

Finding your way around the Ward:

An Orientation to your Inpatient Stay

Who?

What?

When?

Where?





Partnering with Consumers - This booklet was developed in collaboration with our consumers



Finding Your Way Around the Ward: An Orientation to Your Inpatient Stay

Introduction

This information guide has been created to assist you during your stay at Metro North Mental Health, The Prince Charles Hospital (TPCH).

We welcome you to the ward and we will endeavour to assist your recovery with the involvement of all medical, nursing and allied health staff where appropriate. Our service aims to improve the quality of life of people with mental health challenges through high quality consumer and carer focussed services, teaching and research, and by providing leadership and excellence in mental health care.

The ward is a recovery focused care environment and your participation in therapeutic programmes is encouraged to enhance your recovery and promote a return to the community. The involvement of families and carers will at times be necessary for planning of treatment and discharge. They may need to have information to understand the issues that surround mental illness and its treatment and their caring role and their support options.

We wish you well during your recovery.

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Approved by Assoc. Prof. Brett Emmerson, Executive Director, Metro North Mental Health



Quick Reference Guide

Name: _____ Ward: _____

Ward Phone Number: _____ Patient Phone Number: _____

My Treating Team - Staff in this ward responsible for my care:

Nurse: _____

Doctor: _____

Psychiatrist: _____

Ward Round: Day: _____ Time: _____

Others: _____

Other Important Numbers:

Mental Health Call: (24 hours)	1300 MHCALL (1300 642 255)
Acute Care Team: 24 hours per day:	1 800 112 403 Toll Free
Consumer and Carer Services	3139 4561
West Wing:	3139 4323 Nurses Station 3139 4534 Patient Phone
East Wing:	3139 4619 Nurses Station 3139 4618 Patient Phone
Chermside Community Team/MIRT:	3139 5119
Nundah Community Team/EP:	3146 2320
Pine Rivers Community Team:	3817 6409
Older Adults:	3139 3212
13 Health:	13 43 25 84
Lifeline:	13 11 14
State-wide Sexual Assault Line:	1800 010 120
Domestic Violence Line:	1800 811 811
Alcohol and Drug Information Service:	3837 5989 or toll-free 1800 177 833
Queensland Transcultural Mental Health:	3167 8333 or toll-free 1800 188 189
SANE Australia:	1800 18 SANE (7263)
Beyond Blue:	1300 22 46 36
Mental Illness Fellowship:	3358 4424
ReLink:	3036 4448
Carers Hotline (ARAFMI)	3254 1881
Children of Parents with Mental Illness (The Koping Program):	3266 3100



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Your recovery journey begins here

What is Mental Health?

Mental health means having a sense of wellbeing, enjoying positive relationships with others and being able to cope with the inevitable ups and downs of life. Mental health problems are disturbances in a person's mental state or wellbeing. A mental health problem may be short-term and may occur when there is a stressful event or circumstance, or it may extend to seriously affecting a person's ability to relate to others, and to work, or to enjoy leisure time and cope with everyday living.

What is Mental Illness?

Mental illness is a significant disturbance of thought, mood, perception or memory. The term 'mental illness' refers to a group of illnesses (sometimes called mental health disorders) with various symptoms and behaviours. Examples of these include Depression, Schizophrenia, Bipolar Affective Disorder, Anxiety Disorders, Personality Disorders and Eating Disorders.

A person may experience periods of wellness followed by periods of illness and disability. Mental illness affects one in five people during their lifetime.

What is recovery?

"Recovery is a process, a way of life, an attitude, and a way of approaching the day's challenges. It is not a perfectly linear process. At times our course is erratic and we falter, slide back, regroup and start again...The need is to meet the challenge of the disability and to re-establish a new and valued sense of integrity and purpose within and beyond the limits of the disability; the aspiration is to live, work and love in the community in which one makes a significant contribution."(Deegan, 1988)

"Living, loving, working and playing in one's community despite the presence or absence of Mental Illness or distress."(Glover, 2010)

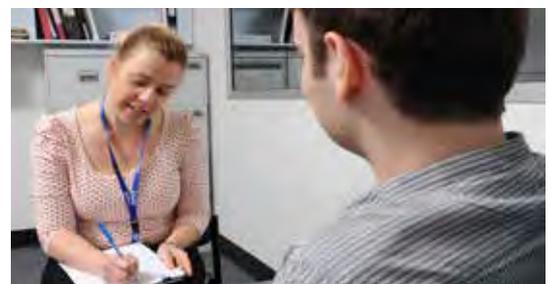
"Recovery is happening when people can live well in the presence or absence of mental health problems." (Scottish Recovery Network)

After My Stay, Where Can I go for Help in a Crisis?

In a crisis, contact the TPCB Mental Health Services - Acute Care Team by phoning 1300 MH CALL (1300 642 255). This service is available 24 hours per day, 365 days per year.

Alternatively, you can visit the Acute Care Team in person, via TPCB Emergency Department.

Community Mental Health Teams are attached to TPCB (contact numbers page i) which you may be referred to on discharge for follow-up.





Introduction to your ward area

Your nurse will show you around the inpatient area when you are admitted to the ward. If you have not been shown around your inpatient area or if something is unfamiliar to you, please ask a staff member to explain or show you what you need to know.

What to bring to the Inpatient Ward

Storage for your personal items is limited so please bring only your essential items to the ward and leave excess items with family or friends. We cannot take responsibility for any lost property.

Examples of what to bring to the Inpatient Ward

- ✓ Toiletries including roll-on deodorant, shampoo, conditioner
- ✓ Clothing – comfortable and suitable for the current climate

Note: The Mental Health Centre is air-conditioned.

There are limited amounts of spare clothes and toiletries available on the wards, so it is best to ask friends or family to bring some along for you if you arrive with little or no personal belongings.

Important

Current medications: It is always preferable to leave your medications at home. To ensure your safety and the safety of other patients while you are in the inpatient area, any medication you bring with you will be safely held and dispensed by the nursing staff.

What not to bring to the Inpatient Ward

To ensure the inpatient areas are a safe place for consumers and staff: all property that you or visitors bring into the ward must be given to the staff for a safety check. Many items are not permitted, some examples are listed below. Items thought to be hazardous or potentially dangerous will be removed and locked up for safety. These will be returned to you on your discharge if appropriate.

Please ensure that your visitors are also aware of what not to bring.

Examples of what NOT to bring	
✗ prescription and over the counter drugs	✗ plastic bags, glass or ceramic containers/objects
✗ illicit drugs, alcohol	✗ aerosol cans
✗ lighter, matches	✗ tin or aluminium products
✗ sharp instruments	✗ open food products
✗ metal objects	✗ sports equipment
✗ Cameras	✗ flammable liquids



Valuables

We encourage you to leave valuables and excess money with family or friends. If you wish to keep a small number of valuables in the ward, please ask the staff to lock them in your bedside locker. Any valuables or money kept on your person is at your own risk. Excess money and valuables can also be stored in the Hospital Trust Office in the Main Hospital Trust Office. Hours are: Monday to Friday, **8:00 am to 4:00 pm.**

Electrical equipment

If you wish to bring an electrical item into the ward please discuss this with your treating team.

Mobile phones

Mobile phones are allowed on the wards. However phone calls can be made from a pay phone in the main reception area located just outside the ward entrance, and received on the phone in the communal area on the ward. For more information, see the section on phone calls in this booklet.

Important times on the ward

Visiting Hours

Visiting hours are from **10:00 am to 8:00 pm.**

Friends and family are encouraged to consider the consumer's need for rest and recovery, and keep visits to a reasonable time frame. Children in the company of an adult are welcome to visit you on the ward. Family or friends wishing to bring children onto the ward should check with the nurse in charge of the ward upon entering the unit.

Visiting in the Psychiatric Intensive Care Unit (PICU) is allowed but at the discretion of nursing and medical team taking into consideration the consumers' condition. Visiting during meal times in PICU is discouraged.

Meal Times

A meal service is provided for all main meals in the main dining room on each wing. For clinical reasons you may be required to have your meals in the ward area for all or part of your stay.

Breakfast: 8:00 am to 8:30 am
Lunch: 12:30 pm to 1:00pm
Dinner: 5:30 pm to 6:00pm

Morning tea, afternoon tea and supper are served in individual ward areas. Vending machines are also available in the foyer area opposite the lifts and on E floor. You will need coins as the wards do not keep money, so you may have to ask friends or family to bring you some change.



Staff may restrict a consumer's intake of caffeine drinks in some circumstances because they can adversely interact with your medication. If you have any specific dietary requirements or preferences, for example vegetarian or low sodium diet, please discuss this with staff. If you are interested in cooking please speak with the Recreational Officer who conducts cooking activities.



Ordering of meals

Meals are pre ordered one day in advance. Menus are available in the dining room at breakfast. As a new admission you will receive a standard meal until your personal menu is completed and collected.

Accommodation

Bedroom

Accommodation is in double rooms or a single room. Allocation to a room is based on the patient's needs and bed availability; there may be times that you will be required to move or relocate to another area to accommodate another patient. Bedrooms are a private space, so we ask you to please not socialise in these areas. Relatives and friends are not allowed in these areas.

Please use the common lounge areas or the courtyard for socialising.

If your bed is in PICU, we will store your excess belongings in the store room. Please try to keep your room clean and tidy at all times. If you need help to do this, please ask your assigned nurse.

Laundry

Laundry facilities include a washer and dryer on each ward. The laundry is open from **8:30 am to 8:00 pm** daily. Please put dirty linen and towels in the linen bags provided.

Smoking

People with mental health issues are more likely to smoke and suffer from physical health problems associated with smoking (than people without mental health issues). Smoking makes some mental health conditions worse, so addressing smoking is a really important part of mental health treatment. If you are a smoker, quitting smoking is the best thing you can do to improve your health. You will also save lots of money. For non-smokers, this will reduce the risk of a person taking up (or re-commencing) smoking while in hospital.

In line with Queensland government policy, all Metro North Mental Health inpatient units at Royal Brisbane and Women's Hospital (RBWH), The Prince Charles Hospital (TPCH) and Caboolture are **tobacco free**. To assist with this change support will be provide.

If you are a smoker, please do not bring tobacco and related products to the hospital. Friends and / or relatives are not able to supply any tobacco or related products. This includes cigarettes, e cigarettes, lighters and associated items.



If you do bring smoking/tobacco related products into the mental health unit, you will be required to hand them in to staff for the duration of your admission. These items will be placed in secure storage, if requested they will be returned to you on discharge. Alternatively, you can send these items home with a friend or relative.

What help is available?

- Nicotine replacement therapy (NRT) patches and gum are available free while you are an inpatient;
- Free Quitline phones will be available on every mental health ward so you can talk to someone over the phone about any questions you have regarding quitting smoking;
- You are encouraged to talk to your treating team;
- If you have decided to quit smoking, ask to be referred to the Dual Diagnosis Coordinators for individual support, as an inpatient and/or an outpatient.

How can I get more information?

- Speak to your Mental Health Clinician, or allocated health professional.

Alcohol and Drugs

Hospital policy prohibits alcohol and all non-prescribed drugs. Alcohol and/or other non-prescribed drugs can be extremely harmful if mixed with the medications prescribed for your treatment. We discourage such use while you are here or on leave. It is a condition of your leave that you abstain from using drugs and alcohol. Anyone found in possession of, or supplying illicit drugs to our patients will be reported to the police and may be prosecuted. Random drug testing may be undertaken whilst you are an inpatient.

Safety and Security

Hazardous or Sharp Implements

For your safety and the safety of others, any potentially hazardous items or sharp implements such as razors, knives, scissors etc. are removed and stored in a locked cupboard on the ward. We will return these items to you on discharge.

It may be necessary to store certain items with Safety and Security and, if necessary, the Queensland Police Service (QPS) may be contacted to remove specific items. These items may or may not be returned to you, depending on the decision of the treating team, Safety and Security and/or the QPS.

The ward is locked

In accordance with Queensland Health policy, the doors to the wards are locked. If you are allowed escorted or unescorted leave, please ask your nurse to unlock the door for you. If you feel stressed or anxious about being locked in please share your concerns with a member of staff. There will always be staff on duty to assist you.



Voluntary patients are informed that they can exit at any time but are requested to remain on the ward overnight and negotiate leave to ensure that you are available for assessment, treatment and review.

If you are currently on an involuntary treatment order and leave the facility without approved leave the staff are obliged to have you return. Actions may include reporting this absence to Queensland Police Service who will be asked to support returning you to the facility. We recognise that this can be a distressing experience and would like to avoid this occurring by asking you to work with us to ensure leave can be approved before you leave the facility.

Violence and Aggression

Frustration and anger are normal emotions and you may feel distressed or upset during your stay on the ward. If you are feeling angry or frustrated, it's best to talk to someone before it gets out of hand.

You may ask your nurse for help and to get assistance to utilise your Personal Safety Plan (see page 26) to manage these feelings. The Personal Safety Plan is a document that helps you to think about the triggers that make you unwell, and about strategies to stay calm and reduce stress. We are committed to maintaining a healthy and safe environment for employees, patients, clients, visitors and others within our facilities.

Violence, threats of violence, abusive language, aggression and intimidation are not accepted behaviours and will not be tolerated by Queensland Health. You have the right to feel safe and to be in a safe place to help with your recovery. Please report any incidence of violence or any intimidation you feel immediately to the staff. We are trained to safely manage all issues and incidents. To lodge a formal complaint, see the *Feedback, Compliments and Complaints* section of this booklet.

CCTV

Closed circuit television is used within the Mental Health Unit. The CCTV is used to enhance the safety and security of the unit and environment.

Patient care

Visual Observations

When you are admitted, your treating team will prescribe a level of visual observation for your safety. This means that staff will frequently walk around to check that you are OK. The treating team will regularly review this level of observation according to your wellness. If your observation level is such that you may leave the ward, please read the section below titled *Approved Leave / Time Away From the Ward* for more information.

Visual observations will be carried out by the nursing staff (24 hours a day). The intervals of these observations will vary. They will also be conducted over night. The staff will observe you with minimal disruptions. On some occasions a torch may be used to allow enough light to perform the observation.



Medications

Medications are generally given at meal times with the exception of evening medications, which are given before you go to bed. Medications may be given at other times in line with your treatment plan or according to your preference. When you are admitted, you will be asked to have your photo taken for medication records. This ensures we give the medication to the correct person. When you are discharged, we will return your photo or dispose of it. Alternatively, if you do not wish to have your photo taken, you may wear a hospital identification bracelet instead.

The types of medication used for treating mental illness usually fall into five (5) main groups:

1. Anti-psychotics
2. Anti-depressants
3. Tranquilisers
4. Mood stabilisers
5. Movement disorder treatments
6. Medication for medical conditions that you were prescribed prior to your admission

Should you require further information on your prescribed medications, please don't hesitate to ask your doctor, nursing staff, or allocated community Mental Health Clinician. We can also provide you with a psycho-education package of information to read at your leisure, and you are encouraged to become involved in groups to talk about medications and their effects. You can get these information packages from the wards. Ask for the psycho-education packages on medications.

http://www.choiceandmedication.org/queenslandhealth/pages/queensland_leaflets/

Approved Leave / Time Away From the Ward

Your treatment in the inpatient area will help you recover from acute illness and having leave away from the ward is an important part of the recovery process. Having some time at home before being discharged provides an opportunity for you to gradually adjust to returning home and to the responsibilities that you have. Your leave programme will include guidelines and it your responsibility to:

- Discuss your plans for leave with your nurse before leaving the ward.
- Phone if you are going to return late.
- Ensure you return within the allocated time.
- Follow leave conditions.
- Tell your nurse when you return to the ward.

Requirements that you must meet while on leave include:

- No alcohol or drug use
- Return to the ward at the time required
- Take your medications as prescribed

If you will need medications while on leave please let your treating team know as far in advance as possible so they can be ordered and ready for you.



Leave taken Without Approval (Absconding)

Leave programmes are part of your treatment and you will be given leave as soon as possible. Taking leave without approval can impact negatively on your treatment. If a person is under the Mental Health Act, the treating team may ask the police to help return them to the inpatient ward. We recognise that not being allowed to leave the ward is frustrating and difficult and we assure you that we take this matter very seriously and will do our best to help you work towards your recovery.

Ward Rounds or Review Meetings

Your progress will be monitored, assessed and discussed by your treating team, which includes a Consultant Psychiatrist, a Psychiatric Registrar, Nursing and Community staff as well as other health practitioners involved in your care usually once a week. Since this is where important decisions are made, it is important for you to attend these meetings to participate in developing your treatment and discharge plan.

Family and carers are also encouraged to attend these meetings, so that they can find out how they can best help you on your journey of recovery. It is important to be aware that family and carers are only given general information regarding your treatment and care. Involving family and carers can often be beneficial to your recovery. If you wish them to be provided with further information and participate in developing your Discharge Plan, let your treating team know as soon as possible. Please ask staff when the ward round for your team will occur.

Falls and pressure injury prevention

When people are admitted to hospital, they may not be eating or drinking enough or may have been commenced on medications. As a result, people sometimes feel unwell, dizzy or unsteady on their feet which may lead to falls, they may also find they are spending lots of time sitting or lying in bed. Anytime you lie or sit down in the same position for a period of time, pressure is applied to different parts of your body. Any object that comes in to contact with your skin has the potential to cause a pressure injury. Nurses will conduct an assessment on admission and regularly during your stay.

Please tell your nurse or doctor if you have any concerns and they can conduct a review and adjust your treatment and care if required.

Please tell your nurse or doctor if you have any concerns and they can conduct a review and adjust your treatment and care if required.

Things that can help prevent falls are:

- Getting out of bed or chairs slowly – sit on the edge of the bed before standing
- Drinking enough fluids
- Wearing well fitting, low heeled non-slip shoes
- If you wear distance glasses or use a walking aid continue to do so
- Look out for hazards that may cause a fall, such as spills or clutter and tell staff promptly.
- Ensure your belongings are stored in your cupboard or in the patient store room.
- If staff recommend that you need assistance or supervision when moving, please ask them for this assistance and wait until they come to help you.



Things that can help prevent pressure injuries are:

- Changing position frequently when in bed or chairs
- Advise staff if you have any tenderness or soreness over a bony area or if you notice any reddened, blistered or broken skin
- Avoid massaging your skin over bony parts of the body
- Use a mild soap
- Eat a healthy Diet and drinking enough fluids
- Keep your skin and bedding dry

Ward rules, routine and respecting each other

All our wards have a routine which aims to assist you to re-establish positive sleep habits, promote healing and establish boundaries within the ward while respecting the rights of all patients. You will be assigned an allocated nurse for each shift. All the names of our consumers and their assigned nurse and treating doctor are updated daily and are clearly marked on the whiteboard near the Nurse's Station for you to see. Please talk to your nurse about any concerns you may have.

1. All consumers, unless physically unwell, are encouraged to be out of bed and utilising the communal areas from 9:00 am. Consumers may rest on their bedspace for a short period following lunch, if the impact of medication indicates a period of rest time. We make allowances for people needing 'time out' or quiet time.
2. We encourage all consumers to tidy their bed space. Staff will assist consumers requiring help in making their beds tidying their possessions and changing bed linen. Consumers are expected to maintain their personal hygiene every day.
3. Storage of foodstuffs in bedspace is discouraged. Consumers wishing to store foodstuffs may do so in a communal area. Consumers are expected to eat their meals in the Dining Room (unless they are physically unwell).
4. Consumers are encouraged to respect the needs of communal living and to share these facilities with 24 other people. Limited supplies of refreshments are available and we encourage all consumers to clean up after themselves in the ward kitchenette area.
5. Where treatment or activity programs are provided, we expect consumers to participate as part of their treatment program.
6. Sleep plays an important part in promoting good health. To encourage positive sleep habits, the television and music/radio is turned off at 9:30 pm. Lights in communal areas are switched off and communal areas are locked at 10:00 pm. We do understand that falling asleep may be difficult at times, especially in a new environment. If you have any troubles sleeping, please see the nursing staff and try not to disturb other patients. We ask you to respect other people's needs.
7. Consumers are not permitted to use staff telephones, but incoming calls can be arranged. If you have no money to make a call on the public telephone, talk to your assigned nurse.



8. Staff cannot be responsible for the safe storage of money and valuables. Locked bedside draws are provided next to each bed, but valuable whilst we encourage you to leave these items at home should you need to bring them with you will need to be stored in the hospital trust office.

Activities

Community Meetings

Each ward has a ward meeting on a Monday afternoon. At these meetings we discuss what programs are available throughout the day and you may ask questions and raise any concerns that you may have. While these meetings are not compulsory, we value your attendance and participation.

Community Visitor

The *Community Visitor Program* provides an opportunity for patients to discuss issues with an independent person. Issues can be raised by telephoning the *Community Visitor Program* Team or by speaking directly to the Community Visitor on one of their visits. You can contact the Community Visitor on: **1300 653 187 or (07) 3234 0870.**

Recreational activities

Recreation Officers are on the ward **Monday to Friday** for most of the day, offering a wide range of things to do while you are here. Some available activities are: walking, art and craft activities, relaxation sessions and cooking. There are many other things to do – so please ask. You can look for our daily activities program on the ward whiteboard (located outside the dining room).





Consumer companions

The companions have a personal lived experience of mental illness. They offer peer support and co-facilitate groups with the Recreational Officer or may simply have a chat with you over coffee. The companions can offer valuable support from the perspective of someone who has walked in your shoes and who is on their own recovery journey.

Television

The inpatient wards have televisions available for use. Please ask your nurse for instructions about how to use them.

Parents with children

If you are a parent then there will be additional challenges related to admission to hospital. Parents often have questions related to maintaining contact with their children during admission. They also wonder how best to talk to their children about their mental health and hospital stay. It is important that your children have contact with you while you are in hospital.

Your allocated community Mental Health Clinician or nurse can assist you in making appropriate arrangements. There are also a number of resources available and services you can access to help you support your children. For more information, please ask someone on your treating team.

Facilities

Cafeteria

The Breeze Café and shop is located on the ground floor adjacent to the Main Acute Building. The Café serves hot and cold meals, sandwiches, drinks and snacks. A selection of toiletries, flowers, stamps, phone cards, and magazines are also available from the shop. Funds from the Breeze Café go to TPCF Foundation which supports vital medical research.

Hours of service (subject to change)

The Breeze Café and shop is open from **7am to 6.30pm** everyday (Except Christmas Day)

Banking

There are multi-card automatic tellers (ATMs) in the Main Foyer, Ground Level, Main hospital.

Centrelink

A *Centrelink* agent visits the hospital to help patients with *Centrelink* queries on a fortnightly basis please see the Social Worker or Recreational Officer for an appointment.



Telephones

TPCH Mental Health Service has a coin operated public telephone in the foyer between East and West Wing. Local calls cost 50 cents. You will need coins as the wards do not keep money, so you may ask friends or family to bring you some change.

A telephone for incoming calls is available on each ward. If you are a patient in any of the following wards, please advise your relatives and visitors to ring the correct number:

West Wing Patient phone: (07) 3139 4534

East Wing Patient phone: (07) 3139 4618

Mail

Patient mail is delivered Monday to Friday.

Please address to:

Your Name (Ms Jane Citizen)
Ward
c/o The Prince Charles Hospital
Rode Rd
Chermside Qld 4032

Stamps can be purchased from the Breeze Café. Mail can be posted in the post box located at the front entrance of the hospital or can be given to ward staff (with correct postage).

Pharmacy

The Mental Health Centre Pharmacy is open **8:00 am to 4:00 pm** Monday to Friday.

When you are discharged from the ward, you will be given a supply of the medication you were prescribed while here for your ongoing health management. You may need to pay for your medication. You may be eligible for a PBS card for discounted medications. A member of staff can advise you on whom to talk to for this information.

Pastoral care and chaplaincy

Pastoral carers are available to all patients, and their family and friends. Denominational chaplains may be called by your nurse, at any time. If you have any special cultural needs please contact your nurse. The hospital chapel is located on the ground floor of the main block.

Interpreting Services

This service is free of charge if English is not your main language, or if you use sign language. It is best to use an accredited interpreter as they have experience in interpreting accurately. Ask the nursing staff to organise an interpreter for you if you are experiencing any difficulties with understanding any part of your stay or treatment here.



Shopping Centre

There is a major shopping centre located at the corner of Hamilton Road and Gympie Road at Chermside. This shopping centre has a number of banks, large department stores and specialty shops. There is also a smaller shopping centre located at the corner of Rode Road and Appleby Road at Chermside. This centre has a supermarket, pharmacy, a post office and a number of specialty shops.

Transport

Bus Service

The Brisbane City Council provides a bus service – No.354 to the main entrance of the hospital, linking the hospital with Chermside and Brookside shopping centres. Bus timetables are available on the information stand in the ground floor waiting area near the main block reception area. For more information on other bus services, please contact Trans info on **131 230** for transport information.



Parking

A multi-story public car park has been constructed at the western end of the main hospital building at TPCH. This car park is privately operated by Metro Parking. Visitors wishing to access this facility should enter TPCH via Rode Rd entrance and follow the signs. This car park is attended from **7:00am to 10:00pm** Monday to Friday at other times ticket can be accessed and paid through the automatic machines.

Staff

In the inpatient wards, a multi-disciplinary treatment team will work with you during your recovery process in hospital. The team consists of your allocated nurse (who will change each shift), Nurse Unit Manager (NUM), as well as your medical staff, (Consultant Psychiatrist, Registrar and Resident Medical Officer); recreational staff and other staff who work with you during your stay in hospital. Your case will be reviewed by the treating team weekly. Depending on your needs, you may be assigned a mental health clinician for your on-going support and health management following discharge.

Nurse Unit Manager (NUM)

The NUM is responsible for day to day running of the ward. On a daily basis they manage patient flow and bed management, staff allocation, rostering, recruitment and retention, human resources management and the monitoring of training and education development of all nurses. They are also involved in the business and management planning for the ward. The NUM at times directly participates in the delivery of client care, and is available to discuss any questions you may have during your admission.



Nursing Staff

The nurses on the ward are there 24 hours a day and 7 days a week. They are your first port of call with any questions, issues or problems. They will ensure that you receive all the treatment that is necessary. They give out medications when needed, and they continually assess people's mental health to make sure they are getting the best treatment that is necessary for their speedy recovery. They will help with any day to day needs like hygiene, sleep or dietary needs. Your nurse is able to contact other health professionals (e.g. doctors, social workers or occupational therapists) on your behalf if needed. Staff are also able to assist you complete your Recovery Plan (Refer page 26-27).

Mental Health Clinician

A mental health clinician is a member of your treating team who will provide mental health care service to you in hospital and the community. If you are going to receive ongoing mental health care from TPCCH mental health after you leave hospital, you may, if required, be allocated a mental health clinician before or soon after discharge. While you are an inpatient, they will help you successfully leave the hospital to begin community care. Upon discharge, your mental health clinician should be in contact with you within 1 – 7 days.

Mental health clinician's role

Your mental health clinician is a health professional. They may be a Nurse, Social Worker, Psychologist or Occupational Therapist. Mental health clinicians are here to support you achieve your recovery goals:

- To carry out ongoing assessment, assist your mental health and general wellbeing, and arrange referrals and accommodation as you need them.
- To support you to make links with other services that reintegrate you back into your community.
- To work with you to help you achieve your goals, including recovery planning.

If you already have an allocated mental health clinician, they will remain involved in your care while you are in hospital and can be contacted by your allocated nurse.

Social Worker

The inpatient social workers are skilled professionals who can provide support and assistance with a range of practical and emotional issues, including information and referral to other services within the community. Social workers are available to work with patients, their families and carers/support people.

Multicultural and indigenous workers

We can arrange access to an indigenous or multicultural service to assist with your care, please speak to your allocated nurse if you would like to make contact with them.



Consultant Psychiatrist

The treating psychiatrist is ultimately responsible for making or approving all treatment decisions for each consumer under their care. In doing this they rely on information obtained from a variety of sources including: consumers and their community supports (e.g. carers, family, friends, GPs, psychiatrists, etc.), mental health clinicians, nursing staff, the team registrar and Resident Medical Officer (RMO). They also have a role in supervising and teaching their registrar and RMO. Psychiatrists usually see consumers under their care once or twice a week while in hospital. They also see consumers in the community and oversee the management of consumers seen by their registrar in the community.

Registrar

The registrar is a qualified doctor who is training to become a psychiatrist. They are responsible for the day to day assessment and management of consumers under their care in hospital, and also see consumers in the community clinics. They are guided by advice from their supervising psychiatrist. They are also responsible for supervising and teaching the RMO attached to their team. Registrars usually change jobs every 6-12 months due to their training requirements.

Resident Medical Officer (RMO)

RMOs are junior doctors, often in their first or second year of medical training. They are therefore given brief jobs of 5-10 weeks in multiple different areas in the hospital to give them a broad knowledge of different medical specialties. They usually spend five weeks in mental health, so their knowledge in this area is often limited. Their primary responsibility is to manage any physical health problems experienced by consumers while they are in hospital, but they are also asked to contribute to mental health assessments of consumers as part of their training. They are supervised in this role by registrars and psychiatrists.

Consumer and Carer Services

All of the people working in consumer and carer services have personally experienced mental health issues, or have cared for someone with a mental health issue. Through their own journeys of recovery they are able to relate, in a unique way to your personal issues, needs and concerns. They offer empathy and support that complements the clinical support you receive from the hospital. They are employed by the mental health service to provide information on the service, and to assist you in participating in your recovery. They will offer support wherever possible.

At some time in the future, you may wish to join the consumer workforce, which provides an important part of recovery for many people, and is continually growing. You may also have a family member or a friend who would like to join the service as a carer. For more information on how consumer services can assist or support you, please refer to the *Consumer and Carer Services* brochure available on the ward.



Consumer companions

Consumer companions have a lived experience of mental illness. They visit the wards to support people who are recovering from an episode of mental distress. Companions willingly to their experiences of recovery and they may also help run groups or activities on the wards. Companions can offer a valuable support to consumers from the perspective of someone who has walked in your shoes and who is most likely still on their own recovery journey.

Your Rights

Australian Charter of Healthcare Rights

This is a guide for consumers, carers and families, outlining the rights of access, safety, respect, communication, participation, privacy and comment. (Please see page 31)

Your Privacy

Confidentiality

If you are a patient of our services, any personal information you share with staff to assist them in planning your care is considered confidential. That means that both government legislation and the TPCCH have limits on the type of information that staff can give out about you, or your specific issues and concerns. We respect your right to privacy while encouraging you to tell us about yourself, your hopes, dreams and fears. This helps us to plan your care better.

We recognise that the people who matter most in your life (your family, partner or carer) play an important role in your recovery and we actively encourage their involvement in planning your care and recovery. However, if you have concerns about anyone in your family or involved in your care being given information, please talk with staff about your concerns

At times, for example where issues impact the safety of consumers or others, staff may be obliged under legislation to disclose information to other persons or government organisations.

Health records and personal information

Queensland Health respects the privacy of patients and their families. Your previous care history can help us identify which treatments are likely to be safe and effective for you, and can also help reduce the likelihood of repeating tests.

Queensland Health is subject to privacy and confidentiality legislation which set the standards for how we handle your personal information.



Your health record is confidential and subject to the confidentiality safeguards in the *Hospital and Health Boards Act 2011*. Health records are the property of the Health Service and you may apply for access to your own health records under the administrative Access Scheme.

Accessing your health records

You have the right to apply for access to information held in your health records. When seeking access to your health information, you will need to provide evidence of your identity, such as:

- Passport
- Copy of a certificate or extract from a register of births
- Driver's licence

You will need to provide a certified copy of one of these documents. If you don't have any of the listed documents, talk to TPCHE about other accepted evidence of identity documents. To access to your health record lodge an application in writing to the Information Access Unit together with evidence of identity.

It is important to understand that access to health records is not an automatic right and may be subject to limitations under legislation. Applications processed under the Administrative Access Schemes are processed within 15 days from receipt of a valid application. In some cases information cannot be released under the Administrative Access Scheme and may be referred for a decision under the *Information Privacy Act 2009*. Staff at the Information Access Unit will contact you. If you require any further information please contact the Clinical Information Access Unit on (07) 3139 4883.

Rights of involuntary service users

Involuntary service users have the right to:

- information about:
 - What it means to be an involuntary service user;
 - Decisions made about your assessment, treatment and care;
 - What you can do if you have concerns about these decisions;
- be involved in planning and reviewing the services provided to you;
- have important people in your life involved in your treatment and care, if you wish;
- choose an **allied person** – someone who can help you have your say;
- receive visits from your own health practitioners and legal advisors at any reasonable time;
- regular reviews by the **Mental Health Review Tribunal** – an independent body whose role is to protect the rights of involuntary patients;
- continue to make your own decisions about other health care, personal and financial matters;
- make a complaint or compliment about the mental health services you receive.

The rights of involuntary patients are outlined *The Queensland Government's Mental Health Act 2000*. For more information, please refer to brochures available on the ward.



The Mental Health Review Tribunal (MHRT)

The MHRT is an independent body set up under the Mental Health Act 2000 to protect the rights of people receiving involuntary treatment for mental illness. For more information, please refer to the brochure: The MHRT, a Brief Guide.

For more detailed information on the MHRT you will find the following brochures on display on the ward. If you have difficulty finding these brochures, please ask your nurse for assistance. The documents are:

- The Mental Health Review Tribunal: A Brief Guide
- A guide to Forensic Order Reviews
- A guide to Allied Persons and the Tribunal
- A guide to Involuntary Treatment Order Reviews
- A guide to Family and Friends at Tribunal Hearing
- A guide to Giving Information to the Tribunal
- A guide to Rights of Patients Attending a Tribunal Hearing

Within 7 days after being put on an Involuntary Treatment Order (ITO), you will be given a letter explaining what this means for you, with an allied person brochure and nomination form, a statement of rights and a MHRT brochure.

If you remain on your ITO for 6 weeks you will be listed for MHRT and you will get a copy of a report done by your treating team at least 7 days prior to this Hearing. If you feel you have not been given adequate time to go through this report and ask your treating team any questions, contact your allocated nurse who will assist you. You may also discuss with the MHRT via phone on (07) 3235 9059 or discuss with MHRT at your Hearing.

Allied Persons

An involuntary patient may choose a person to help them represent their views, wishes and interests relating to their assessment, detention, and treatment. If you are an involuntary patient under the *Mental Health Act 2000*, please ask the staff for the *Allied Person Nomination Form*. You may also need some assistance in contacting your Allied Person, so just ask staff.

Rights and responsibilities of families, carers and advocates

These rights and responsibilities acknowledge the contribution that carers make to the support and care of people with mental health conditions. The caring and advocacy roles are complex and the relationship between carers, consumers and advocates can change frequently. This may also vary according to the consumer's age.

At times, there may be many issues that arise for people living with, caring for, or acting as an advocate for people who have a mental illness. Carers and advocates have a right to be respected for their individual human worth, dignity and privacy. Carers and advocates also have the right to



comprehensive information, education, training and support to facilitate the understanding, advocacy and care of those people for whom they care.

It is also recognised that there may be circumstances when the consumer is unable to give consent, or may refuse consent because of their mental state. In such cases, it may be appropriate for service providers, carers and/or advocates to initiate contact with the consumer's carer.

Families, carers and advocates have the right to:

- Be respected for their individual human worth, dignity and privacy
- Comprehensive information, education, training and support to facilitate the understanding, advocacy and care of those people for whom they care
- Provide information concerning family relationships and any other matters relating to the mental state of the consumer to health service providers
- Seek further opinions regarding the diagnosis and care of the consumer
- Place limits on their availability to consumers
- Use the mechanisms of complaint and redress
- Get help with their own difficulties which may be generated by the process of caring for or acting as an advocate for a person with a mental illness

Families, carers and advocates also have responsibility to:

- Respect the human worth and dignity of the consumer; consider the opinions of professional staff and recognise their skills in providing care and treatment for the consumer
- Co-operate, as far as possible, with reasonable programs of treatment and care aimed at returning the consumer to their optimal personal autonomy
- To obtain appropriate professional assistance if they have reason to believe that the consumer may have a mental illness

Feedback, compliments and complaints

This facility is committed to providing the best care we can for you and we would like to hear from you about how we are performing.

We recognise that one of the ways people judge an organisation is by the manner in which complaints are handled. We recognise the right of our consumers and their carers to fair treatment and we acknowledge your right to be heard. All TPCB staff are committed to the effective resolution of complaints and will support consumers and carers in utilising our complaints procedure.

For more information relating to compliments and complaints please refer to the *Compliments and Complaints* brochure, or ask staff to provide a brochure to you. If you wish to lodge a compliment or complaint please ask staff for the appropriate form or speak with the NUM.

Consumers may also provide feedback by putting a comment into the suggestion box. The suggestion boxes are emptied each week and feedback is reviewed by the *Consumer and Carer Engagement Group*. Serious issues which arise in the suggestion boxes are acted upon within 7 days.



If you would like to take a complaint further, you can contact the *Office of the Health Ombudsman*. They offer a free impartial and independent service to Queenslanders who have a complaint about a health service provided to them, a family member or someone in their care. For more information, call **133 646** or visit www.oho.qld.gov.au.

Some forms for your wellbeing and recovery

Following are some forms that you may wish to consider to assist your recovery and prepare for discharge. These are the Personal Safety Plan the Discharge Checklist, and the Recovery Plan. Remember staff are here to assist and help you completed these.

The Personal Safety Plan (see page 23)

The personal Safety plan is a document that helps you to think about the triggers that make you unwell, and about strategies to stay calm and reduce stress. If you feel that you might get stressed or angry, please ask your nurse to help you fill in this form..

The Recovery Plan (see page 27)

This document will help you to take control on your recovery, now and into the future. This is a valuable form and we urge you to consider filling this out well before you are discharged. It will help you to focus on your strengths and goals for the future, and to help you to identify areas in your life that you want to work on. There are many ways that you can live a meaningful life in your community and the *Recovery Plan* will help you identify these. Every person who has contact with the mental health service will be offered the opportunity to complete a *Recovery Plan*. Please don't hesitate to ask your nurse for support with this.

The Discharge Checklist (see page 29)

The *Discharge Checklist* is a document that will help you to put into place everything that you need when you are discharged. Your nurse or mental health clinician will be able to help you to complete this if you require.

The Australian Charter of Healthcare Rights (see page 31)

This poster outlines what you can expect from the Australian Health System

Ryan's Rule (see page 32)

For all patients, families and carers.

Use Ryan's Rule to get help when you are concerned about a patient in hospital who is getting worse, not doing as well as expected, or not improving.



Queensland Government

Metro North Mental Health

PERSONAL SAFETY PLAN

The Prince Charles Hospital

(Affix identification label here)

URN:

Family name:

Given name(s):

Address:

Date of birth:

Sex: M F

Warning Signs: What are some of the things that indicate that you are becoming angry or very upset? Tick each 'warning sign' that you recognise.

<input type="checkbox"/> Crying	<input type="checkbox"/> Clenching fists or teeth
<input type="checkbox"/> Racing thoughts	<input type="checkbox"/> Being rude or loud
<input type="checkbox"/> Shaking/ Rocking	<input type="checkbox"/> Shortness of breath
<input type="checkbox"/> Inability to sit still	<input type="checkbox"/> Swearing
<input type="checkbox"/> Isolating myself	<input type="checkbox"/> Laughing loudly
<input type="checkbox"/> Singing	<input type="checkbox"/> Racing heart
<input type="checkbox"/> Butterflies or sick feeling in the stomach	<input type="checkbox"/> Not eating/ over eating (please circle)
<input type="checkbox"/> Headache or tension in other parts of my body	<input type="checkbox"/> Having bad thoughts about myself or others
<input type="checkbox"/> Hurting others	<input type="checkbox"/> Sweating
<input type="checkbox"/> Hurting myself by	<input type="checkbox"/> Other: (please list)
.....
.....

Coping Strategies while in PICU: Which of the following strategies do you think may help you?

<input type="checkbox"/> Asking for help	<input type="checkbox"/> Putting something in my mouth eg face washer, lollies
<input type="checkbox"/> Calling a friend or family member (limited no. of calls available)	<input type="checkbox"/> Talking with other patients
<input type="checkbox"/> Deep breathing	<input type="checkbox"/> Time out with staff present
<input type="checkbox"/> Hot or cold shower	<input type="checkbox"/> Sitting by the nurses' station
<input type="checkbox"/> Medication	<input type="checkbox"/> Gentle stretching
<input type="checkbox"/> Talking with staff or peers	<input type="checkbox"/> Being alone in my room
<input type="checkbox"/> Writing in a diary or journal	<input type="checkbox"/> Muscle Relaxation or use of massagers
<input type="checkbox"/> Dark room or dimmed lights	<input type="checkbox"/> Walking around the courtyard
<input type="checkbox"/> Listening to music or a relaxation CD	<input type="checkbox"/> Rubber bands for wrists
<input type="checkbox"/> Warm or cold drink or food	<input type="checkbox"/> Hugging a pillow or soft toy
<input type="checkbox"/> Sitting or lying down	<input type="checkbox"/> Wrapping up in a blanket
<input type="checkbox"/> Fidgeting with something eg. Stress balls	<input type="checkbox"/> Singing/ shouting out loud
<input type="checkbox"/> Reading (what?)	<input type="checkbox"/> A particular art activity eg drawing/ colouring.....
.....
<input type="checkbox"/> Doing a puzzle/ game (what?)	<input type="checkbox"/> Exercise (what?)
.....
Other suggestions: (please list)	
.....	
.....	

Please note: Your safety and the safety of others is our priority in the PICU area. At times certain equipment you have identified as being useful in your Personal Safety Plan may not be available to ensure that safety is maintained for all within the PICU area.

DO NOT WRITE IN THIS BINDING MARGIN



 <p style="text-align: center;">Metro North Mental Health PERSONAL SAFETY PLAN The Prince Charles Hospital</p>	<p style="text-align: center;">(Affix identification label here)</p> <p>URN: _____</p> <p>Family name: _____</p> <p>Given name(s): _____</p> <p>Address: _____</p> <p>Date of birth: _____ Sex: <input type="checkbox"/> M <input type="checkbox"/></p>
--	---

Coping Strategies on the open ward in addition to those used in PICU: Which of the following strategies do you think may help you?

<input type="checkbox"/> Going for a walk with staff	<input type="checkbox"/> Watching the sky, clouds, stars
<input type="checkbox"/> Putting something in my mouth eg lollies, gum	<input type="checkbox"/> Singing/ shouting out loud
<input type="checkbox"/> Walking in the ward	<input type="checkbox"/> Looking at moving light eg lava or fibre optic lamp
<input type="checkbox"/> Using certain bath products or lotions with particular scents eg lavender, vanilla	<input type="checkbox"/> Using the comfort room
<input type="checkbox"/> Reading (what?)	<input type="checkbox"/> A particular art activity eg. clay/ painting/ drawing/colouring.....
<input type="checkbox"/> Doing a puzzle/ game (what?).....	<input type="checkbox"/> Exercise (what?)

Other: (please list)

.....

.....

.....

.....

.....

Comments: Is there anything else you would like to add which you think may be helpful?

.....

.....

.....

Has the Personal Safety Plan raised any issues that you would like to discuss further?

.....

.....

.....

Consumer Signature:..... Date:...../...../.....

Staff Name:..... Designation:.....

Signature:..... Date:...../...../.....

DO NOT WRITE IN THIS BINDING MARGIN

PERSONAL SAFETY PLAN



 <p>Queensland Government</p> <p>Metro North Mental Health</p> <p>PERSONAL SAFETY PLAN</p> <p>The Prince Charles Hospital</p>	<p>(Affix identification label here)</p> <p>URN: _____</p> <p>Family name: _____</p> <p>Given name(s): _____</p> <p>Address: _____</p> <p>Date of birth: _____ Sex: <input type="checkbox"/> M <input type="checkbox"/> F</p>
<p style="text-align: center;">Summary Page</p> <p>My Top 3 Triggers for Crisis are:</p> <p>1. _____</p> <p>2. _____</p> <p>3. _____</p> <p>My Top 3 Warning Signs for Crisis are:</p> <p>1. _____</p> <p>2. _____</p> <p>3. _____</p> <p>My Top 3 Coping Strategies to Use in PICU are:</p> <p>1. _____</p> <p>2. _____</p> <p>3. _____</p> <p>My Top 3 Coping Strategies to Use on the Open Ward are:</p> <p>1. _____</p> <p>2. _____</p> <p>3. _____</p> <p><input type="checkbox"/> Copy given to consumer and original filed in chart.</p> <p>Consumer Name:..... Signature:..... Date:...../...../.....</p> <p>Staff Name:..... Designation:.....</p> <p>Signature:..... Date:...../...../.....</p>	

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© The State of Queensland (Queensland Health) 2012 Contact CIM@health.qld.gov.au

 <p>Queensland Government</p> <p>My Recovery Plan</p> <p>Facility:</p>	(Affix identification label here)
	URN:
	Family name:
	Given name(s):
	Address:
Date of birth:	Sex: <input type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/> I

If you do not have enough room, please attach more pages at the end.

This is who I am - my characteristics

These are my strengths:

Things I would like to strengthen:

What I do to keep well?

What have I done in the past?

My early warning signs / triggers?

What I have done to manage these in the past?

What have I done in the past that hasn't worked?

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MY RECOVERY PLAN

v2.00 - 03/2012





Queensland Government

My Recovery Plan

(Affix identification label here)

URN:

Family name:

Given name(s):

Address:

Date of birth:

Sex: M F I

These are my goals - what I want to do and where I want to be

- Social:**
- My housing needs
 - My social activities (e.g. hobbies, sports, shopping, eating out)
 - My living skills
 - My finances and budgeting

Emotional:

- My relationships (e.g. partner, children, siblings, parents, carer, friends, boss / workmates, pets)
- If I am not home, who will take care of: my children / family; my medication; the mail; the newspaper; my pets; the wheelie bins
- My support networks (e.g. NGO, GP, MHS, local group, other [specify:])

- Physical:**
- My physical health and well-being (e.g. sport, gym, doctor appointments, dental, complementary / alternative therapies, preferred medications)
 - My personal care

- Intellectual:**
- My work
 - My study
 - My volunteering
 - Reading
 - Other social outlets (e.g. trivia night, chess club)

- Spiritual:**
- What I do to keep myself well spiritually (e.g. meditation / prayer, practices)

People I would like involved in my care:

Name:	Relationship to me:	Contact details:
Name:	Relationship to me:	Contact details:

People to contact in an emergency:

Name:	Relationship to me:	Contact details:
Name:	Relationship to me:	Contact details:

How they can best help me:

--

I confirm that this is my Recovery Plan, and acknowledge that I understand my role and the role of other persons listed in the Plan. I am also aware that I can request a change to the goals set down if they are not meeting my needs by discussing this with my nominated support staff.

- I have received contact details and know how to contact my support staff
 I have been provided with mental health crisis numbers

I was involved in developing this plan and have received a copy.

Signed by Person in Recovery:

I assisted in the development of this Plan.

Signed by Carer:

I assisted in the development of this Plan.

Signed by Clinician:

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TRIAL



**Metro North Mental Health
MENTAL HEALTH
DISCHARGE CHECKLIST
FOR CONSUMERS**

(Affix patient identification label here)

URN:

Family Name:

Given Names:

Address:

Date of Birth:

Sex: M F I

To be completed by all consumers

Tick when completed

1. Is the address above correct?

Yes No

If no, please provide current address:

.....
.....

2. Do you need assistance in finding / confirming accommodation?

Yes No

3. Please provide current GP details:

.....
.....

4. Before you are discharged do you require education / information on:

Medications Diagnosis

5. Do you require education or information on:

Healthy lifestyle Dietary requirements Community services

6. Are you aware of how to access support when you are discharged?

Yes No

My accommodation has been confirmed:
 Yes No N/A

I have been given education / information:
 Yes No N/A

If so, what:

I have been given discharge support information:
 Yes No N/A

Complete this section when preparing for discharge

7. Do you require a medical certificate?

a. Ordinary b. WorkCover Qld c. Centrelink

8. Has your follow up appointment(s) been booked?

With	Where	Date	Time

9. Do you know who your Mental Health Clinician (if appropriate) is and how to contact them?

Yes No

Name: Contact details:

Do you have details of the After Hours Contact Service?

Yes No

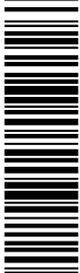
10. Do you have your discharge medications / prescription?

Yes No N/A

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All clinical form creation and amendments must be conducted through Health Information Services

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V1.00 - 01/2014
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 <p style="text-align: center;">Metro North Mental Health MENTAL HEALTH DISCHARGE CHECKLIST FOR CONSUMERS</p>	<p style="text-align: right;">(Affix patient identification label here)</p> <p>URN: _____</p> <p>Family Name: _____</p> <p>Given Names: _____</p> <p>Address: _____</p> <p>Date of Birth: _____ Sex: <input type="checkbox"/> M <input type="checkbox"/> F <input type="checkbox"/> I</p>
<p>11. If you brought any medications with you, have they been returned? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>12. If you brought any X-rays/scans with you, have they been returned? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>13. Have you got all personal belongings and items from Trust? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A</p> <p>14. Have you arranged the necessary resources for your discharge (food / money)? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>15. Has your Next of Kin or support person been notified of your discharge? <input type="checkbox"/> Yes <input type="checkbox"/> No</p> <p>16. Has transportation on discharge been organised / booked? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Private Transport: Family / Friend <input type="checkbox"/> Private Taxi <input type="checkbox"/> DVA <input type="checkbox"/> Other (<i>specify</i>):</p> <p>17. Do you have a letter / discharge summary for your Community Service Provider? <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> To be faxed</p>	
<p>Patient (<i>print name</i>):</p> <p>Patient (<i>signature</i>):</p> <p>Date: / /</p>	<p>Nurse (<i>print name</i>):</p> <p>Nurse (<i>signature</i>):</p> <p>Date: / /</p>

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AUSTRALIAN CHARTER OF HEALTHCARE RIGHTS

The Australian Charter of Healthcare Rights describes the rights of patients and other people using the Australian health system. These rights are essential to make sure that, wherever and whenever care is provided, it is of high quality and is safe.

The Charter recognises that people receiving care and people providing care all have important parts to play in achieving healthcare rights. The Charter allows patients, consumers, families, carers and services providing health care to share an understanding of the rights of people receiving health care. This helps everyone to work together towards a safe and high quality health system. A genuine partnership between patients, consumers and providers is important so that everyone achieves the best possible outcomes.

Guiding Principles

These three principles describe how this Charter applies in the Australian health system.

1 Everyone has the right to be able to access health care and this right is essential for the Charter to be meaningful.

2 The Australian Government commits to international agreements about human rights which recognise everyone's right to have the highest possible standard of physical and mental health.

3 Australia is a society made up of people with different cultures and ways of life, and the Charter acknowledges and respects these differences.



For further information please visit www.safetyandquality.gov.au

AUSTRALIAN COMMISSION ON SAFETY AND QUALITY IN HEALTHCARE

What can I expect from the Australian health system?

MY RIGHTS	WHAT THIS MEANS
Access _____ I have a right to health care.	I can access services to address my healthcare needs.
Safety _____ I have a right to receive safe and high quality care.	I receive safe and high quality health services, provided with professional care, skill and competence.
Respect _____ I have a right to be shown respect, dignity and consideration.	The care provided shows respect to me and my culture, beliefs, values and personal characteristics.
Communication _____ I have a right to be informed about services, treatment, options and costs in a clear and open way.	I receive open, timely and appropriate communication about my health care in a way I can understand.
Participation _____ I have a right to be included in decisions and choices about my care.	I may join in making decisions and choices about my care and about health service planning.
Privacy _____ I have a right to privacy and confidentiality of my personal information.	My personal privacy is maintained and proper handling of my personal health and other information is assured.
Comment _____ I have a right to comment on my care and to have my concerns addressed.	I can comment on or complain about my care and have my concerns dealt with properly and promptly.

Ryan's Rule

for all patients, families and carers

Use Ryan's Rule to get help when you are concerned about a patient in hospital who is getting worse, not doing as well as expected, or not improving.

Who can call: patients, families or carers.

Follow these steps to raise your concerns.

Step 1

Talk to a nurse or doctor about your concerns.

If you are not satisfied with the response.

Step 2

Talk to the nurse in charge of the shift.

If you are not satisfied with the response.

Step 3

Phone **13 Health (13 43 25 84)** or ask a nurse and they will call on your behalf.

Request a Ryan's Rule Clinical Review and provide the following information:

- hospital name
- patient's name
- ward, bed number (if known)
- your contact number.

A Ryan's Rule nurse or doctor will review the patient and assist.

If you have feedback or a complaint, please speak with the nurse in charge or ask for a feedback form.

For more information, speak with your nurse.

vo.04 - 11/2013 We acknowledge ACT Government Health CARE resources. Photograph source: istockphoto.

Your Health after Hospital – Visiting a GP

Having a General Practitioner (GP) who knows you well, and you feel comfortable with is very important.

There are a few things you can do to make sure you are getting the most out of your GP visit:

- Book a longer consultation for a first time visit, or if you need more time to talk through your health needs;
- Ask your receptionist about billing options, and whether bulk-bill is available, and/or whether Medicare rebate is available at time of appointment (or afterwards by going directly to Medicare);
- Take a list of questions with you to ask;
- Take a pen and paper to write important information down;
- Invite a family member or carer to attend the appointment with you if you would feel more comfortable.

Benefits of building a relationship with a GP

- Regular assessment of your health needs and treatment of illness
- Referral to specialists and specialised services (e.g. private psychiatrist, psychologist, allied health professional such as podiatrist/ dietician /exercise physiologist).
- Arrangement of immunisation and other illness prevention measures
- Provision of medical certificates and reports if needed (e.g. Centrelink)
- A GP who knows you and your medical history can provide you with the best possible care
- To have another person to contact for professional help in times of health crisis
- Long term support outside the Mental Health Service
- Regular follow-up and prescription medication
- Management of the early signs of a relapse and prevention of the worsening of symptoms

If you would like more information or support – speak to your local Primary Care Liaison Officer, who can:

- Help you find a GP in your local area, and to suit your needs
- Support you to attend initial appointment, and ensure GP has relevant information from your Mental Health treating team (if open consumer to Metro North Mental Health Service).
- Help you find a private psychologist or psychiatrist in your area, for your GP to refer you to
- Provide information about other services and how to access and refer to services.

The Prince Charles Hospital – Ph. 3139 3201, Redcliffe/Caboolture – Ph. 3897 6329

The Royal Brisbane & Women's Hospital – Ph. 3834 1643





Important Questions to ask your GP

Treatment

- How is my condition usually treated?
- When should I start treatment?
- How long will I need the treatment for?
- What is the cost? Is it covered by Medicare?
- What are the treatment risks or side effects?
- Will I require referral to a specialist or another health professional?



General Health

- How often do I need a physical health check-up?
- Do I need a flu injection or any other immunisations?
- Am I at risk of developing any health problems?
- Are there any lifestyle changes I can make to reduce the impact or prevent certain health problems?
- Are there any services you can recommend that I may be eligible for?



Symptoms

- What may be causing my symptoms?
- What can I do to deal with this problem or reduce symptoms?



Medication

- What is the name of the medication?
- What is it for, and how is it usually prescribed/ taken?
- Any side effects?
- Will this medication interact with any other medications I am taking?
- How long do I need to take the medication for?
- Is there a generic brand available at a lower cost?

Tests

- What does the test involve?
- When will I get the results?
- Any side effects?
- What is the cost involved? Is it covered under Medicare?
- Do I need to attend another service to have the test completed or for follow-up?



