Mental Health Nursing within the GP setting

Setting up under the Mental Health Nurse Incentive Program (MHNIP)

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As a mental health nurse working within the public hospital inpatient and community settings, I always wished for a role which offered autonomy, variety and challenges, in which I would only be limited by my own input, not hospital politics, funding or role descriptions.

So when I heard about the MHNIP I knew I had to find out more. I read through the criteria and role description for mental health nurses under the MHNIP and found this to be broad enough to be able to cater for client needs in the community. I then hunted through positions advertised on the ACMHN website and was lucky enough to secure a full-time position with Positive Health Medical Centre working in collaboration with the GP who employed me.

The first days on the job were interesting, to say the least. As a new role in the medical centre my employer was happy to be completely guided by me as to what the role would entail. This was initially quite daunting as I didn’t have any contacts in similar roles, nor were there any procedures and protocols to follow other than the broad Medicare Australia guidelines. However now I believe building a new role to be a blessing in disguise as I was able to taper my role directly by the needs of the clients and my own goals for employment.

Setting up procedures and protocols was and remains an ongoing process through trial and error. I created HoNOS forms from scratch using past experience and websites about the HoNOS for reference. The ACHMN website now has templates for use. Referral forms and assessment templates I also created from scratch, but I had kept samples of various templates which had been approved by hospital documentation committees from different mental health services. These became guide.

Linking with other mental health nurses was important to me, as being new to the area I was somewhat initially isolated. This is when I became involved with the ACHMN, and this contact has been vital. Through the College I found my clinical supervisor and have access to increased educational and development activities.

Fitting into the Positive Health Medical Centre team in the beginning seemed to have its hurdles. Prior to me the clinic employed a social worker who was funded through another program. This role entailed assisting people with crisis situations, such as emergency housing, and assisting with the preparation of the GP Mental Health Plans. There was a lack of understanding of the MHNIP role by the other GPs in the clinic and this was initially frustrating as I would be spending time with clients who did not meet the MHNIP criteria, and then trying to fit in those that did. Only through a long process of educating the GPs about the MHNIP did this change.

The clinic also employs two practice nurses who cover the entire opening hours for the clinic, therefore I am not asked or expected to do anything that is in their job description. However I continue to do brief physical exams, ECGs and depots for my clients so that I maintain these skills. My relationship with the practice nurses is very respectful and we work well as a team. I am
also able to offer them information about mental health and medications.

Most of the clients I see attend the clinic where I have my own consulting room. However I do home visit clients when necessary to those with difficulties with transport, or who are unwell to attend the clinic. The role has developed into one with much variety and only limited by my own input. As mentioned before I have tapered the role as to the needs of the clients, hence the variety.

Some clients attend for formal psychotherapy, psycho-education, monitoring and administration of medications. I also work on fitness programs with clients, hold social activity groups (as I have access to the mini bus which the clinic owns), assist with housing and Centrelink, refer clients to various agencies, work on community collaboration projects with the Division of GPs and other things as they arise.

I set up a ‘Positive Mental Health’ website of which has links to local community resources and a section where members can view the calendar for local events and activities, chat on the forum or upload photos and art work. I have also developed a ‘Positive Mental Health’ newsletter for all of the clinic’s patients which has tips for managing stress, improving sleep, as well as education about mental health disorders. I love that I am constantly challenged, able to use various psychological focused strategies, able to assist the doctors with diagnosis and treatment options and still able to do the somewhat simple things that make so much of a difference in clients lives, like go group bowling!

Since being credentialed and understanding the value of this I have become much more aware of the need for ongoing development and education. Being employed by the clinic I am on a weekly wage, and with the current incentive payment set up, if I am not seeing clients then the clinic does not bring in funding, which does pose a difficulty with attending conferences and educational opportunities. Recently I have been using annual leave to attend education and development activities, and these are also at a cost to me. This I find is one of the only downsides of my position. Long term the costs associated will be a tax deduction, but it doesn’t make the process any easier. I have found a way to limit the number of expensive conferences and attend cheaper or free programs offered by the Division of GPs, ACMHN, Mental Health Professionals Network, The Rural Health Education Foundation and others. Whilst there is a little hunting involved I have found very interesting ongoing development and education opportunities at low or no cost.

Positive Health Medical Centre is registered with Beyond Blue and has always attracted a large clientele with mental health needs. Initially I was working with a majority of patients with major depressive disorder, however, as I have developed the role and made myself known to local community mental health clinics I now have a more varied client list. The local community mental health clinic has welcomed my involvement and have used this clinic as a discharge process from community mental health services for those clients who still need follow up but are relatively compliant and insightful.

I believe the MHNIP to be such an important incentive, not only for clients, but also for myself. The MHNIP has offered me a varied, well respected, autonomous, challenging and exciting role which will continue to develop and shape as per clients needs. I have found that jumping in head first to the opportunity has only made me a better clinical nurse as I have to draw on skills previously put aside and continually push myself. If you are considering the option taking up a role under the MHNIP, I suggest you prepare for some confusing and challenging times ahead (especially dealing with Medicare Australia) but also prepare yourself for some amazing rewards, increased motivation and passion for your work!

Resources
www.acmhn.org
www.mhpn.org.au
www.rhef.com.au