and youth issues
- liaison to facilitate communication between primary and secondary care professionals.

The provision of any treatment, therapy or support services to infants, children, adolescents and youth from these groups will be aimed at addressing the specific mental health problems that require specialist intervention. Services will be provided in collaboration with other health, welfare and education agencies that have responsibility for providing services to these age groups. The provision of services to these groups should follow the principles outlined in *Te Raukura: Mental health and alcohol and other drugs: Improving outcomes for children and youth* (Ministry of Health 2007).

Care will be provided in conjunction with primary health services. At the least, there will be documented clear communication with any primary health providers regarding the treatment plan and progress, and its completion, if approved by the Service User. Training, advice and supervision will be provided to primary health workers to support the assessment/ treatment/ management of Service Users in community settings. Care will be co-ordinated by a key worker or care co-ordinator with several staff of varying ethnic backgrounds being available to contribute to care in accordance with identified needs.

There is an expectation of relapse prevention and reduction.

5. Service objectives

5.1 General

To provide a community-based mental health treatment and therapy service across a range of settings for infants, children, adolescents and youth, that is strengths based and resilience oriented.

5.2 Māori Health

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

6. Service Users

The Service Users include eligible infants, children, adolescents and youth.

7. Access

Access may be from any source, including directly or upon referral from primary practitioners, family and whānau, carers, community members and inpatient services.

8. Service Components

8.1 Processes

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

8.2 Settings

The Service is provided in a community based setting.

8.3 Key Inputs

The Service is provided by a multi-disciplinary team of people with skills and experience in mental health intervention, treatment and support, made up of:

- health professionals regulated by the Health Practitioners Competence Assurance Act 2003
- 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
- staff with training, skills and expertise in mental health intervention, treatment and support, for infants, children, adolescents and youth
- staff with the ability to recognise underlying mental health and developmental issues.

9. Service Linkages

Linkages include, but are not limited to the following as described in tier one Mental Health and Addiction Specialist Services and tier two Infant, Child, Adolescent and Youth 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 Definition	Unit of Measure
MHI44A	Infant, child, adolescent & youth community mental health services – Senior medical staff	A community strength and resilience based mental health treatment and therapies service across a range of settings for infants, children, adolescents and youth. The service is provided by senior medical staff trained in mental health intervention treatment and support, and it includes but not limited to: a specialist assessment and diagnosis, psychotherapy and ongoing monitoring of symptoms.	FTE

PU Code	PU Description	PU Definition	Unit of Measure
MHI44B	Infant, child, adolescent & youth community mental health services – Junior medical staff	A community strength and resilience based mental health treatment and therapies service across a range of settings for infants, children, adolescents and youth. The service is provided by junior medical staff trained in mental health intervention treatment and support, and it includes but not limited to: a specialist assessment and diagnosis, psychotherapy and ongoing monitoring of symptoms.	FTE
MHI44C	Infant, child, adolescent & youth community mental health services – Nursing/allied health staff	A community strength and resilience based mental health treatment and therapies service across a range of settings for infants, children, adolescents and youth. The service is provided by nurses and/or allied health staff trained in mental health intervention treatment and support, and it includes but not limited to: a specialist assessment and diagnosis, psychotherapy and ongoing monitoring of symptoms.	FTE
MHI44D	Infant, child, adolescent & youth community mental health services – Non clinical staff	A community strength and resilience based mental health treatment and therapies service across a range of settings for infants, children, adolescents and youth. The service is provided by non-clinical support staff trained in mental health intervention treatment and support, and it includes but not limited to: a specialist assessment and diagnosis, psychotherapy and ongoing monitoring of symptoms.	FTE
MHI44E	Infant, child, adolescent & youth community mental health services – Cultural staff	A community strength and resilience based mental health treatment and therapies service across a range of settings for infants, children, adolescents and youth. The service is provided by cultural support staff.	FTE
MHI44F	Infant, child, adolescent & youth community mental health services – Peer support staff	A community strength and resilience based mental health treatment and therapies service across a range of settings for infants, children, adolescents and youth. The service is provided by peer support groups who are not subjected to regulatory requirements under legislation or by any other means.	FTE
MHI44S	Infant, child, adolescent & youth community mental health services	A community strength and resilience based mental health treatment and therapies service across a range of settings for infants, children, adolescents and youth. The service is provided by staff trained in mental health intervention treatment and support, and it includes but not limited to: a specialist assessment and diagnosis, psychotherapy and ongoing monitoring of symptoms.	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.
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

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.

14. Glossary

Not required

15. Appendices

Not required

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