

Purchase Unit Description: Intervention Services – Brief Intervention	
PGCS-02 Outcome	People identified as problem gamblers or being at risk of gambling related harm received evidence based brief motivational support and intervention that encourages reductions in gambling related harm to them and their family.
Objectives	To provide a service specifically for people early in the course of developing gambling problems. The service aims to encourage individuals experiencing harm from gambling to recognise and acknowledge the consequences of their gambling and either make changes to their gambling behaviour or seek specialist support where necessary.
Activities	<p>Provision of Brief Intervention services will involve maintaining a primary point of contact for those experiencing some degree of gambling-related harm. The service will provide screening and brief assessment as well as brief interventions in the form of time-limited advice and intervention.</p> <p>Services will aim at primary/secondary prevention of gambling problems and will generally be offered in non-problem gambling settings used or attended by people likely to be experiencing gambling related harm (e.g. budget and financial support services, food banks, other social and health services).</p> <p>Brief Intervention services will include, but are not limited to, the following activities</p> <ul style="list-style-type: none"> • screening for suicidality/homicidality potential • assessment of gambling problems utilising tools approved by the Ministry of Health • brief interventions (as outlined in the current MoH Intervention Service Practice Requirements Handbook) • facilitation of culturally appropriate interventions or referrals • accurate education and information giving on gambling harms and available interventions • referral to more intensive problem gambling intervention services (including Facilitation) where appropriate • referral to other services where appropriate • offering all clients, provided with brief intervention services, the option of an additional contact within two weeks of the previous intervention
Key processes	Services users will be able to, as a minimum, access all of the following processes described in the 'Process Descriptions': screening, assessment, brief intervention, management of risk, service handover, support, liaison and consultation, and referral.
Reporting	<p>Six monthly narrative reports to the Ministry will use the provided report template and summarise:</p> <ul style="list-style-type: none"> • Barriers and successes over the last six month period (i.e. issues with referral processes) • Trends and patterns in client presentations • A summary of the number of clients who have progressed from brief intervention to full intervention sessions • FTE employed to deliver this service over the last six month period (noting variances and any periods of unemployment) • any other relevant information <p>Monthly client information data reporting submitted using the CLIC system (or any subsequent variations advised by the Ministry).</p>
Provided by	Services will be provided by a team or person with appropriate qualifications, competencies, skills and experience in working with people with gambling problems and/or other behavioural addiction problems, as outlined in the revised practitioners manual.
Access	Access is from any source including self-referral
Min. Delivery	1 FTE will deliver a minimum of 120 brief sessions per month (average 15 minutes each).

Purchase Unit Description: Intervention Services – Full Intervention	
PGCS-03 Outcome	All people identified as experiencing gambling related harm (from their own gambling or from the gambling of a significant other) receive evidence-based interventions that reduce the gambling related harm occurring to them and their family.
Objective	To provide a community based assessment and intervention service for people with gambling related problems that aims to minimise problem gambling related harm to the service user and their family/significant others through provision of a range of psychosocial interventions.
Activities	<p>Provision of full intervention services will include implementation of an intervention plan that addresses the problems identified during comprehensive assessment and on-going review including the service users' readiness for change.</p> <p>Intervention services will include, but are not limited to, the following activities:</p> <ul style="list-style-type: none"> • screening for suicidality/homicidality • assessment for gambling problems utilising tools approved by the Ministry of Health • education to the service user about gambling harm and management of that harm • comprehensive assessment (including alcohol and other drug use, mental health, financial and cultural variables etc) • development of an intervention and relapse prevention plans • interventions including psychosocial therapy, support and case management (for individuals and groups) (as outlined in the MoH revised practitioners manual) • referral to relevant life skills programmes, including self-help or support groups, appropriate cultural activities/services, budgeting services, relationship counselling or other follow-up services as negotiated with the service user. (Note: This refers to simple referral only, in-depth, supported facilitation services are covered in PGCS – 04) • education and planning with clients about early intervention, maintenance of health, relapse prevention, problem prevention and promotion of health.
Key processes	Services users will be able to, as a minimum, access all of the following processes described in the 'Process Descriptions': support, service handover, assessment, management of risk, case management, discharge planning, early identification, liaison and consultation, referral, screening, therapy services, treatment and rehabilitation.
Reporting	<p>Six monthly narrative reports to the Ministry will use the provided report template and summarise:</p> <ul style="list-style-type: none"> • Barriers and successes over the last six month period (i.e. issues with referral processes) • Trends and patterns in client presentations • FTE employed to deliver this service over the last six month period (noting variances and any periods of unemployment) • any other relevant information <p>Monthly client information data reporting submitted using the CLIC system (or any subsequent variations advised by the Ministry).</p>
Provided by	Services will be provided by a team or person with appropriate qualifications, competencies, skills and experience in working with people with gambling problems and/or other behavioural addictions, as outlined in the revised practitioners manual.
Access	Access may be from any source, including self-referral.
Min. Delivery	1 FTE will deliver a minimum of 60 Full Interventions sessions (average 60 minutes each) per month.

Purchase Unit Description: Intervention Services – Facilitation Services	
PGCS-04 Outcome	All people identified as experiencing gambling related harm (from their own gambling or from the gambling of a significant other) are able to access relevant services that assist them to reduce the gambling related and associated harms occurring to them and their family.
Objective	To minimise gambling related harm to individuals and their families/significant others through facilitation to health and social services
Activities	<p>Provision of facilitation services will include the development of a referral plan that addresses the problems identified during brief or comprehensive assessment and ongoing review, by facilitating access to a range of allied health and social services and preventing and minimising gambling harm psychosocial intervention services</p> <p>Facilitation services will maintain responsibility for client care until 12 months following service exit.</p> <p>Facilitation services will include, but are not limited to, the following activities:</p> <ul style="list-style-type: none"> • establishment of formal referral and relationship protocols with those services being utilised (including accountability for access, case management, exit processes, follow-up and information sharing) • development of referral plans • facilitate and support access to relevant life skills programmes, including self-help or support groups, cultural activities/services, budgeting services, relationship counselling or other follow-up services as negotiated with the service user • facilitate and support access to preventing and minimising gambling harmful intervention services including the Helpline • education in relation to early intervention, maintenance of health, relapse prevention, problem prevention and promotion of health.
Key processes	Services users will be able to, as a minimum, access all of the following processes described in the 'Process Descriptions': support, service handover, case management, discharge planning, liaison and consultation, referral
Reporting	<p>Six monthly narrative reports to the Ministry will use the provided report template and summarise:</p> <ul style="list-style-type: none"> • Barriers and successes over the last six month period (i.e. issues with referral processes) • Trends and patterns in client presentations • A summary of referrals made during the period, including analysis of where referrals have been made • FTE employed to deliver this service over the last six month period (noting variances and any periods of unemployment) • any other relevant information <p>Monthly client information data reporting submitted using the CLIC system (or any subsequent variations advised by the Ministry).</p>
Provided by	Services will be provided by a team or person with appropriate qualifications, competencies, skills and experience in working with people with gambling problems and/or other behavioural addictions, as outlined in the revised practitioners manual.
Access	<p>Access will be from Brief or Full Intervention services.</p> <p>The service will be community-based with the delivery setting reflecting the needs of the particular community. The service should be flexible in its hours to accommodate the needs of the service users (e.g. evenings or weekends).</p>
Min. Delivery	1 FTE will deliver a minimum of 60 Facilitation sessions (average 60 minutes each) per month.

Purchase Unit Description: Intervention Services – Follow-up	
PGCS-05 Outcome	All people identified as experiencing gambling related harm (from their own gambling or from the gambling of a significant other) continue to receive support to minimise any gambling related harm occurring to them and their family.
Objective	To provide follow-up and motivational support to clients for 12 months after discharge from preventing and minimising gambling harm intervention services (Facilitation or Full Intervention).
Activities	<p>Provision of follow-up services will include follow-up and motivational support at one month, three months, six month, and 12 months from after discharge from preventing and minimising gambling harm intervention services. This will include:</p> <ul style="list-style-type: none"> • advice and referral to other social and health services as appropriate • motivational support • review of relapse prevention plans (including re-assessment) • on-going liaison between service user and referral services. <p>The service may be mobile and will be provided to service users at a place that they prefer (unless safety or inaccessibility is an issue). The service will be flexible in its hours to accommodate the needs of the service user (and within parameters that ensures safe practice for the service deliverer).</p>
Key processes	Services users will be able to, as a minimum, access all of the following processes described in the 'Process Descriptions': support, service handover, assessment, management of risk, case management, discharge planning, early identification, liaison and consultation, referral, screening.
Reporting	<p>Six monthly narrative reports to the Ministry will use the provided report template and summarise:</p> <ul style="list-style-type: none"> • Barriers and successes over the last six month period (i.e. issues with referral processes, contacting clients for follow-up) • Trends and patterns in client presentations • FTE employed to deliver this service over the last six month period (noting variances and any periods of unemployment) • any other relevant information <p>Monthly client information data reporting submitted using the CLIC system (or any subsequent variations advised by the Ministry).</p>
Provided by	Services will be provided by a team or person with appropriate qualifications, competencies, skills and experience in working with people with gambling problems and/or other behavioural addictions, as outlined in the revised practitioners manual.
Access	Access is from Full Intervention and Facilitation services.
Min. Delivery	1 FTE will deliver a minimum of 120 follow-up sessions per month (average 15 minutes each) per month.

Part 2 - Division 3

Primary Prevention Services (Public Health Services) Specification

1. DEFINITIONS:

1.1 Organisations:

1.2 In this Agreement an “organisation” is ‘...a social arrangement which pursues collective goals, which controls its own performance...’, this may include formal or informal social relations e.g. social groups, or more formal relations (e.g. a company or charitable trust).

1.3 To provide some guidance on what can be considered a large, medium or small organisation the Ministry considers the following aspects of an organisation to be relevant:

- size (people employed or client base)
- complexity (number of stakeholders, levels of signoff, clear delegations, no specific delegations or mandates)
- structure (national, regional, local, formal, informal).

1.4 The Ministry believes that the more complex an organisation the more work will be required to effect long term, sustainable change in the way the organisation operates or delivers. Other characteristics should be considered on a case-by-case basis and discussed with your Ministry contract manager.

1.5 The definitions set out below broadly outline the Ministry’s view of what will constitute large, medium, or small organisations.

1.6 **Large Organisations:**

Formal structures that have over 100 employees, and/or service over 1000 clients per annum, typically have multiple levels of signoff, may operate based on direction from a head office, and commonly deliver across national or regional boundaries.

1.7 **Medium Organisations:**

Formal or less commonly informal structures that have between 20-100 employees, and/or service over 500 clients per annum, typically have one or two levels of signoff, although may have flat or consensual decision making, and may deliver across regional boundaries or just to a local area.

1.8 **Small Organisations:**

Either formal or informal structures that have less than 20 employees, and/or service less than 500 clients per annum, typically have only one level of signoff, and commonly only deliver to local boundaries.

1.9 **Projects**

1.10 In this Agreement a “project” is an activity that has the following characteristics:

- is temporary (i.e. has a start date and end date, although this does not necessarily mean short in duration) – as opposed to operations which are continuous and repeating

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- delivers discrete and often unique results – as opposed to operational delivery that deliver the same or almost the same results consistently over time.
- may be made up of a number of smaller subprojects.

1.11 To provide some guidance on what can be considered a large, medium or small project the Ministry has considered the following aspects of a project to be relevant:

- scope (local, regional or national project, single site of delivery, multiple)
- time / schedule (short weekend project, two year multiple stage project)
- cost / budget (expensive project that needs considerable planning, fundraising and signoff, small project that can be easily resourced)
- quality (project needs very high quality standards, a quick budget approach would be reasonable)
- human resources (how much time is required, what skills and competencies are necessary)
- stakeholders (who else needs to be involved, to what level, what will they be asked to commit, what signoff will they require, who has the lead role)
- external factors and constraints (will the environment the project is being delivered to change, is there resistance or opposition to the project)

1.12 The Ministry believes more complex projects require more analysis and planning on most of these aspects, and as a result require more work. Other characteristics should be considered on a case-by-case basis and discussed with your Ministry contract manager.

1.13 The definitions set out below broadly outline the Ministry's view of what will constitute large, medium, or small projects.

1.14 **Large Projects:**

Involve multiple stakeholders all committing financial or in kind resources, may be being delivered at a national or regional level, involve over twelve months planning and delivery, and over 75% of the organisation's human resources.

1.15 **Medium Projects:**

Involve multiple stakeholders, some of who are committing financial or in kind resources, may be being delivered at regional or local level, involve between six and twelve months planning and delivery, and between 25 and 75% of the organisation's human resources.

1.16 **Small Projects:**

Involve few external stakeholders, commonly only being delivered at a local level, involve up to three months planning and delivery, and up to 25% of the organisation's human resources.