

Illawarra Shoalhaven Local Health District Mental
Health Service: Adult Acute Inpatient Units

MODEL OF CARE



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OVERVIEW

This document outlines the Model of Care (MoC) that guides the Illawarra Shoalhaven Local Health District (ISLHD) Mental Health Service Adult Acute Inpatient Unit Model of Care. Staff work within this framework whilst focusing delivery according to the specific local needs of the community. The following Units are within scope for this MoC; Wollongong Adult Acute Inpatient Unit, Eloura Adult Acute Inpatient Unit and the Mirrabook Adult Acute Inpatient Unit.

These Units operate 24 hours per day, 7 days a week. They are staffed by multidisciplinary teams including Registered and Enrolled Nurses, Consultant Psychiatrists, Psychiatry Registrars, Occupational Therapists, Psychologists, Social Workers, Aboriginal Mental Health Workers and Mental Health Peer Workers. The teams are led by Nurse Unit Managers.

The document is written with reference to *the Fifth National Mental Health Suicide Prevention Plan (Department of Health 2017)*, the current *NSW Government Strategic Mental Health Plan, 'Living Well' (NSW Mental Health Commission 2014)* and the *NSW Strategic Framework and Workforce Plan for Mental Health 2018–2022 (NSW Health Ministry of Health 2018)*. It operates in accordance with the *NSW Mental Health Act 2007 (Mental Health Act 2007 No. 8 2007)*. **The Mental Health Act 2007 contains a range of aims and objectives that underline the central place of community based care, the importance of involving consumers wherever possible in decisions about their care and treatment, and acknowledges the important role played by carers (s195).**

STRUCTURE OF THIS MOC AND HOW TO USE IT

This Model of Care sets out four core functions of these Units, as endorsed by ISLHD. Each function is linked to specific principles which underpin the approach to service delivery required to operationalize these functions. These principles are applied within the context of local service delivery needs. Local Business Rules may be used to formalize and outline work practices within unit. These must reflect the functions and their accompanying principles.

CORE FUNCTION #1: Provide a Safe Environment

(Kezelman & Stavropoulos 2012)

Principles

- Communication facilitates safety.
- Private, quiet inviting spaces are available for therapeutic interactions.
- Adequate space is available for acutely behaviourally disturbed people to deescalate safely.
- Space is available to allow family and carers to participate in care.
- Space is used to promote sexual and psychological safety and allow for individual diversity.

CORE FUNCTION #2: Provide Respectful Therapeutic Interactions

(Commonwealth Government of Australia 2013; Zugai, Stein-Parbury & Roche 2015)

Principles

- Enact the principle of ‘nothing about me without me’ for consumers and carers.

- Construct relationship based care.

- Enact the NSW Health core values of collaboration, openness, respect and empowerment in all therapeutic interactions.

CORE FUNCTION #3: Provide Evidence Based Treatments and Practices for the Acute Symptoms and Psychological Distress Associated With Mental Health Disorders, and Co-Morbid Physical Health Conditions

(Lambert et al. 2017; NSW Government 2017)

Principles

- Consciously, consistently and proactively use, comprehensive, holistic, evidence based treatments and practices, within a multi-disciplinary approach, in a manner that aims to minimise or eliminate the need to physically restrain or seclude.

- Make all efforts to actively engage consumers in all stages of their treatment.

- Consciously, consistently and proactively use evidence based approaches to all prescribing. Embed the NSW Health guidelines on the Physical Health Care of Mental Health consumers into care.

CORE FUNCTION #4: Facilitate the Fastest, Safest Possible Discharge

Principles

- Discharge planning starts at admission, community in-reach is essential.

- The consumer is the primary stakeholder; therefore treatment and risk formulation is individualized.

- It is acknowledged that recovery involves taking responsible risks.

- Provide collaborative communication with all stakeholders, from admission through transition to community follow up. Family and Carers are acknowledged as significant stakeholders, in accordance with the NSW Mental Health Act 2007.

- Admissions are seen in the context of ongoing recovery and provide the opportunity for proactive forward planning.

References

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