St Vincent's Mental Health Service (Melbourne)

COMMUNITY PSYCHIATRY TRAINING PROGRAM

Community mental health services are the cornerstone of public psychiatric services in Victoria. The community mental health service at St. Vincent's Health is a fully integrated service, which provides a range of services from acute home-based psychiatric treatment to ongoing rehabilitation for patients with chronic mental illness. Consultant psychiatrists, trainee psychiatrists, psychiatric nurses and allied mental health professionals comprising multidisciplinary treatment teams play a key role in the delivery of care to patients attending community mental health services.

TRAINING OBJECTIVES

The Community Psychiatry Training Program has been designed for psychiatrists and trainee psychiatrists. The emphasis of this training program is the development of an extensive understanding of the range of services and models of community mental health care that are delivered by public mental health services. The key objectives are to:

- Gain an overview of community mental health services design;
- Gain a clear understanding of the principles and benefits of community-based mental health care:
- Understand the conceptual framework of fully integrated service models and activities:
- Develop an understanding of the need to manage patients in the least restrictive setting;
- Incorporate the perspectives of patients and their carers in the provision of community psychiatric care;
- Develop an understanding of the range of mental disorders affecting those who attend community mental health services and their treatments;
- Understand the significance of comorbid disorders (including substance abuse) in community psychiatry and their treatments;
- Understand the range of service components from acute psychiatric care to long term care that are provided to patients in a flexible manner;
- Learn the key community intervention models including crisis intervention, case management, intensive case management, psychosocial therapies and residential rehabilitation;
- Develop clinical leadership and identify strategies for clinical team building and training;
- Understand quality improvement strategies and identifying clinical indicators to be met:
- Explore the process of service transition and systems change required for mental health service improvement.

PROGRAM STRUCTURE

The Community Psychiatry Training Program is based on a practical hands-on approach to learning through a clinical placement of at least 6 months duration. The emphasis of the program is the observation of and participation in the clinical activities at one of the two community mental health services attached to St. Vincent's Mental Health Service (Clarendon and Hawthorn Community Mental Health Clinics). Over the period of the placement it is expected that the psychiatrist will develop competence in the key areas of knowledge and develop certain key skills that are integral to the practice of community psychiatry.

It is anticipated that the psychiatrist will have the opportunity to work with different treatment teams within the service which include:

- Crisis Assessment and Treatment Service (CATS)
 - o focusing on crisis assessment, short-term intervention and referrals to the acute psychiatric inpatient unit
- Continuing Care Team (CCT)
 - o based on the case management model
 - o coordination of the care of patients including direct treatment as well as liaison with other services
- Mobile Support and Treatment Service (MSTS)
 - o based on the intensive case management model
 - o provision of intensive home-based treatment for patients with complex needs and high levels of disability
- Community Care Unit (CCU)
 - o focusing on medium to long term residential rehabilitation in a purpose-built cluster-housing setting with 24-hour on-site nursing supervision
- Homeless Outreach Psychiatric Support
 - o provision of psychiatric service to the homeless patients with mental disorders

It is also anticipated that the psychiatrist will gain experience within the organisational structure of St. Vincent's Mental Health Service as an integrated service with close liaison between the different service components. This integration promotes the continuity of treatment for patients who may require periods of treatment by different services during the course of their illness. Thus both episodic and longitudinal care form the overall continuity of treatment provided to the patient in order to best meet their needs.

CORE KNOWLEDGE

The psychiatrist will gain knowledge in the following key areas of the practice of community psychiatry.

• The rationale and process of deinstitutionalisation, followed by the development of community psychiatric care.

- An understanding of the process of scaling down and closure of psychiatric institutions, together with the integral steps of developing community resources and services to support patients in the community.
- The principle of provision of mental health treatment and support services that are integrated into general health services available to the community (mainstreaming).
- The principles of the provision of community care within the context of the National Mental Health Plan (including the principle of providing treatment in the least restrictive setting).
- The application of the Mental Health Act of Victoria (1986) with particular emphasis on the parts of legislation directly relevant to the community management, including:
 - o the use of mental health legislation to facilitate admission to hospital for patients when involuntary treatment is required
 - the use of community treatment orders in order to continue treatment for involuntary patients in the community
- Psychiatric assessment incorporating a detailed understanding of the patient's psychosocial history and community supports.
- Assessment of risk to self and others including formulation of a detailed risk assessment plan, which can be managed by community psychiatric services.
- Knowledge of low prevalence psychotic disorders including schizophrenia and related disorders, bipolar affective disorder and major depressive disorder with psychotic features.
- Knowledge of high prevalence disorders including non-psychotic mood disorders, anxiety disorders and personality disorders.
- Knowledge of substance use disorders with particular emphasis on the high comorbidity with other mental illnesses.
- Application of the evidence-based treatment approach to the management of patients with the above psychiatric disorders.
- Application of quality improvement measures and data collection of appropriate clinical indicators to maintain adequate standards of care.
- The principles of crisis intervention and the provision of short-term intensive assessment and intervention in periods of crisis.
- The principles of case management where total clinical care is provided in addition to liaison with other community services involved in the patient's care.
- The principles of intensive case management through the provision of intensive home-based outreach support to patients with high needs.
- The principles of intensive psychosocial rehabilitation in a community setting which is integrated with community agencies.

CORE CLINICAL SKILLS

The psychiatrist will develop skills in the assessment and management of patients in the community setting with emphasis on the following skills.

- Assessment and management of patients with mental illness in their own environment
- The involvement of carers and social supports in the assessment and management of patients

• The use of family intervention including psychoeducation, social support and family therapy relating to the patient's illness and the family's response to the patient

The psychiatrist will develop skills in working in the multidisciplinary team of the community mental health services and to understand the roles of the team members in community psychiatry. These include the generic role of case management staff and the specific roles of multidisciplinary team members including psychiatric nursing staff, occupational therapists, social workers, clinical psychologists and also management staff. The psychiatrist will develop skills to enhance the role of medical staff in providing clinical leadership to the multidisciplinary team, which may entail the following aspects.

- Primary consultation
- Secondary consultation
- Coordinating and leading review meetings where the management of patients are discussed within the multidisciplinary team
- Assisting team members to reach a consensus agreement regarding the management of a patient
- Assisting team members to resolve issues which may impact on the provision of service
- Administrative and medico-legal responsibilities
- Teaching responsibilities to medical staff and other mental health professionals
- Involvement in research activities in community psychiatry

The psychiatrist will develop skills in forming partnerships and working with key government, non-government and community agencies in the provision of community care for patients with mental illness living in the community. This include:

- The role of non-government and other community organisations in providing effective and appropriate care which meets the needs of patients and their carers
- The role of vocational rehabilitation services
- The role of social security services
- The role of consumer advocacy groups
- The role of carer advocacy groups and carer support groups
- The liaison between the public mental health service and general health services
- The liaison between public mental health services and the primary care setting
- The liaison between public mental health services and the private psychiatric care setting
- The liaison between public mental health services and emergency services particularly when providing crisis intervention at the time of assessing and managing patients in the community with behavioural disturbance secondary to mental illness