Project 12033: On-site Training and Placement Program: Integrated Systems of Mental Health Care

Aims: This project was undertaken by the Royal North Shore Hospital and Community Mental Health Services & Blacktown City Mental Health Services & Ryde Hospital and Community Mental Health Services ($225,500). The aims of the project were to establish a short-term placement and training scheme for experienced mental health professionals, providing on-site experience and instruction in comprehensive locally integrated community and hospital mental health services.

The three host mental services involved in the program were the:
- Royal North Shore Hospital and Community Health Services;
- Blacktown City Mental Health Services; and
- Ryde Hospital and Community Mental Health Services.

Description: The On-site Training and Placement Program was established as an educational model to provide mental health professionals with new ideas in service delivery, case management, and clinical skills. The four main components of the On-site Training and Placement Program consisted of planned programs of:

1. 2-3 day visits to the host mental health services, including talks by directors of the services and team leaders;
2. site placements that allowed mental health professionals to spend several days in the host mental health services;
3. detailed seminars about specific issues (it was sometimes difficult to organise the seminars because of the small numbers of participants involved and the geographic distance between the mental health professionals); and
4. inclusion of seminars during site visits.
Outcomes: A total of 268 mental health professionals participated in the On-site Training and Placement Program from 1994-1996. Each professional was given an evaluation form and asked to provide feedback about their visit. Additionally, a random sample of 70 people were sent an evaluation questionnaire several months after their visit. Respondents rated the program as worthwhile in terms of their professional interest, cost to their service and their own observation and learning.

Suggestions for improving the Program related to allocating more time for certain aspects of the Program and streamlining some of the administrative arrangements.

Generally, it was also considered to be a positive experience for the host services involved, particularly in terms of learning about facets of other services and in terms of presenting the rationale for their own services.

Two manuals were produced during the project: The Mental Health Site Visit Seminar and Information Manual, and Mental Health Services: Collected Writings. The Information Manual provides, detailed information about the three host mental health services. The Collected Writings manual provides, copies of articles and conference proceedings which were identified as relevant throughout the Program. These manuals are available through the contact officer, listed below.

The demand for the Program has continued since the cessation of funding and is now operated on a self-funding basis, administered by the THEMHS Conference Organisation. The On-site Training and Placement Program is an educational model which outlines a process for undertaking one component of an overall change management strategy for mental health services.

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Project 14009: The development of a self-help network for people with obsessive compulsive disorder and carers

Aims: The project was undertaken by the Obsessive Compulsive & Anxiety Disorders Foundation of Victoria, Incorporated ($137,360), and was established to develop a statewide self-help network for people with obsessive compulsive disorder, and their families and carers.

Description: Obsessive Compulsive Disorder (OCD) is an anxiety condition which affects 2-3% of the population; more than 90,000 Victorians and 450,000 Australians. Obsessive Compulsive Disorder has been recognised as the fourth most common psychiatric disorder, after phobias, substance abuse and major depression. People with OCD can be besieged by intrusive, unwanted thoughts and images (obsessions) and compelled to perform tortuous behavioural and mental rituals (compulsions), for example excessive and ritualised hand washing.

The Obsessive Compulsive & Anxiety Disorders Foundation of Victoria identified a need for self-help support networks, support groups and related support services for people in Victoria with OCD. This need was identified after consultation with sufferers and carers, and feedback in relation to the operation and availability of treatment services.

Obsessive Compulsive Disorder support groups assist people with OCD and their carers to rebuild a sense of worth and confidence, and gain new understanding which relieves feelings of guilt and fear. Support groups offer an important means of positively addressing the problems of stigma, alienation and isolation. Clinical and research evidence suggests that OCD sufferers who have good support and social networks have a better chance of recovery and are less likely to relapse than sufferers who are isolated and lack opportunities to improve their level of social functioning.

Support services which were relevant to the aims of the project included telephone counselling, information and referral services, a professional referral network, educational resources, and training for telephone counsellors and group leaders.
Outcomes: The Obsessive Compulsive & Anxiety Disorders Foundation underwent a rapid expansion during the two years after the project grant was allocated:

- 6 new OCD support groups were developed and five new specialist support groups were established (in total, 18 groups provide 28 obsessive compulsive disorder/anxiety support groups meetings each month in Victoria);
- 5 time-limited telephone conferencing systems (Telelink) were established to allow people who are geographically isolated or house-bound due to deterioration in their condition, to belong to a support group;
- an OCD & Anxiety HelpLine was established to provide direct access to support, counselling and referral advice for sufferers and carers;
- training was undertaken for 12 group leaders and 8 volunteer telephone counsellors;
- a Group Leaders Support Network was established;
- a Support Group Leaders Resource Manual was developed; and
- a range of pamphlets containing information about OCD were prepared for consumers, families/carers, and health professionals.

The project demonstrated the need for the support and educational services offered by the Obsessive Compulsive & Anxiety Disorders Foundation which provides sufferers and carers with useful strategies for coping with the impact of the disorder on their lives and to access appropriate treatment. It is noted that the support groups and services currently serve as the only source of help for many sufferers who are unable to access treatment or who cannot be helped by the available treatments.

As a consequence of this project, Victoria established a state-wide self-help network for people with OCD and their carers, including support and social groups, educational services, and a HelpLine.

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**Project 24038: Evaluation of Psychiatric Nurse Clinical Consultancy**

**Aims:**
The project was undertaken by the Faculty of Nursing RMIT, & the Australian Centre for the development of Psychiatric Nursing Excellence ($177,234). The aim of the project was to evaluate the impact on the quality of care provided in two hospitals through the employment of expert psychiatric nurse consultants working as part of emergency departments.

**Description:**
The project was conducted over a nine month period under the auspices of RMIT Faculty of Nursing and the Australian Centre for the Development of Psychiatric Nursing Excellence. Experienced psychiatric nurses were located in the emergency departments of two Melbourne hospitals and provided a range of services including psychiatric nursing care in the emergency department, formal and informal education of staff, and advice to team members on consumer care.

Two hospital sites were chosen for the project based on their differences in trauma services, psychiatric service position, location, and client demographic. Hospital A is a suburban hospital which has sessional psychiatric consultation services but no inpatient psychiatric unit. It has a large number of deinstitutionalised clients who are receiving community-based care. Hospital B, which has an inpatient unit and designated psychiatric medical staff, serves an area with a large homeless population. Neither site had formalised psychiatric consultation in the emergency department.

The aim of including the psychiatric nurses in the emergency department was to improve the quality of care provided to consumers with a mental illness who presented at the hospitals. The project focused primary on four client groups: identified mental illness; crisis/trauma; comorbidity; and physical illness causing psychiatric symptoms. During the consultancy period, 148 people at Hospital A and 195 people at Hospital B received direct care from the psychiatric nurses, which constituted 2.8% and 4.3% of all presentations to the emergency departments over the period of the project, respectively.

The project also sought to improve, through consultation and education, the knowledge and skills of general nursing staff and produce positive effects on their attitudes and improvement in a range of nursing practices. The education component of the consultancy accounted for a sizeable proportion of their workload: 16% in Hospital A, and 12% in Hospital B.
Outcomes: The report states that an increase in the effectiveness and efficiency of the emergency departments was demonstrated by a decrease in the average length of stay in the emergency departments for mental health consumers at the end of the consultancy period. The average length of stay for mental health patients was reduced by 1 hour and 36 minutes at Hospital A, and 2 hours and 5 minutes at Hospital B. The report also states that mental health consumers were assessed more rapidly, provided with timely and appropriate support, and were referred to suitable services more effectively.

Reports of critical incidents relating to episodes of verbal and physical abuse, and consequential consumer/staff injury, were reduced by 63% at Hospital A and 38% at Hospital B at the end of the consultancy. Additionally, the number of mental health consumers leaving after certification or against medical advice and attempted self-harm were also decreased at the end of the project. Overall the report states that the outcomes for mental health consumers who presented at emergency departments in the two Melbourne hospitals were significantly improved.

Toward the end of the consultancy period, data was collected from a random selection of the emergency department nursing staff in both hospitals. The report states that from the data collected, it appeared that the emergency department nurses benefited from the educational input of the consultants which ranged from formal and informal teaching, role modelling, and support for skill development. The emergency department nurses identified increased confidence in their work with mentally ill people, more knowledge of mental illness, and an attitudinal shift which enabled them to see mentally ill people as valid emergency department service users.

Both psychiatric nurses were re-employed at the end of the project to continue their work as members of the emergency department teams.

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