

# **Guide to PRIMHD Activity Collection and Use**

To be used in conjunction with  
PRIMHD Code Set Standard  
HISO 10023.3:2017

2021: Version 1.1



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# Version control

Version	Date	Status	Description of changes
1.0	February 2016	First published version	
1.1	June 2021	Second published version	Addition of family/whānau involvement flag, two new T codes (T51 and T52) and minor wording changes. See more Family/whānau involvement flag.

## Important

It is important that you use the current version of this document. All Health Information Standards Organisation (HISO) standards are living documents and are reviewed periodically to assess and maintain their currency. This document will be reviewed at each HISO review or National Collection Annual Maintenance Project (NCAMP) change process and will incorporate amendments issued since the document was first published.

Detailed information about HISO standards, drafts, amendments and new projects can be found by visiting [the HISO website](#).

# Acknowledgements

## Original project team

The project team would like to acknowledge the resources provided by services nationwide that have assisted in preparing this guide. Scenarios compiled in this document have been developed and reviewed by a wide range of mental health and addiction sector representatives from district health boards (DHBs) and non-government organisation (NGO) providers nationally. Thank you to all of those people who contributed.

The project team consisted of the following people:

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## Version 1.1

The updates to the guide were carried out by the project team of:

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# Introduction

## Purpose of PRIMHD

The **Programme for the Integration of Mental Health Data (PRIMHD)** is a service user-centric database designed to capture a range of services (interventions or activities) being delivered to service users by contracted mental health and addiction providers. The primary objective of PRIMHD is to obtain a national picture of the mix of District Health Board (DHB) and non-government organisation (NGO) services being delivered to service users and how this pattern is changing over time.

PRIMHD data is used to report on what services are being provided, who is providing the services, and what outcomes are being achieved for service users across New Zealand's mental health sector. These reports enable better quality service planning and decision-making by mental health and addiction service providers at the local, regional and national levels.

PRIMHD represents only those activities that are clinically significant or activities significant to a service user's journey. It is not a contract or performance monitoring database. While many individual provider information systems do have the capacity to collect a broader range of staff activities (eg, the travel time associated with an activity), PRIMHD does not capture information about everything a staff member does while they are at work.

## Purpose of this guide

The purpose of this guide is to improve national consistency in the collection and use of activity data in PRIMHD by mental health and addiction services, funders and planners and the Ministry of Health PRIMHD national collections team. This includes the activity type codes, also known as T codes, and the family/whānau indicator added to PRIMHD on 1 July 2021. This guide is not a replacement for the HISO PRIMHD standards but is intended to support a consistent national approach so that the quality of the data reported to PRIMHD improves, thereby improving the utility of the national collection.

## Intended audience

The intended audience of this guide includes: NGO and DHB service providers (clinicians, data analysts, administrators, DHB and regional coordinators for PRIMHD); portfolio managers, funders and planners; Ministry of Health (Ministry), including Mental Health and Addiction directorate and PRIMHD National Collections; national workforce centres; and researchers and other users of PRIMHD data.

## Intended use

The intended use of this document is to support the mental health and addictions sector workforce to more accurately capture and record service activity information. Specific case scenarios have been developed for all current activity codes detailed in the **PRIMHD Code Set Standard HISO 10023.3:2017**, with a specific focus on clarifying those that have demonstrated inconsistent interpretation.

This document should be used in conjunction with the HISO PRIMHD standards and PRIMHD specifications, which can be found at the links below:

- **HISO PRIMHD standards, data and code sets**
- **PRIMHD specifications**

## Which activity codes are included?

All current HISO **PRIMHD Code Set 10023.3:2017** activity type codes are included in this guide.

Although community-based activities have been the most problematic in terms of their inconsistent collection, residential and inpatient activity type (bed night) codes are included here to ensure a complete set of codes is represented. Specific guidelines for reporting residential and inpatient activity are included, along with some tips to improve data quality.

To avoid confusion, activity type codes that have been retired are not included.

This version includes the addition of two new T codes recently added to PRIMHD as part of the NCAMP process. **T51** relates to integrated Pacific and clinical interventions. **T52** relates to health coaching contacts. Further details about the introduction of these changes can be found on the **NCAMP website**.

# Family/whānau involvement flag

This version includes a key update to provide details of the new family/whānau data element added to PRIMHD on 1 July 2021.

The family/whānau involvement (FWI) flag indicates whether a family/whānau member was involved with the service user at an activity. Guidance for reporting this new data element has been added, including specific case scenarios for each T code. A yes (Y) or no (N) indicator now applies to each relevant T code.

Involvement can be interpreted broadly based on each scenario and each service user – for some people or activities it may just be the presence of whānau in the room while for other people or activities whānau may be as actively involved as the service user. To indicate involvement as yes (Y) whānau should have been involved for all or part of an activity. If family/whānau involvement is unknown, FWI is N.

Reporting of the FWI flag is expected on activity records with a start date of 1 July 2021 onwards. Further details about the NCAMP change process for the new data element can be found on the **Ministry of Health website**.

## Terminology used in this guide

The term 'service user' is used throughout this guide and is intended to cover all terms used to describe people who access mental health or alcohol and other drug services, including tāngata whaiora, clients and consumers.

'Mental health and addiction staff member' is used to cover clinicians, practitioners, professionals, nurses and other staff who work in mental health and addiction services, unless specifically mentioned in the scenario for the purposes of clarity (eg, community support worker).

Where the guide quotes from existing HISO PRIMHD standards, the terminology used in those resources has been retained.

Family/whānau is not easily defined. Whānau are complex and diverse, and described and interpreted in different ways. *He Ara Oranga* describes family and whānau as not limited to blood ties, but including partners, friends and others in a person's wider support network. Importantly, it is up to each whānau and each individual to define for themselves who their whānau is.

## Out of scope

The focus of this guide is the activity type codes and the family/whānau indicator added to PRIMHD on 1 July 2021. Issues relating to other data held in PRIMHD or reported separately to PRIMHD and/or the Ministry are out of scope for this guide. The following briefly describes details for some of these.

### Purchase unit codes (PUCs)

It is important to note that in most cases there is not a one-to-one match between the purchase unit codes, which are outlined in the Nationwide Service Framework, and the PRIMHD team or activity type codes. In addition, providers may deliver services that are not easily captured by either the Framework or PRIMHD.

For this reason, all providers are required to complete a mapping document, which identifies each 'team' and its associated activities using the PRIMHD activity type codes. Consistent mapping processes are particularly important when it comes to funders and planners, providers and the Ministry interpreting reports based on PRIMHD data.

The PRIMHD Data Management team works with providers on the mapping document process. They can be contacted at [primhduserinterface@health.govt.nz](mailto:primhduserinterface@health.govt.nz).

### Referral standards

Referral start and end codes are out of scope for this guide. For information about referrals, refer to the **PRIMHD Code Set 10023.3:2017**.

### Wait times

It is acknowledged that the use of specific activity types or activity settings can be triggers for wait time calculation. The inclusion of wait time relationships in each of the activity types and settings has been identified as out of scope for this guide. For further information about PRIMHD wait times, refer to the waiting times calculation method published on the **Ministry's website**.

### Activity setting

A complete review of the activity setting codes and descriptions is out of scope for this guide. Where points of clarification were provided by collating materials for this guide that add clarity to the use of the activity setting codes, these clarifications have been

included in the case scenarios. A list of current PRIMHD activity setting codes and descriptions can be found in the **Appendix**.

## Recommendations to HISO for changes or additions to the PRIMHD standard

Consultation with the mental health and addiction sector for the purposes of the original development of this resource highlighted a number of key issues that could not be resolved through the development of scenarios in this guide. Recommendations resulting from this work were submitted to the Ministry for consideration. Any changes must be approved through formal National Collections Annual Maintenance Project (NCAMP) and/or Health Information Standards Organisation (HISO) processes before they can be put into use.

## Process for maintaining this guide

This guide is one of the core documents designed to support and improve quality and consistency in the collection and use of PRIMHD data. Issues identified in the way services collect and/or use specific activity codes or associated PRIMHD data should be directed, in the first instance, through existing channels; for example, PRIMHD National Stakeholder group or NGO Community of Practice Analyst Group.

Contact details for the PRIMHD National Stakeholder Group can be found on the **Te Pou website**.

The PRIMHD Data Management team also works closely with providers to help with consistent use of the codes. They can be contacted at **primhduserinterface@health.govt.nz**.

Reviews of, or updates to, this guide will also be considered in order to coincide with existing PRIMHD processes at each of the following points:

- with each NCAMP change
- at each HISO review
- as indicated by the PRIMHD Governance Group.

# How to use this guide

This guide is intended to be easily navigated by those who have an existing understanding of PRIMHD activity type codes, or T codes, such as data analysts, data quality staff, local PRIMHD champions and stakeholders. Activity type descriptions, alongside the use of a service user journey model, are included as much as possible to assist clinicians and other staff less familiar with the use of T codes.

## PRIMHD team type and activity type matrix

Team type (eg, community or alcohol and drug) determines which activity types are applicable for a given team. The matrix in section 5.10 of the PRIMHD File Specification is a guide for which activity types (or T codes) each different team type can report to PRIMHD. Instead of duplicating the matrix here, it is recommended that you consult the team type and activity type matrix alongside this guide to see, at a team level, which T codes can be reported to PRIMHD. The PRIMHD File Specification can be found on the [Ministry of Health website](#).

## Activity type table characteristics

Each activity type code table includes:

- **keywords** associated with the activity
- the current **HISO PRIMHD Code Set 10023.3:2017 definition**
- **additional comments** to add context and/or business rules related to the code that will help users to identify the correct code
- details of how to report **family/whānau involvement** for each activity
- a table of one or more **case scenarios** as examples of the types of activities the **activity type** or T code may be used for.

## Case scenario table content

Each case scenario includes a set of additional identifiers:

- the **activity purpose** – the main reason for the activity
- whether the **service user is a direct recipient** of the activity
- *an example* of an appropriate **activity setting** (where, or how, the activity took place; note that in some cases there may be many possible valid activity settings but those represented here are given as examples)
- the correct **T code** to be used in each instance
- details of how to report **family/whānau involvement** for the activity.

Where useful, a **rationale or business rule** may be given to assist in clarifying the use of each code.

Some activity type codes have additional **incorrect use** scenarios provided to differentiate between one code and another; for example, the difference between the use of crisis attendance (T01) and triage/screening (T46). These additional 'incorrect use' scenarios are shaded to distinguish them from those detailing the correct use of the relevant code.

## Navigating the case scenarios

This document is structured for ease of use with hyperlinks (mouse click) to activity type codes based on a service user journey model. Hyperlinks are those words that are shown in dark grey bold font.

- To view activity types used at a specific point in the service user journey, click on the description (eg, **community-based activity**).
- For each section heading (eg, **group and day programmes**) there may be a subset of activities, or just one T code to select.
- Select the relevant activity type description in order to be taken automatically to the relevant T code and read through the scenarios.
- Once you have read through the content, click on an alternative T code, or to go back to the service user journey setting menu, click the **return to service user journey** link at the bottom of any page.

For those used to using the keyboard search functions, **Ctrl+F** lets you navigate through the document headings and pages, as well as allowing you to search for specific words or phrases.

# Select your service user journey setting



# Residential and inpatient activity

Click on our [Residential and inpatient activity guidelines](#) for more information.

## Residential activity/occupied bed nights

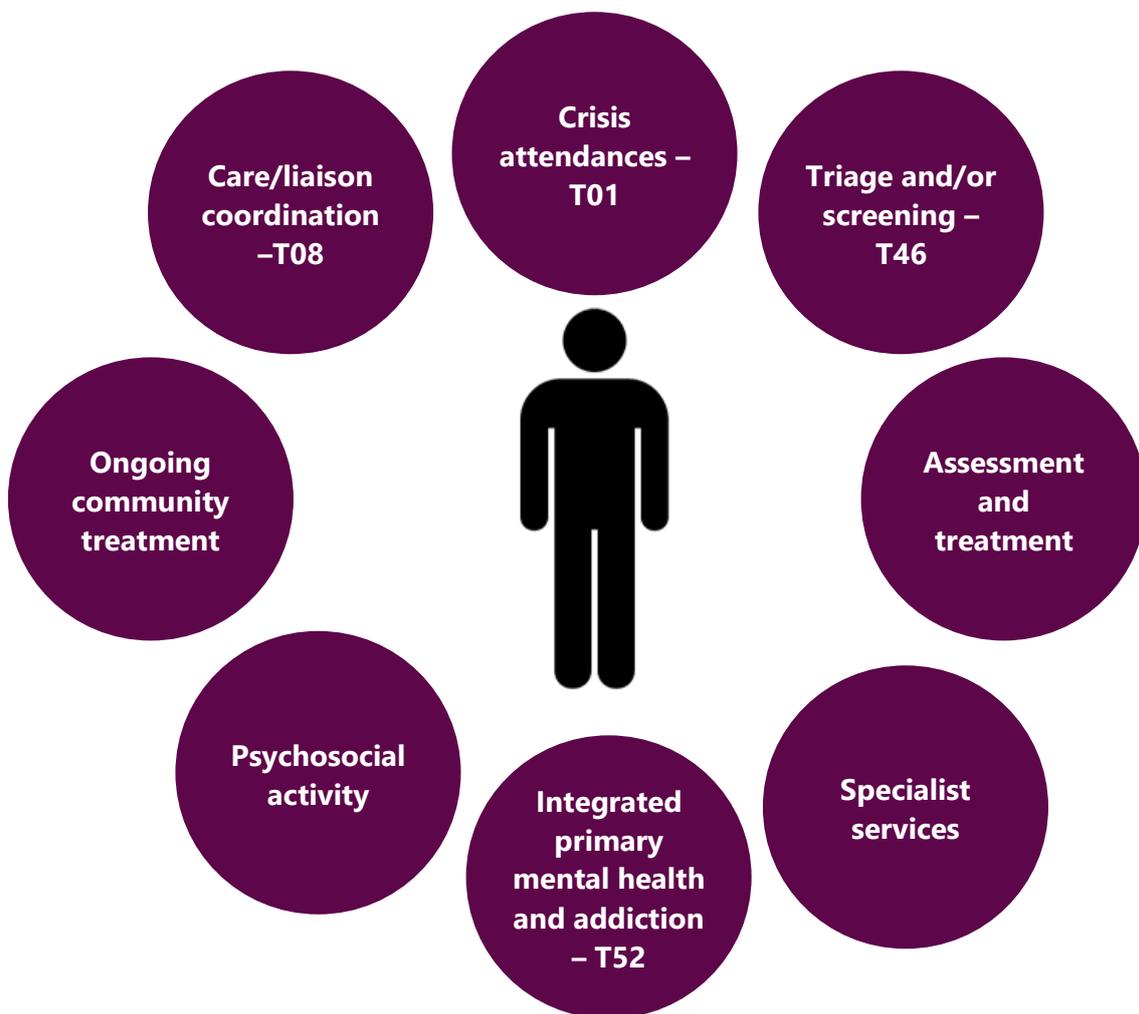
- Substance abuse withdrawal management/detoxification (medical) – **T16**
- Substance abuse residential service – **T20**
- Residential facility – responsive night support – **T27**
- Residential facility – awake night support – **T28**
- Community residential – **T29**
- Planned respite care – **T30**
- Co-existing disorders residential service – **T48**
- Crisis respite care – **T05**
- On leave – **T37**

## Inpatient activity/occupied bed nights

- Mental health intensive care or equivalent – **T02**
- Mental health acute inpatient or equivalent – **T03**
- Mental health sub-acute or equivalent – **T04**
- Maximum secure inpatient – **T11**
- Medium secure inpatient – **T12**
- Minimum secure inpatient – **T13**
- Forensic step down – **T14**
- Psychiatric disability rehabilitation – **T21**
- Seclusion – **T33**
- On leave – **T37**

Return to [service user journey setting](#)

# Select the appropriate section on the service user journey



Return to [service user journey setting](#)

# Community-based activity

Click on our **community-based activity guidelines** for more information.

## Assessment and treatment

- Mental health crisis attendances – **T01**
- Triage and/or screening – **T46**
- Completed needs assessment – **T10**
- Individual treatment attendance – family/whānau not present – **T42**
- Contact with family/whānau – consumer present – **T36**

## Specialist services

- Court liaison attendance – **T15**
- Substance abuse detoxification attendances (social) – **T17**
- Methadone treatment specialist service attendance – **T18**
- Methadone treatment specialist service attendance for consumers of authorised GPs – **T19**
- ECT – **T34**

## Psychosocial activity

- Group and day programme guidelines:
  - Group programme session attendances – **T07**
  - Day treatment programme attendances – **T22**
  - Day activity programme attendances – **T23**
- Work opportunity, employment or vocational support – **T24**
- Community support contacts – **T43**
- Advocacy – **T44**
- Peer support – **T45**

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## Ongoing community treatment

- Care/liaison coordination contacts – **T08**
- Contact with family/whānau – consumer not present – **T32**
- Contact with family/whānau – consumer present – **T36**
- Cultural activity guidelines:
  - Māori-specific interventions – **T38**
  - Integrated Māori and clinical interventions – **T39**
  - Pacific peoples cultural activity – **T40**
  - Other cultural specific activity – **T41**
  - Integrated Pacific and clinical interventions – **T51**
- Support for family/whānau:
  - Support for family/whānau – **T47**
  - Support for children of parents with mental illness and addictions (COPMIA) – **T49**
  - Support for parents with mental illness and addictions – **T50**

## Integrated Primary Mental Health & Addiction (IPMHA) services

- Health coaching contact – **T52**

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# Residential and inpatient activity guidelines

PRIMHD has rules governing which *team type/activity type* combinations can report bed nights, which includes consideration of the team setting. The matrix in section 5.10 of the PRIMHD File Specification identifies the valid combinations. The PRIMHD File Specification can be found on the [Ministry of Health website](#).

Table 1 shows a simplified list of team types and team setting combinations that can report bed nights. Community team types, or team types with a community team setting, are not able to report bed nights, 'on leave' activities or seclusion.

**Table 1: Team type and team setting combinations valid for reporting bed nights to PRIMHD**

Team type code	Team type description	Team setting
01	Inpatient Team	I
03	Alcohol and Drug Team	R, I, M
05	Forensic Team	R, I, M
08	Residential/Accommodation Team	R
11	Co-Existing Problems Team	R
12	Intellectual Disability Dual Diagnosis Team	R, I
14	Specialty Team	R, I
15	Maternal Mental Health Team	I
16	Eating Disorder Team	R, I

Notes: R = residential; I = inpatient; M = mixed

# Rules for reporting inpatient and residential activity

Inpatient teams report bed nights and leave nights in the form of T code activities. The following rules apply to reporting bed night activity.

- **Bed night** refers to a period that spans midnight and which takes place in inpatient or residential teams, identified by team type.
- An inpatient activity type code used with a community team type is not a valid bed night.
- Where the **intention is that a service user will be on leave over midnight**, report T37 'On leave'. If the leave period doesn't go according to plan and the service user returns before midnight, report the end of the leave record as the time of return. Report the relevant bed night activity code with the appropriate start time.
- Note: although this is not correct as per the HISO definition of T37 On leave, these records are accepted in PRIMHD.
- **Brief stays** in an inpatient bed that do not span midnight are not bed nights and should not be reported by inpatient teams, respite or residential services.

## Example 1

A service user is admitted for crisis respite at 4 pm on 23 February and discharged the following day at 10 am. Report to PRIMHD as:

T05 – Start date/time 23/2/2015 1600 hrs, end date/time 24/2/2015 1000 hrs.

## Example 2

A service user is given overnight leave to go home from a sub-acute facility from 4 pm on Friday 12 June in the afternoon until Saturday afternoon at 4 pm. The leave period doesn't go as planned and the service user returns at 11 pm on Friday night. Report to PRIMHD as:

T37 – Start date/time 12/6/2015 1600 hrs, end date/time 12/6/2015 2300 hrs

T04 – Start date/time 12/6/2015 2300 hrs.

## Example 3

A service user is admitted at 4 pm and discharged the same day at 11 pm.

This is not a bed night activity and should not be reported to PRIMHD using an inpatient activity code. PRIMHD identifies these records as 'bad data'.

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# Residential and inpatient activity types

The PRIMHD definitions and related business rules for each residential or inpatient bed night activity are detailed in Table 2.

Some activity types are valid only for specific services. Refer to the PRIMHD matrix in section 5.10 of the **PRIMHD File Specification** to identify which team types can use which T codes where this is not clarified in the descriptions in Table 2.

**Table 2: PRIMHD residential and inpatient activity types and definitions**

Activity type description	PRIMHD definition	Inpatient activity type code
Mental health intensive care inpatient or equivalent occupied bed nights	Time spent by a tangata whaiora/consumer in a certified (to Health and Disability Sector standards) acute mental health intensive care inpatient service. These 24-hour care and treatment services are provided to manage people with serious acute mental health disorders, whose condition presents a danger to themselves or other people. These tāngata whaiora/consumers are generally the subject of a compulsory assessment or treatment order.	T02
Mental health acute inpatient or equivalent occupied bed nights	Time spent by a consumer in a mental health acute inpatient or equivalent service. These 24-hour care and treatment services are provided to people experiencing severe acute symptoms, requiring intensive input for a short period of time.	T03
Mental health sub-acute inpatient or equivalent occupied bed nights	Time spent by a consumer in a mental health sub-acute inpatient or equivalent service. These 24-hour care and treatment services are provided to manage unwell people, requiring less intensive input for a longer period of time.	T04
Crisis respite care occupied bed nights	Short-term care for a person requiring support in an urgent situation as an alternative to admission to an acute mental health service.	T05

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<b>Activity type description</b>	<b>PRIMHD definition</b>	<b>Inpatient activity type code</b>
Maximum secure inpatient occupied bed nights	<p>Time spent by a consumer in a maximum secure service. These 24-hour care and treatment services are provided to eligible people who require higher levels of observation and intensive treatment and/or secure care over longer periods than can be provided in medium secure units.</p> <p>This code is specific to Forensic mental health and addiction services.</p>	T11
Medium secure inpatient occupied bed nights	<p>Time spent by a consumer in a medium secure service. These 24-hour care and treatment services are provided to eligible people who are in need of more intensive assessment and/or treatment than can be provided in a less secure setting.</p> <p>This code is specific to Forensic mental health and addiction services.</p>	T12
Minimum secure inpatient occupied bed nights	<p>Time spent by a consumer in a minimum secure service. These 24-hour care and treatment services are provided for eligible persons as part of recovery oriented process.</p> <p>This code is specific to Forensic mental health and addiction services.</p>	T13
Forensic step down occupied bed nights	<p>To provide a recovery-oriented community-based service that enhances the skills and functional independence of people who are assessed as requiring care in an environment with some structure, supervision and support but no longer require the secure environment or the treatment component that a Forensic inpatient service provides.</p> <p>This code is specific to Forensic mental health and addiction services.</p>	T14
Substance abuse withdrawal management/detoxification occupied bed nights (medical)	<p>Time spent by a tangata whaiora/consumer in a medical substance abuse detoxification service. These 24-hour care and detoxification services are provided by or on behalf of contracted alcohol and drug providers or facilities in an inpatient setting.</p>	T16
Substance abuse residential service occupied bed nights	<p>Time spent by a tangata whaiora/consumer in a substance abuse residential service. These 24-hour care and treatment services are provided to people with particular requirements unable to be met in less structured or supported settings.</p>	T20

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Activity type description	PRIMHD definition	Inpatient activity type code
Psychiatric disability rehabilitation occupied bed nights	Time spent by a tangata whaiora/consumer in a mental health and addiction rehabilitation unit.	T21
Residential facility with responsive night support occupied bed nights	Time spent by a tangata whaiora/consumer in a community-based housing and recovery-focused support service offering responsive night support for people who experience mental illness and/or addiction.	T27
Residential facility with awake night support occupied bed nights	Time spent by a tangata whaiora/consumer in a community-based housing and recovery-focused support service for people who experience mental illness and/or addiction, with higher levels of acuity, where 24-hour support, provided by appropriately trained and qualified support workers, and access to clinical staff, is required to meet individual needs.	T28
Community residential occupied bed nights	Time spent by a tangata whaiora/consumer in a residential support service. These 24-hour care and treatment services are provided to tangata whaiora/consumers, some with complex and/or chronic conditions, and often for a long period of time.	T29
Planned respite care occupied bed nights	Time spent by a tangata whaiora/consumer in a respite care service or receiving home-based respite care. For use by people who require a short break from their usual living situation (usually planned).	T30
On leave	The absence of a tangata whaiora/consumer from the health care/support facility to which they were most recently admitted/entered. Leave is reported only where that tangata whaiora/consumer is absent at midnight and is entered instead of the bed night for that period of leave.	T37
Co-existing disorders residential service occupied bed nights	Recovery-orientated community-based service that will provide housing and treatment interventions for tangata whaiora/consumers who have co-existing mental health problems with alcohol and/or other drug misuse.	T48

**Team type** is not reported to PRIMHD but is mapped to each **team code**. Please refer to your local mapping document for more information.

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# Other activity types that can be reported by residential or inpatient services

Residential and inpatient services can also report the following activity types, which are not bed nights.

These activities should not span a 24-hour period or span midnight, with the exception of seclusion reporting, which has specific requirements when reporting over a period including midnight.

To view the PRIMHD definition and related business rules and/or case scenarios for these activities, click on the appropriate T code.

**Table 3: Non-bed night activities that can be reported by residential and inpatient team types**

Activity type description	PRIMHD definition	Inpatient activity type code
Seclusion	The placing of a service user, at any time and for any duration, alone in a room or area from which they cannot freely exit.	T33
ECT	Electro Convulsive Therapy (ECT)	T34

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# Family/whānau involvement

All activity records from 1 July 2021 submitted to PRIMHD will now have a family/whānau involvement indicator included. The family/whānau involvement (FWI) flag indicates whether a family/whānau member was involved with the tangata whaiora at an activity.

An overview of the applicability of FWI to each code is included in Table 4 below. A full matrix can also be found in section 5.4 of the **PRIMHD file specification**. Please note the table below includes only T codes where the activity type is contact. Codes where FWI will always be no (N) due to the activity type (eg bednights, leave, seclusion or ECT) are excluded from the table.

**Table 4: Activity type and family whānau involvement (FWI) matrix for contact activity type T codes**

Activity code	Short description	FWI Y	FWI N	Comment
T01	Mental health crisis attendances	1	2	Could legitimately be either.
T07	Group programme session attendances	1	2	Could legitimately be either.
T08	Care/liaison coordination contacts		2	Should always be N.
T10	Completed needs assessment		2	Should always be N.
T15	Court liaison attendances	1	2	Could legitimately be either.
T17	Substance abuse detoxification attendances (social)	1	2	Could legitimately be either.
T18	Methadone treatment specialist service attendances	1	2	Could legitimately be either.
T19	Methadone treatment specialist service attendances (consumers of authorised GPs)	1	2	Could legitimately be either.
T22	Day treatment programme attendances	1	2	Could legitimately be either.
T23	Day activity programme attendances	1	2	Could legitimately be either.
T24	Work opportunities / employment / vocational	1	2	Could legitimately be either.
T32	Contact with family/whānau, consumer not present	1		Should always be Y.
T35	Did not attend	1	2	T35 with FWI = Y means the planned appointment was to have family/whānau involvement.

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<b>Activity code</b>	<b>Short description</b>	<b>FWI Y</b>	<b>FWI N</b>	<b>Comment</b>
T36	Contact with family/whānau, consumer present	1		Should always be Y. T36 will be replaced with a new code in the future.
T38	Māori-specific interventions only	1	2	Could legitimately be either.
T39	Integrated Māori and clinical interventions	1	2	Could legitimately be either.
T40	Pacific peoples cultural activity	1	2	Could legitimately be either.
T41	Other cultural activity	1	2	Could legitimately be either.
T42	Individual treatment attendances: family/whānau not present		2	Should always be N. T42 will be replaced with a new code in the future.
T43	Community support contacts	1	2	Could legitimately be either.
T44	Advocacy	1	2	Could legitimately be either.
T45	Peer support	1	2	Could legitimately be either.
T46	Triage and/or screening	1	2	Could legitimately be either.
T47	Support for family/whānau	1	2	Could legitimately be either.
T49	Support for Children of Parents with Mental Illness and Addictions (COPMIA)	1	2	Could legitimately be either.
T50	Support for Parents with Mental Illness and Addiction	1	2	Could legitimately be either.
T51	Integrated Pacific and clinical interventions	1	2	Could legitimately be either.
T52	Health coaching contact	1	2	Could legitimately be either.

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# Community-based activity guidelines

## Travel time

Although travel time may be collected locally in some systems, travel time associated with community activity should not be included in the contact duration reported to PRIMHD.

The only exception is where the travel involves a service user and mental health and addiction staff member in a clinically, or service user journey, significant discussion (regarding goals, etc).

## Indirect service user-attributable time

Activity that occurs on behalf of a service user, and that is considered to be indirect service user-attributable time, is not sent to PRIMHD. These activities include:

- psychological reports, court reports and other clinical documentation
- outcomes collections
- file reviews
- internal care coordination – no external agency present
- Multi-Disciplinary Team (MDT) reviews and supervision where no external agency is present.

# Group and day programme guidelines

There are three activities under this heading, which are clarified through the scenarios provided in this guide:

- Group programme session attendances – **T07**
- Specialist day treatment programmes – **T22**
- Day activity programmes – **T23**

## Reporting activity where there is more than one staff member involved

Regardless of the number of staff involved in a contact, group session or day programme with a service user, including family/whānau involvement, the PRIMHD rules for reporting multi-staff contacts are that:

- only one activity record should be submitted to PRIMHD for each service user contact
- the most significant activity in the service user's journey should be the activity reported
- the staff members involved must agree on which activity is the most significant
- the Ministry performs data quality checks to identify where more than one record is submitted to PRIMHD for the same activity.

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# Service user journey

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## Community-based activity

### Assessment and treatment

- Mental health crisis attendances – **T01**
- Triage and/or screening – **T46**
- Individual treatment attendance – family/whānau not present – **T42**
- Contact with family/whānau, consumer present – **T36**
- Completed needs assessment – **T10**

### Specialist services

- Court liaison attendance – **T15**
- Substance abuse detoxification attendances (social) – **T17**
- Methadone treatment specialist service attendance – **T18**
- Methadone treatment specialist service attendance for consumers of authorised GPs – **T19**
- ECT – **T34**

### Psychosocial activity

- Group and day programmes:
  - Group programme sessions attendances – **T07**
  - Day treatment programme attendances – **T22**
  - Day activity programme attendances – **T23**
- Work opportunity, employment, vocational support – **T24**
- Community support contacts – **T43**
- Advocacy – **T44**
- Peer support – **T45**

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## Ongoing community treatment

- Care/liaison coordination contacts – **T08**
- Contact with family:
  - Contact with family/whānau, consumer not present – **T32**
  - Contact with family/whānau, consumer present – **T36**
- Cultural activity:
  - Māori-specific interventions only – **T38**
  - Integrated Māori and clinical interventions – **T39**
  - Pacific peoples cultural activity – **T40**
  - Other cultural-specific activity – **T41**
  - Integrated Pacific and clinical interventions – **T51**
- Support for family/whānau – **T47**
  - Support for children of parents with mental illness and addictions (COPMIA) – **T49**
  - Support for parents with mental illness and addictions – **T50**

## Integrated Primary Mental Health & Addiction (IPMHA) services

- Health coaching contact – **T52**

## Residential activity/occupied bed nights

- Substance abuse withdrawal management/detoxification (medical) – T16
- Substance abuse residential service – T20
- Residential facility with responsive night support – T27
- Residential facility with awake night support – T28
- Community residential – T29
- Planned respite care – T30
- Co-existing disorders residential service – T48
- On leave – **T37**

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## Inpatient activity/occupied bed nights

- Mental health intensive care inpatient or equivalent – T02
- Mental health acute inpatient or equivalent – T03
- Mental health sub-acute inpatient or equivalent – T04
- Crisis respite care – T05
- Psychiatric disability rehabilitation – T21
- Maximum secure inpatient – T11
- Medium secure inpatient – T12
- Minimum secure inpatient – T13
- Forensic step down – T14
- Seclusion – **T33**
- On leave – **T37**

# PRIMHD activity type characteristics and case scenarios

Activity Type (T) codes are presented in numerical order for ease of use. Please review the new family/whānau indicator (FWI) information for each T code and case scenario.

## T01 – Mental health crisis attendances

Keywords	HISO PRIMHD description	Additional comments
<ul style="list-style-type: none"> <li>Service user present or involved</li> <li>Reduce severe distress, mitigate risks and/or prevent harm</li> <li>Unplanned/ same-day contact</li> </ul>	<ul style="list-style-type: none"> <li>Immediate and urgent assistance provided by a health care organisation to a tangata whaiora/ consumer to reduce severe distress, mitigate risks and prevent harm. The contact is usually unplanned or arranged on the same day. Family/ whānau may or may not be present.</li> </ul>	<ul style="list-style-type: none"> <li>The service user must be a direct recipient of the activity (ie, they must be 'present/involved' during the activity).</li> <li>Crisis attendances are not limited to face-to-face contacts but may also include clinically significant activities provided by SMS/text/email.</li> <li>The intent of <b>T01</b> is that the assessing clinician (and not the service user) decides if it is a 'crisis' or not, based on the definition for <b>T01</b>.</li> <li>Teams who primarily provide 'crisis resolution' are not limited to using only <b>T01 – Mental health crisis attendances</b> as an activity code. They should select the most appropriate activity code for the service they deliver, for each individual contact.</li> <li>Non-crisis teams may also record <b>T01</b>, but it is not for use in inpatient or residential team settings.</li> <li><b>T01</b> takes priority over any other simultaneous activities, such as <b>T36</b> (<i>Contact with family/whānau: consumer present</i>) or cultural activities (<b>T38</b>, <b>T39</b>, <b>T40</b> or <b>T41</b>).</li> </ul>

**Family/whānau involvement (FWI):** Can be either Y or N. Is Y if family/whānau are involved or N if family/whānau are not involved.

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Self-referral by telephone	Yes	PH	A person phones the local crisis team's out-of-hours service or 0800 number describing themselves as experiencing an acute mental health crisis. The crisis team visits the person immediately to assess.	T01	Family/whānau may or may not be with the person when the crisis team visits. Report FWI flag as Y or N as appropriate.	The person describes feeling in crisis and this is attributable to mental health issues.
Methadone prescription request	Yes	CM	A visitor from another region walks into a community mental health service and asks for a methadone prescription: 'I just ran out of meds yesterday and haven't had a dose for 24 hours.'	T01	Family/whānau may or may not be accompanying the person. Report FWI flag as Y or N as appropriate.	The contact is unplanned, immediate, urgent and aimed at mitigating risk. Contact would be made with the issuing provider of the script to see if a replacement is possible and referred to a local AOD team.
Self-referral to an NGO mental health and/or addiction service provider	Yes	CM	A service user contacts an NGO provider requiring immediate response in order to urgently stabilise symptoms. The staff member may use de-escalating techniques while waiting for the crisis team to arrive or obtain advice from the crisis team by phone to help stabilise the situation. Police may need to be called to help stabilise the situation prior to the crisis team arriving.	T01	Family/whānau may or may not be involved in the call or de-escalation process. Report FWI flag as Y or N as appropriate.	
Responding to a crisis by telephone	No	PH or SM	A current service user sends a text message to the crisis team mobile phone stating they are about to kill themselves. The crisis team member immediately phones or texts the service user.	T01	FWI is Y if family/whānau answer the phone call and speak with the crisis team, otherwise N.	The phone call/text to the service user is unplanned, immediate, urgent and aimed at mitigating risk.

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Self-referral, family present	Yes	CM	A current service user and his wife walk into a community mental health service because the service user is acutely suicidal and needs urgent and immediate help.	T01	In this scenario, FWI is Y.	The contact is unplanned, immediate, urgent and aimed at mitigating risk. FWI is Y as a family/whānau member is present.
Self-referral – referred on	Yes	CM	A person (not a current service user) self-refers to a mental health and addiction service stating they are in a crisis because they have no money and nowhere to live. After triage/ screening, although they are upset, it is determined that the person is not experiencing an acute mental health crisis nor meets the criteria for entry to the service. They are referred to a local housing provider and the case is closed with no further planned care.	T46	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	The 'crisis', as described by the person, is not attributable to mental health issues. Subjectively the person feels in crisis, but there is no mental health problem/diagnosis, so the person is not eligible to receive mental health and addiction services. A triage has been completed.
Family member telephone contact	No	PH	A family member of a current service user phones the crisis team stating their family member is having a severe panic attack and needs urgent help. The service user is not spoken to by the crisis team. The crisis team agree to do a home visit.	T32	In this scenario, FWI is Y.	Although the situation is a 'crisis', the service user was not the direct recipient of the activity (was not present and did not speak to the crisis team on the phone). After contact with the service user, a T01 could result.

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# T07 – Group programme session attendances

Keywords	HISO PRIMHD description	Additional comments
<p>Treatment focus</p> <p>Session designed for two or more service users</p> <p>Mental health and/or alcohol and other addiction services (excluding residential and inpatient teams)</p> <p>Direct contact with service users in a group setting for:</p> <ul style="list-style-type: none"> <li>• assessment</li> <li>• treatment</li> <li>• care planning</li> <li>• review</li> <li>• discharge</li> </ul>	<p>Assessment, treatment (eg, DBT group, AOD group, talking therapies, relapse prevention), care planning, review and discharge services provided and designed for more than two consumers in a group setting</p>	<p>These sessions often use a cognitive behaviour therapy (CBT) format, or cover care planning – discussing an individual’s plans for change in behaviour, or thinking, and setting goals for what they wish to achieve. This may include looking at skills to improve self-soothing, emotional regulation, distress tolerance and, in relaxation, the use of mindfulness.</p> <p>Treatment examples include:</p> <ul style="list-style-type: none"> <li>• dialectical behaviour therapy (DBT)</li> <li>• cognitive behaviour therapy (CBT)</li> <li>• mindfulness and sensory connection</li> <li>• stress management</li> <li>• distress tolerance</li> <li>• emotional self-regulation and assertiveness.</li> </ul> <p>The focus of programmes may include:</p> <ul style="list-style-type: none"> <li>• addictions</li> <li>• self-harm</li> <li>• suicidal thoughts</li> <li>• mood disorders</li> <li>• traumatic brain injuries</li> <li>• eating disorders.</li> </ul> <p>Regardless of the number of staff involved in a group session with a service user, including family/whānau involvement, only one activity record should be submitted to PRIMHD. The most significant activity in the service user’s journey should be the activity reported. The staff members involved must agree on which activity is the most significant.</p> <p>Attendance of a couple, family or group, only one of whom is a mental health service user, is one attendance.</p>

**Family/whānau involvement (FWI):** Can be either Y or N. Is Y if family/whānau are involved or N if family/whānau are not involved.

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Therapeutic group programme for assessment and/or treatment	Yes	AV, CM, DP, ES, MC, OM, OS, PH or PR	The service user attends a 2-hour group session. It is led by a clinician/support worker who utilises cognitive behavioural therapy (CBT) with the intention of reducing self-harm tendencies and increasing distress tolerance.	<b>T07</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	The group session is intended for two or more service users for the purposes of treatment.  Report individually for each attendee for the duration of the group. Irrespective of the number of clinicians/staff members, only one can record a <b>T07</b> .
Therapeutic group programme for treatment and review	Yes	AV, CM, DP, ES, MC, OM, OS, PH or PR	The service user attends a short outing as part of their group programme. It is led by a support worker with the intention of utilising mindfulness, stress management and distress tolerance to treat a social phobia.	<b>T07</b>	Family/whānau may or may not attend the short outing. Report FWI flag as Y or N as appropriate.	The group session is intended for two or more service users for the purposes of treatment.
Therapeutic group programme for treatment	Yes	AV, CM, DP, ES, MC, OM, OS, PH or PR	The service user attends their regular group session. On the day they are the only person to attend (others are sick or unable to attend). The service user still participates in the scheduled activity.	<b>T07</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	The group session is designed for two or more service users, but if only one service user attends on the day of the group, <b>T07</b> is still to be used to capture the intent of the programme.
Assessment and/or treatment, no family/whānau involvement	Yes	AV, CM, DP, ES, MC, OM, OS, PH or PR	The service user attends a group session with the intention of assessment, treatment, care planning, review or discharge and there are two or more support workers from the organisation present. The intent of the meeting is that they are the only service user and not a group of service users. No family/whānau are involved.	<b>T42</b>	In this scenario, FWI is N.	Even though there is a 'group' of people in the room, there is only one service user (and the session is only intended for that one service user). Only one staff member records <b>T42</b> . FWI is N.

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Assessment and/or treatment with family/whānau involvement	Yes	AV, CM, DP, ES, MC, OM, OS, PH or PR	The service user attends a group session with the intention of assessment, treatment, care planning, review or discharge and there are two or more support workers from the organisation present. The intent of the meeting is that they are the only service user and not a group of service users. Family/whānau are involved.	<b>T36</b>	In this scenario, FWI is Y.	FWI is Y.
Therapeutic family group programme for treatment (service user present)	Yes	AV, CM, DP, ES, MC, OM, OS, PH or PR	The service user and several members of their family and/or significant others (forming a group) attend a behavioural therapy treatment session.	<b>T36</b>	In this scenario, FWI is Y.	Use <b>T36</b> for assessment, treatment, care planning, review and discharge in conjunction with the service user, family/whānau and/or significant others present.
Group support for family/whānau (service user not present)	Yes	AV, CM, DP, ES, MC, OM, OS or PH	Several members of the service user's family and/or significant others (forming a group) attend a group support session to discuss issues related to the service user's care, treatment and management. The service user is not present.	<b>T32</b>	In this scenario, FWI is Y.	Use <b>T32</b> for contact with the family/whānau or significant other of a service user to discuss issues related to the individual's service, access, treatment, care or management when the service user is not present.

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Family support groups involving two or more families of different service users (service user not present)	No	CM	The family/whānau and significant others of many different mental health and addiction service users attend a group programme to help with coping strategies regarding the effects of these issues on the family/whānau members (the service users are not present) (eg, support for families who have children with eating disorders, or some AOD groups supporting families of service users with AOD problems).	<b>T47</b>	In this scenario, FWI is Y.	<p><b>T47</b> activity is used for supportive activity delivered to family/whānau members of people with mental health and addiction issues regarding the effects of these issues on the family/whānau member (eg, provision of information, psycho-education, facilitation of peer-group support and tools to promote resilience, self-esteem and coping strategies).</p> <p>Report against the family/whānau member's National Health Index number (NHI).</p> <p>Note: <b>T32</b> is to be used if the service user's care and treatment is the focus of the support. If this is the case, <b>T32</b> should be reported using the service user's NHI.</p>
NGOs providing day activity or treatment programmes off site that include overnight stays	Yes	CM	The NGO mental health and addiction service provides day activity or a treatment programme off site, including overnight stays (eg, camping sites, marae or other overnight facilities).	<b>T22</b> or <b>T23</b>	Family/whānau may or may not be involved in the day or night activities. Report FWI flag as Y or N as appropriate.	Use <b>T22</b> for a day treatment programme or <b>T23</b> for a day activity programme.

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Therapeutic day programme for treatment	Yes	CM, DM, DP, ES, MC, NP, OS, PC or PR	The service user takes part in a specialised and/or intensive day programme, as an outpatient, with a focus on individual treatment.	<b>T22</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	Use <b>T22</b> for the provision of non-residential assessment, treatment and recovery-oriented rehabilitative programme services to non-inpatient service users requiring specialised programmes and/or more intensive care than can be provided within outpatient services.
Arts/crafts group programme for social skills	Yes	CM, DP, ES, MC, OS or PR	The service user attends a group day programme (intended for two or more service users) to assist in general life skills and socialisation, enabling them to enjoy relationships with others.	<b>T23</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	Use <b>T23</b> when you provide a recovery-oriented service to assist people with mental illness, AOD or eating disorders to develop their life and living skills and enjoy their relationships with others.
Group programme/ workshop for life skills	Yes	CM	The service user takes part in a 4-hour group programme/ workshop learning budgeting skills and discussing ways to keep to grocery budgets etc.	<b>T23</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	Use <b>T23</b> when providing group programmes to assist people to develop their life and living skills. <b>T23</b> programmes are usually more than 3 hours in duration. <b>T07</b> programmes are usually less than 3 hours in duration.
A group of team members meet to discuss a service user's treatment	No	CM	There is consultation among a group of staff within the same team about a service user's treatment without the service user or family/whānau present.	Not reported to PRIMHD	n/a	Neither the service user nor an external agency is present. This activity is not reported to PRIMHD.

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## T08 – Care/liaison coordination contacts

Keywords	HISO PRIMHD description	Additional comments
<ul style="list-style-type: none"> <li>External clinicians</li> <li>NGO agencies</li> <li>School</li> <li>GP</li> <li>ED/medical</li> <li>Justice/police</li> <li>Dietician (external)</li> <li>Specialist services</li> <li>Not internal clinicians</li> <li>Not MDT</li> </ul>	<p>Significant contact between mental health professionals and other agencies/persons relating to the care of a service user, to ensure continuity of service provision. An external agency is present.</p> <p>This code captures activity with a focus on ensuring good coordination amongst a range of different agencies that are involved in someone’s care.</p> <p>Examples are:</p> <ul style="list-style-type: none"> <li>key worker</li> <li>Child, Youth &amp; Family whānau service</li> <li>GP (general practitioner) primary mental health service</li> <li>Strengthening Families meetings.</li> </ul> <p>The code includes:</p> <ul style="list-style-type: none"> <li>contact between a DHB and NGO mental health and addiction service</li> <li>a DHB service providing consult/liaison to a GP</li> <li>specialist services (eg, dual diagnosis or eating disorder)</li> <li>providing services to other DHB/NGO mental health and addiction services (eg, case review).</li> </ul> <p>The code does not include multi-disciplinary team (MDT) meetings within the same team about individual cases.</p>	<p>Do not use for internal team discussions within the same team, service, organisation or agency.</p> <p>The Ministry of Health may approve, on an individual case-by-case basis, the use of <b>T08</b> between distinct teams within the same organisation, where the model of care is such that justifies the use of <b>T08</b> and where the teams are essentially acting as different organisations.</p>
<p><b>Family/whānau involvement (FWI):</b> Is always N.</p>		

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Liaison within the same team	No	WR, SM, PH, OS	There is liaison between clinicians within the same mental health and addiction service team about a service user's assessment or treatment without the service user or family present.	Not reported to PRIMHD	n/a	No external agency is present.
Liaison with other teams within same organisation	No	WR, SM, PH, OS	There is liaison/care coordination with other mental health and addiction service teams (including speciality services), within the same organisation, without the service user or family present.	Not reported to PRIMHD	n/a	No external agency is present.
Liaison with other teams in external organisation	No	WR, SM, PH, OS	There is liaison/care coordination with another mental health and addiction service (MH&AS) team in another DHB/organisation (ie, an external agency), without the service user or family present.	<b>T08</b>	In this scenario, FWI is N.	
Liaison with non-MH&AS clinical services within the same organisation	No	WR, SM, PH, OS	There is liaison/care coordination with non-MH&AS clinical services within the same organisation without the service user or family present.	<b>T08</b>	In this scenario, FWI is N.	
Liaison with external, non-clinical services	No	WR, SM, PH, OS	There is liaison/care coordination with other services (ie, an external agency, such as a GP, school, NGO), without the service user or family present).	<b>T08</b>	In this scenario, FWI is N.	

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Liaison between NGO staff member and DHB clinician	No	DM	After a meeting with a service user and DHB staff member, an NGO clinician has a 15-minute discussion with the DHB staff member about significant points to note/follow up on with regard to the service user's new medication regime. The service user may or may not be present at this discussion.	<b>T08</b>	In this scenario, FWI is N.	
Liaison between NGO and DHB staff by email	No	WR	After a meeting with a service user and NGO staff member, a DHB staff member follows up with an email to the NGO clinician later that same day to clarify some questions (eg, about the medication regime).  This takes them three emails total, back and forth, five minutes each email to write, totalling 15 minutes.	<b>T08</b>	In this scenario, FWI is N.	The contact duration is 15 minutes, and the activity setting is WR Written Correspondence.
Contact between a DHB clinician and an external contracted needs assessor	No	CM	A DHB clinician spends time with a needs assessor from an external NGO working on a needs assessment.	<b>T08</b>	In this scenario, FWI is N.	Both the clinician and the needs assessor enter activity as <b>T08</b> for the duration of their work for the service user.
A service user needs help with transport	Yes	CM	The service user needs help with transport to get to WINZ.  The support worker drives the service user to WINZ, drops them off, then returns in an hour to pick the service user up.	<b>T43</b>	Family/whānau may or may not be present for the drive. Report FWI flag as Y or N as appropriate.	Record the time spent together as <b>T43 – Community Support Contact</b> . <b>T43</b> does not have to be <i>clinically</i> significant as a support worker is not clinical but is providing services to support/facilitate employment in this instance.

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Service user wants support at their WINZ appointment	Yes	CM	The service user is nervous about the prospect of their application to WINZ and wants their support worker to accompany them to the WINZ appointment.  The support worker drives the service user to the meeting and then supports the service user through the 1-hour meeting.	<b>T43</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	Record the meeting as <b>T43 – Community Support Contact</b> .  If the support worker provides advocacy, this would be a <b>T44</b> . If it is moral support, it is reported as <b>T43</b> .
Meeting to discuss medication; family member present and plays significant role	Yes	DM	The service user, mental health staff member and clinician discuss medication review with family members present. The family member is there because they play a significant role in the administration or monitoring of medicine and have vital information/opinions to contribute to the medication review.	<b>T36</b>	In this scenario, FWI is Y.	<b>T36 – Contact with family/whānau, consumer present</b> for assessment, treatment, care planning, review and discharge in conjunction with service user, family/whānau and/or significant other present.
Contact with service user's case manager leading up to the completion of a needs assessment	No	CM	Leading up to the completion of a needs assessment there is contact with the service user's case manager, who works in a different team within the same agency or organisation.	Not reported to PRIMHD	n/a	If the two workers are in the same organisation or agency, this activity is not sent to PRIMHD.

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# T10 – Completed needs assessment

Keywords	HISO PRIMHD description	Additional comments
<ul style="list-style-type: none"> <li>Finalising a needs assessment</li> <li>Contracted needs assessors only</li> <li>One T10 per completed needs assessment or formal reassessment</li> </ul>	<p>Completion of a formal needs assessment by an individual (Needs Assessor) contracted to provide needs assessment and service coordination (NASC).</p>	<ul style="list-style-type: none"> <li>The intent of this activity is to be able to separate out the number of completed needs assessments or formal reassessments.</li> <li>This activity should only be entered by contracted needs assessors. It is only entered once at the end of the process.</li> <li>The needs assessment process is often more than a one-off contact. Any other activity the needs assessor undertakes leading up to the finalisation should be recorded as the appropriate activity code, and then on completion of a formal need's assessment T10 is entered.</li> </ul>

**Family/whānau involvement (FWI):** Is always N.

Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Finalisation of needs assessment or reassessment	Yes	CM	A worker contracted to provide NASC (needs assessment and service coordination) services finalises a needs assessment completion or finalises a formal reassessment. The session takes 30 minutes.	<b>T10</b>	In this scenario, FWI is N.	Contact duration is 30 minutes.
Contact with service user leading up to the completion of a needs assessment	Yes	CM	Leading up to the completion of a needs assessment there had been four half-hour sessions with the service user over several days.	<b>T42</b>	In this scenario, FWI is N.	Four separate sessions with the service user are entered as code <b>T42</b> for 30 minutes each.
Contact with service user's family leading up to the completion of a needs assessment	No	CM	Leading up to the completion of a needs assessment there is an hour-long session with the service user's family without the service user present.	<b>T32</b>	In this scenario, FWI is Y.	The session with the service user's family is coded as <b>T32</b> with a 60-minute contact duration.

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Contact with service user's case manager leading up to the completion of a needs assessment	No	CM	Leading up to the completion of a needs assessment there is contact with the service user's case manager, who works in a different team within the same agency or organisation.	Not reported to PRIMHD	n/a	If the two workers are in the same organisation or agency, this activity is not sent to PRIMHD. Contact with the service user's case manager is coded <b>T08</b> only if the case manager is from an external agency.
Contact between a DHB clinician and a needs assessor in an NGO	No	CM	A DHB clinician spends time with a needs assessor from an external NGO working on a needs assessment.	<b>T08</b>	In this scenario, FWI is N.	Both the clinician and the needs assessor enter the activity as <b>T08</b> for the duration of their work for the service user.
Face-to-face contact with service user to discuss the needs assessment	Yes	ED	A clinician spends time with a service user talking about the needs assessment process and what the service user may need.	<b>T42</b>	In this scenario, FWI is N.	A <b>T42</b> is recorded against the referral to the team where the clinician is working for the duration of the contact time with the service user.

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# T15 – Court liaison attendances

Keywords	HISO PRIMHD description	Additional comments
<ul style="list-style-type: none"> <li>Advice, assessment or referral</li> <li>Services provided directly to court</li> </ul>	Attendance at court by a staff member, which may be part of proceedings to provide advice, assessment and referral in respect of a tangata whaiora/consumer.	<ul style="list-style-type: none"> <li>'Court' includes any session where a judge presides, including Mental Health Act hearings, or a room in a mental health and addiction service.</li> <li>Services which are provided directly to the court.</li> <li>If services are provided to a service user, do not use <b>T15</b>: report the appropriate code.</li> <li>The time taken to prepare or write reports requested by the court cannot be reported to PRIMHD.</li> <li>The service user may or may not be present.</li> </ul>

**Family/whānau involvement (FWI):** Can be either Y or N. Is Y if family/whānau are involved or N if family/whānau are not involved.

Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
<b>Court</b>						
Mental Health Act (or other act) hearing	Yes	CT	A staff member attends court for the purposes of a hearing subject to the relevant act.	<b>T15</b>	Family/whānau may or may not be present along with the service user. Report FWI flag as Y or N as appropriate.	Includes: Mental Health (Compulsory Assessment and Treatment) Act, Criminal Procedure (Mentally Impaired Persons) Act, Drug & Alcohol Addiction Act, Intellectual Disability (Compulsory Care and Rehabilitation) Act
Court assessments	Yes	CT	A staff member attends court to provide initial assessment and advice to the court in respect of a new service user.	<b>T15</b>	Family/whānau may or may not be present along with the service user. Report FWI flag as Y or N as appropriate.	

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Follow-up contacts	Yes	CT	A staff member attends court to provide continued assessment and advice to the court with respect to a current service user. This can include contact for the purpose of an extended assessment.	T15	Family/whānau may or may not be present along with the service user. Report FWI flag as Y or N as appropriate.	
Court liaison	Yes or No	CT, PH	A staff member attends court to provide advice and referral with respect to a service user. This includes activity related to a service user and involving non-DHB parties, discussions with a judge, lawyers or external agencies. The service user may or may not be present.	T15	Family/whānau may or may not be present along with the service user. Report FWI flag as Y or N as appropriate.	
Parole Board – full clinical report	Yes	CT	A staff member attends court to provide advice, assessment and referral with respect to a service user.	T15	Family/whānau may or may not be present along with the service user. Report FWI flag as Y or N as appropriate.	
Attendance at court for probation breach	Yes	CT	A staff member attends court to provide a report on compliance with parole conditions, and/or attendance at an addiction service as part of a probation review.	T15	Family/whānau may or may not be present along with the service user. Report FWI flag as Y or N as appropriate.	
Assessment for court-ordered reports	Yes	CT, PR, CC, IM	Initial or follow-up face-to-face contact with a service user for assessment for the purpose of writing a report ordered by the court. This may include individual assessment, treatment, care planning, review and discharge services.	T42	In this scenario, FWI is N.	<b>T42</b> – <i>Individual treatment attendances, family/whānau not present.</i> Does not include time spent in the writing of the report.
Writing reports for the court	No	WR	Significant clinician time is spent in the creation of a report ordered by the court.	Not reported to PRIMHD	n/a	

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
<b>Prison/community</b>						
New assessments or follow-up attendances	Yes	PR/CM	Individual assessment, treatment, care planning, review and discharge services provided to a service user.	<b>T42</b>	In this scenario, FWI in N.	<b>T15</b> relates only to those services provided directly to the court.
Prison liaison	No	PR/CM	There is liaison with prison staff, and a legal representative or other staff are involved. The service user is not present.	<b>T08</b>	In this scenario, FWI is N.	<b>T08</b> – <i>Care/liaison coordination contacts</i>
Consult/liaison contacts – service user not present	No	PR/CM	There is significant contact and discussions with other teams within the same service (eg, community, AOD service) related to a service user where the service user is not present.	Not reported to PRIMHD	n/a	
Consult/liaison contacts – service user not present	No	CM	There is significant contact between mental health professionals and other external agencies/persons relating to the care of a service user. The service user is not present.	<b>T08</b>	In this scenario, FWI is N.	
Risk assessments	Yes	CM	A staff member has contact with a service user for the purpose of a risk assessment. Neither family/whānau nor significant other are present.	<b>T42</b>	In this scenario, FWI is N.	<b>T42</b> – <i>Individual assessment, treatment, care planning, review and discharge services.</i>
Risk assessments – family/whānau present	Yes	CM	A staff member has contact with a service user for the purpose of a risk assessment. Family/whānau are present.	<b>T36</b>	In this scenario, FWI is Y.	<b>T36</b> – <i>Contact with family/whānau, consumer present for assessment, treatment, care planning, review and discharge in conjunction with service user, family/whānau and/or significant other present.</i>

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Regional consult	No	CM	There is significant contact between mental health professionals and other agencies/people relating to the care of a service user. This is provided by a regional service for a local service user.	T08	In this scenario, FWI is N.	This will be used for contact regarding a service user undergoing treatment in a regional service where the home organisation is not involved (eg, consult with a service user's lawyer). Other contacts will be captured in the home organisation's system.

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# T17 – Substance abuse detoxification attendances (social)

Keywords	HISO PRIMHD description	Additional comments
<ul style="list-style-type: none"> <li>Managed withdrawal</li> <li>Detoxification</li> <li>Community based</li> <li>Direct contact</li> </ul>	Detoxification services provided by or on behalf of contracted alcohol and drug providers of facilities in a community setting.	<ul style="list-style-type: none"> <li>This code is intended for use with services users who are undergoing withdrawal management from alcohol or drugs and are not staying in an overnight facility or receiving 24-hour medical care.</li> <li>It includes direct contact with service users who are:               <ul style="list-style-type: none"> <li>attending daily for withdrawal monitoring and management</li> <li>undertaking withdrawal management in a home setting.</li> </ul> </li> <li>It covers community-based alcohol and other drug (AOD) teams and co-existing problems (CEP) teams only.</li> </ul>

**Family/whānau involvement (FWI):** Can be either Y or N. Is Y if family/whānau are involved or N if family/whānau are not involved.

Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Service user attending for withdrawal management or monitoring	Yes	CM	The service user attends a community service, where they are monitored/supported and have their withdrawal managed by mental health and addiction staff.	T17	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	No overnight stays.
Service user is visited in their home	Yes	DM	The service user is visited by mental health and addiction staff in their own home for managed withdrawal and support.	T17	Family/whānau may or may not be present and involved. Report FWI flag as Y or N as appropriate.	

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Service user attends for withdrawal management or monitoring at kaupapa Māori provider or marae-based service	Yes	MC	The service user attends a marae-based service, where they are monitored/supported and have their withdrawal managed by mental health and addiction staff.	<b>T17</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	No overnight stays.
A community mental health and an addiction service staff member both visit a service user in their home	Yes	DM	A community mental health team and NGO addiction service both visit a service user in their home for the purposes of withdrawal management monitoring.	<b>T17</b> and ( <b>T42</b> or <b>T36</b> )	Family/whānau may or may not be present and involved. Report FWI flag as Y (with <b>T36</b> ) or N (with <b>T42</b> ) as appropriate.	The addiction service staff member records <b>T17</b> . The community mental health staff member records <b>T42</b> with FWI N if family/whānau not involved, or <b>T36</b> with FWI Y if family/whānau are involved. <b>T17</b> can only be used by AOD or CEP teams.
Agreed methadone reduction	Yes	CM	A long-term methadone user sees a staff member and agrees to a 2 ml reduction in methadone. The service user does not wish to withdraw or reduce any further at this stage.	<b>T18</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	If there is no intention to withdraw, use <b>T18</b> – <i>Methadone treatment specialist attendance</i> .

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# T18 – Methadone treatment specialist service attendances

Keywords	HISO PRIMHD description	Additional comments
<ul style="list-style-type: none"> <li>Service users of OST</li> <li>Direct contact</li> <li>Community based</li> </ul>	Treatment or counselling services provided by staff from an alcohol and drug treatment provider or facility for people receiving Opioid substitution (eg, Methadone or Suboxone [Buprenorphine]) under specialist A&D service case management (excludes tāngata whaiora/consumers of authorised GPs).	<ul style="list-style-type: none"> <li>The intent of <b>T18</b> is to record all activity (not simply prescribing activity) related to a service user in an AOD opioid substitution treatment (OST) service.</li> <li>People who are receiving services for OST will have received, or will be receiving, drugs prescribed under the Misuse of Drugs Act 1975 under special authority.</li> <li>This code is not for use in inpatient or residential team settings.</li> <li>This relates to community-based alcohol and other drug (AOD) teams and co-existing problems (CEP) teams only.</li> </ul>

**Family/whānau involvement (FWI):** Can be either Y or N. Is Y if family/whānau are involved or N if family/whānau are not involved.

Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Attendance at service	Yes	CM	The service user attends a 3-monthly care plan review.	<b>T18</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	Must not be GP prescribed.
Group attendance, OST service	Yes	CM	The service user attends a mindfulness group with other OST service users.	<b>T18</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	Related to treatment within an OST setting.
Text conversations between OST service staff and service users relating to their treatment	Yes	SM	The service user's treatment plan includes weekly text conversations with their OST clinician relating to their treatment, goals, etc. Family/whānau are not involved.	<b>T18</b>	In this scenario, FWI is N.	Texts directly with the service user relating to OST treatment.

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Group attendance, non-OST service	Yes	CM	The service user attends a 1-week impaired driving course run by an NGO service provider (not an OST service) with service users who are not OST.	<b>T07</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	
Methadone prescription request	Yes	CM	A visitor from another region walks into a community mental health service and asks for a methadone prescription: 'I just ran out of meds yesterday and haven't had a dose for 24 hours'.	<b>T01</b>	Family/whānau may or may not accompany the service user. Report FWI flag as Y or N as appropriate.	Use <b>T01</b> – <i>Crisis attendance</i> because the contact is unplanned, immediate, urgent and aimed at mitigating risk.  Contact would be made with the issuing provider of the script to see if a replacement is possible and referred to a local AOD team.

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# T19 – Methadone treatment specialist service attendances (consumers of authorised GPs)

Keywords	HISO PRIMHD description	Additional comments
<ul style="list-style-type: none"> <li>Service user present or involved</li> <li>GP prescribed</li> <li>AOD or CEP teams</li> </ul>	Treatment or counselling services provided by staff from an alcohol and drug treatment provider or facility for people receiving opioid substitution (eg, Methadone or Suboxone [Buprenorphine]) prescribed by GPs under specialist service authority while receiving case management from specialist A&D services.	<ul style="list-style-type: none"> <li>Contact with service users who are receiving an OST prescription from a GP under specialist service authority.</li> <li>Contact must be between the service user and addiction service staff: not for contact with GP only.</li> <li>For use by community-based alcohol and other drug (AOD) teams and co-existing problems (CEP) teams only.</li> <li>Service user must have an open referral with the AOD or CEP team.</li> <li>Not for use in inpatient or residential team settings.</li> </ul>

**Family/whānau involvement (FWI):** Can be either Y or N. Is Y if family/whānau are involved or N if family/whānau are not involved.

Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Treatment or counselling provided by addiction service staff	Yes	CM	The service user attends the addiction service for counselling after seeing the GP.	T19	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	
Addiction service staff member attends GP appointment	Yes	CM	An addictions service staff member 'sits in' on a service user GP appointment, contributing to and discussing treatment.	T19	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	
Treatment or counselling provided at home	Yes	DM	A service user who is receiving an OST prescription from a GP under specialist authority is visited at home by an addictions service staff member for a counselling session.	T19	Family/whānau may or may not be present and involved. Report FWI flag as Y or N as appropriate.	

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## T22 – Day treatment programme attendances

Keywords	HISO PRIMHD description	Additional comments
<ul style="list-style-type: none"> <li>Day treatment programme</li> <li>Specialised and/or intensive care</li> <li>Excludes residential and inpatient teams</li> </ul>	<p>Provision of non-residential assessment, treatment and recovery-oriented rehabilitative programme services to non-inpatient tāngata whaiora/consumers requiring specialised programmes and/or more intensive care than can be provided within outpatient services.</p>	<p>This code is intended to be used for day treatment programmes where individualised specialised care is the focus. Treatment examples include:</p> <ul style="list-style-type: none"> <li>behaviour therapies, such as:               <ul style="list-style-type: none"> <li>– dialectical behavioural therapy (DBT)</li> <li>– cognitive behaviour therapy (CBT)</li> </ul> </li> <li>solution-focused therapy</li> <li>distress tolerance</li> <li>emotional self-regulation and stress management</li> <li>mindfulness and sensory connection exercises.</li> </ul> <p>The focus of programmes may include:</p> <ul style="list-style-type: none"> <li>addictions</li> <li>self-harm</li> <li>suicidal thoughts</li> <li>borderline personality disorders</li> <li>mood disorders</li> <li>traumatic brain injuries</li> <li>eating disorders.</li> </ul> <p>Count each service user attendance at the programme only once in a day. Attendance of a couple, family, or group, only one of whom is a mental health service user, is one attendance.</p> <p>Where programmes involve overnight stays, providers must report an activity end time of midnight. Bed nights cannot be reported for T22.</p> <p>Each day treatment programme day needs to be recorded separately.</p>

**Family/whānau involvement (FWI):** Can be either Y or N. Is Y if family/whānau are involved or N if family/whānau are not involved.

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
NGOs providing day treatment programme off site that include overnight stays	Yes	CM	A service user attends an NGO mental health and addiction service that provides recovery-oriented rehabilitative day treatment programme services off site, including overnight stays.	<b>T22</b>	Family/whānau may or may not be involved for the day or night programme. Report FWI flag as Y or N as appropriate.	Providers must report <b>T22</b> with an end time of midnight if the activity involves overnight stays. Bed nights should not be reported for <b>T22</b> activity.
Therapeutic day programme for treatment	Yes	CM	A service user takes part in a specialised and/or intensive day programme, as an outpatient, with a focus on individual treatment.	<b>T22</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	
Therapeutic group programme for treatment and review	Yes	AV, CM, DP, ES, MC, OM, OS, PH or PR	A service user attends a short outing as part of their group session (intended for two or more service users). It is led by a support worker with the intention of utilising mindfulness and distress tolerance to treat a social phobia.	<b>T07</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	This is coded <b>T07</b> because there is a treatment and review focus to the group session. It is not <b>T22</b> because the session is not indicative of an intensive day programme.
Therapeutic group programme for assessment and/or treatment	Yes	AV, CM, DP, ES, MC, OM, OS, PH or PR	A service user attends a 2-hour group programme. It is led by a clinician/support worker who utilises CBT with the intention of reducing self-harm tendencies.	<b>T07</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	It is not <b>T22</b> because the session is not indicative of an intensive day treatment programme.

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Two-day Māori activity programme	Yes	MC	A service user participates in a 2-day Māori activity programme using cultural practices in a Māori setting.	<b>T38</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	<b>T38 – Māori specific interventions</b> (non-clinical) should be reported with an end time of midnight if an overnight stay is involved. Each day needs to be recorded separately, even if the service provided involves a 3-day hui.

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## T23 – Day activity programme attendances

Keywords	HISO PRIMHD description	Additional comments
<ul style="list-style-type: none"> <li>Recovery-oriented</li> <li>Recreational, social, life skills</li> <li>Programmes designed for two or more service users</li> <li>Excludes residential and inpatient teams</li> <li>Direct contact with service users</li> </ul>	<p>Provide recovery-oriented service to assist people with mental illness, AOD or eating disorders to develop their life and living skills and enjoy their relationship with others.</p>	<ul style="list-style-type: none"> <li>The focus of programmes is on recreational and social therapeutic group activities. These may include: <ul style="list-style-type: none"> <li>art, craft or cooking programmes</li> <li>recovery/social rehabilitation programmes</li> <li>social outings (eg, movies) or day trips</li> <li>health and fitness (eg, walking)</li> <li>general life skills.</li> </ul> </li> <li>Count each service user attendance at the programme only once in a day. Attendance of a couple, family or group, only one of whom is a mental health service user, is one attendance.</li> <li>Where programmes involve overnight stays, providers must report an activity end time of midnight. Bed nights cannot be reported for <b>T23</b>.</li> <li>Each day activity programme day needs to be recorded separately.</li> </ul>

**Family/whānau involvement (FWI):** Can be either Y or N. Is Y if family/whānau are involved or N if family/whānau are not involved.

Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Group programme/workshop for budgeting and life skills	Yes	CM	The service user takes part in a 4-hour group programme/workshop, learning budgeting skills with an invited budget advice service and discussing ways to keep to grocery budgets, etc.	<b>T23</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	Life skills day programmes should be reported as <b>T23</b> .
Arts/crafts group programme	Yes	CM, DP, MC, OS or PR	The service user attends a group programme with four others to assist in general life skills and socialisation, enabling them to enjoy relationships with others.	<b>T23</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	The group programme is designed for two or more service users. If only one service user attends on the day of the group, <b>T23</b> is still used to capture the programme's intent.

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Cooking lesson	Yes	CM, DP, MC or OS	The service user attends a group programme to learn everyday cooking skills.	<b>T23</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	
Picnic at the park	Yes	CM	The support worker arranges a group outing to the local park for a picnic to celebrate a group member's birthday.	<b>T23</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	
NGOs providing day activity programme off site that include overnight stays	Yes	CM	An NGO mental health and addiction service provides a day activity programme off site, including overnight stays (eg, camping sites, marae or other overnight facilities).	<b>T23</b>	Family/whānau may or may not be involved for the day or night activity. Report FWI flag as Y or N as appropriate.	Providers must report this service with an end time of midnight if the activity involves overnight stays. Bed nights should not be reported for this activity.
Health and fitness (family/whānau present)	Yes	CM	A service user has a goal of being able to walk 5 km by a certain date. The support worker meets the service user at the local park to complete an action step where they walk for 1 km. The service user is accompanied by a family member.	<b>T43</b>	In this scenario, FWI is Y.	There is no group involvement so this is not a <b>T23</b> activity. If a family member accompanies them for the walk, it is still <b>T43</b> . <b>T36</b> would only be used if assessment, treatment, care planning, review or discharge were taking place during the session.
Therapeutic day programme for treatment	Yes	CM, DM, DP, ES, MC, NP, OS, PC or PR	The service user takes part in a specialised and/or intensive day programme, as an outpatient, with a focus on individual treatment.	<b>T22</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Therapeutic group programme for treatment and review	Yes	AV, CM, DP, ES, MC, OM, OS, PH or PR	The service user attends a short outing as part of their group session (intended for two or more service users). It is led by a support worker with the intention of utilising mindfulness and distress tolerance to treat a social phobia.	<b>T07</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	This is <b>T07</b> because there is a treatment and review focus to the group session.
Therapeutic group programme for assessment and/or treatment	Yes	CM	The service user attends a 2-hour group programme. It is led by a clinician/support worker who utilises CBT with the intention of reducing self-harm tendencies.	<b>T07</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	
Two-day Māori-led or kaupapa Māori activity programme	Yes	MC	A service user participates in a 2-day Māori-led or kaupapa Māori activity programme using cultural practices in a Māori setting.	<b>T38</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	<b>T38 – Māori specific interventions</b> (non-clinical) should be reported with an end time of midnight if an overnight stay is involved.  Each day needs to be recorded separately, even if the service provided involves a 3-day hui.

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## T24 – Work opportunities / employment / vocational

Keywords	HISO PRIMHD description	Additional comments
<ul style="list-style-type: none"> <li>• Employment and education support</li> <li>• Vocational goals</li> <li>• Health-funded activity</li> </ul>	Employment and education support provided, in a community setting, to tāngata whaiora/service users assisting them to gain employment. Provide ongoing support to tāngata whaiora/service users to maintain their vocational goals. Supporting the strengths of the tāngata whaiora/service users and their family/whānau. This activity is funded by health not other government agency.	<b>T43</b> – <i>Community support contact</i> will be used when supporting a service user with employment issues that differ from the above description.

**Family/whānau involvement (FWI):** Can be either Y or N. Is Y if family/whānau are involved or N if family/whānau are not involved.

Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Supporting a service user to find part-time employment through assistance with writing a CV	Yes	CM	<p>An appointment is scheduled to meet with a service user at the local public library from 1 pm to 2.30 pm with the objective of supporting the service user to write a CV in line with the goal of finding part-time employment.</p> <p>The appointment goes as planned, with the service user being supported to create a CV.</p>	<b>T24</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	90 minutes contact duration.

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Supporting a service user to find part-time employment through assistance with writing a CV	Yes	CM	On arrival at a scheduled 90-minute appointment the service user discloses that they have been struggling to afford to buy food this week, are hungry and unsure of what they are going to eat later that night. Instead of working on the CV, the staff member spends 15 minutes securing a food parcel for the service user.  The appointment then continues as planned, with the service user being supported to create a CV. The appointment was also attended by the service user's husband for the final 30 minutes.	<b>T43</b> and <b>T24</b>	In this scenario, FWI is N for the <b>T43</b> and Y for the <b>T24</b> .	<b>T43</b> – <i>Community support contact</i> , contact duration 15 minutes.  <b>T24</b> – <i>Work opportunities/employment/vocational</i> , contact duration 1 hour and 15 minutes. The staff member supports the service user to create a CV. The family member was present for the <b>T24</b> so FWI is Y.
Service user attends a group-delivered service	Yes	CM	The service user attends a group-delivered service run by mental health and addiction service staff specifically involved in assisting with employment/ vocational development.	<b>T24</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	This is not <b>T07</b> or <b>T22</b> , as these are treatment group sessions/ programmes; and not <b>T23</b> as this is a day activity programme for developing living skills.
NGO provides work experience through a voluntary position	Yes	CM	An NGO provides a service user with a voluntary position within their organisation to help them gain some work experience (eg, office administration, answering phones, filing).	<b>T24</b>	In this scenario, FWI is N.	If an NGO provides a service user with a voluntary position, this is classified as a <b>T24</b> .  A start and end time and date for each defined period of work experience must be reported with the <b>T24</b> activity.

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## T32 – Contact with family/whānau, consumer not present

Keywords	HISO PRIMHD description	Additional comments
<ul style="list-style-type: none"> <li>Family/whānau or significant other</li> <li>Service user not present</li> </ul>	Contact with the family/whānau or significant other of a tangata whaiora/ consumer discussing issues related to the individual's service access, treatment, care or management.	<ul style="list-style-type: none"> <li>This is usually scheduled in advance.</li> <li>It includes:               <ul style="list-style-type: none"> <li>formal activities such as support plan reviews and goal setting; if the service user is present, record <b>T36 – Contact with family/whānau, service user present</b></li> <li>home visits and telephone contacts that identify service user needs and/or support requirements.</li> </ul> </li> <li>Youth service: support is provided on a one-on-one basis depending on the staff relationship with the family and the young person's needs. Consent must be signed. Informal/irregular meetings about the young person's progress are held.</li> <li>Activity is recorded under the identified service user's NHI number.</li> </ul>

**Family/whānau involvement (FWI):** Is always Y.

Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Community support – youth service	No	CM	An informal meeting occurs when parents are picking up a young person about the young person's progress, and advice is given for weekend activities. The young person is not present.	T32	In this scenario, FWI is Y.	Consent must be signed.
Home visit to discuss service user issues and support with the family	No	DM	The staff member visits the service user's home to chat with the family about daily events, issues they are facing, what support they may need and to set goals. The service user is not present.	T32	In this scenario, FWI is Y.	

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Child & Youth service contact with child and family at separate times within one appointment slot	No	CM	<p>During a single booked 90-minute CAPA Choice outpatient clinic appointment slot:</p> <ul style="list-style-type: none"> <li>the Child &amp; Youth clinician meets with parents and the child (the service user) together for 30 minutes from 9 am to 9.30 am</li> <li>then the Child &amp; Youth clinician meets with the parents on their own for 30 minutes from 9.30 am to 10 am</li> <li>the Child &amp; Youth clinician then meets with the child on his/her own for 30 minutes from 10 am to 10.30 am.</li> </ul>	<b>T36, T32, T42</b>	In this scenario, FWI is Y for <b>T36</b> and <b>T32</b> , and N for <b>T42</b> .	<p>Three separate activities should be reported:</p> <ul style="list-style-type: none"> <li>parents/carers and child report <b>T36 – Contact with family/whānau, service user present</b> with a contact duration of 30 minutes. FWI is Y.</li> <li>parents/carers only contact – report <b>T32</b> with a contact duration of 30 minutes. FWI is Y.</li> <li>child-only contact report <b>T42 – Individual treatment attendances: family/whānau not present</b> with a contact duration of 30 minutes. FWI is N.</li> </ul>
Telephone contact with family/whānau to follow up after an appointment	No	PH	The staff member telephones the family to check how the service user is doing after a recent appointment and to remind them about the service user's next appointment. The telephone call lasts for 30 minutes.	<b>T32</b>	In this scenario, FWI is Y.	Note that if a telephone call is just to remind the family about an appointment and does not last more than 5 minutes, it should not be reported to PRIMHD.
Telephone family to remind about appointment	No	PH	The staff member telephones the family to remind them about the service user's next appointment. The service user's care or needs are not discussed and the call lasts less than 5 minutes.	Not reported to PRIMHD	n/a	

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## T33 – Seclusion

Keywords	HISO PRIMHD description	Additional comments
<p>Valid for inpatient or mixed settings in the following team types:</p> <ul style="list-style-type: none"> <li>• Inpatient</li> <li>• AOD</li> <li>• Forensic Inpatient</li> <li>• Intellectual Disability Dual Diagnosis</li> <li>• Speciality team</li> <li>• Eating Disorders</li> <li>• Maternal Mental Health</li> </ul>	<p>The placing of a tangata whaiora/consumer, at any time and for any duration, alone in a room or area from which they cannot freely exit.</p>	<p>A period of seclusion will commence when the service user enters the conditions of seclusion. The seclusion period is deemed to have ended when the service user leaves the conditions of seclusion without the expectation of return, and in any case, if the service user has been out of seclusion for more than 1 hour. The purpose of this is to allow a short period of evaluation out of seclusion.</p> <p><b>Recording the use of seclusion<sup>1</sup></b></p> <p>(Adapted from Seclusion under the Mental Health (Compulsory Assessment and Treatment) Act 1992 Section 9, p. 4)</p> <ul style="list-style-type: none"> <li>• A specific form must be used to record the use of seclusion and must be supported by clinical notes. In addition, each service shall develop a method of recording the 10-minute and 2-hourly observations.</li> <li>• Recording should start as soon as seclusion has been initiated.</li> <li>• One copy of the seclusion record should be retained on the service user notes and one retained in a central seclusion register.</li> </ul> <p>The main purpose of the information is to provide a basis for internal quality assurance as well as review and audit.</p>
<p><b>Family/whānau involvement (FWI):</b> Is always N.</p>		

<sup>1</sup> Adapted from section 9, p. 4, Ministry of Health. 2010. *Seclusion under the Mental Health (Compulsory Assessment and Treatment) Act 1992*. Wellington: Ministry of Health.

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Service user has 8-hour period of seclusion with regular breaks to attempt reintegration to wider patient environment	Yes	IP	The service user is deemed to require seclusion for a period of 8 hours. The service user enters seclusion at 9 am but leaves at regular intervals to try reintegration to the wider patient area until seclusion is ended at 5 pm.	<b>T33</b>	In this scenario, FWI is N.	The intent of seclusion is for the service user to be trialed in the wider patient area. The service user was not out of seclusion for more than one hour.  One <b>T33</b> activity should be reported with start time of 0900 hrs and end time of 1700 hrs.
Service user has 8-hour period of seclusion with 90-minute break.	Yes	IP	The service user is deemed to require a period of seclusion for 8 hours. The service user enters seclusion at 11 am but leaves at 1.30 pm for 90 minutes to attend an emergency medical appointment. The service user returns after the appointment and completes another three hours before seclusion ends at 6 pm.	<b>T33</b>	In this scenario, FWI is N.	Even though the intent was that there would be a return to seclusion, the service user has been out of seclusion for more than one hour.  Two seclusion records should be reported: <ul style="list-style-type: none"> <li>• one <b>T33</b> for the 11.00 am to 1.30 pm period, and</li> <li>• a second <b>T33</b> for the 3.00 to 6.00 pm period.</li> </ul>
Seclusion occurs over a 2-hour period or over midnight	Yes	IP	The service user enters seclusion at 10 pm and leaves at 7 am the following day.	<b>T33</b>	In this scenario, FWI is N.	If the seclusion occurs over a 24-hour period or over midnight, the PRIMHD business rule is that it is a single seclusion episode, so one episode is recorded that crosses over midnight.

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Recurrent seclusion	Yes	IP	The seclusion period ends, but after evaluation a second period of seclusion is deemed necessary.	<b>T33</b>	In this scenario, FWI is N.	If it is necessary to replace an individual back in seclusion after a short period of evaluation or attempted reintegration, a new seclusion event must be commenced.
Service user has a 6-hour period of seclusion with a 30-minute trial in the wider patient area at the conclusion	Yes	IP	Seclusion starts at 9.00 am, the person is trialled in the wider patient area from 2.00 pm until 2.30 pm. At 2.30 pm it is deemed there is no need to return to seclusion.	<b>T33</b>	In this scenario, FWI is N.	The seclusion period is deemed to have ended when the patient leaves the conditions of seclusion without the expectation of return, and in any case, if the patient has been out of seclusion for more than one hour. One <b>T33</b> activity should be reported with start time of 0900 and end time of 1430. Between 1400 and 1430 there is the expectation the person may return to seclusion so the end time should be reported at 1430. See more <a href="#">here</a> .

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## T34 – ECT

Keywords	HISO PRIMHD description	Additional comments
<ul style="list-style-type: none"> <li>Inpatient activity setting</li> <li>Record under the prescribing clinician</li> <li>Requires inpatient admission to theatre</li> </ul>	Electro Convulsive Therapy	<ul style="list-style-type: none"> <li>The service user's prescribing team type may be community or inpatient (ie, where the ECT was prescribed), but the activity setting for ECT is always inpatient (IP).</li> <li>Community service users are usually given a set time for their ECT treatment and require 2 hours' monitoring after the procedure before returning to the community. They need to be in the company of their family/whānau, significant other or another person for the following day.</li> <li>Inpatient service users return to the ward after leaving the recovery area for ongoing monitoring.</li> <li>Each ECT session should be recorded separately (eg, 12 sessions are recorded as 12 ECT activities).</li> </ul>

**Family/whānau involvement:** Is always N.

Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
A service user is prescribed ECT	Yes	IP	A service user is prescribed ECT. The service user is taken into theatre with the ECT nurse, the ECT prescribing doctor and the anaesthetist. Following treatment, the service user is moved into the recovery ward. Once the service user is ready to leave, they return home (community service user) or back into the mental health inpatient unit (inpatient service user).	<b>T34</b>	In this scenario, FWI is N.	The prescribing clinician records <b>T34 – ECT</b> .
Community care worker brings service user to ward	Yes	IP or CM	The service user's community care worker brings the service user to the ward prior to ECT.	<b>T43</b>	In this scenario, FWI is N.	<b>T43 – Community support contact</b>

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Community care worker picks up service user after ECT	Yes	CM	The service user's community care worker comes to pick the service user up to take them home, with the service user's family, after ECT.	<b>T43</b>	In this scenario, FWI is Y.	Report <b>T43</b> . If the family members are actively involved in discussions about the service user's wellbeing, report as <b>T36</b> .

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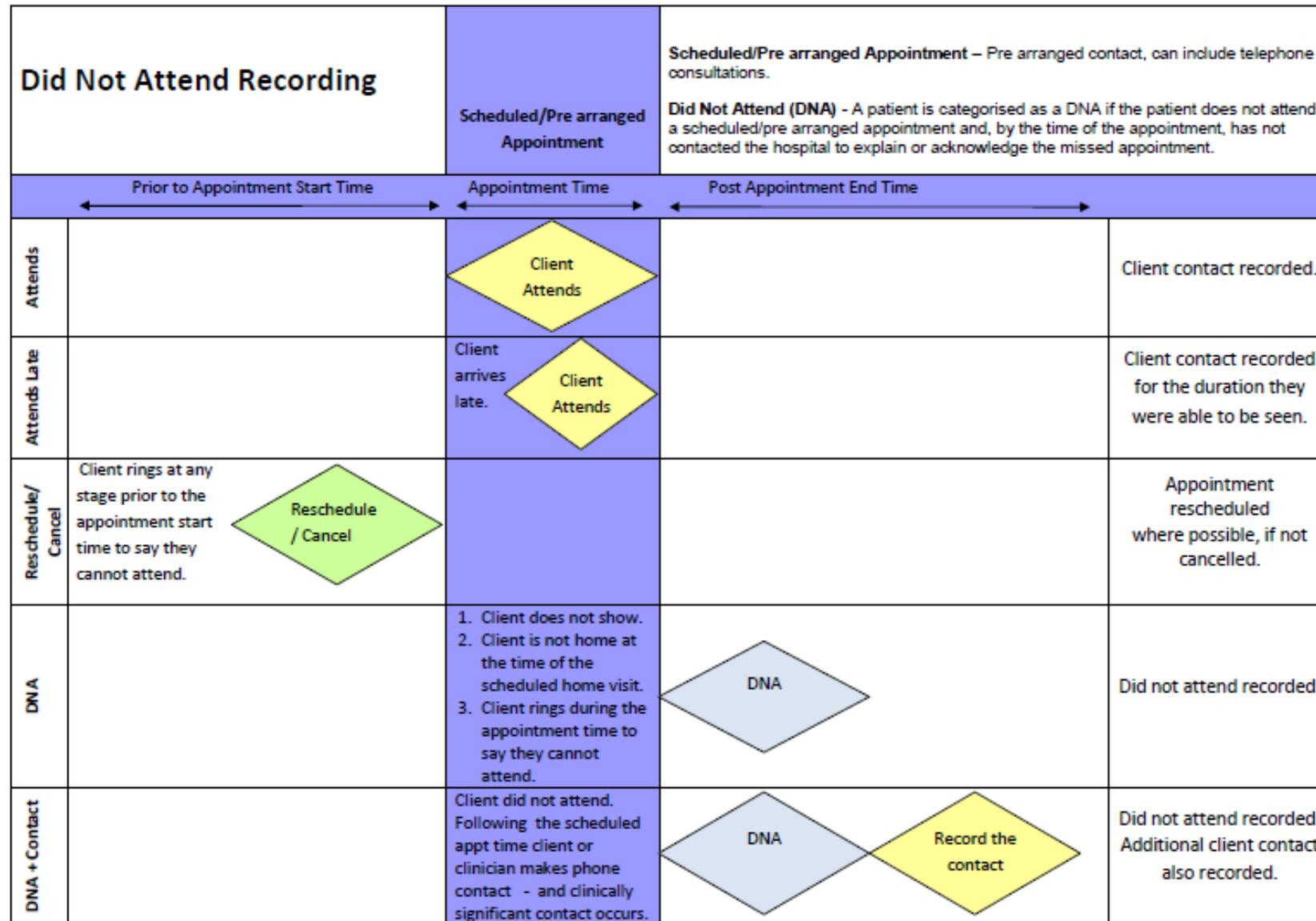
## T35 – Did not attend

Keywords	HISO PRIMHD description	Additional comments	Do not record a DNA	Record DNA
No notice or reschedule prior to appointment start Use flow chart	The tangata whaiora/ consumer did not participate in a pre-arranged meeting, appointment, programme or activity.	<p>The purpose of recording DNA (did not attend) in PRIMHD is to monitor the quality of engagement with the service user: it is not driven by productivity requirements. It forms part of the record of significant events in a service user's journey.</p> <p>The number of DNAs reported to PRIMHD is an important national indicator. The exact time associated with DNAs may be more significant at the local/service user level.</p> <p>Local initiatives and protocols should be implemented to help reduce overall DNA rates and cancellations for family-only appointments, specifically in Child &amp; Adolescent Mental Health Services (CAMHS) and cultural services.</p> <p>Use the <b>Did Not Attend Recording</b> flow chart.</p> <p>Do not record travel time associated with DNA for PRIMHD: report or record travel time locally only, if required.</p> <p>Report the scheduled appointment duration when reporting T35 activity.</p>	<p>If a service user calls at any stage prior to the appointment start time to say they cannot attend – establish local protocols to reschedule or cancel (not DNA) and ensure visibility of the process.</p> <p>For a family-only meeting when the family do not turn up: cancel or reschedule.</p> <p>If a service user turns up late to a scheduled appointment but within the appointment time.</p> <p>If an appointment is cancelled because the staff member cannot attend: cancel or reschedule.</p> <p>If a service user telephones within the appointment time and has a clinically significant conversation: record the telephone activity as T42, or as appropriate.</p>	<p>If no notice was given, or no request for reschedule was received, prior to the appointment start time.</p> <p>If the service user calls <i>after</i> the booked appointment start time and they cannot or will not be attending.</p> <p>If there is no prior contact by telephone and the service user either comes in after the scheduled appointment end time or completes a consult over the telephone after the appointment end time: record DNA and also the actual activity that took place.</p> <p>If the service user does not attend and cannot be contacted by telephone and has made no contact prior to the appointment time.</p>

**Family/whānau involvement (FWI):** Is either Y or N. Is Y if family/whānau planned to be involved in the appointment. Is N if family/whānau did not plan to be involved in the appointment.

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Figure 1: Did Not Attend Recording flow chart



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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Service user does not attend or make contact	Yes	CM	The service user has an appointment from 2 to 3 pm but does not attend or make any contact with the staff member before or after.	<b>T35</b>	Family/whānau may or may not have planned to be involved at the appointment. Report FWI flag as Y or N as appropriate. If unknown, report FWI as N.	
Service user telephones to say they cannot attend	Yes	CM	The service user has an appointment for 12 to 1 pm but is caught in traffic and calls at 12.30 pm to say they won't be able to attend.	<b>T35</b>	Family/whānau may or may not have also been on their way to be involved in the appointment. Report FWI flag as Y or N as appropriate.	
Service user telephones to say they will be late for a booked appointment but will be attending later	Yes	CM	The service user has an appointment booked for 1 to 2 pm but they are caught in traffic and don't arrive till 2.30 pm. The service user then meets with the staff member.	<b>T35</b> and subsequent activity	Family/whānau may or may not be involved in the later appointment. Report FWI flag as Y or N as appropriate.	Record missed appointment as a <b>T35</b> and record later appointment as required.
Service user does not attend but clinician sees other service users instead	Yes	CM	The service user does not turn up for an appointment booked from 9 am to 12 pm. The clinician sees another service user instead for this time slot.	<b>T35</b> plus subsequent activity	Family/whānau may or may not have planned to be involved at the appointment. Report FWI flag as Y or N as appropriate.	<b>T35</b> is recorded for the service user who did not attend for the booked appointment. Activity is reported for the service user who was seen instead. Locally systems may collect travel time but this is <i>not</i> sent to PRIMHD.

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Service user does not answer the phone for a scheduled phone appointment with a clinician	Yes	PH	The service user had a scheduled phone appointment at 3pm but does not answer the phone.	<b>T35</b>	In this scenario, FWI is N.	
Service user arrives late to an appointment	Yes	CM	The service user has an appointment booked from 12 to 1 pm and arrives late at 12.35 pm and only spends 25 minutes with the clinician.	<b>T42, T46 or T36</b>	Family/whānau may or may not be involved in the later appointment. Report FWI flag as Y or N as appropriate.	Because the service user has turned up during the appointment time it is not a DNA. If family/whānau are involved report <b>T36</b> with FWI Y.
Service user calls prior to appointment time on day of appointment to reschedule	Yes	CM	The service user has an appointment at 2.30 pm but calls at 2.20 pm to reschedule.	Reschedule not <b>T35</b>	n/a	Do not record a DNA if the service user cancels/reschedules at any time prior to the appointment start time.
Service user arrives 5 minutes before the scheduled appointment is due to end	Yes	CM	The service user has an appointment from 12 to 1 pm and arrives at 12.55 pm and has a clinically significant discussion with the clinician.	<b>T42 or T36</b>	Family/whānau may or may not be involved in the later appointment. Report FWI flag as Y or N as appropriate.	Do not record as a DNA because the service user turned up before the end of the appointment time and clinically significant activity took place. If family/whānau involved report <b>T36</b> with FWI Y.

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Community support worker makes unplanned home visit and the service user is not home	Yes	DM	Community support worker unexpectedly has some time available and decides to call on a service user nearby. The service user is not home.	No activity recorded	n/a	This is not a DNA because it was not a pre-planned appointment.
A service user's family do not attend a scheduled family-only appointment	No	CM	An NGO clinician plans a family-only appointment (T32). However, the family does not turn up and makes no contact with the service.	No activity sent to PRIMHD	n/a	Do not record as a DNA because it was not the service user who did not attend.

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## T36 – Contact with family/whānau, consumer present

Keywords	HISO PRIMHD description	Additional comments
<ul style="list-style-type: none"> <li>Main focus is family/ whānau involvement</li> <li>Service user present and direct recipient of activity</li> </ul>	<ul style="list-style-type: none"> <li>Assessment, treatment, care planning, review and discharge in conjunction with tangata whaiora/consumer, family/whānau and/or significant other present.</li> </ul>	<ul style="list-style-type: none"> <li>The main focus is the involvement of the family/whānau.</li> <li>The service user must be present.</li> </ul>

**Family/whānau involvement (FWI):** Is always Y. This code will be replaced in the future.

Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Therapeutic family group programme for treatment (service user present)	Yes	AV, CM, DP, ES, MC, OM, OS, PH or PR	The service user and several members of their family and/or significant others (forming a group) attend a behavioural therapy treatment session.	<b>T36</b>	In this scenario, FWI is Y.	Use <b>T36</b> for assessment, treatment, care planning, review and discharge in conjunction with the service user, family/whānau and/or significant others present.
Meeting to discuss medication; family member present and plays significant role	Yes	DM	The service user, mental health staff member and clinician discuss medication review with family members present. The family member is there because they play a significant role in the administration or monitoring of medicine and have vital information/opinions to contribute to the medication review.	<b>T36</b>	In this scenario, FWI is Y.	

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Child & Youth service contact with child and family at separate but equal times within one appointment slot	Yes	CM	<p>During a single booked 90-minute CAPA Choice outpatient clinic appointment slot:</p> <ul style="list-style-type: none"> <li>the Child &amp; Youth clinician meets with parents and the child (the service user) together for 30 minutes, from 9.00 am to 9.30 am</li> <li>then the Child &amp; Youth clinician meets with the parents on their own for 30 minutes from 9.30 am to 10.00 am</li> <li>the Child &amp; Youth clinician then meets with the child on his/her own for 30 minutes from 10.00 am to 10.30 am.</li> </ul>	<b>T36, T32, T42</b>	In this scenario, FWI is Y for <b>T36</b> and <b>T32</b> , and N for <b>T42</b> .	<p>Three separate activities should be reported:</p> <ul style="list-style-type: none"> <li>parents/carers and child – report <b>T36</b> – <i>Contact with family/whānau, service user present</i> with a contact duration of 30 minutes. FWI is Y</li> <li>parents/carers only contact – report <b>T32</b> – <i>Contact with family/whānau, service user not present</i> with a contact duration of 30 minutes. FWI is Y</li> <li>child-only contact – report <b>T42</b> – <i>Individual treatment attendances: family/whānau not present</i> with a contact duration of 30 minutes. FWI is N.</li> </ul>
Child & Youth service contact with child and family at separate times within one appointment slot – most of the appointment spent together	Yes	CM	<p>During a single booked 90-minute CAPA Choice outpatient clinic appointment slot:</p> <ul style="list-style-type: none"> <li>the Child &amp; Youth clinician meets with the parents and the child together for 75 minutes</li> <li>then the Child &amp; Youth clinician sees the parents on their own for 10 minutes</li> <li>the Child &amp; Youth clinician then meets with the child on his/her own for 5 minutes.</li> </ul>	<b>T36</b>	In this scenario, FWI is Y.	The most clinically or service-user-significant contact, and the longest duration, was the joint meeting with the child and family present: record <b>T36</b> – <i>Individual treatment attendances: family/whānau present</i> with a contact duration of 90 minutes.

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## T37 – On leave

Keywords	HISO PRIMHD description	Additional comments
<ul style="list-style-type: none"> <li>Inpatient, respite, and residential settings</li> <li>Overnight/24-hour leave</li> <li>Not same-day leave</li> </ul>	<p>The absence of a tangata whaiora/ consumer from the health care/ support facility to which they were most recently admitted/entered. Leave is reported only where that tangata whaiora/consumer is absent at midnight and is entered instead of the bed night for that period of leave.</p>	<ul style="list-style-type: none"> <li>The intent of this activity is to ensure occupied bed nights are counted accurately. This activity should only be entered if the service user is absent overnight.</li> <li>Although the PRIMHD definition states that periods of leave less than 24 hours in duration should not be reported, there are several reasons why some services are recording T37 (on leave) records for same-day leave episodes.</li> <li>Leave information is recorded in patient management systems based on start and end times, not bed nights.</li> <li>Often service users are on leave and then return before midnight, so there is a leave event but no bed night.</li> <li>Even though the current PRIMHD definition states <b>T37</b> is a bed night activity, DHBs record leave events even if they are same-day events.</li> <li>DHBs cannot easily exclude same-day leave events from their PRIMHD extracts.</li> <li>The activity setting for 'on leave' will be based on where the service user will be spending their leave (eg, if in their home, record DM).</li> <li>Community teams or team/settings combinations are not able to report bed nights or 'on leave'.</li> <li>Team and team setting combinations that are valid for reporting <b>T37</b> activities are given in Table 5.</li> </ul>
<p><b>Family/whānau involvement (FWI):</b> Is always N.</p>		

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**Table 5: Valid team and team setting combinations for reporting T37 activities**

Team type	Team setting	Team type	Team setting
Inpatient	–	Intellectual Disability Dual Diagnosis Team	R, I
Alcohol and Drug Team	R, I, M	Specialty Team	R, I
Forensic Team	R, I, M	Maternal Mental Health Team	I
Residential/Accommodation Team	–	Eating Disorder Team	R, I
Co-Existing Problems Team	R		

Notes: R = residential, I = inpatient, M = mixed.

Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Service user is given leave to attend appointment	N/A	Not required	The service user is given leave to attend an appointment. The intention is that the service user will return and will stay overnight in the inpatient or residential service.	Not reported to PRIMHD	n/a	Day leave is not required to be reported to PRIMHD.
Service user leaves for the weekend	Yes	DM	The service user is on leave in their home from the sub-acute ward from Friday evening at 4 pm with the intention that they will return at 5 pm on Sunday.	<b>T37</b> and <b>T04</b>	In this scenario, FWI is N.	Service reports <b>T37 – On leave</b> for two nights, Friday and Saturday only. Sub-acute bed nights ( <b>T04</b> ) are reported again from Sunday from 5 pm, when the service user returns.
Service user is on leave from residential team	Yes	MC	Service user is on leave from the residential detox facility for one night only on Wednesday, with the intention of returning on Thursday. The service user does not return until Friday morning at 1 am.	<b>T37</b> and <b>T16</b>	In this scenario, FWI is N.	<b>T37 – On leave</b> reported for two nights (Wednesday and Thursday). <b>T16</b> (substance abuse detox bed nights) reported again for Friday from 1 am. The service user must be occupying the bed at midnight to be reported as <b>T16</b> .

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## T38 – Māori-specific interventions only

Keywords	HISO PRIMHD description	Additional comments	Challenges with the collection of cultural activity data
<ul style="list-style-type: none"> <li>Clinical setting – cultural activity</li> <li>Not necessarily a kaupapa Māori team</li> <li>Provider arm or NGO non-clinical staff</li> <li>The service user is present</li> <li>One-to-one support or group programmes</li> </ul>	<p>Application of Māori models of practice that is delivered within a clinical setting by contracted Māori providers. This will include access to tohunga, Kaumatua, kuia, Te Reo, Karakia, Waiata, Mirimiri, rongoa, whānau, arts and crafts.</p> <p>Reporting cultural session delivered as part of the recovery programme eg, Kapa Haka, te reo Māori staff and Māori cultural advisors, but does not necessarily have to be delivered by a contracted Kaupapa Māori team.</p>	<ul style="list-style-type: none"> <li>This code records the application of cultural activity, and is not intended to record activity delivered by staff who identify as Māori.</li> <li>Clinical staff do not use this code. If using a Western medical model in conjunction with the Māori intervention, use <b>T39</b>.</li> <li>One-to-one support or group programmes are usually held in a Māori setting.</li> <li>Where Māori culturally specific activities or interventions are the focus of a group session or programme, use <b>T38</b> instead of <b>T07</b> or <b>T22</b>.</li> </ul>	<p>The following points should be noted in relation to the collection and analysis of cultural activity information in PRIMHD.</p> <ul style="list-style-type: none"> <li><b>T38</b> does not account for cultural family/whānau-only intervention. In some teams this is a key intervention provided by kaumātua, kuia, mātua, or other cultural support staff. This is currently recorded as <b>T32</b>, so the cultural intervention provided is not captured.</li> <li>There is no way to identify if cultural support was provided during the assessment and treatment stages of a service user's journey (ie, <b>T01</b>).</li> </ul>

**Family/whānau involvement (FWI):** Can be either Y or N. Is Y if family/whānau are involved or N if family/whānau are not involved.

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Pōwhiri or poroporoaki	Yes	MC	<p>Pōwhiri – a traditional intervention to welcome and engage with service users and whānau in a place of safety. It helps to open the engagement processes for all involved in the care of the service user (eg, taurawhiri [Māori cultural advisors], nurses, doctors, allied health staff).</p> <p>This process includes the use of te reo, whakawhanaunga, manaaki, aroha and many other cultural interventions and competencies.</p> <p>Poroporoaki – to farewell service users and whānau at the time of discharge from the service.</p>	T38	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	
One-to-one cultural support	Yes	CM/DM	The service user receives one-to-one cultural support from a Māori provider in a community mental health team or in their home.	T38	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	
Two-day Māori activity programme	Yes	MC	The service user participates in a two-day Māori activity programme using cultural practices in a Māori setting.	T38	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	T38 should be reported with an end time of midnight if an overnight stay is involved. Each day needs to be recorded separately, even if the service provided involves a 3-day hui.

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
When Māori-specific intervention is provided by non-clinical staff member without a clinician present	Yes	MC	A kaumātua or cultural therapist provides an intervention without a clinician present, such as a karakia for either the service user and whānau, or a house blessing (it is very rare not to have a clinician present).	<b>T38</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	The service user must be present to report <b>T38</b> .
Clinical staff engaging in pōwhiri	Yes	MC	Court liaison clinical staff engage in a pōwhiri / traditional Māori welcome at the Rangatahi Court before undertaking clinical assessments for rangatahi (youth) service users and their whānau. Clinical staff are supported by the āpiha kaitohu with karakia, waiata and whai kōrero.  FWI is Y if family/whānau are involved.	<b>T38</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	The clinician would not be able to attend on marae without the presence of the āpiha kaitohu (cultural support worker). The support worker records <b>T38</b> . The clinical staff member does not record the pōwhiri activity because PRIMHD rejects duplicate activity types reported for the same period or intervention.  The clinical staff member does record the clinical assessment activity that occurs after the pōwhiri.

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Support for service users to attend NGO programmes	Yes	CM	There is individual face-to-face contact with a rangatahi service user to provide cultural intervention. This involves providing support for the service user to attend a Māori NGO to access a kaumātua, programmes, etc.  Support is also provided to the service user through manaakitanga and wairuatanga.	<b>T38</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	
Cultural intervention/treatment	Yes	CM	An escort is provided for service users from forensic rehabilitation units: this supports the service users to return to the area with whānau contacts and whānau hui.	<b>T38</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	
Cultural assessment, support or intervention	Yes	DM, MC, CM	Māori cultural assessment and support is provided to a service user by non-clinical staff in a service user's home, marae or in another community setting, eg, a karakia when a service user is unwell, or other members of the whānau are unwell; a house blessing; or during times of distress (grief, tangihanga). The service user's whānau are present and involved.	<b>T38</b>	In this scenario, FWI is Y.	Use <b>T38</b> where the main activity is culturally specific.  Where the focus is on assessment, treatment, care, planning review and discharge, and the whānau are present and involved, use <b>T36</b> .

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Cultural activity	Yes	CM	The service user participates in whakangahau: a hui using te reo as a medium and to connect people for special events (eg, Matariki, mental health awareness week, end-of-year celebrations, graduations for classes provided by the service, inter-service celebrations (Shared Vision, NGOs). The purpose is to celebrate oneself, and one's connections related to mana, identity, aroha.	<b>T38</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	
Cultural support; only whānau present	No	DM, CM, MC	Cultural support is provided to whānau only. The service user is not present.	<b>T32</b> or <b>T47</b>	In this scenario, FWI is Y.	<p>The service user must be present to report <b>T38</b> – <i>Māori-specific interventions</i>.</p> <p>Use <b>T32</b> – <i>Contact with family/whānau, service user not present</i> if the service user's care and treatment is the focus of the support. Report <b>T32</b> using the service user's NHI.</p> <p>Use <b>T47</b> – <i>Support for family/whānau</i> for supportive activity delivered to family/whānau members of people with mental health and addiction issues regarding the effects of these issues on the family/whānau member. Report using the family/whānau member's NHI.</p>

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Service user participates in intervention using cultural and clinical model	Yes	MC	The service user participates in a Māori intervention using cultural practices, in conjunction with a Western medical model, in a Māori setting.	<b>T39</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	Use <b>T39</b> – <i>Integrated Māori and clinical interventions</i> .
Service user participates in a therapeutic day programme for treatment	Yes	CM	The service user takes part in a specialised and/or intensive day programme, as an outpatient, with a focus on individual treatment.	<b>T22</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	<b>T38</b> can only be reported for culturally specific programme activity. Where the focus of a day programme is on intensive or specialised treatment, <b>T22</b> should be reported.

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# T39 – Integrated Māori and clinical interventions

Keywords	HISO PRIMHD description	Additional comments	Challenges with the collection of cultural activity
<p>Medical model and Māori interventions</p> <p>One-to one-support or group programme</p> <p>Māori or clinical setting</p> <p>Provider arm or NGO clinical staff</p>	<p>In addition to receiving mainstream clinical interventions and services, the tangata whaiora/ consumer also received integrated Māori specific services and clinical interventions (for example, application of Māori Models of practice, traditional and contemporary, which recognise the value of culture to the healing process including, but not limited to whakawhanaungatanga and increased access to te ao Māori, incorporating but not limited to: purakau; mau rakau; waiata; te reo; raranga; karakia; whakapapa; mirimiri; and rongoa. This would also include services provided by tohunga, kaumatua, kuia, Māori staff and Māori cultural advisors.</p> <p>It would also include those cultural interventions that are supported by a Western approach such as bio-medical, etc.</p>	<ul style="list-style-type: none"> <li>Use <b>T38</b> for one-to-one support or group programmes that use both a western medical model as well as Māori interventions, and which are usually held in a Māori setting.</li> <li>Where integrated clinical and Māori culturally specific activity or interventions are the <i>focus</i> of a group session or programme, use <b>T39</b> instead of <b>T07</b> or <b>T22</b>.</li> </ul>	<p>The following point should be noted in the collection and analysis of cultural activity information in PRIMHD:</p> <ul style="list-style-type: none"> <li>There is no way to identify if cultural support was provided during the assessment and treatment stages of a service user’s journey (ie, <b>T01</b>).</li> </ul>

**Family/whānau involvement (FWI):** Can be either Y or N. Is Y if family/whānau are involved or N if family/whānau are not involved.

Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Assessment	Yes	MC	A Māori cultural assessment is completed by clinical staff.	<b>T39</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Cultural and Western medical model intervention	Yes	MC	The service user participates in a Māori intervention using cultural practices in conjunction with a Western medical model in a Māori setting.	<b>T39</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	Integrated Māori and clinical interventions should be recorded as <b>T39</b> .
Use of Te Whare Tapa Whā	Yes	CT	The Te Whare Tapa Whā model is used during the initial clinical assessment.	<b>T39</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	
Clinical staff engaging in pōwhiri	Yes	MC	Court liaison clinical staff engage in a pōwhiri/traditional Māori welcome at the Rangatahi Court before undertaking clinical assessments for rangatahi service users and their whānau. Clinical staff are supported by the āpiha kaitohu with karakia, waiata and whai kōrero.	<b>T38</b>	Family/whānau may or may not be involved in the pōwhiri. Report FWI flag as Y or N as appropriate.	The support worker records <b>T38 – Māori specific intervention</b> (non-clinical). The clinical staff member does not record the pōwhiri activity because PRIMHD rejects duplicate activity types reported for the same period/intervention.  The clinical staff member does record the relevant clinical assessment activity that occurs after the pōwhiri.

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Contact with only whānau present	No	DM, CM, MC	A clinician meets with whānau to discuss the care of the service user without the service user present. A karakia is used to open and close the meeting.	T32 or T47	In this scenario, FWI is Y.	<p>Use <b>T32</b> – <i>Contact with family/whānau, service user not present</i> if the service user’s care and treatment is the focus of the support. Report <b>T32</b> using the service user’s NHI.</p> <p>Use <b>T47</b> – <i>Support for family/whānau</i> for supportive activity delivered to family/whānau members of people with mental health and addiction issues regarding the effects of these issues on the family/whānau member. Report using the family/whānau member’s NHI.</p> <p>The service user must be present to report <b>T39</b> – <i>Integrated Māori and clinical interventions</i>.</p>
Contact with a service user for a crisis assessment (with or without whānau present)	Yes	DM	A clinician and kaumātua attend an assessment with a service user who is experiencing a mental health crisis.	T01	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	Use <b>T01</b> – <i>Crisis attendance</i> . The main focus of the intervention is the crisis assessment. Even if the family/whānau are present, <b>T01</b> takes priority as the most significant activity in the service user’s journey.

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# T40 – Pacific peoples cultural activity

Keywords	HISO PRIMHD description	Additional comments	Challenges with the collection of cultural activity data
<ul style="list-style-type: none"> <li>• One-to-one support or group programme</li> <li>• Not restricted to Pacific peoples services</li> <li>• Cultural or clinical setting</li> <li>• DHB or NGO non-clinical staff</li> <li>• The service user is present</li> </ul>	<p>Activity involving Pacific tangata whaiora/consumers which relates to the application of traditional and contemporary cultural practices.</p>	<ul style="list-style-type: none"> <li>• Non-clinical staff, such mātua, will use this code.</li> <li>• The service user must be present.</li> <li>• Where Pacific peoples’ culturally specific activity is the focus of a group session or programme, use <b>T40</b> instead of <b>T07</b> or <b>T22</b>.</li> </ul>	<p>The following points should be noted in the collection and analysis of cultural activity information in PRIMHD.</p> <ul style="list-style-type: none"> <li>• <b>T40</b> does not account for cultural family/whānau-only intervention. In some teams this is a key intervention provided by a mātua or other cultural support staff. This is currently recorded as <b>T32</b>, so the cultural intervention provided is not captured.</li> <li>• There is no way to identify if cultural support was provided during the assessment and treatment stages of a service user’s journey (ie, <b>T01</b>).</li> <li>• From July 2021 there are now two Pacific peoples cultural activity codes to help distinguish between purely cultural intervention by non-clinical staff and integrated clinical/cultural intervention for Pacific peoples.</li> </ul>

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**Family/whānau involvement (FWI):** Can be either Y or N. Is Y if family/whānau are involved or N if family/whānau are not involved.

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Assessment	Yes	CM	At the family's request, a Pacific cultural support worker attends a court report assessment with the psychologist to explain questions/answers from the psychologist in the family's language.	<b>T40</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	The support worker's presence is to provide cultural support, which is significant in that it assists in the process of assessment. The clinician should record this activity as <b>T42</b> – <i>Individual treatment attendance</i> .
Assessment in a youth forensic setting; service user and family present	Yes	CT	The Pacific cultural support worker attends the youth court to support a young person and family with the assessment process.	<b>T40</b>	In this scenario, FWI is Y.	
Contact with service user for cultural assessment, whānau present	Yes	DM	A service user is visited at home for cultural assessment and their family/whānau are present and involved.	<b>T40</b>	In this scenario, FWI is Y.	Use <b>T40</b> where the main activity is culturally specific. Where the focus is on assessment, treatment, care, planning review and discharge, use <b>T36</b> .
Contact with only whānau present	No	CM	A clinician meets with a service user's family to discuss the service user's care without the service user being present.	<b>T32</b>	In this scenario, FWI is Y.	Use <b>T32</b> – <i>Contact with family, service user not present</i> . The main focus of the activity is discussing the service user's care. The service user is not present.

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Service user participates in intervention using cultural and clinical model	Yes	MC	The service user participates in a Pacific intervention using cultural practices, in conjunction with a Western medical model, in a Pacific setting.  FWI is Y if family/whānau are involved.	<b>T51</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	Use <b>T51</b> – <i>Integrated Pacific and clinical interventions</i> .

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# T41 – Other cultural activity

Keywords	HISO PRIMHD description	Additional comments
<ul style="list-style-type: none"> <li>Cultural or clinical setting</li> <li>Non-inpatient/residential team settings only</li> <li>Excludes Māori or Pacific peoples cultural activity</li> <li>One-to-one support or a group programme</li> </ul>	Application of other cultural models of practice, traditional and contemporary, which recognise the value of culture to the healing process.	<p>Māori or Pacific peoples cultural activity should be reported as <b>T38</b>, <b>T39</b>, <b>T40</b> or <b>T51</b>.</p> <ul style="list-style-type: none"> <li>Cultural activity is activity provided by non-clinical staff, cultural advisors, other.</li> </ul>

**Family/whānau involvement (FWI):** Can be either Y or N. Is Y if family/whānau are involved or N if family/whānau are not involved.

Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Assessment	Yes	CT	At the family's request, an Asian cultural support worker attends a court report assessment with the psychologist to explain questions/answers from the psychologist in the service user's language.	<b>T41</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	<p>The support worker records <b>T41</b>.</p> <p>The clinician records this activity as <b>T42 – Individual treatment attendance</b>.</p>
Assessment in a refugee setting; service user and family present	Yes	CM	A refugee cultural support worker attends to support the young person and family with the assessment process.	<b>T41</b>	In this scenario, FWI is Y.	<p>The cultural support worker records <b>T41</b>.</p> <p>The clinician records <b>T36 – Contact with family/whānau, service user present</b>.</p>
One-to-one cultural support	Yes	CM/DM	The service user receives one-to-one cultural support from a Māori provider in a community mental health team or in their home.	<b>T38</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	<b>T38 – Māori-specific intervention</b> (non-clinical).

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# T42 – Individual treatment attendances: family/whānau not present

Keywords	HISO PRIMHD description	Additional comments
<ul style="list-style-type: none"> <li>Assessment</li> <li>Treatment</li> <li>Care planning</li> <li>Review/discharge</li> <li>Risk assessment</li> <li>Medication review</li> </ul>	Individual assessment, treatment (including support with medication), care planning, review and discharge services. Neither family/whānau nor significant other are present.	<ul style="list-style-type: none"> <li>Use <b>T42</b> for one-to-one support face-to-face, including discussions via telephone, email, or text where clinically significant, or service user journey significant, discussion takes place.</li> <li>No family/whānau or significant other present.</li> </ul>

**Family/whānau involvement (FWI):** Is always N. This code will be replaced in the future.

Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Assessment and/or treatment	Yes	CM	The service user attends a meeting with the intention of assessment, treatment, care planning, review or discharge and there are two or more staff members from the organisation present.	<b>T42</b>	In this scenario, FWI is N.	Only one staff member records <b>T42</b> for the duration of the meeting.
Service user has an appointment for a medication review	Yes	AV	The service user attends an appointment with a clinician for medication review via video conference. No family/whānau or significant others are present.	<b>T42</b>	In this scenario, FWI is N.	
Contact leading up to the completion of a needs assessment	Yes	CM	Leading up to the completion of a needs assessment there are four half-hour sessions with the service user over several days.	<b>T42</b>	In this scenario, FWI is N.	Four separate sessions with the service user are entered as code <b>T42</b> for 30 minutes each.

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Assessment or follow-up attendances for court reports	Yes	CT, PR, CC, IM	There is face-to-face contact with the service user for additional assessment, for the purpose of writing a report ordered by the court.	T42	In this scenario, FWI is N.	
Meeting to discuss medication; family member present and plays significant role	Yes	DM	A service user and clinician discuss medication review with a family member present. The family member attends because they play a significant role in the administration or monitoring of medicine and have vital information/opinions to contribute to the medication review.	T36	In this scenario, FWI is Y.	Use <b>T36</b> – <i>Contact with family/whānau, tangata whaiora/consumer present</i>

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## T43 – Community support contacts

Keywords	HISO PRIMHD description	Additional comments
<ul style="list-style-type: none"> <li>One-to-one support</li> <li>Service user present</li> <li>Non-clinical staff/support workers</li> </ul>	Support services provided to tāngata whaiora/consumers with a mental illness and/or addiction to support/facilitate engagement with community, including accessing and maintaining accommodation, employment and social activity.	<ul style="list-style-type: none"> <li>This code may be reported by clinical staff if it is not directly treatment related (eg, support at WINZ that is not advocacy, support at court, etc).</li> <li>Travel time with the service user present is not included, but staff should record the time spent with the service user in the car if the conversation was significant to the service user journey.</li> <li>Support can be irregular or scheduled; for example: <ul style="list-style-type: none"> <li>home visit – engaging with families about daily events, issues they are facing/support they may need</li> <li>phone catch-up – calling to check how the service user is: this does not include telephone calls for the sole purpose of appointment reminders.</li> </ul> </li> <li>Formal activities such as support plan reviews or goal setting, should be recorded under <b>T32</b>, <b>T36</b> or <b>T42</b> and are usually scheduled in advance.</li> <li>Youth service – community support involves: <ul style="list-style-type: none"> <li>supporting the families only if the consent is signed</li> <li>services provided on a one-on-one basis to discuss the young person’s progress (eg, advice on weekend activities, respite care), which should be reported as <b>T32</b> or <b>T36</b>.</li> </ul> </li> </ul>

**Family/whānau involvement (FWI):** Can be either Y or N. Is Y if family/whānau are involved or N if family/whānau are not involved.

Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
A service user wants to apply to WINZ for housing assistance but requires help with transport	Yes	CM	The service user needs help with transport to get to WINZ. The support worker drives the service user to WINZ, drops them off, then returns in an hour to pick the service user up. The service user and support worker do not discuss the application process in the car before or after the appointment.	Travel time not reported to PRIMHD	n/a	There is no significant discussion on goals or wellbeing during the time in the car. This is not <b>T43</b> : it should not be reported to PRIMHD.

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
A service user wants to apply to WINZ for housing assistance but requests assistance	Yes	CM	<p>The service user is nervous about the prospect of the WINZ application process and wants their support worker to accompany them to the WINZ appointment.</p> <p>The support worker drives the service user to the meeting and then supports the service user through the 1-hour meeting. During their time in the car together the support worker and service user discuss the application process and the service user's goals.</p>	<b>T43</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	<p>The service user and support worker discuss things that are significant to the service user's goals and/or wellbeing, so the time they spend together can be recorded as <b>T43</b> – <i>Community support contact</i>. The contact does not have to be clinically significant as the support worker is not clinical.</p> <p>Driving time is included because the support worker is not merely dropping the service user off, but also provides moral support through the meeting process.</p> <p>If the support worker provides advocacy, this would be a <b>T44</b>. If it is moral support that is provided, it is reported as <b>T43</b>.</p>
Community support worker visits service user at home to discuss peer support group	Yes	DM	The service user is concerned about their daughter's behaviour. The support worker gives advice and examples of how the service user could deal with difficult situations. The service user is given details about a peer support group and told they are very welcome to attend.	<b>T43</b>	Family/whānau may or may not be present and involved. Report FWI flag as Y or N as appropriate.	The service user received support from the staff member.

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Support in the community	Yes	DM	The support worker visits the service user at home. They chat for an hour about the service user's life, his past and how he spent time in Australia, which he states he enjoyed. After enquiring whether anything needs to be done, the support worker departs.	<b>T43</b>	Family/whānau may or may not be present and involved. Report FWI flag as Y or N as appropriate.	The service user received support from the staff member.
Staff member accompanies service user to District Court appearance	Yes	CT	A service user has a court appearance and asks a staff member to accompany them for moral support.	<b>T43</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	The staff member (clinical or non-clinical) is not taking part in the court proceedings. They are there in a supportive role only.
Telephone contact with service user to follow up after an appointment with a dietician	Yes	PH	The support worker telephones the service user to enquire how she got on at her appointment with the dietician. The service user states that the appointment was postponed. She is also waiting to hear about a proposed counsellor appointment.  The service user asks the support worker to contact the dietician and counsellor on her behalf.	<b>T43 and T44</b>	In this scenario, FWI is N.	Contact with the service user is in a supportive role, so use <b>T43</b> .  When the support worker contacts the dietician and the counsellor, these will be separate <b>T44 – Advocacy</b> activities.

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# T44 – Advocacy

Keywords	HISO PRIMHD description	Additional comments
<ul style="list-style-type: none"> <li>• Goal and solution focus</li> <li>• Link to services</li> <li>• Promotion</li> </ul>	<p>Support services offered to actively advance and/or protect the rights and interests of tāngata whaiora/consumers with mental illness and/or addiction.</p> <p>Provide goal and solution-centred advocacy for tāngata whaiora/consumers accessing services and who are searching for solutions to concerns or problems relating to their mental health or addiction treatment or support.</p> <p>This support can be (but is not limited to):</p> <ul style="list-style-type: none"> <li>• link between the tangata whaiora/consumer accessing services and the provider to facilitate the resolution of concerns or problems</li> <li>• promotion of the tangata whaiora/consumer’s needs and strengths</li> <li>• assistance in legal processes pertaining to mental health and addiction legislation</li> <li>• information and access to other community resources and services</li> <li>• information about/explanation of the policies and protocols of services.</li> </ul>	<p>If the service user and the lead clinician are not present, then record <b>T08</b> – <i>Care coordination activity</i>.</p>

**Family/whānau involvement (FWI):** Can be either Y or N. Is Y if family/whānau are involved or N if family/whānau are not involved.

Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Assisting service user with WINZ application	Yes	PH	<p>A service user comes to their support worker and tells them that they have had their WINZ application rejected and they don’t understand why. They ask for the support worker’s help.</p> <p>The support worker gives the WINZ case worker a call to find out why the application was rejected and to find out what information the service user needs to provide. The call takes 20 minutes.</p>	<b>T44</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	Contact duration is 20 minutes.

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Service user requests advocacy support at next CMH appointment	Yes	CM	<p>A service user meets with an advocate at an NGO provider service and requests advocacy support at their next community mental health psychiatrist appointment. The service user feels their psychiatrist was not giving them any choice in their treatment and medication.</p> <p>The service user and advocate attend the next appointment, where the advocate is able to communicate to the psychiatrist the concerns and requests of the service user. After discussion and negotiation, the service user and psychiatrist agree on a change in medication.</p>	T44	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	Travel time is not included.
Service user requests advocacy to assist in WINZ appointment – advocate is involved in discussion	Yes	CM	<p>A service user is applying for an increase in disability allowance to cover their medication and related travel costs and asks an advocate to attend their WINZ appointment. At the appointment, after review, the case manager declines the application.</p> <p>On behalf of the service user, the advocate asks for clarification on what is covered by the disability allowance, copies of the legislation, and a review of the decision.</p> <p>A meeting is held with the centre manager, advocate and service user.</p>	T44	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	
Service user requests advocacy support at next CMH appointment	Yes	CM	<p>The service user and advocate attend an appointment together. The service user self-advocates with the psychiatrist, and the advocate does not need to speak at all. The psychiatrist takes on what has been said and creates a new plan of care and arranges a medication review.</p>	T43	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	T43 – Community support contact.

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Service user requests advocacy to assist in WINZ appointment – advocate is not involved in discussion	Yes	CM	The advocate attends a WINZ appointment with the service user. The service user hands over the paperwork requested and answers questions from the case manager without any involvement by or assistance from the advocate. The service user’s application is approved.	T43	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	T43 – <i>Community support contact.</i>

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# T45 – Peer support

Keywords	HISO PRIMHD description	Additional comments
<ul style="list-style-type: none"> <li>Peer support services</li> <li>One-to-one or group</li> <li>Contracted peer support service</li> </ul>	Contact with a tangata whaiora/consumer for the primary purpose of providing Peer Support. Note – this activity should only be recorded by a person contracted to provide Peer Support. Other activity types relevant to the delivery of Peer Support should be used where appropriate in conjunction with tangata whaiora/consumer driven Team Service Type, eg, <b>T08</b> when liaising with other agencies/providers; <b>T32</b> when meeting with family/whānau members; <b>T35</b> if the tangata whaiora/consumer misses a planned appointment.	None.

**Family/whānau involvement (FWI):** Can be either Y or N. Is Y if family/whānau are involved or N if family/whānau are not involved.

Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Service user attends peer support group	Yes	CM	The service user attends a fortnightly peer support group at the local community house.	<b>T45</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	The peer support group is specifically contracted to provide this service.
Service user attends peer support group with CMH nurse	Yes	CM	The service user attends a peer support meeting with their community mental health nurse and peer support worker from an external agency. They are the only attendees of the meeting, and the staff member, mental health nurse and service user proceed to discuss the service user's package of care.	<b>T45</b> and <b>T08</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	The peer support worker records a <b>T45</b> . If the community mental health nurse was not part of the group, but was attending with the service user, the nurse records a <b>T08</b> because the peer support worker is from an external agency.
Person meets with peer support worker	Yes	Can be delivered in any setting	The person and peer support worker discuss what has been happening for the person. They utilise the mutuality of lived experience and reciprocity to help navigate through situations.	<b>T45</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	The peer support worker is specifically contracted to provide this service.

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## T46 – Triage and/or screening

Keywords	HISO PRIMHD description	Additional comments
<ul style="list-style-type: none"> <li>Service user present or involved</li> <li>Identify suitable services</li> <li>Screening tool – not full assessment</li> <li>Referral on</li> </ul>	Contact with prospective tangata whaiora/consumer only to ensure that they are eligible, and services are suitable for them. This may include the use of a screening tool or other criteria as determined for the contracted service. The tangata whaiora/consumer may then be referred into the suitable service.	<ul style="list-style-type: none"> <li>The intent of this activity is to separate out the triage/screening activity from full clinical assessment and/or treatment.</li> <li>This is not to be used in inpatient or residential team settings, or in court liaison roles.</li> <li>The service user must be present or involved.</li> <li>Outcome measures are not required because full clinical assessment has not been completed.</li> </ul>

**Family/whānau involvement (FWI):** Can be either Y or N. Is Y if family/whānau are involved or N if family/whānau are not involved.

Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Service user is assessed to determine suitability for entry to the service	Yes	CM	<p>The service user is referred (by others or self) to the service and is seen/talked to directly by a clinician at point of entry (be it emergency, intake, or single point of entry). The clinician administers an initial 'pre-assessment' brief screening tool to determine the suitability of the case for entry into the service.</p> <p>A treatment pathway may be decided, but a definitive psychiatric diagnosis is not. The service user may progress onwards to a fuller psychiatric assessment, resulting in a formulation and/or treatment plan. At this point the triage/screening phase is ended.</p>	T46	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	<p>A full psychiatric assessment does not occur (although there is likely to be some formalised risk assessment undertaken and/or a brief mental state examination). Therefore, an outcomes collection is not invoked.</p> <p>The CAPA Choice phase would be considered a triage/screening phase.</p>

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Non-clinical services	Yes	CM	The service user is referred (by others or self) to the service or team and is seen/talked to directly by a staff member. An initial 'questionnaire' or 'pre-assessment' brief screening is used to determine the suitability of the service user for entry into the service.	<b>T46</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	A full work-up or assessment does not occur.
Self-referral resulting in triage but no assessment or treatment	Yes	CM	A person (not a current service user) walks into a mental health service building stating they are in a crisis as they have no money and nowhere to live. They are triaged/screened but, although upset, do not appear to be experiencing an acute mental health crisis. They are referred to a local housing provider and the case is closed with no further planned care.	<b>T46</b>	Family/whānau may or may not accompany the person. Report FWI flag as Y or N as appropriate.	The 'crisis', as described by the person, is not attributable to mental health issues. Subjectively, the person feels in crisis, but there is no mental health problem/diagnosis so the person is not eligible to receive mental health and addiction services. A triage has been completed.
Self-referral to NGO mental health and/or addiction service provider	Yes	CM	A service user contacts an NGO provider requiring immediate response in order to urgently stabilise symptoms.  A staff member may use de-escalating techniques while waiting for the crisis team to arrive, or obtain advice from the crisis team by phone to help stabilise the situation.  Police may need to be called to help stabilise the situation prior to the crisis team arriving.	<b>T01</b>	Family/whānau may or may not be involved in the call or de-escalation process. Report FWI flag as Y or N as appropriate.	The contact is unplanned, immediate, urgent and aimed at mitigating risks.

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## T47 – Support for family/whānau

Keywords	HISO PRIMHD description	Additional comments
<ul style="list-style-type: none"> <li>Support for the family or whānau member, not the service user</li> <li>Reported against the NHI of the family/whānau member</li> </ul>	<p>Supportive activity delivered to family/whānau members of people with mental health and addiction issues regarding the effects of these issues on the family/whānau member. For example, provision of information, psycho-education facilitation of peer-group support and tools to promote resilience, self-esteem and coping strategies.</p> <p>Report against the family/whānau member's NHI.</p>	<ul style="list-style-type: none"> <li><b>T32</b> or <b>T36</b> should be used if the service user's care and treatment are the focus of the support. If this is the case, <b>T32</b> or <b>T36</b> should be reported using the service user's NHI. 'Service user' here refers to a person with a mental illness.</li> </ul>

**Family/whānau involvement (FWI):** Can be either Y or N. The family/whānau member of the service user may have another family/whānau member to support them. Therefore, FWI is Y if another family/whānau member is involved or N if another family/whānau member is not involved.

Activity purpose	Is the service user* a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Support the family member of service user	No	Can be delivered in any setting	A family member of the service user participates in a group support session to gain knowledge and skills in supporting their family member who experiences mental health or addiction issues.	<b>T47</b>	Another family/whānau member may or may not be involved to support the other member. Report FWI flag as Y or N as appropriate.	Record against the family member's NHI
Support for whānau member of service user	No	Can be delivered in any setting	A whānau member/close friend or colleague of a person with a mental health diagnosis or problematic substance use attends a psycho-education session to gain knowledge and skills to respond to the service user's mental health issues.	<b>T47</b>	Another family/whānau member may or may not be involved to support the other member. Report FWI flag as Y or N as appropriate.	Record against the whānau member's, close friend's or colleague's NHI.

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Activity purpose	Is the service user* a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Discussion about service user's care	No	Can be delivered in any setting	A mother, whose daughter is a service user, meets the clinician without the daughter present to discuss issues related to her daughter's care.	<b>T32</b>	Another family/whānau member may or may not be involved to support the other member. Report FWI flag as Y or N as appropriate.	Record against the daughter's NHI. This is not <b>T47</b> because the meeting is about daughter's care, not support for the mother
Discussion about service user's care	No	Can be delivered in any setting	Parents meet the clinician with their child present to discuss issues related to their child's mental health care or problematic substance use.	<b>T36</b>	Another family/whānau member may or may not be involved to support the other member. Report FWI flag as Y or N as appropriate.	Record against the child's NHI. This is not <b>T47</b> because the meeting is about the child's care, not support for the parents.

\* 'Service user' here refers to a person with a mental illness or addiction.

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# T49 – Support for Children of Parents with Mental Illness and Addictions (COPMIA)

Keywords	HISO PRIMHD description	Additional comments
<ul style="list-style-type: none"> <li>Support for the child of a service user</li> <li>Children 0–19 years old</li> <li>Reported against the child’s NHI</li> </ul>	<p>Supportive activity delivered to children of parents with mental health and addiction issues regarding the effects of these issues on the child. For example, provision of information, psycho-education facilitation of peer-group support, and tools to promote resilience, self-esteem and coping strategies.</p> <p>Report against the child’s NHI.</p>	<ul style="list-style-type: none"> <li>This applies to children 0–19 years old.</li> </ul>

**Family/whānau involvement (FWI):** Can be either Y or N. The child/children of the service user may have another family/whānau member to support them. FWI is Y if another family/whānau member is involved or N if another family/whānau member is not involved.

Activity purpose	Is the service user* a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Support the child of a service user	No	Can be delivered in any setting	The child of a service user attends a peer group support session with other children to gain support in living with their parent who experiences mental health or addiction issues.	T49	Another family/whānau member may or may not be involved in supporting the child. Report FWI flag as Y or N as appropriate.	Record against the child’s NHI.
Support the child of the service user	No	Can be delivered in any setting	A young person who is a service user receives support in living with their parent who experiences mental health or addiction issues.	T49	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	Record against the child’s NHI. The fact that the child has a mental health diagnosis is immaterial here; this session is related to their parent’s mental illness, therefore it is a COPMIA contact.

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Activity purpose	Is the service user* a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Discussion about service user's care	No	Can be delivered in any setting	The adult child of an elderly parent who is a service user receives information and support regarding their parent.	<b>T47</b>	Another family/whānau member may or may not be involved in supporting the adult child. Report FWI flag as Y or N as appropriate.	Record against the adult child's NHI. This is not <b>T49</b> because COPMIA is only for children 0–19 years old.
Treatment for a service user	Yes	Can be delivered in any setting	A young person who is a service user receives assessment and treatment for their mental health diagnosis/problematic substance use. Family/whānau are not present.	<b>T42</b>	In this scenario, FWI is N.	This is not <b>T49</b> because it is related to the young person's mental illness rather than support to cope with their parent's mental illness.
Discussion about service user's care	Yes	Can be delivered in any setting	A child with a parent who is a service user both attend a meeting to discuss the care and treatment of the parent.	<b>T36</b>	In this scenario, FWI is Y.	This is not <b>T49</b> because the discussion is about the parent's care, not support to the child.
Discussion about service user's care	No	Can be delivered in any setting	The daughter of a mother who is a service user, meets the clinician without her mother present to discuss issues related to her mother's mental health care/ problematic substance use.	<b>T32</b>	In this scenario, FWI is Y.	This is not <b>T49</b> because the meeting is about the mother's care, not support for the daughter.
Parenting support to a service user	Yes	Can be delivered in any setting	A service user who is a parent receives parenting advice and support.	<b>T50</b>	Another family/whānau member may or may not be involved in supporting the parent receiving advice. Report FWI flag as Y or N as appropriate.	This is not <b>T49</b> because the support is to the parent and not the child.

\* 'Service user' here refers to a person with a mental illness or addiction.

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# T50 – Support for parents with mental illness and addiction

Keywords	HISO PRIMHD description	Additional comments
<ul style="list-style-type: none"> <li>Parenting support for service users with dependent children</li> <li>Reported against the NHI of the parent</li> </ul>	Activity that supports mental health and addiction service users (who have dependent children) in their role as parents. For example, identifying and addressing parenting support needs, parent education and support programmes.	

**Family/whānau involvement (FWI):** Can be either Y or N. The service user who is a parent may have another family/whānau member to support them. FWI is Y if another family/whānau member is involved or N if another family/whānau member is not involved.

Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Service user receives support with parenting	Yes	Can be delivered in any setting	A service user who is a parent receives parenting advice and support.	<b>T50</b>	Another family/whānau member may or may not be involved in supporting the parent receiving advice. Report FWI flag as Y or N as appropriate.	Record against the parent's NHI.
Treatment for a service user	Yes	Can be delivered in any setting	A service user who is a parent receives assessment and treatment for their mental illness or problematic substance use. Family/whānau are not present.	<b>T42</b>	In this scenario, FWI is N.	Record against the service user's NHI. Not <b>T50</b> because they are receiving treatment, not parenting advice.
Discussion about a service user's care	No	Can be delivered in any setting	An elderly parent of an adult child who is a service user receives advice and support.	<b>T47</b>	Another family/whānau member may or may not be involved in supporting the other member. Report FWI flag as Y or N as appropriate.	Record against the parent's NHI. Not <b>T50</b> because this code is specifically for parenting of dependent children.

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# T51 – Integrated Pacific and clinical interventions – from 1 July 2020

Keywords	HISO PRIMHD description	Additional comments
<ul style="list-style-type: none"> <li>Medical model and Pacific interventions</li> <li>One-to one-support or group programme</li> <li>Pacific or clinical setting</li> <li>Provider arm or NGO clinical staff</li> </ul>	<p>In addition to receiving mainstream clinical interventions and services, the tangata ola/consumer also received integrated Pacific specific services and clinical interventions. (For example, application of Pacific models of practice, traditional and contemporary, which recognise the value of culture to the healing process including, but not limited to talanoa, fono, traditional and spiritual healing, reciprocity and sense of connectedness. This would also include services provided by Pacific staff and Pacific cultural advisors.</p> <p>It would also include those clinical interventions that are supported by a western approach such as Bio-medical, etc.</p>	<ul style="list-style-type: none"> <li>Use <b>T40</b> code for one-to-one support or group programmes that use both a western medical model as well as Pacific interventions, and which are usually held in a Pacific setting.</li> <li>Where integrated clinical and Pacific culturally specific activity or interventions are the <i>focus</i> of a group session or programme, use <b>T51</b> instead of <b>T07</b> or <b>T22</b>.</li> <li>There is no way to identify if cultural support was provided during all the assessment and treatment stages of a service user's journey (ie, <b>T01</b>).</li> <li>This activity type and definition are for use from 1 July 2021.</li> </ul>

**Family/whānau involvement (FWI):** Is Y if family/whānau are involved or N if family/whānau are not involved.

Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Assessment	Yes	MC	A Pacific cultural assessment is completed by clinical staff.	<b>T51</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	
Cultural and Western medical model intervention	Yes	MC	The service user participants in a Pacific intervention using cultural practices in conjunction with a Western medical model in a Pacific setting.	<b>T51</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	Integrated Pacific and clinical interventions should be recorded as <b>T51</b> .

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Use of Pacific model of health	Yes	CT	A Pacific health model or theory is used during the initial clinical assessment. Examples include Kakala (Tongan), Fa'afaletui (Samoan), Tā and Vā (Tongan), Fonua (Tongan), Fonofale (Pan-Pacific and Samoan), Te Vaka Atafaga (Tokelauan), Tivaevae (Cook Island).	<b>T51</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	
Contact with a service user for a crisis assessment	Yes	DM	A clinician and matua attend an assessment with a service user who is experiencing a mental health crisis.	<b>T01</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	Use <b>T01</b> – <i>Crisis attendance</i> . The main focus of the intervention is the crisis assessment. <b>T01</b> takes priority as the most significant activity in the service user's journey.

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## T52 – Health coaching contact – from 1 July 2021

Keywords	HISO PRIMHD description	Additional comments
<ul style="list-style-type: none"> <li>Primary support</li> <li>IPMHA</li> <li>Health coaching</li> </ul>	<p>Health coaching to support clients to manage and maintain their own health and wellbeing as a component of the Access and Choice Integrated Primary Mental Health and Addiction (IPMHA) services.</p> <p>For PRIMHD purposes, these must be delivered by people who have received Health Coach training.</p> <p>To be used by Integrated Primary Access and Choice teams only (Team Type 24).</p>	<ul style="list-style-type: none"> <li>Only for use by NGOs that have specific Integrated Primary Mental Health and Addiction (IPMHA) contracts and are already reporting data to PRIMHD for secondary specialist services.</li> <li>Only to be used by Integrated Primary Access and Choice teams (Team Type 24).</li> <li>The Ministry of Health will contact any NGO that is expected to use this code to provide more guidance.</li> </ul>

**Family/whānau involvement (FWI):** Can be either Y or N. Is Y if family/whānau are involved or N if family/whānau are not involved.

Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Health coaching in a primary care session delivered by an NGO (as part of IPMHA)	Yes	CM	The service user attends a primary care session delivered by an NGO (as part of IPMHA) and sees a Health Coach.	<b>T52</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	<b>T52</b> to be used for Health Coaching sessions.
Community support service in a primary care session delivered by an NGO (as part of IPMHA)	Yes	CM	The service user attends a primary care session delivered by an NGO (as part of IPMHA) and sees a Support Worker.	<b>T43</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	<b>T43</b> to be used for support workers delivering services as part of IPMHA.

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Activity purpose	Is the service user a direct recipient?	Activity setting example	Case scenario	PRIMHD activity type code	FWI flag	Relevant business rules or rationale
Peer support service in a primary care session delivered by an NGO (as part of IPMHA)	Yes	CM	The service user attends a primary care session delivered by an NGO (as part of IPMHA) and sees a Peer Worker.	<b>T43</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	<b>T43</b> to be used for peer workers delivering services as part of IPMHA.
Cultural support service in a primary care session delivered by an NGO (as part of IPMHA)	Yes	CM	The service user attends a primary care session delivered by an NGO (as part of IPMHA) and sees a cultural worker.	<b>T43</b>	Family/whānau may or may not be involved. Report FWI flag as Y or N as appropriate.	<b>T43</b> to be used for cultural workers delivering services as part of IPMHA.

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# Appendix: PRIMHD activity setting codes

PRIMHD definition: The activity setting indicates the type of physical setting or contact channel the activity was provided in.

PRIMHD activity setting code	PRIMHD description	PRIMHD definition	Additional guidelines to support consistent use
AV	Audio visual	Services provided over a television or video-conference link.	This includes Skype and other audio-visual applications as long as the contact was significant clinically, or service user journey significant.
CM	Community	Service provided to a tangata whaiora/consumer in a non-hospital setting which is not specifically covered by any of the other definitions.	
CT	Court	Services provided in a Court, including when the Court is held at the healthcare agency or Marae (eg, Mental Health Act Court).	'Court' includes any session where a judge resides, including Mental Health Act hearings or a room in a mental health and addiction service.
DM	Domiciliary	Services provided to a tangata whaiora/consumer in the tangata whaiora/consumer's or family/whānau member's home.	
DP	Day tangata whaiora/consumer setting	Services provided to day tāngata whaiora/consumers at a facility delivering day programmes.	
ED	Emergency department	Services provided in a hospital-based emergency department.	This excludes after-hours GP-run accident and emergency departments.
ES	Education sector	Educational institution including schools, preschool, kindergarten, school guidance counsellor, special education services.	
IP	Inpatient	Services provided in a hospital setting while the tangata whaiora/consumer is an inpatient for mental health and/or addiction.	
MC	Māori cultural setting	Services provided in a setting working under kaupapa Māori.	
NP	Non-psychiatric	Services provided in other parts of hospital.	

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PRIMHD activity setting code	PRIMHD description	PRIMHD definition	Additional guidelines to support consistent use
OM	Other social media/ e-therapy	Service provided via electronic media applications excluding text and telephone calls, irrespective of the hardware employed and which is not covered by another code.	This excludes applications with audio-visual capacity (eg, Skype). For these use AV.
OS	Onsite	Services provided in a mental health or alcohol and drug service that is the clinician/staff member's usual place of work, not specifically covered by any of the other definitions.	
PC	Primary care	Health services for individual tangata whaiora/consumers and family/whānau that have direct access to, eg, General Practitioners, practice nurses, school-based health services. They are often a tangata whaiora/consumer's first point of contact with health services.	
PH	Telephone	<p>Contact with a tangata whaiora/consumer via telephone where the intent/context of the call is considered to be of a significant nature. This excludes telephone calls, for example, where the sole intent is to book or remind a tangata whaiora/consumer of a planned appointment.</p> <p>If multiple telephone calls of a significant nature are made during a single day, these may be grouped together (where local systems allow) into one activity (eg, three follow-up phone calls of 10 minutes, 15 minutes and 20 minutes respectively can be added together into one <b>T42</b> activity with a setting of PH and a duration of 45 minutes).</p>	
PO	Police	Services provided in a police facility.	
PR	Prison	A Prison is a facility which detains people sentenced by the Courts or on remand from the Courts. This does not include Youth Justice Facilities.	
RE	Residential	Services provided in a community-based residential rehabilitative mental health or alcohol and drug service.	

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PRIMHD activity setting code	PRIMHD description	PRIMHD definition	Additional guidelines to support consistent use
SM	SMS text messaging	<p>Services provided via SMS cellular communications text messaging.</p> <p>Contact with a tangata whaiora/consumer via SMS where the intent/context of the text is considered to be of a significant nature. This excludes texts, for example, where the sole intent is to book or remind a tangata whaiora/consumer of a planned appointment.</p> <p>If multiple texts of a significant nature are made during a single day, these may be grouped together (where local systems allow) into one activity (eg, three follow-up texts taking 10 minutes each can be added together into one <b>T42</b> activity with a setting of SM and a duration of 30 minutes).</p>	
WR	Written correspondence	<p>Services provided via letter, fax or email.</p> <p>Written contact with a tangata whaiora/consumer where the intent/context of the contact is considered to be of a significant nature. This excludes, for example, written notes or administration paperwork where the sole intent is to book or remind a tangata whaiora/consumer of a planned appointment.</p> <p>If multiple contacts of a significant nature are made during a single day, these may be grouped together (where local systems allow) into one activity (eg, follow-up letters, emails or faxes 10 minutes each can be added together into one <b>T42</b> activity with a setting of WR and a duration of 30 minutes).</p>	<p>Reports/emails/letters can be reported as written correspondence only if they involve an external agency or non-mental health team within your organisation (eg, dietician).</p> <p>Referrals within mental health and addiction services in the same organisation are not to be reported.</p> <p>Clinic letters dictated after a clinic appointment are deemed to be notes of the appointment and are not to be recorded. Dictation time or letter typing time does not get recorded or added to the service user's appointment. This is indirect time and PRIMHD does not collect this.</p> <p>Time spent filling out internal forms (risk assessments, relapse prevention plans, outcome measures [HoNOS/ADOM]) is deemed to be 'note taking and documentation' and is NOT to be recorded as written correspondence.</p>
YJ	Youth Justice Residential Facility	<p>Services provided in detention facility (eg, Youth Justice facility) not registered as a formal prison.</p> <p>This does not include police cells where setting code 'PO' should be used.</p>	

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