

Facilitator's manual

Community mental health nurse – transition to
speciality practice competency framework

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Where the term 'Aboriginal' is used it refers to both Aboriginal and Torres Strait Islander people. Indigenous is retained when it is part of the title of a report, program or quotation.

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Introduction to this learning package

This learning package provides a structured and supported learning pathway for mental health nurses transitioning into specialty practice in a community setting. The facilitator's manual provides a best practice framework for nurse educators, mentors and clinical supervisors to support transitioning mental health nurses through skill development, assessment and evaluation. Skill development is divided into knowledge, skills and attitudes, which is based on a validated model by George E Miller. Miller's pyramid is easily applied and has been used as a model for attaining and evaluating competencies.

The package is based on a 12-month transition to specialty practice program and is structured into domains. Each domain includes learning outcomes, demonstrated skill development and learning activities. A participant's manual sits alongside the facilitator's manual to support the transition to specialty practice mental health nurse with self-directed learning and reflective practice.

A two-week orientation for transitioning nurses is encouraged to support familiarity with team structures, organisational and clinical processes, occupational health and safety procedures and local primary and community resources.

Occupational health and safety

Safe work practices are essential and shaped by an understanding of the context in which care is provided. Transition to speciality practice mental health nurses need to be familiar with community policies and guidelines pertaining to home visits, aggression management, local safety procedures (including duress alarms and staff tracking processes), infection control protocols, escalation procedures and risk assessments to minimise the risk to self and others. Priority should be given to completing de-escalation and aggression minimisation and emergency procedures training early in the transition term.

Home visits

A supervisor and mentor must be satisfied that the transition to speciality practice mental health nurse is confident and equipped to practise safely prior to performing independent home visits.

Points to consider when evaluating

The mental health nurse:

- prepares a home visit plan by reviewing risk assessments before the visit
- reflects on environmental and personal risks and considers the resources necessary to maintain safety (including the number of clinicians, the need for emergency services and the circumstances in which it is not safe to undertake a planned visit)
- reliably escalates concerns and consults with senior staff as required
- is familiar with and adheres to local safety procedures (including use of mobile phones, duress alarms and staff tracking processes)
- does not make assumptions about safety and continually assesses safety at pivotal points, for example, before entering a building
- demonstrates an ability to identify exit points and is aware of maintaining access to these
- is observant in their environment and takes note of potential harms (such as physical hazards, drug paraphernalia and potential weapons)
- can identify circumstances in which they would terminate a community visit and is confident in seeking assistance.

Program content

Best practice principles underpinning domains	Domain	Final stage
<p>Recovery-oriented practice</p> <p>Supported decision making</p> <p>Responding to diversity</p> <p>Trauma-informed care</p> <p>Family/network-inclusive practice</p> <p>Least restrictive practice</p> <p>Healthcare rights</p> <p>Human rights</p>	<p>Stage 1: Months 1–3</p> <ol style="list-style-type: none"> 1. Best practice principles 2. Community mental health assessment <ol style="list-style-type: none"> 2.1 Mental state examination 2.2 Risk assessment 2.3 Substance use and addiction 2.4 Physical health 2.5 Diversity and culturally responsive practice 2.6 Formulation 2.7 Working knowledge of diagnostic, classification and outcome measurement tools 3. Medication management 4. Triage 5. Mental Health Act 2014 6. Aggression in a community setting 7. Clinical documentation <p>Stage 2: Months 4–6</p> <ol style="list-style-type: none"> 8. Therapeutic relationships 9. Treatment and recovery plans 10. Working within a model of care and engaging primary and community services 11. Professional standards, conduct and liaison with others 12. Clinical communication <p>Stage 3: Months 7–9</p> <ol style="list-style-type: none"> 13. Therapeutic approaches and psychological therapies 14. Working with families, carers and other important support networks 15. Group programs (optional) 16. Discharge planning 17. Research and evaluation <p>Child and adolescent mental health</p> <ol style="list-style-type: none"> 18a. Child and adolescent development 18b. Child and adolescent assessment <p>Older persons mental health</p> <ol style="list-style-type: none"> 19. Functional assessment 	<p>Stage 4: Months 10–12</p> <p>Utilised for consolidation and program completion</p>

Stage 1: Months 1–3

Domain 1: Best practice principles

Recovery-oriented practice	Network/family-inclusive practice
Supported decision making	Least restrictive practice
Responding to diversity	Healthcare rights
Trauma-informed care	Human rights

Learning outcomes

Having completed Domain 1 the mental health nurse will embed key principles within the *Mental Health Act 2014* (Vic), Nursing and Midwifery Board of Australia practice standards, Australian College of Mental Health Nursing practice standards, *National standards for mental health services* (2010), *National standards for mental health workforce* (2013), National Safety and Quality Health Service (NSQHS) standards and the *Australian Charter of Healthcare Rights* within all domains of practice.

Demonstrated skill development

Knowledge

The mental health nurse will demonstrate a theoretical understanding of the key principles that underpin best practice in mental health care, specifically:

20. Recovery-oriented practice
21. Supported decision making
22. Responding to diversity
23. Trauma-informed care
24. Family/network-inclusive practice
25. Least restrictive practice
26. Healthcare rights
27. Human rights.

Skills

The mental health nurse:

1. uses a strengths-based approach and a collaborative partnership while upholding hope, enhancing resilience and promoting recovery
2. reflects a therapeutic alliance respectful of choices, experiences and circumstances (assistance is provided to access resources that may help facilitate options and recovery planning)
3. explores and respects diversity in culture, gender, linguistics, values and belief systems and incorporates these into recovery planning

4. understands potential trauma and its impact and responds with sensitive and safe interventions
5. engages and is supportive of family and carers while acknowledging their role, preferences and views
6. practises in a least restrictive manner, supports decision making and explores all options for treatment
7. translates guiding nursing and healthcare principles and healthcare rights into their practice
8. uses verbal and written communication skills that reflect the views and preferences of the person, their family and carer or nominated person, and demonstrates collaborative decision making.

Attitudes

- Collaborative
- Hopeful
- Transparent

Learning activities

View websites:

[Australian Government Department of Health: Principles of recovery-oriented mental health practice](http://www.health.gov.au/internet/publications/publishing.nsf/Content/mental-pubs-i-nongov-toc-mental-pubs-i-nongov-pri) <http://www.health.gov.au/internet/publications/publishing.nsf/Content/mental-pubs-i-nongov-toc-mental-pubs-i-nongov-pri>

[Department of Health Victoria: Framework for recovery-oriented practice](https://www2.health.vic.gov.au/mental-health/practice-and-service-quality/service-quality/recovery-oriented-practice-in-mental-health) <https://www2.health.vic.gov.au/mental-health/practice-and-service-quality/service-quality/recovery-oriented-practice-in-mental-health>

[Department of Health and Human Services Victoria: Supported decision making](https://providers.dhhs.vic.gov.au/sites/dhhsproviders/files/2017-07/Supporting-decision-making-quick-reference-guide.pdf) <https://providers.dhhs.vic.gov.au/sites/dhhsproviders/files/2017-07/Supporting-decision-making-quick-reference-guide.pdf>

[Department of Health and Human Services Victoria: Responding to diversity](https://www2.health.vic.gov.au/mental-health/rights-and-advocacy/diversity) <https://www2.health.vic.gov.au/mental-health/rights-and-advocacy/diversity>

[Department of Health and Human Services Victoria: Trauma-informed care](https://www2.health.vic.gov.au/mental-health/practice-and-service-quality/safety/trauma-informed-care) <https://www2.health.vic.gov.au/mental-health/practice-and-service-quality/safety/trauma-informed-care>

[Department of Health and Human Services Victoria: Network/family-inclusive practice](https://www2.health.vic.gov.au/mental-health/working-with-consumers-and-carers/family-support-and-crisis-plans) <https://www2.health.vic.gov.au/mental-health/working-with-consumers-and-carers/family-support-and-crisis-plans>

[Department of Health and Human Services Victoria: Least restrictive practice](https://www2.health.vic.gov.au/hospitals-and-health-services/patient-care/older-people/resources/guardianship/practice) <https://www2.health.vic.gov.au/hospitals-and-health-services/patient-care/older-people/resources/guardianship/practice>

[Department of Health and Human Services Victoria: Healthcare rights](https://www2.health.vic.gov.au/about/participation-and-communication/australian-charter-healthcare-rights/about-the-charter) <https://www2.health.vic.gov.au/about/participation-and-communication/australian-charter-healthcare-rights/about-the-charter>

[The Victorian Equal Opportunity and Human Rights Commission](http://www.humanrightscommission.vic.gov.au/the-charter)

<<http://www.humanrightscommission.vic.gov.au/the-charter>>

Activities

- Meet with a consumer consultant and carer consultant and reflect on how these principles are enacted in practice.
- Refer to the Mental Health Coordinating Council's 2018 [Recovery-oriented guide](http://www.mhcc.org.au/wp-content/uploads/2018/05/Recovery-Oriented-Language-Guide_2018ed_v3_201800418-FINAL.pdf) <http://www.mhcc.org.au/wp-content/uploads/2018/05/Recovery-Oriented-Language-Guide_2018ed_v3_201800418-FINAL.pdf> and utilise within practice.
- Review the MHPOD resource '[Recovery-based practice](https://www.mhpod.gov.au)' <<https://www.mhpod.gov.au>>.
- Reflective journal: consider an episode of care where there were differing opinions about treatment. How was this resolved?
- Having reviewed the above principles, would you have approached the situation differently? Why? Why not?

Domain 2: Community mental health assessment

Learning outcomes

Having completed Domain 2 the mental health nurse can independently undertake a comprehensive community assessment.

Demonstrated skill development

Knowledge

The mental health nurse:

1. has a sound knowledge of the enablers and barriers to a therapeutic alliance
2. can identify and discuss relevant best practice principles
3. has knowledge of a range of health conditions, comorbidities and complications
4. understands the influence of culture on expression and communication
5. has a sound knowledge of psychiatric medications, side effects and contraindications
6. has a sound knowledge of a range of mental health treatment options
7. demonstrates a comprehensive understanding and working knowledge of assessment domains.

Skills

The mental health nurse demonstrates practice that:

1. builds rapport
2. supports advocacy
3. is respectful and promotes dignity
4. is responsive to diversity
5. provides information regarding the service and promotes rights in a manner that best supports a person's decision making
6. actively engages carers/network and considers opinions, preferences and offers support
7. gathers collateral information through liaison with healthcare providers and significant others
8. supports a recovery-oriented framework
9. responds to trauma with safe interventions.

Attitudes

- Authenticity
- Empathy
- Holds hope and therapeutic optimism
- Values views and preferences

Learning activities

- Review community assessment tools and documents.
- Arrange to observe two separate assessments (at least one of these should be with a nurse) and complete a community assessment.
- Engage in one supervised assessment followed by a reflective discussion with a supervisor.
- Conduct an independent assessment and present it in clinical review.
- Reflective journal: How does a community assessment differ from an assessment conducted in an inpatient setting? How does the location affect your planning?

Domain 2.1: Mental state examination

Learning outcomes

Having completed Domain 2.1 the mental health nurse can articulate elements of a mental state examination (MSE) and independently conduct and document an MSE in the community context. The mental health nurse can discuss a rationale for their impressions.

Demonstrated skill development

Knowledge

The mental health nurse:

1. demonstrates an understanding of all elements of an MSE
2. demonstrates a sound understanding of terminology used to describe mental state.

Skills

The mental health nurse:

1. communicates clearly, augments their approach to ensure engagement and builds rapport
2. uses mental health terminology with accuracy and can explain concepts to individuals, their families and carers
3. applies their knowledge to identify mental state deterioration
4. produces accurate and clear documentation
5. can confidently present this verbally within a clinical review or handover setting.

Attitudes

- Empathy
- Curiosity

Learning activities

- Review the MHPOD resource '[Mental health histories and MSE](https://www.mhpod.gov.au)' <<https://www.mhpod.gov.au>>.

- Watch the '[Understanding the MSE' video](https://www.youtube.com/watch?v=83i2MWMqph8) <<https://www.youtube.com/watch?v=83i2MWMqph8>> with an educator. Consider what clinical interventions may be required as a clinician receiving the referral.
- Review the [Mental status examination rapid record form](http://www.nevdgp.org.au/files/programsupport/mentalhealth/Mental%20State%20Exam%20-%20form.pdf) <<http://www.nevdgp.org.au/files/programsupport/mentalhealth/Mental%20State%20Exam%20-%20form.pdf>>.
- Arrange to observe two separate assessments (minimum of one with a nurse).
- Engage in one supervised assessment followed by a reflective discussion with a supervisor.
- Conduct an independent assessment and present it in clinical review.

Domain 2.2: Risk assessment

Learning outcomes

Having completed Domain 2.2 the mental health nurse will be able to conduct, document and communicate a risk assessment, including environmental risks, and formulate a plan.

Demonstrated skill development

Knowledge

The mental health nurse:

1. understands a range of risks and vulnerabilities that may affect people with a mental illness living in the community, including potential harm to others, from others or to themselves
2. is aware of the static, dynamic and protective factors that influence risk and can identify circumstances where risks may be heightened or reduced
3. can independently identify when a risk assessment is required, for example, initial assessments, deterioration in mental state, adverse events, transfer or discharge
4. can identify signs or symptoms that would suggest an ad hoc risk assessment is required
5. is aware of limits to confidentiality and can articulate circumstances in which disclosure to an external body is necessary
6. can identify strategies and interventions that may be used to mitigate risks when they have been recognised.

Skills

The mental health nurse:

1. uses effective interview skills and demonstrates authenticity
2. is confident when discussing their impression of risk and can ask for assistance when unable to form a view
3. can compassionately explore risk factors, warning signs, crisis or tipping points, imminent risks, protective factors, resources and strengths

4. uses information obtained from other health providers and networks, including file audits, to help inform care planning
5. can document and communicate a risk assessment and formulate a plan to mitigate identified risks.

Attitudes

- Unconditional positive regard
- Authenticity
- Curiosity

Learning activities

- Participate in training sessions:
 - Community de-escalation and aggression management training
 - Suicide and risk assessment training.
- Review the resources 'Risk assessment and management' and 'working with people with forensic histories or at risk of offending' from the [MHPOD website](https://www.mhpod.gov.au) <<https://www.mhpod.gov.au>>.
- [Attend Victorian Responsible Gambling Foundation events](https://responsiblegambling.vic.gov.au/for-professionals/professional-development-centre/events/) <<https://responsiblegambling.vic.gov.au/for-professionals/professional-development-centre/events/>>.
- Meet with a forensic clinical specialist if available and discuss service priorities.
- Arrange to observe two separate assessments (one with a nurse).
- Engage in one supervised assessment followed by a reflective discussion with a supervisor.
- Conduct an independent assessment and present it in clinical review.

Domain 2.3: Substance use and addiction

Learning outcomes

Having completed Domain 2.3 the mental health nurse will have developed an understanding of addiction and substance use, stages of change and treatment and recovery support options. The mental health nurse will be developing the ability to conduct independent assessments along with having knowledge of therapeutic interventions.

Demonstrated skill development

Knowledge

The mental health nurse:

1. understands the features of alcohol, drug and gambling addiction and the ways in which addiction affects mental health and wellbeing
2. understands and can articulate drug actions and dependency, signs of intoxication and overdose
3. has an understanding and working knowledge of treatment options for withdrawal, replacement and maintenance therapies

4. understands the risks associated with drug administration and the principles of harm minimisation
5. demonstrates knowledge of a range of support services across modalities (telephone, internet, in-person) to support individuals, families and carers.

Skills

The mental health nurse:

1. can engage a person in a supportive conversation about addiction and substance misuse
2. can enquire sensitively to inform an accurate assessment
3. can provide health education in an accessible and engaging manner
4. can identify high-risk attitudes and behaviours and can respond appropriately
5. supports access to health care to address health concerns along with providing a clinical handover to support engagement
6. can have a supportive conversation regarding community support agencies and make appropriate recommendations that meet a person's needs.

Attitudes

- Non-judgemental
- Empathic
- Respectful

Learning activities

View websites:

[Turning Point](https://www.turningpoint.org.au/) <<https://www.turningpoint.org.au/>>

[Department of Health and Human Services Victoria: Drug and alcohol guidelines](https://www2.health.vic.gov.au/alcohol-and-drugs)
<<https://www2.health.vic.gov.au/alcohol-and-drugs>>

[Department of Health and Human Services Victoria: Maintenance pharmacotherapy](https://www2.health.vic.gov.au/alcohol-and-drugs/aod-service-standards-guidelines/maintenance-pharmacotherapy-aod)
<<https://www2.health.vic.gov.au/alcohol-and-drugs/aod-service-standards-guidelines/maintenance-pharmacotherapy-aod>>

[World Health Organization: Neuroscience of psychoactive substance use and dependence 2004](http://www.who.int/substance_abuse/publications/en/Neuroscience.pdf)
<http://www.who.int/substance_abuse/publications/en/Neuroscience.pdf>

Activities:

- Review the MHPOD resource '[Dual diagnosis](https://www.mhpod.gov.au/)' <<https://www.mhpod.gov.au/>>.
- Become familiar with the resource '[Ice: Training for frontline workers](https://nceta.androgogic.com.au/index.php)' <<https://nceta.androgogic.com.au/index.php>>, which is a free resource for frontline workers who want to enhance their crystal methamphetamine skills and knowledge.
- Arrange to meet with local drug and alcohol support workers for an orientation to their services.
- Arrange to meet with the service's dual diagnosis clinician to discuss their role and local dual diagnosis training opportunities.

Domain 2.4: Physical health

Learning outcomes

Having completed Domain 2.4 the mental health nurse will be able to incorporate physical health monitoring and interventions into mental health care planning to improve health outcomes.

Demonstrated skill development

Knowledge

The mental health nurse:

1. has knowledge of a range of health conditions, comorbidities and complications
2. understands the potential influence of culture on expression and communication
3. has a sound knowledge of medications, side effects and contraindications
4. has a comprehensive understanding of health issues that affect people with mental illness
5. understands unique barriers in accessing health care that influence health-seeking behaviour for people with mental illness
6. can describe a range of assessment tools and discern the most appropriate tool to use in a range of clinical scenarios
7. can identify intervals at which physical health screening is monitored and indicators for ad hoc assessments
8. understands a range of self-rating scales such as the My Medicines and Me Questionnaire (M3Q)
9. is aware of a range of options that support a healthy diet and exercise.

Skills

The mental health nurse:

1. can independently identify when assessment and intervention is required
2. can independently conduct a physical health assessment that includes a person's medical history, current health status, risk factors and list other healthcare providers
3. can identify deterioration and escalate appropriately
4. can communicate in plain language and support the development of health literacy
5. can communicate sensitively about a range of health issues including diet, exercise, dental hygiene, sexual health, diabetes and cardiovascular health
6. is an advocate and effectively liaises with other health professionals and networks.

Attitude

- Equality

Learning activities

View websites:

[Department of Health and Human Services Victoria: Preventative health](https://www2.health.vic.gov.au/public-health/preventive-health)

<<https://www2.health.vic.gov.au/public-health/preventive-health>>

[Equally well consensus statement](https://equallywell.org.au/.../03/Equally-Well-Consensus-Statement.pdf) <<https://equallywell.org.au/.../03/Equally-Well-Consensus-Statement.pdf>>

Activities:

- Review the MHPD resource '[Building the skills for promoting physical health](https://www.mhpod.gov.au)' <<https://www.mhpod.gov.au>>.
- Review self-rating scales such as the My Medicines and Me Questionnaire (M3Q).
- Reflective journal: Consider how access to health care may differ for someone with a mental health concern compared with someone without a serious mental health concern.

Domain 2.5: Diversity and culturally responsive practice

Learning outcomes

Having completed Domain 2.5 the mental health nurse will incorporate diversity and culturally responsive practice into all therapeutic interventions.

Demonstrated skill development

Knowledge

The mental health nurse:

1. demonstrates an understanding of how culture and diversity influences the way we think and talk about mental health, and how it may shape a person's experience of mental health care
2. understands the importance of cultural and personal identity in shaping views about treatment and recovery
3. has a comprehensive understanding and working knowledge of a cultural formulation interview
4. understands diversity within the local community.

Skills

The mental health nurse:

1. can identify and discuss considerations for working with an interpreter
2. can communicate clearly and in plain language
3. facilitates an environment that allows meaning to emerge and gain information about spiritual, family, religious, ethnic, gender and language needs

4. can conduct an assessment that identifies relevant information such as migration and trauma history
5. considers how a person's views and attitudes about mental illness, treatment and the healthcare system may be influenced by their culture, identity or those of their community
6. can identify any need for secondary consultation
7. can reflect on potential assumptions about a person or their circumstances based on their own spiritual, religious, ethnic or gender identity.

Attitudes

- Reflective
- Person-centred
- Equality
- Respectful
- Curious

Learning activities

View websites:

[Department Health and Human Services Victoria: Diversity](https://www2.health.vic.gov.au/about/publications/policiesandguidelines/dhhs-delivering-for-diversity-cultural-diversity-plan-2016-19)

<<https://www2.health.vic.gov.au/about/publications/policiesandguidelines/dhhs-delivering-for-diversity-cultural-diversity-plan-2016-19>>

[The Australian Charter of Healthcare Rights in Victoria](http://health.vic.gov.au/patientcharter/)

<<http://health.vic.gov.au/patientcharter/>>

[The Victorian Equal Opportunity and Human Rights Commission](http://www.humanrightscommission.vic.gov.au/the-charter)

<<http://www.humanrightscommission.vic.gov.au/the-charter>>

[Victorian Transcultural Mental Health Unit: Guidelines for mental health professionals](http://www.vtmh.org.au/)

<<http://www.vtmh.org.au/>>

[Mental Health in Multicultural Australia](http://www.mhima.org.au/) <<http://www.mhima.org.au/>>

[The National Cultural Competency Tool \(NCCT\) for Mental Health Services](http://www.mhima.org.au/_literature_73821/NCCT)

<www.mhima.org.au/_literature_73821/NCCT>

Resources:

- [Refugee Council](https://www.refugeecouncil.org.au) <<https://www.refugeecouncil.org.au>>
- [Centre for Culture, Ethnicity and Health](https://www.ceh.org.au/) <<https://www.ceh.org.au/>>
- [Centre for Cultural Diversity in Ageing](http://www.culturaldiversity.com.au/) <<http://www.culturaldiversity.com.au/>>
- [Federation of Ethnic Communities Council of Australia \(FECCA\)](http://fecca.org.au/) <<http://fecca.org.au/>>
- [Ethnic Communities Council of Victoria \(ECCV\)](http://eccv.org.au/) <<http://eccv.org.au/>>
- [Foundation House](http://www.foundationhouse.org.au/) <<http://www.foundationhouse.org.au/>>

Activities:

- Review the MHPOD resource '[Cultural awareness and sensitive practice and gender issues in mental health](https://www.mhpod.gov.au)' <<https://www.mhpod.gov.au>>.
- Consider attending the Victorian Transcultural Mental Health [cultural responsiveness workshop](http://www.vtmh.org.au/calendar/workshop-cultural-responsiveness-introduction-to-principles-and-practices) <<http://www.vtmh.org.au/calendar/workshop-cultural-responsiveness-introduction-to-principles-and-practices>>.

Domain 2.6: Formulation

Learning outcomes

Having completed Domain 2.6 the mental health nurse will feel confident to provide a formulation drawing on social, psychological and biological aspects to create a synthesis that supports clinical reasoning and planning.

Demonstrated skill development

Knowledge

The mental health nurse:

1. understands the purpose of a formulation, its structure and components
2. demonstrates an understanding of predisposing, precipitating, perpetuating and protective factors.

Skills

The mental health nurse:

1. has an ability to generate a written formulation based on a person's explanation and conceptualisation of significant influences including social, emotional, environmental and cultural elements
2. can articulate a formulation succinctly and accurately in clinical discussions
3. can identify patterns in a person's narrative that shape an understanding of their circumstances and behaviours
4. can apply a formulation to help inform recovery and safety planning
5. can accurately reflect a person's views and preferences within a formulation.

Attitudes

- Authenticity
- Diligence
- Curiosity

Learning activities

- Review the MHPOD resource '[Formulation](https://www.mhpod.gov.au/)' <<https://www.mhpod.gov.au/>>.
- Review articles:
 - [Formulation for beginners](http://journals.sagepub.com/doi/abs/10.1177/1039856214536240) (Selzer & Ellen 2014) <<http://journals.sagepub.com/doi/abs/10.1177/1039856214536240>>
 - [Clinical formulation for mental health nursing practice](https://onlinelibrary.wiley.com/doi/10.1111/j.1365-2850.2008.01307.x) (Crowe et al. 2008) <<https://onlinelibrary.wiley.com/doi/10.1111/j.1365-2850.2008.01307.x>>.
- In your journal, take note of the differences between the articles, one thing you learnt from each article and one thing you would like further explanation about. Discuss with an educator and consider limitations and utility factors related to formulations.
- Write a formulation and present it in clinical review.

Domain 2.7: Working knowledge of diagnostic, classification and outcome measurement tools

Learning outcomes

Having completed Domain 2.7 the mental health nurse will understand the structure of diagnostic and classification tools, primarily ICD and DSM, and can competently use these in practice. The mental health nurse can effectively apply outcome measurement rating scales including HoNOS to accurately record the trajectory of care.

Demonstrated skill development

Knowledge

The mental health nurse:

1. understands the purpose and structure of the two most commonly used diagnostic and classification manuals – ICD and DSM
2. understands the purpose and use of a range of outcome measurement tools, including HoNOS, and has a working knowledge of their application
3. understands how the health service uses classifications and measures.

Skills

The mental health nurse:

1. can apply information gathered in a clinical interview together with observations to inform an ICD or DSM code selection
2. can clearly and sensitively communicate how a diagnosis is informed, and how the progress of treatment is measured.

Attitudes

- Diligence

Learning activities

- Self-directed learning – review quality-of-life scales and familiarise yourself with manuals.
- View website: [Australian Mental Health Outcomes and Classification Network](https://www.amhocn.org/) – review measures and complete online training if not done previously.
- Familiarise yourself with the following tools and explore when they would be used:
 - MMSE
 - Beck Depression and Anxiety Inventory
 - Clients Assessment Strengths, Interests and Goals (CASIG)
 - Edinburgh Post Natal Depression Scale
 - M3Q
 - ORS and SRS

Domain 3: Medication management

Learning outcomes

Having completed Domain 3 the mental health nurse understands the actions and potential side effects of a broad range of medications and can safely and independently administer medication in a community setting. The mental health nurse supports a person with medication management and adherence where needed.

Demonstrated skill development

Knowledge

The mental health nurse:

1. demonstrates a broad knowledge of psychotropic medications and can articulate associated side effects
2. understands the necessary provisions for safe medication administration, transportation and storage
3. has a comprehensive knowledge of infection control risks and mitigation strategies
4. is aware of checking mechanisms and protocols to confirm identity
5. understands the 'six rights' checking mechanism (drug, dose, time, route, patient and clinical scenario)
6. understands factors that influence adherence to treatment and a range of strategies to support self-management of medication in the community.

Skills

The mental health nurse:

1. is supportive and engaging and uses these skills to help a person feel at ease prior to medication administration
2. safely and independently administers medication including intramuscular injections
3. can identify and respond to adverse events immediately with appropriate interventions in a way that reassures the person
4. can integrate knowledge of a person's medical history to the medication administration context and initiate necessary health screens before or after the intervention
5. can speak openly with a consumer about their views and preferences about medication, even when these differ from the opinion of the treating team
6. can provide information about medication in plain language and support health literacy.

Attitudes

- Diligence
- Empathy
- Caution

Learning activities

- Successfully complete the required programs ensuring safe independent medication administration.
- Complete a medication quiz (see toolkit for a sample).

Domain 4: Triage

Learning outcomes

Having completed Domain 4 the mental health nurse will demonstrate the ability to assess degrees of urgency for mental health service responsiveness. The nurse will be capable of using the mental health triage scale and demonstrates the ability to prepare a plan to meet identified needs.

Demonstrated skill development

Knowledge

The mental health nurse:

1. understands the core components of a triage assessment including sources of collateral information
2. is conversant in the role of the mental health teams within the organisation and has a sound working knowledge of referral processes and indicators for referral
3. understands confidentiality and health privacy and how this influences the triage process
4. has knowledge of a range of primary and community supports
5. demonstrates a working knowledge of the statewide triage scale
6. is knowledgeable about the signs of clinical deterioration and how to respond.

Skills

The mental health nurse:

1. can work cooperatively with a lay referrer to identify clinical deterioration
2. can assess and prioritise need, formulate an appropriate plan and execute this within the timeframes indicated in the statewide triage scale
3. can communicate their impressions and concerns clearly
4. can communicate effectively with families and carers through distress
5. can augment the frequency of engagement to respond to the person's needs
6. can collaboratively prepare a crisis plan and communicate about this with accuracy.

Attitudes

- Empathy
- Persistent curiosity

Learning activities

- Review the Australian Commission on Safety and Quality in Healthcare's 2010 [National consensus statement: essential elements for recognising and responding to clinical deterioration](https://www.safetyandquality.gov.au/wp-content/uploads/2012/01/Charter-PDF.pdf) <<https://www.safetyandquality.gov.au/wp-content/uploads/2012/01/Charter-PDF.pdf>>.

- Ensure familiarity with the [mental health triage scale](https://www2.health.vic.gov.au/about/publications/policiesandguidelines/triage-scale-mental-health-services) <<https://www2.health.vic.gov.au/about/publications/policiesandguidelines/triage-scale-mental-health-services>>.

Domain 5: Mental Health Act 2014

Learning outcomes

Having completed Domain 5 the mental health nurse will be able to apply the principles of the *Mental Health Act 2014* (Vic) and other relevant legislation in clinical practice. The mental health nurse will have a working understanding of the functions and provisions of the Mental Health Act as it applies to individuals, families and carers.

Demonstrated skill development

Knowledge

The mental health nurse:

1. demonstrates a working knowledge of the Mental Health Act, particularly the principles and provisions for compulsory treatment
2. has a working knowledge of the statutory obligations as an authorised person under the Mental Health Act
3. has a sound understanding of the Mental Health Tribunal including all relevant procedures and documentation requirements
4. has a working knowledge of the provisions of the Mental Health Act designed to support decision making and participation, along with local processes supporting implementation of these provisions
5. has knowledge of the Mental Health Complaints Commissioner process and a person's right to complain
6. knows where to find information about the Mental Health Act to resolve questions of interpretation or obligation
7. has a comprehensive knowledge of individual, family and carer rights as they are defined within the Mental Health Act.

Skills

The mental health nurse:

1. can discuss the Mental Health Act in a manner that is accessible and promotes participation and understanding
2. promotes rights in a way that supports a person's decision making
3. can appraise a person's decision-making capacity, identify avenues to support participation, communicate clearly and demonstrate transparency and accountability to the Mental Health Act
4. can identify third parties who can help promote a person's rights, support decision making and can demonstrate the necessary skills to support access to these parties
5. can identify who is important to the person, explore their views and preferences and actively engage them to support a person's decision making
6. demonstrates the necessary skills for engaging and communicating with family, carers and nominated persons

7. demonstrates awareness of privacy requirements and escalates concerns
8. can provide information regarding advance statements and nominated persons in a way that is accessible and promotes participation
9. considers a range of support options when supporting the development of an advance statement (including peer workers, consumer consultants, carer consultants, significant others and sensory profiles) that may help inform planning.

Attitudes

- Equality
- Dignity
- Values human rights

Learning activities

- Access the [Mental Health Act 2014 handbook](https://www2.health.vic.gov.au/mental-health/practice-and-service-quality/mental-health-act-2014-handbook) <https://www2.health.vic.gov.au/mental-health/practice-and-service-quality/mental-health-act-2014-handbook>.
- Engage in a question and answer session with an educator using the handbook.
- Utilising the *Mental Health Act handbook*, refer to advance statements and the video guide.
- Review the resources 'Legislation and mental health practice' and 'Mental health care and human rights' from the [MHPOD website](https://www.mhpod.gov.au/) <https://www.mhpod.gov.au/>.
- Complete relevant paperwork such as an assessment order under supervision.
- Contribute to a Mental Health Tribunal report.
- Attend a Mental Health Tribunal hearing.
- Complete a mock advance statement for yourself.

Domain 6: Aggression in a community setting

Learning outcomes

Having completed Domain 6 the mental health nurse will be equipped to identify the early warning signs of aggression. The mental health nurse will understand risks as they are unique within a community setting and be equipped to identify a range of interventions that are commensurate with these.

Demonstrated skill development

Knowledge

The mental health nurse:

1. understands different kinds of aggression and how these manifest, including a basic awareness of criminogenic need
2. understands internal and external factors that influence aggression
3. understands the criminal justice system including the role of police and other emergency services
4. has a sound knowledge of aggression management and de-escalation techniques
5. demonstrates a knowledge of and adherence to organisational policies and guidelines related to aggression management in a community setting.

Skills

The mental health nurse:

1. is self-aware and mindful in their approach to engaging with a person who is distressed or potentially aggressive
2. demonstrates an authentic approach and gains an understanding of a person's concerns
3. produces documentation that reflects episodes of aggression accurately
4. can identify opportunities to work with a person to prepare a safety plan and does so collaboratively
5. in practice, is observed to identify clinical deterioration and respond promptly with assistance if requested (or provided) as required.

Attitudes

- Compassion, authenticity and respect
- Non-judgemental
- Cautious

Learning activities

- Complete de-escalation and aggression management training.
- Review local procedures for responding to clinical aggression in the community setting.

Domain 7: Clinical documentation

Learning outcomes

Having completed Domain 7 the mental health nurse will produce clinical and administrative documentation that is accurate, purposeful and objective. Documentation will be authored in plain language and reflect best practice principles. The nurse will understand documentation standards, privacy and security and medical record access.

Demonstrated skill development

Knowledge

The mental health nurse:

1. understands clinical documentation standards and formatting
2. understands the health service documentation processes and requirements
3. has an awareness of the range of documentation options and the indicators for each use
4. understands documentation management processes and regulations including those stipulated within the *Health Records Act 2001* (Vic) and the *Freedom of Information Act 1982* (Vic).

Skills

The mental health nurse:

1. produces documentation that succinctly and accurately communicates clinical information including an intervention summary, observations, impressions and risk issues
2. can objectively and accurately recount and record a person's perspective of the interaction, their views and preferences and steps taken to understand these
3. can organise and prioritise their workload to ensure documentation is completed as soon as possible following contact
4. can discuss privacy principles and freedom of information processes in plain language and provide step-by-step guidance.

Attitudes

- Objectivity
- Accountability

Learning activities

Review website:

[National Standards for Mental Health Services Standard 10: Documentation](http://www.health.gov.au/internet/publications/publishing.nsf/Content/mental-pubs-n-servstds-toc~mental-pubs-n-servstds-2~mental-pubs-n-servstds-2-10)

<<http://www.health.gov.au/internet/publications/publishing.nsf/Content/mental-pubs-n-servstds-toc~mental-pubs-n-servstds-2~mental-pubs-n-servstds-2-10>>

Activity:

- Review the MHPOD resource ['Effective documentation in clinical files'](https://www.mhpod.gov.au/) <https://www.mhpod.gov.au/>.

Stage 2: Months 4–6

Domain 8: Therapeutic relationships

Learning outcomes

Having completed Domain 8 the mental health nurse will have a sound understanding of enablers for a therapeutic alliance and apply this to develop collaborative and recovery-oriented relationships. The mental health nurse will have had opportunities to practise self-reflection and understand their own strengths and challenges in achieving engagement.

Demonstrated skill development

Knowledge

The mental health nurse:

1. demonstrates an understanding of a variety of therapeutic models and how these may be helpful in a range of situations (this should include short-term and behavioural approaches such as cognitive behaviour therapy, solution-focused therapy, single sessions and longer term approaches such as psychotherapy)
2. understands the prerequisites and enablers to effective communication and building a therapeutic partnership.

Skills

The mental health nurse:

1. demonstrates confidence and authenticity when engaging in a therapeutic relationship
2. is an effective communicator and is responsive to verbal and non-verbal cues
3. creates an environment conducive to a meaningful engagement
4. demonstrates a judicious use of shared stories and therapeutic use of self while respecting professional boundaries
5. can incorporate knowledge of the person, their past experiences and values to shape a therapeutic engagement (this includes a person's age, gender, culture, religious beliefs, trauma history, recovery goals and stage of illness)
6. has an awareness of and skilfully negotiates inherent challenges in the social context of the therapeutic relationship
7. can identify and reflect on a person's strengths
8. utilises self-reflection to examine their role within a therapeutic relationship.

Attitudes

- Authenticity
- Empathy with unconditional positive regard
- Respect
- Curiosity

Learning activities

- Review the MHPOD resource '[Therapeutic relationship](https://www.mhpod.gov.au/)' <https://www.mhpod.gov.au/>.
- Discuss three learnings from the following articles:
 - Peplau H 1987, 'Interpersonal constructs for nursing practice', *Nurse Education Today*, no. 7, pp. 201–208
 - Shanley E, Jubb-Shanley M 2010, 'The recovery alliance theory of mental health nursing', *Journal of Psychiatry and Mental Health Nursing*, no. 14, pp. 734–743
 - Shattell M, Starr S, Thomas S 2007, "“Take my hand, help me out”: mental health service recipients' experience of therapeutic relationship", *International Journal of Mental Health Nursing*, no. 4, pp. 274–284.
- Engage in training opportunities – consider courses such as introductory courses for cognitive behaviour therapy or mentalisation-based therapy and Centre for Psychiatric Nursing training such as 'Every Moment Counts'.
- Observe therapeutic interactions by other clinicians – think about accompanying a clinician who is seeing a person for up to six weeks to observe the developing therapeutic relationship.
- Engage in reflective practice during clinical supervision.

Domain 9: Treatment and recovery plans

Learning outcomes

Having completed Domain 9 the mental health nurse will be independent and confident in leading treatment and recovery planning with a person receiving health care.

Demonstrated skill development

Knowledge

The mental health nurse:

1. has a sound understanding of the principles related to recovery and supported decision making and how these relate to both voluntary and compulsory mental health treatment
2. understands obligations to support participation in treatment planning and considers the views and preferences of the person, their family/network, carers or a nominated person
3. understands necessary components of a recovery and treatment plan and how these are integrated into the health service documentation suite
4. can articulate the required schedule for review planning.

Skills

The mental health nurse:

1. can incorporate their knowledge of the person including their past experiences, values and recovery goals to foster collaboration in planning
2. can identify strengths and use these as a foundation for planning
3. can offer helpful reflections on potential goals or stepped activities towards goals that are realistic and meaningful to the person and align with the person's hopes
4. can incorporate the person's voice in documentation
5. develops skills of negotiation between parties where the views or preferences of one do not align with the views and preferences of another
6. can articulate the steps taken to support participation and decision making
7. can articulate how treatment and recovery plans align with a person's views and preferences and can discuss the discretion used in forming a position about aspects of the plan that don't align
8. supports and promotes relapse prevention planning fostering collaboration and meaningfulness.

Attitudes

- Hopeful
- Supportive
- Values preference

Learning activities

- Develop a collaborative recovery plan and relapse prevention plan.
- Review recovery plans within a clinical review.
- Review the MHPOD resource '[Recovery](https://www.mhpod.gov.au/)' <https://www.mhpod.gov.au/>.
- Review the MHPOD resource '[Relapse prevention](https://www.mhpod.gov.au/)' <https://www.mhpod.gov.au/>.
- Reflect on some challenges encountered while preparing a recovery plan and strategies used to overcome these challenges.

Domain 10: Working within a model of care and engaging primary and community services

Learning outcomes

Having completed Domain 10 the mental health nurse will have a clear understanding of a person's progress through the service and expectations of service delivery within their model of care.

The mental health nurse will understand how a model of care shapes access and treatment options. They will be able to consider and support engagement of primary and community resources to effectively augment care and ensure people and carers have access to a range of services.

Demonstrated skill development

Knowledge

The mental health nurse:

1. will be aware of functions within the service structure, along with various team and discipline roles
2. have knowledge of various primary and community services, access options and referral pathways
3. have a sound understanding of the service delivery targets and expectations including frequency of review and escalation triggers
4. understand how the best practice principles apply to delivering community mental health care
5. understands the evidence that underpins the treatment approaches recommended by the service.

Skills

The mental health nurse:

1. ensures continuity in service delivery, maintains a suitable frequency of engagement and is responsive to needs
2. conducts comprehensive assessments, planning and evaluation that reflect best practice principles
3. works collaboratively with the consumer to build a network of support in the community and can coordinate care with other service providers to ensure role clarity and avoid duplication.

Attitudes

- Strengths-based
- Respectful

Learning activities

- Engage in supervision regarding role expectations.
- Review the model of care for service provision in your clinical area.
- Explore primary and community resources in your local area and discuss five referral options with the educator or mentor.

Domain 11: Professional standards, conduct and liaison with others

Learning outcomes

Having completed Domain 11 the mental health nurse will have an awareness of the expected standards of conduct and communication. The mental health nurse will have an awareness of how to prioritise competing demands and feel confident to communicate with both internal and external stakeholders.

Demonstrated skill development

Knowledge

The mental health nurse:

1. will understand practice standard guidelines by referring to the Australian Health Practitioner Regulatory Agency, Australian College of Mental Health Nursing and Australian Nursing and Midwifery standards: Code of Professional Conduct for Nurses in Australia, Code of Ethics for Nurses in Australia, International Council of Nurses (ICN) Code of Ethics for Nurses, NMBA Competency Standards, NMBA National Framework for the Development of Decision-Making Tools for Nursing and Midwifery Practice
2. have a working knowledge of professional and organisational code of conduct domains.

Skills

The mental health nurse:

1. presents and conducts themselves in a manner consistent with professional standards
2. can identify potential privacy and confidentiality considerations when liaising with persons other than the service recipient (this includes families, carers, and nominated persons, other health professionals, and community agencies)
3. is sensitive and compassionate in their approach and can reflect on any power imbalances inherent in a health recipient-service provider relationship
4. can apply knowledge gained in training, reflect on attitudes and practice in supervised settings
5. receives constructive feedback and amends practice accordingly.

Attitudes

- Accountability
- Diligence

Learning activities

- Review website: [Nursing and Midwifery board guidelines for code of conduct and professional standards](http://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Professional-standards.aspx) <<http://www.nursingmidwiferyboard.gov.au/Codes-Guidelines-Statements/Professional-standards.aspx>>.
- Review local procedures for professional conduct and workplace behaviour.

Domain 12: Clinical communication

Learning outcomes

Having completed Domain 12 the mental health nurse will have the ability to prepare and effectively convey clinical information to a range of audiences to enable clinical handover, safety and planning.

Demonstrated skill development

Knowledge

The mental health nurse:

1. understands essential components required to support planning and reflection in a clinical handover or review setting
2. can describe a range of organisational clinical handover tools and forms and discern the most appropriate document to use for the clinical scenario
3. has a sound understanding of the information
4. has a sound understanding of organisational responsibilities of transferring and receiving the services necessary for safe and seamless transfer of care.

Skills

The mental health nurse:

1. communicates information in a clear, accurate and purposeful way
2. can extract relevant information held within the clinical record
3. assertively pursues participation and effectively engages a person in review processes
4. communicates respectfully and is diligent when representing the views of a person, their family and carer while using recovery-oriented language
5. collaborates effectively with members of the multidisciplinary team and can summarise and communicate information about changes in treatment plans to relevant stakeholders
6. conveys the views and preferences of a person, their family and carer, and can identify strategies that will support a positive transfer of care experience
7. uses effective questioning to close gaps in the handover of clinical information and the roles of each service.

Attitudes

- Person-centred
- Collaborative
- Diligent
- Accountable

Learning activities

Review website:

National Safety and Quality Health Service Standards second edition Standard 6 – [Communicating for Safety Standard](https://www.safetyandquality.gov.au/wp-content/uploads/2017/12/National-Safety-and-Quality-Health-Service-Standards-second-edition.pdf) <<https://www.safetyandquality.gov.au/wp-content/uploads/2017/12/National-Safety-and-Quality-Health-Service-Standards-second-edition.pdf>>

Activities:

- Discuss existing team review processes and formats with a mentor.
- Engage in reflective practice with a clinical supervisor.
- Make a presentation in clinical review.

Stage 3: Months 7–9

Domain 13: Therapeutic approaches and psychological therapies

Learning outcomes

Having completed Domain 13 the mental health nurse will have a practical understanding of a variety of therapeutic approaches and psychological therapies and may have practised introductory therapeutic skills.

Demonstrated skill development

Knowledge

The mental health nurse:

1. demonstrates an understanding and can articulate the principal components of psychological therapies such as cognitive behaviour therapy, dialectic behavioural therapy, interpersonal psychotherapy, family therapy, motivational interviewing and mentalisation-based treatment.

Skills

The mental health nurse:

1. can use their knowledge of a range of therapeutic approaches to discuss options with a person, their family or carer
2. engages reflectively in supervision and can use the supervision relationship to explore treatment approaches and the rationale for these
3. can articulate a rationale for the selected therapy and demonstrate a connection between the approach and recovery goals.

Attitudes

- Unconditional positive regard
- Self-reflection

Learning activities

- Read the Centre for Psychiatric Nursing's publication *Psychotherapy essentials in mental health nursing*.
- Review the resources 'Psychological interventions' and 'Trauma and mental health' from the [MHPOD website](https://www.mhpod.gov.au/) <<https://www.mhpod.gov.au/>>.
- Explore and enrol (if authorised) in introductory courses such as cognitive behaviour therapy, single-session family therapy and mentalisation-based treatment.
- Engage in clinical supervision.

Domain 14: Working with families, carers and other important support networks

Learning outcomes

Having completed Domain 14 the mental health nurse will understand the unique role and importance of families, carers and other supports to recovery and maintaining wellbeing. The mental health nurse will explore family and carer views and preferences and navigate differences of opinion respectfully.

Demonstrated skill development

Knowledge

The mental health nurse:

1. understands theoretical approaches related to external factors that affect internal wellbeing and development
2. understands mental health service obligations to families, carers and nominated persons set by the *Mental Health Act 2014* (Vic)
3. understands the domains required for a family and carer needs assessment
4. has knowledge of a range of primary and community services available to support families and carers, eligibility criteria and referral processes
5. understands how provisions of the Mental Health Act affect information that is shared with families and carers
6. understands how to assess 'care' or a 'care relationship'
7. understands the impact of family violence on mental health, how to identify signs of family violence and how to respond
8. understands the roles of Child Protection, Child FIRST, licensed children's services, Victorian schools and Victoria Police in ensuring the safety of children
9. understands their role and obligations in ensuring the safety of children and their mandatory reporting obligations as described by s. 182(1) of the *Children, Youth and Families Act 2005*.

Skills

The mental health nurse:

1. can prepare a genogram
2. explores family relationships sensitively and with curiosity
3. engage effectively with families and carers to inform family assessments
4. communicates clearly and respectfully with family and carers to inform a meaningful assessment of their role and needs
5. can articulate clear expectations about how and when the mental health service will communicate with families and carers and how information sharing may be affected by the Mental Health Act.

Attitudes

- Family-centred
- Respectful
- Curious
- Inclusive

Learning activities

Review websites:

[Chief Psychiatrist's guideline and practice resource: family violence](https://www2.health.vic.gov.au/about/key-staff/chief-psychiatrist/chief-psychiatrist-guidelines/family-violence-guideline-practice-resource)

<<https://www2.health.vic.gov.au/about/key-staff/chief-psychiatrist/chief-psychiatrist-guidelines/family-violence-guideline-practice-resource>>

[Chief Psychiatrist's guideline: Working together with families and carers](https://www2.health.vic.gov.au/about/key-staff/chief-psychiatrist/chief-psychiatrist-guidelines)

<<https://www2.health.vic.gov.au/about/key-staff/chief-psychiatrist/chief-psychiatrist-guidelines>>

[Department of Justice and Regulation Victoria: Family violence](http://www.justice.vic.gov.au/home/safer+communities/protecting+children+and+families/family+violence)

<<http://www.justice.vic.gov.au/home/safer+communities/protecting+children+and+families/family+violence>>

[Tandem](http://www.tandemcarers.org.au/) – the Victorian peak body representing family and friends supporting people living with mental health issues <<http://www.tandemcarers.org.au/>>

Activities:

- Review the MHPOD resource '[Carer participation](https://www.mhpod.gov.au/)' <<https://www.mhpod.gov.au/>>.
- Investigate the Department of Health and Human Services' [Free course in protecting vulnerable children for health professionals](https://vulnerablechildren.e3learning.com.au/) <https://vulnerablechildren.e3learning.com.au>.
- Explore the [Emerging Minds website](http://elearning.emergingminds.com.au/masterBlock/login) <<http://elearning.emergingminds.com.au/masterBlock/login>>.
- Visit the [Mental Health Compass website](http://www.mentalhealthcompass.com.au/) <<http://www.mentalhealthcompass.com.au/>>.
- Observe a family assessment.
- Conduct a supervised family meeting.
- Meet with a Families where a Parent has a Mental Illness (FaPMI) program coordinator or a carer consultant for an education session regarding their role and function within the mental health service.

Domain 15: Group programs (optional)

Learning outcomes

Having completed Domain 15 the mental health nurse will have the skills to structure and co-facilitate a group session (at beginner level) or group program (at advanced level).

The mental health nurse will understand approaches such as content development (including co-production), basic facilitation skills and group dynamics, and will have experience in co-facilitating a group session.

Demonstrated skill development

Knowledge

The mental health nurse:

1. demonstrates an understanding of group work function and can articulate various designs and models, including co-design.

Skills

The mental health nurse:

1. creates a comfortable environment and supports individual participation
2. ensures a structure that balances discussion and equity in the opportunity to contribute
3. is collaborative and can share leadership with the group
4. can make connections between the group's objectives and individual contributions
5. is respectful in redirection and can tie this to group objectives.

Attitudes

- Curiosity
- Equity

Learning activities

- Observe or co-facilitate group sessions.

Domain 16: Discharge planning

Learning outcomes

Having completed Domain 16 the mental health nurse will be capable of independently overseeing the discharge planning process.

Demonstrated skill development

Knowledge

The mental health nurse:

1. has a comprehensive knowledge of the mental health service discharge policy and process
2. understands the clinical and procedural indicators for discharge from the service
3. has knowledge of a range of primary and community support services that will support transition from the mental health service.

Skills

The mental health nurse:

1. works collaboratively with the person in establishing recovery goals over the course of treatment
2. can identify ongoing support needs and assess suitability for discharge from a mental health service to primary and community care
3. can engage families and carers in discharge planning conversations, respond to concerns and identify resources for ongoing support following disengagement from the service
4. communicates discharge information clearly, accurately and purposefully
5. considers and plans for the range of support needs a person may have when transitioning from a mental health service and reflects on the potential risks or vulnerabilities that discharge may raise.

Attitudes

- Hopeful
- Reflective
- Diligent
- Collaborative

Learning activities

- Review the resources 'Transitional care planning' and 'Networks of care' from the [MHPOD website](https://www.mhpod.gov.au/) <https://www.mhpod.gov.au/>.
- Review local guidelines and policies related to discharge planning and transition of care.
- Arrange to observe/discuss the community discharge process with a nurse on the team.

Domain 17: Research and evaluation

Learning outcomes

Having completed Domain 17 the mental health nurse will understand the role of research and evaluation in shaping nursing practice and understand a range of research methodologies and the ethical considerations for conducting mental health research. The mental health nurse will have participated in developing a research or evaluation proposal, or in data collection or processing for a local project.

Demonstrated skill development

Knowledge

The mental health nurse:

1. understands a range of research methodologies and can differentiate between qualitative and quantitative approaches
2. understands the kinds of activities that are considered research and require ethics approval
3. is aware of how to access online journals and research databases
4. has knowledge of health information and data collected by the health service that can be used to inform research and evaluation.

Skills

The mental health nurse:

1. can identify research that is relevant to community mental health practice
2. can reflect on how research may support service or practice improvement
3. can identify key learnings for practice from a research article and reflect on potential limitations regarding generalising findings.

Attitudes

- Curiosity
- Diligence

Learning activities

- Participate in a research or evaluation project
- Conduct journal reviews
- Review the MHPD resource '[Ethics in healthcare research](https://www.mhpod.gov.au/)' <https://www.mhpod.gov.au/>.

Child and adolescent mental health

Domain 18a: Child and adolescent development

Learning outcomes

Having completed Domain 18a the mental health nurse will have an understanding of child and adolescent developmental stages, attachment theories and the impact potential disruption may have on psychological development in infants, children and young people.

Demonstrated skill development

Knowledge

The mental health nurse:

1. understands the theories and phases of early psychological development
2. understands theoretical approaches related to external factors affecting internal wellbeing and development
3. demonstrates knowledge of a range of psychological approaches considered effective for a young person's therapeutic recovery
4. has knowledge of a range of primary and community-based family support services and understands the roles of allied professionals such as maternal and child health nurses, childhood educators and teachers.

Skills

The mental health nurse:

1. can identify when a child or young person is not meeting developmental milestones or expectations
2. recognises early warning signs related to mental health conditions within a developmental framework
3. conducts a comprehensive mental state examination and risk assessment from a developmental framework
4. understands a person in a broader social context inclusive of family, school and peers
5. can collaboratively plan interventions inclusive of all networks
6. uses supervision to develop an understanding of the theoretical basis and use of psychological interventions in clinical practice.

Attitudes

- Responsive
- Strengths-oriented

Learning activities

- Document observations.
- Investigate the Mindful Centre's [Developmental Psychiatry Course](http://www.mindful.org.au/PGrad-Courses/Developmental-Psychiatry-Course-(DPC).aspx) <[http://www.mindful.org.au/PGrad-Courses/Developmental-Psychiatry-Course-\(DPC\).aspx](http://www.mindful.org.au/PGrad-Courses/Developmental-Psychiatry-Course-(DPC).aspx)> – a 12-month course with weekly seminars focusing on developmental stages and disturbances from infancy through to early adulthood.

Domain 18b: Child and adolescent assessment

Learning outcomes

Having completed domain 18b the mental health nurse will have the ability to conduct a comprehensive assessment including a formulation and diagnostic impression in consultation with supervisors and treating consultant psychiatrists.

Demonstrated skill development

Knowledge

The mental health nurse:

1. demonstrates a theoretical knowledge underpinning diagnosis and utilisation of diagnostic manuals.

Skills (in addition to a community assessment outlined in domain 2)

The mental health nurse:

1. effectively engages the child or young person in an assessment process
2. can accurately record information from the assessment conversation
3. can identify the roles of multi-disciplinary team members and appropriately engage them to meet the child or young person's needs
4. demonstrates an understanding of a person in a broader social context inclusive of family, school and peers.

Attitudes

- Empathy
- Respect

Learning activities

- Engage in weekly one-way screen assessments within the Developmental Psychiatry Course.
- Participate in family therapy and single-session family therapy sessions.
- Engage in supervised assessments.
- Undertake an independent assessment and present it in clinical review.

Older persons mental health

Domain 19: Functional assessment

Learning outcomes

Having completed Domain 19 the mental health nurse will be able to conduct a comprehensive functional assessment and discuss it with healthcare recipients, treating team members, carers and other relevant key stakeholders ensuring collaborative and recovery-oriented care planning.

Demonstrated skill development

Knowledge

The mental health nurse:

1. demonstrates a knowledge of the role of organisational assessment tools and scales in assessing activities of independent living skills and physical and cognitive health and can articulate when to use specific tools
2. demonstrates a working knowledge of dementia and is able to articulate defining features of each subtype
3. demonstrates a working knowledge of delirium and its defining features and is able to articulate clinical signs and symptoms
4. demonstrates a working knowledge of a range of assessment tools including the MMSE, RUDAS, MoCA and geriatric depression and anxiety scales
5. demonstrates a sound working knowledge of a range of screening interventions including MSU, ECG, pain scales, bowel charts, food and fluid charts and medication charts.

Skills

The mental health nurse:

1. uses effective interview skills and demonstrates authenticity, transparency, persistent curiosity, empathy and positive regard, and allows time and uses respectful language
2. develops collaborative and culturally responsive therapeutic relationships that instil hope
3. effectively integrates information gained from other sources to inform care planning
4. assesses, identifies and responds to any carer stress, needs and potential conflicts
5. facilitates organic screening
6. identifies and escalates concerns about deterioration in activities related to daily living, physical health and cognitive function
7. can identify and consider appropriate interventions in response to risk factors related to dementia such as age, family history, substance misuse, head injury, neurological diseases and vascular causes

8. ensures risk factors related to delirium such as dehydration, medication levels/combinations, infections, electrolyte imbalances are considered with appropriate clinical interventions applied
9. can identify features of delirium, dementia or psychosis with an ability to articulate defining aspects in a clinical handover to help inform care planning
10. can make appropriate recommendations for further screening that may include Assessment of Motor and Process Skills (AMPS), blood tests and drug levels
11. uses effective counselling skills for adjustment or bereavement concerns and considers appropriate support services
12. facilitates an environment to allow understanding and meaning to emerge.

Attitudes

- Curiosity
- Respect

Learning activities

- Observe two functional assessments.
- Undertake a supervised assessment.
- Review rating scales.
- Conduct an independent assessment and present it in clinical review.
- Engage in reflective supervision.

Consolidation and program completion

The last three months of the program are aimed at consolidation and program completion. Assist the transition to specialty practice mental health nurse to identify any further learning needs, complete any required assessments and plan for future professional development and career opportunities.