Nursing undergraduate mental health placement handbook

Last updated April 2024

The Royal Melbourne Hospital

Contents

About the Royal Melbourne Hospital

As one of Victoria's largest public health services, the Royal Melbourne Hospital (RMH) provides a comprehensive range of specialist medical, surgical, and mental health services; as well as rehabilitation, aged care, outpatient and community programs.

We are surrounded by a Parkville Precinct of brilliant thinkers, and we are constantly collaborating to set new benchmarks in health excellence – benchmarks that have an impact across the globe. While we're each going about our different roles, we're united by a shared understanding of the way we do things around here. We call it The Melbourne Way:

People First   **Lead with Kindness**   **Excellence Together**

The RMH Strategic Plan *Towards 2025 Advancing health for everyone, every day* is our plan for the future – one that we are committed to achieving together.

The RMH Mental Health Services

Our multi-disciplinary workforce of skilled and dynamic clinicians, consumers and carers, provide a recovery-oriented approach to care.

We are dedicated to providing a caring and high-quality range of specialist, community and hospital-based mental health services for youth, adult and aged people who are experiencing, or are at risk of developing a serious mental illness.

You can find out more about our organisation and the work we do on our website at
www.thermh.org.au/services/mental-health/mental-health-services

Your mental health placement

Welcome to the Royal Melbourne Hospital Mental Health Services (RMH MHS). We hope your time with us is enjoyable and you are able to put your learning into practice.

We understand that your mental health placement can seem daunting and you may be unsure of what to expect, but we are here to support you.

We call the people that we work with 'consumers' or 'people with a lived experience'. You can hear more about what it is like to be a consumer and the issues that are important to them in these videos on our website at https://www.thermh.org.au/news?category:news=294&category:tags=82

Pre-placement

You are required to review your mental health lecture, tutorial notes and other reference material relevant to mental health nursing specifically including:

- Mental status assessment

- Psychiatric diagnosis and related symptomatology – psychotic disorders, mood disorders, anxiety disorders, personality disorders, substance use

- Risk assessment

- Mental Health Act

- Psychopharmacology and medication management

- Recovery-oriented practice

- Other resources for information

First day

You are required to present the following documents for verification on the first day of your placement. Please bring evidence of the following with you:

- University student ID card – to be worn at all times

- Valid National Police check

- Valid Working With Children's Check

- Valid immunisation status

- Evidence of completion of hand hygiene

- Completion of emergency contacts and declaration form (scan the QR code or visit https://biredcap.mh.org.au/surveys/?s=JLFLHYLKEK4R9FF8)

- You also need to print and bring your university appraisal document and placement requirements (if it is a hard copy)

If you cannot produce evidence of the above on your first day of placement, you will not be able to complete your placement.

You will be provided with access to Electronic Medical Records (EMR) for the duration of the clinical placement. You can read more about our EMR on our website at https://www.thermh.org.au/your-care/hospital-care/your-hospital-stay/your-medical-records/electronic-medical-record

COVID-19 requirements

You are also required to present the following documents for verification on the first day of your placement.

- Evidence of completion of COVID training – If this is not current or not previously completed, you will be expected to complete the RMH respiratory protection training (online) as part of your orientation

- Mask Fit Testing (MFT) – if this is not current, you can book your MFT at https://rppmaskfittesting.as.me/schedule/f49d67e7

Note for those booking MFT

Some of the RMH MHS facilities are based in the broader community. As MFT occurs at the RMH Parkville site, you will need to attend your MFT in the week before your clinical placement. You will need to provide evidence (email regarding allocation and dates of placement) from the university of the upcoming placement

allocation to RMH MHS.

Placement orientation

You will meet with a Clinical Nurse Educator on the first day of your placement. The first day will begin at 9am. You will be given your roster that day.

Make sure that you are clear about **which site you have been allocated** a placement and have enough time for finding where to go and where to park.

The Royal Melbourne Hospital

Where to go

Inner West Area Mental Health Service has several sites that you may be allocated to.

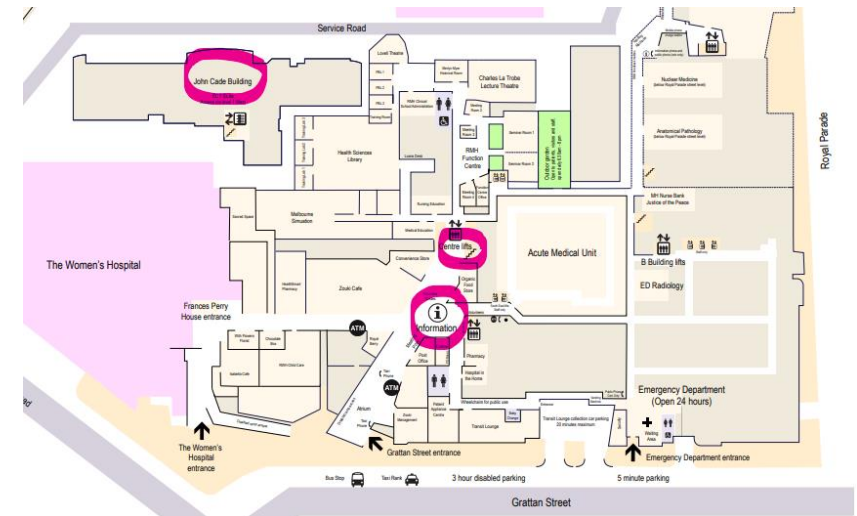| SITE	ADDRESS	CONTACT	TRAVEL	MAP
John Cade Unit Adult Acute Inpatient Unit	John Cade Building The Royal Melbourne Hospital, 300 Grattan St, Parkville 3052	(03) 9342 4067 Kieran Cooper kieran.cooper@mh.org.au	Tram: #58 and #59 Stop 14 or #19 Stop 10 and 11 Bus: 401/403 Train: North Melbourne Car: Limited paid parking on site and in surrounding streets	

The Royal Melbourne Hospital

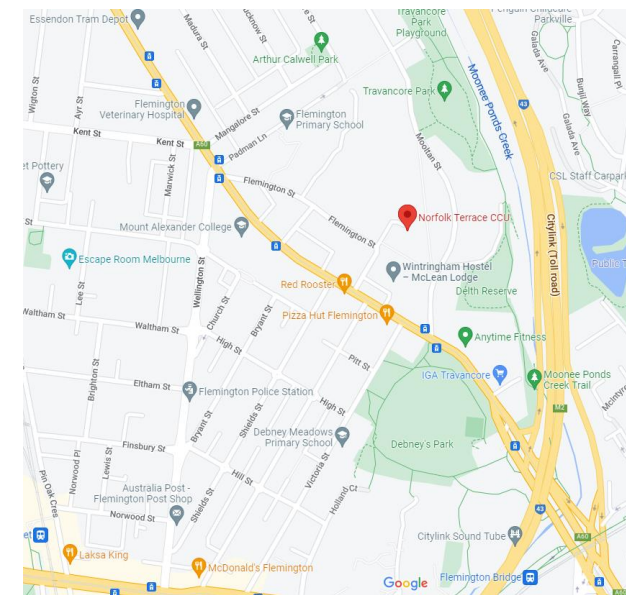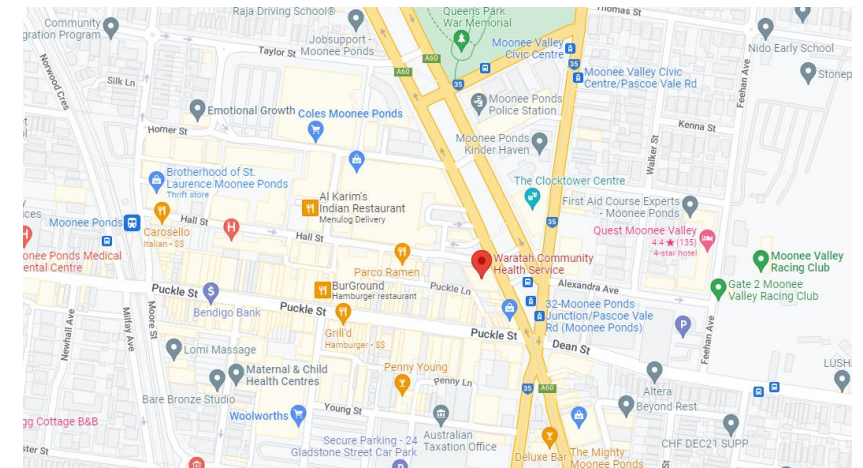| SITE	ADDRESS	CONTACT	TRAVEL	MAP
John Cade Unit Specialist Services (Eating Disorders and Neuropsychiatry)	John Cade Building The Royal Melbourne Hospital, 300 Grattan St, Parkville 3052	(03) 9342 4067 Helen Kelly helen.kelly@m.org.au	Tram: #58 and #59 Stop 14 or #19 Stop 10 and 11 Bus: 401/403 Train: North Melbourne Car: Limited paid parking on site and in surrounding streets	
Norfolk Terrace Community Care Unit (residential)	1 Travancore Crescent, Flemington 3031	(03) 8371 7500 Elyse Riverson Elyse.Riverson@mh.org.au Sharon Flynn Sharon.Flynn@mh.org.au	Tram: #59 Stop 24 and 25 Bus: 959 Train: Flemington Bridge Car: Parking on side streets	

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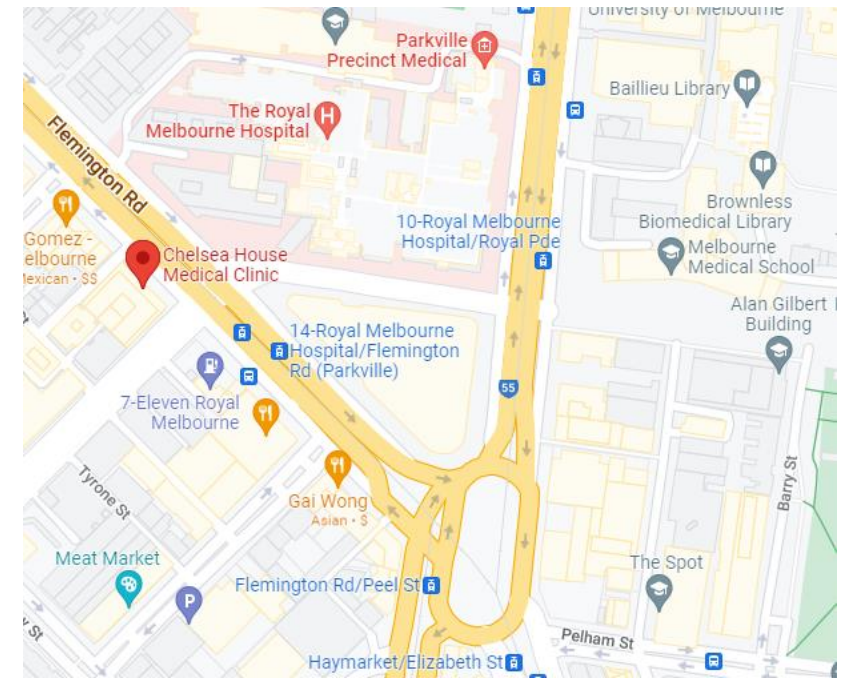| SITE	ADDRESS	CONTACT	TRAVEL	MAP
Waratah Community Service	Level 2 641 Mt Alexander Rd, Moonee Ponds 3039	(03) 9377 3400 Tony Blanco antonio.blanco@mh.org.au	Tram: #59 and #82 Stop 32 Bus: Moonee Ponds Bus Interchange Train: Moonee Ponds Car: Very limited and restricted parking	

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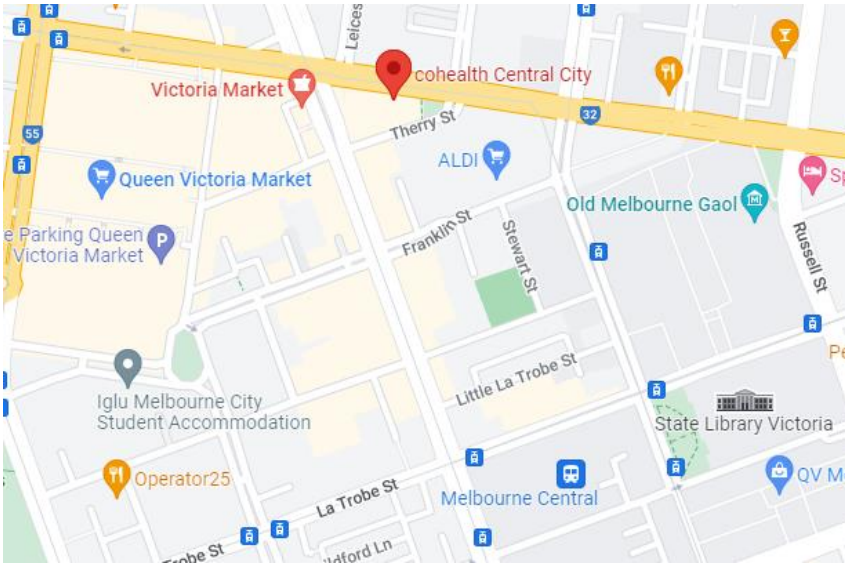
SITE	ADDRESS	CONTACT	TRAVEL	MAP
Chelsea House	Level 2 55 Flemington Rd, North Melbourne	0438 599 117 Adam Hancock adam.hancock@mh.org.au	Tram #58 and #59 Stop 14 or #19 Stop 10 and 11 Bus: 401/403 Train: North Melbourne Car: Limited paid parking on site and in surrounding streets	

SITE	ADDRESS	CONTACT	TRAVEL	MAP
Homeless Outreach Mental Health Service (HOMHS)	53 Victoria St, Melbourne	03) 9448 5536 Jedd Splatt jedd.splatt@mh.org.au Luke Edgell luke.edgell@mh.org.au	Tram #19, #57, #58, #59 Stop 7 Bus: 207, 220, 234, 302, 905 Train: Melbourne Central or Flagstaff Car: paid parking at Queen Victoria Market car park	

The Royal Melbourne Hospital

Student responsibilities

Code of conduct

Students are expected to practice within the following frameworks:

- RMH values

- RMH policies and procedures

- AHPRA and NMBA Standards for Practice and Code of Conduct

Punctuality, attendance and absenteeism

Please arrive at your placement at least five minutes prior to the shift commencing.

If a student is late or will not be attending placement for the allocated shift, they are to contact the CNE.

A student is not to leave their shift before the rostered completion time, unless approved by the CNE or in extenuating circumstances.

Leave will not granted for completion of university assignments.

Public holidays and making up time

In the event of a public holiday during student clinical rotation, 'make up' hours will remain the responsibility of the Clinical Placement Coordinator from your University to facilitate with the students. It is not possible for our Clinical Nurse Educators to facilitate this.

Dress code

Students are to wear neat professional attire whilst on placement. Footwear needs to be sensible - cover the toes and minimal heel for OH&S reasons. If you choose you can wear your uniform but this is not necessary.

Students are required to wear ID with their first name clearly displayed.

Inappropriate clothing such as ripped jeans, shorts or skirts above the knee, tops with slogans are not permitted and may result in you being asked to leave to change attire

Personal belongings

Mobile phones are not to be used in clinical areas and can only be used on breaks or in emergencies.

There are limited storage space for keeping your personal belongings. The RMH accepts no responsibility for lost, stolen or damaged belongings

Rostering

John Cade, The RMH Parkville

Acute Mental Health Inpatient Level 1 and John Cade Eating Disorders/Neuropsychiatry Level 2

Roster will be provided on students first day.

Morning and afternoon shifts Monday to Friday, capacity for students to swap between themselves.

Norfolk Terrace Flemington

Community Care Unit (residential facility)

Roster will be provided on students first day.

Morning and afternoon shifts Mon – Fri, capacity for students to swap between themselves.

Waratah Clinic, Moonee Ponds

Adult Community Mental Health and Older Adults (outpatient)

Rostered Monday to Friday 8:30-5 pm

Chelsea House

Community Homeless Outreach team (outpatient)

Rostered Monday to Friday 8:30-5 pm

Homeless Outreach Mental Health Service (HOMHS)

Rostered Monday to Friday 8:30-5 pm

Placement guidelines

We aim to help students have a successful clinical placement and will provide the support to achieve this. However, there are circumstances that will put a student at risk of being unsuccessful in completing the clinical placement.

These include, but are not limited to:

- Practising outside of the student's scope of practice and without the appropriate supervision

- Performing clinical tasks unsupervised where direct supervision is required

- Breaching consumers' privacy and confidentiality

- Disclosing information on social media and public areas

- Exchanging personal information with consumers and family members e.g. email addresses, phone numbers

- Unprofessional behaviours and poor attitude to consumers, families, educators or staff

- Inadequate knowledge or skill level for clinical practice

- Limited evidence of developing skills and knowledge during placement

- Risks to consumer safety

Scope of Practice

Students are to work under the clinical supervision of a Registered or Enrolled Nurse. This may be in the form of direct or indirect supervision depending on what the task is. All documentation written by a student in the clinical file is to be co-signed by a Registered Nurse.

A student should only provide direct clinical care within their level of knowledge and experience, university scope of practice and in accordance with the Royal Melbourne Hospital's policies, procedures and guidelines.

Completion of placement

Placement documentation

At the completion of placement is it the responsibility of the student to ensure that all university requirements have been accurately completed. This includes appraisals, competencies and timesheets.

The RMH takes no responsibility for incomplete university documentation. Students will not be able to return to placement outside of their placement dates to have documentation amended.

The RMH procedures

The Royal Melbourne Hospital's policies, procedures and guidelines are developed and reviewed to comply with the National Standards using current evidence and best practice from national and international sources.

RMH-wide and departmental policies, procedures and guidelines can be accessed via Prompt (you can find the link on the RMH Intranet).

If you are not sure about something – ask!

The Royal Melbourne Hospital

Privacy and confidentiality

Any information pertaining to a consumer of the RMH MHS is deemed to be private and confidential and should not be disclosed.

Consumer information should only be discussed with healthcare workers directly involved in direct clinical care. Consumer names and diagnoses are not to be discussed outside RMH MHS.

See the 'Entry to Practice Electronic Medical record Access' guideline and the slide deck 'Keeping patient information private in the EMR'.

Media enquiries

The Communications team is responsible for managing external communication, including publications, media relations, issues management, event management and government liaison. Students may not discuss the RMH with external communication outlets or the media.

Social media

Students must be aware of the RMH social media restrictions when posting on any social media platform. It is important to remember that all comments are public and can be linked back to the student, university or the RMH. The RMH Social Media policy is available on Prompt.

Communicating for safety

Communication is critical to the delivery of safe patient care. Communication failures and inadequate or poor documentation of clinical information results in errors, misdiagnosis, inappropriate treatment and poor care outcomes (NSQHHS, 2017).

Three high-risk areas in communication are critical to patient safety:

- When patient identification and procedure matching should occur

- When all or part of a patients care is transferred within an organisation, between multidisciplinary teams and clinicians, across organisations and on discharge (i.e. at transitions of care)

- When critical information, or risks, emerge or change throughout the course of care.

Clinical handover

Clinical handover is the transfer of professional responsibility and accountability for some or all aspects of care for a patient to another person or professional group. Breakdown in the transfer of information or in 'communication' has been identified as one of the most important contributing factors in serious adverse events and is a major preventable cause of patient harm (ACSQHC). The Royal Melbourne Hospital uses the ISBAR format to provide a standardised approach to handover across all areas.

Safety huddles (John Cade Unit 1 and 2 only)

Safety huddles are routine structured short briefings designed to give nurses opportunities to stay informed, review events, make and share plans for ensuring well-coordinated safe care. Studies show that implementing huddles in health care can improve consumer safety and have a positive impact on teamwork.

Clinical Governance Framework

The RMH employees have a responsibility to deliver Safe, Timely, Effective, Person-Centred Care (STEP) by:

- Fulfilling roles and responsibilities as outlined in the Clinical Governance Framework

- Acting in accordance with all safety, quality and improvement policies and procedures

- Identifying and reporting risks in a proactive way in order to minimise and mitigate risk across the organisation

- Working in partnership with consumers and where applicable their carers and families

- Complying with all relevant standards and legislative requirements

- Complying with all clinical and/or competency standards and requirements and ensuring you operate within your scope of practice and seek help when needed

Health, safety and wellbeing

The RMH aims to provide a working environment that is safe and without risk to the health, safety and wellbeing of all employees, consumers, and visitors to the RMH.

The RMH employees and students have a responsibility to:

- Maintain an understanding of individual responsibility for consumer safety, quality and risk and contribute to organisational quality and safety initiatives

- Take reasonable care for their own safety and wellbeing and that of anyone else that could be affected by their actions

- Speak up for the safety and wellbeing of consumers, colleagues and visitors and escalate any concerns that have or could impact safety

- Accept responsibility for ensuring the implementation of health and safety policies and procedures and cooperate with the RMH in any action it considers necessary to maintain a safe working environment that is safe and without risk

Infection prevention

What is infection control?

Infection control is about preventing consumers, staff and visitors from acquiring healthcare associated infections and effectively managing infections when they occur by using evidence-based strategies.

Your responsibilities

- Don't come to work if you are sick (e.g. diarrhoea, vomiting or respiratory symptoms)

- Know why your patient is in isolation – if you don't know, ASK!

- Read and follow the isolation signs on the door of the patient room/zone

- Look up the IPSS intranet page or Prompt if you have a query about infection control – if you still don't know, ASK!

- Protect yourself and wear the appropriate PPE

- Make sure you have the flu vaccine annually

- Know your immune status for vaccine-preventable infections

- Complete pre-placement the DH Covid and Hand Hygiene training

Medication safety

Medicines may only be administrated by a student nurse under the direct supervision of a Registered Nurse employed by the RMH.

Ask your CNE for the best practice guidelines for administering Long Acting Injectables available in this procedure: Administration of Long Acting Injectable (LAI) Antipsychotic Medicines.

Medication resources available via intranet:

- Australian Medicines Handbook

- MIMs (and Don't Rush To Crush)

- Therapeutic Guidelines

- Australian Injectable Drugs Handbook

- DrugDex (MicroMedex) and more

- Prompt – Medication guidelines (prescribing, administration and monitoring information) and medication-related procedures

- Reference books in medication rooms - Injectable Drugs Handbook and Don't Rush to Crush Handbook

- Choice and medication (www.choiceandmedication.org/nwmh/)

Occupational health and safety

Alcohol and drugs

While on duty it is prohibited for individuals to:

- Possess, use, manufacture or distribute illegal drugs

- Be affected by alcohol or illegal drugs

- Be adversely affected by legal drugs

Individuals have an obligation to report to their CNE the use of prescription or non-prescription drugs which may affect normal functioning or which have specific warnings on use (i.e. impact on their duties).

Smoke-free zone

Smoking is strictly prohibited in all RMH. Smoking is not permitted within 10m of the entrance to any of the RMH premises.

Bullying and harassment

The RMH will not tolerate bullying under any circumstances. Employees may deal with bullying either by resolving the issues themselves by discussing the problem with the person involved, or by seeking assistance from their CNE.

Anyone involved in a complaint of bullying, or its investigation, must ensure that the circumstances and facts of the complaint are disclosed only to those people who are directly involved.

In particular, it is important that employees who either make a complaint, or may be witnesses to the circumstances giving rise to the complaint, do not discuss the matter outside the investigation and resolution processes.

Prevention and management of clinical aggression

Clinical aggression can occur for many reasons. It is often triggered by a person's conditions (e.g. delirium, dementia, drug or alcohol addiction), and also due to strong feelings of fear, grief, frustration and powerlessness. This can cause consumers or family/visitors to become irritable, angry or aggressive, and at times this can lead to violence.

Preventing and managing clinical aggression involves a multifaceted approach and your actions should depend on the level of threat you perceive from the person. We can use skills like good communication, negotiation and problem solving where it feels safe to do so. However, if you feel your safety is threatened, you should exit immediately and seek help from your team.

Seeking urgent assistance

In all of the different programs there are mechanisms for alerting others to a need for urgent assistance. You will be orientated to what they are, how they work and as students what is expected of you in those situations.

Security services The Royal Melbourne Hospital

Security provides the following services:

- Patrols are conducted 24 hours per day, 7 days per week with 24 hour security

- Escorts are carried out within Hospital buildings and grounds, upon request to security

- Facilitate lost property, and at the RMH City are custodians of patient valuables

- Investigate reports of suspicious circumstances

Emergency response

Remember, for all emergencies dial extension **2222** (or 9342 2222 or (0)000 as appropriate) and state the Respond Colour (see the Emergency Code Checklist on the last page of the handbook) and location. Also notify your Area Warden.

Your future career as a mental health nurse

We have several programs available to you if you are interested in becoming a mental health nurse.

You can see the list of pathways on our website at www.thermh.org.au/services/mental-health/work-with-mental-health/mental-health-nursing-careers

Graduate Nurse Program

Our Graduate Mental Health Nurse Program facilitates a safe and supportive transition to practice. The program also aims to provide you with an opportunity to consolidate and build upon your mental health knowledge, skills and confidence.

We offer Graduate Mental Health Nurses benefits and services such as professional study days, clinical support and a social club.

If you would like to learn more about this, please register your interest by emailing gmhnp@mh.org.au

Find out more about how to apply for the Graduate Mental Health Nurse Program at www.thermh.org.au/services/mental-health/work-with-mental-health/mental-health-nursing-careers/postgraduate-mental-health-nurse-program

For more information, email the Graduate Mental Health Nurse Program at gmhnp@mh.org.au

Beyond your graduate year

We pride ourselves on assisting in the development of future nursing leaders. Our graduates are highly sought after within the health care industry, with greater than 90% of our graduates electing to seek employment back in our services.

Ongoing employment is offered following successful completion of your Graduate Nurse Program with the opportunity to undertake clinical rotations in specialty areas.

We also conduct university-affiliated post graduate programs.

Find out more about our postgraduate nurse program at www.thermh.org.au/services/mental-health/work-with-mental-health/mental-health-nursing-careers/postgraduate-mental-health-nurse-program.

Emergency Code Checklist

EMERGENCY	RESPONSE

FIRE / SMOKE CODE RED	♦ If safe to do so, rescue anyone in immediate danger & isolate Fire/Smoke by closing doors.
	♦ Raise alarm - Activate nearest Break Glass Alarm,
	                  - **Dial 22 22** & state type of emergency & location,
	                  - Notify Area Warden or person in charge of area.
	♦ Turn off & isolate all oxygen supplies & electrical equipment in vicinity of emergency.
	♦ If safe to do so, attempt to extinguish fire, or prepare to evacuate.
	♦ Follow instructions issued by Area Warden or person in charge of area.

EVACUATION CODE ORANGE	♦ The need to evacuate, to where & via which exit, will be determined by Area Warden or person in charge of area &/or Emergency Controller. **Do Not Use Lifts**.
	♦ When instructed evacuate to the nominated area in the following order:
	  - Ambulant patients,
	  - Semi-ambulant patients,
	  - Non-ambulant patients via evacuation mat, blanket drag, wheelchair, chair or other means.
	♦ Search all rooms, leave lights on & collect staff rosters & patient lists.
	♦ Advise Emergency Controller of completed evacuation.

BOMB THREAT CODE PURPLE	♦ On receiving phone call, keep caller talking. **Do not hang up**. Keep line open until Police arrive. ♦ Record information on <u>bomb threat checklist</u>. ♦ Alert another staff member to **Dial 22 22**, stating phone extension & area under threat. ♦ If suspect item is found – **do not touch**. Remove anyone from immediate danger area. ♦ Notify Area Warden or person in charge of area. ♦ Await further instructions from the Emergency Controller.
MEDICAL EMERGENCY / CARDIAC ARREST CODE BLUE	♦ Check area for any immediate signs of danger to yourself or to the casualty. ♦ If necessary and safe to do so, remove the casualty from immediate danger. ♦ **Dial 22 22** & state type of emergency, location and treating unit – the Medical Response Team will then be notified. ♦ Commence First Aid / CPR, if competent to do so. ♦ Remain with the casualty until Medical Response Team arrive.
INTERNAL EMERGENCY CODE YELLOW	♦ If safe to do so, rescue anyone in danger. ♦ **Dial 22 22** & state type of emergency & location. ♦ Notify Area Warden or person in charge of area. ♦ If necessary & safe to do so, provide medical assistance &/or isolate services. ♦ Await further instructions from the Area Warden or person in charge of area. ♦ Await arrival of Engineer on duty/ call and appropriate designated response group.
ARMED THREAT CODE BLACK	♦ Do not jeopardise your own or others safety. ♦ Obey instructions – do not withhold drugs/money if demanded. ♦ Do only what is directed, nothing more. ♦ Talk in a non-threatening manner. ♦ If able, activate duress / silent intruder alarm if it exists, **OR** ♦ **Dial 22 22** or alert another staff member to **Dial 22 22** & state type of emergency & location – Police will then be notified ♦ **Stay calm** & await assistance.
UNARMED THREAT (Including Aggressive Behaviour) CODE GREY	♦ Do not jeopardise your own or others safety. ♦ Ensure safe distance is placed between you & the aggressor. ♦ Talk in a non-threatening manner. ♦ **Dial 22 22** or alert another staff member to **Dial 22 22** & state type of emergency & location. ♦ **Stay calm** & await assistance.
EXTERNAL EMERGENCY CODE BROWN	♦ Refer to External Emergency Response Plan. ♦ Await instructions from Emergency Controller.
ALL CLEAR	♦ At the completion of the emergency & only on the **authority of the Emergency Controller** will the 'Stand down - All Clear' announcement will be made.

Advancing health for everyone, every day

300 Grattan Street
Parkville VIC 3050 Australia

thermh.org.au

ABN 73 802 706 972

PREPARED BY: Nigel Toomey
E: nigel.toomey@mh.org.au