

# Co-existing problems (CEP) service checklist

Te Pou  
o Te Whakaaro Nui

Matua Raki  
National Addiction Workforce Development

the WERRY CENTRE  
for skills & education  
mental health  
DEVELOPMENT • TRAINING • RESEARCH

## About this checklist

- This is a brief tool for mental health and addiction/AOD services to use for self-assessment, reflection and planning to develop service level co-existing problems (CEP) responsiveness and capability.
- There is no expectation that services will provide treatment outside their core business (refer to page seven for a reference to where services fit along the continuum of CEP responsiveness) rather that they will welcome and engage with all tangata whaiora regardless of which service is accessed. Assistance will be provided to access appropriate support and treatment based on mental health and addiction/AOD screening.
- Working towards CEP capability means services are able to screen, assess and identify complex mental health and addiction/AOD problems. This will result in plans that formulate and reflect integrated care and collaboration with other services.
- The checklist will assist services to monitor their progress towards meeting the goals of the CEP plans submitted by DHBs to the Ministry of Health in 2010 and 2011.
- The checklist can be used to develop an action plan that identifies work to develop service level CEP responsiveness and capability (including any workforce development needs).

## Terminology

This checklist uses the terms:

- **Co-existing problems** to refer to co-occurring complex mental health, gambling and substance use disorders, often also referred to as ‘dual diagnosis’, ‘co-existing disorders’ or ‘comorbidity’
- **Tangata whaiora** to refer to people who access mental health and addiction/AOD services, including children, youth, tamariki, rangatahi and adult ‘service users’, ‘clients’ and ‘consumers’. Tangata whaiora can be used to also refer to whole family and whānau systems.

## Using this checklist

- To achieve the greatest benefit it is important to involve as many members of the team as possible in completing the checklist. Consider a range of different perspectives across the service which includes tangata whaiora, family and whānau advisors, clinical and leadership roles.
- The team discussions, reflections and information sharing about a service’s progress towards CEP responsiveness and capability provide the principle benefit of using this checklist.
- It is important that the group completing the checklist understands that there are no ‘wrong’ answers and that the development of a service’s CEP capability is most usefully regarded as a process which is to be supported by whole team reflection and planning. The checklist recognises existing practice and provides guidance in the development of a plan to support a service to further develop CEP responsiveness and capability.
- Six monthly reviews of the checklist are recommended.
- Links to supporting documentation are available at: [www.matuaraki.org.nz](http://www.matuaraki.org.nz), [www.tepou.co.nz](http://www.tepou.co.nz), [www.acts.co.nz](http://www.acts.co.nz), and [www.werrycentre.org.nz](http://www.werrycentre.org.nz),  
(The checklist is adapted from the [Victorian Dual Diagnosis Capability Agency/Service Level Checklist](#)).

Service Objectives	How the objective is currently being met	What needs to be done to better meet the objective	Comments
<p><b>CEP responsiveness is identified as core business</b> Service plans, service descriptions and mission statements reflect a CEP focus and responsiveness that reflects that any door is the right door for tangata whaiora and family and whānau seeking help. (<a href="#">Service Delivery for People with Co-existing Mental Health and Addiction Problems-Integrated Solutions</a>).</p>			
<p><b>Effective partnerships and agreed mechanisms to ensure ‘any door is the right door’ to support and treatment</b> Formal agreements are in place between and with local DHB, NGO and PHO addiction/AOD, gambling and mental health services defining pathways of care and primary responsibility for support and treatment for tangata whaiora, family and whānau.</p>			
<p><b>Screening</b> All people seeking assistance from services are screened for mental health, substance use and gambling, using standardised and validated screening tools where appropriate. (<a href="#">Screening, Assessment and Evaluation, Choice and Partnership approach(CAPA), Problem Gambling Service - Intervention Service Practice Requirements Handbook</a>,</p>			
<p><b>Assessment</b> Mental health services carry out a thorough alcohol and other drug and gambling assessment, including where necessary information from family, whānau and other relevant agencies, when screening indicates the presence of co-existing problems. Addiction/AOD and gambling services carry out a thorough Mental State Examination when screening indicates the presence of co-existing problems. (<a href="#">Te Ariari o te Oranga</a>).</p>			

Service Objectives	How the objective is currently being met	What needs to be done to better meet the objective	Comments
<p><b>Use of outcomes information</b> Outcomes information is used by individual staff and teams to inform support and treatment. (<a href="#">PRIMHD</a>, <a href="#">outcome measures</a>, <a href="#">CLIC</a>)</p>			
<p><b>Integrated Treatment</b> Either one case manager or team provide/co-ordinate treatment and support for people presenting with co-existing problems or staff of separate services work together to formulate, implement and monitor a single documented plan in consultation and in partnership with tangata whaiora, family and whānau. (<a href="#">Te Ariari o te Oranga</a>, <a href="#">Choice and Partnership Approach(CAPA)</a>).</p>			
<p><b>Follow-up</b> Tangata whaiora with identified co-existing problems are prioritised for proactive follow-up following self or planned discharge and community agencies are actively engaged to provide ongoing support.</p>			
<p><b>Co-existing problem champion</b> The service has at least one practitioner with appropriate experience, training and seniority who is the identified CEP champion.</p>			
<p><b>Workforce co-existing problem capability</b> The service routinely carries out internal audits or inventories of the teams and individual staff members CEP knowledge and skills in order to inform workforce development needed to meet service objectives.</p>			

Service Objectives	How the objective is currently being met	What needs to be done to better meet the objective	Comments
<p><b>Outcomes and service responsiveness for tangata whaiora with co-existing problems are recorded, monitored, and regularly reviewed</b> Outcomes information about problematic substance use and gambling among tangata whaiora who use mental health services and mental health problems among tangata whaiora who use addiction/AOD and gambling services is routinely collected and systematically analysed to inform team and service development. (<a href="#">PRIMHD</a>, <a href="#">outcome measures</a>, <a href="#">CLIC</a> ).</p>			
Service Delivery: Planning and Development	How the objective is currently being met	What needs to be done to better meet the objective	Comments
<p><b>The service routinely screens for co-existing problems with all tangata whaiora accessing services</b> The results of screens will be reviewed periodically for wider service improvement and planning purposes as well as to assist support and treatment for tangata whaiora.</p>			
<p><b>The service routinely provides comprehensive assessment for tangata whaiora presenting with co-existing problems</b> Assessment information, where relevant, will be reviewed regularly as part of support and treatment planning and for wider service improvement.</p>			
<p><b>The service routinely provides integrated support and treatment for tangata whaiora presenting with co-existing problems</b> Integrated treatment and support approaches will be regularly reviewed for effectiveness and any potential</p>			

Service Objectives	How the objective is currently being met	What needs to be done to better meet the objective	Comments
for quality improvement.			
<p><b>Tangata whaiora, family and whānau are involved in advisory and planning activities</b></p> <p>Experience or a reasonable awareness of CEP could be included in the criteria for the appointment of Consumer and Family and Whānau Advisor positions.</p>			
<p><b>Tangata whaiora, family and whānau are involved in the education and training of staff</b></p> <p>Tangata whaiora, family and whānau provide regular input into or lead the development, delivery and evaluation of training packages, around co-existing problems that are inclusive of a developmental life stage perspective.</p>			
Service Workforce Development Objectives	How the objective is currently being met	What needs to be done to better meet the objective	Comments
<p><b>Ethnocultural Responsiveness</b></p> <p>Workers or teams providing services have been assessed to have ‘essential’, ‘practitioner’ and or ‘leader level’ Real Skills and are engaged with a relevant appropriate skills or competency framework that reflects the population needs of the service. (<a href="#">Lets Get Real</a>, <a href="#">Real Skills Plus CAMHS</a>, <a href="#">Real Skills Seitapu</a>, <a href="#">Takarangi Competency Framework</a>)</p>			
<p><b>Use of ethnicity information</b></p> <p>Workers collect ethnicity data to understand and respond to the cultural diversity of tangata whaiora accessing the service. Ethnicity data is used to inform support, treatment and service planning. (<a href="#">Engaging Maori in outcomes information</a>)</p>			

Service Objectives	How the objective is currently being met	What needs to be done to better meet the objective	Comments
<p><b>Staff in mental health, addiction/AOD and gambling services are co-existing problems 'capable'</b> Position descriptions reflect the expectation that all staff are or will become co-existing problem capable, i.e. have the knowledge and skills necessary to identify and respond appropriately to people with co-existing problems, including referral on as needed.</p>			
<p><b>Advanced practitioner capability</b> Position descriptions for all senior or advanced practitioner positions include advanced/enhanced co-existing problem skills and knowledge criteria. Advanced practitioners are able to support integrated assessment, treatment, and recovery; and contribute to ongoing service evaluation</p>			

\*Outcomes information: Includes the use of information that is available through

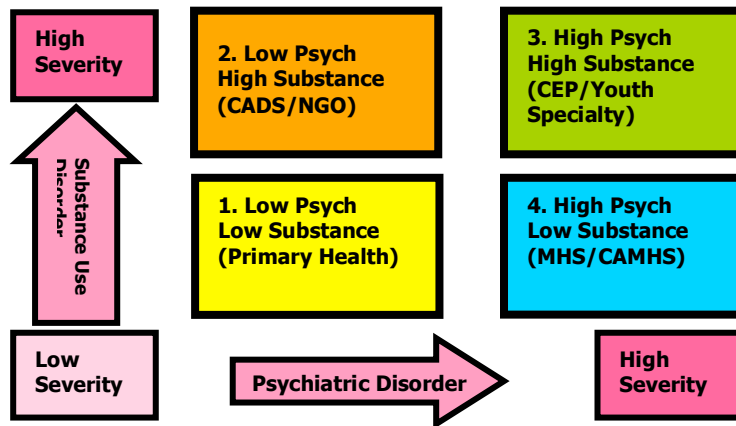
[PRIMHD](#) -Programme for the Integration of Mental Health Data

[KPI](#) - Key Performance Indicator Framework

[CLIC](#) - Client Information Collection Patient Management System

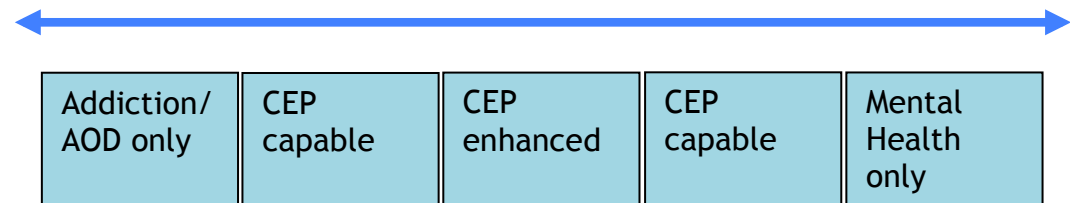
[ADOM](#) - Alcohol and Drug Outcome Measure

### Quadrants of Care



With thanks to Counties Manukau DHB

### Continuum of service capability to deliver integrated care



From:

[Service Delivery for People with Co-existing Mental Health and Addiction Problems-Integrated Solutions-2010](#)