



HEALTH PASIFIKA MENTAL HEALTH SERVICE

2019

ORIENTATION BOOKLET



Name

Title

Team/Service

Health Pasifika MHS

Preceptor/Mentor

Your orientation began

Your orientation completion date:

Treasure Hunt

This list is designed to help you become familiar with the environment, but is by no means exhaustive of all the things you will be required to locate.

- Clinic/Examination room
- Dangerous Drug cupboard
- Medication Fridge
- Medication Charts
- Team Leader
- CNE/ACNM Office
- IM Syringes & Needles
- Kitchen store room
- Staff tea room
- Cleaners room
- Xray facilities
- Clean utility room
- Dressing Materials
- Oxygen isolation "shut off" valve
- Dressing Supplies
- Alcohol Swabs
- Where to store your bags
- Plain Gauze
- Clinical policies & procedures
- "Notes on Injectable Drugs"
- Yellow sharps containers
- Manual BP machine
- Suction Equipment
- Bio-hazard bags
- Tympanic thermometers
- Stationery supplies
- Photocopier
- Patient charts
- Laboratory forms
- Linen bags
- Incident Forms via C&CDHB Intranet
- Assessment Room
- Sterile Gloves

CRITERIA FOR ACCESS TO MENTAL HEALTH SERVICES

Capital Coast Health Ltd is contracted to provide specialist Mental Health Services to all persons with a serious deterioration in mental state or the ability to function who are living within the geographical boundaries for Capital Coast Health Ltd, or persons who are in transit, or who have been transferred for care under a contractual arrangement agreed with another Health and Hospital Service.

A referral to Mental Health Services for assessment should be made if:

- The person's behaviour and/or psychiatric history suggests they may be suffering from:
 - A psychotic disorder
 - A cognitive-behavioural disorder
 - A dissociative disorder
 - A personality disorder
 - An anxiety disorder
 - A mood disorder
 - An addiction disorder
 - An adjustment disorder
 - A somatoform disorder
 - An impulse control disorder

OR the person is referred under the Mental Health Act or Criminal Procedure (Mentally Impaired Persons) Act and requires assessment under the provisions of the appropriate Act.

OR as the result of a disorder, a person is at risk of:

- Suicide
- Entering dangerous situations because of impaired judgement
- Dangerous behaviour to others or damage to the property of others

OR the person is significantly disabled by a psychiatric disorder and is without appropriate support.

If any of the above are confirmed on assessment the person will be accepted for treatment. If not confirmed, the person and the referrer will be informed and alternatives to CCHL Mental Health Services will be suggested.

EXCLUSIONS

CCHL Mental Health Services are not contracted to provide services for:

- People with disorders related to aging.
- People with intellectual disabilities who do not have a co-existing mental disorder.
- People with developmental disorders who do not have a co-existing mental disorder.
- People experiencing relationship difficulties.
- People requiring parenting services.
- People requiring general counselling.
- People requiring extended hospital or residential care.
- People requiring family health counselling services.
- People solely experiencing anger and violence issues.

Common Medications

This section should briefly explain the policy for your DHB/organisation, as it relates to students. Please list some of the common medications or medication types, the student should be advised to read up on these before they attend the placement.

- Na Valporate
- Epilum
- Carbamazepine
- Lithium
- Olanzapine
- Risperidone
- Clozapine
- Risperidal Consta
- Citalopram
- Fluoxetine
- Aropax

- Fluphenazine
- Flupenthixol
- Paraperidol (dispensed by hospital pharmacy)
- Haloperidol

ORIENTATION PROGRAMME

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AFIO MAI: MALIU MAI.

TALOFA, KIA ORA, NISA BULA VINAKA, FAKALOHA LAHI ATU,
HALO OLAKOTA, MALO E LELEI, KIA ORANA, TALOHA NI, MAURI

E muamua lava ona matou faatalofa ma faafeiloa'i atu I lau susuga. Faafetai ua maua lenei avanoa taua ua tatou feiloa'i ai i le lagi e mama ma le soifua maua. Ae tatou mua'i lafo la'au o malo I Foga'a ma sula le agalelei o le Atua ona o lana tausiga alofa ia'i tatou. O lea ua taulau o le fa'amoemoe ua leva ona moe miti iai le 'aufaigaluega a le Health Pasifika. Ua taunu'u le faiga-malaga ma tatou fesilafa'i i luma o le nuu ae le o tua ole nu'u. Fa'amalo le Malaga manuia.

O le fa'amoemoe maualuga o le 'aufaigaluega ia e maua le fiafia tatou te galulue fa'atasi i le fealofani ma le fe'oe'oea'i e ala lea ia tatou galuega fai mo e mama'i i le mafaufau. Ia alofagia e le Atua lou tula'i mai i lea tulaga social work student ia fa'atamaoagaina pea lau susuga i le tomai o le Atua aua galuega ua filifilia iai. Manuia lou alo atu I le galuega fou.

WELCOME

First and foremost we would like to greet and welcome lau susuga I. We also would like to give thanks to our God and Saviour for this marvellous opportunity that He has allowed for us to meet in safe and healthy conditions. It is a pleasure to have you on board at Health Pasifika as a 3rd year Massey student who is willing to observe and learn about our work with Pasifika clients who are suffering from Mental illness.

It is the utmost wish of the staff at Health Pasifika that you will be happy working with us in a collaborative and cooperative manner. We pray that God will continue to bless you on this part of your journey and help you gain the knowledge and skill to be a successful Nurse.

All the very best.
Soifua,

Fa'amausili Chapman
Cultural Consultant/Matua



Introduction to the Orientation Process

Warm Pacific greetings to Health Pasifika Mental Health Services at Capital & Coast District Health Board.

Staff working in Administration, Clinical and Management services will provide you with assistance to orientate you into the service.

The aim of this orientation programme is to familiarise you with the current policies, procedures and standards of practice of Mental Health Services at Capital & Coast District Health Board (CCDHB).

It has been designed with the expectation that you will take responsibility for your own learning and development, utilising the people and resources available within Mental Health Services, and CCDHB.

To assist you to work progressively through the programme, the competencies have been set out with accompanying checklists. The Team Leader, Preceptor or other Registered Nurses you have been supervised by, can endorse the competencies on the checklist.

During your orientation programme, you will be involved in a one-to-one educational relationship with your preceptor and/or other registered nurses.

Your preceptor will give you frequent feedback on your progress to assist you in the completion of your Learning Objectives and Student Assessment.

Your Preceptor

You may want to include a statement explaining how preceptors will be allocated/managed on your ward/unit.

You will be allocated one main preceptor. This preceptor will be responsible for helping you completing your objectives. We will endeavour to ensure that you mainly work with this preceptor, however, due to this is not always possible. It is your responsibility to ensure the nurse you are working with is aware of your objectives for the day/week. You must provide evaluations and/or other paperwork to your preceptor in a timely fashion (i.e. not on the due date!!). Your preceptor will not complete any evaluations if you give it to them on your last days in the unit.

Expectations of the Student Nurse while at Health Pasifika

- Hours: Monday – Friday. 0830 – 5pm. Hours can be negotiable so talk to the Team Leader or Preceptor
 - Dress : Uniform is not required. Wear mufti that is tidy and appropriate.
 - Attitudes: Maintain a professional attitude at all times.
- It is your responsibility to inform your preceptor of the required documentation to be completed before the last week of your placement

******Do's and Don't's******

For example:

We have a few expectations of student nurses working at Health Pasifika MHS:

- It is expected that you arrive on time at your placement and if you are going to be late or you are unwell and can not come to call Health Pasifika on (04)2306 324
- You must complete the hours that you are allocated to work – if you are unable to do so please discuss this with your nurse, preceptor or nurse educator. A lot of learning occurs at quiet times in the unit!!
- It is important for your preceptor or the nurse you are working with that he/she is aware of your objectives
- Due to infection control anti-septic hand gel and gloves are conveniently supplied around the premises.
- If you are not achieving your objective please see the Team Leader or your preceptor (before the last week of placement)
- Please ensure all documentation you need to complete for the polytechnic/university is accomplished before the last days in the unit – your preceptor will **not** complete any paper that is given to him or her if it is given in the last days of your placement



HEALTH PASIFIKA MENTAL HEALTH SERVICE VISIONS AND VALUES

VISION

To be the centre of excellence for Mental Health Services for the Pacific People where the philosophy and culture is one of **"by Pacific for Pacific"**

MISSION STATEMENT

To provide professional and culturally appropriate mental health services to Pacific Peoples and to achieve sustainable mental health for Pacific peoples. The challenge sits with Health Pasifika (MHS) to develop a 'model of care' that the service will own, implement and deliver on. Health Pasifika (MHS) as a service:

- Will utilise the guidance and direction of a **Pacific Community Reference Group** that will consist of appropriate people with the representational mix of ethnicity, age, life experiences and skills.
- Will endeavour to preserve and maintain good relationships and interface agreements with mainstream mental health services

VALUES AND PRINCIPLES

- Mental wellness is a holistic approach that encompasses the four cornerstones of Pacific health.
- Cultural identity and safety of consumers is paramount. Ensuring provision of mental health services will recognise and protect the fundamental importance of the bond between Pacific consumers, their family/fanau and their religious and community groups.
- For clinical needs to be met, Pacific consumers should have the highest quality of care determined by best clinical practice guidelines and integrated culturally safe models of care.
- Pacific peoples believe that mental well-being is dependant on all aspects of a person's life being in harmony. Spiritual, physical, emotional and family well-being together represents the holistic way with which their mental health needs are addressed.
- Recognition and acknowledgment of the significant component of traditional spirituality and Christianity is crucial and needs to be encompassed or at least offered in treatment and management of Pacific peoples.
- Services should be integrated and support consumer care givers and community based providers.
- The environment in which the service is delivered should be readily accessible and in close proximity to established services and where Pacific consumers and families reside.
- There is a strong focus on quality, accountability and on cultural safety for both staff and consumers.
- Capital & Coast Mental Health is committed to ensuring that Health Pasifika (MHS) abides by these principles.



Aims of the Orientation Process

Aim

That as a student nurse in the Health Pasifika (MHS) you will gain insight and experience into the culture, policies & procedures of this specialist service. The end result will see you in a position to eventually take responsibility for a caseload.

Objectives

- That you will complete the tasks involved with this orientation package
- During your clinical placement at Health Pasifika MHS you will familiarise yourself with the environment
- That you start to develop relationships with team members
- Delivery of appropriate care to the patient and whanau with support and supervision from the preceptor, including
- Accurate assessment – mental state assessment (MSE)
- Competent implementation of care
- Documentation
- Referrals received by Health Pasifika
- Referral to other Mental health services, internal agencies, non-government organisations (NGO) and external agencies.
- Gain an understanding of the multidisciplinary team
- Practice good infection control measures

Goals

- That you will have gained insight and understanding of the ethos and functioning of Health Pasifika MHS as a service
- That you will be supported with processes
- That you become familiar with the values and principles that govern how members of Health Pasifika MHS deliver services

Pre-reading/Resources

Please add any pre-reading you recommend or resources to support students learning. Avoid including whole articles or pictures/photos as these make documents difficult to download and costly to print.

Health Pasifika MHS Team

Community Health Service Building

PO Box 50233, Kenepuru Hospital Campus, Ambulance Drive, Porirua

Telephone (04) 2306324

Extension 86324

Fax (04) 978 2921

Management Team

Ext

Folole Esera	Team Leader	:	2932
Fa'amausili Chapman	Pasifika Consultant/Advisor	:	2933
Judith Arnold	Clinical Nurse Specialist	:	7814
Silefagamali'i Asi	Health Pasifika Administrator	:	86324

Health Pasifika Adult

Dr Wolfgang Kure	Consultant Psychiatrist	:	2922
Ana Gina Sembrano-Yearley	Pasifika Clinical Psychologist	:	2934
Sapina Petelo	Pasifika Community MH Nurse	:	2930
Tonie Ikivihi	Pasifika Community MH Nurse	:	2929
Anjali Lavulavu	Pasifika Community MH Nurse	:	2926
Toe Fiu	Pasifika Community MH Nurse	:	2931

Health Pasifika CAFS

Dr Allister Bush	Consultant Child Psychiatrist	:	2923
Vacant	Pasifika Clinical Psychologist	:	2934
Fereni Masoe-Afamasaga	Pasifika Nurse Clinician	:	2928
Mercy Brown	Pasifika Family Therapist	:	2927

Vaka Pasifika – Te Korowai Whariki

Le Mamea Afele Seuala	Pasifika Consultant Advisor	:	7615
Henry Field	Pasifika Nurse Clinician – Inpatient Service	:	7616

Arieta Kobiti

Pasifika Nurse Clinician – Justice
Liaison :7615

Talosaga Vanilau

Pasifika Programs Assistance –
:7615 Inpatient Service



Safety Measures at Health Pasifika Base

Please detail specific safety measures applied or needed in your unit/ward. This should include:

Swipe cards

Swipe cards are issued to permanent staff. You will not be issued a swipe card however you do need to be aware that the entrance door to the Health Pasifika building will automatically open at 0830hrs and there will be staff on the premises. Let your preceptor know if you intend to arrive earlier to ensure arrangements are made with staff who start early to let you in.

What to do in the event of a cardiac arrest

Dial '0' ask operator to call an ambulance. Call other staff on site for assistance where possible.

What to do in the event of a fire

Evacuation area in the main carpark outside the front door. The 777 emergency coordinator will wear a yellow hat and liaise with the emergency team.

Any other Health Pasifika specific issues???

CCDHB Policies and Procedures

In the CCDHB Orientation Workbook (page 17) there are a number of key CCDHB wide and Mental Health Service (MHS) policies you should be aware of when working for CCDHB. Other key policies which you should also be familiar with are available on Silent-One, these can be found on the CCDHB Intranet home page.

1. Housekeeping

- Have an understanding of housekeeping procedures

	Date completed	With whom	Signed when completed
1. Introduction to the Health Pasifika team members.			
2. Orientation; <ul style="list-style-type: none"> ▪ 1) Team meet for prayers in the fono room to begin the day ▪ 2) Orientation Booklet ▪ 3) Health & Safety form to be completed 			
3. Tour of the building conducted and staff facilities pointed out			
4. Initial meeting with Team Leader Flo Esera followed by introduction to allocated Preceptor			
5. Allocate desk/area			
6. Inform on the use of: <ul style="list-style-type: none"> - telephone - computers - Multi-Function Device - fax/copier/printer/Scanner - cell phones - mail and message systems - alarms - booking of HP cars in MS Outlook 			
7. Personal responsibilities explained in relation to: <ul style="list-style-type: none"> - Security, keys and proximity cards - Hours of work - Timesheets, leave (annual, sick, time-in-lieu) - Identification - CCDHB Cars, driver's licence - Dress code 			
8. Requisitioning of materials and supplies explained			

2. Introduction to Health Pasifika & other C&CDHB Mental Health Services

- Understand Health Pasifika MHS Vision and Values
- Be familiar with Health Pasifika and C&CDHB policies, procedures and Protocols/Cultural
- Have an understanding of other service teams within Mental Health Services.
- Identification of respective roles & responsibilities

	Date completed	With whom	Signed when completed
1. Concepts & history of Health Pasifika MHS			
2. Aware of Protocols & procedures manual for Health Pasifika			
3. Customs, Values & beliefs that determine intended delivery.			
4. Integration of values & customs into practice			
5. Health Pasifika service providers (NGO) in the Porirua area			
6. Health Pasifika MHS Unit - History			
7. Management structure of Mental Health Directorate – CCDHB wide			
8. Roles of MDT with HP & the Pacific Island Reference Group			
9. Day to Day Operations within Health Pasifika			
10. Health Pasifika MH Service processes/activities			

3. Communication Networks

- Have been introduced to relevant administration staff and clinical people within your team and across teams you work with.
- Have a clear understanding of your role, the role of the multidisciplinary team and team members within and across mental health services.
- Clearly understand the communication channels within mental health service.

	Date completed	With whom	Signed when completed
<p>1. Introduced to the following staff, and where appropriate, to spend time with:</p> <ul style="list-style-type: none"> - Team Leader - Pasifika Matua - Consultants, MOSS's, Registrars, House Officers - Administration - Members of your team (Co-workers) - Clinical Nurse Specialist (discuss) - Mental Health Act Administrator (discuss) - District Inspectors (discuss role) - Interpreter's Service (how to access) 			
<p>2. Discuss communication channels relating to:</p> <ul style="list-style-type: none"> - operational issues with Administrator & Team Leader - Clinical accountability within the Team - Risk assessments 			
<p>3. The purpose, times and locations of meetings which you will be expected to attend e.g.:</p> <ul style="list-style-type: none"> - Team meetings - Administration meetings - Clinical management/ review meeting - Communication meetings with own discipline - Clinical MDT forums - Clinics – Wellington 			

4. Health and Safety

- Have clear understanding of all health and safety issues related to mental health.
- Have clear understanding of all fire and emergency procedures related to your work area.

	Date completed	With whom	Signed when completed
1. Fire, evacuation & emergency procedures explained. Shown exits, assembly point & fire equipment.			
2. Emergency telephone numbers and information is exchanged.			
3. Identify and be able to locate security staff / support staff / Health & Safety Reps, Occupational Health & Safety, EAP, IMNZ.			
4. Training Development for Staff: <ul style="list-style-type: none"> - Conflict Resolution - Challenging Incidents - Communication/Assertiveness training - Ethics - Calming & Restraint Training 			



5. Documentation and Information Services

- Have an understanding of CCDHB’s Client Electronic Health Records and Primary file policies and procedures.
- Have an understanding of CCDHB’s administration information services policies and procedures

	Date completed	With whom	Signed when completed
1. CCDHB and Mental Health Services’ documentation guidelines. Discussed			
2. Understand documentation standards of: <ul style="list-style-type: none"> - clinical progress notes - patient consent - discharge plans - diary processes - weekly progress review, MDT review - criteria for admission to service, and discharge from service - Clinical/Cultural assessment tool – culturally focussed version 			
3. Gain understanding of the administration process of effectively admitting, transferring and discharging a client from a service; intake process; referral process			
5. Discuss: <ul style="list-style-type: none"> - Introduction to CCDHB Basic Desktop & Email - Clinical Records - CCDHB Orientation - Mental Health Services Orientation - DRAM Attendance - Privact Act - Mental Health Act 			
NB: Any document/form which will end up being filed in the patient’s clinical record needs to go through the Quality Co-ordinators group – do not create own forms without utilising the correct procedure.			



Health Pasifika (MHS) - History

An important component of working for a Pacific Service is around understanding the past, for it is that past that will inform the future.

The significant events and people that have contributed to the establishment and running of Health Pasifika (MHS) - Specialist Pacific Mental Health Service are numerous. The following is an encapsulated biography of some of the major events. You should read through these and then talk with our Pasifika Consultant Advisor to gain a better understanding of the concepts, values and history behind Health Pasifika (MHS).

Contemplation of a Pacific Island MHS has been in existence for many years now. The locality of Porirua Hospital brought about an opportunity for employment to many of the local Pacific Island community, and as early as the beginning of the 1970's enabled many to pursue careers and obtain experience in mental health. Past attempts to address mental health needs for Pacific peoples in the Wellington Porirua area, have contributed to the momentum and validity of a Pacific focused service, consisting of a Pacific workforce, delivering to Pacific peoples with mental health issues.

The commitment and vision of past and present clinicians, such as the dedication of the late Mine Lavery, other Pacific MH workers and Pacific community leaders was the founding basis of PaCH (Pacific Community Health). - the first Pacific non-government organisation currently providing a specialist service delivery to Pacific mental health consumers in the Wellington region. There existed a substantial pool of experienced psychiatric nurses and mental health workers in the Porirua and Wellington area; many employed by Capital Coast Health Mental Health Services. The continued impetus that led to revisiting the development of a Pacific Mental Health Service began in May 1998. Prompted by Cultural Liaison workers at Te Whare O Rangatahi, Teina Samoa and Florence Gardiner who both work directly at the acute interface of the mental health service delivery to Pacific peoples.

The Clinical Leader of Mental Health Services at Capital Coast Health Ltd. Dr Peter McGeorge and over thirty Pacific clinicians supported their initiative. Attending a workshop on the 17th September 1998 and contributed to the vision and features of a Pacific focused service under the 'umbrella' of mainstream MHS at Capital Coast Health Ltd.

Acknowledgments

Consolidation of this initiative came about with the assistance, support and aspirations of people such as:

- Debbie Sorensen: previous Chief Advisor-Pacific Health MOH,
- Dr Peter McGeorge CCH MHS,
- Jean Mitaera: Orama Associates,
- Dr Siale Foliaki: MH Commission
- Materoa Mar: Clinical Leader CCMH and Project Sponsor for Health Pasifika
- Wayne Blisset: Whakapai Project CCMH

This significant initiative was driven robustly by the Steering group for Health Pasifika, and consisted of a dedicated number of the Pacific MH workforce with a background in mental health.



Developments

Liaison with the HFA in May 1999 led to a 'seeding' grant and appointment of a dedicated project position to initiate and develop this service. An official launch was held on Tuesday the 19th October 1999 at the Tuhono Marae Hall, Kenepuru Drive Porirua, to celebrate and bless what is perceived as the very beginning of this service, the occasion was facilitated by Salevao Faauga Manase and officiated by the Reverend Setu Masina. It was well attended by representatives of the community and Non Government Organisations both Pacific and non-Pacific, officials from the MOPIA, MOH, MH Commission attended, as did the Labour MP. Taito Phillip Field, Porirua Mayor Jenny Brash and Deputy Mayor Jasmine Underhill, a strong interest and attendance from mainstream and specialist MHSs of Capital Coast Health Ltd were present.

Health Pasifika MHS – Specialist Pacific Mental Health Service

Health Pasifika (MHS) is a Pacific Island focused service and team, under the umbrella of mainstream MHS's at Capital Coast DHB looking to develop a unique service delivery to Pacific peoples that will achieve better outcomes for Pacific mental health consumers and their families utilising mental health services. The driving force behind this initiative has been the Pacific workforce at Porirua Hospital that has evolved over the last 25 to 30 years. The Health Pasifika Steering group consists of these very people and was formed in October 1998 following a workshop in September of over 30 Pacific clinicians predominantly employed at CCMH.

- It was seen as an opportunity to have an influence in ensuring not only appropriate clinical delivery, but delivery in a culturally appropriate and safe way
- It is an opportunity to be part of the process and to have an influential impact, at the decision-making level of how Mental Health Services deliver to Pacific peoples.

An opportunity to work towards achieving better outcomes for Pacific peoples utilising MHS's. Health Pasifika (MHS) is a Specialist Pacific Island community mental health service, providing cultural and clinical mental health assessment and treatment services. The service is designed to provide culturally appropriate services for Pacific peoples with serious psychiatric disorders in the Capital & Coast Health region, of Kapiti, Porirua and Wellington. Health Pasifika (MHS) will have a particular focus on the care of Pacific peoples presenting for the first time to Capital & Coast Mental Health Services, encompassing Kapiti, Porirua and Wellington regions. Pacific Island clinicians will staff it where possible, ensuring that every effort is made to match consumers with mental health workers of similar ethnic background.

The service will be community oriented and aim to reduce disability and facilitate recovery by giving emphasis to the clinical, family and cultural factors affecting the patients condition. Commitment to professional development and education for Pacific workforce and mainstream colleagues delivering to Pacific peoples. Commitment to the enhancement of clinical, alongside cultural values and beliefs.

Evaluation of your Clinical Preceptor

Please return your evaluation to (Nurse Educator)

Name of Preceptor _____

Date _____

E = Excellent **VG** = Very Good **S** = Satisfactory **NI** = Needs Improvement

Please read the following statements then tick the box that best indicates your experience

My Preceptor:	E	VG	S	NI
Was welcoming and expecting me on the first day				
Was a good role model and demonstrated safe and competent clinical practice				
Was approachable and supportive				
Acknowledged my previous life skills and knowledge				
Provided me with feedback in relation to my clinical development				
Provided me with formal and informal learning opportunities				
Applied adult teaching principals when teaching in the clinical environment				

Cut along line

Describe what your preceptor did well

Describe anything you would like done differently

Signed: _____ Name: _____

Notes

Please use this space for notes.