



Mental Health Inpatient Unit (Ward 5A)

Information for schools

Who we are

The Acute Mental Health Inpatient Team at Perth Children's Hospital (PCH) is part of the Child and Adolescent Health Service (CAHS) CAMHS.

The team consists of a multi-disciplinary group of health professionals including consultant psychiatrists, psychiatric medical registrars, medical officers, clinical psychologists, social workers, occupational therapists, mental health nurses, allied health assistants and teachers. The unit provides a state-wide service and has 20 beds, for young people with acute mental health conditions. Acute mental health conditions are those that require immediate treatment. This may be a young person's first experience, a repeat episode or the worsening symptoms of a condition.

What we do

The Acute Mental Health Inpatient Team provides an inpatient service to children and adolescents up until their 16th birthday. The Inpatient Unit (IPU) provides support for young people in collaboration with their families until the acute phase of care is over and mental health care can be transitioned (when required) to appropriate community-based professionals. Both voluntary and involuntary patients (under the Mental Health Act 2014 WA) are admitted to the PCH for a variety of reasons. The unit provides the following services:

- Mental health and risk assessment
- Management of mental health symptoms
- Medical, psychological and psychiatric treatment
- · Individual, family and group interventions
- Schooling and school liaison.

How is a young person admitted to our service?

Young people usually come into the unit by transfer from another service such as a community mental health service and/or an emergency department. Schools and school psychologists cannot make direct referrals to the unit. If the school is concerned about a child or a young person, they should contact the local community mental health service, and in cases of emergency, contact the local emergency department.

How long does a young person stay at the IPU?

Generally, the length of the stay is fairly brief; however this may vary according to clinical need.



School of Special Education Needs: Medical and Mental Health (SSEN:MMH)

SSEN:MMH staff provide educational support to the patients in the unit, regardless of which school they attend. Links are forged with schools, regional staff and external agencies. Students are supported in transition back to school or other education programs. The school staff and the unit develop mutual understanding which assist a young person toward recovery and minimise disruption to schooling. The IPU welcomes contact from schools. The schools are requested to contact the care coordinator for the patient in the first instance.

Follow up care

All students who experience a mental health problem need support within their school and community environment. When discharged from the unit, adjusting to life back at home and school can take time and may be stressful. Prior to discharge, an assessment is made regarding the level of support the young person will require when transitioning back to the community. In circumstances where education or mental health supports are required, the unit will contact the school via either a phone call or a request for a video conference. Routine post discharge contact occurs for patients within 48 hours for follow up. The unit will not inform the school about discharge plans or the needs of patients in every case.

In complex cases, a single follow-up by one of our teachers or a member of the healthcare staff will be made to the school. In other cases, the inpatient team will determine the need for a video conference appointment which will be requested between the unit, school, family and community mental health service. In these situations, only 48 hours' notice can be given for a video conference appointment. The best outcomes for young people are achieved with participation from schools, families and the young person. It is important for schools to accommodate the set time in the best interest of the young person.

Risk management

Within the school setting it may be necessary for further risk assessments and risk management planning or review. Information, guidelines and templates can be found in the School Response and Planning Guidelines for Students with Suicidal Behaviour and Non-Suicidal Self Injury.

Risk Assessments are ongoing throughout the young person's stay in the IPU. Some young people will present with ongoing chronic risk. If following a risk assessment, clinicians formed a view that there was chronic risk to patients or others, the patient would not be discharged without suitable supports in place and appropriate communication of this risk. If the young person's presentation escalates, then schools can utilise the contacts and supports listed below in addition to the School Response and Planning Guideline for Student Suicidal Behaviour and non-Suicidal Self-Injury.



Useful and emergency contacts

Here are some websites that you may find useful

- PCH Mental Health
- headspace
- Kids Helpline
- It's All Right
- Reach Out
- Youth beyondblue
- Child & Youth Health
- If you need to contact someone in a crisis situation, call the CAHS Urgent Mental Health telephone line on 1800 048 636. This is a 24-hour, state wide service.
- If the situation is life threatening, dial 000.

Telephone contacts

- Urgent Mental Health telephone line: 1800 048 636
- Kids Helpline (24-hour free call): 1800 551 800
- Family Helpline (freecall): 1800 643 000
- Lifeline (24-hour crisis line, free call): 13 11 14



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

Child and Adolescent Health Service

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