



2012 Program Outline

Transition to
Practice for
Mental Health
Nurses



Government
of South Australia

SA Health

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Welcome

Welcome to the Transition to Practice Program for Mental Health and Drug and Alcohol Nurses. It is well recognised that the transitioning year presents new challenges and potential stressors when beginning a career and practice as a Mental Health or Drug and Alcohol Nurse.

For graduates the transition from student to graduate status can be daunting, demanding and at the same time an exciting experience. As clinicians with new roles, responsibilities and accountability for practice, graduates are still in the process of learning. Learning is achieved by developing a repertoire of knowledge and skills required as a Mental Health Nurse or a Drug and Alcohol Nurse. In recognising that this phase of professional development can be stressful and may provoke anxiety and uncertainty [1, 2] this program is designed to provide a supportive and positive learning environment.

The learning journey within the Transition to Practice Program will enable the Transitioning Nurse to increase clinical confidence, consolidate knowledge and engage in reflective practice. This development is supported by Clinical Facilitators and Clinical Supervisors and ongoing exposure to the clinical environment.

Processes to support a positive learning environment include:

- > A comprehensive orientation to your workplace
- > Regular and timely Clinical Supervision
- > The allocation of experienced Clinical Support Facilitators throughout clinical rotations
- > Professional development days scheduled throughout the program.

The Mental Health Nursing Directors, Mental Health Nurse Educators, Nursing and Midwifery Office and Principle Mental Health Clinicians within South Australia strongly endorse this program. We hope this will be a positive experience and trust that participation in the program will support the Transitioning Nurse's professional development and provide a valuable foundation for a successful career in Mental Health Nursing.

We take this opportunity to wish all participants well as they embark on their learning journey.

Transition to Practice Program Outline

Preamble

This Program Outline details core components of the Transition to Practice Program.

The Program Outline is designed to provide clear explanation of the roles and responsibilities of the mental health service, the Transitioning Nurse and key personnel who are pivotal to the success of the program.

Program Structure

The structure of the Transitional Program includes the following:

Mental Health Service Orientation

An initial corporate/organisation orientation program which will provide orientation to the individual Mental Health Service. (NB: some participants will already be employed in the service and will have already completed this.)

Unit Based/Clinical Orientation

This is a specific Mental Health Unit / Service clinical orientation day (supernumerary day).

Professional Development Days

A total of five paid study days are held throughout the program. Professional Development Days are held at a central, urban location. Participants are not required to attend their worksites, prior to, or following completion of the day.

Clinical Rotations

At least one clinical rotation should occur during the course of the program. However, it should be noted that the number of clinical rotations offered during the program is dependent on the resources, capabilities and service delivery model of the employing mental health service. Some services are unable to offer clinical rotation to the transitioning nurse.

Support

Throughout the 40week program the graduate will have formalised (formalised by the development and endorsement of a Clinical Supervision Contract or Agreement) and ongoing Clinical Supervision and Clinical Support Facilitation (Please note: Clinical Support Facilitation is provided by the employing service)

These aspects of the TTPP are explained in more detail in the following pages of this document.

Contract of Employment

How long is the program?

The Transition to Practice Program is a notional 40 week program recognising many participants will have varying employment status.

What will the contracted hours be?

It is recommended that all graduates are employed on a FTE- of 30 - 38 hrs per week as negotiated with the employee. It is recommended that extended night duty is avoided in the first three months of the program.

Annual Leave during the Program

Annual leave should be negotiated with your employer throughout the 40 week program. Once your employer has approved your annual leave you are required to inform the Transition to Practice Program Coordinator of the dates that you are going to be on leave.

Mental Health and Drug and Alcohol Services supporting Transition to Practice Program

The Transition to Practice Program for Mental Health Nurses is available in a variety of clinical contexts that include the continuum of mental health services across the lifespan such as the following:

- > Child and Adolescent
- > Adult
- > Mental Health Services for Older People
- > Drug and Alcohol Services

Employers

Country Health SA Local Health Network

Central Adelaide Local Health Network

Southern Adelaide Local Health Network

Northern Adelaide Local Health Network

Women's and Children's Health Network

Adelaide Metro Mental Health Directorate

Orientation Overview

Corporate Orientation

Orientation consists of a corporate/organisational orientation program that provides the Transitioning Nurse with the necessary information and resources to function safely within the employing organisation. (It is acknowledged that some Transitioning Nurses will already be employed by the mental health service and therefore will already have this information)

Clinical Orientation

When will Clinical orientation occur?

Clinical orientation is provided at the beginning of the clinical placement, with an additional supernumerary clinical orientation if the participant has a clinical rotation. Note: these supernumerary days are additional to professional development days.

What are the benefits of Clinical orientation time?

The clinical orientation time provides the Transitioning Nurse with a day of comprehensive orientation in the mental health unit/team environment in which they will be working. This day will allow time for familiarisation and adjustment to the specific functions and routines of the mental health unit/team.

The clinical orientation day is an opportunity for the participating Nurse to be introduced to appropriate personnel who will assist with facilitating professional growth and support during the course of the program. The Transitioning Nurse will also be given relevant contact details for appropriate personnel.

The Transitioning Nurse will be given a tour of the facility or service and orientated to the specific mental health unit context. This will involve familiarising and locating resources such as:

- > Client group specific needs
- > Model of Care
- > Occupational Health and Safety
- > Clinical governance structure
- > Emergency procedures
- > Local training and development resources and opportunities
- > Clinical Supervision

The Transitioning Nurse will work closely with their allocated Clinical Support Facilitator for each clinical orientation day. It is recommended that orientation will involve some one to one time for the Transitioning Nurse and the Clinical Support Facilitator and will provide an opportunity for them to begin building rapport.

During the clinical orientation day the Transitioning Nurse will not be allocated a client case load. However this does not preclude the Nurse from providing direct nursing care together with their Clinical Support Facilitator during this day.

It is recommended practice that there is initial mirroring of shifts of the Clinical Support Facilitator and Transitioning Nurse during the first month of the Transition to Practice Program [3] or that the graduate works the same roster as the Clinical Support Facilitator.

Mandatory Updates

Organisations will have varying mandatory training requirements. These will support the TTPP.

It is recommended that by the eight week mark the Transitioning Nurse will have participated in all the necessary mandatory skills training and assessment requirements, as required by individual employers.

Guidelines for Clinical Orientation supernumerary days

What occurs during Supernumerary days?

- > Introduction to Unit Clinical Services Coordinator or Management Facilitator/Team Leader and the ward/team staff.
- > Complete the unit/team orientation and induction checklist.
- > Transitioning Nurse works with their Clinical Support Facilitator to familiarise themselves with routines and provide assistance with their allocated consumer/client load.
- > Transitioning Nurses will identify key resource people who they may wish to utilise throughout the clinical rotation and ensure that they have the necessary information to access these individuals e.g. pager number, extension number, knowing who to contact in the event of sick leave, incidents etc.
- > Follow the organisational orientation and induction checklist to become familiar with specific service policies, protocols and procedure documents and any other relevant resources.
- > Utilise the time to build rapport with the Clinical Support Facilitator and ensure regular one to one time to develop the learning objectives to be achieved during the placement with the nominated Clinical Support Facilitator
- > Supernumerary time in the initial clinical orientation will also be utilised to begin the process of choosing a potential and suitable Clinical Supervisor.[4,5]
- > If a Transitioning Nurse has not entered into the Performance and Review Development Planning (PR&D) process this should be initiated during this time.

Clinical Rotations

Clinical rotations support the Transitioning Nurse's learning needs [6].

Evidence supports a rotation in a community mental health setting where possible in this program [7].

The number of clinical rotations offered during the program is dependent on the resources, capabilities and service delivery model of the employing mental health service – some services are unable to offer clinical rotation to the Transitioning Nurse.

Clinical Support Facilitation

What is Clinical/Support Facilitation?

Clinical Support Facilitation is a valuable support mechanism provided to each Transitioning Nurse. Clinical Support Facilitation involves a structured relationship between the Transitioning Nurse and an experienced Mental Health Nurse, who has volunteered to provide ongoing support and assist with the transitioning needs of the novice mental health nurse, within the mental health unit.

A Clinical Support Facilitator will be identified for each setting to ensure support is readily accessible. Transitioning Nurses will email the name of their Clinical Support Facilitator to their Action Learning Set (ALS) Facilitator within two weeks of commencing the program.

The mental health service in conjunction with the Transitioning Nurse will monitor the weekly 1 - 2 hours of scheduled one-to-one time with the Clinical Support Facilitator

The mental health service will develop supportive structures and processes to ensure Clinical Support Facilitation is a priority and integral to the Transitioning Nurse's learning needs [8]. Where possible the Transitioning Nurse and their Clinical Support Facilitator will have similar shifts during the initial stages of each clinical orientation.

Clinical Supervision

Mental Health Services endorse Clinical Supervision for all Mental Health Nurses. The Transition to Practice Program for Mental Health Nurses is underpinned by Clinical Supervision.

It is a requirement of the TTPP that the Transitioning Nurse will actively participate and engage in planned and regular Clinical Supervision activities during the course of the program. This includes selecting a clinical supervisor – each employer will provide details of available supervisors. It is envisaged that the details of available supervisors will be accessible electronically in 2012. You will be updated at the time that this resource becomes available.

The Transitioning Mental Health Nurse is responsible for initiating and arranging times for Clinical Supervision with their supervisor, if times have not been scheduled.

All Clinical Supervisors will have had formalised Clinical Supervision training and have extensive experience in clinical mental health nursing practice.

The Transitioning Mental Health Nurse may change their Clinical Supervisor once during the program if this is required to address learning and/or professional development

needs.

The process of Clinical Supervision is not used as a performance review, performance management or staff appraisal tool.

What is Clinical Supervision?

'Clinical supervision refers to a formal, structured process of professional support, learning and reflective practice. It assists with:

- * understanding issues associated with practice*
- * developing new insights and perspectives*
- * improving knowledge, skills and competence*
- * enhancing support for staff while improving consumer and carer outcome*
- * professional accountability and autonomy*

ACHMN [9, 10]

Clinical Supervision can be conducted on an individual basis or it may involve a group approach [11].

Clinical Supervision differs from Clinical Support Facilitation. While the latter does offer a professional supportive relationship it lacks the challenging attributes necessary for effective clinical supervision and may have a more localized focus.

Effective clinical supervision is characterised by flexibility and adaptation to the needs and circumstances of both the supervisee (Transitioning Nurse) and the appropriately trained Clinical Supervisor. There are some underlying principles that need to be followed in implementing Clinical Supervision - Transitioning Nurses should refer to the *Clinical Supervision Policy – Mental Health Nurses*, [12] for more information regarding this. This policy is available electronically via the mental health intranet site.

What are the benefits of Clinical Supervision?

Participation in Clinical Supervision realises benefits for the Transitioning Nurse, the consumer and the mental health service. The benefits may include:

- > Enhanced support and encouragement for the transitioning mental health nurse, providing opportunities to discuss clinical issues in a confidential, safe and supportive environment.
- > Enhancing care of the consumer
- > Further development of evidence based practice skills
- > Further development of reflective and critical thinking skills, and greater appreciation of consumer care in broad/systems perspectives
- > Improvement or the maintenance of best clinical practice skills and knowledge
- > Improving the graduate's confidence in the practice arena
- > Enhancing the graduate's self awareness with regard to clinical practice and interpersonal skills
- > The acquisition of complex clinical skills
- > Enhancing principles of lifelong learning through expanding knowledge and skill base

through reflective practice and critical thinking

- > Enhanced team communication and collaboration
- > Increased job satisfaction and retention rates
- > Provision of a process to meet professional standards and credentials [13, 14]

Transitioning Mental Health Nurse's responsibilities with Clinical Supervision

The Transitioning Nurse is responsible for:

- > Maintaining an ongoing commitment to Clinical Supervision and incorporating it into their clinical practice.
- > Initiating a contract and arranging times for Clinical Supervision with their chosen supervisor, if times have not been scheduled.

Participation in ongoing Clinical Supervision will be an expectation after completion of the Transition to Practice Program if permanent employment is obtained with the mental health service.

Professional Development Days

There are five Professional Development Days, which are held at regular intervals throughout the transitioning program. Participants are rostered and paid to attend PDD's. Professional Development Days provide opportunities for the Transitioning Nurse to review their transition to the mental health nurse role, network with transitioning colleagues and identify professional development needs and opportunities. Emphases are placed on professional resilience and development of contemporary recovery focused practice.

It is anticipated that the Professional Development Days have a well rounded mixture of de-briefing opportunities, specific clinical education sessions and presentations by consumers, carers and expert Mental Health Clinicians.

Content of educational sessions will include:

- > caring for people with alcohol, other drugs and mental health co-morbidity
- > recovery focused practice
- > emphasis on consumer/carers perspectives
- > metabolic assessment and monitoring
- > the deteriorating consumer
- > leadership in the graduate context

While focusing on the priority areas of the Fourth National Mental Health Plan [15] the education session will also include:

- > social inclusion and recovery
- > prevention and early intervention
- > service access, coordination and continuity of care
- > quality improvement and innovation and,
- > accountability measuring and reporting progress

Professional Development Days are underpinned by a philosophy of:

- > reflective practice
- > a participative approach to learning

- > the principles of the Adult Model of Learning
- > respecting, valuing and appreciating the Transitioning Nurse's prior experiences.

Aim of Professional Development Days:

- > To provide an opportunity for Transitioning Nurses to de-brief, share experiences, explore areas of practice that have been challenging, confronting or successful and encourage each other in a supportive, safe, confidential, informal and non-threatening environment.
- > To facilitate professional growth and the enhancement of practice through the development of professional qualities such as critical problem solving skills, reflective practice and fostering principles of adult learning.
- > To provide an opportunity for the participant to increase their contemporary clinical knowledge in co-morbidity (working with clients living with substance misuse and mental ill health).

What are the Transitioning Nurse's Roles and Responsibilities?

Participants of the Transition to Practice Program will:

- > Demonstrate commitment to ongoing professional growth and development.
- > Foster principles of self directed learning and develop life long learning skills.
- > Attend and participate in all five Professional Development Days (a minimum of 80% attendance is required for successful completion of the program).
- > Confirm they have been correctly allocated Professional Development Days and negotiate any discrepancies with their Nurse Manager/Team Leader and inform the program coordinator
- > Appropriately record two work place challenges and critically analyse these
- > Incorporate the content of Professional Development Days in your professional portfolio

Professional Portfolio

What is a Professional Portfolio?

A Professional Portfolio is a valuable tool providing evidence of clinical practice, demonstrating a nurse's goals, growth, achievements and professional attributes throughout their career. It is a record of on-going Professional Development [16] and includes evidence to substantiate that competencies have been achieved and validates that individual learning objectives have been attained [17].

It is an expectation of the Nursing and Midwifery Board of Australia that all nurses [18]; including those in a transitioning nurse program maintain a portfolio. Maintaining an updated Professional Portfolio is considered essential practice not only for the transitioning year but throughout your nursing career. This will assist in developing reflective practice skills, which are the basis for the program assessment.

Course Assessment

Assessment one:

Option one – for participants who are not seeking University credit

This option calls for identification and discussion of two challenges that have arisen in the workplace during transition.

These challenges may relate to discussions during Action Learning Sets, be issues/incidents that have been explored with Clinical Support Facilitator or Clinical Supervisor, or they may be challenges not explored elsewhere.

The following points should be included in the discussion:

- > Clarification of the issues and relevant contextual information
- > The problem solving approach adopted (including resources and strategies used).
- > Summary of outcomes achieved in addressing these challenges.
- > Summary of outstanding learning needs and action plan.
- > Feelings evoked
- > Upon reflection, what other or different actions may be potentially undertaken in the future?
- > Consider what resources, people or allies may be available to assist with these or future challenges?
- > Can this item be incorporated within a PR&D plan?

Format

There is an expectation that this assessment will be in electronic form and referenced in an academic or a formal essay style. Essays should be well structured and contain analytical arguments supported by independent research. Transitioning Nurses will be expected to use the ideas of others to support their own opinions and ideas.[19]

Due date

This assessment item is due on the fourth Professional Development Day and should be delivered to the Project Nurse Mental Health.

Word count

1500 words for each discussion (i.e. 3000 words in total).

Grading

Papers that achieve the assessment requirements will receive a non-graded pass.

Option Two – for participants who are seeking University credit for the TTPP

Participants who successfully complete this assessment option may be able to apply for credit towards a postgraduate award. Please inquire through the Postgraduate Coordinator of the relevant university.

Reflective Paper

In this assignment the Transitioning Nurse must present specific situations from their recent transition to practice experience that caused personal and professional change.

This Reflective paper explains and explores the personal and professional changes that

took place and links these to literature related to the topic area of the change and any other aspects of the situation linked to the change area.

This Reflective paper also explains and explores the clinical and professional practice change(s) that may have resulted as a consequence of this experience.

In applying the above concepts the Transitioning Nurse is encouraged to integrate evidenced based theories and practices into their professional framework of mental health practice. The building of new (self) knowledge through transition will help the Transitioning Nurse to anticipate and respond to complex mental health problems and synthesise self-understanding as well as developing a broader knowledge of the legal, ethical, biological and social parameters of mental health care. At least 15-20 references from current (after year 2007 unless referring to seminal texts) journal articles and books are essential for this 3000 word assignment.

Grading

Papers will be graded Fail/Pass/Credit/Distinction/High Distinction. If the paper is failed, the Transitioning Nurse may resubmit. In this instance the highest grade achievable is a Pass.

Assessment Extensions: A one week extension may be granted by the Action Learning Set Facilitators; for extenuating circumstances and applicants should negotiate directly with their facilitators and inform the Project Nurse Mental Health as soon as possible of this negotiation.

Assessment Two:

A 20 minute oral presentation on a challenge that has arisen in the workplace is made in the participant's Action Learning Set (during one of the Professional Development Days). The format for, and assessment of, the presentation, will be outlined during the first Professional Development Day. Successful completion of this assessment will result in a non-graded pass.

All Transitioning Nurses are required to successfully complete this assessment.

Performance Review and Development

The Transitioning Nurse is likely to undertake Performance Review and Development (also known as 'performance appraisal' in some organisations) with the employing mental health service.

Performance Review and Development is a dynamic and systematic approach for continuously enhancing the professional performance of all staff within a service. Through this process work goals and standards are defined and performance is reviewed. As a result, strategies to address deficits can be identified, positive and constructive feedback can be provided and opportunities for future professional development identified.

Successful Completion

Upon graduating from the Transition to Practice Program there is an expectation that the Transitioning Nurse's Professional Portfolio reflects their learning and experiences from the TTPP, that they have attended at least 80% of the five professional development and have successfully completed the two program assessments.

Graduation

Graduation is an important part of the process. It is a time to celebrate achievements and the successful completion of the program. Graduation certificates will be presented during the final Professional Development Day.

Evaluation of Program

There is an expectation that the program will develop and evolve in response to ongoing evaluation and identified organisational needs.

As part of the formal evaluation of the program, participants will be asked to provide feedback regarding Clinical Support Facilitators, Clinical Supervision, Professional Development Days, Action Learning Sets and the Clinical Setting(s) in which they have worked. This process will include the evaluation of the content, structure and processes of the Transition to Practice Program.

Data is also collected at the beginning and end of the program regarding your work experience and expectations. This data is de-identified and is used by the steering committee to develop future programs.

Participation in evaluation of the program is actively encouraged and valued.

Transitioning Nurses, Clinical Support Facilitators, Clinical Supervisors, and consumers will all have opportunities to provide input into the evaluation of the program.

Glossary

Clinical Support Facilitation may be also known as “Preceptorship” or “Peer Support” depending on the model adopted within the mental health service. Clinical Support Facilitation is the agreed state-wide terminology as determined by members of the state-wide Preceptorship Working Party, Nursing and Midwifery Office Department of Health, March 2007.

Supernumerary is when the participating nurse will not be allocated a client case load however for orientation purposes this does not preclude the nurse from opportunities of providing direct nursing care.

Resources

Australian College of Mental Health Nurses: <http://www.acmhn.org/>

Australian Government Department of Health and Ageing: <http://www.health.gov.au/>

Australian Mental Health Outcomes and Classification Network: <http://amhocn.org/>

Beyond Blue: <http://www.beyondblue.org.au/index.aspx?>

Black Dog Institute: <http://www.blackdoginstitute.org.au/>

Drug and Alcohol Services South Australia: <http://www.dassa.sa.gov.au/site/page.cfm>

Mental Health Coalition of South Australia: <http://www.mhcsa.org.au/>

Nursing and Midwifery SA Department for Health and Ageing: <http://www.nursingsa.com/>

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Enquiries

Enquiries should be directed to:

Project Nurse Mental Health

Mental Health and Substance Abuse

SA Health

PO Box 287, Rundle Mall

ADELAIDE SA 5000

Phone: +61 +8 +84637118

Fax: +61 +8 +82266235

www.nursingsa.com

E-mail: nursing@health.sa.gov.au