



#### ACROSS

3. OCD is short for ... Compulsive Disorder
7. Personality disorder with shallow and labile affect and self-dramatisation
8. Mental condition where one pulls out their hair
9. Current treatment of ... attributed to Ugo Cerletti
10. Depressed people have flat ...
12. A condition of excessive daytime sleepiness is non-organic ...
13. Dementia that affects only the brain's frontal and parietal lobes
16. Type of schizophrenia which manifests flexibilitas cerea
18. Psychosis is a loss of ...-based thinking
19. Thyrotoxicosis may show the clinical manifestations of ...

#### DOWN

1. A fixed, false belief unable to be argued with logic
2. Manic-Depressive Illness is also called Bipolar ... Disorder
3. Mental illness due to physical causes is diagnosed as ...
4. A common eating disorder is ... Nervosa
5. Kleptomania is pathological ...
6. A common clinical manifestation of hypomania is ...
7. Response to a non-stimulus
11. Short term confusional state
14. Arachnophobia is the fear of ...
15. PTSD is an anxiety disorder caused though ...
17. Father of modern psychiatry

**Look out for the answers in the next edition of Health in Mind.**

# Watch this Space

## Mother and Baby Unit

The construction of WA's new 8 bed mother and baby unit is proceeding as planned at 11 Loretto Street Subiaco. The management team consisting of Dr Philippa Brown (Clinical Director), Maureen Rushe (Clinical Nurse Manager) and Maree Brice-Pozzi (Specialist Clinical Psychologist) are on board and recruitment for the remaining team members is underway. Transfer of existing patients from the Cullity Unit at Graylands Hospital is expected early March. This is an exciting time for perinatal psychiatry in Perth.

## Ellis Ward

The opening of Ellis Ward at Graylands Hospital is on track for early next year. Ellis Ward is a new, 14-bed secure ward that has the capacity to provide an early intervention in psychosis focus. A purpose-built triage and assessment lounge also forms part of this new initiative, all of which extends from the back of Fitzroy House. A Community Open Day is planned for early February.

## New website for NMAHS Mental Health

The new and fabulous website for NMAHS Mental Health is about to launch! Keep an eye out for it in early 2007. The website will be bursting with handy information – maps, phone numbers, policies, news and much more. The website will be officially launched in the first few months of 2007.

## Launch of the new Emergency Services

The new suite of emergency services will be officially launched early next year. The Mental Health Emergency Response Line (MHERL) and the Community Emergency Response Teams (CERTs) will be jointly launched, supported by a new suite of publicity materials such as posters and brochures. The joint launch with South Metropolitan Area Health Service will likely take place at Heathcote in the first months of 2007, with a view to publicizing these new services to the community.

# Health in Mind



Delivering a Healthy WA

NORTH METROPOLITAN AREA HEALTH SERVICE MENTAL HEALTH SUMMER 2006/07



Students from Mount Hawthorn Primary School enjoyed themselves at the Hawthorn House Community Open Day

## Hawthorn House

**After many months of planning, community consultation and renovating, Hawthorn House is finally open! The intermediate-care facility will provide a home for up to 16 people with mental illness who no longer require hospital-based care.**

Once a hospital and aged-care service, the building at the corner of Flinders Avenue and Woodstock Street has been fully renovated. The refurbished facility provides a more home-like environment for people with mental illness who will benefit from a "stepping stone" to independent living. While they're staying at Hawthorn House, residents will work with a multi-disciplinary care team who will prepare them to live independently. They'll acquire life-skills, illness management techniques, medication awareness and many other skills to help them get back into the swing of life.

Hawthorn House will be staffed 24 hours a day, 7 days a week. The specialist mental health team includes clinical nurses, an occupational therapist and assistants, a psychiatrist, and a psychologist. They will develop individual care plans for residents to enable them to live independently as soon as possible.

WA's Minister of Health, Jim McGinty, was pleased to tour the facility in the week before it opened. "With an estimated one in five adults suffering a mental illness in their lifetime it is vital that communities get behind these projects," Minister McGinty said.

The local community and Town of Vincent were consulted regularly during the planning for Hawthorn House. A Community Advisory Committee was formed and contributed valuable input into the planning for the facility. Hawthorn House is committed to ongoing community consultation through the Committee.

Hawthorn House is slated to be open for three years until a replacement facility in Joondalup is built.



Hawthorn House psychiatrist and head of service, Dr. Sandy Tait, chats with WA Health Minister Jim McGinty and MLA for Perth John Hyde

## Happy New Year from the Area Exec. Director

2006 was a very big year for the North Metropolitan Area Health Service Mental Health. Early in the year we received the largely positive feedback from the ACHS Mental Health in-depth review of the Swan Mental Health Service. With no high priority recommendations, this report was a testimony to the high quality of service provided at Swan. Later in the year, our Mental Health Emergency Services were revamped with the creation of the Mental Health Emergency Response Line (MHERL) and the Community Emergency Response Teams (CERTs). This new incarnation of emergency services is set to continue the excellent work done by the staff of PET, as well as providing a more localized and rapid-response service. More recently, Hawthorn House has opened, which is a really exciting new development in community-based mental health care. These are just a few examples of the many new initiatives of 2006.

All of these developments would not have been possible without the tremendous efforts of all our staff. It was a very busy year for everyone, not without its challenges. I'd like to take this opportunity to thank all staff for their dedication, energy and hard work. I hope you're as encouraged as I am to see the tangible outcomes of all your labours.

2007 promises to be just as busy as 2006, as we continue to work hard to implement the Mental Health Strategy 2004-2007. I'm really encouraged by our progress so far and I'm looking forward to 2007 being another successful year for Mental Health in the North Metropolitan Area Health Service. Warm regards,

Dr Peter A. Wynn Owen  
Area Exec. Director, NMAHS Mental Health



Corinne, Helen and Paula were three of the McManus Foundation grant winners

## Dr K.B. McManus Memorial Fund

Dr Kathleen Bridget McManus worked for Mental Health Services in West Australia from 1994 to 2006. Following her death in March 2006, the "Dr K.B. McManus Memorial Fund" was established as a lasting memorial for her dedication to her work as a psychiatrist, her compassion for her patients and her strong commitment to social justice.

Dr. McManus was well known for her love of the arts. It was this interest that prompted her friends to establish a Memorial Fund that would help mental health consumers access the arts. In 2006, 53 grant applications were received. The applications ranged from TAFE/vocational courses, assistance with art exhibitions, dance classes, jewellery making, theatre outings, art courses/workshops, festival activities and concerts.

This year, in collaboration with the Western Australian Association for Mental Health (WAAMH), the McManus Foundation awarded seven grants. The grants were presented at the Reflections Art Studio in Northbridge on Monday, the 6th of November - the birthday of Dr McManus. Carmel Iannolo, Dr. McManus's sister gave a moving address and presented the cheques to the successful applicants.

Dr. McManus's family and friends are very grateful to Ann White, Executive Officer and Samantha Emery, Executive Officer Support of WAAMH for the tremendous amount of time and energy they have given to this project. Those interested in donating to the fund can contact Ann White, Executive Officer Western Australian Association of Mental Health on Tel 9420 7277. All donations are tax deductible.

## Planning for the future

Planning days can prompt sceptical responses from staff, especially when they're flat-out trying to meet objectives at work! But good planning can actually make the workload more manageable and remind us all of our "big picture" goals.

The North Metropolitan Area Health Service, Mental Health Strategic Directions Planning Day was held on the 22 November 2006 at the Perth Zoo. Representatives for consumers, carers, the G.P. Divisions and Non-Government Organisations attended, as well as NMAHS staff.

The main aim of the day was to incorporate the Strategic Intent into planning for NMAHS Mental Health. It was also a chance to develop relationships with people from different areas of Mental Health, with a view to working together to achieve mutual objectives.

The strategic planning process began with a SWOT session – Strengths, Weaknesses, Opportunities and Threats facing NMAHS Mental Health. Among the most common concerns raised by staff were:

- Lack of stable leadership
- Low staff morale
- Limitations of financial resources

Staff also talked about strengths of the NMAHS Mental Health that they would like to see continue, including:

- Dedicated staff
- Good community partnerships
- Increased community interest in mental health

At the conclusion of these discussions five strategic objectives and key actions were identified. These will be incorporated into a Strategic Plan for NMAHS Mental Health.

- Leadership
- Workforce Development
- Partnerships and Linkages
- Integration of Service Delivery
- Planning

The Mental Health Executive Group is committed to advancing strategic planning in consultation with staff and key stakeholders and we're keenly interested in everyone's participation. Watch this space for further developments!

## Mental Health Hospital at Home

An innovative new programme is up and running in mental health. Hospital at Home allows clients to receive treatment in the familiar surrounds of their own homes. The pilot programme kicked off in March this year and has treated about 60 people so far. The 12-month pilot is being funded by Population Health.

Hospital at Home enables mental health clients to maintain their day-to-day lives with minimal disruption. By being treated at home, clients can carry on with their normal lives as much as possible. This means that social networks can be more easily maintained and any sense of stigma or dislocation is avoided. Hospital at Home staff work closely with families and carers as part of their community-based approach.

Mark Anderson, acting Head of Avro Clinic and Service Coordinator, says Hospital at Home provides consumers with more choice and frees up beds within the healthcare system. "The service is for people who would otherwise be voluntarily admitted to a mental health hospital. So the benefits are two-fold: firstly, consumers have more choice, and secondly, the bed that the consumer might use can be given to someone else."

Similar programmes run in other states have met with great success. In Adelaide, for instance, three Hospital at Home teams are in operation.

The WA programme is currently being piloted in Subiaco, Osborne Park, Clarkson and Joondalup mental health clinic areas. As a community-based model of care, Hospital at Home works closely with local mental health clinics, emergency departments and general practitioners. The service has a capacity for four patients in its "virtual beds" and intensively cares for these patients for up to two weeks.

The service has received an enthusiastic response from patients, carers and health professionals. A partnership with perinatal services is also being considered.



Pedus Eweama, Clinical Nurse, in front of Hawthorn House.

## Spotlight on Staff

How often have you seen a colleague in the corridor and wondered 'what do they do?' *Spotlight on Staff* is a new section designed to introduce the many and varied individuals who make up the North Metropolitan Area Health Service - Mental Health. In this edition, we meet Pedus Eweama. Pedus is a clinical nurse at the newly opened Hawthorn House.

### 1. What were you doing before you became a clinical nurse?

I was born in Nigeria, West Africa and migrated to the United States when I was four. I had to work hard to overcome challenges and make the most of my opportunities. While at school and University my two passions were politics and academics. Some of my most memorable achievements include my statewide election as the 2nd Vice President of the Georgia Association of Nursing Students, enabling me to represent Georgia in many national workshops, conferences and seminars. I was the first immigrant to reach that position in any statewide nursing students' organization in the USA. Other significant political achievements as a student included election as a class representative, parliamentary senator and the school newspaper's copy editor.

### 2. What made you decide to become a nurse?

Having completed my first degree in humanities with Suma Cum Laude (Highest Honours), I was offered a scholarship to complete a Masters/PhD program and

be retained in the school as an Assistant Professor. But I was looking for something different – something that would make a real difference to people's lives. So, I opted to enrol in a second degree (Bachelors of Science in Nursing) and a Masters degree concurrently. I became a nurse primarily because of the wide spectrum of opportunities that the profession has to offer and the impact being a nurse could make on the lives of physically/mentally unwell individuals. Above all, the opportunity to travel the world was appealing!

I began my career as a nurse in the medical surgical ward and then moved to psychiatry. It was a wonderful experience because I was exposed to different aspects of mental health nursing such as forensic nursing, acute/chronic, medical/psyche and rehabilitation. Further down the track, my family and I were sponsored by Graylands hospital and arrived in Perth in 2005 with enthusiasm and great expectations. I have so far enjoyed my experiences here in Perth and particularly as a Graylands staff member. Some of my friends still can't believe that I enjoy mental health nursing but I do! I have unequivocal compassion for the mentally unwell and believe I can help make a difference by contributing my skills, knowledge and ability to their care. I'm very interested in human rights, especially as they relate to the mentally ill.

### 3. What are you looking forward to most about your new job at Hawthorn House?

As a new service, the challenges and opportunities are enormous. Everybody is actively at work and I enjoy the participatory style of leadership that has been embraced. For instance, recently I was given the responsibility and authority to develop a resident handbook which has just been completed. I am very confident and optimistic that Hawthorn House will live up to stakeholder expectations. As a clinician and co-coordinator of clinical service delivery at Hawthorn House, I am confident that we will help a considerable number of people achieve greater levels of independence. It is exciting being part of this new project and helping facilitate its inception.

### 4. Can you describe a typical day for you as a clinical nurse?

Being a nurse is more than a job, it is a commitment, and it is a vocation. As our residents begin their journey of recovery, we will be their anchor every step of the way. Our work at Hawthorn House is guided by the most basic of rehabilitation values, that first and foremost, persons with psychiatric disabilities have the same goals, dreams and aspirations as any other person.

### 5. What do you like to do when you're not at work?

Apart from being a nurse and human rights activist, I am also the co-founder of Child Aid Survival and Development International (CASDI) which advocates for the rights of the child with particular focus on Sub-Saharan Africa. I am also a nurse writer having published in several journals and newsletters on nursing issues. My first book, *When Things Go Wrong: Concepts of Change* was published in 2000. I am on the verge of completing my second book, *Nursing Stories: Ordinary People, Extra-ordinary Journey*. This anthology will go to press in late 2007 and any nurse who has an intriguing nursing story or career episode can contact me on global or personal email address to be part of this publication.

My family and I are enjoying our stay in Perth, and the quality of life would charm anyone! As new migrants, we have acculturated and assimilated to the Australian way of life, as well as retaining our own cultural identities.

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## PLANNING DAY

Planning Days can often prompt sceptical responses from staff, especially when they're flat-out trying to meet objectives at work! But when you're trying to coordinate the actions of so many people and services, planning is an essential part of ensuring the provision of first-rate healthcare. A good planning day can actually make the workload more manageable and make us all remember what we're working so hard towards!

The North Metropolitan Area Health Service, Mental Health Strategic Directions Planning Day was held on the 22 November 2006 at the Perth Zoo. This forum brought together key stakeholders in the development of the Strategic Direction for Mental Health within the context of WA Health's Strategic Intent 2005-2010. These included the Director General, Neale Fong, the NMAHS Area Chief Executive, David Russell-Weiss, the Mental Health Division's Judi Morris, and Wynne James, from the Mental Health Network. Representatives for consumers, carers, the G.P. Divisions and Non-government Organisations also participated, making extremely valuable contributions to the planning process.

The day's objectives were to incorporate the Strategic Intent into planning for NMAHS Mental Health and other key initiatives over the forthcoming year. On a more informal note, it was also a chance to develop relationships with people from different areas of Mental Health with a view to working together to achieve mutual objectives.

The strategic planning process commenced with a SWOT session - Strengths, Weaknesses, Opportunities and Threats facing NMAHS Mental Health. Tables thrashed out these issues and the information was then shared with the room. People then joined other groups to discuss the issues raised. This involved some heated debate, but luckily, no fisticuffs!

Staff raised a variety of concerns during these discussions. Among the most common concerns were:

- Lack of stable leadership
- Low staff morale
- Limitations of financial resources

Staff also talked about strengths of the NMAHS (Mental Health) that they would like to see continue and encouraged:

- Dedicated staff
- Good community partnerships
- Increased community awareness and interest in mental health

At the conclusion of these discussions the top five strategic issues were identified. These were then developed into five strategic objectives and key actions that will need to be incorporated into the development of a Strategic Plan for NMAHS Mental Health. They are (drum roll please):

- Leadership
- Workforce Development
- Partnerships and Linkages
- Integration of Service Delivery
- Planning

These key objectives were linked to WA Health's Strategic Intent 2005 - 2010 under the Six Healthy's.

This Strategic Planning Day is a crucial part of the continual planning process within NMAHS Mental Health. The MH Executive Group is committed to progressing the strategic planning process in consultation with staff and key stakeholders and we're keenly interested in everyone's participation. Watch this space for further developments!