# Ngā Rau Rākau Inpatient Leave Policy

#### **MHAPPM/8013**

Approved by:	General Manager – Mental Health & Addiction			HE KAUANUANU RESPECT	
Signature:	David Warrington	Review Date:	July 2022	AKINA IMPROVEMENT RARANGATETIRA PARTNERSHIP TAUWHIRO CARE	
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#### Purpose

The purpose of this document to outline the standards to be met, to ensure all authorised leave for tāngata whaiora admitted to Ngā Rau Rākau is agreed to between the tāngata whaiora and the clinical team, and takes into consideration the tāngata whaiora's mental state, legal status, the purpose of leave and any identified risks.

This document is to be used in conjunction with MHAPPM/8953 – <u>Mental Health and Addiction Group</u> <u>Policy</u> which outlines the shared vision and expectations for the direction, values, principles, attitudes and ways of working to deliver a values based service.

## Principles

All Te Whatu Ora – Health New Zealand, Te Matau a Māui Hawke's Bay documents are based on and link back to our values; **He Kauanuanu** (respect), **Ākina** (improvement), **Raranga Te Tira** (partnership) and **Tauwhiro** (care), and are detailed so all persons are provided with clear information on the way they are expected to practice and undertake tasks.

## Scope

This policy applies to all staff and tangata whaiora within Mental Health Intensive Services.

## Definitions

Term/Abbreviation	Meaning
Leave	Any time spent outside of the ward environment which has been agreed between the tangata whaiora and the clinical team.
Short-term leave (SL)	All authorised leave for less than 4 hours.
Day leave (DL)	All authorised leave for between 4 and 16 hours.
Overnight leave (ONL)	All authorised leave where tāngata whaiora is away from the ward environment overnight. This may be for up to four (4) nights.
Extended leave (EXT)	Discharge options must be considered in the first instance if leave for longer than 5 days is being suggested. Community based support can be offered at these times.
Short Unaccompanied Leave (SUL)	Brief period of authorised time away from the ward, without supervision – time frame to specified. Initially 15 minutes, 30 minutes, 1 hour then 2 hours.
Short Accompanied Leave (SAL)	Brief period of authorised time away from the ward with supervision either from staff or family/whānau, etc – time frame to specified.

Term/Abbreviation	Meaning	
Unauthorised Leave – Informal	Informal tāngata whaiora leaving the ward without informing staff of their intention to do so. Refer to MHAPPM/8513 – <u>Ngā Rau Rākau Unauthorised</u> Leave/AWOL Procedure	
Unauthorised Leave – MHA only	Applies to tāngata whaiora under the MHA who have left without authorisation. Refer to MHAPPM/8513 – <u>Ngā Rau Rākau Unauthorised</u> <u>Leave/AWOL Procedure</u> .	
Unauthorised leave	When tāngata whaiora who is not under the mental health goes on a longer leave or does not return. Acertain risk before tāngata whaiora leaves. If they have not returned to the ward at designated time notify next of kin	
	Contact police and inform them of missing person, Inform them that it is a notification at time of call . Document same	

#### **Roles and Responsibilities**

Role	Responsibility		
Allocated Registered Nurse	Nurse allocated to oversee and provide care and treatment on a shift by shift basis.		
Psychiatrist	Doctor allocated on admission responsible for overseeing the treatment of tāngata whaiora, not under the Mental Health (Compulsory Assessment and Treatment) Act (MHA).		
Responsible Clinician	Clinician authorised and allocated to tāngata whaiora under the MHA. Responsible for the legislative requirements for leave and absent without leave (AWOL).		

## Te Whatu Ora, Te Matau a Māui Hawke's Bay Standards

- 1 Care and treatment should be provided in the least restrictive environment.
- 2 When considering leave; safety, wellness, supports and family involvement and the relation of the leave to the tangata whaiora's recovery must be considered.
- 3 Leave provisions must be documented in the tangata whatora's health record.
- 4 All tāngata whaiora will be assigned a leave status and an AWOL risk category appropriate to their care and safety needs as well as their legal status.
- 5 The leave status is assigned by in the multi-disciplinary team (MDT) at the morning meeting and recorded in the health record and entered onto the electronic whiteboard.
- 6 The assignment and review of leave and unauthorised leave status must follow an assessment of mental state, individual needs of each tāngata whaiora, assessment of risk to self and/or others and taking into consideration their legal status.
- 7 The allocated registered nurse provides leave in accordance to the assigned leave status, if the allocated registered nurse is unavailable then another registered nurse may provide leave on the basis of the tangata whatora recorded leave status.
- 8 Leave may be restricted by the allocated registered nurse when there is a significant change in the tangata whaiora's mental state. This needs to be discussed with the treating team at the earliest opportunity note the Responsible Clinician/Psychiatrist has overriding responsibility for decision concerning leave.

- 9 Any conditions of leave shall be identified by the MDT and discussed with the tangata whaiora, documented in the health record and relay to any a relevant party involved in the provision of leave (family/whānau, significant other, keyworker, etc).
- 10 For overnight and longer the frequency and method of contact between the tangata whaiora and the Ngā Rau Rākau staff needs to be confirmed and ensure that all contact details are confirmed.
- 11 Leave medications, if required, to be organised through the hospital pharmacy. All leave medications are to be checked by the RN against the medication chart prior to handing them over to the tangata whaiora.
- 12 Tāngata whaiora under the MHA are required to be given a copy of their leave paper if leave is overnight or longer. Staff need to ensure that the correct leave paper is completed and that original is given to the DAMHS administrators.
- 13 For any tāngata whaiora who is absent without leave, MHAPPM/8513 <u>Ngā Rau Rākau Unauthorised</u> <u>Leave/AWOL Procedure</u> must be followed based on current assessment, level of identified AWOL risk and legal status

#### **Measurable Outcomes**

Monitoring event reports.

## **Related Documents**

MHAPPM/8953 – <u>Mental Health and Addiction Group Policy</u> MHAPPM/8513 - <u>Ngā Rau Rākau Unauthorised Leave/AWOL Procedure</u>

#### References

<u>Guidelines to the Mental Health (Compulsory Assessment and Treatment) Act 1992. Ministry of Health</u> 2012

Ngā paerewa Health and disability services standard NZS 8134:2021

#### Keywords

Leave Absent AWOL Unauthorised

> For further information please contact the Clinical Nurse Manager, Mental Health Intensive Service