

The following criteria will be met to Access Mental Health Need Assessment and Service Co-ordination services (NASC)

THERE ARE REDUCTIONS IN INDEPENDENT FUNCTION REQUIRING SUPPORT, THAT RESULT FROM PSYCHIATRIC ILLNESS OR MISUSE OF DRUGS OR ALCOHOL	
Which are expected to go on for six months or longer.	NASC and support services are for long term support needs not short term clinical, treatment, or crisis needs.
Which are serious and significant enough to need formal supports	Many people who are dealing with mental health issues need good treatment services, but do not require practical support services. Not all situations can be met by funded supports
There are reductions in independent function requiring support	We need to understand what these are. It might be 'reduced ability to follow through with tasks and inability to persevere.' or 'Limits to decision making' or 'Limits to motivation'
There are barriers to participation in everyday normal social cultural, vocational or recreational activities.	We need to understand what these are. This might be 'unable to work' or 'unable to attend school. "unable to attend to care of child' or 'unable to provide self cares'
THERE IS A DIAGNOSIS OF PSYCHIATRIC ILLNESS OR ALCOHOL & DRUG RELATED ILLNESS	
The diagnosis is made by a suitable health practitioner. Generally that will be a specialist or a worker in a specialist agency.	This requirement is a judgement call to some extent depending on the diagnosis. We will accept diagnosis from a range of professionals and agencies. eg A & D practitioners. e.g. Plunket Nurse Post Natal Depression service. e.g. Paediatrics. Determining the presence or not of Intellectual Disability would require a Clinical Psychologist. GP input is accepted, if the work is referenced with work by specialist services. Generally a person seeing a GP only for treatment of depression will not be accepted.
The diagnosis is still current.	Specific written information is required on diagnosis.
There is an identified clinician in place and continuing.	NASC is not a clinical service. Treatment services will be in place and ongoing clinical review and advice to NASC will be available
GOVERNMENT AND ADMINISTRATIVE CRITERIA MUST BE MET. Working jointly with other funding agencies is available	
The client lives within the geographic region of the Southern District Health Board	We do accept referrals from outside the region if the referral is made from a NASC, meets the other criteria, and if a parallel clinical to clinical transfer is in place. Family reasons and client choice is good reason for acceptance. That local services are not provided in another region is not. We discourage people who constantly seek to move.
The client meets the eligibility requirements of citizenship and residency.	The eligibilities are defined in. http://www.health.govt.nz/new-zealand-health-system/eligibility-publicly-funded-health-services/guide-eligibility-publicly-funded-health-services-0
Meets the Ministry definition	Facilitated support needs assessment is for people whose primary needs are the result of psychiatric disabilities including the misuse of drugs and alcohol, that are likely to continue for a minimum of six months and result in a reduction of independent function to the extent that support is required.
Should not have needs properly funded by the Accident Compensation Corporation.	The Accident Compensation Corporation not the DHB services funds with support needs resulting from an injury. Including head injury, and issues including Post Traumatic Stress Disorder, and assault and sexual assault.
Should not have needs properly	Mental Health NASC deals with persons of all ages including aged

funded by other DHB funding Streams.	persons if the issue is mental health or addiction only. Issues deriving from age are dealt with the older persons NASC. Disability deriving from personal health issues, eg asthma, cancer, is provided by personal health services of the DHB.
Should not have needs properly funded by the Ministry of Health and the Accessibility Agency.	The Ministry of Health and the Accessibility deal with physical, intellectual, and sensory disability. Including, but not only, people with support needs deriving from the ASD spectrum, and neurological conditions.
Should not have needs properly funded by other agencies.	This could include Child Youth and Family, WINZ or the Ministry of Education.
THE NASC SERVICE CAN DEAL WITH THE SITUATION SAFELY AND EFFECTIVELY	
Full information is provided at referral.	It is the referrer's responsibility to provide enough information so an informed decision can be made about eligibility.
There is an active case manager in place.	A NASC service establishes and monitors support services and is not able to provide practical social work, crisis work, or daily support. Generally G.P.s do not provide an active case management service.
There will be ongoing communication with the referrer.	NASC service will not accept referral from those who do not intend to have continued participation.
Appropriate treatment is in place.	NASC and subsequent support services are not treatment services. And support services are often not appropriate if treatment is not in place.