



### **Procedure Responsibilities and Authorisation**

Department Responsible for Procedure	Mental Health and Addictions
Document Facilitator Name	Jik Loy
Document Facilitator Title	Clinical Director ICAMHS
Document Owner Name	Rees Tapsell
Document Owner Title	Clinical Services Director
Target Audience	All Mental Health and Addictions staff and specifically:
	<ul> <li>Medical staff assessing the need for admission of children and youth</li> <li>Health professionals facilitating the admission of children and youth</li> </ul>

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### **Procedure Review History**

Version	Updated by	Date Updated	Summary of Changes
3	Jik Loy	21 May 2019	Updated to current procedure template
			Change in name of Act from Children, Young Persons, and Their Families Act 1989 to the Oranga Tamariki Act 1989, Children's and Young People's Well-being Act 1989.  Updating of contact information

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## **Procedure**

# After hours assessment and Admission of Children and Youth to the Henry Rongomau Bennett Centre and Starship

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#### 1 Overview

#### 1.1 Purpose

For the assessment and management of young people under the age of 18 who require mental health services, to ensure the young person is assessed, and if required admitted to the Child and Family Unit, Starship Auckland as soon as practicably possible.

### 1.2 Scope

This procedure applies to the after-hours assessment and management of young people under the age of 18 by health professionals in the Mental Health and Addictions service.

### 1.3 Patient / client group

The client group is young people (under the age of 18) requiring mental health assessment and management after hours.

#### 1.4 Definitions

Child and Family Unit Starship	A supra-regional acute psychiatric child and adolescent mental health inpatient unit hosted by the Auckland District Health Board.
Oranga Tamariki Ministry of Children	Government service who become involved in a child's life when there are concerns about the wellbeing of a child / young person.

#### 2 Clinical Management

#### 2.1 Roles and Responsibilities

**Health professionals** involved in the care of young people after hours are required to follow the processes within this procedure.

**Registrar / SMO on call / Nurse Practitioner** make the decision regarding the need for a young person to be admitted to an inpatient mental health unit and discuss this with the on call SMO.

On call SMO contacts the on call Starship consultant when a young person requires admission to Starship.

**Duly Authorised Officers (DAO)** are required to carry out the powers and functions of a DAO under the Mental Health Act.

#### 2.2 Competency required

All health practitioners are required to meet the competency requirements of their discipline.

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### 2.3 Equipment

- · Clinical workstation
- Telephone
- Computer

## 2.4 Procedure

**Initial triage** is completed by the Crisis Assessment and Home Based Treatment Service (CAHT) or the Henry Rongomau Bennett Centre (HRBC) After Hours Coordinator.

**Assessment** is conducted either by the Emergency Department (ED) mental health team or CAHT Service or the Duty Psychiatric Registrar or Nurse Practitioner, depending on the presenting issues and the time of presentation.

Assessment by the Duty Psychiatric Registrar or Nurse Practitioner is required if medication prescribing or acute inpatient admission is considered.

The caregiver / guardian should be present with the young person, although the young person may be asked to speak with an assessor on their own.

- If the young person does not have a caregiver / guardian present, clinical assessment can be commenced, but the interviewer needs to consider issues of informed consent and risk management planning, in the absence of a responsible adult.
- If Oranga Tamariki (Ministry for Children) is already involved with the young person (i.e. has custody or shared custody) the expectation is that an Oranga Tamariki Social Worker / caregiver are present.
- If the caregiver / guardian cannot be present by the time that the assessment is concluded, they should be consulted by phone to be involved in the treatment and risk management planning process
- If contact cannot be made with the caregiver / guardian (for patients under 16 years of age) then Oranga Tamariki (Ministry for Children) should be notified and their attendance requested for the assessment, if possible.

Contact information for Oranga Tamariki (Ministry for Children):					
Monday to Friday 0800 – 1700hrs	Telephone 0508 FAMILY (0508 326 459)				
From 1700hrs to 0800hrs Monday to Friday and weekends and public holidays	Social workers are only available to assess emergency situations. But you are encouraged to call if you are unsure.				
	Email: contact @ot.govt.nz				

If the caregiver / guardian cannot be contacted, is not willing or able to take responsibility for the young person, or the young person does not wish to be returned to their caregiver / guardian, and acute mental health intervention is not required, then it should be recommended to police to place the child or young person in the custody of the chief executive by delivering the child or young person to a social worker, under Section 48 of the Oranga Tamariki Act 1989, Children's and Young People's Well-being Act 1989.

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#### **Clinical Documentation**

All relevant clinical documentation is to be forwarded by email to the relevant Child and Adolescent Mental Health cluster (as below) for children / young persons assessed after hours by the clinician(s) facilitating the assessment as well as to their family doctor.

Clinical documentation <u>must</u> be forwarded regardless of the outcome of the assessment to ensure the relevant cluster is aware of the outcome and can provide follow up following their acute cluster process respectively.

Cluster	Contact information
Hamilton / Central cluster – Ngā	0800 999 903
Ringa Awhina (includes Te Aroha)	Email:
	inward.referrals.NRA@ngaaringaawhina.org.nz
Hauraki cluster – Ko Ngā Tatai Tu	0800 726 849
Kauri	Email: icamsaccistriage@waikatodhb.health.nz
Southern Waikato cluster – Ko te	0800 154 973
Pataka Oranga o te Ao Wairua	Email:
, O	icamhs-southcluster@waikatodhb.health.nz

#### Possible pathways / assessment outcomes:

If assessed as **not requiring acute mental health intervention**, the young person remains in the community with the appropriate support and follow up. It is expected that the clinician(s) who makes this recommendation after hours, follows his / her line of clinical responsibility (i.e. Duty Psychiatric Registrar has discussed with the Waikato DHB On Call Consultant).

Pathway options	Actions required
Home with family or extended support	It is expected that the young person is reviewed as per acute cluster pathway by the relevant Child and Adolescent Mental Health cluster.
Home with family or extended family with the support of agency care staff	The rationale, roles and responsibilities of agency staff is to be clearly documented in the clinical record.
	Family are to be given written and verbal information regarding who to call if the situation deteriorates.
	It is expected that the young person is reviewed as per the acute cluster pathway by the relevant Child and Adolescent Mental Health cluster.

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Facilitator Title:

Clinical Director ICAMHS

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	Invoices are forwarded to the Child and Adolescent services to be paid under the Child and Adolescent Package of Care.
Respite accessed through Emerge Aotearoa (24/7 pastoral care for youth)	Referrals are able to be accepted after hours by contacting 07 858 4206 or the Service Delivery Manager on 027 223 3256.
T <sub>C</sub>	Additional staff for 1:1 supervision in respite can be arranged with clearly documented rationale, roles and responsibilities in the clinical record.
	Relevant clinical documentation will be faxed to Emerge Aotearoa fax number 07 858 4205 prior to the young person's arrival.
	Invoices for 1:1 supervision are forwarded to the Child and Adolescent service to be paid under the Child and Adolescent Package of Care.

If assessed as **requiring acute mental health intervention**; the assessment, formulation, diagnosis / impression and recommendations need to be discussed with the Waikato DHB on call consultant.

Pathway options	Actions required			
Admission to Child and Family Unit (CFU) Starship Hospital	The Waikato DHB Consultant will contact the Starship on call Consultant on			
The Waikato DHB funds beds in the Starship Hospital for children and youth	09 367 0000 to request acceptance of the admission.			
from the Waikato area and these beds can be accessed 24/7.	When a young person is deemed to require admission, whenever possible this should occur without delay.			
	The responsibility for ensuring that the young person is safe to transport to Auckland rests with the Waikato DHB on call Consultant, or the Duly Authorised Officer (DAO) (if under the Mental Health Act). Please refer to the Mental Health and Addictions transport and escort of service user procedure (1863).			
Admission to the Henry Rongomau Bennett Centre (HRBC)	Formal admission process is completed to the ward.			
May be considered if the young person is unable to travel to Starship CFU due to	Appropriate placement of the young person within the ward area.			
health and safety concerns(e.g. young person's mental state / behaviour);	Youth presenting for admission awaiting transfer to specialist inpatient service at			
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Starship require high risk observations as per the Mental Health and Addictions levels of observation in inpatient services procedure (5238)		
Review of admissions must occur on a daily basis, by ICAMHS during working hours or the Duty Psychiatric Registrar / Consultant after hours.		
When transfer to Starship CFU is considered safe and appropriate, this is to occur without delay and be facilitated as soon as practicable.		
As negotiated with ED Nurse in charge of the shift.		

#### 3 Patient information

Written information is provided to families when a child is discharged home after hours as to who to call if the situation deteriorates.

Child, Adolescent & Youth Mental Health Service Pamphlet (G1005MHP)

#### 4 Audit

#### 4.1 Indicators

 Young people requiring an inpatient admission are admitted without delay to the most appropriate inpatient unit given the context.

#### 4.2 Tools

 An incident form is completed when admissions to an inpatient unit are not able to be managed to support safe, efficient, and effective care delivery.

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#### Evidence base

### **5.1 External Standards**

- Health and Disability Commissioners' code of Health and Disability services Consumers' Rights 1996
- Health and Disability Services Standards NZS 8134:2008
- Health Practitioners Competence Assurance Act 2003
- Human Rights Act 1993
- Mental Health (Compulsory Assessment and Treatment) Act 1992
- Oranga Tamariki Act 1989, Children's and Young People's Well-being Act 1989
- http://www.legislation.govt.nz/act/public/1989/0024/127.0/DLM147088.html. Accessed 21 May 2019.

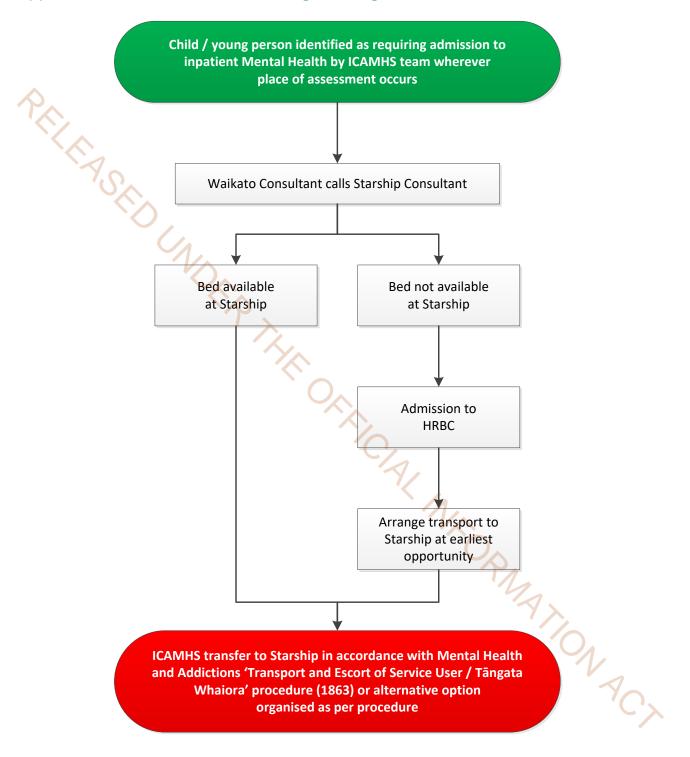
#### 5.2 Associated Waikato DHB Documents

- Mental Health and Addictions Levels of Observation in Inpatient Services procedure (Ref. 5238)
- Mental Health and Addictions Transport and Escort of service user / tāngata whaiora procedure (Ref. 1863)
- Waikato DHB Admission, Discharge and Transfer policy (Ref. 1848)
- Waikato DHB Informed Consent policy (Ref. 1969) NOPMANON ACX
- Consent to Treatment (A3114MHF)





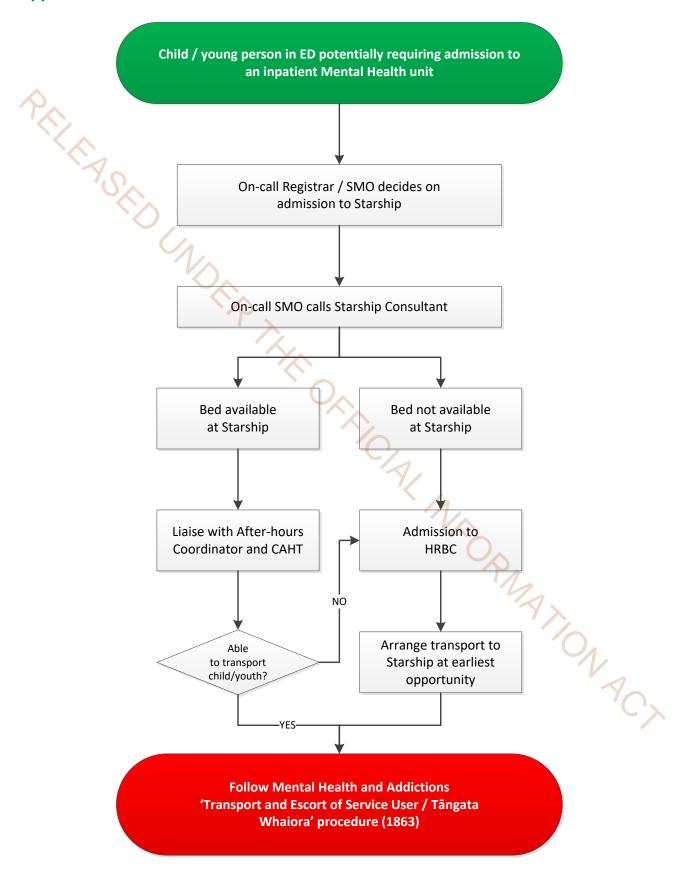
### Appendix A - Transfer Process During Working Hours



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### Appendix B - Transfer Process After Hours



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