

KNOWLEDGE, SKILLS, ATTITUDES. WELLNESS, HOPE, RECOVERY

CONTRACT FOR SERVICES

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Service: Core Skills for Specialist Practice in Infant, Child and Adolescent

Mental Health & Addiction



Skills Matter is a workforce development programme within Te Pou.

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SERVICE SPECIFICATION FOR CORE SKILLS FOR SPECIALIST PRACTICE IN INFANT, CHILD & ADOLESCENT MENTAL HEALTH & ADDICTION

1 CONTEXT

Key documents relevant to this service specification include:

- a. Rising to the Challenge: The Mental Health and Addiction Service Development Plan 2012 2017, Ministry of Health (2012)
- b. Blueprint II Improving mental health and wellbeing for all New Zealanders: How things need to be, Mental Health Commission (2012)
- c. Blueprint II Improving mental health and wellbeing for all New Zealanders: Making change happen, Mental Health Commission (2012)
- d. Te Puawaiwhero: The Second Maori Mental Health and Addiction National Strategic Framework 2008-2015, Ministry of Health (2008)
- e. Te Rau Hinengaro: The New Zealand Mental Health Survey, Ministry of Health (2006)
- f. Whakamarama te Huarahi To Light the Pathways: A Strategic Framework for Child and Adolescent Mental Health Workforce Development 2006-2015, The Werry Centre (2006)
- g. 2010 Stocktake of Infant, Child and Adolescent Mental Health and Alcohol and Other Drug Service in New Zealand, The Werry Centre (2011)
- h. Te Raukura Mental health and alcohol and other drugs: Improving outcomes for children and youth, Ministry of Health (2007)
- i. Healthy Beginnings: Developing perinatal and infant mental health services in New Zealand, Ministry of Health (2012)
- j. Let's get real: Real Skills for people working in mental health and addiction, Ministry of Health (2008)
- k. Real Skills plus Seitapu: working with Pacific peoples, Le Va (2009)
- I. Real Skills plus CAMHS: A competency framework for the infant, child and youth mental health and alcohol and other drug workforce, The Werry Centre (2009)
- m. Our Lives in 2014 A recovery vision from people with experience of mental illness for the second mental health plan and the development of the health and social sectors, Mental Health Commission (2004)
- n. Te Ariari o te Oranga: The Assessment and Management of People with Co-existing Mental Health and Substance Use Problems, Ministry of Health (2010)
- o. Service Delivery for People with Co-existing Mental Health and Addiction Problems: Integrated Solutions, Ministry of Health (2010)
- p. He Korowai Oranga: Maori Health Strategy, Ministry of Health (2002)
- q. Ala Mo'ui: Pathways to Pacific Health and Wellbeing 2010-2014, Ministry of Health (2010)
- r. The White Paper for Vulnerable Children, Ministry of Social Development (2012)
- s. Supporting Parents, Healthy Children Supporting parents with mental illness and or addiction and their children: A guideline for mental health and addiction services, Ministry of Health (2015)
- t. Te Whare o Tiki: Co-existing Problems Knowledge and Skills Framework, Te Pou and Matua Raki (2013).

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2 OVERVIEW OF PROGRAMME

This service specification outlines the requirements for an infant, child and adolescent mental health and addiction training programme for registered health clinicians. For the purpose of this document "addiction" includes problematic substance use (including nicotine) and problem gambling. The programme should develop core skills for working with infants, children and adolescents. It is aimed at registered health professionals who are currently working in mental health and addiction services who choose to work in the field of infant, child and adolescent mental health and addiction.

The theoretical aspects of the programme must not repeat the content of the pre-entry programmes but rather emphasise the application and use of knowledge in mental health and addiction settings. A 'trainee' is defined as a person enrolled in this programme, who is a practitioner employed by a publicly-funded mental health and addiction service and who meets the trainee eligibility criteria set out in this specification.

3 DESCRIPTION OF SERVICE

The programme will support health professionals to develop their professional practice while developing the specific skills required in the speciality field of infant, child and adolescent mental health and addiction. As it comprises a formal teaching component and a clinical component the programme will be delivered by an academic provider and a clinical provider working in partnership (see Section 9 below).

The formal teaching component will be delivered predominantly in an educational setting. Arrangements will be made for release from the clinical service to attend the formal teaching programme and supervision sessions.

The clinical component of the programme will be offered predominantly within the trainee's employment environment. Clinical placements outside the trainee's employment setting may also be offered to allow for learning not available in the usual area of employment. The clinical setting will allow trainees to build on their theoretical knowledge base and apply that knowledge in mental health and addiction services.

The programme must:

- a. be predominantly vocational rather than solely academic training or research
- b. comprise a significant clinical component
- c. include appropriate clinical placements
- d. provide release time from the clinical employment setting for trainees to undertake the formal teaching component of the programme
- e. be not less than nine months or more than one year in length (training providers, in conjunction with the funder, will utilise their discretion to allow trainees a longer length of time to complete the programme where there are circumstances precluding completion within the one year requirement)
- f. result in the award of a post-graduate certificate that is equivalent or equates to Level 8 on the National Qualifications Framework
- g. reference relevant competency frameworks and integrate theory and significant clinical experience to enable trainees to develop their knowledge, skills and practice in the specialty area of mental health and addiction
- h. have a detailed documented curriculum that includes the programme's purpose, outcomes, content, assessment criteria and methods
- be nationally recognised by the relevant professions and the mental health and addiction sector as meeting a national health services skill requirement rather than only meeting local employer need
- j. comprise one programme for all trainees regardless of discipline

k. incorporate three areas of learning: clinical, cultural, and resilience/recovery which are underpinned by a programme of professional development specific to each discipline.

4 ACADEMIC COMPONENT

4.1 Generic

The formal teaching component of the programme will:

- a. be designed to integrate with, and be relevant to, the trainee's clinical work environment
- b. be delivered by appropriately qualified, skilled and experienced teaching staff
- c. be equivalent to six month's full-time study
- d. utilise distance learning technology as appropriate
- e. reflect service user centred practice
- f. incorporate principles underpinning resilience/recovery, wellbeing, whanau ora and family and whanau inclusive practice
- g. utilise academic and cultural learning resources
- h. include Maori models of health and wellbeing
- i. include Pacific models of health and wellbeing
- j. include awareness of health perspectives relevant to Asian, refugee, migrant and other culturally diverse communities
- k. include the concept of health literacy, as well as its application.

4.2 Programme-specific requirements

The formal teaching programme is to include:

- a. contemporary evidence-based practice in infant, child and adolescent mental health and addiction service delivery, with a multi-disciplinary, resilience/recovery based, service user and family and whanau inclusive focus
- b. incorporation of Let's get real, Real Skills plus CAMHS and Real Skills plus Seitapu
- understanding of normal infant, child and adolescent development, as well as understanding of emergent mental health and addiction concerns in infants, children and adolescents and their families and whanau
- d. knowledge of relevant mental health and addiction diagnostic classification systems
- e. contemporary clinical practice including an introduction to therapeutic models of care for infants, children and adolescents
- f. developing effective communication skills to enable:
 - working with infants, children and adolescents in partnership with their families and whanau
 - consulting and liaising with health care teams (including primary health)
 and other services across sectors, in particular education, child youth and
 family services, social services
 - engagement with communities of interest
- g. developing core therapeutic skills and confidence in the areas of engagement, screening, assessment (including risk) and treatment pathways when working with infants, children and adolescents and their families and whanau
- h. understanding and applying relevant legislation
- i. access to cultural learning resources and application of cultural safety principles in infant, child and adolescent mental health and addiction service delivery
- j. developing capability with co-existing mental health and addiction problems (CEP capability)
- k. understanding of areas of specialty practice within infant, child and adolescent mental health and addiction service delivery (e.g. youth forensic, autism spectrum disorder, eating disorders)

I. understanding of contemporary models of service delivery (e.g. system of care, whanau ora, hub and spoke, service transition pathways).

5 CLINICAL COMPONENT

The clinical component of the programme will provide the trainee with opportunities to expand clinical skills and apply knowledge gained in the formal teaching programme. The trainee will be in a clinical setting for the duration of the programme. They may include a wide range of clinical work settings (e.g. inpatient, community, Alcohol & Other Drug services). Supervision will be planned and co-ordinated.

Clinical settings will allow trainees to:

- a. apply theoretical knowledge to clinical practice
- b. practice profession-specific treatment options
- c. work with infants, children and adolescents from a range of cultural backgrounds who present with concerns across the spectrum of mental health and addiction
- d. participate in a multi-disciplinary team environment
- e. work collaboratively with other health service providers and social agencies
- f. receive routine supervision provided to mental health and addiction professionals as part of their employment
- g. access a clinical preceptor/supervisor and receive additional preceptorship/supervision specifically focused on the programme
- h. have a reduced workload while undertaking the programme.

6 SUPERVISION and SUPPORT

You will ensure trainees receive supervision/mentoring and support as outlined in 6.1 and 6.2 below.

6.1 Programme-specific supervision or clinical preceptorship

Trainees will have access to an experienced and qualified practitioner trained in supervision/mentoring and with specific knowledge and skills for working with infants, children and adolescents. The supervisor/preceptor will provide the trainee with guidance and support specifically focused on the programme in addition to routine supervision for clinical practice. Where possible this practitioner will be of the same discipline as the trainee.

The programme-specific supervision/preceptorship will provide:

- a. supervision of practice for a minimum of 20 hours over the duration of the programme
- b. an opportunity for the trainee to reflect on their clinical practice as part of a multidisciplinary team practising in a mental health and/or addiction setting
- c. an opportunity to address cultural supervision needs
- d. an opportunity to discuss and critically review clinical practice
- e. timely, effective and constructive feedback to the trainee
- f. assistance to integrate theory and clinical practice.

6.2 Academic support (provided as part of the academic component)

Academic support will be provided to:

- a. assist trainees to successfully complete the academic component (e.g. assistance with understanding course material, academic writing and use of academic resources)
- b. assist integration of theory and clinical practice
- c. support effective practice development in partnership with the clinical provider.

7. TRAINEE OUTCOMES

To complete the programme successfully, the trainee will:

- a. meet the academic and theoretical outcomes of the programme
- b. meet the clinical outcomes of the programme
- be awarded a post-graduate certificate in mental health and addiction specialist practice.

8 ELIGIBILITY

8.1 Trainee Eligibility

Trainees are required to:

- a. meet the academic provider's criteria for eligibility to study at this level
- b. be registered pursuant to the Health Practitioners Competence Assurance Act 2003, or be a registered social worker, or be a registered practitioner with the Addiction Practitioners' Association Aotearoa New Zealand (DAPAANZ) or other relevant professional body (e.g. New Zealand Association of Counsellors) at the discretion of the training provider and funder
- c. have an active career plan
- d. be currently employed as a registered health professional, in a defined mental health or addiction role sufficient to support the clinical component of the training programme, either by a mental health and/or addiction service or a Primary Health Organisation in both cases funded by the Ministry of Health or a District Health Board
- e. be working clinically for at least 0.6FTE (24 hours a week) where they have at least one year's experience new graduates must be working a minimum of 0.7FTE (28 hours a week) in a mental health or addiction setting
- f. be a New Zealand citizen or hold a New Zealand permanent resident visa
- g. complete the post graduate certificate programme in one year, or over two academic years at the discretion of the training provider and funder.

8.2 **Provider Eligibility**

The programme must be accredited by NZQA or CUAP. You will supply us with written evidence of the programme's accreditation status prior to the commencement of the programme. Providers of the clinical placements must comply with the Health *and Disability Services Standards* (NZS 8134.00:2008; 8134.01:2008; 8134.02:2008 and NZS 8134.03:2008).

9 PARTNERSHIP

- 9.1 The programme will be delivered by an academic provider and a clinical provider working in partnership to:
 - ensure effective practice development opportunities that integrate theory and clinical practice
 - b. link professional knowledge and education to the specifics of the trainee's clinical practice.
- 9.2 Subject to Clause 6.2 of this agreement you will enter into a subcontract for the provision of either the clinical component or the academic component of the training programmes with a clinical provider or an academic provider as the case may be. The agreement will amongst other things outline:

- a. roles and responsibilities of the partners
- b. study release arrangements
- c. provision of supervision/preceptorship
- d. access to cultural supervision where appropriate
- e. active career plans
- f. liaison and co-ordination
- g. reporting on trainees' progress for academic and clinical components
- h. financial compensation.
- 9.3 You must provide us with the names of those providers who will be subcontracted by you, as well as copies of relevant subcontracts.
- 9.4 Notwithstanding any subcontracting arrangements, you are responsible for the delivery of the training programmes and for financial compensation of the subcontracted providers.

10 PROGRAMME ADMINISTRATION

10.1 **Programme co-ordination**

You will undertake programme co-ordination tasks which include:

- a. selection of trainees
- b. maintaining a record of trainees' progress (including attendance and assessment)
- c. liaison with clinical staff, including preceptor and supervisor selection
- facilitation of clinical experiences for trainees outside the normal workplace setting where necessary
- e. curriculum development and review
- f. advice to trainees on the training programme requirements including guidance on recognition of prior learning
- g. coordination of clinical teaching, e.g. study days, tutorials
- programme (including clinical workplace/placement) evaluation and quality improvement
- competency assessment of trainees this will include an ongoing formative assessment over the duration of the programme
- j. issue resolution between trainee/preceptors/supervisors
- k. convening an advisory group, which provides appropriate knowledge and expertise from the infant, child and adolescent mental health and addiction sector to ensure the relevance and currency of the programme
- I. reporting to the funder.

10.2 Associated linkages

You will establish and maintain links with:

- a. current employers of trainees on the training programme
- b. infant, child and adolescent mental health and addiction services
- c. other relevant mental health and addiction training programmes
- d. regional training hubs
- e. relevant professional organisations
- f. academic providers
- g. regional and national mental health and addiction networks
- h. cultural advisory groups
- i. service user leaders, advisors, advocates or networks
- j. national mental health and addiction workforce development programmes.

11 QUALITY REQUIREMENTS

11.1 Quality obligations

You will:

- a. maintain and implement a quality improvement programme which will include documented processes to operate throughout the training programme for:
 - monitoring, evaluating and improving the effectiveness of the training programme
 - monitoring the applicability and relevance of the theoretical programme to keep it up-to-date with mental health and addiction practice and developments
 - regular monitoring of individual trainee performance and ensuring trainees receive timely feedback
 - ensuring trainees who require additional support have access to help
 - effective stakeholder input, including trainees, trainees' employers and service users and families into programme delivery and review (e.g. programme content and relevance),
 - ensuring trainees are getting relevant role development opportunities as part of the clinical component
 - providing input from Maori, Pacific and other appropriate cultural/CALD advisors on the ability of the programme to meet the cultural needs of trainees and service users
 - ensuring there is open, systematic and fair selection of trainees
- b. provide us with a copy of your quality improvement plan
- c. have an appropriate complaints process available to trainees and other personnel involved in the programme
- d. maintain clear lines of responsibility and accountability between providers of the formal teaching component and the clinical component to ensure trainees are working safely in their workplaces
- e. teach at an appropriate standard using current methods with qualified and skilled staff
- f. ensure reports are provided by the due date
- g. ensure a record of trainees' progress is maintained and reported.

11.2 Cultural responsiveness

The programme will acknowledge the cultural characteristics of New Zealand society and the principles of partnership that influence planning and delivery of mental health and addiction services. You will ensure that:

- a. the environments in which trainees undertake the programme requires and supports the trainees to demonstrate culturally appropriate clinical practice
- b. the academic and clinical components of the programme are informed by consultation with Maori and take into account the health needs and differing cultural expectations of Maori
- c. programme planning involves and is responsive to the expectations of Maori.

12 MISCELLANEOUS TERMS

In delivering the services:

- a. where the number of trainees in a programme falls below 85% of the maximum number set out in Schedule A clause 1 as a result of low enrolments, withdrawals or resignations, then we reserve the right to review and at our discretion, give notice to terminate this contract in whole or in part
- b. you will not charge either trainees or their employers for the programme either directly or indirectly
- c. you will ensure trainees have access to a library and search facilities with current relevant literature, including mental health journals and texts

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- d as the provider of a national programme you will endeavour to address access issues e.g. by having teleconference and audio/video equipment to facilitate distance-learning methods
- e. you will ensure trainees have access to this service specification and are informed about the Skills Matter travel and accommodation grants prior to the commencement of the training programme (our grant policies, guidelines and applications can be accessed on our website)
- f. you will ensure that all programme promotional material clearly indicates the programme is funded by Te Pou
- g. if required you and Te Pou shall participate in an annual all-provider meeting.

13 REPORTING REQUIREMENTS

All other reporting requirements are set out in Schedule C of the contract.