Aged Person’s Mental Health Program

Orientation Booklet
2012
ABOUT NORTHWESTERN MENTAL HEALTH

NorthWestern Mental Health (NWMH) is one of the largest publicly funded providers of mental health services in Australia. Its aim is to ensure that the communities who live in the northern and western regions of metropolitan Melbourne are provided with quality mental health services that are responsive to their needs, based on best practice and delivered by the best clinicians.

A clinical division of Melbourne Health, NorthWestern Mental Health operates in partnership with Northern Health (Northern Hospital, Broadmeadows Health Service and Bundoora Extended Care) and Western Health (Sunshine, Williamstown and Western Hospitals) to deliver a comprehensive range of specialist, community and hospital-based mental health services.

This service evolved primarily out of the closures of Footscray Psychiatric Hospital in 1996 and Royal Park Psychiatric Hospital in 1998, and the redevelopment of the North Eastern Health Care Network in Melbourne in 1995.

NorthWestern Mental Health (NWMH) is a service that provides a continuum of care for those with a serious mental illness in northern and western metropolitan Melbourne - a catchment of 1.2 million people. These services include crisis assessment and treatment, acute inpatient, rehabilitation, community-based treatment, ongoing case management, residential and specialist services.

Annual activity:

- More than 4,000 acute admissions
- Community treatment for 12,500 people
- 430,000 outpatient and community contacts

Of the 420 beds operated by NorthWestern Mental Health:

- 168 are acute
- 146 are aged residential
- 80 are community rehabilitation
- 26 are specialist rehabilitation

Multi-disciplinary workforce

NorthWestern Mental Health's 1,300 person strong workforce is primarily comprised of the disciplines of medicine, nursing, occupational therapy, clinical psychology and social work. Multidisciplinary teams of these professionals work in all areas of the service.

The combination of these specialist staff, together with strong academic partnerships, has proven to be the best way of providing a sustainable high quality mental health service to Northwest Melbourne.

Mission Statement

To ensure the delivery of comprehensive and integrated mental health services by building on the State and Commonwealth reform objectives for mental health for residents of the western and northern regions of metropolitan Melbourne.

Vision Statement

NorthWestern Mental Health will be a leading edge mental health program renowned for ensuring the delivery of easily accessible, timely and responsive quality mental health services in an environment that supports learning, research and continuous quality improvement.

We Value

- People
- Quality Care
- Innovation
- Teamwork
- Client, Carer & Staff Rights
- Education, Research & Evaluation
NWMH locations
NorthWestern Mental Health operates out of all hospitals in northwest metropolitan Melbourne and a number of independent locations. The formation of NWMH has seen the redistribution of inpatient mental health facilities from the inner city to meet the needs of the growing populations in the outer west and north - a catchment area of over 1.2 million people. Major sites serviced by NWMH:

NWMH Service Area & Sites

Services across the lifespan
NorthWestern Mental Health provides services to people across the lifespan who live with a serious mental illness. These services can be split into three streams:

- Youth (18 - 24 years*)
- Adult (18-64 years*)
- Aged (65+ years)
  - The overlap of the age groups between youth and adult services promotes a continuum of care for those with a serious mental illness who may enter the service for the first time e.g. first episode psychosis.
  - NWMH have a centralised triage which directs all referrals to the appropriate service

Youth Mental Health Services – ORYGEN
The youth mental health service, called ORYGEN Youth Health, provides mental health services to young people in their teens and 20s, and their families. ORYGEN employees about 150 staff who provide a
coordinated model of care that has an early intervention focus. A research facility called ORYGEN Research Centre is a well-integrated research program that contributes on a national and international level to further understanding young people's mental health. The following services form a coordinated model of care for youth:

- **Youth Access Team (YAT)** - a multi-disciplinary, mobile assessment, crisis intervention and community treatment team which is the first point of contact for the Early Psychosis Prevention and Intervention Centre (EPPIC) and Older Adolescent Service (OAS). It provides a triage service, assessment for new referrals and community-based treatment.

- **The Early Psychosis Prevention and Intervention Centre (EPPIC)** - assists young people between the ages of 15-29 (inclusive) who are experiencing first-episode psychosis. The Centre focuses on early identification and treatment of primary symptoms of psychotic illness, and provides care in inpatient, home-based or community settings using individual, family and group therapies.

- **Personal Assessment and Crisis Evaluation (PACE) Clinic** - provides a service to young people, aged between 14-30 years, who appear to be at high risk of developing a psychotic disorder. The Clinic plays a key role in the early detection of psychosis - the aim being to delay its onset, and hopefully prevent its development.

- **EPPIC Continuing Care** - community case managers coordinate young people's care and involvement with other aspects of the EPPIC program. The community case manager team has the capacity to provide home-based treatment and crisis intervention in collaboration with the other key elements of the EPPIC program.

- **EPPIC Inpatient Service** - aims to meet the short-term treatment needs of young people experiencing an episode of psychosis, who reside in western metropolitan Melbourne. The Service provides specialised assessment, treatment and care and aims to reduce the severity and promote the remission of symptoms of psychosis.

- **EPPIC Statewide Services** - provides mental health agencies throughout Victoria with access to expert clinical knowledge in the area of first episode psychosis. Clinical staff conduct secondary and tertiary consultation, staff training, site visits, workshops, community and professional education, resource development and a Graduate Diploma in Mental Health Sciences (Young People's Mental Health).

- **Older Adolescent Service (OAS)** - assists and provides treatment for young people between the ages of 15-17 who are experiencing common mental health problems such as depression, anxiety disorders, eating disorders or emerging personality disorders.

- **Intensive Mobile Youth Outreach Service (IMYOS)** - provides an intensive outreach treatment, case management and support service to young people and their families and wider system.

**Adult Mental Health Services**

NorthWestern Mental Health provides mental health services to adults aged between 16 and 64 years who have, or are at risk of developing, a severe mental illness.

Four adult area mental health services operate within the following geographical boundaries:

- **Inner West Area Mental Health Service** - Cities of Melbourne and Moonee Ponds.
- **Mid West Area Mental Health Service** - Cities of Brimbank and Melton, including Sunbury.
- **North West Area Mental Health Service** - Cities of Hume and Moreland.
- **Northern Area Mental Health Service** - Cities of Whittlesea and Darebin.

Each adult area mental health service is based on a common model of service provision and provides the following services and facilities:

- **Continuing Care Service** – provides assessment, treatment and consultancy services, as well as continuing care and case management.
• **Crisis Assessment and Treatment Service (CATS)** – a 24-hour service that acts as a ‘triage’ point for all referrals and provides assessment and referral to the most appropriate service. The CATS also provides short-term treatment for people as an alternative to hospital admission.

• **Mobile Support and Treatment Service (MSTS)** – provides long-term treatment, rehabilitation and support to people with severe mental illness who are living in community settings, including special residential services and boarding houses.

• **Community Care Unit (CCU)** – provides treatment and rehabilitation for people with long-term mental illness in a community-based residential setting, with 24-hour nursing support. The aim of the CCU is to equip individuals with the daily living skills they require to live independently.

• **Acute Inpatient Unit** – provides short-term, intensive treatment for people with a serious mental illness.

• **Adult Mental Health Rehabilitation Unit** - at Sunshine Hospital is a regional service, managed by Mid West Area Mental Health Service, and provides secure, intensive treatment for people with persistent psychosis who are at risk to themselves and others.

**Aged Persons' Mental Health Program**

The specialised area of aged persons’ mental health is one that is continually growing in terms of demand for service - reflecting both the nation’s ageing population and incidence of mental health in the community.

The interaction of two key factors within this sector – the frailty and lack of independence that comes with age, and the additional complexity of mental illness - means that people being cared for in this program have extremely high needs.

North Western Aged Persons’ Mental Health Program is a highly specialised and comprehensive service for people aged 65 years and over. It includes three acute inpatient units, three aged psychiatry assessment teams and five residential accommodation facilities (including psycho geriatric nursing homes and hostels) comprising:

• **Inpatient Care** - provides voluntary and involuntary short-term management during an acute phase of mental illness, until recovery enables the person to be treated in a community-based setting.

• **Residential services** - inpatient services for people with high levels of persistent cognitive, emotional or behavioural disturbance.

• **Aged Psychiatry Assessment and Treatment Teams** - provide assessment, treatment, rehabilitation and case management, helping to prevent unnecessary hospitalisation and minimise the length of stay in acute inpatient facilities. The specialist multi-disciplinary Aged Psychiatry Assessment and Treatment Teams (APATT) service the entire North Western and South Western regions of metropolitan Melbourne. They are key components of the Program and operate within geographical boundaries:

APMH Triage operates Monday –Friday 0830-1630 (outside these times the centralised triage takes all calls and then refers them back during office hours) Referrals are made via the Aged Psychiatry Triage Service, based at the Sunshine Hospital. Details required include:- Presenting problems and reason for referral
- Medical and psychiatric history
- Other services involved
- Current medications
- Level of urgency
- Level of risk
Mid West and South West APATT - Cities of Brimbank and Melton (including Sunbury), Hobson’s Bay, Maribyrnong and Wyndham.

North West and Inner West APATT - Cities of Hume, Moreland, Moonee Valley and Melbourne.

Northern APATT - Cities of Darebin (Preston side), Whittlesea, Nillumbik and Banyule

These teams are the first point of contact for elderly people who have been referred to the program for assistance. They work with the individual and their family to assess the severity of the person’s mental illness and recommend an appropriate form of treatment and/or support. In all cases, there is a shared care arrangement with a general practitioner.

Supporting people with less severe mental illness to live in Commonwealth run, community-based residential settings has become an important priority for North Western Aged Persons’ Mental Health Program. A multi-disciplinary team of specialist staff work in partnership with community-based nursing homes to equip staff with the skills necessary to manage the challenging behaviours often associated with mental illness in the elderly. (RSP only covers BHS and SH areas)

Specialty Services

A number of regional and statewide programs are known nationally and internationally for innovative approaches to service delivery, and for pioneering work in clinical research. These include:

- CLIPP
- Dual Diagnosis – SUMITT
- Dual Disability
- Eating Disorders
- Mental Health Training and Development Unit (MHTDU)
- Neuropsychiatry
- Primary Mental Health Teams
- Research & Ethics Committees
### Venue Contact details

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<thead>
<tr>
<th>CLINICAL LOCATIONS</th>
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<tr>
<td><strong>Broadmeadows Aged Persons’ Mental Health Unit</strong></td>
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<td><strong>Shift Times</strong></td>
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<tr>
<td><strong>Broadmeadows Health Service</strong></td>
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<tr>
<td>35 Johnstone Street</td>
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<tr>
<td>Broadmeadows 3047</td>
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<tr>
<td><strong>Unit Manager</strong></td>
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<td><strong>Tel: 8345 5487</strong></td>
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<td><strong>North West-Inner West APATT</strong></td>
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<td><strong>Shift Times</strong></td>
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<td><strong>North West-Inner West APATT</strong></td>
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<tr>
<td>1A 362 Bell St</td>
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<tr>
<td>Coburg/Pascoe Vale 3058</td>
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<tr>
<td><strong>Clinical Manager</strong></td>
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<tr>
<td><strong>Tel 8371 8200</strong></td>
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<tr>
<td><strong>Senior Nurse</strong></td>
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<td><strong>Sunshine Aged Persons’ Mental Health Unit</strong></td>
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<td><strong>Sunshine Hospital</strong></td>
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<td>176 Furlong Rd,</td>
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<td>St Albans 3021</td>
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<td><strong>Unit Manager</strong></td>
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<td><strong>Tel 8345 1335</strong></td>
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<td><strong>Sunshine APATT</strong></td>
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<td><strong>Tel 8345 1335</strong></td>
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<tr>
<td><strong>Acting Senior Nurse</strong></td>
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<tr>
<td><strong>Tel 8345 1465</strong></td>
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<td><strong>Aged Person’s Mental Health Unit, Kath Atkinson Wing</strong></td>
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<td><strong>Bundoora Extended Care Campus</strong></td>
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<td><strong>Bundoora Extended Care Campus</strong></td>
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<tr>
<td>1231 Plenty Rd</td>
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<td><strong>Unit Manager</strong></td>
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<tr>
<td><strong>Tel 94953165</strong></td>
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<td><strong>Northern APATT</strong></td>
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<td><strong>Bundoora Extended Care Centre</strong></td>
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<td><strong>Tel 94955122</strong></td>
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<tr>
<td><strong>Senior Nurse</strong></td>
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<td><strong>Tel 94955122</strong></td>
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**AGED PERSONS’ MENTAL HEALTH PROGRAM (Executive office)**

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<thead>
<tr>
<th></th>
<th>Tel:</th>
<th>Program Manager</th>
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<tbody>
<tr>
<td>Harvester Clinic</td>
<td>9288 7159</td>
<td>Mr George Osman</td>
<td>9288 7150</td>
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<tr>
<td>4c Devonshire Rd</td>
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<td>PA / Reception</td>
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<td>Sunshine</td>
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<td>Natalie Lane</td>
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<tr>
<td>Area Senior Nurse</td>
<td>92887153</td>
<td>Susan Ireland</td>
<td>92887163</td>
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<tr>
<td>Robyn Garlick</td>
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<td>Mobile: 0419387066</td>
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<tr>
<td>Clinical Nurse Consultant</td>
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<tr>
<td>Clinical Nurse Educator</td>
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*MidWest Area Mental Health Service*

Harvester Clinic  
Aged Persons Mental Health (upstairs)  
4 Devonshire Rd  
Sunshine

- Parking  
  Available behind Mercy Hospice - Sunshine Plaza car park
The entrance to APMHU is off Robinson St

Parking is available at BHS entrance from Johnston St and costs $5.00 per day. You will need coins to pay on entry to the car park. Drive or walk through the car park to reach the aged unit. The APMHU is unable to be accessed via the corridors unless you have a swipe card.

Staff Facilities the unit provides tea and coffee, but it is advised that you bring your own mug/cup. There is access to a microwave and fridge in the staff kitchen area. There is a cafeteria at the hospital if you wish to buy your lunch. No kiosk facilities after 430 pm so need to bring own food for evening meal.

Student Keys undergrads are able to obtain keys for the unit, from the shift leader each day.

Public Transport Broadmeadows train station is located on Pascoe Vale Rd, on Craigieburn Line
APATT 1A 362 Bell Street Pascoe Vale/Coburg

The entrance to APATT is located off Greenwood St.

**Parking:** there is parking available at no cost on Sussex St or alternatively there is parking available behind IGA/Pharmacy /Offices for approx $3.00 per day. You will require gold coins.

**Facilities:** Tea and coffee are provided. If you wish to bring your own lunch there is a microwave and refrigerator available. There are eateries located close to the office if you wish to purchase your lunch.

**Public Transport:** Tram Route 55, stop number 45. Travels down Melville Rd
Bundoora Extended Care Campus

Parking is available at BECC. The cost is approximately $5.00 per day and requires gold coins.

Staff Facilities: The unit provides tea and coffee, but it is advised that you bring your own mug/cup. There is access to a microwave and fridge in the staff kitchen area. There is a cafeteria at the hospital if you wish to buy your lunch, but you will need to bring your own evening meal.

Public Transport: Tram stop number 65 or 66 Plenty Road Bundoora tram.
**Hospital Entrance** is located via the public car park. The cost of parking is approximately $5.00 per day; You will require gold coins for the pay and display ticket. At the hospital you will have to present your student ID to get staff rates. Please be advised that the car park gets full and you may want to arrive a bit earlier to ensure you can find a park.

**Staff Facilities** the unit provides tea and coffee, but it is advised that you bring your own mug/cup. There is access to a microwave and fridge in the staff kitchen area. There is a cafeteria at the hospital if you wish to buy your lunch and evening meal.

**Public Transport** Ginnifer Station is the nearest station. Sydenham Line.
Service Expectations

- **General issues**
  - **Shift work:** It is expected that nursing students work a mixture of afternoon and morning shifts.
  - **Cars:** Students are not covered by our fleet insurance and should not drive our fleet vehicles.
  - **Learning objectives/evaluation:** Students are expected to negotiate their learning objectives at the start of placement with their preceptors. The latter will complete the evaluation tools. Both the objectives and evaluation should use the university requirements and documentations.

- **Confidentiality**
  - **Consumers:** please be mindful not to discuss or disclose information about consumers without seeking authorisation first. Consumer confidentiality must be maintained subject to Section 120A of the Mental Health Act. Discuss with the person in charge when being queried for information about consumers prior to divulging information.
  - **Your own:** be mindful not to disclose personal details to consumers (boundary issues). Should you have difficulties due to having experienced a traumatic event or illness, please discuss this with the Area Senior Nurse or the team leader in the clinical program. This is so we can organise support as required and maintain your confidentiality.

- **Boundaries**
  - As nurses we need to be mindful of what is acceptable behaviour. The client group in mental health are vulnerable individuals and as nurses we are often in a position of power over the consumer. We need to exercise care not to abuse this position.

- **Documentation**
  - During your clinical placement you are expected to contribute to client care and therefore write in the clinical files (notes, handovers.). Please ask about the North Western Mental Health documentation guidelines/policy.
  - Please use black ink only, do not use whiteout, errors are to have one line struck through, signed and dated with an explanation why there was an error.
  - All entries must be objective, descriptive, brief, accurate, clear and legible. Each entry must be timed and dated, with your signature and designation clearly printed.
  - All your documentation need to be countersigned by a preceptor or registered nurse.

- **Medication**
  - Please familiarise yourselves with the medication used on the clinical placement. You will not be asked to dispense the drugs but can be asked to help give the drug to the client. Make sure you know who the client is and if in doubt decline in doing so.
  - Similarly prior to giving an Intramuscular (IM) injection, ask to be taught how to do so if you have not previously given an IM.
  - Drug administration and IM injections are done under the supervision of a registered nurse. That registered nurse is accountable for the actions of the student nurse.

- **Response to emergency procedures**
  - Familiarise yourself with the emergency procedures for your unit.
    - Find out where the fire exits are, the fire points, the assembly points…
    - Find out what to do in a code grey (response to aggression)
    - Find out why a code grey is used and the reason behind our clinical response.
    - Who do you need to call/inform and how to get help
    - Ensure you carry a personal alarm if one is used on the unit you are placed at. (If available for students)

- **Sickness and absenteeism.**
  - If sick or unable to come in to the placement you are expected to contact the unit to inform them of this as well as the Senior Nurse.
  - We often worry if students do not come in, as we do not know if they may have had an accident along the way.

- **No lift/ No smoking**
  - North Western Mental Health has a no lift (of consumers and objects) policy.
  - Smoking is now banned from all hospitals and community units across Victoria.
• **Dress codes**
  - Please respect the clients and other staff by ensuring that you dress appropriately for work. We recommend smart casuals.
  - Thongs, big loop earrings, leggings, bicycle and casual shorts, low cut blouses/t-shirts and miniskirts are generally not acceptable. Be careful that the material of your clothes isn’t too sheer and thus revealing.

• **Dangerous goods/Illlicit Substances**
  - Under no circumstances are drugs, alcohol or weapons (even ceremonial) allowed to be carried whilst on placement.
  - Possession of these items will result in termination of the placement, report to the university and police if necessary.
  - No should students attend work whilst under the influence of drugs or alcohol.

• **Keys**
  - Some clinical placements provide keys/swipe cards. These must be returned on completion of placement or at the end of the shift.
  - Loss of the key/swipe card must be reported to the preceptor/nurse in charge immediately.
  - Medication keys should not be handed to students at any time.

• **Incidents**
  - All incidents including work related injuries, illnesses or near misses must be reported to the nurse/person in charge immediately. The Area Senior Nurse must also be contacted.
  - An incident report must be completed prior to the end of the shift in order to meet legislative requirements under the Workplace Health and Safety Act and to manage the risk and likelihood of the event happening again.
  - Every precaution should be taken to avoid sharps injury/body fluid exposure. Your preceptor, nurse in charge/CNE can be accessed to provide information according to specific placement. However if such an event occurs it is important to follow NWMH Policy guidelines and reporting to the person in charge immediately.
  - Debrief/Defusing is available following an incident. Please ask the person in charge, CNE, Team Leader or Area Senior Nurse for support when needed.

• **ECT**
  - Nursing Students may attend ECT only after having discussed with their preceptor/CNE/team leader the ECT procedures, clinical indications, effects, outcomes and the legal aspects.
  - Where possible the consent of the consumer should be sought.

• **Surveys**
  - Commencement survey
  - Exit Survey
Aged Persons Mental Health Program
Orientation Checklist

Name:
University:
Date:

- Outline of unit and multidisciplinary team and roles
- Emergency codes Fire Policy / Procedure – Alarms, Extinguishers, Phones, Evacuation Points, Exits.
- Location of the emergency equipment, emergency codes, duress alarm system. (Ascom) what is expected in an emergency
- Discuss clinical placement and clinical learning objectives.
- Discuss what is expected from undergraduates
- Discuss routine of the unit.
- Documentation and Handover Explanation given in regards to paperwork and documentation.
- Alert to clients with Behavioural Disturbance.
- OH & S Issues
- Back Attack – No Lift Policy:
- Confidentiality Standards
- Professional Boundaries
- Clinical placement rostering
- Orientation to layout of the unit (tour).
- Introduction to all staff, clients.
- On line pre-placement survey
- Post placement survey

Please do not hesitate to ask any questions.
Responsibilities of Undergraduate Student Nurse

- Understand and respect resident rights.
- Maintain resident confidentiality at all times.
- Be aware of and maintain professional boundaries in the nurse-client relationship.
- Be punctual at all times. If you are running late, notify the facility as soon as possible.
- Inform the nurse in charge if you need to leave the facility and when you have returned.
- If you are sick, notify the nurse in charge before commencement of the shift. Give plenty of notice where possible.
- Wear uniform and photo ID at all times. Adhere to professional dress code.
- Participate in orientation to relevant areas of the facility.
- Familiarise yourself with the policies and procedures of the facility, especially manual handling, infection prevention and emergency protocols.
- Keep personal belongings to a minimum as there is very limited storage space available in the facilities and responsibility is not taken for missing belongings.
- Please ensure that you wash, dry and put away, any dishes that are used in the staff room.
- Don’t be afraid to ask questions! You are here to learn, so make the most of the opportunities presented to you.

What the preceptor will provide on clinical placement

The preceptor will mentor the student on the mental health placement and assist the student to understand the work conducted on the mental health placement.
The preceptor will assist the student to meet their clinical learning goals by assessing their competency as a student nurse on a mental health placement.
The preceptor will also assist the student to complete their clinical portfolio and complete the Clinical Appraisal Tool.
The Competency assessment and the clinical portfolio require the preceptor to assess the nursing student’s performance whilst on the clinical placement.

APATT

To assist you in developing your knowledge in mental health nursing and achieve your learning objectives, we have set some objectives. At the end of your placement you will have:
- Greater understanding of Community Mental Health Nursing.
- Understanding of the role of APATT and multidisciplinary process
- Increased your knowledge of mental illness
- Better understanding of the Mental Health Act and how it is used in the community setting.
- Knowledge of the different types of common medication used in mental health.

You will be allocated a preceptor who will facilitate your learning. Please discuss your objectives with your preceptor.
**GOALS:**
Tick when achieved.

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<th>Goal</th>
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<tr>
<td>Observe a new assessment</td>
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<td>Observe a medical review</td>
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<tr>
<td>Attend Clinical review</td>
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<tr>
<td>Perform Intra Muscular Injection (IMI)</td>
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<tr>
<td>Session with RSP (Broadmeadows &amp; Sunshine)</td>
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<tr>
<td>Perform MMSE (cognitive testing)</td>
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<td>Attempt to write one MSE daily</td>
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<td>Session with Triage (Sunshine)</td>
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At the end of your placement (as part of your assessment) you will be able to describe to your preceptor using the MSE:
- Psychotic disorder
- Depressed presentation
- Manic presentation

You will also be able to define the following terms:
- Flight of ideas
- Pressure of speech
- Affect
- Ideas of reference
- Thought withdrawal and insertion
- Delusions
- Hallucinations (name the 5 and which is most common)
- The difference between and illusion and hallucination
- Dementia

List two medications and side effects for each disorder.

**Role and Responsibility of the Nurse Preceptor**

**Definition:**

“an experienced practitioner, who is formally assigned for a fixed period of time, to provide transitional support, to an undergraduate or clinician, into a new practice setting, through role modelling and teaching”

The responsibility and role of the preceptor:
- Welcome the undergraduate into the clinical area and introduce them to other staff
- Orientate students to the physical environment and emergency procedures
- Model professional practice in interactions and behaviours at all times
- Demonstrate and share specialist clinical expertise and knowledge
- As the preceptor you are the primary person responsible for their learning. If at any time you are unavailable you will make alternative arrangements.
- Work with the undergraduate to ensure that clinical objectives and APATT goals (see attached) are achieved
- Advocate for the undergraduate to achieve their clinical learning needs
- Provide feedback of their clinical learning and address any issues or concerns as they arise
- Provide support and regular debriefing to the undergraduate
- At the end of the placement you will meet with the undergraduate and complete the APATT assessment:
  1. MSE of a psychotic, manic and depressive presentation
  2. Two medications for each presentation and possible common side effects
  3. Terms/definitions for each presentation and possible common side effects
- Complete the university clinical assessment.