Welcome

Welcome to the Aged Persons’ Mental Health Unit.
Our aim is to provide the best possible care to older people who are acutely unwell with a mental illness.

We aim to provide care from a ‘Recovery’ approach.

This means that our goal is to support people to:

‘build and maintain a meaningful and satisfying life and personal identity, regardless of whether or not there are ongoing symptoms of mental illness’. [Shepherd, Boardman & Slade 2008]

This information booklet has been provided to assist you in your recovery journey and to provide you with important information relating to your care, and to explain some of the services offered while you are a patient with us.

Important Information

Patient Rights and Responsibilities

Mental health care is a partnership between mental health professionals, patients and carers. To get the best from your health care it is important that you understand your rights and responsibilities. Please read the brochure titled ‘Statement of Rights & Responsibilities for Consumers, Families/Carers and Staff’ included in your Admission Pack.

Privacy and Confidentiality

All information you provide is treated in the strictest confidence and the use of personal information is supported by privacy laws and stringent policies and procedures. Please read the ‘How NorthWestern Mental Health is Protecting Your Privacy’ brochure for more information about this.

Freedom of Information

You also have the right to obtain a copy of your medical record and can do so via Freedom of Information (FOI) by contacting the NWMH health information service.
Mental Health Act 2014

As a patient, you may have been admitted under the new Mental Health Act. The new legislation requires mental health services to:

- be inclusive and holistic in their approach to assessment and treatment
- focus on recovery
- recognise the importance of carers and families
- help protect the rights and dignity of consumers:

  **Statement of Rights**

  If you have been admitted under the Mental Health Act, you will be provided with one or more *Statement(s) of Rights* that relates to your particular situation.

- empower and support consumers to make decisions about their treatment and care:

  **Advance Statements**

  An advance statement sets out a person’s treatment preferences in case they become unwell and need compulsory mental health treatment. You can make an advanced statement at any time if you understand what an advanced statement is and the consequences of making one.

  **Nominated Person**

  A patient can nominate a person to receive information and to support them if they require compulsory mental health treatment. You can nominate someone else as your ‘nominated Person’ at any time, provided you understand what a nomination is and the consequences of making a nomination.

**Gender Sensitivity**

Within the Unit we use a ‘gender sensitive’ approach to ensuring the Unit is a safe and supportive environment for all patients. This means that we take a person’s gender into consideration in all interactions; we recognise how gender may have impacted on a person’s experiences; and we are mindful of and responsive to the experiences of trauma. Please let us know if you have any issues or concerns that need to be addressed or that we need to be aware of.

**Cultural Sensitivity**

We aim to be respectful and sensitive to your cultural background while you are a patient with us. Please let us know if you need assistance with any cultural, language or religious needs. If you need assistance with communicating in English, we can provide:

- **Interpreters**

  Language interpreters are available by arrangement. It is health service policy to use professional interpreters at key times during the hospital stay, rather than use family and friends.

- **Language Cards**

  Language cards are available in many languages and may help you in communicating your day-to-day needs with staff.

**Aboriginal and Torres Strait Islander Patients**

Please let us know if you identify as Aboriginal or Torres Strait Islander, so we can ensure that we provide culturally appropriate care and support during your hospital stay.
**Admission**

When you are admitted to the ward, your admitting nurse will show you to your room and explain the ward layout and routine. They will also assist you to check and unpack your personal items. (Under some circumstances, depending on the demand at the hospital, you may be relocated from one room to another)

**What to bring to hospital**

- Comfortable day clothes
- Nightwear
- Low heeled, well-fitting, non-slip footwear
- Toiletries
- A small amount of money for minor purchases (eg. coffee, newspaper)
- Aids and devices (please advise nursing staff if you have dentures, hearing aids, mobility aids or falls prevention aids)
- Medicare Card; Repatriation File Number if you are eligible for Department of Veteran Affairs’ entitlements; Full details of your health insurance cover (if you have cover)
- Any current medications must be handed to the nurse in charge on arrival

**What to avoid bringing to hospital**

- Valuables, such as jewellery or large amounts of money
- Alcohol or non-prescribed drugs
- Sharp objects such as scissors, files, etc (these must be handed to the nurse in charge).
- Plastic bags (the Unit is a ‘plastic bag-free’ zone)
- Any type of scarf, shawl, wrap or pashmina
- Food from home (please refer to the ‘Your Guide to Food Safety’ brochure)

**Visiting Hours**

We have open and flexible visiting hours. This means that your family/carers can visit at any time, however, we encourage for this to occur between 9am and 9pm. The nursing staff will liaise with your family/carers regarding their visiting plans and will explain to them the daily ward routine and weekly timetable. Our aim is to encourage family/carer support and participation, whilst enabling you also to meet your individual recovery goals and participate in any treatment or recovery groups or programs.

**Day and Overnight Leave**

If you would like leave from the hospital during your stay, please discuss this with your treating team.

**Patient Meals**

The Unit provides patients with a choice of meals. Dietary requirements will be observed where they
are deemed part of your medical needs and, as far as possible, your cultural requirements. As we cannot cater for every cultural background your carer/family members may bring in food. There are a number of health and safety factors to consider when food is brought into hospital so please discuss this option with the nursing staff, and refer to the ‘Your Guide to Food Safety’ brochure.

Patient Clothes/Laundry
As there is no laundry service available, we encourage family/carers to take laundry home for patients. If you do not have family/carers to assist you with this, laundry facilities may be available for you to do your own washing. If you require assistance with this, please discuss with your ward staff.

Smoking
Smoking is not permitted in hospital grounds. This means that no one can smoke inside or outside any building, or in any outdoor area within the boundaries of the hospital.

The Aged Persons Mental Health Program understands the difficulties that people experience when they are unable to smoke. To make it easier for admitted patients to give up smoking we offer:

- Access to Nicotine Replacement Therapy (under the supervision of the patient's doctor)
- Counselling and support

Property & room searches
In order to protect the safety and security of patients, visitors and staff a search of your personal property or room may need to be undertaken. The nursing staff will carefully explain the reason for conducting the search and seek your consent to carry it out. You should be present when these searches occur. If you require more information, please speak to one of the nursing staff within your unit.

Driving
It is recommended that you do not drive a vehicle while receiving treatment at an inpatient unit unless agreed by your treating psychiatrist. This is because mental illness and the use of medications can affect your driving ability and skills. If you are thinking of resuming driving on discharge from the unit, please let your mental health care team know. Please see the ‘Driving, Mental Health and You’ brochure for more information about this.

Services and Facilities
The services and facilities differ between our three units at Sunshine, Broadmeadows and Bundoora. Please speak to our nursing staff if you need more information about any of the following:

Car parking
Public Transport
Telephones
Mail
Newspapers
Cafeteria
Auxiliary shops
Purchasing incidental items
Using personal electrical or electronic items (including mobile phones) in the unit.

Treatment and Care

You are the most important person in your mental health care team. If you are able to make decisions for yourself, members of the team will work in partnership with you in making decisions about your care. Working with the team will help you achieve your highest level of recovery. Your mental health care team includes:

Medical staff
Your doctors (Consultant Psychiatrist & Psychiatric Registrar) will supervise your overall recovery program and will diagnose your condition and prescribe suitable treatment, including psychiatric medications.

Nursing staff
Nursing staff are on duty 24 hours a day. They will provide you with both physical and psychiatric nursing care. If a problem arises, they will ensure it is dealt with by the appropriate person in the healthcare team.

Social Worker
The social worker will work with you, your family/carer and other supports to address various social and emotional issues, including legal, financial, accommodation, family/relationship, social support, and personal empowerment issues. Social workers will also arrange meetings between you, your family and the healthcare team (called ‘family meetings’) to discuss your recovery process.

Occupational Therapist
The occupational therapist focuses on how your illness and admission impacts on what you want to, need to and have to do. An occupational therapist can support your return home by assessing how you manage looking after yourself, how you complete your home tasks, or how you connect with your community.

Psychologist
The psychologist can assist you by talking through issues regarding your thinking, behaviour and mood. The psychologist can help you to implement strategies to improve the way you feel and function in your life.

Case Manager- Aged Psychiatry Assessment & Treatment Team (APATT)
If you have an APATT case manager, he or she will keep in touch with you while you are a patient here. Your case manager will also be involved in planning your discharge from the Unit. If you do not
have an APATT case manager, you may be allocated a case manager to support you when you leave hospital.

**Behavioural Assessment & Specialist Intervention Consultancy Service (BASICS)**

The BASICS team is a specialist team who work specifically with people who have a dementia. A BASICS clinician will work with all patients with a dementia in collaboration with the unit staff during the stay and will continue to provide support if discharged to a residential aged care home.

**Pastoral Care [for Sunshine Aged Persons Mental Health Unit only]**

Pastoral services provide sensitive, unbiased spiritual care with sympathetic consideration given to any specific religious and emotional needs of patients, their families and staff. Whether you recognise your pastoral needs or not, if you wish to see someone from pastoral services or a representative of your own faith, nursing staff are able to make a referral for you. Please be assured that you are free to decline pastoral care at any time.

**Role of family/carers**

**Family/Carers**

Your family/carer and friends are also an integral and important part of your mental health care team. Your family/carers may be invited to participate in the care planning and discharge planning for you. In most cases, a meeting will be held in the early stages of your admission, in order to share information and to develop a care plan. Later on, there will be a meeting to prepare for your discharge from hospital.

Family/carers may contact any of the team to discuss issues or concerns at any time. If there are a large number of family members, we ask that you nominate someone to be the primary contact.

**Carer Consultant**

A Carer Consultant is also available to support families and carers. A Carer Consultant is someone who has had lived experience of being a family member/carer of someone with a mental illness, and is employed by the mental health service to provide carer information and general emotional, social and practical support to other family/carers. If you are a family member/carer of a patient in the unit and you feel you need to talk with someone about your recent experiences, please ask to make contact with the Carer Consultant.

**Carer Support Groups**

The Carer Consultant also facilitates support groups for carers. These are usually run once a month. The main focus of the Carer Support Group is to improve or sustain the wellbeing of all family/carers. It is a safe and confidential place for families/carers to share their lived experience with other families and carers. Please check the Consumer & Carer Information board for support group times or ask a team member.
Carer Social Outings

The Carer Consultant also organises social outings for families/carers at times during the year. These may include lunch outings at a cafe/restaurant or theatre outings and these are free of charge to the family/carer. Please check the Consumer & Carer Information board for support group times or ask a team member.

Carer Support Fund

The Mental Health Carer Support Fund exists to provide financial support to family/carers of people with a mental illness. If you are struggling financially as a result of your responsibilities as a carer, you may be eligible to request assistance through the Carer Support Fund. Please speak to the unit manager, social worker or Carer Consultant if you require assistance.

Discharge Planning

Discharge planning refers to planning ahead, to ensure suitable arrangements are put in place for when you leave hospital. Discharge planning is a shared process, which requires your input, if you are able.

Improving our Service

Tell Us What You Think!

Your feedback is very important as it helps us improve our mental health service and provide the best quality care. We would appreciate it if you could tell us about your experience of staying within our Unit by completing a ‘Tell Us What You Think’ brochure. These are included in your Admission Pack. They are also located in the ward, together with mailboxes. If you prefer to take a brochure home to allow time to reflect on your experience, you may mail it back to the ward at a later date.

Complaints

If you have any concerns about, or would like to comment on, your care while you are an in-patient, we encourage you to speak to the Nurse Unit Manager. Any concern or complaint is viewed very seriously and we will make every effort to resolve any problem. If you prefer to remain anonymous, you can write your complaint in a ‘Tell Us What You Think’ feedback brochure. All complaints and suggestions will be responded to. We encourage written comments but, if you prefer, the Unit Manager will be able to discuss your concerns or feedback with you in person.

Mental Health Complaints Commissioner

Wherever possible, try to resolve your complaint directly with the mental health unit. If this does not work, you can make a complaint to the Mental Health Complaints Commissioner. The office of the Mental Health Complaints Commissioner is completely separate from mental health services and the Department of Health, and has been set up to investigate and endeavour to resolve complaints about mental health service providers. If you need help to make a complaint, the Mental Health Services Commissioner’s office can assist with this also. You can contact the office on 1800 246 054 (free call from landlines) or email: help@mhcc.vic.gov.au or online at http://www.mhcc.vic.gov.au/
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Department Name | iPolicy Number | Authoriser Title | Reviewed Date (month and year)