

<b>UNIT CODE</b>	<b>HLTASEW004</b>
<b>UNIT TITLE</b>	<b>Contribute to the care of clients living with mental illness</b>
<b>APPLICATION</b>	<p>This unit describes the performance outcomes, skills and knowledge required to plan and coordinate ongoing care for clients diagnosed with mental illness, as part of a multidisciplinary health care team.</p> <p>It requires the ability to take a case management and recovery oriented approach to the care of Aboriginal and/or Torres Strait Islander clients living with mental illness. It covers the skills required to assist with the development of mental health care plans, support clients to access mental health care and support services, monitor client health and coordinate their ongoing care.</p> <p>This unit is specific to Aboriginal and/or Torres Strait Islander people working as health practitioners. They work as part of a multidisciplinary health care team to provide health care services to Aboriginal and/or Torres Strait Islander clients.</p> <p>No regulatory requirement for certification, occupational or business licensing is linked to this unit at the time of publication. For information about practitioner registration and accredited courses of study, contact the Aboriginal and Torres Strait Islander Health Practice Board of Australia (ATSIHPBA).</p>
<b>PREREQUISITE UNIT</b>	Nil
<b>COMPETENCY FIELD</b>	Social and Emotional Wellbeing
<b>UNIT SECTOR</b>	Aboriginal and/or Torres Strait Islander Health
<b>ELEMENTS</b>	<b>PERFORMANCE CRITERIA</b>
<i>Elements describe the essential outcomes</i>	<i>Performance criteria describe the performance needed to demonstrate achievement of the element.</i>
1. Identify cultural considerations for the treatment and care of Aboriginal and Torres Strait Islander clients.	1.1 Consider the importance of spiritual, cultural, family and community ties in the treatment and care of those living with mental illness. 1.2 Seek information about available mental health facilities and evaluate the suitability of the environments for Aboriginal and/or Torres Strait Islander clients. 1.3 Investigate treatment approaches that may reduce stays in mental health facilities and allow early return of clients to their communities. 1.4 Identify situations where a traditional healer could effectively contribute to the care of Aboriginal and/or Torres Strait Islander clients.

<p>2. Contribute to the planning of treatment and care for clients living with mental illness.</p>	<p>2.1 Review client history and mental health assessments to ascertain requirements of mental health care plan.</p> <p>2.2 Identify proposed treatment, care and support options within limits of own ability and responsibility.</p> <p>2.3 Discuss, with multidisciplinary team, ways in which the plan can physically, spiritually and emotionally support the client and their family.</p> <p>2.4 Contribute to multidisciplinary team discussions in ways that recognise and support the client's rights and needs including their cultural safety needs.</p> <p>2.5 Participate in a multidisciplinary team risk assessment of the client to ascertain best options for the client.</p> <p>2.6 Identify situations which indicate need for voluntary or involuntary hospital admission.</p> <p>2.7 Provide contributions to the proposed plan that recognise and respond to the complexity of client needs.</p>
<p>3. Work with clients and multidisciplinary team to finalise mental health care plans.</p>	<p>3.1 Use culturally appropriate and safe communication to discuss proposed care plan with client and explain how it relates to physical, psychosocial and mental health needs.</p> <p>3.2 Participate in multidisciplinary team and client discussions to provide client with information about each aspect of proposed care plan and reasons for inclusion.</p> <p>3.3 Recognise verbal and non-verbal responses that indicate client difficulties with proposed plan, and encourage their comments and questions.</p> <p>3.4 Encourage client to express own strengths, abilities and information about their own support resources.</p> <p>3.5 Convey hope, optimism and expectation of recovery to encourage client contribution to their own plan.</p> <p>3.6 Adjust and finalise plan in consultation with multidisciplinary team members.</p>
<p>4. Contribute to the recovery of clients affected by mental illness.</p>	<p>4.1 Plan and prioritise care strategies in collaboration with client, significant others and the multidisciplinary team.</p> <p>4.2 Advise clients about boundaries for interactions and how support will be provided.</p> <p>4.3 Support clients to make own choices about their needs, goals and mental health care.</p> <p>4.4 Inform clients about available support services and facilitate access according to their needs and preferences.</p> <p>4.5 Promote use of clients' own support networks and assist clients and significant others to determine roles and ways that clients can make own decisions.</p> <p>4.6 Confirm clients understand importance of medications in their treatment and adherence to medication therapy.</p> <p>4.7 Collaborate with primary, secondary and tertiary health service providers to coordinate effective inter-sectoral service delivery for clients.</p> <p>4.8 Follow organisational procedures for maintaining client confidentiality and obtaining permissions for disclosure.</p>

5. Monitor client health and coordinate ongoing care.	<p>5.1 Monitor client health through ongoing scheduled assessments incorporated in care plan.</p> <p>5.2 Gain feedback from client and/or significant others about their levels of comfort and difficulty with care and support.</p> <p>5.3 Participate in multidisciplinary team and client discussions to evaluate effectiveness of care regime and to review care plan.</p> <p>5.4 Coordinate and provide continuity of care in consultation with client and multidisciplinary team.</p> <p>5.5 Respond promptly and supportively to facilitate referrals for crisis intervention according to client needs and preferences.</p>
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#### FOUNDATION SKILLS

*Foundation skills essential to performance in this unit, but not explicit in the performance criteria are listed here, along with a brief context statement.*

SKILLS	DESCRIPTION
Reading skills to:	<ul style="list-style-type: none"> <li>interpret detailed and sometimes unfamiliar mental health assessments involving medical terminology and abbreviations.</li> </ul>
Writing skills to:	<ul style="list-style-type: none"> <li>use fundamental sentence structure, health terminology and abbreviations to complete forms and reports that require factual and subjective information.</li> </ul>
Oral communication skills to:	<ul style="list-style-type: none"> <li>provide information to clients using plain language and terms easily understood</li> <li>ask open and closed probe questions and actively listen to elicit information and preferences from clients</li> <li>select and use terms that are respectful, non-judgmental, and which emphasise positivity.</li> </ul>
Initiative and enterprise skills to:	<ul style="list-style-type: none"> <li>adapt to changing client needs and source support services that meet their specific needs and preferences.</li> </ul>
Self-management skills to:	<ul style="list-style-type: none"> <li>critically evaluate successes and difficulties of client health care management to initiate improvements.</li> </ul>
<b>UNIT MAPPING INFORMATION</b>	<p>No equivalent unit.</p> <p>For details, refer to the full mapping table in the Draft 2 Validation Guide.</p>
<b>LINKS</b>	Companion Volume Implementation Guide

<b>TITLE</b>	<b>Assessment Requirements for HLTASEW004 Contribute to the care of clients living with mental illness</b>
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<p><b>PERFORMANCE EVIDENCE</b></p>	<p>Evidence of the ability to complete tasks outlined in elements and performance criteria of this unit in the context of the job role, and:</p> <ul style="list-style-type: none"> <li>■ contribute to the care of two Aboriginal and/or Torres Strait Islander clients living with mental illness</li> <li>■ for each of the two clients: <ul style="list-style-type: none"> <li>○ work as part of a multidisciplinary health care team to complete a risk assessment and develop and document a mental health care plan tailored to the client's treatment and support needs</li> <li>○ work with the team to discuss the plan with the client, and adjust and finalise according to the client's preferences</li> <li>○ coordinate access to one mental health service</li> <li>○ source information about support services that meet the client's needs, explain their key features and coordinate the client's access to the services</li> <li>○ monitor the client's ongoing health care, and: <ul style="list-style-type: none"> <li>● consult with the client and multidisciplinary team to evaluate effectiveness of their care plan</li> <li>● plan and organise continuity of care in consultation with the client and multidisciplinary team</li> </ul> </li> <li>○ document, in client records, accurate details of each client contact including details of services, information and referrals provided</li> </ul> </li> <li>■ according to actual client interactions or case study documentation, respond to one client crisis and facilitate prompt access to required services.</li> </ul>
<p><b>KNOWLEDGE EVIDENCE</b></p>	<p>Demonstrated knowledge required to complete the tasks outlined in elements and performance criteria of this unit:</p> <ul style="list-style-type: none"> <li>■ organisational procedures for maintaining client confidentiality</li> <li>■ overview of the provisions of the local state or territory mental health law for: <ul style="list-style-type: none"> <li>○ involuntary admission to a mental health unit</li> <li>○ involuntary review process</li> <li>○ community treatment orders</li> <li>○ how to maintain currency of knowledge</li> </ul> </li> <li>■ distinctions between providing counselling and case managing clients, and the types of services and general support provided by case managers</li> <li>■ the potential reach of a multidisciplinary mental health care team, and an overview of the roles and boundaries of those who may be involved, to include: <ul style="list-style-type: none"> <li>○ Aboriginal and/or Torres Islander health practitioners</li> <li>○ primary health practitioners: general medical practitioners and nurses</li> <li>○ mental health practitioners: psychiatrists, mental health nurses, psychologists</li> <li>○ qualified counsellors including alcohol and other drug counsellors</li> <li>○ allied health professionals</li> <li>○ social workers</li> <li>○ community workers</li> <li>○ mental health workers</li> </ul> </li> <li>■ how multidisciplinary health teams across the primary, secondary and tertiary health care sectors work together to coordinate mental health treatments and support, and how to facilitate referrals</li> <li>■ the importance of case management in the treatment and care of those with mental illness: <ul style="list-style-type: none"> <li>○ ways that case management can contribute to effective inter-sectoral service delivery for clients</li> </ul> </li> </ul>

- ways of working collaboratively with others in different health sectors, departments or agencies
- ways of overcoming impediments to care when different service providers take different approaches
- techniques to effectively communicate with clients living with mental health illness, including those used to:
  - build rapport and trust
  - sensitively probe and elicit responses
  - encourage clients to disclose personally confronting issues
  - tailor discussions and question to different ages, genders and circumstances
  - de-escalate difficult or dangerous conversations and interactions
- the role of a client risk assessment in protecting clients and others from harm and how outcomes inform the client's treatment and support needs
- types of risks considered in a client risk assessments, common risk factors and verbal and non-verbal behavioural indicators for each:
  - vulnerability
  - fluctuating and/or unpredictable mental health function
  - self-harm
  - suicide
  - violence
- for people at risk of self-harm and suicide:
  - types of rapid response assessment questions and actions that can be used to triage
  - emergency referral pathways
- the concept of holistic mental health management, and the broad meaning of a 'treatment' within a mental health care plan
- common types of treatments included in mental health care plans and when the following would be indicated:
  - use of medications
  - therapy sessions with psychiatrists or psychologists
  - counselling sessions/services
  - hospital admission
  - non-clinical support strategies
  - management of alcohol and other drugs use
- typical inclusions of mental health care plans:
  - client's main issues and needs
  - client goals
  - details of planned treatments and referrals
  - client strategies to improve and maintain mental health
  - non-clinical support service options to assist client achieve goals
  - notes on arrangements for crisis intervention and/or relapse prevention
  - schedules for follow-up care, monitoring and re-assessment
  - roles and responsibilities of health care team members
- the importance of developing care plans that involve the client and multidisciplinary care team members
- the importance of continuity of care for clients living with mental illness; the need for regular attendance, reassessment and replanning
- the concept of recovery in mental health care and how this is distinct from achieving a state without mental illness
- key principles of recovery oriented care, and how these can be practically implemented when providing support to clients:
  - recovery is achievable
  - the facilitation of hope and optimism
  - person centred choice through client consultation
  - empowerment through a strengths based focus on developing individual capabilities
  - holistic care and support for a person's whole of life needs

- how to implement the trauma informed principles of safety, trustworthiness, choice, collaboration and empowerment when:
  - interacting with clients about treatment and support options
  - developing plans that best support clients' needs and preferences
  - assisting clients to determine boundaries for decision making with their families and others
  - assisting clients with their service provider interactions
- overview of the common behaviours and personal impacts associated with different types of mental illness, and main methods of treatment and management:
  - mood disorders including [depression](#) and [bipolar disorder](#)
  - [anxiety disorders](#)
  - psychotic disorders including [schizophrenia](#)
  - [eating disorders](#)
  - substance misuse disorders
  - trauma-related disorders
- dual nature of the relationship between mental health issues and dependence on alcohol and other drugs (AOD)
- the concept of dual diagnosis and co-existing mental health and AOD issues
- how the cause(s), impacts, and severity of the mental health condition(s) will determine the multidimensional care response
- the meaning of psychosocial disability, how this relates to mental health conditions, and overview of how this impacts on those living with mental illness
- overview of how the National Disability Insurance Scheme (NDIS) provides funding for those with psychosocial disability including the basic processes for assessment, application, and management by service providers
- key barriers to social inclusion for those living with mental illness, types of non-clinical support services available in the local community, state or territory and how these can be accessed
- considerations of significance to Aboriginal and/or Torres Strait people, and how mental health treatment and care interventions can respond in culturally appropriate ways:
  - interconnectedness of kinship, culture, land and spirituality and cultural concepts about the holistic nature of health and social and emotional wellbeing
  - the importance of family and community networks in sharing responsibility and providing support
  - belief systems about the role of traditional or bush healers in maintaining and healing health
  - connections to country, community and family and how extended stays away to access specialist care can cause difficulties in continuing with care plans and relapse
  - the prevalence and impacts of inter-generational and trans-generational trauma on Aboriginal and/or Torres Strait Islander populations
  - the environmental nature of mental health facilities and how these can impact on people living in rural or remote environments and those living in traditional ways.

<p><b>ASSESSMENT CONDITIONS</b></p>	<p>Skills must be demonstrated in a health service workplace within a multidisciplinary primary health care team.</p> <p>Evidence of performance must be gathered:</p> <ul style="list-style-type: none"> <li>■ during on-the-job assessments in the workplace under live conditions while interacting with Aboriginal and/or Torres Strait Islander people, or</li> <li>■ during off-the-job assessments in the workplace, not under live conditions, using simulated activities while interacting with Aboriginal and/or Torres Strait Islander people.</li> </ul> <p>Evidence of workplace performance can be gathered and reported through third party report processes. (Refer to the Companion Volume Implementation Guide for information on third party reporting.)</p> <p>Evidence can be supplemented by assessments in a simulated workplace environment using simulated activities, scenarios or case studies only when:</p> <ul style="list-style-type: none"> <li>■ the full range of situations covered by the unit cannot be provided in the individual's workplace, and or</li> <li>■ situations covered by the unit occur only rarely in the individual's workplace.</li> </ul> <p>Assessment must ensure the use of:</p> <ul style="list-style-type: none"> <li>■ client records including outcomes of mental health assessments</li> <li>■ template mental health care plans</li> <li>■ organisational procedures for maintaining client confidentiality.</li> </ul> <p>Assessors must satisfy the Standards for Registered Training Organisations requirements for assessors, and:</p> <ul style="list-style-type: none"> <li>■ be an Aboriginal and/or Torres Strait Islander person who has applied the skills and knowledge covered in this unit of competency through experience working as an Aboriginal and/or Torres Strait Islander health worker or practitioner, <b>or</b></li> <li>■ be a registered health practitioner or a mental health care case manager with experience relevant to this unit of competency and be accompanied by, or have assessments validated by, an Aboriginal and/or Torres Strait Islander person.</li> </ul>
<p><b>LINKS</b></p>	<p>Companion Volume Implementation Guide</p>