

DUNDRUM Toolkit Use on the Recovery Pathway in Puawai

Guideline Responsibilities and Authorisation

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Guideline Review History

Version	Updated by	Date Updated	Summary of Changes

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1.1 Purpose

1.2 Staff group

This guideline applies to all registered health professionals within the Puawai forensic service.

All prisoners on the Puawai waitlist, and those prisoners who have been assessed as needing to be placed on the waitlist. Tāngata whaiora in inpatient Puawai forensic services who are defined as being on the Puawai rehabilitation pathway and suitable adult rehabilitation tāngata whaiora currently in the adult rehabilitation beds (ARB) in Puawai.

Prisoners who are returning to prison after acute care.

Definitions and acronyms

ARB	Adult Rehabilitation Beds
DUNDRUM	Dangerousness Understanding ,Recovery and Urgency Manual
HCR-20-V3	Historical-Clinical-Risk management –Version 3
Longer term tāngata whaiora	Longer term tāngata whaiora – a mix of Forensic and Adult Rehabilitation Bed Patients (ARB)
Special Patients	Patients who are remanded to or detained in a hospital under specific legislative provision. <i>For further information see the Ministry of Health (2022) Special Patients and Restricted Patients. Guidelines for Regional Forensic Mental Health Services.</i>

2 Clinical management

2.1 Roles and responsibilities

Clinicians

All clinicians complete the DUNDRUM components 1-4 accurately and within the stated time frames.

Charge Nurse Managers

The Charge Nurse Managers are to ensure the DUNDRUM components are understood and used correctly as a clinical assessment and treatment tool by all clinicians within each team. Review any feedback so quality improvements can be initiated in consultation with the DUNDRUM support team.

All clinical staff to attend education sessions on the DUNDRUM toolkit.

- Scoring sheet and manual for DUNDRUM 1: Triage Security Items
- Scoring sheet and manual for DUNDRUM 2: Triage Urgency Items
- Electronic clinical record for DUNDRUM 3: Programme completion Items/ Health Care Recovery Plan (HCRP) and DUNDRUM manual
- Electronic clinical record for DUNDRUM 4: Recovery items / HCRP and DUNDRUM manual.
- Electronic clinical records for DUNDRUM Puawai clinical review.

2.4.1 DUNDRUM 1: Triage Security Items

Score the 11 items on the grid provided using the DUNDRUM manual to ascertain who should be on the prison waitlist for admission to Puawai inpatient services. Triage items are all predicated on there being an established mental disorder present (through a preadmission assessment).

Those rated mostly '4' are likely to require high therapeutic security.

Those rated mostly '3' will require medium secure therapeutic security.

Those mostly rated '2' would be best treated in acute low security (adult services)

Those mostly rated '1' will be cared for in an open inpatient setting

Those mostly rated '0" may be cared for in community settings and prison in-reach teams.

This doesn't preclude admission to forensic inpatient services if appropriate.

2.4.2 DUNDRUM 2: Triage Urgency Items

This is used to provide a structure for deciding who on the waitlist is the most urgent for admission, in practice though legal obligations can over-rule clinical priority. As for all professional judgement tools, the decision makers are not bound by the results of the assessments (individual context may influence the urgency for admission).

Score the 6 urgency items on the grid provided using the DUNDRUM manual. Ensure the correct scoring grid is used for **Court/Remand** prisoners and **Sentenced** prisoners. The higher the score the greater the urgency.

All ratings are based on the accompanying manual.

Triage Security and Urgency items are to be completed prior to placing an individual on the waitlist and these documents are uploaded into documents.

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2.4.3 DUNDRUM 3: Programme Completion Items

1. To reduce the probability (risk) of future harmful behaviour.
2. To reduce the seriousness of harm should a similar scenario recur that has previously led to serious harm.

- 1: Physical Health
- 2: Mental Health
- 3: Drugs and Alcohol Recovery
- 4: Problem Behaviours (offence related behaviour)
- 5 Self Care and Activities of Daily Living
- 6: Education, Occupation and Creativity
- 7: Family and Intimate Relationships

The programme completion items are part of the comprehensive Health Care Recovery Plan (HCRP). This is scored and the plan developed by the clinical team. The initial scoring using the electronic DUNDRUM manual and the HCRP development is done within 6 weeks and then updated 6 monthly or on movement.

Those mostly rated '4' are unlikely to be ready to move to a lower security setting.

Those mostly rated '3' may be ready to move to a lower security setting.

Those mostly rated '2" may be ready to move to a low security setting.

Those mostly rated '1' maybe ready to move to an open or community placement.

When the initial HCRP is developed it may be that the tāngata whaiora is still too unwell to attend identified groups. In the HCRP it is possible to identify dates and wards when the interventions should take place. The initial plan is to identify the treatment needs and if possible to start treatment.

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Under the new DUNDRUM format tāngata whaiora in the rehabilitation wards would need to be reviewed monthly. This will assist in the collation of information about group participation for tāngata whaiora being cared for under DUNDRUM.

Puawai Streams of tāngata whaiora

In Puawai 3 streams of tāngata whaiora have been identified:

1. Acute Care pathway –returning to prison after treatment.
2. Rehabilitation Care pathway – Special patients, Section 30 patients and Adult Rehabilitation Bed (ARB) patients- Care under DUNDRUM 3 and 4.
3. Longer term tāngata whaiora – (long term –a mix of forensic and ARB patients)

Care under DUNDRUM 3 and 4. For some longer term tāngata whaiora group participation is minimal. A plan of care can still be developed under DUNDRUM 3 but only scoring on the Recovery items in DUNDRUM 4 if necessary.

2.4.7 Documentation

Acute Care pathway: Puawai Clinical review / Recovery plan-(Tāngata Whaiora Inpatient). Replacing the current recovery plan used.

Rehabilitation Care pathway: DUNDRUM 3 and 4 – Puawai DUNDRUM comprehensive HCRP / DUNDRUM clinical review.

Longer term tāngata whaiora: DUNDRUM 3 and 4 – Puawai DUNDRUM comprehensive HCRP with scoring in DUNDRUM 4 only if necessary. DUNDRUM clinical review.

3 Patient Information

Each tāngata whaiora participating in the DUNDRUM programme will receive a group programme handbook. This is their own record of progress and visually gives them some understanding of the work they need to do to be ready for discharge to live their “good life” The handbook should accompany each tāngata whaiora as they move through their rehabilitation pathway.

4 Audit

4.1 Indicators

DUNDRUM 1-4 is used in accordance with this guideline.

4.2 Tools

Clinical audit of files using the DUNDRUM toolkit.

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5 Evidence base

5.1 References

- Kennedy, H.G., O'Neill, C., Flynn, G., Gill, P, and Davoren, M. (2016). The DUNDRUM Toolkit. DANGEROUSNESS UNDERSTANDING, RECOVERY and URGENCY MANUAL (THE DUNDRUM QUARTET). Structured Professional Judgement Instruments for Admission Triage, Urgency, Treatment Completion and Recovery Assessments.

5.2 Associated Te Whatu Ora Waikato Documents

- [Admission, Discharge and Transfer](#) policy (Ref. 1848)
- [Clinical Records Management](#) policy (Ref. 0182)
- [Informed Consent](#) policy (Ref. 1969)
- Mental Health and Addictions [Working with Risk: Assessment and intervention for tāngata whaiora engaged with Mental Health and Addictions services who present at risk of harm to self or others](#) procedure (Ref. 5241)

5.3 External standards

- Ngā Paerewa Health and Disability Services Standard (NZS 8134:2021)