Inspiration of Experience in Melbourne: New Directives in future Aged Care in Hong Kong

OVERSEAS CORPORATE SCHOLARSHIP PROGRAM
2013/14 Psychogeriatric Nursing, Australia.
From 11 Nov 2013 to 6 Dec 2013
Melbourne Health

• St Vincent’s hospital Mental Health (inner urban east area of Melbourne)
  – Normanby House (acute admission ward) in St George Hospital campus
  – Aged Psychiatric Assessment & treatment Team (APATT): multi-disciplinary
  – Residential Care Support (RSP) support residential facilities
  – Leisure Resource Library
  – Dementia Behavioural Management advisory Service: 24 hours hotlines, education support
  – 2 Psychogeriatric Nursing Homes

• North Western Mental Health
  – 3 acute admission wards
  – 3 APATT
  – Behavioral Assessment and Specialist Intervention Consultation Service (BASIC): nurse-led, person-centred approach & evaluate with DCM
  – 5 Psychogeriatric Nursing Homes
St George’s Hospital – Normanby Unit
(Acute Inpatient Unit)
Beds: 20
St George’s Hospital – Normanby Unit
(Acute Inpatient Unit)
Module B: Non-Ligature - no hanging point in suicidal observation dormitory
Impressive scenarios in Normanby

- Peace and tranquilizing atmosphere with no restraint
- There’s different level of freedom (3wings) with single room & on suit bathroom
- Respect the pace of the elderly patients
- Admitting a confused delirious man
- Various employment terms: part-time including consultant post (50% over 60 year-old)
- Less hierarchical
- Carer consultant employed by the hospital
Prague House:
for homeless aged mental patients
- Clozapine clinic
St George’s Aged Psychiatry Assessment and Treatment Team (APATT)
Aged Psychiatric Treatment Team (APATT)

- Multi-disciplinary (consultant, registra, nurse, OT, MSW,)
- Case management
  - Home visit
  - Mental health assessment
  - Making referral to community-based service
  - Follow-support
  - Arrange consultations
  - Case load: 30+ for full time
- Close relationship with GP (no OPD)
  - Medication recommended by psychiatrist will be described by GP
- Admission arrangement
- Discharge preparation
  - Residential facilities determined by Aged Care Assessment Service (ACAS)
  - Follow up by APPAT staff to ensure continuity of care
- Close relationship with care agencies
Dementia Behaviour Management Advisory Service (DBMAS)

- Nationwide network of services funded by Government
- Provide clinical support for people caring for dementia with behavioural and psychological symptoms
- 24hours state-wide telephone support service for carers and care workers
- Partnership with the family carers, health professional, care workers and service providers
Helping Australians with dementia, and their carers

Dementia Behaviour Management Advisory Service Advisory Service Victoria (DBMAS) Vic

Supporting workers • Advice • Information • Referral

DBMAS Vic: Who are we and how can we help?
Dr Samantha Loi and Melissa Kettle
Residential Support Program (RSP)

- Supported aged mental patients living in residential care with risk of homelessness due to challenging behaviours
- Referred from APATT
- Roles: assessment, planning, modeling
Residential Support Program (RSP)

Leisure Resource Library

The Leisure Resource Library is a service that provides various activity resources that residential care facility staff can borrow to use in their facility. This program aims to increase access to activity resources in order to improve the quality of life for residents. Quarterly education sessions are provided to assist life style staff in using the resources available.

Membership is invited from facilities in the municipalities of Borondar and Darebin and areas of Fairfield, Alphington, Thornbury and Northcote. The library has extended to other areas of Metropolitan Melbourne.

The Leisure Resource Library is open:
Monday & Wednesday 10am - 1pm
And is located at:
Karrimbi Building
St George's Hospital Campus
283 Cookham Road
Kew 3101
(Enter off Normanby Road)

Inquiries:
Phone: 9816 0569
Fax: 9816 0432
Email: LeisureRL@svhm.org.au
Aged Residential Care Facilities
(Psychogeriatric Nursing Home)

- De-institutionalization → PGNHs (18 high care in Victoria)
- 5 high care & 1 low care in NW & Melbourne
- Around 30 beds with 6 nurses day time for high care
- Aged care funding; activities based
- Monthly review by psychiatrist
- Longer terms transitional care models
- Supported by acute care settings as step-up care
- Behavior stabilized, medication calibrated → mainstream nursing home
Auburn House
Psychogeriatric Nursing Home
Beds: 30

Adjustable height basket-ball net
Mainstream nursing homes in inner Melbourne

- Those poor residents are supported by government
- Change of the dinning room as restaurant and staff dressed as waiter during meal time
NORTH WESTERN MENTAL HEALTH
ST VINCENT’S HOSPITAL MENTAL HEALTH

- Broadmeadows Aged Acute Mental Health Inpatient unit
- Bundoora (AAMHIU)
- Sunshine (AAMHIU)

- The Aged Psychiatry Assessment & Treatment Team (APATT)
  - Broadmeadows
  - Bundoora Extended Care
  - Sunshine

- Behavioral Assessment and Specialist Intervention Consultation Service (BASIC):
  - nurse-led, person-centred approach & evaluate with DCM

- 5 Psychogeriatric Nursing Home
McLellan House Hostel
low care Psychogeriatric
nursing home     Beds:19
Westside loge high care Psychgeriatric Nursing Home
30 beds
Northern Aged Psychiatry Assessment and Treatment Team (APATT)  Bundoora
Sunshine Hospital
GEM ward ~ dementia unit
Geriatric Evaluation and Management services

- Provides aged care assessment, psychiatry, palliative and Cognitive Dementia and Memory Service to people suffered from dementia
- Referred from community
- Length of stay: a couples of weeks to a year
- 32 beds are located in the geriatric ward
- 15 beds located in the Dementia Care Unit (Secure GEM)
- Secure GEM
  - Staff with training on dementia care
  - Specific environmental design
    - Reality orientation
    - Multisensory stimulation
    - Stimulating corridor with wandering garden
  - Fall and choking prevention program
  - Provision of meaningful activities
Montessori Methods for Dementia

• Dr. Maria Montassori: an Italian physician child educator (1870-1850)
• Dr. Cameron Can in USA 1980s & Gail Elliott put into dementia care
• Environmental support → normal
  – ↑independence
  – Meaningful engagement
  – ↑self-esteem
  – Meaningful contribution to the community
Embracia on Ashley
Residential aged care home
(Montessori concept)
Embracia On Ashley

Making use of the natural resources
Montessori concept to dementia care:
• Environment support the disability of the residents
• Meaningfully engaged
• Social inclusion
• Making use of the symptoms to contribute

• Matched with the recovery oriented practice
Use of environmental cues
Making use of symptoms: rubbing ritual
Common area of a public housing estate

A crossing road supervisor worked with a walking aid
Village for the old people
Village for the old people
Village for the old people
Impressive people-orientated culture in Melbourne

- Impressive Investment in the elderly care
- Part-time job for staff to cater individual needs (consultant psychiatrist after delivery)
- Employment of staff over 60 (over 50% in Normanby House)
- The road-crossing supervisor working with walking aid
- The sharing of the 65-year-old Italian social worker and the domestic staff in nursing home (enjoyed part-time job)
- Hotel-like OAH with 4-stars service with single on-suite bathroom
- Personal experience in the airport
Adoption of recovery oriented approach in aged care in Melbourne

• Promoting a culture of hope, self-determination, autonomy, social inclusion, choice and well-being
• Collaborative partnerships and meaningful engagement
• Encouraging informed risk taking within a safe and supportive environment and flexibility of management
• Holistic personalized care with focus on strengths instead of problem
• Respecting the lived experience of individual and significant others and support to community participation and social contributions
• Recruiting carer consultant: service planning and implementation

Implications
• Service for the elderly must not be determined by the younger group only
• Senior quality staff can be a potential valuable assets in the work force of aged care
To create a positive working environment in aged care services

- An organization culture that commits to recovery orientated practice
  - A degree of risk tolerance, ↓restraint free
  - Encouraging people’s choice and balance with duty-of-care obligation
  - Flexibility, responsiveness to people’s unique circumstances and preferences with appropriate risk Management obligations
  - Strength focus

- In-patient setting
  - single room provision especially for those disturbed confused elderly
  - minimal restriction, not task but people orientated
  - Meaningful engagement: enhance self-care
  - Incorporate therapy into daily life (no outpacing, ↑self-esteem)

- Staff
  - Provide choices for staff with flexibility of employment conditions
  - Retain quality senior staff since they have better understanding to ageing
Personal Caring experience
New Directives in future Aged Care in Hong Kong

• Adoption of a recovery-oriented practice model
• A redesign of the care environment and rehabilitation program that facilitate independence of service consumers (no outpacing, empowering)
• A working environment that reconcile to flexibility and responsiveness to people’s unique circumstances and preferences
• Dementia care: Community support + Specific Dementia units in hospitals/OAHs
• Improvement of the OAH environment: integrative aged service and provision of psychogeriatric nursing home
• Experienced senior staff (over 60) might be a group of productive work force in aged care
• Government policy: 1) support the employment of elderly people so as to combat depression 2) support home care
• Expansion of community home treatment with support of professionals
Melbourne:

A society where equity and humanity are prevailed

Thank You!