

THE COLLAB

8 + 9 AUGUST 2024



8 + 9 AUGUST 2024 • MOONEE VALLEY RACECOURSE

The Victorian Collaborative Mental Health Nursing Conference is jointly hosted by:



thecollab.org.au

Building a better future for **mental health.**

Your dedicated union for mental health professionals.

Who are we?

The Health & Community Services Union (HACSU) has represented mental health professionals for over 100 years. We advocate on issues that matter to mental health workers and are committed to ensuring better jobs in the sector.



Paul Healey
State Secretary



Rebecca Sprekos
Assistant State Secretary

HACSU is a union run for mental health workers, by mental health workers — with our executive team sharing over 40 years' experience in mental health nursing.

Member Benefits

Professional Indemnity & Public Liability Insurance

24/7 mental health support through Hunterlink EAP Service

Workplace advice, support and representation

A supportive community campaigning for better working lives.



Let's **shape the future** of mental health in Victoria!

Join HACSU today to strengthen our collective bargaining power & secure better outcomes for mental health professionals.

hacsu.asn.au/join

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Authorised by Paul Healey, HACSU State Secretary,
7 Grattan St Carlton, 3053.



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THE
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2024

Keynote Speakers

Anna Love



DAY ONE

CHIEF MENTAL HEALTH NURSE AND EXECUTIVE DIRECTOR CLINICAL AND PROFESSIONAL LEADERSHIP UNIT

TIME: 9:40am • THURSDAY 8 AUGUST

Anna was appointed Victoria's Chief Mental Health Nurse in 2015 and comes with experience across mental health and addictions medicine, having trained and worked in the UK before moving to Australia.

Anna's vision is to ensure we have a skilled, valued, and nurtured mental health nursing workforce. In 2022, Anna was additionally appointed as Executive Director of the Clinical and Professional Leadership Unit within Safer Care Victoria.

Anna is the executive sponsor of the Mental Health Improvement Program, leading significant reform

and improvement projects in response to the Royal Commission into Victoria's Mental Health System. Anna provides expert advice on quality and safety matters to the CEO of Safer Care Victoria and the Department of Health. As Executive Director, Anna oversees and supports the work of Victoria's Chief Clinical Officers.

KEYNOTE

Let's Reflect & Grow

As the Chief Mental Health Nurse Anna Love endeavours to prioritise regular connection with the mental health nursing workforce throughout the state of Victoria. This keynote presentation will provide a time to celebrate the silver 25-year anniversary of the Collab conference. An opportunity to reflect on achievements, developments, changes and honour the work that was been achieved to date. The last 25 years have been a testament to those colleagues who have gone before us. This presentation will explore and stimulate discussion on the critical role each of us plays in the future of shaping and continuing to support our mental health nursing workforce to provide safe, high-quality consumer, carer care delivery in the coming decades.

ANNA LOVE'S KEYNOTE IS THANKS TO MAJOR SPONSOR CENTRE FOR MENTAL HEALTH NURSING.

Helena Roennfeldt



DAY ONE

GRADUATE RESEARCHER

TIME: 1:25pm • THURSDAY 8 AUGUST

Helena is completing her PhD on experiences of mental health crisis and crisis care. She has qualifications in Social Work, Suicide Prevention, Forensic Mental Health, and Mental Health Practice.

Her research and practice are the culmination of her personal experience, work experience, and formal study and training- including Intentional Peer Support, eCPR, Open Dialogue and Certified Personal Medicine. Her research includes involvement with the development of

the Queensland and National Lived Experience Workforce Guidelines and publishing several articles on the Lived Experience workforce. Helena is passionate about building our collective capacity to hold and respond to acute distress and crisis.

KEYNOTE

Crisis as a Catalyst for Change

Crises are disruptive enough to make us question our sense of self, relationships, and purpose. Although excruciatingly painful, they may act as catalysts and present opportunities for change. Key findings from a study on the understanding of the lived experience and personal meanings of mental health crises are presented, which challenges us to reconceptualise how we frame mental health crises.

HELENA ROENNFELDT'S KEYNOTE IS THANKS TO MAJOR SPONSOR HEALTH AND COMMUNITY SERVICES UNION VICTORIA (HAGSU)



Keynote Speakers

Rhonda Wilson



DAY
TWO

PROFESSOR OF MENTAL HEALTH NURSING
(& DIGITAL HEALTH) RMIT

TIME: 9:00am • FRIDAY 9 AUGUST

Professor Rhonda Wilson is a proud Wiradjuri woman, experienced nurse and an internationally recognised mental health nursing scientist.

Her work in e-health is paving the way for new digital therapeutic interventions that promote and support patient-centred care and increased wellbeing.

KEYNOTE

Internationalisation in Mental Health Nursing

RHONDA WILSON'S KEYNOTE IS THANKS TO MAJOR SPONSOR AUSTRALIAN NURSING AND MIDWIFERY FEDERATION (ANMF)



Rose McCrohan



DAY
TWO

MANAGER / AOD/ MH NURSE
PRACTITIONER, COMMUNITY ALCOHOL
AND DRUG NURSE PRACTITIONER
CURRAN PLACE UNITING'S ADULT AND
MOTHER BABY WITHDRAWAL SERVICE

TIME: 2:05pm • FRIDAY 9 AUGUST

Rose began working in AOD in 1992 at Pleasant View. Rose has continued to work in residential and non-residential withdrawal services at Eastern Health and YSAS before moving to Uniting ReGen, now Uniting Vic. & Tas in 2005.

Rose began working in AOD in 1992 at Pleasant View. Rose has continued to work in residential and non-residential withdrawal services at Eastern

Health and YSAS before moving to Uniting ReGen, now Uniting vic. & Tas in 2005. Rose became Victorians first AOD Nurse Practitioner in 2009. Rose has a Master of Public Health, supervises Nurse Practitioner candidates and was a member of the Ministers Expert Advisory Panel for the Medically Supervised Injecting Facility and Rose manages Curran Place, Uniting's 16 bed (4 Mother Baby Beds) residential Adult and Mother Baby Withdrawal service, Victorias only state funded alcohol and drug mother baby beds.

KEYNOTE

Nurse Practitioners Lead the Way: Inspiring the Next Generation of NP's to Develop Innovative Roles.

Developments in the Nurse Practitioner role since AOD and MH nurses were first endorsed, show us that AOD and MH nurses can lead the way in developing innovative models of care. Expansion in scope, regulations, changes in the MBS and regulatory frameworks continue to broaden opportunities for NP roles.

ROSE McCROHAN'S KEYNOTE IS THANKS TO MAJOR SPONSOR
CENTRE FOR MENTAL HEALTH LEARNING (CMHL)



Join the ANMF to join your EBA campaign

As an ongoing Collab Conference committee member and major sponsor, ANMF understands that mental health nurses have specific expertise and skills, and are leading the way for mental health reform in Victoria.

To retain, recruit and rebuild our mental health nurse workforce, and achieve this reform, we must have an enterprise bargaining agreement (EBA) that values and rewards nurses and improves our conditions and entitlements, focusing on safety and gender equality in the workplace.

Join the ANMF in leading the way for mental health nurses, as we seek to:

- maintain pay parity with public sector nurses
- improve parental leave provision
- improve personal leave provision
- improve annual leave provision
- improve allowances
- improve overtime provisions
- expand graduate support nurse role
- improve classifications and descriptors for NUM, senior psychiatric nurse, mental health DON.

Find out more at anmfvic.asn.au/MHEBA2025.

Scan to join ANMF
(Vic Branch)



Visit the Mental
Health EBA
campaign page



**Visit the exhibitor table for the full
EBA log of claims, and to go in the
draw to win a \$200 visa card.**

MENTAL HEALTH EBA 2025-28
Retain. Recruit. Rebuild.

Welcome to Country & Smoking Ceremony Perry Wandin, Wurundjeri Elder



DAY
ONE



TIME: 8:40am • THURSDAY 9 AUGUST

Perry Wandin a proud Wurundjeri man, cultural heritage officer at Wurundjeri tribe land council.

Great, great, great nephew of William Barak and son of James Juby Wandin, Perry's home is in Healesville, near the community site that was Coranderrk.

Perry has been supporting and Welcoming the Collab attendees since 2018.



THE
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Special Events

DAY ONE

Nursing Students Unite

TIME: 10:25am
DAY: THURSDAY 8 AUGUST
LOCATION: CHILL OUT SPACE

This popular meet and greet session is back again in 2024. **Hosted by Cathie Miller.**

this is a chance for you to meet your fellow nursing students and 2024 Student Pass winners. Meet current graduate mental health nurses, as well as other experienced mental health nurses and ask them anything!

DAY ONE

First Nations Nurses Unite

TIME: 3:25pm
DAY: THURSDAY 8 AUGUST
LOCATION: CHILL OUT SPACE

Inviting Aboriginal and Torres Strait Islander Mental Health Nurses and Students to come together to purposefully connect and share with one another about their experience as Mental Health Nurses. **Hosted by Adrienne Lipscombe, VACCA.**



Read the **Gayaa Dhuwi (Proud Spirit) Declaration**



Read the **Balit Murrup Aboriginal Social Emotional Wellbeing Framework**



JOIN US IN THE MENTAL HEALTH NURSING COMMUNITY

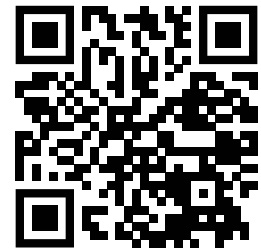
Passionate about mental health nursing?

Join the Australian College of Mental Health Nurses. ACMHN credentialing is recognised all throughout Australia. Your membership will also gain you discounted rates for all events, access to the latest practice, education and research, as well as exclusive member-only content.

Scan the QR code to join the community!



Australian College
of Mental Health Nurses

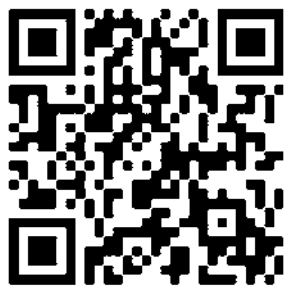


MENTAL HEALTH TRAINING CALENDAR



FREE statewide training for people working in
Area Mental Health Services (AMHS) and Forensicare
<https://cmhl.org.au/cmhl-amhs-calendar>

Scan the QR code
to go to the calendar
and register



[https://cmhl.org.
au/cmhl-amhs-
calendar](https://cmhl.org.au/cmhl-amhs-calendar)

Events are online and face-to-face,
part- and full-day. New events are being
added so check back regularly!

EVENTS INCLUDE

- supervision training
- leadership development
- discipline and speciality area forums
- lived experience workforce development
- therapeutic interventions
- supported decision-making, and more.

Topics are guided by CMHL consultations, input from CMHL AMHS committees, the Royal Commission, and relevant frameworks and guidelines. Training is delivered by AMHS staff, statewide training providers and others.

ELIGIBILITY CRITERIA

These are free events designed for members of the public clinical mental health workforce in Victoria, (staff employed at Area Mental Health Services, Forensicare or mental health staff from RCH) and lived experience workforces (LEW) working in either public clinical or community mental health state-funded roles. Other workforce in partner organisations, such as AOD organisations or ACCHOs, may sometimes be eligible.



To receive this poster in an accessible format, please email: contact@cmhl.org.au

Special Events

JUMP TO: [CONTENTS](#) | [DAY ONE](#) | [DAY TWO](#)

DAY ONE

The Collab 25 Year Anniversary Celebration Event

TIME: 5:00pm – 7:00pm
DAY: THURSDAY 8 AUGUST
LOCATION: JOCKEY ROOM

DAY TWO

Awards Presentation

TIME: 4:00pm – 4:30pm
DAY: FRIDAY 9 AUGUST
LOCATION: PLenary SPACE – THE CELEBRITY ROOM

DAY TWO

Social Activity – Drinks in the TOTE BAR

TIME: From 5pm
DAY: FRIDAY 9 AUGUST
LOCATION: TOTE BAR & DINING

Unwind after the event and join your fellow Collab attendees for a drink and chat at the TOTE bar.

Happy Hour prices on 4:30pm – 6pm.



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Wellness Room Activities

DAY ONE

DAY TWO

DAY ONE

DAY TWO

The Collab can contain content that may be sensitive and sometimes distressing to conference participants. We have set up two spaces where participants can either sit quietly or participate in an activity to take a break from the conference atmosphere.

Chill Out Space

TIME: ALL DAY

DAY: THURSDAY 8 & FRIDAY 9 AUGUST

LOCATION: JUST BEFORE THE MOUNTING YARD



Wellness Room

TIME: ALL DAY

DAY: THURSDAY 8 & FRIDAY 9 AUGUST

LOCATION: PARADE BAR

Delta Therapy Dogs: Helping Animals and People Bring Joy to Each Other

TIME: 11:00am – 12:30pm (DAY 1) & 11:00am – 12:30am (DAY 2)

DAY: THURSDAY 8 & FRIDAY 9 AUGUST

HOST: DELTA THERAPY DOGS

Delta Therapy Dogs is a national leader in the delivery of Animal Assisted Services, with over 1,200 volunteers delivering Animal Assisted Activities (AAA) and Collaborative Animal Assisted Therapy (C-AAT) in hospitals, aged care facilities, youth services, mental health services, correctional facilities, and other health and community services right across Australia.



THE WELLNESS ROOM IS THANKS TO MAJOR SPONSOR SAFER CARE VICTORIA

Laneway Learning



Laneway Learning hosts informal evening classes in anything and everything, and aims to make education accessible, community led and fun!

We are committed to providing interactive, entertaining and affordable classes to improve mental wellbeing and foster social connection. We source our teachers from the community and the community that we create is made up of people from all different walks of life. We strive to bring education outside of traditional learning spaces, making it a peer-to-peer experience.

DAY ONE

Watercolour Basics via Floral Wreaths

TIME: 2:15pm – 3:00pm
DAY: THURSDAY 8 AUGUST
HOST: FRAN

We'll learn some tips and tricks to get us going with watercolours and then we'll go on to design our floral art.

What will we cover? In this fun, hands on workshop you will learn:

- How to work with watercolour paints
- How to create native flowers and foliage
- Watercolour painting techniques
- Colour theory



DAY TWO

No-needles Knitted Pillows

TIME: 11:30am – 12:15pm
DAY: FRIDAY 9 AUGUST
HOST: MARIA

Can you make a big chunky pillow in 30mins? Yes you can! In this class, we'll learn two different No-needle knitting techniques (arm knitting and loop knit) using the chunkiest, softest yarn. You'll leave with a new fun hobby and a new cozy pillow everyone will be able to finish during the class.

What will we cover? In this class you will learn:

- What is arm / no-needle knitting
- How to begin (cast on), progress, and finish (cast off) a knitting project
- Suitability of different types and sizes of yarn
- Ideas for other no-needle knitted projects



Wellness Room Activities

DAY
TWO

Meditative Doodling for Beginners

TIME: 9:30am – 10:00am

DAY: FRIDAY 9 AUGUST

HOST: ETHEL

This class give you an introduction to simple doodling using straight forward but versatile techniques. Pairing things black to simple black and white, learn to creative bold and striking patterns with just a single pen.

What will we cover? In this hands-on class :

- We'll begin with a brief run-down of practices that have inspired meditative doodling.
- Then we learn about tools needed for this practice (which can really just be simple pen and paper!).
- Next, we cover the basic steps before creating a couple of simple examples, which we will do while practicing our breathing and mindfulness techniques.



DAY
TWO

Intro to Pottery

TIME: 10:00am – 10:45am
& 11:30am – 12:15pm

DAY: FRIDAY 9 AUGUST

HOST: MADDY

Come and explore the world of pottery and clay modelling! We will guide you through an introduction to pottery, supporting you to make your own piece of pottery art from air-dry clay.

What will we cover? In this fun, hands-on workshop you will learn how to:

- Condition our clay
- Work with air-dry clay to make objects
- Design and shape clay
- Stamp, emboss, engrave into clay
- Attaching pieces of clay correctly for strength



DAY
TWO

Signature Scents: Make Your Own Perfume

TIME: 2:05pm – 2:50pm

DAY: FRIDAY 9 AUGUST

HOST: LILY

In Lily's class you'll learn all about the composition of perfume: how to create blends of top, middle and base notes to combine into your very own signature perfume.

What will we cover?

- Learn about the natural perfume making process – top notes, middle notes and bottom notes.
- Select from more than 50 different oils to construct your special scent.
- Experiment, combine and create your own, unique fragrance.
- Create your own natural perfume with pure essential oils.
- Take home your top, middle and base note blends to top up your perfume roller.

PLEASE NOTE: THIS WORKSHOP IS NOT SUITABLE FOR PEOPLE WHO ARE PREGNANT OR BREAST FEEDING, OR CHILDREN.

DAY TWO

Self Massage, Stretching and Feel Good Movements

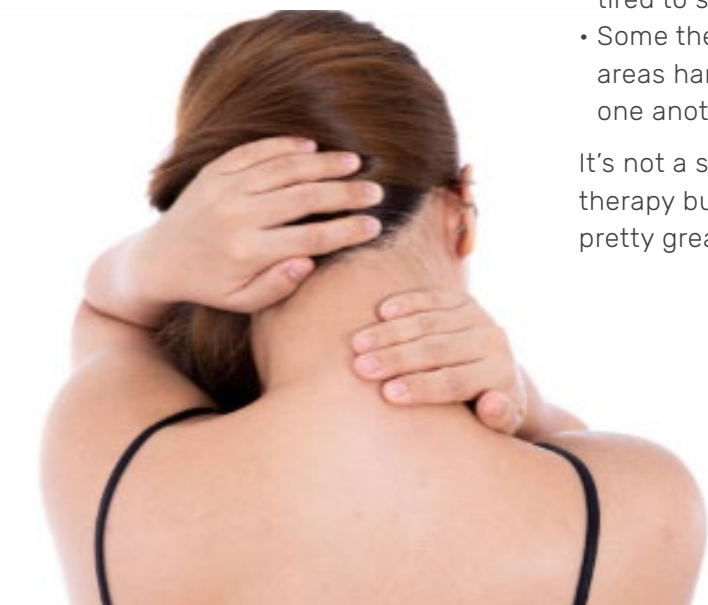
TIME: 12:20pm – 1:06pm
DAY: FRIDAY 9 AUGUST
HOST: CLARE

What will we cover? In this workshop you will learn how to self massage forearms, hands, necks and shoulders.

We will explore:

- Where to find the good spots and what to do with “knots” when you do,
- Self care tools the experts recommend to help with repetitive movements and fatigue
- Stretches for when you’re too tired to stretch
- Some theory about how these 3 areas hang together and affect one another through daily use.

It’s not a substitute for remedial therapy but it will make you feel pretty great!



DAY TWO

Polymer Clay Accesories

TIME: 3:30pm – 4:20pm
DAY: FRIDAY 9 AUGUST
HOST: FRAN

Polymer clay is an accessible, colourful and versatile material – a lot of fun to use, but even better with some introductory tips to get you going.

What will we cover? In this class we will learn to:

- Condition the clay
- Mix the colours
- Create a marble effect
- Use jewellery connectors
- Bake the polymer, plus tips on how to do this at home



Abstract Presentations

10:55am • PLENARY SPACE – CELEBRITY ROOM KATE THWAITES

Kate was appointed Victoria's Deputy Chief Mental Health Nurse in 2021, supporting the program of work undertaken by the Chief Mental Health Nurse. Kate was appointed the Director of the Mental Health Improvement Program within Safer Care Victoria in 2023 and leads the program of work which is a recommendation and outcome from the Royal Commission into Victoria's Mental Health System. Kate supports mental health nursing leadership and works with mental health nurses, lived experience advisors, allied health professionals and project officers to develop clinical practice improvements and best practice frameworks aimed at supporting the mental health workforce and improving the experience of care for consumers, families, and carers and supporters.

Clinical Supervision for Mental Health Nurses

Clinical supervision is an important component of Mental Health Nurse's professional development. To support clinical supervision for Mental Health Nurses the Office of the Chief Mental Health Nurse (OCMHN) developed the Clinical Supervision for Mental Health Nurses: A framework for Victoria.

OCMHN supported the frameworks release with a 5-year implementation plan and project lead role over the last 2 years. In 2020 Peninsula Health became the pilot site and lead service in this project, and over the following years this spread to five sites and a Statewide Community of Practice. In this period the health sector was met with unprecedented pandemic stressors. Where many pieces of work needed to be put on hold, the value in and thirst for clinical supervision grew.

Five years on, this project is coming to its formal conclusion, but the work will continue. This presentation will look at what we have learnt over

the course of this project, how we will continue to embed and sustain clinical supervision for mental health nurses across Victoria and some of the impacts that this project has had.

10:55am • BREAK OUT 1 – MOUNTING YARD VICTORIA MILLWARD ★ THEJO MATHEW

Victoria Millward, Nurse Manager of the Transitional support unit with Monash Health, Melbourne, Victoria. She is an AHPRA Registered Psychiatric nurse, who completed her training and worked in the UK prior to immigrating to Australia in 2016.

Thejo Mathews – Associate Nurse Manager of the Transitional support unit with Monash Health, Melbourne, Victoria. She is an AHPRA Registered Nurse, who completed her training and worked in India as a general Nurse prior to immigrating to Australia in 2011, Thejo completed her Masters in Mental health in 2020.

Unique Community-based Rehabilitation Service for Consumers with Dual Disability ♥

Background: The Transitional Support Unit (TSU) is a 10-bed state-wide service for consumers with a Dual Disability (DD) who have a mental illness, with a co-occurring intellectual disability (ID) or significant cognitive impairment, and who would benefit from a period of intensive treatment. The service is in Narre Warren South, in the local community. It falls under the Monash Health Casey Adult Mental Health Program.

Objectives: A unique Rehabilitation service for consumers with ID and Mental Health disorders, which has achieved;

- Improvement outcome scores,
- Reduction in relapse rate
- Improved quality of life with appropriate support

★ First Time Presenter ♥ Co-produced Presentation

Abstract Presentations

Methods: Retrospective data collection and analysis.

Findings: Community based, least restrictive service leading to improved outcomes for complex dual diagnosis consumer group

The TSU improves the quality of life for people who have a DD through targeted and specialised rehabilitation and recovery support;

- successful discharge
- reduction in behaviours of concern
- reduction in the use medication
- Reduction in readmission rate
- Diagnosis clarification
- Improvement in quality of life/social integration/ Independent living skills
- Partnerships with sister services, NDIS, Employment, voluntary services
- Advantage of extended post discharge care

Conclusions: The above outcomes highlight what can be achieved with the introduction of similar service models.

10:55am • BREAK OUT 2 – VALLEY VIEW
EMMA MURRELL, OLIVER McDOUGALL-FISHER

Emma is an Enrolled Nurse who has been working clinically in private, public and forensic mental health, before transitioning to clinical education in 2022.

Oliver is also an enrolled nurse who has been lucky to work in a variety of public mental health services in both regional and metropolitan areas. He has been working in clinical education since 2021.

Both Emma and Oliver have a passion for providing education, training and clinical support to Enrolled Nurses working in mental health from across the state.

Oliver McDougall-Fisher: Over my career I have been

lucky to work over a variety of public mental health services in both regional and metropolitan areas. These experiences have given me insights into the disparities of people and services around Victoria. As an Enrolled Nurse this has strengthened my passion for education and training to support on a state wide level, which CMHL has allowed me to do.

My areas of interest include dual disability, forensic mental health, trauma-informed care, solution focused therapy, and clinical supervision.

I am a strong advocate for Enrolled Nurses in the Mental Health sector and the role they provide. I believe they are a valuable recourse that can be overlooked and together we can continue to improve the experiences and possibilities they can achieve.

How Statewide Mental Health Enrolled Nurse Educators are Responding to the Needs of the Enrolled Nurse workforce

The Statewide Mental Health Enrolled Nurse Educator roles were established in 2020. We provide support and education to other Mental Health Enrolled Nurses and work to facilitate connections between from across the state while providing the most up-to-date training to progress the EN workforce.

A lot of our work priorities are based on the Mental Health Enrolled Nursing scoping report, published in September 2022, which identified areas for support, collaboration, growth, learning and development of the Enrolled Nurse profession.

Enrolled Nurses are a valuable resource in all settings, and they are finding their voices and coming together to further push the role to new and interesting places. They are seeking more



Mental Health Improvement Program



Safer Care Victoria are Victoria's healthcare safety and improvement specialists and are an administrative office of the Department of Health

Victoria's Chief Mental Health Nurse

The Chief Mental Health Nurse has a key role in supporting the mental health sector in Victoria through initiatives including:

- Mental health nursing workforce support
- Clinical supervision for mental health nurses
- Equally well - a framework for Victoria
- Occupational violence
- Development of a state-wide anti-ligature assessment tool



Mental Health Improvement Program

The Mental Health Improvement Program was established in 2021 as a recommendation of the Royal Commission into Victoria's Mental Health system.

- Current focuses of the program include:
- Reducing compulsory treatment
- Adopting the zero suicide framework
- Preventing gender-based violence
- Towards elimination of restrictive practice

Safer Care Victoria works with clinicians, lived experience consumers, carers, families, and supporters to help health services deliver better, safer healthcare to Victorians

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Safer Care Victoria



OFFICIAL

Abstract Presentations

opportunities to show their knowledge and expertise and to collaborate and connect with other Enrolled Nurses.

This presentation will provide an overview of how Statewide Mental Health Enrolled Nurse Educators continue to raise the profile of the Enrolled Nurses working in mental health, connecting the workforce, and guiding important projects to support their development.

10:55am • BREAK OUT 3 – JOCKEY ROOM
KAYLEIGH KERR ★ FABIOLA CASE

Kayleigh is the Manager of Nursing Education for Mental Health at Austin Health. She has been a Mental Health Nurse since 2013 after completing her BSc in Mental Health Nursing at the University of Stirling, Scotland. Kayleigh moved to Australia in 2019 to continue her career in Forensic Mental Health Nursing. She is currently pursuing her Masters in Mental Health Nursing at RMIT University. Throughout most of her career, Kayleigh has worked in Forensic Mental Health and has held several healthcare leadership positions, which she takes great pride in. Her new role in education has afforded her the opportunity to shape and support the next generation of mental health nurses, ensuring they are equipped with the necessary skills and support required for a fulfilling healthcare career. Kayleigh strongly believes that a workforce that has strong links to contemporary educational and psychological support projects this onto the consumers who are being cared for.

Fabiola is currently serving as the Consumer Lived and Living experience Discipline Lead; she has a diverse background in mental health support, suicide prevention, leadership and people management. Her experience extends to leadership roles in retail, tourism, and outdoor adventure activities, and holds qualifications in suicide

prevention, outdoor education, mental health, and sports coaching.

Fabiola is deeply committed to making a positive impact in the mental health field. She is driven to further expand her expertise and connections within the mental health community.

Enhancing Mental Health Care Delivery Through Co-Designed Safewards Education. The Value of Lived Experience Integration ♥

In 2024, the Safewards one-day training was redesigned using a co-design approach with Lived Experience Consumer Consultants and mental health nurses. The new design looks at ways to encourage active participation, through reflection and scenario-based components. This co-designed approach to Safewards education is not merely about the theoretical components of Safewards but is grounded in the practice insights and firsthand perspectives of the lived and living experience workforce. By deeply integrating and bringing forward the voices and experiences of those who have navigated the mental health system and mental health challenges, Safewards education gains an authentic perspective that is not only relevant but also resonates with care providers and recipients of care. The value of incorporating the lived experience perspective into Safewards education has been profound. It allows for Safewards to be humanised, bridging the gap between theory and real-world application and repercussions. By incorporating our lived experience workforce, it provides invaluable insights into consumer-mental health clinician interactions and enables more nuanced discussions and practical strategies for conflict de-escalation and prevention. This approach not only enriches the



Day One Program

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learning experience but also fosters a more holistic and compassionate approach to care, promoting recovery-oriented practices and reducing restrictive practices.

10:55am • BREAK OUT 4 – COMMITTEE ROOM
KATE GODFREY ★

My name is Kate, and I am the acting Nurse Unit Manager of the Parent & Infant Unit/ Team Lead of the Perinatal Community Mental Health team at Grampians Health. I am a Registered Psychiatric Nurse and have worked in mental health care for almost 20yrs predominately in bed-based areas including adult acute, aged acute and now perinatal.

Strategy for Imbedding Recovery-oriented Principles Into Practice – A Pilot in the Parent & Infant Unit (Grampians Mental Health and Wellbeing Service)

Over 2021 and 2022, Grampians Mental Health & Wellbeing Service invested and supported a service wide roll out of Recovery Orientated Service Transformation workshops delivered by Helen Glover. Following these initial workshops, ongoing initiatives were sought to continue to embed recovery orientated practice within the service at local levels.

The concept of structuring a regular monthly reflective session for inpatient areas was born and this was piloted in the perinatal bed-based setting. The Gibbs Reflective Cycle was utilised a framework for discussions about either a recent complex presentation that staff found to challenge their skills, or a fictional complex case study. The reflective session was co-led by CNE and team lead. The benefits of this strategy included role modelling the importance of reflective practice, providing a platform for collaboration of recovery-oriented ideas and concepts, providing leadership, and

mentoring for up-and-coming mental health nurses, providing recognition of a job well done and well as a setting to identify opportunities for growth and development in a safe and supported environment.

11:25am • PLENARY SPACE – CELEBRITY ROOM
HOSU RYU

Hosu is a lecturer at La Trobe University. She brings experience in mental health clinical work and healthcare leadership into her teaching and research. Her commitment to teaching and learning has been recognised by Advance Higher Education Fellowship and multiple teaching awards, including the Australian Award for University Teaching, for helping students “to see the person, not the diagnosis” when working with individuals with mental illness. She is currently completing a PhD project at the University of Melbourne, under the supervision of Associate Professor Bridget Hamilton, undertaking an evaluation study on the Department of Health clinical supervision framework implementation for mental health nurses at four public health services across Victoria, Australia. Hosu deeply cares about sustainability in the mental health nursing workforce and finds it rewarding to conduct PhD research closely related to the actual practice of mental health nurses. Her focus extends beyond conducting high-quality research; she is also dedicated to strategically disseminating her findings to bring meaningful changes to the current challenges faced by the mental health nursing workforce

Clinical Supervision: Are We Talking About the Same Thing?

This presentation will discuss the observations made about clinical supervision practice through research and clinical practice. Are we talking about the same thing?

★ *First Time Presenter* ♥ *Co-produced Presentation*



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**Sensory modulation
in mental health
settings**



**Introduction to the
Mental Health
Intensive Care
Framework**



**Thinking about
Psychosis:
Understandings that
support
recovery-oriented
practice**

ABOUT US

We are the Centre for Mental Health Nursing. We advance the science and art of mental health nursing practice.

ABOUT OUR TRAINING

CentreMHN's training addresses the everyday priorities of mental health nursing and reflects current research evidence. They're designed to upskill the MHN workforce in line with current innovation in practice, consumer priorities, legislation and policy directions.

Our training development team comprises educators from both mental health nursing and lived-experience backgrounds. Wherever possible, CentreMHN training is co-produced. This means it has been researched and developed in partnerships between mental health nursing academics and mental health nursing consumer academics, in keeping with the CentreMHN's commitment to embed both clinical and consumer perspectives in our training and research programs.

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Despite the common use of the term 'clinical supervision,' its design, purpose, and application vary significantly depending on location, time, and roles. While some may refer to group debriefing as clinical supervision, others limit this practice to individual supervision with senior clinicians discussing presented client cases.

The intention and expectation of the practice also vary with diversity in values, beliefs, and ways of working. Some may use it to vent their frustration about working conditions, whereas others may use it to practice specific therapeutic skills. Some may even use this platform to discuss their career progression.

Additionally, the intentions that organisations have around clinical supervision practice can differ from what individual nurses want from this practice. Acknowledging this difference needs to be prioritised, as research and implementation relying on assumed knowledge or a broad definition can lead to further confusion about the practice.

This presentation will explore different intentions, expectations, and understandings of clinical supervision practice and open the discussion about what this means for future research and implementation.

11:25am • BREAK OUT 1 – MOUNTING YARD
COURTNEY DUNN ★ MEAGAN EVANS ★,
LOGAN FAGAN ★

Courtney Dunn

Courtney is the Senior Nurse with Peninsula Health's Mental Health and Wellbeing Service. Working previously as a Nurse Practitioner, Courtney has specialised in mental health and addiction in community and correctional settings. Passionate about ensuring timely and equitable access to mental health care for all consumers, Courtney is

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committed to building capacity within the mental health nursing workforce through education, research, supervision and leadership.

Meagan Evans

Meg is a Nurse Practitioner, specialising in mental health and addiction. She currently working in Peninsula Health MHAOD Crisis Hub, providing direct consumer care and clinical leadership within its assertive outreach service. With experience across public and private mental health and addiction settings, Meg is passionate about building capacity in staff and services to meet the diverse needs of consumers.

Logan Fagan

Logan has been working as a Lived Experience Peer Support Worker at Peninsula Health for over seven years. He has been an integral part of the Peninsula Health MHAOD Crisis Hub since its inception in 2019. Logan is also a qualified counsellor and he is passionate about The Healing Arts and furthering the evolution of Lived Experience Peer Support services.

Better Together: A Lived Experience and Nurse Practitioner Led Mental Health and AOD Assertive Outreach ♥

In 2018 the Victorian government invested in the establishment of mental health, alcohol, and other drug (MH & AOD) hubs to provide immediate and specialist support for consumers who have reached crisis point. Funding provided specialist services within the emergency department (ED) with care continuing for up to 28 days in the community (Victorian Health Building Authority, 2023).

Peninsula Health's MH & AOD Crisis Hub Outreach is an assertive, community-based service, co-delivered by Lived Experience (LE) workers and clinicians who work across the ED and community settings. Our experience has found that LE working in close collaboration with a Nurse Practitioner

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who is working to their full scope of practice allows for responsive engagement, assessment and intervention which prioritises continuity of care.

Initial data indicates a reduction in re-presentations to the ED and a greater referral and engagement rate with ongoing supports for those engaged with the service. Direct consumer feedback has been overwhelmingly positive. This presentation will outline the challenges and benefits of a service that is co-delivered, responsive and integrates mental health and AOD lived experience and clinical expertise.

References

Victorian Health Building Authority (2023). Emergency department mental health, alcohol, and other drug hubs. Emergency department mental health, alcohol and other drugs hubs | VHBA

11:25am • BREAK OUT 2 – VALLEY VIEW CLAIRE ALLAN ★

Claire Allan is a dedicated Enrolled Nurse Educator who provides education and clinical supervision support primarily to enrolled nurses involved in the mental health enrolled nurse graduate/transition program. With experience in both acute and community settings, Claire is passionate about mental health, and supporting and mentoring students and nurses to increase the standard of care for consumers. Claire is motivated to support enrolled nurses to achieve their career goals.

Enrolled Nursing, A Career to Nurture and Retain

Historically, enrolled nurses have been viewed as registered nurses in waiting. While some will go on to further study, providing pathways that acknowledge the increased scope of practice through nursing graduate programs, mentorship and support, enrolled nursing can be a career in

its own right. Intrinsically, we are drawn to the nursing profession because we want to be nurses providing excellent patient care to the full scope of our practice. Enrolled nurses are an integral part of the multidisciplinary team. Nurturing the role and understanding the value of enrolled nurses speaks to the extrinsic factors that helps form the key strategies surrounding retention of this workforce. Having organisational support and opportunities for development can impact on job satisfaction and reduce occupational stress. Our title doesn't always reflect our role and recognising that enrolled nursing is a respected career choice is pivotal to ensuring that the unique skills and increased scope of practice of enrolled nurses are utilised to the fullest.

11:25am • BREAK OUT 3 – JOCKEY ROOM WHITNEY JOHNSON, REBECCA LANGMAN ★, NATHAN ADAMSON

Rebecca is the Director of Consumer Lived Experience at Alfred Mental and Addiction Health, one of the first executive Lived Experience roles following the Victorian Royal Commission. This role involves amplifying the voice of lived experience at every level of health care from ward to board and oversees a workforce of 70+ people alongside the Carer Director. Fiercely passionate about high quality public health care, she started her career as a Peer Worker in public hospital and community services in Adelaide before moving into lived experience workforce leadership. Rebecca was a Board Member and Deputy Chair at LELAN, the peak representative body for mental health consumers in South Australia for 5 years. She has degrees in Performing Arts and Psychology.



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Nathan Adamson is the De-escalation and Minimisation of Aggression coordinator at Alfred Mental and Addiction Health. Nathan's mental health nursing experience is based in adult acute wards, filling various clinical and management roles before moving into practice development education for adult acute. Nathan has led the aggression management training across Alfred Mental and Addiction Health for the past 2 years, leading a new program role out and review of training over this time. Nathan is passionate about staff safety and education, ensuring that all staff are equipped and supported to deliver high quality care to all consumers whilst maintaining safety for all.

Whitney Johnson is the Deputy Director of Nursing for the Alfred Mental and Addiction Health Program. Whitney's mental health nursing experience has spanned across Infant, Child and Youth, Eating Disorders, Forensic Psychiatry, Homeless Outreach, and Adult Case Management, in a variety of clinical and senior leadership roles. Whitney was one of the clinicians involved in establishing the inaugural Victorian Department of Health's Sibling Support and Placement Service, addressing the needs of children and services within the Out of Home Care system. Whitney was Chief Nurse for the Alfred's Child and Youth Mental Health Service before moving into the program-wide Deputy Director role in 2022, and was awarded Alfred Health's Advancing Nursing Leadership scholarship in 2023. Whitney is passionate about improving the resourcing and opportunities available for mental health nurses, to ensure they are supported to continue walking alongside our consumers and families in the way that only nurses can.

A Collaborative and Co-design Approach to Addressing Occupational Violence and Aggression in a Large Public Mental Health Care Service ♥

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While work has been occurring to address Occupational Violence and Aggression (OVA) in mental health settings for many years, the issue has become more pressing in the light of incidence rates continuing to rise, improved awareness, and workforce pressures. Staff feedback highlighted OVA as a factor in deterring staff from working in mental health care, and as having significant impacts on wellbeing.

An opportunity has arisen with the increase in the employment of staff with Lived and Living Experience (LLE) to work collaboratively, offering a new way to address these complex issues. In 2023 the Alfred established a dedicated OVA Working

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Group co-chaired by a clinician and LLE worker, comprised of LLE, clinical staff, and executive leadership.

The working group identified numerous projects under 3 priority areas:

- Managing and responding to OVA,
- Culture of reporting and improving feedback, and
- Post-incident supports.

To prioritise this work and ensure projects are progressing a live Action Tracker was developed, holding members accountable for actions and responsibilities.

The Tracker has been invaluable to the success of the working group in improving the wellbeing of and support for nurses, leading to better workforce retention, an improved culture of safety, and ultimately better care for consumers.

11:25am • BREAK OUT 4 – COMMITTEE ROOM
ASHERA HARRIS ★ ANDREW JONG

Ashera is a mental health nurse currently working with the Early Intervention Mobile Outreach Service at Alfred’s infant and Child mental health and well being service. Ashera has a passion for working with you people and their careers and families. This is Ashera first time presenting at the conference.

Andrew Jong is the discipline senior of mental health nursing at Alfred’s infant, child and youth mental health and wellbeing service. He too has a passion for developing early in career mental health nurses ,the promotion of clinical supervision, and developing and fostering positive culture working mental health nursing.

School Refusal and Child Focused Parent Work

Families and school systems across the world are struggling with school refusal, a problem that can strain family relationships and is associated with

significant mental distress in young people. While school refusal isn’t new, the COVID-19 pandemic and its significant impact on schooling through lock downs has thrown a spotlight on the issue. Mental health services are still seeing the significant impact that this has played in depriving an increasing number of Australian children and young people of their fundamental human right to education.

While much focus is placed on the individual child and their perceived difficulties in attending school, parents are often forgotten when calculating the significant burden of school refusal. Parents often experience significant blame for their child’s non-attendance and this coupled with parents



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witnessing extreme distress in their children for extended periods of time, lends itself to high distress and conflictual situations.

As mental health nurses working at Alfred's Infant, Child and Youth Area Mental Health and Wellbeing Service, Ashera and Andrew share their experiences of supporting parents support their young people in addressing this dilemma in a de-identified case vignette, that speaks to child focused parent work as framework for engagement and treatment in community nursing.

**11:50am • PLENARY SPACE – CELEBRITY ROOM
COURTNEY DUNN ★ STUART WALL**

Courtney is the Senior Nurse with Peninsula Health's Mental Health and Wellbeing Service. Working previously as a Nurse Practitioner, Courtney has specialised in mental health and addiction in community and correctional settings. Passionate about ensuring timely and equitable access to mental health care for all consumers, Courtney is committed to building capacity within the mental health nursing workforce through education, research, supervision and leadership.

Stuart is the Education Steam Lead for Mental Health and AOD within Peninsula Health's Mental Health Service, and an Adjunct Senior Lecturer at Monash University. Stuart works alongside his team of educators to support clinician and lived experience workforces to learn and develop their practice. Stuart is passionate about providing learning opportunities which are work integrated and easily transferable into practice. Stuart's team prides themselves on supporting safe and effective care through the development of high-quality learning programs, which have been developed in line with clinical needs and evidence-based practice.

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Five Years On: Embedding and Expanding Clinical Supervision Within a Mental Health and Wellbeing Service

Clinical supervision is a process of professional support and learning whereby nurses develop their practice and enhance their professional wellbeing through regular, reflective discussion with a professionally trained clinical supervisor (DHHS, 2018). It is increasingly recognised that clinical supervision is a key component of mental health nursing practice (ACMHN, 2019; DHHS, 2018).

In partnership with the Chief Mental Health Nurse in Safer Care Victoria, Centre of Mental Health Learning and the Centre for Mental Health Nursing, a pilot was commenced in 2019 at Peninsula Health to support the operational application of the Clinical Supervision framework for Mental Health Nurses (DHHS, 2018). With intentional leadership, collaboration between the key stakeholders and the prioritisation of cultural change, the framework has been successfully implemented at Peninsula Health.

Five years on and clinical supervision for nurses continues to be a priority at Peninsula Health with most staff engaged in individual clinical supervision. The re-introduction of a Senior Nurse has taken stewardship of the program as it expands to meet the needs of a growing nursing work force with increasingly diverse clinical supervision requirements.

This presentation will evaluate the delineation of operational and educational roles in embedding the framework, the provision guidelines orientation and mentorship for clinical supervision navigators and the implementation and evaluation of in-house clinical supervisor training.

Reference

Australian College of Mental Health Nurses (ACMHN), Australian College of Nursing (ACN) and

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Australian College of Midwives (ACM) (2019) Joint Position Statement: Clinical supervision for Nurses & Midwives. Retrieved on 26/03/2022 from <https://acmhn.org/wp-content/uploads/2021/10/ACMHN-ACM-ACN-19.pdf>

Department of Health and Human Services. (2018). Clinical supervision for mental health nurses; A framework for Victoria. Airport West: Metro Printing

11:50am • BREAK OUT 1 – MOUNTING YARD FLORENCE MARWEI ★

Joining Barwon Health in 2023, Florence holds a Master's degree in Child and Family Studies and is currently pursuing a Master's in Mental Health Nursing. With 21 years of professional experience. Florence has had the privilege of working in diverse healthcare settings across Africa and England with an extensive background encompassing various facets of nursing. I joined Barwon Health in 2023.

Empowering MH Nurses and fostering community support: McKellar Centre

Empowering mental health nurses and fostering community support are crucial at the McKellar Mental and Well-Being Centre. This paper explores strategies and experiences at McKellar, highlighting how nurse empowerment and community engagement revolutionize mental health services.

McKellar emphasizes continuous professional development for mental health nurses through educational programs, workshops, specialty certifications and mentorship. Community engagement initiatives connect patients with local resources, enhancing their recovery and promoting mental health awareness.

A multidisciplinary, collaborative care model involving psychiatrists, social workers, occupational therapists, and other professionals ensures individualized care, fostering hope and

empowerment. The McKellar, a state-of-the-art 16-bed facility provides intensive support for individuals over 50. Despite broader challenges like stigma, high patient-to-nurse ratios, and inadequate resources, McKellar employs innovative approaches such as optimal nurse-patient ratios, risk identification, and extensive training programs.

Success stories include improved patient care, job satisfaction, and professional growth among nurses. Collaboration with various organizations enhances resource access and innovation. McKellar plans to continue empowering nurses through ongoing education and personalized support, ensuring they remain equipped with the latest skills and knowledge.

In conclusion, McKellar exemplifies the transformative potential of empowering mental health nurses and fostering community support, setting new standards in mental health care.

11:50am • BREAK OUT 2 – VALLEY VIEW VIVIENNE POWER, CHRIS SMITH ★

Vivienne Power is currently working at Eastern Health in Melbourne as the Mental Health Enrolled Nurse Transition to Mental Health Co-ordinator and the Clinical Nurse Educator at the Adolescent Inpatient Unit.

She has worked in both the community teams and in acute inpatient units as a registered mental health nurse, and currently works part time as a VET teacher at Swinburne University.

Vivienne has a passion for clinical excellence and social justice. She also spends a lot of her free time reviewing capability frameworks!



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Chris works as an Enrolled Nurse in the Box Hill Adolescent Inpatient Unit.

He started his career with Eastern Health as a grad in 2023 and spent time working in Adult Inpatient before finding a love for working in youth mental health.

Chris is passionate about empowering the people he works with, advocating for their best health outcomes and helping teach the next generation of students and grad nurses.

How Do We Teach Soft Skills? The Development and Implementation of a Targeted Training Workshop on Communication Techniques, Professional Boundaries and Self-care for Novice Mental Health Nurses.

Both the wards and the education team had become aware that in recent times graduates in particular have come to work in clinical settings with limited knowledge and skills in communication techniques, how to foster rapport, how to work therapeutically both individually and in a group, ability to set professional boundaries, recognising vicarious trauma and burnout and importantly self-care.

It was postulated that the noticeable gaps seen in communication skills may have been as a consequence of learning in COVID environments, with limited opportunities to interact with universities and TAFEs, and at times inappropriate placements. There are also generational effects, with communication often being done via text or messaging rather than in person. Further, with many graduates coming from overseas with a non-English speaking background and culturally diverse, communication with a distressed individual was perceived as an uncomfortable and unnatural interaction.

This presentation will showcase the development and implantation of a tailored training package

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developed in response to observed gaps in learner knowledge as they transition to working in the public mental health system.

The workshop was designed using learning objectives from the advanced diploma of mental health nursing, and contextualised for the mental health program at eastern health. Initial pre and post measures from the pilot training were very promising and the training continues to be developed collaboratively.

The day encompasses active listening techniques, effective communication styles, de-escalation and reassurance, appropriate use of self and boundary setting and stress and resilient building.



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Learning is via group discussion, videos, vignettes, and visual aids to foster an engaging and participatory learning environment. Numbers were deliberately kept small to ensure that thoughtful discussion could take place.

Evaluation of the training day showed that participants rated themselves significantly more confident to work therapeutically with someone experiencing mental ill health, feedback from the clinical environments reflect improvement in communication and rapport building skills.

Moving forward, ongoing development and refinement of this area holds the promise of fostering a more compassionate and resilient mental health nursing workforce which will ultimately enhance the care provided to people accessing our services.

11:50am • BREAK OUT 3 – JOCKEY ROOM
KATALIN PAL ★, IAN DAVEY,
CHRISTOPHER DIXON ★, SHANELLI MENDIS

Katalin is a mental health nurse with 20+ years' experience, who is a keen advocate of Safewards interventions, consumer and staff safety'.

Ian is a Senior Occupational Therapy Educator with 36 years international mental health experience. Working in a variety of clinical settings from prisons to community teams, Ian has been a Safewards champion for the last 7 years.

Chris Dixon is a keen Star Wars fan. He enjoys walks, swimming and watching films. He has a lived experience of mental health for over 26 years and applied his experience as peer support worker, CRM trainer and now Lived Experience Workforce Educator.

Interdisciplinary Education Approach in Delivering Safewards Training in Eastern Health ♥


"This presentation explores the Safewards model, the addition of co-production and interdisciplinary strengths that promote high quality of care and best practices within the mental health sector.

Mental health professionals work as a part of multidisciplinary teams as outlined in the National Practice Standards for the Mental Health Workforce (2013).

At Eastern health all new nursing and allied health graduates and staff employed in an acute mental health inpatient setting complete a full day, face to face Safewards training. This training is now provided by an interdisciplinary team of educators including nursing, the lived experience and allied

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health perspective.

There are benefits of Interdisciplinary Team Care, such as: offers multiple health care approaches, promotes learners' participation, fosters appreciation and understanding of other disciplines and challenges norms and values of each discipline.

Interdisciplinary Education combines profession specific examples from nursing, lived experience and allied health educators to enhance training to tailor the experience of learning."

11:50am • BREAK OUT 4 – COMMITTEE ROOM
SUDANA THAPA ★

Sudana Thapa is a Registered Nurse specialising in Mental Health Nursing. Sudana is an Early Career Professional who is passionate about continuous learning and professional development in Mental Health Nursing.

Empathy and Empowerment: Trauma-Informed Care in Clinical Practice.

Background: Trauma-informed Care (TIC) is not a new concept in healthcare settings. When it comes to mental health policy, trauma-informed care is at the forefront and is seen as a crucial component of therapeutic approaches for individuals with mental illness. Like recovery, trauma-informed care presents challenges for mental health nurses, when they attempt to integrate these principles into daily nursing practices, so many nurses are unsure of the specific actions they may implement to uphold these values. To be considered effective, trauma-informed services must do more than treat the symptoms of severe sexual, physical, or emotional abuse. In contrast, nurses must be informed of the need to avoid doing further harm to individuals.

AIM: This presentation outlines the essence of trauma-informed care (TIC) within mental health

settings, including its principles and barriers to implementation and integration. It also explores the Trauma-informed approaches used in mental health settings.

Method: Various databases were applied. Some of the articles were identified through databases like CINAHL Plus, PubMed and Google Scholar. Articles were screened based on predefined enclosure standards including relevance to trauma-informed care.

Result: This presentation highlights the ongoing trauma-informed care in day-to-day nursing practice, emphasising the key components such as trauma awareness, trustworthiness, collaboration, safety, and empowerment. This study contributed to the deeper understanding of TIC and promoted trauma-informed approaches in health care settings.

12:15pm • PLENARY SPACE – CELEBRITY ROOM
MICK KELLEY ★ **ANDREW JONG**

Mick Kelly is senior mental health nurse who has worked on a variety of mental health settings primary with young people and youth.

He has a passion for education, clinical supervision and developing early in career nurses. He is also a pro Irish Dancer and is happy to demonstrate his move after this presentation.

Debunking and Embedding Clinical Supervision Into Practice

Abstract: As per the Clinical Supervision for Mental Health Nurses- A framework for Victoria, 'Clinical supervision is considered by many to be part of the core business of contemporary professional nursing practice' and indeed, the public sector mental health nurses Enterprise Bargaining Agreement provides for two hours of clinical supervision to

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be offered per month for nurses working in public mental health. Yet the practical implementation, debunking nursing cultural attitudes towards clinical supervision and its promotion varies greatly, even within the same service.

Child and Youth Mental Health Services (CYMHS), have had a proud and well-established culture of clinical supervision that is protected and promoted, drawing heavily from their colleagues of other mental disciplines, mental health nursing within CAMHS services have been able to parallel the same structures and embed clinical supervision.

As senior nurses, Mick and Andrew, aim to share their experiences of maintaining and expanding the culture of clinical supervision not only within their service, but some of the challenges and barriers of expanding clinical supervision to broader parts of Alfred Mental and Addition Health, including adult inpatient units, emergency service group supervision spaces and in community consultation, externally supervising mental health nurses in secondary schools.

12:15pm • BREAK OUT 1 – MOUNTING YARD RACHEL TOLAN, ADAM BLAKE

Rachel Tolan currently works at RCH as the Senior Psychiatric Nurse. She has worked in Child and Adolescent Mental Health for over 25 years and continues to work clinically in a Mental Health Neurodevelopment team providing brief intervention and treatment to children, adolescents and families. Rachel has become increasingly committed to how we define ourselves as a profession and the positive impact mental health nurses can provide to our community. In addition, she has developed a passion for professional resiliency and how we as care providers can care for ourselves and in other while caring for others.

Adam Blake is the Unit Manager of the Banksia Ward at the Royal Children's Hospital, Adam provides operational leadership to the team and has previously held senior Nursing positions at Austin Health and an appointment to the Office of the Chief Mental Health Nurse. As Mental Health Nurse Advisor, Adam has co-written and contributed to the Mental Health Intensive Care Framework for Victoria and has previously held clinical and consultative positions related to mental health services in North Sulawesi, Indonesia. Adam has co-published in Asia Pacific Psychiatry, The Journal of Child and Adolescent Mental Health and the Australian Nursing and Midwifery Journal

Piecing the Jigsaw Together: Introducing a Comprehensive Trauma-Informed Therapeutic Model of Care on an Adolescent In-Patient Ward

This presentation outlines a comprehensive therapeutic multi-modal model for nurses working in an adolescent in-patient ward under the umbrella of Trauma-Informed Care, incorporating Therapeutic Milieu, Safewards, and Tracking Better, a self-regulation program for consumers. Adolescent in-patient wards present challenges unique to the adolescent development stage, with consumers often experiencing high levels of trauma, emotional dysregulation and complex behavioural issues. Our model integrates Trauma-Informed Care to ensure a safe and supportive environment that acknowledges the profound impact of trauma on mental health. The Therapeutic Milieu approach fosters a nurturing environment, promoting positive interactions and community support among patients and staff. The Safewards model is employed to reduce conflict and containment, enhancing safety and therapeutic outcomes through structured interventions and



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collaborative problem-solving. Additionally, Tracking Better equips patients with essential skills to understand the impact of stress from a polyvagal, neurobiological perspective so they can manage their emotions and behaviors effectively. This is the blueprint for our approach to enhancing safety, improving therapeutic relationships, and fostering emotional resilience among consumers and staff. This presentation will highlight key components of each framework and discuss the positive impacts on patient care and staff well-being. Attendees will gain valuable insights into creating a cohesive and supportive therapeutic environment in adolescent mental health settings.

12:15pm • BREAK OUT 2 – VALLEY VIEW

OLIVER MCDUGALL-FISHER, EMMA MURRELL

Oliver: Over my career I have been lucky to work over a variety of public mental health services in both regional and metropolitan areas. These experiences have given me insights into the disparities of people and services around Victoria. As an Enrolled Nurse this has strengthened my passion for education and training to support on a state wide level, which CMHL has allowed me to do.

My areas of interest include dual disability, forensic mental health, trauma-informed care, solution focused therapy, and clinical supervision.

I am a strong advocate for Enrolled Nurses in the Mental Health sector and the role they provide. I believe they are a valuable recourse that can be overlooked and together we can continue to improve the experiences and possibilities they can achieve.

Emma is an Enrolled Nurse who has been working clinically in private, public and forensic mental health, before transitioning to clinical education in 2022.

Oliver is also an enrolled nurse who has been lucky

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to work in a variety of public mental health services in both regional and metropolitan areas. He has been working in clinical education since 2021.

Showcasing the Diversity of Mental Health Enrolled Nurses: A Day in the Life Video Series

The 'Day in the Life' project is a video series that covers the diversity of the enrolled nurse role through the mental health sector and highlights the unique experiences that each role, environment, and Area Mental Health Service can offer.

The videos are recordings of face-to-face interviews with ENs. The interviewees were sent a list of questions in preparation for the recording.

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The questions explored what an EN does in their day-to-day role. The questions also provided an opportunity for the ENs to talk about their professional journey.

18 ENs were interviewed across 6 different services. The videos have been divided up according to the EN levels (2, 3, and 4 (educator)). They highlight the many different areas and roles where ENs in mental health work including, inpatient, community, older adult, mental health rehabilitation, forensic mental health, crisis assessment and treatment team (CATT), and educator roles.

These videos are intended to be used as a resource to guide enrolled nurses to highlight and understand the many different pathways available to MHENs. They can be utilised in many different settings for EN professional development. This project was created to inspire the workforce and show that enrolled nursing is a rewarding career.

12:15pm • BREAK OUT 3 – JOCKEY ROOM
VINCENT BOYLE ★, TANYA KOOLMATRIE ★,
NAT GUILLIAMSE ★

My name is Vincent Boyle. I have been a nurse for 35 years. My first 17 years I worked as an Enrolled Nurse in Aged Care. Since retraining as a registered nurse I have worked in Mental Health for 17 years. I have been a Clinical Nurse Educator in Mental Health for the last 4 years. I have a portfolio in Aged Care.

My name is Tanya Koolmatrjie. I am a proud Ngarrindjeri woman from Southeast South Australia. I live with multiple mental health diagnoses and a long history of addiction to illicit substances. I have worked as a senior consumer peer worker at McKellar Mental Health & Wellbeing Unit for since its opening almost 2 years ago and I love my job.

My name is Nat Guilliamse. I live with multiple mental health diagnosis, and I have a long past

history of substance dependence. I have been a Lived Experience worker in different settings for over 5 years. I have been with Barwon Health for almost 2 years as a Senior Consumer Peer Worker at McKellar MHWC.

We're Taking it up a Level". Incorporating LEW as Co-facilitators in Safewards Training and Implementation. ♥

This presentation will outline the progress between Clinical Nurse Educators (CNE) and Lived Experience Workers (LEW) participation in the facilitation of SAFEWARDS learning and implementation in a new Older Adult Mental Health and Wellbeing Centre (MH and WB Centre) operated



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by Barwon Health.

Traditionally Safewards training was delivered multiple times throughout the year by MH CNE, with LEW team members being participants, who were 'informed' of the model and interventions

In 2023, three LEW were invited to share their insights into their approach of facilitating four of the Safewards interventions at the MH and WB Centre which is an acute mental health ward for 50 year old's and over. They contributed "special comments", as an add on to the training, but have now progressed to 'partnership participation', presenting three and at times four interventions.

The four Safewards interventions are:

- Mutual Help Meetings
- Know Each Other
- Discharge Messages
- Positive Words

This presentation will share some insights into the journey of the LEW towards co-trainers, and their approach at implementing SAFEWARD interventions at the MH and WB Centre.

12:15pm • BREAK OUT 4 – COMMITTEE ROOM
CHRISTOPHER NIELSEN ★

My name is Chris, and I am the Nurse Unit Manager of the Prevention and Recovery Care unit at Grampians Health. I am a Registered Psychiatric Nurse and have worked in mental health care for 12 years, predominately in bed-based areas including adult acute, along with community mental health.

Pet Therapy: More Than a Treatment

This project delves into Pet therapy as a valuable intervention within mental health settings, shedding light on its benefits for both patients and staff

members. Acting upon consumer requests for the service, the project's aim is to contribute to the emotional well-being and therapeutic progress of individuals receiving mental health treatment.

From reducing feelings of anxiety and loneliness to providing comfort and companionship,

Pet therapy offers a unique form of support that complements traditional therapeutic approaches.

The project highlights the positive impact of pet therapy on the work environment and morale of mental health professionals, fostering a sense of connection and empathy among staff members.

By showcasing the tangible benefits of incorporating therapy dogs into mental health care settings, this project underscores the importance of embracing innovative and holistic approaches to healing in contemporary psychiatric practice.

2:15pm • PLenary SPACE – CELEBRITY ROOM
JESSICA GARWOOD ★, **HELEN TRAN**,
DAVID SANTOS

Jess Garwood - Postgraduate Community Mental Health Nurse

Helen Tran - Mental Health Clinician

David Santos - Mental Health Clinician

Nurturing Transitions: Supporting Mental Health Nurses in the Transition to Community Mental Health

The shift from an inpatient setting to a community based mental health setting can present as a significant adjustment and steep learning curve for mental health nurses. This presentation explores the challenges faced by mental health nurses as they navigate this shift, highlighting the benefits of implementing a postgraduate community mental health position to support

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the professional development and well-being of mental health nurses. We delve into the unique demands of child and adolescent community mental health settings and the professional skill development required. Additionally, we highlight the significance of organisational support, including clinical supervision, professional development opportunities, and the self-care resources that have aided our transition. By fostering a supportive and empowering environment, we can ensure that mental health nurses feel equipped and empowered to deliver high-quality mental health care in community settings, ultimately increasing our presence in these roles and enhancing outcomes for individuals living with mental illness.

2:15pm – 2:35pm • BREAK OUT 1 – MOUNTING YARD

HALEY PECKHAM

Dr Haley Peckham's background includes philosophy, mental health nursing, psychotherapy and neuroscience and her perspective is grounded in a colourful lived experience of recovering from complex trauma. While studying Philosophy Haley worked with children and adolescents in 'care' and, realising that as adults they were over-represented in the criminal justice system and mental health services set out to understand the relationship between early experiences and brains, minds and behaviours. Whilst working as a Mental Health Nurse Haley studied Molecular Neuroscience at Bristol and gained her PhD from The University of Melbourne where she learned the neuroscience of how experiences shape brains and the evolutionary biology that illuminates why experiences may shape us the way they do. These insights are critically important for clinical practice especially for the delivery of coherent ACE aware and Trauma-Informed approaches and Haley seeks to share

them with interested professionals in Australia and the UK.

Neuro-ecological Diversity: An Alternative to Shaming

This paper contends that the dominant frameworks of the mental health and criminal justice systems are implicitly founded on the shaming premise that having less equates with being less and thus conceptualise the outcomes of inequities in ways that perpetuate and maintain them.

The distress and behaviours associated with intergenerational inequities are recognised by the mental health system as mental illness – being less than healthy, and by the criminal justice system as being a criminal, less than our law-abiding counterparts. Both systems assume and apply normative standards. Falling short, carries shame and stigmatises. In turn, shame drives distress and behaviours that, of themselves, perpetuate inequities.

Attempts to formulate without shame have generated Trauma-informed approaches which ask: "What happened to you?" However, the assumption that trauma and adversity are harmful and lead to impairment, pathology and criminality persists, along with shame. Drawing on the Neuroplastic Narrative (Peckham 2023) which shows that our capacity to adapt to diverse environments during development is strategic and neither pathological or criminal; I put forward an alternative adaptationist perspective reframing shame-ridden assumptions of pathology and criminality, defining Neuro-Ecological Diversity and resourcing nurses with a non-shaming, appreciative stance, a dignifying alternative to inherently shaming framework



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2:15pm BREAK OUT 2 – VALLEY VIEW

SAMANTHA CULLINAN, COURTNEY DUNN ★, MADELEINE COOK, MARGARET COWGILL, STUART WALL

Samantha is an Early in Career educator for Mental health within Peninsula Health's Mental Health Service. Samantha has worked in mental health for over a decade and has worked at multiple organisations across youth and adult services. Samantha currently works alongside the graduate nurses providing guidance and education in their graduate year.

Courtney is the Senior Nurse with Peninsula Health's Mental Health and Wellbeing Service. Working previously as a Nurse Practitioner, Courtney has specialised in mental health and addiction in community and correctional settings. Passionate about ensuring timely and equitable access to mental health care for all consumers, Courtney is committed to building capacity within the mental health nursing workforce through education, research, supervision and leadership.

Margi is an early in career Mental Health allied health educator within Peninsula Health's Mental Health Service. Margi has worked as a Social Worker and mental health clinician for approximately 20 years in both general and mental health in the United Kingdom, Tasmania and various health networks in Victoria. Margi currently supports the Mental Health graduate and transition to specialty practice social workers, as well as the broader multi-disciplinary early in career clinicians.

Stuart is the Education Steam Lead for Mental Health and AOD within Peninsula Health's Mental Health Service, and an Adjunct Senior Lecturer at Monash University. Stuart works alongside his team of educators to support clinician and lived experience workforces to learn and develop their

practice. Stuart is passionate about providing learning opportunities which are work integrated and easily transferable into practice. Stuart's team prides themselves on supporting safe and effective care through the development of high-quality learning programs, which have been developed in line with clinical needs and evidence-based practice.

Developing an Early in Career (EiC) multidisciplinary orientation program

The Royal Commission into Victoria's Mental Health System (State of Victoria, 2018) identified the need for improved integration of mental health care, including the provision of multidisciplinary education (State of Victoria, 2018). In response to

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this one metropolitan hospital has taking innovative steps to increase collaboration between disciplines by introducing a multidisciplinary Early in Career (EiC) orientation program.

Through the collaboration between educators and discipline leads a pilot multidisciplinary orientation was conducted in 2023. The pilot's success was built on to provide for a new model of multidisciplinary orientation in 2024.

This presentation will outline the processes utilised to understand the orientation needs and priorities of each discipline and how these needs can be met through a multidisciplinary orientation program. Utilising the data derived from the program evaluation an understanding of the challenges and benefits of integrating an orientation for Nursing and Allied Health will be provided

References

State of Victoria. (2018). *Royal Commission into Victoria's Mental Health System, Final Report, Summary and recommendations, Parl Paper No. 202, Session 2018–21 (document 1 of 6)*.

2:15pm BREAK OUT 3 – JOCKEY ROOM LAURA HAINSWORTH

Laura Hainsworth has been a qualified mental health nurse for 15 years. She trained in the UK where she worked for a number of years across a range of areas, including inpatient mental health, and police custody and forensics. Laura went on to re-train as a Specialist Community Public Health Nurse, working in primary and secondary education, before relocating to Australia in 2018 to work at Forensicare, where she found her passion for education. She has been working at the RCH for three years as the organisation's Psychiatric Nurse Consultant.

Improving Mental Health Literacy in a Children's Hospital

Abstract: As part of a service-wide mental health strategy, it was identified that mental health literacy across the organisation was limited, and that work needed to be done to empower staff of all disciplines to identify mental health concerns, initiate conversations, and provide basic mental health first aid. In 2021, 2 staff were trained in Mental Health First Aid, and set about delivering training courses to staff across the organisation. To date, over 400 staff have been trained, with 100% of survey respondees agreeing that their mental health literacy has improved as a result of attending



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this course. Roll-out of this course has enabled staff to not only have conversations with patients and their carers, but with their colleagues and student nurses. Staff report improved knowledge and awareness of mental health conditions such as depression, anxiety, and psychosis, and improved willingness to speak up and support others, with staff of 50+ disciplines trained as first aiders. Following the success of Mental Health First Aid training so far, we have recruited further instructors with a goal of getting as many hospital staff through the training as possible. We recognise that mental health is everyone's business, and want to continue to reduce the stigma.

2:15pm • BREAK OUT 4 – COMMITTEE ROOM
SEEMA DUA ★ **GAMZE SONMEZ** ★

Seema Dua is a Service Improvement Coordinator at Alfred Mental and Addiction Health and a Lecturer for the Masters of Mental Health Science at Monash University. With a Master's in Mental Health Nursing and over 15 years of experience, she excels in mental health nursing, education development, educational technology research, and process improvement. Seema currently leads key projects within the Quality & Improvement team at AMAH and is known for her innovative problem-solving skills.

Outside of professional life, Seema enjoys a busy life with her husband and kids, is a keen road cyclist, recreational runner, and looks forward to her morning coffee a bit too much.

Gamze Sonmez is the Deputy Director of Nursing at Alfred Mental & Addiction Health, where she has dedicated her career to advancing mental health care through both clinical and managerial excellence. With over 15 years of experience in in-patient adult psychiatry, Gamze brings a wealth of

knowledge and a deep passion for staff and patient safety and leadership to her role.

Gamze holds a Master's degree in Mental Health Nursing in addition, her published work focuses on reducing restrictive interventions, particularly through the innovative PSY-BOC model, which underscores her commitment to enhancing patient care and safety.

Beyond her professional achievements, Gamze is an avid traveller and enjoys learning new languages, reflecting her enthusiasm for cultural exchange and continuous personal growth.

Safe Spaces, Sound Minds: A Trauma-Informed Approach to Enhancing Sexual Safety in Mental Health Bed-Based Spaces

Embark on a journey to explore trauma-informed paradigm aimed at enhancing sexual safety within mental health In-patient units. Exploring the prevalence of incidents, alongside legal and ethical considerations, this presentation delves into the educational aspects and highlights the need for comprehensive strategies. From clear policies to robust training, we advocate for collaboration, community engagement, and continuous improvement. Join the dialogue to empower mental health professionals, support staff, and communities in fostering environments where consent, communication, and empowerment thrive. Together, we work towards creating safe spaces that prioritising every individual's right to sexual safety with sensitivity, respect, and care.

2:40pm • PLENARY SPACE – CELEBRITY ROOM
SYLVIA RYAN, DON BULATHSINHALA ★

Sylvia Ryan is a Graduate Nurse Educator and Physical Health and Metabolic Monitoring Nurse at Alfred Mental and Addiction Health.

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She has over 10 years experience in adult, child and youth mental health. She works across the Infant, Child and Youth Mental Health and Wellbeing Service, and headspace

"Hi, my name is Don. I am the new Community Trainee Transition Nurse at Alfred Mental and Addiction Health, based at Headspace Bentleigh. I have 3.5 years of work experience, including 2 years in general medicine and renal wards before transitioning to mental health. I have also worked in the inpatient unit at the Alfred Mental and Addiction Health Department."

Creating Pathways: A Community Trainee Nurse Role in Youth Early Psychosis

The Mobile Assessment and Treatment Team (MATT) is an outreach team within the headspace Early Psychosis service at Alfred Addiction and Mental Health (AMAH). MATT provides short term intensive case management and assessment for youth across the south eastern suburbs of Melbourne.

Since 2021 MATT has provided rotations to graduate and switch (transitioning from general to mental health specialty) nurses, fostering development of skills and experience in this speciality area. In line with EBA requirements, nurses interested in this clinical area are required to pursue postgraduate qualification and further experience elsewhere before being eligible for employment within MATT.

An RPN2 Community Trainee Nurse position was developed to bridge this gap. This 12 month specialised training and development opportunity includes study leave to pursue postgraduate qualifications. At the end of the program the Community Trainee can apply to available RPN3 roles within the service.

This initiative aligns with the Victorian Public Mental Health Services EBA 2020-2024 which outlines a Community Training Position for RPN2 in community

mental health, in line with an increase of up to 15% of community mental health staff to be RPN2, PEN or MHO.

By providing structured training and development early in career, AMAH aims to enhance the nursing workforce's capacity and improve pathways into community and specialty areas

2:40pm • BREAK OUT 1 – MOUNTING YARD KIM FOSTER ★

What Are Mental Health Nurses' Experiences of Personal and Professional Trauma?

Mental health nurses (MHN) can experience psychological trauma in their professional and personal lives. However, there are few qualitative reports of their trauma experiences. Understanding the trauma that MHN experience is central to supporting their wellbeing as well as their practice and has implications for workforce retention. The aim of this presentation is to describe the experiences of professional and personal trauma reported by 82 Victorian mental health nurses.

Nurses described multiple events. These included Personal events involving the nurse and/or close family and friends, and Professional events which were nurse-specific or nurse-patient specific. Most (65%) were personal traumas including adverse childhood events, and adult traumas such as suicides of family members, personal illness, accidents, domestic and family violence. Professional trauma involved workplace physical and verbal violence, vicarious trauma, trauma induced by administering treatment or managing restraint, and insufficient resources to enable nurses to do their work properly. These led to mental



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health and practice-related impacts including depression, feelings of not belonging and not feeling capable of performing their work. In order to support their wellbeing, nurses' experience of trauma needs to be recognized, and direct trauma support provided. Wherever possible, the causes of workplace trauma need to be reduced.

2:40pm • BREAK OUT 2 – VALLEY VIEW
KYLIE RICHTER ★

Kylie Richter, BN (La Trobe) has a strong interest in early childhood development and well-being. She has worked with infants, young children and adolescents for over 25 years. From 2010 she has specialised in paediatric nursing and has worked across a number of specialised wards and areas including medical imaging, Theatre and Recovery, Surveillance of Adverse Events Following Vaccination (SAEFVIC), specialist clinics and day medical. In 2023 she completed the Transition to Mental Health Nursing (adolescent acute inpatient Unit) Program. Kylie is currently completing her Post Graduate Diploma in Mental Health Nursing at Melbourne University and has a strong interest in attachment theory. This is her first time presenting at the Collab Conference and she feels privileged to be given such an opportunity.

Demystifying the Adolescent In-patient Mental Health Ward - Helping our Colleagues Feel Comfortable to Walk Through the Door.

This abstract presents an approach to demystifying fears from general paediatric nurses around adolescent mental health wards within the hospital settings. With a focus on creating a welcoming and comfortable environment for individuals seeking mental health care. The aim is to break down barriers.

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The adolescent inpatient MH ward can be an intimidating and unfamiliar space for many individuals. This conference aims to discuss strategies and interventions that can help our colleagues feel more comfortable walking through the doors of an adolescent mental health ward. By addressing the stigma and misconceptions surrounding mental health care, we aim to create a more open and accepting environment.

Through this conference, we aim to promote a shift in the perception of the adolescent inpatient MH ward, from a place of fear and uncertainty to a space of support and healing. Recognising and addressing stigma. Openly discuss and address any



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potential stigma surrounding mental health within the hospital setting. Promote a culture of empathy and understanding to ensure that both patients and staff feel supported and valued.

By implementing these strategies, hospitals can work towards demystifying fears around adolescent mental health wards and facilitate a more integrated and supportive approach to patient care.

2:40pm • BREAK OUT 3 – JOCKEY ROOM
U GAMLATH ★ SALLY BUCANNON-HAGAN

Is There a Place for Mental Health Nursing in Caring for Young People with Medically Compromised Eating Disorders in a General Medical Ward. The Potential for Alternative Models of Care.

Problem: There is an increasing demand for medical care for acutely unwell adolescents with medically compromised eating disorders (EDs). Given the psychological and physical complexities of EDs, general paediatric nurses face many barriers when providing nursing care in the general medical setting.

Objective: To describe the experiences of nurses caring for young people with medically compromised eating disorders in a general paediatric medical ward.

Design: A qualitative descriptive methodology will be employed using semi-structured interviews. Fourteen interviews will be conducted with nurses from a tertiary paediatric public hospital in Victoria recruited using purposive sampling to ensure a wide range of perspectives, from RNs and ENs ANUMs and NUMs, with varying years of experience and levels of education in ED care.

Expected outcomes: Braun and Clarke's (2006) method of thematic analysis will be used to identify themes arising from the qualitative data. These

themes are expected to encompass the experiences of Nurses caring for Adolescent in-patients with medically compromised EDs. Which will then be analysed using the Behaviour Change Wheel (BCW), to develop actionable recommendations aimed at improving care provision.

2:40pm • BREAK OUT 4 – COMMITTEE ROOM
SAMANTHA GILES ★

Sam Giles is the Nurse Unit Manager of the Secure Extended Care Unit in Grampians Health. She has been a Mental Health Nurse for 13 years. She's worked in many different areas of Mental Health.

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However, her current leadership role has been the highlight of her career so far.

The Beginning of a Culture Change in a Secure Extended Care Unit

This presentation examines the culture change in a Secure Extended Care Unit (SECU). The creation of a "chill out space" or sensory area out of an old bathroom, was the initial catalyst to an evidenced culture change within this previously highly restrictive clinical area.

Mental health inpatient areas can be challenging working environments. Ensuring these areas are therapeutic is crucial to positivity being experienced by both the consumers and staff.

The flow-on effect of many beneficial changes, since the creation of the Chill Out Space has been remarkable and noticed by many. The MH nursing staff have experienced a reignited passion and motivation for their profession.

There is evidence of significantly improved outcomes for the consumers in SECU, which is highlighted in the reduction of the use of restrictive interventions.

The creation of the Chill Out Space was cost effective and did not involve changing the infrastructure, which provides the possibility of change for other under resourced mental health services. The Chill Out Space has also proven that one small change can lead to exceptional results.

3:05pm • PLENARY SPACE – CELEBRITY ROOM KAREN COLLIDGE

Karen is an endorsed mental health nurse practitioner and family therapist who works in both private practice and public health at the Royal Children's Hospital. She works primarily in

the child, youth and family mental health space with a special interest in working with individuals and/or families who have experienced trauma. As part of Karen's private work she provides therapy, clinical supervision, secondary consultation and professional development.

Mental Health Nursing - Endless possibilities!

The aim of this presentation is to inspire new mental health nurses to explore the many opportunities available to them in this field.

I have heard many nurses say "oh I couldn't work privately", "I couldn't be an endorsed nurse practitioner" or "I can't work privately until I have worked in a community team" and many other variations on these. All of these are achievable for mental health nurses if this is the path they are aspiring to.

Karen is a Nurse Practitioner specialising in child and adolescent mental health and families working in both public health and private practice running her own business. She will share her journey to where she is now and what opportunities are yet to be explored with the hope of giving colleagues who are thinking about these paths confidence to take on the challenge

3:05pm • BREAK OUT 1 – MOUNTING YARD SABINA NGWENYA ★, JODIE TEN-HEOVE

Sabina Ngwenya is a Nurse Unit Manager for Older Adult Acute Unit at Eastern Health. Sabina previously worked as an electrician until she developed a passion in healthcare. Her commitment to care for older people and make a difference in the community has been one of the drives for Sabina to join Healthcare. She has held roles including Associate Nurse Unit Manager, Clinical nurse consultant, Bed Manager and Nurse Manager.

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Sabina's passion is to develop and maintain an effective workforce that is motivated, creative, and accountable to meet the diverse needs of our patients and families.

Jodie Ten-Hoeve is the Director of Nursing for the Mental Health and Wellbeing Program and Associate Program Director for the Older Adult Mental Health Program at Eastern Health. Jodie is the State Wide Clinical Lead for the Safer Care Victoria Program - Working towards the Elimination of Restrictive Interventions in Victoria. She has held a number of Senior Clinical Nursing Positions including Mental Health Nurse Advisor to the Chief Mental Health Nurse. With over 40 years experience in Mental Health Nursing Jodie has a passion for ensuring the upholding of human rights and Safety for All within the health system.

Jodie has worked collaboratively with the Lived Experience and Multi disciplinary teams towards this goal and is presenting today as the Chair of Elimination of Restrictive Interventions Mental Health and Non Mental Health Committees at Eastern Health.

Future Care Models - Mental Health Support Workers (MHSW) in Acute Mental Health

With expanding opportunities in mental health training, the opportunity to utilise a new workforce within our inpatient units became available providing opportunity for the integrating of Mental Health Support Workers (MHSW) into the Older Adult Acute Unit at Peter James Centre, Eastern Health. The Workforce Development Team working with the Mental Health Leadership Team reviewed opportunities within care provision to develop a position description for the new role. Specific key performance indicators linked to the integration of the role were identified to ensure best patient outcomes. The funding for a six-month trial of the positions has so far proven to be a value add

to the unit in provision of care. MHSW positions have commenced on the afternoon shift to assist in orientation of patients, falls prevention strategies, communicating for safety, provision of activities, environmental checks and welcoming to the ward. This presentation will provide an overview of the process for developing and integration of new roles in a mental health service and identifying opportunities for improved care with an emerging workforce.

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- Community Care Unit
- Mother Baby Unit
- Community Mental Health (Adult and Aged Persons)

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3:05pm – BREAK OUT 2 – VALLEY VIEW OWEN EBANKS ★, STUART WALL

Stuart is the Education Steam Lead for Mental Health and AOD within Peninsula Health's Mental Health Service, and an Adjunct Senior Lecturer at Monash University. Stuart works alongside his team of educators to support clinician and lived experience workforces to learn and develop their practice. Stuart is passionate about providing learning opportunities which are work integrated and easily transferable into practice. Stuart's team prides themselves on supporting safe and effective care through the development of high-quality learning programs, which have been developed in line with clinical needs and evidence-based practice.

Nurturing Future Mental Health Professionals: Insights from the Mental Health Prequalified Employment Program - Early Workforce

The Prequalified Employment Program, launched by the Department of Health in 2021 as part of Victoria's mental health and wellbeing workforce strategy, aims to bolster the mental health sector by providing hands-on experience to students of nursing (registered and enrolled), allied health (social work and occupational therapy), and medicine. The program offers students valuable exposure to working with consumers, families, and carers, increasing their likelihood of pursuing careers in mental health.

Peninsula Health Mental Health and Wellbeing Service commenced this program in January 2024, recruiting 23 prequalified staff from nursing, allied health and medicine who were employed across inpatient and residential teams. The program was structured into three stages, designed to scaffold learning and facilitate integration into the multidisciplinary team environment. Participants

engaged in multidisciplinary teamwork and worked directly with consumers under experienced supervision.

In this presentation, we explore the experiences of those involved in the program, from both the clinical and undergraduate participant perspectives. We discuss key findings, including improved confidence in engaging with consumers and collaborating with multidisciplinary teams. The challenges experienced will also be identified, along with recommendations for future program implementations to enhance the support and development of the mental health workforce.

3:05pm • BREAK OUT 3 – JOCKEY ROOM SHIN LIM ★

Hi my name is Shin and I'm a Graduate Nurse. I have just finished up my first 6 month rotation in an acute inpatient unit at Northern Hospital. I was born in Kuala Lumpur, Malaysia, when my parents decided to migrate to Melbourne for better education for my younger brother and I. After high school, I completed a Bachelors in Biomedicine then went straight into a Masters of Nursing Science (Entry to Practice). My passion for pursuing mental health nursing came after experiencing my mental health nursing subject and placement with a community mental health team where I was able to shadow case managers and observe their scope of practice. My desire to educate myself and my parents about the importance of caring for our mental health in conjunction with physical health became another driver for my passion. My first 6 months has taught me so much and shed light on the endless growth in mental health, and it has proven me that this is where I want to be.

Beyond Bias: Manoeuvring Through Stigma of MH nurses' Roles in Physical Deterioration

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Abstract: Mental health nurses find themselves marginalized within the nursing profession, navigating through the complexities of the medical field whilst upholding their crucial role in promoting psychological well-being. This discrimination leads to delayed interventions and care delivery due to biases about mental health crises. We will explore what contributes to stigma towards mental health nurses during cases of consumer physical deterioration by critically appraising peer reviewed articles published within the last five years. This stigma includes both associative and self-imposed aspects, particularly regarding perceptions of medical competency, professional identity, educational background, exposure to acute physical deterioration events, and expertise in mental health versus physical health. The review will involve investigating the discourse of blame between medical and mental health clinicians and nurses, the inadvertent reinforcement of discrimination through consumer advocacy, the professional hierarchy, and the limited interdisciplinary communication during episodes of physical deterioration. The review suggests enhancing mental health nurses' professional identity through assertive interprofessional communication and improving nursing education and hospital administration practices. This literature review underscores the need to reassess existing models to support mental health nurses in facilitating patient access to physical health care, thereby enhancing their professional identity and overall experience in mental health nursing.

3:05pm • BREAK OUT 4 – COMMITTEE ROOM
DONNA HRISTODOULIDIS

Donna is a mental health nurse with nine years of experience. Holding a Master's degree in Mental Health Nursing, Donna has worked in both public

and private mental health sectors. Her expertise spans acute adult and acute older adult mental health, as well as adult community and education roles, demonstrating commitment to advancing mental health care. Currently serving as a Clinical Nurse Consultant on an older adult unit.

Utilising the Safewards Simple Model to Enhance Care Plans in Acute Older Adult Mental Health Units

The Safewards model, originally designed for acute mental health inpatient settings, offers a structured approach to managing conflict and containment by fostering a therapeutic environment and enhancing staff-consumer interactions. This project investigates the application of the Safewards Simple model as a framework for reflecting on practice and developing care plans for acute older adult mental health consumers exhibiting behaviours that nurses find difficult to manage. In these units, such behaviours can disrupt care and pose safety risks, and traditional containment methods often exacerbate the situation.

The Safewards Simple model encourages discussion, reflective practice, and the development of care plans that promote positive therapeutic relationships and a safe, supportive environment. Preliminary findings indicate that the that nurses find the opportunity to reflect on practice in utilising a structured model is beneficial to create an individualised approach to care, enhancing trust and rapport between staff and consumers.

Implementing the Safewards Simple model in older adult acute settings appears to be a promising strategy for nurses to reflect on their care practices, especially having difficult care for some behaviours. It empowers nurses in care planning and fosters a culture of safety and mutual respect.



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3:50pm • PLENARY SPACE – CELEBRITY ROOM GRACE OAKLEY ★

Grace Oakley (they/them) completed their bachelor of nursing at ACU in 2022, and post graduate diploma of mental health nursing at University of Melbourne in 2024. Across their graduate and CAP years at Austin health they have had the opportunity to work in adult, adolescent and child inpatient units. Whilst still early in their career they are passionate about mental health nursing and contributing to positive change.

Countertransference and Early Career Mental Health Nurses

Abstract: It has been established that early career mental health nurse [ECMHN] outcomes are intricately linked to personal factors such as self-awareness and wellbeing. Ineffective management of countertransference contributes to poor ECMHN outcomes due to the challenging effects on mental health, wellbeing, and resilience. Countertransference has the potential to affect wellbeing outcomes and retention of specialised mental health nurses and is thus critical to consider in relation to promoting professional development for ECMHNs.

One potential approach to countertransference self-management, proposes the promotion of education and skill development on self-guided imagery meditation [SIM], which involves setting goals, acquiring new skills, and addressing problems, ultimately promoting self-awareness. SIM and alternative mindfulness meditations have been demonstrated as an effective tool in countertransference management for mental health nurses. This presentation will review supporting literature and discuss the development of countertransference management education for ECMHN.

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3:50pm • BREAK OUT 1 – MOUNTING YARD MIA TSATRAFILIS ★

Mia is a registered mental health nurse working at Austin Health on the crisis assessment and treatment team, as well as emergency mental health and triage. She has worked across various inpatient settings including adult, child and adolescent and eating disorder program.

The Trends of Suicide Methods Chosen Over Time

The assessment of suicide risk is a complex and multilayered component of mental health nursing, which weighs heavily on the mental health nurse in acute assessment. In 2022, there were 3,249 deaths by suicide Australia wide – an average of 9 deaths per day (AIHW, 2022).

Today, mental health nurses and clinicians are reflecting on the presenting trends in suicide and methods used, which have seen a change over time, reflecting on social and environmental changes.

With a deeper understanding into the factors that influence suicide methods, it is hoped that mental health nurses can reflect on what potential factors may influence a person's method of choice and greater understand risk assessment.

This presentation will discuss the change in suicide methods in Australia over time, the potential factors that have contributed to this, and how the mental health nurse can be more aware of this evidence within their practice.

3:50pm • BREAK OUT 2 – VALLEY VIEW MARCELLA REGISTER, THOMAS WILSON

Marcie has been working at St Vincent's as a mental health nurse since 2015 in various roles across both community and inpatient services, and is currently leading the Education Team. Marcie completed her

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second Master's degree with Monash University in 2022, and has a strong interest in building the confidence and capability of staff to work with consumers who use substances in a holistic and recovery-oriented way.

Tom Wilson is the Senior Psychiatric Nurse at St. Vincent's Hospital Melbourne. He studied field specific Mental Health Nursing in the UK before moving to Australia in 2016. Tom has experience in inpatient mental health, emergency and alcohol and other drug settings. Beth Dunlop is the Leadership Development Coordinator at CMHL. She is a social worker with diverse experience across a range of sectors. In her role with CMHL she promotes and develops leadership capability across all disciplines. Elly Piper has been a Mental Health nurse for 10+ years working in both Private and Public mental health across Victoria and Queensland.

To Be, Or Not To Be (a Mental Health Nurse), That is the Question

The St Vincent's Mental Health Education Team have a strong focus on the recruitment and retention into Early Career Programs. We have been innovative in expanding Early Career Programs and building scaffolding to support the existing staff in preparation for the influx of new clinicians. This presentation will explore the complexities of introducing and recruiting to new programs, re-designing processes and pathways, and highlight ways in which the service has worked to retain staff once recruited to bolster the Mental Health Workforce. We will explore some of the challenges and successes faced through our programs such as: the Mental Health Cadetship, expansion of the Graduate RN and EN Programs with rotations to the community clinics and Eating Disorder services, and development and facilitation of Preceptorship Training to establish a Community of Practice.

3:50pm • BREAK OUT 3 – JOCKEY ROOM DANIEL DARMANIN

Daniel Darmanin is working as the new Program Manager at the Sunshine Mental Health and Wellbeing Centre. He has worked in many different settings, including adolescent, youth and adult services. He has previously worked as the Clinical Nurse Consultant and Code Grey Coordinator at the Royal Children's Hospital and as the Area Senior Nurse at Orygen Specialist Program. Daniel is a member of the Centre for Mental Health Nursing Expert Reference Group and the Victorian Collaborative Mental Health Nursing Conference Committee. Daniel works concurrently as a Sessional Trainer for Genu, teaching students the Certificate IV in Mental Health. His special interest areas include trauma informed care, occupational violence and aggression and supporting the physical health of consumers.

Navigating AI in Mental Health Nursing: Opportunities and Risks

The integration of artificial intelligence (AI) in mental health nursing presents both promising advancements and significant challenges. AI technologies offer potential benefits in early detection, personalised treatment, remote support, pharmaceutical developments, and therapeutic interventions. Mental health nurses can leverage AI algorithms to detect patterns indicative of mental health issues early, facilitating timely interventions tailored to individual needs. AI-driven tools can facilitate remote monitoring and support, extending nurses' reach and providing continuous assistance beyond traditional clinic hours.

However, the widespread adoption of AI raises



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ethical concerns regarding privacy, algorithm bias and the potential for over-reliance on automated surveillance systems (a potential novel restrictive practice), necessitating careful consideration and safeguards. Whilst AI holds promise in drug discovery and personalised medicine, there are risks associated with data security, patient autonomy, and the quality-of-care delivery.

Mental health nurses play a crucial role in navigating these complexities, ensuring that AI technologies are deployed responsibly and ethically, with a focus on patient-centered care, in lieu of defaulting to AI driven surveillance of consumers. By implementing AI with a considered approach, mental health nurses can harness the potential of AI to enhance care delivery whilst safeguarding consumer well-being in the evolving landscape of mental health interventions.

3:50pm • BREAK OUT 4 – COMMITTEE ROOM CHRISTOPHER DIXON ★

Chris Dixon is a keen Star Wars fan. He enjoys walks, swimming and watching films. He has a lived experience of mental health for over 26 years and applied his experience as peer support worker, CRM trainer and now Lived Experience Workforce Educator.

Lived Experience Led Practice Models – IPS and CRM

Lived and Living Experience staff work alongside nursing staff to support people in the journey of mental health care. Lived Experience Workforces are holders of key knowledge and experience critical to mental health practice. This presentation explores the alignment between the models of Intentional Peer Support (IPS) and the Collaborative Recovery Model (CRM). They are important pillars that reinforce nursing approaches within the Safewards

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Model and the Victorian Capability Framework in mental health services.

4:15pm • PLENARY SPACE – CELEBRITY ROOM MORGAN BRAND ★

She/her pronouns.

Registered Mental Health Nurse.

Diploma of Mental Health Nursing 2023

Currently studying Masters of Advanced Nursing Practice

Fractured Attachment and Trauma in Young People

The presentation will discuss different attachment styles and the impact of childhood trauma on development. It will outline examples of how young people who experience these different styles or who are exposed to trauma, can appear when they present to mental health services. Potential barriers and challenges to providing treatment for these young people will also be discussed. This includes distrust of mental health services, disengagement, attachment to staff, and re-traumatization cycle. This presentation will discuss how to mitigate these barriers.

Evidence-based interventions that nursing staff use to help young people de-escalate during episodes of distress will be discussed. This includes sensory modulation, sensory room, safety plans, validation and trauma-informed care approaches. Individuals who experience difficulties with aggression can also help when formulating a behavior support plan.

Throughout this presentation, the opinions and input from young people will be included as well as evidenced- based interventions. This presentation's overall message will be that nursing staff should respond to young people in periods of distress in a least restrictive way that upholds their autonomy.

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4:15pm • BREAK OUT 1 – MOUNTING YARD JANINE DAVIES, ANNA LOVE

Janine is Director of Nursing (Mental Health) at Peninsula Health and Adjunct Associate Professor for Monash University. Janine provides nursing leadership for the mental health nursing workforce ensuring the delivery of high-quality consumer centred care. Janine has worked within a variety of clinical, operational, strategic and professional leadership positions in the UK and Australia and is passionate about workforce development and well-being. Janine provides professional nursing guidance to approximately 400 nurses who work in the Peninsula Health Mental Health Service throughout multiple sites. Janine loves to inspire and invest in nurses, to support them reaching their aspirations.

Janine is currently on a 12 months Secondment to Safercare Victoria as Anna Love Mental Health Nursing Advisor during 2024.

Anna was appointed Victoria's Chief Mental Health Nurse in 2015 and comes with experience across mental health and addictions medicine, having trained and worked in the UK before moving to Australia. Anna's vision is to ensure we have a skilled, valued, and nurtured mental health nursing workforce. In 2022, Anna was additionally appointed as Executive Director of the Clinical and Professional Leadership Unit within Safer Care Victoria.

Anna is the executive sponsor of the Mental Health Improvement Program, leading significant reform and improvement projects in response to the Royal Commission into Victoria's Mental Health System. Anna provides expert advice on quality and safety matters to the CEO of Safer Care Victoria and the Department of Health. As Executive Director, Anna oversees and supports the work of Victoria's Chief Clinical Officers.

A Statewide Victoria Approach to Improving Safety for Consumers Who Are at Harm of Ligature

In response to Improving Inpatient Safety for consumers in adult acute mental health Inpatient units for all people from diverse communities. Safer Care Victoria (SCV) (sponsored by the Chief Mental Health Nurse for Victoria) commenced a piece of work with key stakeholders including, jurisdictional and international partnerships, WorkSafe, Industrial bodies, identified lived experience colleagues and sector leaders. In the absence of national standards in minimising the potential for ligature related risks in Australia. It was identified the requirement for a standardised approach to the principles of training for workforce, assessing and managing ligature risk within the public mental health and wellbeing sector in Victoria.

This presentation will explore the importance of organisational/clinical governance, training/ education, and the development of a standardised anti-ligature assessment tool. The implementation of a Victorian ligature risk review project committee supported scoping anti- ligature practices in 2023 within the public mental health and wellbeing services in Victoria. Following a thematic analysis of current practice in 2023 this supported a project plan to implement improvements to practice in 2024. Identifying key training principles and a standardised approach re: assessment of consumers at harm of ligature and effectively managing the identified risks.

Learning Objective

- Principles of training to support a diverse mental health workforce.
- Organisation/clinical governance



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-
- Standardised anti-ligature risk assessment tool – statewide for Victoria
-

4:15pm • BREAK OUT 2 – VALLEY VIEW
SHINGAI MAREYA, KIERAN COOPER

Inspiring Undergraduate Nursing Students to Become Mental Health Nurses

This presentation explores the collaborative approach between The Royal Melbourne Hospital (RMH) and RMIT University to embed the role of Industry Fellows in enhancing the support framework for undergraduate nurses during mental health clinical placements. The Royal Commission into Victoria's Mental Health System emphasized the need for a holistic strategy for workforce attraction, recruitment, and retention. The newly established Industry Fellow roles play a pivotal part in this, involving the facilitation of collaboration (partnership) between the academic and mental health sectors, coordination with employers for seamless onboarding, and ensuring comprehensive student support, preceptorship, mentoring and safety to create a positive placement experience.

The presentation will offer valuable insights to academic institutions, health services, and other stakeholders actively involved in the landscape of mental health nursing education and the broader mental health workforce planning. It will highlight the collaborative efforts between RMH and RMIT as a further enhancement to existing structures enabling positive change in undergraduate nursing placement experience and assist in shaping workforce plans. The feedback received thus far affirms the pivotal role played by this new initiative in shaping the professional development of future nurses, laying a foundation for an in-depth exploration of the roles and contributions to broader strategy funded by the Royal Commission

to address mental health nursing workforce challenges.

4:15pm • BREAK OUT 3 – JOCKEY ROOM
MADDISON ADAMS, JOSIE TOMOLO ★, NATASHA GRAVE ★

Setting Up an 'Internet Learning Café' to Introduce Staff to a New Model of Care

This presentation will outline how the Barwon Mental Health, Drugs and Alcohol Service (MHDAS) Education Team developed a blended training approach to support the implementation of a new model of care within their Continuing Care Service.

The Continuing Care Service Delivery Framework (CCSDF) was developed over a period of 18 months in collaboration with clinical staff, lived experience and education partners. This new model of care sought to promote a more person-centred family inclusive approach to care, and to provide a more consistent and tailored approach across multiple sites and across varying lifespans.

Once the CCSDF was complete the MHDAS Education Team held the responsibility of training staff to support implementation and maintenance of fidelity to the new model of care. They developed 11 specific learning modules and resources to support translation into practice and hosted an 'internet learning café' blended learning approach, pairing learners from different disciplines.

Currently more than 200 MHDAS team members have completed the learning modules, with positive feedback that they have contributed to improved service provision and satisfaction from people accessing services.

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4:15pm • BREAK OUT 4 – COMMITTEE ROOM
EUAN DONLEY, LEO PORTILLO ★, **ABBY MORO** ★, **REBECCA LOVELL** ★

Dr Euan Donley is the Clinical Lead for Mental Health Access. He spent many years working in emergency and during this time completed his master's degree and PhD examining mental health risk assessment in emergency departments.

Leo Portillo is the Team leader for the lived experience workforce for eastern Health's Mental Health & Wellbeing Access service. This incorporates the Crisis Assessment and Treatment Teams, Emergency Department Response teams, and telephone triage.

Abby Moro is a Lived Experience worker and supports people being treated by the CAT team or Emergency Department.

Rebecca Lovell is an experienced carer support worker and supports carers who are supporting people experiencing a crisis.

Implementation of Lived / Living Experience Workforce to Crisis Services at Eastern Health ♥

The last 5-10 years have been unprecedented in the amount of people seeking mental health support, many of whom require a crisis assessment in the community or an emergency department. This increase in demand is further complicated by continued workforce shortfalls across the mental health sector and mental health nurses.

The use of Psychiatric Enrolled Nurses in crisis teams has been underutilized and is a valuable asset in providing nursing care and support for people experiencing poor mental health. In 2023 the Eastern Health Crisis Assessment and Treatment Team (CATT) first employed Psychiatric Enrolled Nurses as an addition to existing staff profiles. This implementation involved significant negotiations

with many government and organisational services and utilizes a slightly limited scope of practice to Registered Mental Health Nurses.

This presentation will focus on the planning for, and implementation of the PENs, their scope of practice, how they became embedded in the teams, a PEN reflection on their personal experience, how the employment of ENs in CATT can be initially researched, and the future directions for employment and scope of practice for PENs in the CATT.

4:40pm • PLENARY SPACE – CELEBRITY ROOM
CHANTEL PEREIRA ★

Hi, I am Chantel Pereira. I am a nurse working at Alfred CYMHS. I have worked as a Mental Health Nurse for most of my career doing both adult, child and perinatal mental health. I am doing extra learning with psychodynamic psychotherapy at the current moment. My goal is to continue work in the child mental health space to continue to support families. When I am not working I love to watch crime documentaries and analyze the perpetrators' family of origin. And also sleep!

Relationships and Reflections

Mental health nursing for me is based on relationships. We know that therapeutic relationships are transformative for our mental health consumers. Building therapeutic rapport even in the toughest of times and understanding the importance of this is what mental health nurses do best.

It's also the tenet of what we do here at ALFRED CYMHS when working with children and their



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families. As a nurse on the infant-child team, we connect with families and children who have experienced trauma and neurodiversity. To understand the child, we need to understand the relationship between the child and their caregivers. How they relate, connect and delight in one another.

This work can also bring up challenges for me as someone's parent and someone's child myself and child mental health work.

Understanding the transference and the countertransference in the therapeutic space can contribute greatly to my formulation and to understand the child better. What it can also do is support the well-being of the nurse, validate that this is not easy work and can further support the relationships that we continue to make in the clinical setting.

4:40pm • BREAK OUT 1 – MOUNTING YARD DONNA HANSEN-VELLA

Donna Hansen-Vella is a Director of Nursing for Barwon Health Mental Health, Drugs & Alcohol Services. She has been blessed with the opportunity to work as a mental health nurse from the early 90s, across a number of organisations and roles, including executive leadership. This presentation relates to a 10 month project Donna led within Barwon Health, as part of her completion of an Advanced Practice Stream of the Masters in Healthcare Administration.

Developing a Training Package for Staff Responding to a Person Hanging or Using a Ligature Around the Neck

In 2023, a forum hosted by the Chief Mental Health Nurse identified absence of training for staff responding to ligature incidents. Barwon Health Mental Health, Drugs and Alcohol Services

(MHDAS) undertook a 10-month project to address the identified gap, a deliverable of which included developing a Responding to Ligature Incidents training package.

A literature review occurred, using key search terms of 'hanging', 'ligature', 'strangulation' and 'training', 'education', with exploration of grey literature. Reports, public documents, legislation and available policy and procedures were scanned. Results were reviewed to inform development of a comprehensive training resource.

Beyond essential therapeutic interventions mental health nurses provide, literature highlighted need for training of staff responding to ligature incidents. However, limited scholarly publications were found specific to any implementation. Four Victorian health service procedures were reviewed, with focus on ligature rescue equipment. One health service developed local training, and shared it with the MHDAS project lead. Literature also identified consideration of additional education for medical after-care, along with need to address the psychological impact and other effects on mental health clinicians post a ligature incident.

The project successfully produced the required training resource. Implementation is for MHDAS staff working across inpatient services, including an annual evaluation.

4:40pm • BREAK OUT 2 – VALLEY VIEW BIANCA BLATCHFORD, DAMIEN TRAN ★, BENGI AYDINGUN ★

Bianca is currently acting in the Senior Mental Health Nurse role at Austin Health, but her substantive role is Early Career Nurse Coordinator. She is passionate about mental health nursing workforce development. Her background is in Child and Youth Mental Health, and has worked

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in leadership positions in Child and Youth Mental Health Services for the past 10 years

Damien is currently a Clinical Nurse Educator at Austin Health in the perinatal and child mental health settings. He plays a key role in the first MH-RUSON program in Austin Health's Mental Health Division, with a passion to promoting the mental health nursing profession to undergraduate students and highlighting the diverse career opportunities in the profession. Damien has a broad range of experience, including working in adolescent mental health, CAT & PACER teams. In addition to his clinical work, Damien currently works with the University of Melbourne and La Trobe University, supporting students in undergraduate and postgraduate spaces in developing their mental health knowledge and skills.

Bengi Aydingun is a 3rd year Bachelor of Nursing Student. She is one of the student representatives for 2nd and 3rd year nursing students at Swinburne University and a student representative at NPEC (National Placement Evaluation Centre). Through her studies, placement and her RUSON job at Austin APU she has decided to pursue a career in mental health nursing.

Cultivating the next generation of mental health nurses, one MH-RUSON at a time

Austin Health launched its Mental Health RUSON program in 2023 with two distinct goals in mind. We sought to enhance consumer and experience through improved engagement and support. We also wanted to establish a robust and sustainable pathway for recruiting mental health nurses. We focused on providing experience and exposure to mental health inpatient environments in the prequalification period with support that was tailored to each MH-RUSON's goals and pursuits. We hoped that this additional resource to the nursing workforce would enhance consumer experience

through heightened engagement and support in recovery-oriented care. This discussion will delve into our methodology, program structure, and achievements, emphasizing the significance of the MH-RUSON role as a promising avenue for entering the field of mental health nursing

4:40pm • BREAK OUT 3 – JOCKEY ROOM PAULA MATHESON

Digital Health as an Adjunct Treatment Option

The unprecedented times of COVID 19 and the need for 'safety for', along with the Royal Commission into Victoria's Mental Health System 2021, Recommendation 60 : Building a contemporary system through digital technology resulted in the expedition of e-health to provide necessary mental health service delivery.

Multiple site case study research findings were most beneficial to support successful application and embedding of e-health.

1. Education and training to use e-health
2. Policy and procedure to support and embed the use of e-health
3. Funding to support the availability and use of technology
4. Corporate and clinical leadership to endorse and support the use of e-health
5. Appropriate infrastructure to support the use of e-health

Everyone who works in public mental health will benefit from learning this information with due consideration to what will assist with the successful use of technology as it aligns with Recommendation 60: Building a contemporary system through digital technology.



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4:40pm • BREAK OUT 4 – COMMITTEE ROOM TESS MAGUIRE

Dr Tess Maguire is a Senior Lecturer in Forensic Mental Health Nursing. She has a joint appointment with the Centre for Forensic Behavioural Science Swinburne University of Technology, and Forensicare. She has published numerous articles, book chapters, technical reports, and has delivered many conference presentations and international keynotes. She was the recipient of the International Association of Forensic Mental Health Services, Christopher Webster Early Career Award in 2020. The eDASA + APP received a National Award from the Australian Council on Healthcare Standard and she received the Chris Abderhalden Award for Young Researchers in the Field of Aggression in Healthcare.

The Generation of Research for Forensic Mental Health Nurses and Beyond

Forensic Mental Health Nursing is more than just mental health nursing in a forensic context, it is a subspecialty of mental health nursing. While practice does include knowledge, skills, and attitudes common to all nurses, there are also specialist skills needed within the therapeutic alliance when working with people experiencing mental-ill health involved in criminal justice processes. Forensic mental health nurses must understand the socio-political, and legal context of care, the clinical and ethical issues associated when working with forensic mental health consumers and have sound assessment and intervention skills to address a range of complex needs. Historically there has been limited formal education to equip nurses with the necessary specialist skills and knowledge required to work in forensic settings. Obstacles have also included a lack of systemic development in terms of research, practice development and evaluation to

identify the specialist knowledge and skills required. This presentation will cover forensic mental health nursing research which led to the development of Safewards Secure and the Forensic Mental Health Nursing-Clinical Reasoning Cycle. This research was designed to guide forensic mental health nursing practice to reduce conflict and containment and assist clinical-reasoning and decision-making, while accounting for contextual differences in this unique setting.

9:50am • PLENARY SPACE – CELEBRITY ROOM BRENT HAYWARD

Brent is a Credentialed Mental Health Nurse who has worked in a variety of mental health roles over the last 22 years, mostly in clinical, regulatory, and

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policy roles which support people with intellectual and developmental disabilities. His PhD explored influences on the development of behaviour support policy in the National Disability Insurance Scheme. After 15 years working in State government roles in the Department of Health and Human Services and Department of Education, Brent joined the School of Nursing and Midwifery at Monash University in May this year. He is a member of the Australian College of Mental Health Nurses Scientific Committee and Credentialing Committee and is a member of several editorial boards. His current research explores school nursing, behaviour support, and child and adolescent mental health nursing.

Preparing To Be The Next Generation of Mental Health Nurses With PhDs

This presentation is by a mental health nurse who completed his PhD two years ago. The aim of this presentation is to provide suggestions for mental health nurses who are at different stages of their PhD journey to maximise the opportunities that may come along, and to seek opportunities that may not have surfaced.

Using examples from the presenter's own experience, the presentation offers ideas about what you can do to set yourself apart from other potential candidates, what you can do during candidature to begin to establish your academic profile, and what you can do once you're "Dr". Opportunities to further build your professional profile if you're not pursuing an academic career will also be highlighted. An existing research career tool will be used to help integrate these ideas.

This presentation extends the preliminary Australian research conducted in the 2000s about mental health nurses' experience of doctoral study. It offers the perspective of a graduate who completed his PhD with publication, part-time, using mixed

methods, and with non-nursing supervisors. Mental health nurses who are interested in or are applying for a PhD, and those underway or nearing completion will find something practical from this presentation.

9:50am • BREAK OUT 1 – MOUNTING YARD JANINE DAVIES, SONALEE GHOSAL ★

Janine is Director of Nursing (Mental Health) at Peninsula Health and Adjunct Associate Professor for Monash University. Janine provides nursing leadership for the mental health nursing workforce ensuring the delivery of high-quality consumer centred care. Janine has worked within a variety of clinical, operational, strategic and professional leadership positions in the UK and Australia and is passionate about workforce development and well-being. Janine provides professional nursing guidance to approximately 400 nurses who work in the Peninsula Health Mental Health Service throughout multiple sites. Janine loves to inspire and invest in nurses, to support them reaching their aspirations.

Janine is currently on a 12 months Secondment to Safercare Victoria as Anna Love Mental Health Nursing Advisor during 2024.

Sonalee is the Project Lead for key initiatives at Safer Care Victoria (SCV), including 'Health Response to Restrictive Practices' and 'Improving Safety for Consumers at Risk of Ligation.' As a Senior Project Officer in the Clinical and Leadership Response Team (CPLU), she operates under the leadership of Anna Love, Chief Mental Health Nurse and Executive Director of CPLU.

With nearly three years at SCV, Sonalee has contributed towards projects aimed at improving patient flow, establishing the Cardiovascular Learning Health Network, and developing clinical

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guidance for the sector. Before joining SCV, she spent over a decade as a clinical pharmacist in various community, public and private hospital settings, maintaining her practice and registration to date.

Sonalee is a first-time attendee at the Collab Conference, where she is excited to share insights from her projects and eager to learn from peers and leaders. She is passionate about improving the healthcare system for everyday Victorians and thrives in collaborative environments that enrich efforts to drive positive change.

Restrictive Practices Whole of Health – Let’s Share The Learnings From Mental Health

Following the Royal Commission into Victoria’s public mental health system, a series of priority reforms were identified, including the Mental Health and Wellbeing Act (MHWA 22), introduced 1/9/2023. Amongst changes, there was an expansion of legislative oversight and reporting of restrictive practices to the Office of the Chief Psychiatrist. Oversight of restrictive practices has extended beyond mental health inpatient settings.

The Chief Mental Health Nurse embarked on supporting a whole of health best practice guidance, caring for people presenting with acute behavioural disturbance, inclusive of restrictive practices. The foundational learnings were extrapolated from frameworks and initiatives that were tried and tested within the public mental health and wellbeing sector in Victoria.

This piece of work led by the Chief Mental Health Nurse and the broader Clinical and Professional Leadership Unit aims to provide clear leadership and support in responding to behavioural disturbance/acute distress a whole of organisation response to practice and governance of restrictive practices. The work identified the need to utilise key learnings and principles that have been developed and incorporated within the mental health and

wellbeing services throughout the state of Victoria. Emphasising the importance of engaging the broader health workforce to build capability and training opportunities.

9:50am • BREAK OUT 2 – VALLEY VIEW CLARISSE TORRES ★, MICK LE ★

I’m a psychiatric clinical nurse specialist at the Austin health Acute Psychiatric Unit and my co presenter Mick is a clinical nurse educator.

Fostering the Next Generation of Nurses in Acute Psychiatric Care

The Psychiatric Clinical Nurse Specialist (PCNS) role within the Acute Adult Psychiatric Unit (APU) at Austin Health addresses a critical need for career advancement pathways in nursing. Recognizing a gap in the career structure for nurses, this role was established to provide enhanced opportunities for professional growth.

Within APU, PCNSs fulfill diverse responsibilities aligned with NSQHS standards and best nursing practices. One pivotal aspect of their role is supporting early career nurses during their rotations in APU. Over recent years, there has been a notable surge in the number of new graduate nurses rotating through APU. To ensure these nurses are well-prepared for the demanding environment of an acute psychiatric unit, the orientation package has been extensively revised.

In addition to the standard 2-week orientation block for early career nurses, APU offers a comprehensive full-day orientation program. This program features presentations from various disciplines and tailored education sessions specific to APU’s operations and challenges.



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This presentation will delve into the responsibilities of PCNSs at APU, the content covered in the unit's full-day orientation, and an evaluation of the orientation package's effectiveness in equipping early career nurses for their roles on the floor.

9:50am • BREAK OUT 3 – JOCKEY ROOM
JODIE TEN-HOEVE, KATHLEEN CORLESS

Jodie Ten-Hoeve is the Director of Nursing for the Mental Health and Wellbeing Program and Associate Program Director for the Older Adult Mental Health Program at Eastern Health. Jodie is the State Wide Clinical Lead for the Safer Care Victoria Program - Working towards the Elimination of Restrictive Interventions in Victoria. She has held a number of Senior Clinical Nursing Positions including Mental Health Nurse Advisor to the Chief Mental Health Nurse. With over 40 years experience in Mental Health Nursing Jodie has a passion for ensuring the upholding of human rights and Safety for All within the health system.

Jodie has worked collaboratively with the Lived Experience and Multi disciplinary teams towards this goal and is presenting today as the Chair of Elimination of Restrictive Interventions Mental Health and Non Mental Health Committees at Eastern Health.

Kathleen Corless has been in HealthCare in Australia for 37 years as a nurse, clinical educator, manager, academic, mentor, colleague, and a supporter of inclusiveness and collaboration.

Her role includes leadership, project management and health professional education including supporting the Behaviour of Concern Education team. More recently Kathleen has taken on the role as Clinical Risk Manager role for Standard 5 – Comprehensive Care (portfolio BOC/OVA/Delirium

and Cog impairment) and Standard 8 – Clinical Deterioration


Her qualifications include Ba. Applied Science, Ba. Nursing, Graduate Diploma in critical care, Graduate Diploma in Diabetes Educational and Master of Nursing. She is a graduate of The Australasian Institute of Clinical Governance and is a member of many professional organisations.

Kathleen's passion is to develop the potential of healthcare staff in caring for patients and their families in their journey within the complex health system and to be pro-active in risk management.

Collaboration in healthcare is a driving force

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behind my passion for the field. I believe that by fostering teamwork among diverse professionals—doctors, nurses, therapists, and support staff—we can create a more holistic approach to patient care. Each member brings unique expertise to the table, and when we work together seamlessly, we enhance patient outcomes and improve overall healthcare experiences. My commitment to collaboration is rooted in the understanding that it not only bridges gaps in care but also cultivates a supportive environment where innovation and empathy thrive, ultimately leading to more effective and compassionate healthcare solutions.

Elimination of Restrictive Interventions - A Whole of Service Approach

The expanding scope of the Mental Health Act 2022 provided opportunity to ensure a move towards elimination of restrictive interventions within mental health, general and emergency department areas providing the opportunity for a closer collaboration between the Mental Health and Wellbeing Program and General Medicine/Emergency Department services.

This collaboration effort has initiated a comprehensive reform process, aimed at bolstering oversight mechanisms, fostering information sharing, establishing KPIs, and inceptions of new projects aimed to enhance patient's experience.

As we work towards a clearer path of integrated governance, the issue of restrictive interventions including chemical restraint has given clinical leads an opportunity to share a common goal.

To achieve this work a non-mental health Reducing Restrictive Interventions Committee has been developed, chaired by Mental Health and Wellbeing Program with extensive support from the Behaviours of Concern Lead and Embedded Practitioner. We are on a journey to ensure consistency of practice across the scope

of our service leading to best outcomes in the least restrictive environment for our patients. This presentation will explore the pathway for developing a common goal, sharing of resources and experience, development of a common language and working towards best outcomes for all effected by restrictive interventions.

9:50am • BREAK OUT 4 – COMMITTEE ROOM
STEPHANIE THUESEN, ROMAN CIOFULI

Breaking the Silence on Gendered Violence in Mental Health

Breaking The Silence is a pioneering initiative



What's your next step?

Austin Health is now recruiting mental health staff.

We offer a vast and exciting array of speciality mental health practice environments, including the first Child and Family Centre in Australia. We're here to support your next steps.

Visit our booth to talk about our wellbeing initiatives and what it's like to work for Austin Health.



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designed to confront the challenges of gender-based violence and sexual harassment within the disability and mental health sectors. Recognising the unique vulnerabilities faced by these workers, our project launches a pilot program with two leading employers in the disability and mental health fields.

This innovative program will provide specialised training to approximately 1,000 disability workers and 600 mental health workers.

Our aim is to equip these professionals with best-practice responses to gendered violence and sexual harassment, enhancing their ability to create safer workplace environments.

To ensure that our training programs are deeply informed by those on the front lines, we have established an expert workforce steering committee. This committee, consisting of 6 mental health workers and 6 disability workers, plays a crucial role in shaping our initiatives, ensuring that feedback from actual workplace experiences drives the development of our training materials.

Moreover, all our training content and workplace policies undergo academic evaluation by the Australian National University's Global Institute of Women's Leadership and the University of Sydney. This academic scrutiny helps refine our approaches, ensuring they are grounded in the latest research and best practices.

Our findings and progress will be regularly shared with WorkSafe Victoria and the Sexual Harassment Learning Network. This collaboration aims to inform broader policy implementations and foster state and federal commitments to preventing workplace gendered violence and sexual harassment. Through the Breaking The Silence Project, we are dedicated to creating a safer, more respectful work environment for all.

10:15am • PLENARY SPACE – CELEBRITY ROOM
BOWEN LI

Bowen is a registered mental health nurse and mental health clinician currently working in the Eastern Health Access Team. He had experience in acute inpatient units, AOD detox and rehabilitation and community case management. He graduated from the University of Melbourne with a Master of Nursing Science degree and obtained his postgraduate diploma in Mental Health Nursing from RMIT. He is interested in leadership development, nurse-led psychosocial support, culture-informed practice, and supporting the LGBTQ+ community. This is his second time presenting at The Collab.

Fast-tracked Into Leadership: Career Challenges and Prosperity

The Australian mental health nursing workforce is continuously experiencing a significant shortfall. This shortfall has resulted in early-career nurses feeling compelled to take on leadership duties and roles. The impact of such experiences can be a double-sided sword. Some were inspired and motivated to pursue further in leadership. However, some felt unsupported, overwhelmed and discouraged to step into future higher duties.

This presentation introduces a preliminary qualitative study highlighting insights from current nursing graduates, early-career, senior, and practitioner nurses examining their early-career leadership experience. The study utilised a semi-structured interview format, either in the style of conversations or questionnaires, with a sample size of 14 participants. The interviews consisted of four open-ended questions, and a thematic analysis was conducted to examine the data. The study suggested potential future research directions in supporting early-career nurses stepping into leadership.

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The presenter will also share his experience of quickly entering the leadership role with the challenges, personal and career satisfaction, and prosperity. This reflection will draw on the Emerging Nursing Leader (ENL) program with the Australian College of Nursing (ACN) and how this one-year leadership development program prepared leadership skills for early-career nurses.

10:15am • BREAK OUT 1 – MOUNTING YARD
JEANETTE MAKHOUL ★

Jeanette Makhoul is a highly experienced healthcare professional with a robust background in both medical-surgical and mental health nursing. With over a decade of experience as a mental health nurse and leader, she has recently taken on the role of Prevention and Management of Occupational Violence and Aggression Coordinator for the third largest mental health division in Victoria.

Jeanette's journey began as a medical-surgical nurse, where she developed a solid foundation in clinical skills and patient care. Her transition to mental health nursing over ten years ago allowed her to focus on supporting individuals with behavioral and psychological challenges. Her dedication and expertise quickly propelled her into leadership roles, where she has been instrumental in guiding and mentoring nursing teams, advocating for mental health awareness, and implementing innovative care strategies.

In her current role, Jeanette has successfully led the development and delivery of a comprehensive, multifaceted training program aimed at preventing and managing occupational violence and aggression. This program, designed for leaders, stakeholders, and professionals across all disciplines – including nursing, allied health, security, medical, environmental staff, lived experience workforce, and extended auxiliary staff

– has been widely recognized for its effectiveness and impact.

Jeanette's commitment to advancing her profession is unwavering. She aspires to complete a Ph.D. in the near future, drawing on her extensive experience to highlight the value and importance of mental health nursing. Her contributions to the field continue to make a significant difference in the lives of both patients and healthcare professionals.

Empowering MHN Leadership, Research, Retention while Highlighting the Value of MHN skills: Prevention and Management of Occupational Violence and Aggression Across Public Health Services

This abstract elucidates the critical significance of extending the application of prevention and management skills for occupational violence and aggression beyond mental health services to encompass broader public health domains. While traditionally confined to mental health settings, occupational violence and aggression manifest across various public health sectors, necessitating a comprehensive approach to mitigate associated risks. Such expansion acknowledges the universal nature of these challenges and the imperative to safeguard the well-being of healthcare professionals across diverse healthcare contexts. Mental health nurses are uniquely positioned to provide consultation, education and spearhead research due to their specialized knowledge, skills, and experience in dealing with individuals experiencing behavioural challenges. By extending prevention and management skills across public health services through a specialised MHN team, services address the interconnectedness of occupational violence and aggression with broader



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public health concerns, including workforce retention, patient safety and service quality. Through the success of this holistic approach, mental health nurses will be at the forefront of co-production and interdisciplinary research particularly exploring the neurobiology of violence and aggression, creation and implementation of related models of care and assessments transferable across public health domains and gain recognition of value that highlights their integrated and specialist skill set.

10:15am • BREAK OUT 2 – VALLEY VIEW
YOGES ANNAVEE ★, ASH COLLEY ★

Yoges Annavee is the Clinical Nurse Consultant and Graduate Program Coordinator at Mercy Mental Health. Prior to this, her background is in acute inpatient and youth mental health. Her keen interest includes, education and training, and trauma informed care.

Ash Colley is the Graduate Support Nurse at Mercy Mental Health. Her background is in acute inpatient settings in Western Australia and Victoria, and in adult mental health rehabilitation. Her passion includes improving consumer care and education.

Introduction of Graduate Support Nurse Role at Mercy Mental Health & Wellbeing Services

Clare Moore Building (CMB) is a 54 bedded acute inpatient unit within Mercy Mental Health & Wellbeing Services and caters to the rapid growing catchment in the western suburbs of Melbourne. Nurses are working with high demand and workload amongst occupational violence and aggression, and can be challenging for them to play an integral part in supporting clinical skills development for Graduate Nurses, Postgraduate Nurses and Transition to Mental Health Nurses. The impact

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of COVID brought on a higher turnover within the CMB nursing workforce, therefore graduate nurses were not able to receive supervision of best clinical practice from a consistent team of senior nurses.

Graduate Support Nurse (GSN) role was introduced to CMB in September 2023, where the largest number of graduate, postgraduate and Transition to Mental Health nurses are working at any one time. GSN role has been instrumental in mentoring entry level nurses in their development of foundational and specialty knowledge required to deliver high quality mental health nursing care to consumers. This role has promoted their professional development and contributed to positive graduate



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nurse rotation experience. Our presentation will explore the learnings and areas for future improvement from implementing GSN role.

10:15am • BREAK OUT 3 – JOCKEY ROOM
BETH DUNLOP, LORELLE ZEMUNIK ★

Lorelle Zemunik (She/Her) is the Acting Manager Mental health and AOD Workforce Development with the Department of Health.

Beth Dunlop (She/Her) is a Learning & Practice Development Coordinator with CMHL

Our Workforce, Our Future – How the Capability Framework for Victoria’s Mental Health and Wellbeing Workforce is Being Implemented.

Our workforce, our future: a capability framework for the mental health and wellbeing workforce is a foundational resource for Victoria’s mental health and wellbeing workforce. The framework will nurture mental health nurses and the mental health community across our generations. It sets out the knowledge, skills and ways of working that our diverse, multidisciplinary and evolving workforce needs.

The framework puts consumers, carers, families, and supporters at the centre of care. It also acknowledges and values the breadth of expertise and experience across the workforce.

In this presentation we will discuss how the Department of Health and the Centre for Mental Health Learning (CMHL) are working together to implement the framework to inform workforce development planning, enhance professional learning delivery and support the design of multidisciplinary teams across the mental health and wellbeing sector.

10:15am • BREAK OUT 4 – COMMITTEE ROOM
ANN MENNEN ★

I am a Registered Psychiatric Nurse who comes from a long line of psychiatric nurses – my grandmother, mother and several aunts all worked at Lakeside Hospital in Ballarat. My career has predominantly been in bed-based areas, moving into education in 2019. I am passionate about Trauma-Informed Care and Safewards & much to my surprise have found myself in the Safety Intervention (OVA) Co-ordinator role at Grampians Mental Health & Wellbeing Service.

Safety Interventions: The Introduction of Refresher Sessions in Supporting Staff Confidence

The demographic of nursing staff in bed-based areas has undergone a significant change with inexperienced and junior staff managing acutely unwell people, some with distressing and/or risk behaviours. Nurturing and building skills for junior staff has become vitally important to enhance professional confidence, provide optimum and safe care, and promote staff retention.

To improve safety and build professional confidence, Grampians Mental Health & Wellbeing Service has implemented frequent refresher sessions of their Safety Intervention program, focusing on one or two elements per session. The goal is to enhance confidence, build skills, and promote teamwork. A brief staff survey has been undertaken to determine staff perception of the effectiveness and value of the refresher sessions in building confidence in their nursing practice. This presentation will explain the refresher sessions and discuss the results of the survey.



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10:40am • PLENARY SPACE – CELEBRITY ROOM JOANNE STUBBS

Jo has been a mental health nurse in Victoria for over 20 years. She has worked in a variety of roles in the public sector. She is currently a Learning and Practice Development Coordinator and acting Senior Lead at CMHL. Jo works closely with state-wide public mental health services to support professional development.

Jeff has worked across many areas of Victoria's mental health and related service sectors. He is an Occupational Therapist, and passionate about education and training.

His areas of interest include dual diagnosis, trauma-informed care, motivational interviewing and clinical supervision.

Adapting to Sector Reforms: CMHL's Strategic Workforce Development and Leadership in Mental Health

The Centre for Mental Health Learning (CMHL) was established in 2018 as the central agency for public mental health workforce development. CMHL's objectives are to provide access to quality, contemporary workforce learning and development activities, connect, collect and share information, tools, and resources, and reduce duplicative effort across the sector. Since its inception, CMHL has navigated significant sector reforms, prompting the establishment of five divisions in 2023: capability development, wellbeing and retention, lived experience workforces, early career, and digital and dissemination.

These divisions are designed to align CMHL's efforts with sector needs. This presentation will detail CMHL's support for workforce development through these divisions. CMHL is now recognised for its robust leadership, including consumer and carer leadership, and its strong organisational lens that

fosters positive systems change. CMHL's strategic responses and workforce development activities are built on collaboration, respect, and accessibility to the mental health workforce.

CMHL leads numerous reform projects and delivers core workforce development work, including training delivery across disciplines, maintaining communities of practice, and managing a resource-rich website. It also contributes its leadership, expertise, and sector intelligence to initiatives with partner organisations. CMHL's work is underpinned by values of integrity, transparency, respect, and inclusion.

10:40am • BREAK OUT 1 – MOUNTING YARD NAOMI BROCKENSHIRE ★

Dr Naomi Brockenshire is an experienced mental health nurse and Lecturer in Nursing at the University of Melbourne where she teaches in the Graduate Diploma of Mental Health Nursing Practice and the Master of Advanced Nursing Practice. Naomi also holds an Honorary appointment with the Nursing Research Department at the Royal Children's Hospital Melbourne. Naomi's current research prioritises lived-experience collaboration and aims to capture the voices of young people restrained in paediatric hospital settings for the treatment of anorexia nervosa.

Guidelines for the use of Restraint in young people with Anorexia through Collaborative Engagement (GRACE)

Anorexia nervosa (AN) is a serious psychological illness with significant physiological consequences. In young people (YP), there are substantial impacts on growth and puberty, bone health, and psychosocial development. For those who become medically unstable they may be admitted to an acute care paediatric service to ensure adequate nutritional intake is achieved. Recent

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research shows, between 2020-2023, 11% of YP with AN admitted to The Royal Children's Hospital medical ward required restraint for nasogastric tube insertion/feeding. Currently, no guidelines are available to assist clinical staff in least restrictive interventions and restraint decision-making for this vulnerable population.

Our research, designed in collaboration with lived-experience advisors (consisting of YP and parent/carers), aims to explore the nuanced, and very personal experiences of young adults who were restrained for feeding in adolescence within an acute paediatric setting, parent/carers of YP restrained in the same context, and both clinical and non-clinical staff providing care and treatment. Experiences of all involved are sought to provide an in-depth, multifaceted understanding of this phenomenon, resulting in the development of a guideline, informed by lived-experience and responsive to the Mental Health and Wellbeing Act, which promotes consumer autonomy and consistent use of least restrictive interventions for YP with AN.

10:40am • BREAK OUT 2 – VALLEY VIEW

NATASHA STRESNJAK ★

Natasha Stresnjak is the Senior Psychiatric Nurse, and manager of the learning and development team at Mercy Mental Health.

Her background is working in aged care, mental health inpatient unit's, and Emergency Mental Health, particularly in leadership positions. She is passionate about efficient hospital systems, innovation and health service leaders supporting clinicians in new and exciting ways.

Along with her Postgraduate Diploma in mental health nursing, Natasha has completed her Masters in Business Administration.

She is now a Doctorial Candidate, studying her Doctorate in Business Administration, with a focus on organisational responsibility supporting clinicians in healthcare.

Job Demands, Resources and Organisational Responsibility for Clinician Wellbeing: Evaluating Crisis Team Workload Management Systems

Amidst an already projected shortfall by 2030, workforce shortages, further depleted by COVID, have profoundly impacted public healthcare within Australia, resulting in work overload, which is augmenting clinician stress, and reinforcing intentions to leave the workforce. In particular, Mental Health Clinicians working in frontline crisis teams are exposed to pressurised and unpredictable environments, demanding workloads, and occupational violence, which places this specialised workforce at a greater risk of physical, emotional and mental exhaustion caused by stress leading to burnout.

The introduction of Crisis Team Workload Management Systems to frontline mental health teams was intended to allow clinicians allocated non-clinical time, thus providing an organisational-wide opportunity to buffer the effects of work-related burnout. In its pre-research proposal stage, the current research intends to adopt a Job-Demands Resources perspective, though a qualitative approach, to better understand the uptake (through the (im)balance of perceived resources and demands) of crisis team workload management systems, and its subsequent role in alleviating burnout. Our research has a timely opportunity to investigate organisational-level stress mitigation interventions as a tool to better support clinicians, thus strengthen the healthcare workforce in Australia.



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10:40am • BREAK OUT 3 – JOCKEY ROOM RESHMI RADHAMONY

The presenter, Reshmy Radhamony, recently completed her PhD at Federation University. She is a credentialed mental health nurse and nurse educator with 18 years of experience working in various public and private mental health units across Melbourne. Reshmy demonstrates advanced specialist education, practice development, and a solid commitment to ongoing professional education in nursing. Reshmy has been a member of the Australian College of Mental Health Nurses and the Australian College of Nursing. She currently serves as the Honorary Justice of the Peace by the Department of Justice and Community Safety. Her vibrant academic experience, including faculty positions at various Universities and TAFEs in Melbourne, is a testament to her dedication and passion for her field.

Explaining the Mental Health Service Access and Utilisation by CALD Communities in Victoria using Andersen's Behavioral Model of Health Service Use

Andersen's Behavioral Model of Health Service Use (ABMHSU) is a multilevel model that helps understand the factors influencing health service access and utilisation. This framework is a widely used model for health service use in general, as well as in immigrant populations and vulnerable populations. A unique model of ABMHSU in the current multiple-method project provided a theoretical framework for examining the factors associated with people from the CALD community accessing MH services in an Australian context to answer the research questions. The key findings of the research were discussed with reference to the extant literature and with triangulation of research results with the ABMHSU in the context of Victoria. The researchers argue that even

though predisposing, enabling, and need factors are necessary to determine whether a person is selected for expert care for MH issues, these factors alone are insufficient. Ongoing research is essential to ascertain the potential of mental health nurses' cultural competence education and cultural responsiveness in addressing the mental health service access and utilisation of the heterogeneous CALD communities. Additional research is advocated to identify the supplementary factors, as there is a dearth of research exploring the potential of ABMHSU worldwide.

10:40am • BREAK OUT 4 – COMMITTEE ROOM CHRYSIE MITCHELL ★, FRED JANSSON

Chrystie Mitchell is a Senior Mental Health Clinician and Clinical Nurse Consultant at The Royal Children's Hospital. Chrystie has over a decade of experience working with Children, Adolescents and Families in a range of different settings. Chrystie works in a Community Mental Health setting as well as working in aggression management on the Main Campus of the hospital, supporting children and adolescents when they are dysregulated. Chrystie is passionate about safety for all and equity in healthcare for all patients and family.

Fred Jansson is a Clinical Nurse Consultant and Registered Nurse at the Royal Children's Hospital, Melbourne. Fred has 20+ years of experience in nursing, with the last seven spent at the RCH, where he works in aggression management, as well as working as a clinical Nurse on the adolescent oncology and rehab ward.

Fred is also an ex-combat medic, a published novelist, a terrible golfer, and father of the wildest two-year old you'll ever meet.

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P.A.U.S.E! A Collaborative Approach to Occupational Violence and Aggression

Paediatric Approaches to Understanding Safe de-Escalation (PAUSE) is an Occupational Violence and Aggression (OVA) training that was developed by Mental Health Nurses and Registered Nurses at The Royal Children's Hospital to create paediatric-centric training.

The RCH has seen an increase in planned and unplanned Code Grey's across the organisation and found that previous training was no longer contemporary or appropriate for our population. With further exploration, there was no current models for Paediatrics in relation to OVA.

This presentation will showcase the design process and key considerations that underpin the foundational training. Utilising trauma informed principals to inform de-escalation across age ranges and optimising safety for staff, patients, and families. Physical Restraint has been tailored to suit different body sizes and utilises an individual's body biomechanics to decrease the risk of injury.

By working across our nursing specialities, we were able to develop a training package that is applicable for all staff across the organisation. Whilst still in the early stages of the roll out, feedback from staff has been positive. We will be building on our foundation training to create a suite of training options tailored for different areas and roles in the organisation.

SAFER CARE VIC IMPROVEMENT SYMPOSIUM

This symposium showcases the Mental Health improvement program of Safer Care Victoria.

The Royal Commission into Victoria's Mental Health system (RCVMHS) set out 741 recommendations for a new approach to mental health and wellbeing treatment, care, and support. The RCVMHS laid out a vision of what a reimagined mental health system

could look like, and how it would support the mental health and wellbeing of Victorians for years to come.

The Mental Health Improvement Program (MHIP) within the Clinical and Professional Leadership Unit (CPLU) of Safercare Victoria (SCV) have a key role in supporting reform and system improvement activities, including:

- Towards the elimination of restrictive practices (Rec 54),
- Improving sexual safety in mental health inpatient units (Rec 13),
- Adopting the Zero Suicide Framework in healthcare settings
- Reducing compulsory treatment in community mental health settings (Rec 55.4), and
- Mental Health Learning Health Network

The RCVMHS were explicit in identifying that people with lived experience of mental illness or psychological distress need to be central to the design and delivery of the new mental health and wellbeing system. SCV is strengthening its governance and structures to continue to develop, embed, and lead the inclusion of all voices across the program's initiatives and Victoria: including those groups who are overrepresented in the mental health system, but voices are often not heard.

In delivering the above initiatives, the MHIP works in partnership with health services, consumers, carers, families and supporters, the mental health and wellbeing workforce, and content knowledge leaders to deliver quality improvement programs. The MHIP also works closely with the Mental Health and Wellbeing Division, including the Office of the Chief Psychiatrist to implement new quality and safety architecture and will also work closely

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with the Mental Health and Wellbeing Commission as it stands up. The MHIP is under the executive direction of the Chief Mental Health Nurse and the frameworks below are the foundation on which the quality improvement work is built:

- Clinical Supervision for Mental Health nurses: A framework for Victoria
- Mental Health Intensive Care Framework
- Safewards Model
- Smoking Cessation in Mental Health Inpatients Units
- Improving Safety for Consumers at Harm of Ligation
- Equally Well in Victoria: Physical health framework for specialist mental health services.

¹ Nine recommendations were made in the 2019 RCMHS interim report and 65 additional recommendations were included in the 2021 RCMHS final report. [Royal Commission into Victoria's Mental Health System - final report | vic.gov.au \(www.vic.gov.au\)](https://www.vic.gov.au/royal-commission-into-victoria-mental-health-system-final-report)

11:30am PLENARY SPACE – CELEBRITY ROOM KATE THWAITES

Kate was appointed Victoria's Deputy Chief Mental Health Nurse in 2021, supporting the program of work undertaken by the Chief Mental Health Nurse. Kate was appointed the Director of the Mental Health Improvement Program within Safer Care Victoria in 2023 and leads the program of work which is a recommendation and outcome from the Royal Commission into Victoria's Mental Health System. Kate supports mental health nursing leadership and works with mental health nurses, lived experience advisors, allied health professionals and project officers to develop clinical practice improvements and best practice frameworks aimed at supporting the mental health workforce and improving the experience of care for consumers, families, and carers and supporters.

The Journey so far

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AMANDA McCARTNEY, REBECCA BRITT ♥

Amanda is a senior project officer within Safercare Victoria's mental health improvement program. With a combined lived experience (consumer) of public mental health services and project work within government and non-government sectors, Amanda is committed to the process of improving Victoria's mental health services, for all, through her dedication to the implementation of Recommendations from the Royal Commission into Victoria's Public Mental Health (2019). Previous roles have focused on consumer advocacy, lived experience workforce development, and working within services to ensure a human-rights-based approach is upheld alongside of agreed mental health principles. Amanda's background also includes community consultation with marginalised groups such as the homeless, aged, and women in rural or regional areas with a disability - in addition to the development of programs to support aftercare for suicide prevention and response arenas

Rebecca Britt is a Senior Project Officer on the Towards Elimination of Restrictive Practices Team in the Mental Health Improvement Program at Safer Care Victoria. She has a background in mental health nursing and is driven to better the Victorian mental health system for all using improvement science.

Safety for All: Towards Elimination of Restrictive Practices with a Lived Experience Workforce and Quality Improvement Project Teams Collaboration

AMANDA MCCARTNEY

Amanda is a senior project officer within Safercare Victoria's mental health improvement program. With a combined lived experience (consumer) of public mental health services and project work within government and non-government sectors, Amanda is committed to the process of improving Victoria's mental health services, for

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all, through her dedication to the implementation of Recommendations from the Royal Commission into Victoria’s Public Mental Health (2019). Previous roles have focused on consumer advocacy, lived experience workforce development, and working within services to ensure a human-rights-based approach is upheld alongside of agreed mental health principles. Amanda’s background also includes community consultation with marginalised groups such as the homeless, aged, and women in rural or regional areas with a disability - in addition to the development of programs to support aftercare for suicide prevention and response arenas.

Lived Experience Workforce and Quality Improvement Project Teams Collaboration

MISHA ADAIR

Misha Adair is a Senior Project Officer and Project Lead of the Improving Sexual Safety Initiative in the Mental Health Improvement Program at Safer Care Victoria. He has a background as an Alcohol and Other Drugs counsellor and group facilitator in both private- and publicly funded services and brought a Lived Experience of Substance Use Disorder recovery to his roles in this sector.

Improving Sexual Safety in Mental Health Inpatient Units

TEAGAN GOH, MARY TSIROS ♥

Mary has worked across multiple sectors building strong skills in project management. A social science student, Mary’s studies in behaviour provide her with great abilities in people engagement. With her professional and academic skills, Mary utilises her lived experience of mental health challenges to lead a statewide initiative that will see the adoption of the Zero Suicide Framework across Victoria’s public healthcare services.

Teagan Goh is a Senior Project Officer working on the Zero Suicide Framework implementation

at Safer Care Victoria. She has a background in clinical accreditation and surveying for multiple healthcare frameworks and aims to use her passion for innovation to effect positive change across the healthcare system.

Working Towards Implementing the Zero Suicide Framework

REBECCA HELVIG

Rebecca has a long career in the Victorian public mental health service sector as a specialist mental health nurse working across a variety of inpatient and community environments, and as a senior project officer working with culture and practice changes across mental health workforces. She has been with government since 2016, and most recently in the Mental Health Improvement Program of Safer Care Victoria since 2021. Rebecca manages a team that is leading Recommendation 55 of the Royal Commission into Victoria’s Mental health System, the Reducing Compulsory Treatment initiative, and supports key initiatives and work of the Chief Mental Health Nurse.

Reducing Compulsory Treatment

REBECCA HELVIG

The Mental Health Capability Frameworks as a Foundation for Improvement

Spotlight: Equally Well

11:30am • BREAK OUT 1 – MOUNTING YARD TERESA KELLY, SAL HOSKING

Teresa is a credentialed mental health nurse, gestalt practitioner and an academic at the CentreMHN. Her areas of expertise include



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relational heart health, qualitative research, and clinical supervision for mental health nurses.

Sal Hosking is an experienced mental health nurse consultant who has over 30 years of clinical mental health nursing experience. She has previously specialised in areas including general acute adult psychiatry, rehabilitation settings, youth early psychosis, primary mental health teams and consultation liaison psychiatry. Sal has worked in private practice, public mental health services, non-government agencies and general health settings.

She currently holds the position of Clinical Nurse Consultant – Undergraduate Coordinator at Orygen and carries a clinical supervision portfolio.

A Relational, Experiential, and Translational Approach to Growing Clinical Supervisors: Perspectives, Reflections, and Insights.

Clinical supervision, like mental health nursing, is all about relationships. However, clinical supervision curricula can rely on didactic delivery methods that prioritise “learning about” rather than experiencing and practising clinical supervision and taking learning into practice. Mindful of this, we designed a clinical supervisor development program that uses a relational, experiential, and translational approach to grow the clinical supervisor capabilities of mental health nurses.

In this paper, we outline the pedagogical features of our program and reflect on their coherence with the practice of quality clinical supervision and the relational and ethical foundations of mental health nursing. We also share the perspectives, reflections, and insights of one of our experienced mental health nurse colleagues who participated in the program. Authentic sharing of her personal experience of the program and her growth as a clinical supervisor through stories and images communicates renewed knowledge and an

embodied understanding of the process and practice of clinical supervision.

Our program offers a novel approach to clinical supervisor development for mental health nurses that fosters meaningful relationships, prioritises experiential learning, and supports nurses’ growth and well-being and the translation of clinical supervision learning into real-world practice settings.

11:30am • BREAK OUT 2 – VALLEY VIEW STEPHANIE BARCLAY ★, JESSICA LEWIS ★

Steph Barclay was trained as a psychiatric Nurse in Canada and has worked in a variety of public

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mental health and other government organisations throughout her career including acute inpatient, triage, continuing care teams, outreach, emergency departments and in therapy roles. She has always had passion for ensuring evidence based care is provided to Consumers and extensive support is available for their loved ones. Most recently working as a clinical Nurse educator and now working as a Clinical Nurse Consultant at the McKellar Mental Health Wellbeing Unit has allowed her to intersect her clinical and educator experience to support and provide training to staff. Having the opportunity to work within the first purposely built acute inpatient unit without a seclusion has provided the possibility to lead the way of the future of working with vulnerable Consumers and their loved ones. It is a dream that she could never have imagined was possible when she started her psychiatric Nursing journey over 24 years ago!

Jess Lewis is a passionate mental health Nurse with 13 year's experience in the field. She has previously worked in acute inpatient, sub-acute and community mental health settings. Up until earlier this year, she was working with the MHDAS education team for 7 years as the student coordinator and supporting new mental health Nurse graduates. For the last 5 months, she has been the Nurse Unit Manager at the McKellar Mental Health Wellbeing Unit. She is so proud to be part of the leadership, supporting staff and changing landscape of acute mental health service provision, in the first seclusion free, purpose built inpatient unit in Victoria.

McKellar Mental Health Wellbeing Unit – The 1st Purposely Built Without Seclusion Rooms and Two High Care Areas. How are we Going Two Years Since Opening?

Our paper describes the McKellar MHWU's design in relation to the Royal Commission, the model of

care, the layout, use of HCA spaces and resources within the staffing group. Highlighting our entry to practice nurses seeing the way of the future of acute inpatient settings. We briefly review two Consumers experience with us, who have had a stay at an acute inpatient setting that did not have a HCA and how we could accommodate and support the Consumers to utilise the HCA space to support them in the most acute phase of their mental health journey. Emphasising the core foundation of the care we provide is in line with the Mental Health Intensive Care Framework and Safeward approaches to reduce the need for restrictive interventions, providing the Consumers with intensive mental health Nursing support as they need it. Feedback from Families and Consumers will be the highlight of the presentation.

**11:30am • BREAK OUT 3 – JOCKEY ROOM
FELIX BRIANTON**

Welcoming Difference: The RMH Safe Haven Model of Care

Current trends in the use of mental health services show that we need spaces with a radically different approach. Safe Haven is such a space. Noting the successes of Safe Havens in the UK, St. Vincent's Hospital Melbourne, and multiple sites in New South Wales and Queensland, The Royal Melbourne Hospital created a Safe Haven which opened in 2022. Two years later, our Safe Haven remains in operation. For vulnerable people seeking to avert and recover from mental health crises, Safe Haven provides an alternative to the Emergency Department. It is a non-threatening, non-clinical, warm and welcoming space, where peer workers



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provide guidance from their own recovery path.

Our peer workers and clinicians collaborate in a peer-led model, which brings out unique strengths from both disciplines. Through operating this space, we have gained valuable insight into not only how people with lived experience can guide each other towards wellness, but also how we can create safe and inclusive spaces without judgement, that bring people together in ways that foster connection, community, healing and growth. We are proud to share our experiences and vision for our Safe Haven.

11:30am • BREAK OUT 4 – COMMITTEE ROOM
CHRIS SMITH, ★ VIVIENNE POWER

Chris works as an Enrolled Nurse in the Box Hill Adolescent Inpatient Unit. He started his career with Eastern Health as a grad in 2023 and spent time working in Adult Inpatient before finding a love for working in youth mental health.

Chris is passionate about empowering the people he works with, advocating for their best health outcomes and helping teach the next generation of students and grad nurses.

Vivienne Power is currently working at Eastern Health in Melbourne as the Mental Health Enrolled Nurse Transition to Mental Health Co-ordinator and the Clinical Nurse Educator at the Adolescent Inpatient Unit.

She has worked in both the community teams and in acute inpatient units as a registered mental health nurse, and currently works part time as a VET teacher at Swinburne University.

Vivienne has a passion for clinical excellence and social justice. She also spends a lot of her free time reviewing capability frameworks!

Enriching our Workforce: The Development and Implementation of a Contextualised Mental Health Enrolled Nurse Transition to Mental Health Novice Learner Year.

Demand for mental health services continues to escalate globally, necessitating innovative approaches to bolster the workforce. With the scope of the mental health enrolled nurse ever increasing, and the areas in which enrolled nurses are now being employed increasing exponentially, it is critical to ensure new staff have the skills and knowledge to be safe and competent practitioners.

The program highlights best practices in nursing education, the Victorian capability framework, and comprehensive theoretical knowledge, along with experienced and tailored clinical support. Enrolled Nurse Educators have been employed to mentor and foster supportive learning environments, where professional development, and self-care are prioritised to mitigate burnout and turnover.

The program key components include immersive clinical rotations in diverse mental health. Ongoing support networks, regular debriefing sessions, and opportunities for career advancement are embedded within the program. Assessments are competency based and practical. Preliminary data indicates promising outcomes, with graduates demonstrating a deep understanding of mental health principles and strong commitment to long-term career engagement.

The program represents a significant advancement in mental health workforce development, offering a replicable model for enhancing retention rates and ensuring the availability of skilled professionals to meet the evolving needs of individuals experiencing mental health challenges.

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11:55am • BREAK OUT 1 – MOUNTING YARD STUART WALL, JANINE DAVIES

Janine is Director of Nursing (Mental Health) at Peninsula Health and Adjunct Associate Professor for Monash University. Janine provides nursing leadership for the mental health nursing workforce ensuring the delivery of high-quality consumer centred care. Janine has worked within a variety of clinical, operational, strategic and professional leadership positions in the UK and Australia and is passionate about workforce development and well-being. Janine provides professional nursing guidance to approximately 400 nurses who work in the Peninsula Health Mental Health Service throughout multiple sites. Janine loves to inspire and invest in nurses, to support them reaching their aspirations.

Janine is currently on a 12 months Secondment to Safercare Victoria as Anna Love Mental Health Nursing Advisor during 2024.

Stuart is the Education Steam Lead for Mental Health and AOD within Peninsula Health's Mental Health Service, and an Adjunct Senior Lecturer at Monash University. Stuart works alongside his team of educators to support clinician and lived experience workforces to learn and develop their practice. Stuart is passionate about providing learning opportunities which are work integrated and easily transferable into practice. Stuart's team prides themselves on supporting safe and effective care through the development of high-quality learning programs, which have been developed in line with clinical needs and evidence-based practice.

Increasing Job Satisfaction of Mental Health Nurses Engaged in Clinical Supervision

The role of mental health nursing is recognised as having the potential to be emotionally taxing and stressful, providing increased risk of turnover and high retention rates. (Foster et al., 2024). Studies

have indicated that engaging in clinical supervision can provide increased job satisfaction within mental health nursing (ACMHN, 2019), which is seen as one of the strongest predictors for remaining in the mental health workforce (Alexander, Toomey & Foster, 2024)

Led by the Office of the Chief Mental Health Nurse for the State of Victoria, Peninsula Health Mental Health and Wellbeing Service conducted a single pilot to implement the Clinical supervision for mental health nurses; A framework for Victoria (DHHS, 2018). The evaluation of this work found that a majority of mental health nurses engaging in clinical supervision, stated that their involvement in clinical supervision supported their professional development, improved their job satisfaction and their satisfaction with mental health nursing more broadly.

This presentation will provide a deeper dive into the factors that have supported the continuation of this work. Insights will also be provided on how this innovative work has built, improved access to clinical supervision and has strengthened the relationship between clinical supervision and job satisfaction for mental health nurses.

11:55am • BREAK OUT 2 – VALLEY VIEW TOM PICKUP ★, JOANNE SHEEDY ★, LEANNE BURN ★, SHEENA LANGENBACH ★♥

Tom is a qualified social worker with over 25 years experience in a number of public health services in the UK and Australia. Over the course of his career Tom has developed clinical expertise in mental health, strategic planning, service design, quality management and project leadership. In his current role as Operations Manager, Tom is responsible



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for the Lived Experience workforce at Monash Health and is passionate about embedding Lived Experience perspectives in every facet of mental health service planning, delivery and review.

Jo Sheedy has over 28 years' experience working from a consumer lived experience perspective in mental health (1997 - 2024). Having built her career at Monash Health, she has worked in many different roles, including as a: Consumer Consultant, Peer Worker, LLEW Project Lead, Lived Experience Perspective Educator, and currently as a Senior Consumer Consultant. Her areas of special interest include: LLEW training and education, co-production and co-design, consumer workforce development, and the impact of mental illness upon families.

Leanne Sheedy: Since joining Monash Health in 2021, I have worked in various designated consumer Lived Experience (LE) roles, including Consumer Inpatient Peer Worker, Consumer Inpatient Peer Work Team Lead, and most recently, Consumer Consultant on the Mental Health Service Reform Team.

First and foremost, I bring to my work a LE of complex mental health challenges and recovery, combined with recent and contemporary experience working within the mental health program at Monash Health, tertiary qualifications, and participation in ongoing professional development.

I am a strong advocate for mental health reform and believe in the development and embedding of LE work, expertise and perspectives into mainstream mental health services – a priority highlighted by the Victorian Royal Commission in Mental Health.

Consumer Choice Pilot: Increasing Choice Through Non-clinical Interventions on an Acute Inpatient Unit

★ First Time Presenter ♥ Co-produced Presentation

The Consumer Choice Pilot was a Victorian Department of Health funded initiative aimed at improving meaningful choice for consumers in the adult inpatient mental health setting.

The pilot was undertaken at Monash Health between July 2021 to July 2023, in partnership with Southern Synergy (Monash University) who supported the co-design aspects of the pilot and undertook the formal evaluation.

Aligned with the Royal Commission into Victoria's Mental Health System Final Report recommendations, and building on the VMIAC Declaration (2019), the Pilot had the following objectives:

- Establish a consumer-led project team comprising of lived experienced staff and clinicians. This involvement of nursing staff was critical to the success of this pilot.
- Use co-design methodology to explore and implement a range of additional therapeutic supports and treatment options on an adult acute inpatient unit to support recovery and promote consumer choice.
- Establish a research-based evaluation methodology to measure the effectiveness of these additional therapeutic supports and treatment options on consumer choice.

This presentation describes the journey undertaken in this pilot, the collaboration that took place between Lived Experience, Nursing, and Allied Health employees, the range of interventions implemented, and the outcomes and feedback received.

**11:55am • BREAK OUT 3 – JOCKEY ROOM
ADRIENNE LIPSCOMB**

Adrienne Lipscomb is a proud Wiradjuri woman and registered psychiatric nurse with experience

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working in a range of mental health settings. She is currently a senior Aboriginal Therapeutic Practitioner for VACCA's Aboriginal Children's Healing Team where she provides cultural and therapeutic practice advice, secondary consultations and leads the team's healing capability and training program. Adrienne is lecturer in the Department of Nursing, Faculty of Medicine, Dentistry and Health Sciences at University of Melbourne

Cultural Safety in Mental Health Care for Aboriginal and Torres Strait Islander Peoples

First Nations people have a right and need for culturally appropriate mental health care. Services that are responsive to the cultural needs of the Aboriginal and Torres Strait Islander peoples play an important role in closing the gaps in mental health disparities.

Indigenous Australian cultures possess unique protective factors that contribute to fostering and promoting good mental health. However contemporary, historical, and intergenerational impacts of trauma stemming from colonisation, socio-economic disadvantage and systematic racism has contributed to significantly higher rates of mental health issues than non-Indigenous Australians. Despite greater need, Aboriginal people have limited access to Culturally Safe and responsive mental health services.

Aboriginal health, wellbeing and safety is the responsibility of all health professionals. The bulk of mental health care is delivered by non-Indigenous practitioners however few non-Indigenous mental health workers report the knowledge or skills to embed Cultural Safety in practice. Mental health organisations have a responsibility to deliver Culturally Safe services and ensure they are free of racism.

VACCA aims in this presentation aims to create an

understanding of the importance of Cultural Safety within mental health services with a focus on the meaning of Cultural Safety for health professionals and principles and strategies for implementing Cultural Safety within mental health.

11:55am • BREAK OUT 4 – COMMITTEE ROOM EUAN DONLEY, GLENDA HARRINGTON , JACOB DOWLING ★

Dr Euan Donley is a clinical lead at Mental Health Access. He spent many years working in emergency and during this time completed his Masters and PhD examining risk assessment in mental health at emergency departments.

Glenda Harrington has worked as a mental health nurse for 30 years, with experience in a wide variety of mental health services. She is currently the acting manager of Mental Health Access which incorporates Eastern Health Crisis Services including the CAT Team.

Jacob Dowling is an Enrolled Nurse and commenced working in mental health in 2017 via an EN TSP program. He has worked in a number of areas including education and is currently one of the ENs on CATT.

Implementation of Psychiatric Enrolled Nurses to CATT and Beyond at Eastern Health

The last 5-10 years have been unprecedented in the amount of people seeking mental health support, many of whom require a crisis assessment in the community or an emergency department. This increase in demand is further complicated by continued workforce shortfalls across the mental health sector and mental health nurses.



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The use of Psychiatric Enrolled Nurses in crisis teams has been underutilized and is a valuable asset in providing nursing care and support for people experiencing poor mental health. In 2023 the Eastern Health Crisis Assessment and Treatment Team (CATT) first employed Psychiatric Enrolled Nurses as an addition to existing staff profiles. This implementation involved significant negotiations with many government and organisational services and utilizes a slightly limited scope of practice to Registered Mental Health Nurses.

This presentation will focus on the planning for, and implementation of the PENs, their scope of practice, how they became embedded in the teams, a PEN reflection on their personal experience, how the employment of ENs in CATT can be initially researched, and the future directions for employment and scope of practice for PENs in the CATT.

12:20pm • BREAK OUT 1 – MOUNTING YARD CHRISTINE CUMMINS

Christine Cummins is a Mental Health Nurse Consultant with Bendigo Health. Her clinical experience includes inpatient and community nursing, crisis intervention and trauma counselling, all enhancing her passion to promote best practice in mental healthcare. Currently working in the professional development team, her position enables her to guide clinicians into strong ethical and reflective practice.

Introducing Group Clinical Supervision to Empower and Nurture our Workforce

Clinical Supervision (CS) is identified as a practice that directly benefits the nursing workforce. Increasing job satisfaction and morale, ensuring patients receive optimal care, enabling reflection and learning, and building a culture of best practice

and innovation. Gaining access to individual CS is often challenging. Obvious barriers are shift work and the high demands of the workplace however, limited engagement can be due to poor understanding and cultural resistance. My role and passion for CS have allowed me to address these barriers. I have been involved with supporting the Victorian Mental Health Nursing Clinical Supervision Framework and establishing group CS has been a goal.

In the process of introducing group CS I watched staff navigate resistance and doubt and journey to awareness of the valuable contribution to development and wellbeing. I have witnessed group CS provide an environment of psychological safety, accepting diversity of opinions. I also experienced sessions when the opposite occurred, when clinicians were left raw and exposed. Instead of blaming the process I set about understanding the frameworks, models, and presenter styles to seek improvement. Groups are now running in four community and three inpatient teams offering quality growth and nurturing to our workforce.

12:20pm • BREAK OUT 2 – VALLEY VIEW MELISSA KELLER-TUBERG, FIONA BROWNING ♥

Melissa Keller-Tuberg (she/her) is the Senior Youth Consumer Consultant leading the codesign of Peninsula Health's Expansion of Infant, Child and Youth Community Mental Health and Wellbeing Services. She is passionate that people with lived/living experience will always have the most relevant knowledge about experiences of accessing mental health services, and the people we seek to support deserve a voice in the decisions that impact them.

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Inclusive Engagement and Lessons Learned from a Lived/Living-experience Led Codesign of a Tier 3 Community Infant, Child & Youth MH&W Service

Peninsula Health took a significant step towards realising the Royal Commission's vision for Victoria's mental health system by initiating a lived/living-experience led codesign for a 0-25 years Infant, Child, and Youth mental health service. The main goal was to create key service features addressing the needs of young people and their families/carers, integrating these into the model of care.

Over 15 local young people (16-25), young carers, and family members/carers participated in 19+ hours of workshops, interviews, and surveys, involving First Nations, LGBTQIA+, Multicultural, and disabled communities. 100% of codesigners who took part in an evaluation agreed that they felt safe, supported, and valued throughout.

The process produced 30 recommendations across five key themes: enhancing service accessibility, developing youth and family-friendly communications, recognizing families as partners in care, youth-guided language, and recovery-oriented pathways out of care. This presentation will cover the engagement approach, key themes, recommendations, evaluation data, and staff reflections. By sharing our experiences from this lived/living experience-led service reform, we aim to highlight the insights and improvements gained from our experience.

Our commitment remains strong to work collaboratively, transparently, and responsively, ensuring these contributions are integrated into the ICY model of care and central to our service transformation.

12:20pm • BREAK OUT 3 – JOCKEY ROOM COREY SCAFFIDI ★

Our LGBTQIA+ Colleagues: It's Not All Cupcakes and Rainbows

Though awareness and acceptance of LGBTQIA+ identities grows with each year that passes, our community still experiences stigma and discrimination in many areas, including when accessing health care. Many organisations, despite flying rainbow flags and putting on morning teas are taking a long time to make meaningful change to systems which perpetuate microaggressions against queer consumers and our queer colleges are observing our responses. LGBTQIA+ mental health nurses carry the burden of being placed in the position of unofficial educators and advocates, which can be mentally and emotionally taxing, leading to burnout. And that's only if they feel safe enough to come out at work. Recent statistics have shown that 60% don't and those figures have declined in the last three years (AWEI, 2022).

Here's what you need to know about how to be an LGBTQIA+ ally and why it's so important.

12:20pm • BREAK OUT 4 – COMMITTEE ROOM JENNIFER RAMBOCUS

Jennifer is a credentialed mental health nurse currently working as a Mental Health Practitioner in a government secondary college. Jennifer has been a mental health nurse for over 20 years, and prior her current role, has worked in a variety of clinical settings in different roles. Jennifer has always had a passion for education, clinical supervision and working with others to build capacity and mental health literacy. In her down time, Jennifer enjoys



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spending time with her children and has become an unofficial “driver” for all of their sporting and leisure activities. This will be Jennifer’s first solo presentation at the Collab conference.

Mental Health Practitioners in Secondary Schools

Mental health concerns among adolescents in secondary school settings have become increasingly prevalent, necessitating innovative approaches to support their well-being.

In response to this the Department of Education introduced the Mental Health Practitioner (MHP) initiative in 2019 to address the need for in-school mental health and wellbeing supports in Victorian government schools. Mental Health Nurses (MHN) were one of the original four disciplines that eligible to take on these roles, opening the opportunities of work setting where a MHN could practice and contribute the mental health needs of young people. Working within an educational setting with varying models of support in place and adapting to a multi-tiered system to provide wellbeing support and clinical care certainly exposes MHN to explore new teams and MHN roles.

This presentation will draw upon my experience in moving from an adult mental health service, to a western suburbs’ government secondary college. It will highlight the challenges of adapting from working in a tertiary clinical setting to a secondary setting. It will demonstrate the way MHN skills can be applied working within a wellbeing team, and will also celebrate the opportunities afforded to connect with young people and school staff in order to improve their mental health literacy among other things.

12:45pm • BREAK OUT 1 – MOUNTING YARD ANITA CAPPELLO

Anita Cappello, a mental health nurse currently working in a Senior Clinical Nurse Educator role with the Eastern Health Learning & Teaching team. Part of my role is supporting the training and engagement of clinical supervision for Mental Health Nurses at Eastern Health

Group Reflective Practice – An Approach to Supporting Clinical Supervision Engagement for Nurses Working in Inpatient Settings

The benefits of clinical supervision for mental health nurses are well-established; providing a protected space which encourages reflective practice, professional growth and development, and supports retention of the nursing workforce.

Historically, most inpatient settings at Eastern Health have been provided with group supervision, with participation open to nurses working in a particular clinical area.

A barrier to clinical supervision engagement raised by clinical leaders was the experience and comfort levels of junior clinicians engaging in reflective practice, particularly in a group setting.

This presentation outlines a structured model of group reflective practice which has been implemented for nurses in an Eastern Health inpatient setting and was developed to address the above concerns. The implementation for this model was time-limited, based on expression of interest from inpatient nurses, and was incorporated into rostering for the clinical area.

These structured sessions aimed to provide a safe environment for reflective practice without the pressure to share, catering especially to early-career nurses. The model introduces participants to various reflective practice concepts, fostering

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ongoing use in their practice. Evaluation indicates positive engagement and continued participation in clinical supervision. Plans for this model include trialing this approach with other inpatient and community-based teams.

12:45pm • BREAK OUT 2 – VALLEY VIEW LARISSA BERREL ★ ANDREW JONG

Larissa is senior mental health nurse and has worked in a variety of roles at Alfred Health. Larissa has a passion for working with the homeless and marginalised consumers of the mental health service. She is currently working at the Access Team at Alfred's infant and child mental health service and is a nurse practitioner candidate.

Andrew Jong is the discipline senior of mental health nursing at Alfred's infant, child and youth mental health and wellbeing service. He too has a passion for developing early in career mental health nurses, the promotion of clinical supervision, and developing and fostering positive culture working mental health nursing.

Intersection of Out-of-Home-Care and Community Mental Health Nursing

One of the biggest challenges for all young people is to develop the skills and means to achieve and maintain independent living. Young people leaving state out-of-home care with previous experiences of significant trauma, abuse, and neglect are arguably one of the most vulnerable and disadvantaged groups in society. The Australian Institutes of Family Studies have found that care leavers have been found to experience significant health, social and educational deficits, including homelessness, involvement in juvenile crime and prostitution, mental and physical health problems, poor educational outcomes, inadequate social support systems, and early parenthood.

With increasing cost of living pressures, demand for youth mental health services and a decline in affordable housing, Larissa and Andrew, both proud mental health nurses working in the Access Team at Alfred's Infant and Child Mental and Wellbeing service aim to highlight the intersection of mental health care and homelessness. In this de-identified case presentation, that talks to the experience of working with are young person leaving state out of home care, they also aim to highlight the intersection of community mental health nursing in non-traditional bed based clinical roles and show case the breath of mental health nursing.

12:45pm • BREAK OUT 3 – JOCKEY ROOM LILLY MERCER ★

Lily is a proud Gadigal woman of the Eora Nation with strong cultural connections to Bundjalung Nation. Lily has worked in both community and inpatient settings as a Registered Mental Health Nurse. Lily has completed her Post Graduate qualifications in Mental Health Nursing and will complete her Masters of Mental Health Nursing at RMIT this year. Lily currently works as a First Nations Mental Health Nurse at St Vincent's Hospital.

Does the Introduction of a First Nations Mental Health Nurse Improve Cultural Capability of Non-Indigenous Staff, Resulting in a More Culturally Safe Experience for Consumers?

St Vincent's Hospital Melbourne holds five state-wide beds incorporated into the Acute Inpatient Ward for First Nations consumers working under a Social Emotional Wellbeing Model, (SEWB). Historically, the Koori Team has not included a specific Identified position within the team. The



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introduction of the First Nations Mental Health Nurse to the team highlights the importance of representation of First Nations people within the Koori Team and broader St Vincent's Hospital Melbourne. The role aims to embed culturally safe clinical care within the Emergency Department, Alcohol and other drug hub and Acute Inpatient Services (psych). The role is focused on the delivery of cultural and clinical care under a SEWB model within the AOD HUB, AIS and ED. The First Nations Mental Health Nurse in partnership with VAHS will develop and deliver a more culturally safe experience for First Nations consumers, educate staff and embed the SEWB model across the acute mental health service.

2:05pm • BREAK OUT 1 – MOUNTING YARD PEIHLING FOO ★

Is Vital Signs Assessment Important in the Acute Mental Health Setting? A Review of Fundamental Nursing Textbooks.

The recognition of physiological deterioration is as important in consumers with a serious mental health illness as in those admitted to an acute medical surgical setting. Despite this, the importance of vital signs assessment in consumers with a serious mental health illness is often overlooked in contemporary mental health nursing textbooks. A total of 33 fundamental mental health nursing textbooks were audited. Two of the 33 texts described vital signs assessment. The rigorous assessment of vital signs is an important nursing issue relevant to the acute care and mental health settings. The relevance of vital signs assessment in consumers with a serious mental health illness is a critical issue for authors, nurse educators and education resources to address and for clinicians to be aware of.

2:05pm • BREAK OUT 2 – VALLEY VIEW CLAIRE HAYES ★, RENEE MOLLOY ★, SAM SCOTT ★

Dr Claire Hayes has over 16 years clinical experience, predominantly working with young people in an inpatient setting. Claire completed her PhD in 2020, which focused on adolescent inpatient models of care. Claire commenced as an academic for Monash University in 2021

Renee Molloy is a credentialed mental health nurse who began her career as a nursing educator in the TAFE sector teaching into the Diploma of Nursing. Renee currently works full time as a lecturer at Monash University and holds an adjunct position at Trinity College Dublin as an Associate Professor in Mental Health Nursing. Renee's research interests include the involvement of people with lived and living experience in health professions education, and improving health outcomes for people living with mental health conditions with a particular focus on preventing diagnostic overshadowing.

Samantha Scott has over 20 years clinical experience, predominantly working with adults in community and inpatient settings. Educationally, Samantha began as a preceptor- often taking students within her clinical roles and held the student clinical placement portfolio when working in community mental health for many years- ensuring students had support whilst on placement. She became a clinical placement educator in the TAFE sector and then moved to the tertiary sector, starting to teach for Monash University in 2017 as a teaching associate.

Enhancing Mental Health Nursing Graduate Preparedness: The Role of Simulation in Nursing Education

There is an expectation for registered nurses to commence their graduate programs equipped with the fundamental skills to care for people

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with complex mental health conditions. The reality is most pre-registration courses have one discrete mental health unit and three weeks of clinical placement. Surprisingly, this exposure is not mandated for a pre-registration course to be accredited with ANMAC.

Universities decide how to adequately prepare their graduates to work in mental health settings. Being underprepared for clinical practice brings about many challenges and implications. For the graduate, work readiness or lack of can impact their confidence, ability to remain in the health service and ultimately service user safety and quality of care.

Mental health nurse educators have had to think of creative ways to maximise the education provided to best ensure workplace readiness. Consequently, simulations were deemed to be most appropriate to immerse students in the 'real' clinical setting. We created three simulations based on persons experiencing mental ill health emphasising outcomes related to listening and building meaningful relationships.

The simulations proved valuable. Survey responses showed improved confidence and ability in communicating with people experiencing mental illness and distress. The simulation also increased empathy towards people experiencing mental ill health.

2:05pm • BREAK OUT 3 – JOCKEY ROOM
JESSICA NAQQASH

Jessica Naqqash is the Associate Director of Learning & Teaching for Mental Health & Statewide Services at Eastern Health and have been with L&T since early 2017. Prior to this, She is an experienced mental health nurse who's had the opportunity to work throughout both inpatient and community mental health services and across the age spectra from perinatal and infant through to older persons

mental health. Abstract title: Enhancing Mental Health Nursing Graduate Preparedness: The Role of Simulation in Nursing Education

Nurture, Inspire, Empower & Retain – Cultivating & Sustaining a Positive Workplace & Culture of Accountability

In large organizations, fostering a positive workplace culture is acknowledged as imperative for staff retention and wellbeing. Emerging research has identified several key factors influencing staff wellbeing and longevity within an organization.

This presentation offers a succinct overview of the fundamental drivers behind retention and wellbeing within the Eastern Health Mental Health Learning & Teaching Team. It aims to provide insight into the team's journey through significant change and expansion, delineating the challenges overcome and outlining key components and commitments necessary to foster a continued positive team culture.

Furthermore, the presentation will share key findings from employee feedback, evaluating and discussing the key contributors to positive employee experience while proposing actionable recommendations and plans for ongoing improvement.

2:05pm • BREAK OUT 4 – COMMITTEE ROOM
ALISON HANSEN, ROBYN ROSINA, MICHAEL HAZELTON, KERRY INDER

Alison is a Credentialed Mental Health Nurse, Senior Lecturer and Deputy Director of Education at Monash University. Her clinical focus is in the area of forensic mental health nursing, specifically working with women in this setting. She is currently enrolled in a Doctor of Philosophy (Nursing)



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exploring the use and experience of seclusion for women in secure forensic hospitals.

The focus of Alison's teaching is mental health nursing across pre and post-registration courses. She is passionate about supporting students to think critically about their practice and challenge pre-existing ideas, and promote mental health in order to break down barriers and support inclusion, in a supportive learning environment. She has a strong focus on reducing stigma, supporting recovery and reducing coercive practices.

Mental Health Nurse as Researcher: Reflexivity in Mixed Methods Research with Women in Forensic Settings

Women are a minority in forensic mental health settings, are highly marginalised, with complex experiences of mental ill health, substance use and trauma. Women are incarcerated at higher rates than men and the number of women requiring forensic care is also increasing. However, research continues to focus on men in this setting. This presentation will describe a reflexive account of a mental health nurse as researcher in undertaking a doctoral study.

A mixed methods study was conducted to explore factors associated with seclusion use for women, and listen to their experiences of seclusion. A reflective diary was used to record reflexive approaches and strategies used to enable transparency and credibility at all stages of the research process.

Mental health nurses as doctoral students undertaking research, may experience challenges related to identity and the dichotomy of the dual role as mental health nurse and researcher. Challenges extend where research involves complex populations, negative experiences and/or controversial clinical practices. Reflexive strategies to enhance awareness of identity to balance role conflict, will support

reflexivity, thus increase the research integrity, validity and credibility of the research. This is vital where research aims to listen to, and interpret the voice of an often unheard population.

2:30pm • BREAK OUT 1 – MOUNTING YARD HARRY SINGH

Harry Singh, Senior Psychiatric Nurse from Eastern Health Mental Health, and Wellbeing Program. Working with public mental health since 2013, prior to this worked as a microbiologist in Australia and New Zealand post completing Bachelor of Science with majors in microbiology in 2006. Decided to study nursing with passion to travel far beyond being stuck in the lab.

Completed bachelor's from Latrobe university Bendigo and Post grad diploma in mental health nursing from ACU. Currently, finishing masters in mental health nursing at RMIT University. Over the years, I have developed interest in the quality improvement science and change management. Now on a mission to help consumers and carers find their voice in optimising holistic care for mental health consumers by leading the Equally well steering committee at Eastern health MHWP.

In my spare time after work and university, I like to travel with my family to small country towns, enjoy BBQ, music and enjoy nature walking.

Implementation of Equally well Framework in Victoria - Journey at Eastern Health Mental Health and Wellbeing Program

Joint presentation talks about our journey at the program about converting the policy into practise by partnering at all the levels. This involved pulling together work being undertaken in different areas of the program to target the priority areas set out

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by the Victoria equally well framework for specialist mental health services.

This process of collaborating and partnering with experts from lived experience team to prioritise and plan actions from the gap analysis that was undertaken across the program has proven to be successful. So far the effort of working together has achieved development of a short education package to help develop clear understanding and expectation from all clinician staff in the program, development of brochures, pamphlets to promote health literacy, group programs aiming at healthy lifestyle and diet choices in the community, adjusting the existing audits to help with measuring performance and so on. This has proven to be a great space to support leaders, managers and other leads with the latest approaches for meeting health needs of the consumers of the public mental health service in Eastern metropolitan area.

The committee work plan continues to envisage towards incorporating best practices to support consumers with preventing falls, better oral health and sexual / reproductive health outcomes.

2:30pm • BREAK OUT 2 – VALLEY VIEW RENEE MOLLOY ★, JAMES BONNAMY

Renee Molloy is a credentialed mental health nurse who began her career as a nursing educator in the TAFE sector teaching into the Diploma of Nursing. Renee currently works full time as a lecturer at Monash University and holds an adjunct position at Trinity College Dublin as an Associate Professor in Mental Health Nursing. Renee's research interests include the involvement of people with lived and living experience in health professions education, and improving health outcomes for people living with mental health conditions with a particular focus on preventing diagnostic overshadowing.

James Bonnamy (he/him) is a Registered Nurse who has woven together his roles as educator, researcher and clinician. James is currently working as Research Fellow, Teaching Associate and PhD Student at Monash University. In addition to his academic appointments, James is a Clinical Nurse Specialist. It was through living the experience of cancer care and survivorship that James became passionate about ensuring the consumer and community voice is at the forefront of health professions education and research. His teaching, research and clinical practice transcend disciplines including nursing, midwifery, paramedicine, and planetary health.

Beyond the DSM: Embedding Lived Experience into Eating Disorder Education for Pre-registration Nursing Students

Traditionally, eating disorders education for nursing students has been delivered through the DSM diagnostic criteria drawing on a clinically focused perspective, lacking insights from those with lived experience. This contradicts the recovery-oriented, person- and family-centred, trauma-informed, and strengths-based approaches in the Australian National Eating Disorders Strategy 2023-2033.

To prepare our graduates to provide care that aligns with this strategy we embedded "Shannon's workshop" into our curriculum. This workshop was co-produced with lived and learned experience experts using critical perspectives and insights to challenge the dominant biomedical approach to eating disorders education, honouring the complexities of what life is really like living with and recovering from an eating disorder. The centrepiece of the workshop is a narrative portrait infused with artefacts rich in symbology and story, to challenge students' concrete, literal and clinically focused thinking about eating disorders.



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Using a qualitative inquiry-based approach, we discovered that reframing eating disorders education through co-produced, creative, and humanistic methods promotes a strengths-based, trauma-informed, and recovery-focused perspective. This allowed learners to reflect on and potentially transform their approach to care. In this presentation, we will showcase "Shannon's workshop" to illustrate how co-produced education can be effectively embedded into pre-registration nursing curriculum.

2:30pm • BREAK OUT 3 – JOCKEY ROOM
JESSICA REECE

Jessica Reece has a split role at Peninsula Health, working as a Lived experience Alcohol & other drug educator bringing her lived experience perspective to inform and support education. She also is a Care and Recovery Clinician working directly with clients who are experience Alcohol and other Drug concerns. She has worked in alcohol and other drugs field for 6 years. She is passionate about having a positive impact in the lives of those who use substances and to build empathy and compassion in our workforce who are supporting those who use substances.

Kirsty Morgan is public health practitioner with over 25 years' experience in the community health sector in a variety roles dedicated to improving health and social outcomes for people who use drugs. She is currently an Alcohol & other Drugs Educator at Peninsula Health. Throughout her career she has been responsible for the development, implementation and evaluation of initiatives aimed at primary and tertiary prevention of drug-related harms. She is also an Adjunct Research Associate at Monash University's Addiction Research Centre.

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Lived Experience Educators: Key Ingredients in Fostering Organisational Cultural Change and Coproduction Approaches

Victoria is soon to have its own LLE Leadership Strategy to guide growth of LLE leadership in the Victorian mental health, alcohol and drug (AOD), and harm reduction service system over the next ten years. Lived experience leaders are key to leading change, both at an organisational and systems level, to shift the paradigm from traditional 'deliver and inform' approaches to, 'co-design and co-production' approaches as per the Mental health lived experience engagement framework.

Lived experience leadership can take many different forms, and function through many different roles, such as program and service managers, consumer advisors, and lived experience researchers. This oral presentation will discuss the role of Lived Experience Educators in Mental Health, AOD and mainstream health services, and explore how their role can help drive organisational change to create enabling environments for LLE workforce, and for the implementation of co-production approaches.

We will present the function and impact of having an AOD Lived Experience role at a metropolitan health service, and the barriers and enablers for lived experience educators to act as leaders in supporting organisational change, as we work towards creating environs in which consumers and the LLE workforce are central in decision making and the shaping of future service delivery.

2:30pm • BREAK OUT 4 – COMMITTEE ROOM
HALEY PECKHAM

Dr Haley Peckham's background includes philosophy, mental health nursing, psychotherapy and neuroscience and her perspective is grounded in a colourful lived experience of recovering from

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complex trauma. While studying Philosophy Haley worked with children and adolescents in 'care' and, realising that as adults they were over-represented in the criminal justice system and mental health services set out to understand the relationship between early experiences and brains, minds and behaviours. Whilst working as a Mental Health Nurse Haley studied Molecular Neuroscience at Bristol and gained her PhD from The University of Melbourne where she learned the neuroscience of how experiences shape brains and the evolutionary biology that illuminates why experiences may shape us the way they do. These insights are critically important for clinical practice especially for the delivery of coherent ACE aware and Trauma-Informed approaches and Haley seeks to share them with interested professionals in Australia and the UK.

So Now we Know Experiences Shape Brains. So What? Let's C.H.A.T About the Neuroplastic Narrative

The Neuroplastic Narrative is a biological narrative and an alternative to the Medical Model, which instead of looking for our pathology looks at how our ecology is embedded 'under our skin'. It offers any of us who struggle with the impact of transgenerational trauma, complex trauma, adversity and inequity, a dignified, non-shaming way to make sense of our distress and behaviours without pathologizing ourselves. The Neuroplastic Narrative recognizes that experiences shape brains, relationships shape brains, and that our early environment influences our agency in time, whether we seek or defer immediate rewards in favour of long terms gains. But neuroplasticity itself, on which the theory is founded, refers to the capacity of neural systems to adapt and change. So where do we start?

The Neuroplastic Narrative's premise that experiences shape brains, offers compassion retrospectively, for

past experiences that have happened and cannot be changed; and hope, prospectively, for new experiences to become embedded mitigating the impact of the earlier harmful experiences. It also raises our awareness of how we experience our agency in time; how often and in what contexts do we prioritise short term gains over long term goals? A handy acronym: C.H.A.T.

2:55Pm PLENARY SPACE – CELEBRITY ROOM PANEL

Celebrating the Win Win: Recognition and mutual regard across MH Nurses and LE Workers: Champion Panel.

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