



General Ward Mental Health Consultation and Liaison Service Procedure

1. Service Description

Effective: 12 January 2017

The Great Southern Mental Health Service (GSMHS) provides a Mental Health Consultation and Liaison service to patients admitted to the General Medical and Surgical Units of the Albany Hospital. The Consultation Liaison (CL) team for the Albany Hospital comprises Mental Health Liaison Nurses (MHLN), consultant psychiatrist and a trainee psychiatrist.

The CL service is generally provided during Community Mental Health clinic hours Monday to Friday from 0830 to 1630 by the trainee psychiatrist (under the supervision of a consultant psychiatrist) or the MHLN. After hours CL is available via the MHLNs who can also facilitate access to the on-call consultant psychiatrist or the Acute Psychiatric Unit (APU) Saturday morning medical roster.

For general hospital inpatient consultations, both the MHLNs and/or the trainee psychiatrist are available to undertake assessments and provide management advice to nursing and medical teams throughout the Albany Hospital regarding patients receiving medical or surgical care who have a co-morbid mental illness or who are experiencing symptoms of a psychiatric nature. Clinical governance is provided by a consultant psychiatrist.

2. Referral Procedure

An Albany Hospital medical or surgical patient requiring referral to CL Psychiatry or MHLN services can be referred via a mental health consultation request either by phone or by completing an inpatient consult request form (GSTMR 52A) and faxing to 9842 1028. This fax is monitored regularly seven days per week.

3. Management of Patients with either a Primary or Comorbid Mental Health Diagnosis in a Medical or Surgical Unit

3.1 Patients admitted in Albany Hospital under bed card of a physician / senior medical practitioner (SMP)

A mental health consultation can be requested for patients of any age. If MHLN or trainee psychiatrist involvement is required, the referring practitioner must discuss any referral to the mental health team with the patient prior to a referral being made.

Any consultation is usually a one-off assessment. The MHLN or trainee psychiatrist is to document the assessment of the patient and recommendations for treatment / management in the patient's medical record. The MHLN is required to complete this documentation in both the patient hard copy file and in PSOLIS. Recommendations may include regular review and/or involvement from the Mental Health team.

If at any time the patient's mental health deteriorates and management of the patient requires specialist psychiatric care, a doctor-to-doctor handover is required either in writing, in person or by telephone (see WA Health [Clinical Handover Policy 2012](#)) to facilitate admission under the bed card of a consultant psychiatrist.

Once handover for admission is accepted by the consultant psychiatrist, the patient is admitted under their bed card. The consultant psychiatrist is then responsible for all aspects of the patient's care until they are discharged at the completion of the specialist mental health treatment and medical treatment. Discharge in this instance is either from hospital to outpatient General Practitioner (GP) care, or return as an inpatient to the care and bed card of the referring medical team.

Discharge planning from hospital or back to the medical team is the responsibility of the MHLN and trainee psychiatrist in consultation with the treating consultant psychiatrist.

On discharge, the medical team is responsible for the completion of the NaCS discharge summary.

3.2 APU patients admitted under the bed card of a consultant psychiatrist in a non-Mental Health (outlying) ward

The MHLN is to be actively involved in the development of the mental health nursing management plan and is involved daily in risk assessment and management of APU patients admitted under a consultant psychiatrist in an outlying bed. The inpatient psychiatry team remain responsible for the care of APU patients in outlying wards.

Discharge planning for all APU outlying mental health patients (i.e. those with a primary mental health diagnosis who require admission or return to the APU or who have a primary mental health diagnosis and secondary medical problem) is the responsibility of the APU Transition Nurse in consultation with the treating psychiatrist and the senior medical practitioner of the APU.

On discharge, the Mental Health Medical Team is responsible for the completion of the NaCS discharge summary.

3.3 Involuntary Mental Health patients in a non-Mental Health (outlying) ward

If the patient in an outlying ward under the bed card of a consultant psychiatrist (referred to in 3.1 or 3.2 above) is an involuntary patient under the *Mental Health Act 2014*, for example treated under a Form 6b, it is the responsibility of MHLN to ensure notification to the Mental Health Advocacy Service and the Mental Health Tribunal.

4. Procedure Outside MHLN Hours – After Hours On-Call Consultant Psychiatry

The after-hours on-call consultant psychiatry service is responsible for all patients admitted under the bed card of the psychiatry team whether on a general ward or in the APU and can be accessed via the MHLN (via reception, dial 9) between the hours of 08:30 to 22:30 daily, or via the APU (extension 2525) between 22:30 and 08:30 daily.

5. Definitions

CL	Consultation Liaison
ED	Emergency Department
FACEM	Fellow of the Australasian College for Emergency Medicine
MHLN	Mental Health Liaison Nurse
NaCS	Notifications and Clinical Summaries
PSOLIS	Psychiatric Services On-line Information System

6. Roles and Responsibilities

Director of Medicine WACHS GS: To develop systems to ensure that all Visiting Medical Practitioner (VMP) GPs and SMPs are provided with an orientation to the mental health consultation and liaison service.

Director of Nursing and Midwifery: To assist with the evaluation of the Consultation and Liaison service and relationships with WA Country Health Service (WACHS) Great Southern (GS) stakeholders receiving services from CL.

Clinical Director and Manager GS Mental Health: To develop systems to ensure that psychiatric liaison nursing, psychiatry registrar, and consultant psychiatry coverage for the consultation and liaison service is maintained, evaluated, governed and compliant with relevant legislation and procedures.

Clinical Director GS Mental Health: To provide overall clinical governance for the clinical services delivered by employees of the Great Southern Mental Health Service.

7. Compliance

It is a requirement of the WA Health [Code of Conduct](#) that employees “comply with all applicable WA Health policy frameworks.”

A breach of the Code may result in Improvement Action or Disciplinary Action in accordance with the WA Health [Discipline Policy](#) or Breach of Discipline under Part 5 of the *Public Sector Management Act*.

WACHS staff are reminded that compliance with all policies is mandatory.

8. Evaluation

Monitoring of compliance with this document is to be carried out by the Nurse Unit Manager, Authorised Psychiatric Unit, in consultation with key internal stakeholders using audit tools developed by the GSMHS Management Committee in consultation with key internal stakeholders.

This procedure is to be reviewed at least every five years.

9. Standards

[National Safety and Quality Health Care Standards](#) : 6.1.1, 6.1.2, 6.2.1, 6.5.1, 9.1.2, 9.4.1, 9.5.1, 9.7.1, 9.9.1, 9.9.2

[EQulPNational Standards](#) : 12.1.1, 12.1.2, 12.8.1, 12.8.2, 12.8.3, 12.9.1, 12.10.1

[National Standards for Mental Health Services](#) 2010

10. Legislation

[WA Mental Health Act 2014](#)

11. References

[Clinicians Guide to the MH Act 2014](#)

12. Related Policy Documents

WACHS [Medical Practitioners Manual \(2012\)](#)

WACHS [Adult Psychiatric Inpatient Services: Referral, Admission, Assessment, Care and Treatment Policy](#) Version 3.00 (February 2016).

[Patient Access to Vehicle Policy GSMHS \(2014\)](#)

WACHS [Acute Response in Child and Adolescent Mental Health Service Policy](#)

13. Related WA Health Policies

[Admission Readmission Discharge and Transfer Policy for WA Health Services \(2014\)](#)

[State-wide Guidelines for the Management of Under 18 year old Mental Health Patients in Non-child and Adolescent Mental Health \(CAMHS\) Emergency and Inpatient Settings](#)

14. WA Health Policy Framework

[Mental Health Policy Framework](#)

**This document can be made available in alternative formats
on request for a person with a disability**

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