

<b>Title</b>	<b>Work with forensic mental health patients to engage with preferred support networks</b>		
<b>Level</b>	<b>4</b>	<b>Credits</b>	<b>5</b>

<b>Purpose</b>	People credited with this unit standard are able to: explain the benefits and risks to forensic mental health patients identifying and engaging with preferred support networks; and work with forensic mental health patients to identify and engage with preferred support networks.
----------------	--

<b>Classification</b>	Health, Disability, and Aged Support > Mental Health and Addiction Support
-----------------------	--

<b>Available grade</b>	Achieved
------------------------	----------

**Guidance Information**

- 1 Legislation relevant to this unit standard includes:  
 Alcoholism and Drug Addiction Act 1966;  
 Children, Young Persons, and Their Families Act 1989;  
 Criminal Justice Act 1985;  
 Criminal Procedure (Mentally Impaired Persons) Act 2003;  
 Health and Disability Commissioner (Code of Health and Disability Services Consumers' Rights) Regulations 1996;  
 Health Practitioners Competence Assurance Act 2003;  
 Intellectual Disability (Compulsory Care and Rehabilitation) Act 2003;  
 Mental Health (Compulsory Assessment and Treatment) Act 1992;  
 Misuse of Drugs Act 1975;  
 Privacy Act 1993;  
 Protection of Personal and Property Rights Act 1988.
  
- 2 New Zealand Standards relevant to this unit standard include:  
 NZS 8134.0:2008 *Health and disability services Standards – Health and disability services (general) Standard*;  
 NZS 8134.1:2008 *Health and disability services Standards – Health and disability services (core) Standards*;  
 NZS 8134.2:2008 *Health and disability services Standards – Health and disability services (restraint minimisation and safe practice) Standards*;  
 NZS 8134.3:2008 *Health and disability services Standards – Health and disability services (infection prevention and control) Standards*.  
 All standards are available from <http://www.standards.co.nz>.

### 3 Primary references

Community Liaison Committee of the Royal Australian and New Zealand College of Psychiatrists. (2000). *Involving families – Guidance notes: Guidance for involving families and whānau of mental health consumers/tangata whai ora in care, assessment and treatment processes*. Wellington: Ministry of Health on behalf of the Royal College of Australian and New Zealand Psychiatrists, the Health Funding Authority, and the Ministry of Health; available at <http://www.moh.govt.nz/moh.nsf/pagesmh/590>.

Mental Health Commission. (1998). *Blueprint for mental health services in New Zealand: How things need to be*. Wellington; available at <https://www.mentalhealth.org.nz/>.

Mental Health Commission. (2003). *Oranga Ngākau: Getting the most out of mental health services: A recovery resource for service users*. Wellington; available at <https://www.mentalhealth.org.nz/>.

MH-SMART Outcomes Initiative Tangata Whaiora/Motuhake Roopu. (2005). *Tuituia*. Auckland: Te Pou; available at [http://www.tepou.co.nz/file/PDF/Tuituia\\_only.pdf](http://www.tepou.co.nz/file/PDF/Tuituia_only.pdf).

### 4 References

American Psychiatric Association. (2000). *Diagnostic and statistical manual of mental disorders – DSM-IV-TR* (4th ed., Text revision). Washington DC; available at <https://www.psychiatry.org/>.

Ministry of Health. (1998). *Guidelines for clinical risk assessment and management in mental health services*. Wellington: Ministry of Health in partnership with the Health Funding Authority; available at <http://www.moh.govt.nz>.

Ministry of Health. (2008). *Let's get real: Real Skills for people working in mental health and addiction*. Wellington; available at <http://www.moh.govt.nz>.

Te Pou o Te Whakaaro Nui, Le Va, Pasifika within Te Pou. (2009). *Real Skills Plus Seitapu – Working with Pacific Peoples*. Auckland; available at <http://www.leva.co.nz>; or <http://www.tepou.co.nz>; or [www.moh.govt.nz/mentalhealth](http://www.moh.govt.nz/mentalhealth).

5 Support should aim to: maintain, improve, or restore a person's independence and/or interdependence; utilise the person's existing strengths; and, where possible, utilise the resources of the local community.

6 This unit standard cannot be assessed against in a simulated environment. For assessment, candidates must demonstrate competence in the workplace through paid or unpaid employment, or in placements in a service provider workplace negotiated by an education provider.

7 Support provided for forensic mental health patients may include natural supports.

8 Candidates' practice must reflect appropriate values, processes, and protocols in relation to working with Māori and Pacific peoples and/or people from other cultures, in a range of settings and environments.

### 9 Definitions

*Assisted/assistance* in the context of this unit standard refers to a candidate working alongside a forensic mental health patient to identify and engage with preferred support networks and community activities that are accessible, appropriate to the patient's situation, meet the patient's needs, promote the patient's health, wellbeing, and recovery, and where identified risks can be mitigated or managed. Assistance is always provided within the bounds of the candidate's role and responsibilities and the

organisation's policies and procedures.

*Candidate* refers to the person seeking credit for this unit standard.

*Forensic mental health patients* in the context of this unit standard are mental health patients who come within the four special patient categories. The four special patient categories are:

- a patients on short-term remand;
- b remand and sentenced prisoners who require assessment and treatment in hospital;
- c those who are under disability [Intellectual Disability (Compulsory Care and Rehabilitation) Act 2003];
- d those who juries decide are 'not guilty by reason of insanity'.

*Natural supports* refers to any assistance, relationships, or interactions provided to a forensic mental health patient by family/whānau, friends, peers, co-workers, or community volunteers. In a specifically Māori context, natural supports may include but are not limited to: kaumātua, kuia, tohunga, whānau, iwi, and hapū.

*Organisation's policies and procedures* are the policies and procedures of the employing organisation of the candidate and include ethical codes, standards, and other organisational requirements.

*Preferred support networks* refers to assistive services such as natural supports, activity programmes, clubs and/or societies, agencies and organisations, churches, financial advice/support, hapū, iwi, marae, property rights and welfare guardians, and respite facilities.

---

## Outcomes and Performance Criteria

### Outcome 1

Explain the benefits and risks to forensic mental health patients identifying and engaging with preferred support networks.

Range evidence is required for two forensic mental health patients.

### Performance criteria

- 1.1 The benefits and risks to forensic mental health patients engaging with preferred support networks are explained in accordance with the primary references.

Range benefits and risks aligned to meeting patients' short-term and/or long-term goal(s) for wellbeing, benefits and risks aligned to meeting patients' short-term and/or long-term recovery goal(s).

### Outcome 2

Work with forensic mental health patients to identify and engage with preferred support networks.

Range evidence is required for two forensic mental health patients.

**Performance criteria**

- 2.1 Forensic mental health patients are assisted to identify preferred support networks and which align with their wellbeing and recovery goal(s).
- 2.2 Forensic mental health patients are assisted to engage with identified preferred support networks.
- 2.3 Assistance is provided in accordance with the boundaries of the candidate's role and the organisation's policies and procedures.

**This unit standard is expiring. Assessment against the standard must take place by the last date for assessment set out below.**

**Status information and last date for assessment for superseded versions**

Process	Version	Date	Last Date for Assessment
Registration	1	21 July 2011	31 December 2022
Revision	2	17 May 2012	31 December 2022
Review	3	27 February 2020	31 December 2022

<b>Consent and Moderation Requirements (CMR) reference</b>	0024
--	------

This CMR can be accessed at <http://www.nzqa.govt.nz/framework/search/index.do>.