



DELMONT
PRIVATE HOSPITAL

AGED MENTAL HEALTH SERVICE

OVERVIEW



Your Care in Mind



AGED MENTAL HEALTH PROGRAM OVERVIEW

Delmont Private Hospital offers a comprehensive range of services to assist and treat older people with mental health conditions.

They consist of:

- Hospital Care - Delmont has an inpatient ward that has a team of staff experienced in caring for aged persons with mental health conditions.
- Therapy Program- The Aged Inpatient Therapy Program runs 7 days a week and offers a variety of group programs as well as individual support
- Transition to Home - Patients return to the inpatient unit on a day stay basis as they adjust from full support of hospital to self-care at home
- Delmont Day Programs - A purpose built space within Delmont Private Hospital with comprehensive programs, including specific programs for older people, aimed at promoting and maintaining psychological, social and physical functioning
- Community Outreach Program – Patient in home visits made by mental health nurses.

For more information on How to Refer, go to back page in this brochure



INPATIENT - HOSPITAL CARE

The Hospital Intake Coordinator is able to assist with initial enquiries, including identifying an available specialist Psycho-geriatrician, to begin the process of care, assessment and treatment planning.

Following assessment, continuing outpatient care may be offered, or in more acute cases, a period of hospitalization.

Delmont Private Hospital has dedicated inpatient programs for patients aged 65 or older and for those who have a younger onset of conditions usually associated with ageing.

Patients care will managed by their Psycho-geriatrician in conjunction with hospital staff, including

- Nurses
- Occupational Therapists
- Physiotherapists
- Social Workers
- Personal Trainers
- Music Therapists
- General Practitioner

If required, other specialists are available to assist:

- Geriatrician
- Neuropsychologist
- Podiatrist
- Pastoral Care
- Psychologist

The Aged Mental Health Inpatient Therapy Program

The Aged Inpatient Program provides individual psychiatric, medical, physical and psychosocial assessment and treatment. Patients are supported on both an individual and group level.

The program draws from evidenced based practice and aims to promote and restore social, physical, mental, emotional and spiritual wellbeing.

Groups include:

- Physical Exercise/ Movement Groups
- Cognitive Stimulation
- Psycho-education
- Music Therapy
- Activities of Daily Living Skills
- Meaningful Activity Based Interest Groups

In conjunction with the patient and their family, a discharge plan is developed.

This may be a simple return to former lifestyle and activities: home with additional supports or a move to supported care.

Staff are able to guide the patient and their family through this process. Staff can assist with referrals for home and community supports and the Aged Care Assessment Service. Information on residential aged care is provided is required.

Transition to Home Service

The Transition to Home (TTH) program is designed to assist patients make a safe and seamless transition from hospital care to home. Further support is offered by the Delmont Day Program or Community Outreach Service if appropriate.

When Does It Operate?

The Transition to Home Program operates Weekdays 9:00am to 4:00pm.

What It Offers

It offers short term support and structure to recently discharged patients, who are for various reasons, not in a position to fully make the transition to home or attend the Delmont Day Program.

Participants will continue to engage in the various aspects of the Inpatient Therapy Program that they are familiar with and have been participating in immediately prior to discharge from the Hospital.

Benefits of Attending the Program

It is anticipated that the Transition to Home Program will assist patients to consolidate the gains made during their inpatient admission. It also helps patients to improve self-confidence, regain their ability to function more independently and make a valuable contribution to their own on-going recovery.

In addition to attending the Group Program, patients will obtain assistance from the TTH Nursing Coordinator. Any required medical assistance will be overseen by the referring Psychiatrist or Medical Specialist.

If You Are Interested in Attending

If you are interested in attending the Transition to Home Program, please discuss this with your doctor. Your doctor will make a referral on your behalf or further enquiries or to find out more about Transition to home Program, please contact:

Direct: 9805 7357

General: 9805 7333 ext. 3557

Email: TTH@delmonthospital.com.au

Please note: The TTH Program is subject to change based on COVID pandemic and Victorian Health Department guidelines.

OUTPATIENT SERVICES

The Delmont Aged Mental Health Outpatient Services are run by a well-established and dedicated team of clinicians. It offers both group-based programs and community outreach visits for older people with mental health issues.

The DDP Aged Mental Health Program and the Community Outreach Service operate 5 days per week.

The Community Outreach Service (COS) is a Hospital in the Home type program in which nurses visit people within the community.

Generally, the outreach team provides an interim service for patients discharging from a hospital stay, rather than crisis or case management.

The Delmont Day Program (DDP) is an integrated service located within the Hospital. This program, delivered by experienced and qualified therapists, addresses psychological, social and physical needs. The program uses evidence based practices and focuses primarily on psychological interventions, as well utilising physical and cognitive activities.

How to refer? A referral can be made to either services as part of continuing care after being hospitalised, or directly from an outpatient Psychiatrist/GP.

DDP Aged Mental Health Group Programs are:

- Living Well with Mental illness
- Memory
- General Psychiatry Programs - may also be suitable based on an individual's presenting needs.
- Substance Use Addictions Programs - access based on co-existing mental health and addiction issues.

Assessment and Treatment Planning:

Mental health and age-related assessments and outcome measures form an important part of the individualised care planning and clinically tailored programs.

The most suitable mental health service will be determined, based on the Doctor's referral, a clinician assessment and individual and carer input, service admission and exclusion criteria; and level of health fund/insurance cover.

The focus is supporting people to continue to function within their community setting. The DDP team works collaboratively with patients, nominated carers and other services to provide individualised care as part of the treating doctors overall treatment plan.

COMMUNITY OUTREACH SERVICE (COS)

The home visits are offered to eligible patients within a 20km, region based radius of Delmont Hospital. A referral is required to access individual support and monitoring post discharge from Hospital, in their home or community.

The Community Outreach Service is designed for older people:

- Experiencing difficulties making the transition from hospital
- Facing challenges coping with their mental illness
- Dealing with family and social relationship issues including isolation
- Managing life transitions and change
- Needing support and linkages within their local community
- Requiring skills acquisition

Benefits Include:

- Increased knowledge about mental health conditions
- Exploration of ageing, change and promotion of mental health and positive lifestyle
- Learning helpful skills and attitudes to manage mental health conditions
- Assistance in maintaining and increasing overall physical, cognitive, emotional and social health.
- Learning and practising new ways of coping, accepting and adapting to change

COS Inclusion Criteria:

- Patients with mental health conditions
- Patients who are self-caring
- Patients currently seeing their psychiatrists on a regular basis (minimum 12 weeks) for reviews.

COS Exclusion Criteria:

- Patients with acute psychosis
- Patients with severe cognitive impairment/dementia
- Patients requiring assistance with activities of daily living and/or inpatient treatment
- Patients assessed as a moderate to high risk for falls, aggression, suicide
- Patients who are prone to wandering and/or absconding risk
- Patients already accessing a number of external support services to address their mental health
- Staff OHS issues that may impact on visiting patients within the community setting



LIVING WELL WITH MENTAL ILLNESS GROUP

The program is designed for older people experiencing a range of common mental health conditions including mood, anxiety and adjustment disorders i.e. depression, grief and loss.

This program is aimed at improving emotional and physical functioning and maintaining independence. It provides the opportunity to meet others with similar experiences and to explore some of the changes and challenges of post retirement life.

This Group Based Program Utilises:

- Psycho-education about mental health
- Goal Setting
- Progressive physical strength training and other physical activity interventions
- Psychological coping strategies for physical and mental well-being
- Behavioural strategies to help establish and maintain healthy daily habits
- Exploration of ageing, change and promotion of mental health and positive lifestyle
- Mindfulness and relaxation practises
- Cognitive stimulation based activities
- Exploration of values to develop a stronger sense of purpose and structure in one's life
- Community outings and social activities

Benefits Include:

- Increased knowledge about mental health including emotional and brain functioning
- Sharing experiences in a supportive environment
- Learning helpful skills and attitudes to manage mental health conditions
- Learning and practising new ways of coping, managing and accepting change
- Increased social engagement in a safe environment
- Improved quality of life
- Assistance in maintaining and increasing overall physical, cognitive, emotional and social health

Inclusion Criteria:

- Patients with mental health conditions
- Patients who are ambulant and self-caring
- Patients currently seeing their psychiatrists on a regular basis (minimum 12 weeks) for reviews

Exclusion Criteria:

- Patients with acute psychosis
- Patients with mild to severe cognitive impairment /dementia
- Patients requiring individualised nursing care and/or inpatient treatment
- Patients assessed as a moderate to high risk for falls, aggression, suicide
- Patients who are prone to wandering and/or absconding risk
- Patients with acute/severe physical illness

MEMORY GROUP

Suitable for older people experiencing mild to moderate stages of cognitive impairment/dementia. The group is aimed at maintaining and monitoring levels of cognitive, physical and social functioning.

This Group Based Program Utilises:

- Psycho-education for cognitive functioning
- Progressive physical strength training and other physical activity interventions
- Coping strategies for physical and mental well-being
- Community outings and social activities
- Cognitive stimulation-based activities including:
 - Problem solving
 - Numeracy and literacy activities
 - Memory enhancing activities
 - Music and movement
 - Sensory, visual & spatial activities
 - Reminiscence activities
 - Creative activities using multi-media

Benefits Include:

- Knowledge of brain functioning and memory loss
- Sharing lived experiences in a supportive environment
- Learning helpful skills and attitudes to manage dementia
- Learning and practising new ways of managing memory loss
- Increased social engagement in a safe environment
- Assistance maintaining and increasing overall physical, cognitive, emotional and social health
- Carer support and education, with cross-referral to supporting agencies as required

Inclusion Criteria:

- Patients with mild to moderate cognitive impairment-dementia
- Patients who are ambulant and self-caring
- Patients currently seeing their psychiatrists on a regular basis (minimum 12 weeks) for reviews

Exclusion Criteria:

- Patients with acute psychosis
- Patients requiring individualised nursing care and/or inpatient treatment
- Patients assessed as a moderate to high risk for falls, aggression, suicide
- Patients who are prone to wandering and/or absconding risk
- Patients with acute/severe physical illness



DDP - GENERAL PSYCHIATRY GROUPS

During the assessment phase or whilst attending the Aged Mental Health Program, individual interventions may be identified and a specific therapy modality recommended.

These Group Based Programs Include:

- Acceptance Commitment Therapy
- Cognitive Behavioural Therapy
- Creative Arts Therapy
- Mindfulness Based Therapy
- Mindfulness and Relaxation sessions

Benefits Include:

- Increased knowledge about mental health
- Treatment using relevant therapeutic modalities
- Sharing lived experiences in a supportive environment
- Learning specific skills and strategies to manage mental health conditions

Inclusion Criteria:

- Patients with mental health conditions
- Patients who are ambulant and self-caring
- Patients currently seeing their psychiatrists on a regular basis (minimum 12 weeks) for reviews

Exclusion Criteria:

- Patients with acute psychosis
- Patients with mild to severe cognitive impairment /dementia
- Patients requiring individualised care and/or inpatient treatment
- Patients assessed as a moderate to high risk for falls, aggression, suicide
- Patients who are prone to wandering and/or absconding risk
- Patients with acute/severe physical illness



DDP - SUBSTANCE USE AND ADDICTION PROGRAM (SUAP)

Co-existing addiction problems can be addressed for older people within the SUAP program.

These Group Based Programs Utilise:

- Psycho-education about mental health and addiction
- Relapse Prevention
- Motivational Interviewing
- Acceptance Commitment Therapy
- Creative Arts Therapy
- Mindfulness and relaxation sessions

Benefits Include:

- Increased knowledge about addictions and impact on physical and mental health
- Sharing lived experiences in a supportive environment
- Learning specific skills and strategies to manage addiction

Inclusion Criteria:

- Patients with co-existing addiction and mental health conditions
- Patients ready for change
- Patients who are ambulant and self-caring
- Patients currently seeing their psychiatrists on a regular basis (minimum 12 weeks) for reviews



Exclusion Criteria:

- Patients with acute psychosis or cognitive impairment
- Patients not willing to abstain in order to attend
- Patients requiring individualised care and/or inpatient detoxification treatment
- Patients assessed as a high risk for falls, aggression, suicide
- Patients with acute/severe physical illness

HOW TO REFER

INPATIENT ADMISSION Aged:

GPs can send patient referrals to the Hospital Intake Coordinator or a Delmont Accredited Psychiatrist for an Inpatient Admission.

If the referral is for a Delmont Psychiatrist, FAX the referral to the Intake Coordinator.

Email: hospitalcoordinator@delmonthospital.com.au

FAX: (03) 9889 8696

ENQUIRIES (03) 9805 7390

TRANSITION TO HOME:

Email: TTH@delmonthospital.com.au

ENQUIRIES: (03) 9805 7357

DDP/COS ADMISSION:

GP can send a patient referral directly to Delmont Day Programs (DDP) or to a Delmont Psychiatrist.

Email: ddpfaxes@delmonthospital.com.au

FAX: (03) 9805 7395

Enquiries: (03) 9805 7370

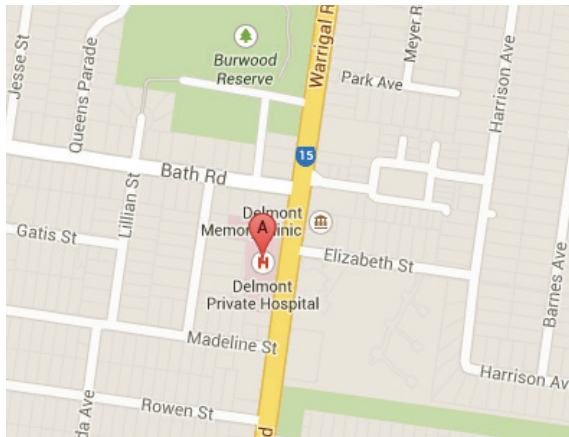
Patient must have private current health insurance/Work Cover approval or be self-funded.

Patient assessment appointment will be booked and conducted by the DDP Intake Clinician.

Patients must keep regular appointments with psychiatrist as part of health fund requirements.

www.delmonthospital.com.au





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