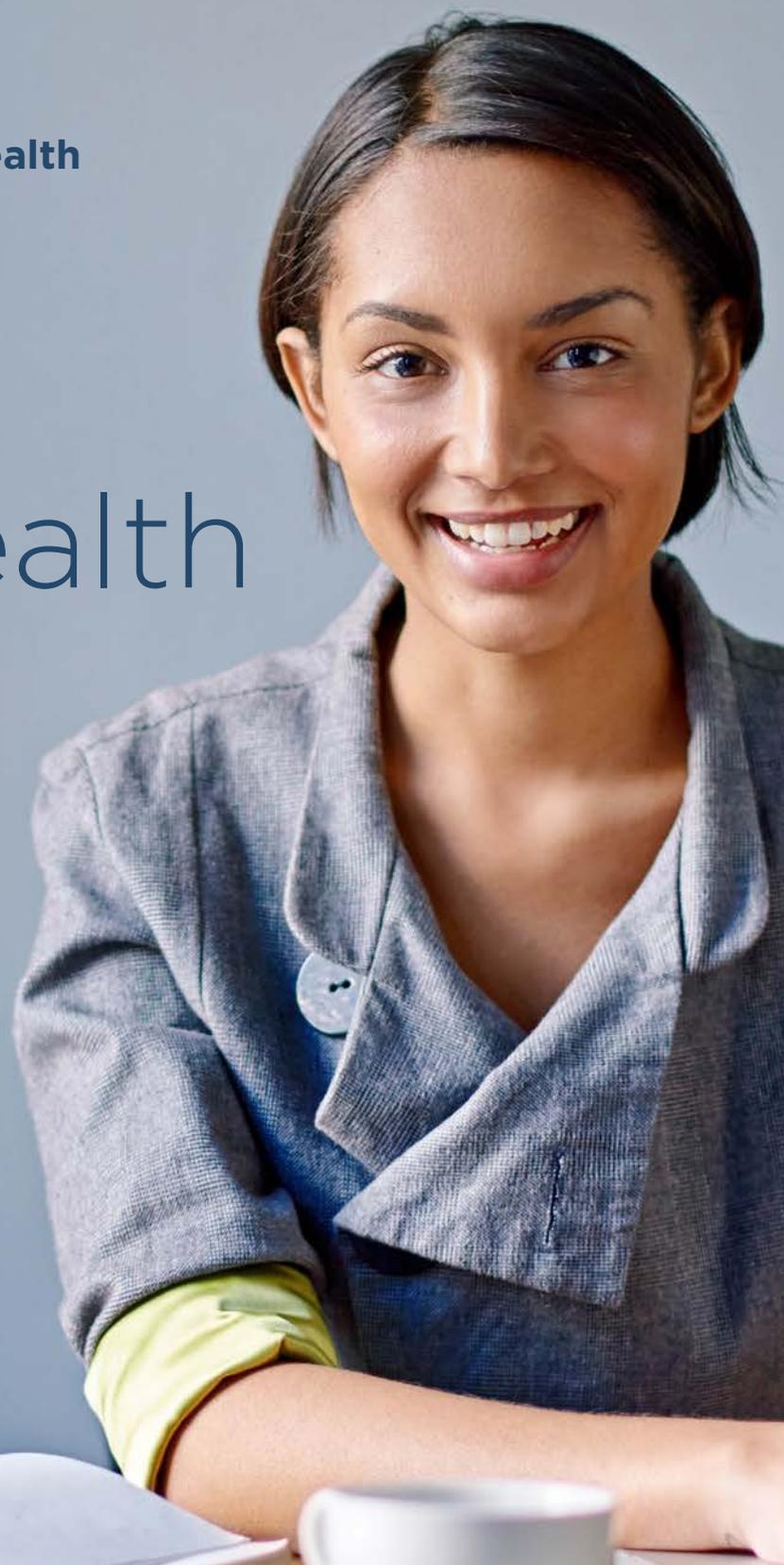


Make a difference in mental health

# 2020 Applied Mental Health Studies

For Nurses, Allied Health,  
Educators, Aged Care workers  
and other professionals working  
to improve mental health.





# Making a Difference

At HETI, the Health Education and Training Institute, we are driven to make a difference in mental health, and proudly present to you progressive, recovery-based postgraduate courses in Applied Mental Health Studies.

Our courses are designed to support professionals and workers in settings where mental health knowledge and skills are essential, and draw on the experience of the former NSW Institute of Psychiatry. Uniquely placed within Australia's largest health care system, HETI High Education delivers contemporary, evidence-based higher education that is responsive to current and emerging trends in health.

Students work closely with a team of experienced educators to build knowledge and skills in one of four specialisations in mental health; perinatal and infant, child and youth, adult and older persons.

A unique aspect of HETI High Education's Applied Mental Health Studies courses is our focus on application of learning to practice. Students engage in active discussion with academic staff and fellow students from different professional backgrounds, and assessment tasks are designed to build practical skills that can be translated to the workplace.

HETI High Education's online learning environment offers flexibility to enable students who are working, or who are in remote areas, to engage in a diverse community of learning. We understand the challenges of study, returning to study and working, and HETI's team of support staff are here to help guide you with your studies. Flexible study options include enrolment in a single unit either for professional development or as a non-award student accruing credits that could later go towards an award.

Thank you for considering studying with us and we look forward to welcoming you to HETI Higher Education.

**Dr Nick O'Connor FRANZCP FRACMA**  
**Chair, Health Education and Training Institute**  
**Higher Education Governing Council**



# Why Study with HETI?

Your learning experience will be enriched through HETI's commitment to:

- Excellence in student-centred postgraduate education delivered entirely online by academics, clinicians and specialist leads with content expertise to meet the needs of the four life span specialisations.
- Recovery-oriented, contemporary, evidence-based curriculum.
- Learning alongside other mental health practitioners and professionals from a range of disciplines, backgrounds and settings.
- Developing mental health practitioners equipped for interprofessional practice.
- Application to practice supported by activities and exercises focused on the development of real-world skills.
- Flexible study options and online resources.
- Student support – we're small enough to know you personally.

*“Being able to study at HETI Higher Education in a multidisciplinary environment is much more realistic and practical. It also gave me research skills to support an evidence-based approach to care, which is crucial.”*

**Wendy Aghdam**

Masters of Applied Mental Health Studies graduate.

➤ Discover more at [heti.edu.au](https://heti.edu.au)



## FACT

More than 20 experts contributed to teaching Applied Mental Health Studies in 2019.

Discover your academic team at [heti.edu.au/AMHS-teaching-staff](https://heti.edu.au/AMHS-teaching-staff)

## WHO SHOULD APPLY?

Our Applied Mental Health Studies courses are ideal for professionals and workers at all levels who have a passion for improving mental health and wellbeing, including but not limited to:

- Nurses
  - Inpatient
  - Community
- Allied Health
  - Occupational Therapists
  - Social Workers
  - Psychologists
- Peer Workers
- Alcohol and Other Drugs Workers
- Health Promotion Workers
- Early Childhood Educators
- Teachers, School Counsellors and other Educators
- Youth Workers
- Aged Care Workers
- Health Service and Nursing Unit Managers
- Primary Health Workers
- Human Service Managers and Staff
- Other Mental Health Workers
- Medical practitioners\*

\*Medical practitioners with registration for Australia and New Zealand are encouraged to enrol into our Psychiatric Medicine course. If you have registration overseas, you are eligible to enrol into the Applied Mental Health Studies course.

 For eligibility information visit [heti.edu.au](https://www.heti.edu.au)

## COURSE STRUCTURE

### GRADUATE CERTIFICATE

4 units over 1 year part-time<sup>#</sup>

### GRADUATE DIPLOMA

8 units over 2 years part-time<sup>#</sup>

### MASTERS

12 units over 3 years part-time<sup>#</sup>

<sup>#</sup>Our courses are accredited for part-time. Flexible study load options are available to support individual student needs.

## AWARD AND NON-AWARD COURSES AND UNITS

Our courses are accredited for part-time<sup>#</sup> delivery by the national standards body for all universities and higher education providers, the Tertiary Education Quality Standards Agency (TEQSA).

You can elect to take an award pathway to a Graduate Certificate, Graduate Diploma or Masters in Applied Mental Health Studies, or enrol in non-award courses or units for training or professional development purposes.

Non-award courses and units can be studied in two ways:

1. As a standalone non-award unit, students will complete assessment tasks, have the opportunity to receive a certificate of attainment and accrue academic credit.
2. Students can choose to undertake individual units or courses for reasons including Professional Development (PD) for skill update, career development, preparation for further study or meeting requirements of professional organisations.

For professional development courses or units, students don't complete assessments tasks but will receive a certificate of participation when they meet the participation requirements specified in the unit or professional organisation.

# Learning at HETI Higher Education

As a student in HETI's Applied Mental Health Studies courses you will engage in:

- **Application to practice** – Developing practical skills to apply theory to practice is embedded into your experience through open discussions, interactions with academic staff and specialist leads, collaborations with other students and tailored assessments.
- **Consideration and Acknowledgement of the lived experience of mental health** – People's lived experience of mental health is integrated within all Applied Mental Health Studies units.
- **Flexibility** – The majority of students balance study with work and other life commitments. Our units are flexible and designed to accommodate busy schedules, shift work and time zones.
- **Interprofessional experience** – Our courses attract a wide variety of professionals, managers and other workers interested in developing their knowledge of applied mental health practice including but not limited to nursing, allied health and early childhood educators.
- **Opportunities for reflective practice** – The skill of reflective practice is integral to navigating contemporary mental health practice in addition to the art of applying evidence-base practices to a person's unique recovery journey.
- **Time commitment** – Generally you may spend around ten hours per week per unit on your studies, with more hours spent around assessment due dates. Each unit is 15 weeks.
- **Video conferencing** – Opportunities are provided throughout the semester to join interactive sessions via 'Zoom' video conferencing.
- **Weekly content** – Each week typically consists of a collection of audio, video, readings, reflections and collaborative learning activities designed to create an engaging learning experience. Opportunities to extend yourself by exploring further readings and activities are provided.

*“Studying at HETI Higher Education has given me a whole lot more confidence in working with children and families, as well as court staff and the work I do in the mental health advocacy space. It means I can make a real difference to families. And that’s really what it’s all about.”*

**Louise Salmon**

Senior Family Consultant, Hobart Family Law Registry, and Masters of Applied Mental Health Studies graduate.

# Online Learning Delivery

HETI's state-of-the art technology ensures all students, including those in rural and remote locations, can enjoy the flexibility offered by our online learning delivery.

myHETI, our online learning management system, provides students with the opportunity to engage in a dynamic online learning community. All teaching materials, readings, multimedia and other resources to support learning can be found on myHETI.

Students also engage with each other and with the teaching staff through interactive forums, which are a great way to build professional and peer networks and support interdisciplinary collaboration. Unit materials are made available in advance to support flexible working.

All you need to get started is an internet connection and a computer or tablet with standard features including the ability to play audio and video, write and save documents in a Microsoft Office Format (or similar) and a microphone and web camera.

The students at HETI Higher Education find our online learning platform and technology to be user-friendly and easily accessible. Our Information Technology team and Student Support Officers are available to provide assistance and advice to support any myHETI questions you may have. We also offer new students the opportunity to participate in welcome sessions to introduce our technology.

*"We adopt a student-centred approach to deliver a connected online learning experience that supports the emerging and future needs of our students."*

**Ashleigh Boyle**

Frameworks Coordinator,  
Applied Mental Health Studies  
and Psychiatric Medicine, HETI  
Higher Education.

➤ **Contact us on 02 9844 6333**  
to discuss your application

# Course Outcomes Overview

Graduates of our Masters of Applied Mental Health Studies are able to:

- Understand and apply advanced knowledge of mental illness and distress through provision of evidence-based, culturally informed care, using a person-centred framework.
- Implement a management plan based on a critical analysis of evidence, biopsychosocial assessment and formulation which applies established theories to the integration of physical and mental health needs in treatment planning for a range of common mental health presentations in pursuit of recovery.
- Apply expert clinical judgement, decision-making and insight in novel and complex mental health care in pursuit of optimal outcomes for people with lived experience.
- Advocate for people with lived experience through an integrated understanding of the implications of policy, procedures and scope of practice for working within service models of care.
- Synthesise complex information in adapting recovery-oriented approaches and interventions to meet the needs of people from diverse backgrounds, life stages and cultures, experiencing mental illness and distress.
- Apply knowledge of, and respect for, Aboriginal peoples and cultures in practice.
- Engage in meaningful professional relationships across a range of health settings and within ethico-legal frameworks for the benefit of people with lived experience, their families and carers.
- Demonstrate adaptability and responsibility as a leader by reflecting on practice and demonstrating self-awareness, and open and transparent communication and action through collaborative work practices.
- Support the recovery journeys of people with mental illness: maximising hope, optimism, strength, resilience, self-determination, self-management and advocacy of each person in their community of choice.

*HETI graduates will have the capabilities to support the recovery journeys of people with mental illness: maximising hope, optimism, strength, resilience, self-determination, self-management and advocacy of each person in their community of choice.*

## **HETI Graduate Attributes**

 [Enrol now \*\*heti.edu.au\*\*](https://www.heti.edu.au)

# Key Dates

## SEMESTER 1 2020

ACTIVITY/EVENT	DATE
Applications open	3 September 2019
Semester begins	10 February 2020
Applications close	21 February 2020
Mid Semester break	6-17 April 2020
Semester ends	5 June 2020

## SEMESTER 2 2020

ACTIVITY/EVENT	DATE
Applications open	10 February 2020
Semester begins	3 August 2020
Applications close	14 August 2020
Mid Semester break	5-16 October 2020
Semester ends	27 November 2020

*“If you are a passionate, inquisitive and flexible learner, open to personal transformation through study, and learning for the sake of improving health care, then together we really can make a difference.”*

### Dr Kerry-Ann Grant

Unit Coordinator Perinatal and Infant specialisation, HETI Higher Education

# Fees

## 2020 FEES

The 2020 tuition fee for Applied Mental Health Studies Award and Non-Award units is \$2270 per unit. The 2020 tuition fee for units studied as Professional Development is \$1485 per unit.

## FEE-HELP

FEE-HELP is a loan scheme that assists eligible fee paying students to pay all or part of their tuition fees. It cannot be used for additional study costs such as accommodation or text books.

➔ [Check FEE-HELP eligibility at \*\*heti.edu.au/feehelp\*\*](https://www.heti.edu.au/feehelp)

## SCHOLARSHIPS

Find out about available scholarships for nurses and midwives, rural allied health professionals, aboriginal people and health professionals and managers living and working in NSW. Visit [heti.edu.au/scholarships](https://www.heti.edu.au/scholarships)

# Specialisations across the Life Span

Our courses in Applied Mental Health Studies provide unique pathways for students to address a core set of knowledge and capabilities for recovery-oriented mental health practice through a distinctive learning approach.

Delivered through online learning, the program incorporates pedagogical approaches that foster active learning and critical thinking, draw on earlier experience in mental health, and provide students with life-long learning goals.

Core units in recovery-oriented care, professional standards, innovation and improvement, therapeutic perspectives, research, leadership, clinical supervision, and a capstone experience support shared learning for students undertaking the specialisation of their choice:

- perinatal and infant
- child and youth
- adult
- older persons



## PERINATAL AND INFANT

Perinatal and infant mental health is a rapidly growing area of clinical and research interest. Our specialisation develops student capacity to respond effectively to the mental health needs of infants and their caregivers. Research and contemporary theories provide the framework for teaching and learning within a recovery-oriented and interdisciplinary online environment. Students can expect to engage in relationship-focused approaches to assessment, formulation and intervention that enhance optimal development, resilience, learning, health and wellbeing throughout life.

Learning experiences include work-integrated learning and in vivo observations of infant-parent interaction supported by reflective practice and group discussion.

## ADULT

The adult mental health specialisation draws on contemporary evidence to enhance recovery-oriented, and trauma-informed skills for biopsychosocial assessment, formulation and person-led care planning. Approaches for supporting people who experience a range of conditions will be explored, including: co-occurring or enduring conditions; anxiety and depression; personality disorders, psychosis and working with trauma and stress related conditions, among others.

Particular focus is placed on applying theory to the complexity and nuance of real-world practice. A holistic approach, which draws on strengths and a person's unique circumstances will be emphasised. Students will learn to critically reflect on clinical practice and deliver contemporary mental health services that are both effective and founded on a genuine collaboration with consumers and carers.

## CHILD AND YOUTH

This specialisation focuses on the unique challenges and rewards that can be found working within child and youth mental health. There is a strong focus on attachment and normal development - from infancy to early adulthood - and the exploration of opportunities to assist children and young people to achieve optimum mental health.

This is an important time for mental health assessment and intervention as many conditions emerge during this period. This specialisation enhances student knowledge of relevant mental health conditions and assists students to develop skills in engagement, assessment, formulation and care planning for child and youth interventions. The course emphasises working in partnership with children, young people and their families, as well as other key influential systems including education and child protection.

## OLDER PERSONS

The older persons specialisation draws on person-centred and recovery-oriented practice for working with people who are moving into old age and very old age. Students will explore the reality of challenges and developmental changes that occur with age. There is also an acknowledgment of the ongoing contribution of older people to society and identify factors that support positive ageing.

Common causes of mental illness and distress during this life stage will be explored. Students will consider the impact of grief, severely impaired health, ethico-legal issues, dementia and behavioural and psychological changes that may occur in the presence of dementia.

A practical approach will be taken to improve clinical outcomes, as students are assisted to adapt assessment, care planning and interventions to meet the diverse needs of older persons.

# Applied Mental Health Studies

## PERINATAL AND INFANT SPECIALISATION

■ CORE ■ SPECIALISATION

### YEAR 1 GRADUATE CERTIFICATE

SEMESTER 1	Fundamentals of Recovery-Oriented Care	Professional Standards in Mental Health Care
SEMESTER 2	Promoting Recovery and Resilience in Perinatal and Infant Mental Health	Assessment and Formulation in Perinatal and Infant Mental Health

### YEAR 2 GRADUATE DIPLOMA

SEMESTER 1	Innovation and Improvement in Mental Health Care	Therapeutic Perspectives Across the Lifespan
SEMESTER 2	Research Methods and Evaluation for Recovery-Oriented Mental Health Practice	Relationship Based Approaches to Intervention in Perinatal and Infant Mental Health

### YEAR 3 MASTERS

SEMESTER 1	Leadership Practice in Mental Health	Research and Project Planning*
SEMESTER 2	Clinical Supervision Theory and Practice	Mental Health Capstone

## CHILD AND YOUTH SPECIALISATION

■ CORE ■ SPECIALISATION

### YEAR 1 GRADUATE CERTIFICATE

SEMESTER 1	Fundamentals of Recovery-Oriented Care	Professional Standards in Mental Health Care
SEMESTER 2	Recovery and Resilience in Child and Youth Mental Health	Psychosocial Practice in Child and Youth Mental Health

### YEAR 2 GRADUATE DIPLOMA

SEMESTER 1	Innovation and Improvement in Mental Health Care	Therapeutic Perspectives Across the Lifespan
SEMESTER 2	Research Methods and Evaluation for Recovery-Oriented Mental Health Practice	<b>Select one:</b> Family-Oriented Care in Mental Health <b>or</b> Individual Therapies in Mental Health Care

### YEAR 3 MASTERS

SEMESTER 1	Leadership Practice in Mental Health	Research and Project Planning*
SEMESTER 2	Clinical Supervision Theory and Practice	Mental Health Capstone

\*Research and Project Planning is a prerequisite for Mental Health Capstone.

Unit descriptors and weekly topics subject to change.

## ADULT SPECIALISATION

 CORE  SPECIALISATION

### YEAR 1 GRADUATE CERTIFICATE

<b>SEMESTER 1</b>	Fundamentals of Recovery-Oriented Care	Professional Standards in Mental Health Care
<b>SEMESTER 2</b>	Adult Mental Health in Practice	Working with Complexity in Adult Mental Health

### YEAR 2 GRADUATE DIPLOMA

<b>SEMESTER 1</b>	Innovation and Improvement in Mental Health Care	Therapeutic Perspectives Across the Lifespan
<b>SEMESTER 2</b>	Research Methods and Evaluation for Recovery-Oriented Mental Health Practice	<b>Select one:</b> Family-Oriented Care in Mental Health <b>or</b> Individual Therapies in Mental Health Care

### YEAR 3 MASTERS

<b>SEMESTER 1</b>	Leadership Practice in Mental Health	Research and Project Planning*
<b>SEMESTER 2</b>	Clinical Supervision Theory and Practice	Mental Health Capstone

## OLDER PERSON SPECIALISATION

 CORE  SPECIALISATION

### YEAR 1 GRADUATE CERTIFICATE

<b>SEMESTER 1</b>	Fundamentals of Recovery-Oriented Care	Professional Standards in Mental Health Care
<b>SEMESTER 2</b>	Recovery-Oriented Mental Health Care with Older People	Improving the Mental Health of Very Old People

### YEAR 2 GRADUATE DIPLOMA

<b>SEMESTER 1</b>	Innovation and Improvement in Mental Health Care	Therapeutic Perspectives Across the Lifespan
<b>SEMESTER 2</b>	Research Methods and Evaluation for Recovery-Oriented Mental Health Practice	<b>Select one:</b> Family-Oriented Care in Mental Health <b>or</b> Individual Therapies in Mental Health Care

### YEAR 3 MASTERS

<b>SEMESTER 1</b>	Leadership Practice in Mental Health	Research and Project Planning*
<b>SEMESTER 2</b>	Clinical Supervision Theory and Practice	Mental Health Capstone

\*Research and Project Planning is a prerequisite for Mental Health Capstone.  
Unit descriptors and weekly topics subject to change.

# Fundamentals of Recovery-Oriented Care

This unit enables the student to understand and apply the recovery process, within the context of action and promotion of practices that support and facilitate people's self-directed recovery, regardless of age, to ensure achievement and maintenance of meaningful lives. Students increase their understanding of current systems and consider alternatives that support recovery-oriented care in practice.

## LEARNING OUTCOMES

- Demonstrate application of the concepts and principles of recovery that derive from the lived experience of mental distress.
- Explore adaptations that may be required in applying the core principles underpinning recovery-oriented practice to be responsive to the needs of diverse people.
- Apply knowledge of, and respect for, Aboriginal people and cultures in practice.
- Describe the possible impacts on people of the values, biases and beliefs built into professional training and service systems.
- Engage in collaborative decision making about treatment choices, including medication and a range of other types of resilience-promoting supports, skills and strengths.
- Identify resources to meet a person's needs relevant to a specific life stage, that exist within the community and, where there are gaps, work collaboratively to promote the development of appropriate resources.
- Present and justify, in partnership with a person and their family and support network; a plan of care and support for a person utilising evidence-based care and a person-centred recovery-oriented framework.

## WEEKLY SCHEDULE

<b>Week 1</b>	Recovery and recovery-oriented practice
<b>Week 2</b>	Evolving models of recovery and recovery-oriented practice
<b>Week 3</b>	Mental illness or mental distress?
<b>Week 4</b>	Hopeful engagement with people, their families and networks
<b>Week 5</b>	Diversity, culture and recovery
<b>Week 6</b>	Person first assessment
<b>Week 7</b>	Promoting self-determination in care planning
<b>Week 8</b>	Assessment, diagnosis and care planning to support recovery
<b>Week 9</b>	Impact of recovery approaches on individual interventions I
<b>Week 10</b>	Impact of recovery approaches on individual interventions II
<b>Week 11</b>	Recovery-oriented practice and service delivery with families and personal networks, other agencies and communities
<b>Week 12</b>	Integrating Aboriginal and Torres Strait Islander social and emotional wellbeing
<b>Week 13</b>	Mental health and wellbeing promotion and prevention
<b>Week 14</b>	Measuring progress
<b>Week 15</b>	Benefits and challenges in implementing recovery-oriented approaches in my work and service

# Professional Standards in Mental Health Care

This unit explores the ethico-legal basis of mental health care provision. Students will examine the tension between risk and recovery, professional boundaries, ethical decision making and critically reflect on national mental health standards, professional codes of practice, and mental health legislation. Students will collaborate and engage in open discussion of the real-world challenges that can occur translating standards into practice. Reflective practice skills will be developed along with an exploration of the role of clinical supervision. It is referenced to the National Mental Health Core Capabilities (Health Workforce Australia, 2014) and the National Practice Standards for the Mental Health Workforce (Department of Health, Victoria, 2013).

## LEARNING OUTCOMES

- Critically evaluate ethico-legal dilemmas in mental health care. Demonstrate the application of decision making and insight; and utilisation of professional relationships; in pursuit of optimal outcomes for people with a lived experience.
- Critically appraise competing issues within mental health care and the application of professional standards to practice.
- Critically evaluate the principles of interprofessional practice, including consideration of scope of practice and implications for collaboration with diverse stakeholders.
- Examine the role of clinical supervision and reflective practice in contributing to the promotion of high professional standards; facilitating self-awareness and transparent communication.

## WEEKLY SCHEDULE

<b>Week 1</b>	Professional Standards I
<b>Week 2</b>	Professional Standards II
<b>Week 3</b>	Interprofessional practice
<b>Week 4</b>	Reflective practice and clinical supervision
<b>Week 5</b>	Ethical decision making
<b>Week 6</b>	Professional boundaries
<b>Week 7</b>	Mental Health Legislation
<b>Week 8</b>	Navigating risk and recovery I
<b>Week 9</b>	Navigating risk and recovery II
<b>Week 10</b>	Understanding trauma
<b>Week 11</b>	Trauma informed care and practice I
<b>Week 12</b>	Trauma informed care and practice II
<b>Week 13</b>	Evidence-based practice
<b>Week 14</b>	Communication
<b>Week 15</b>	Review

# Promoting Recovery and Resilience in Perinatal and Infant Mental Health

Students will develop an understanding of the uniqueness and diversity of recovery and the lived experience of mental illness in the context of perinatal and infant mental health. This unit orients students to the biopsychosocial theoretical approach and the multiple risk and protective factors that can influence physical health, mental health and wellbeing in parents, infants and their families. Attachment theory and mentalisation-based practice is presented in the unit as a framework for understanding the importance of early relationships in shaping later development, and as an evidence base for best practice in working with infants and young children.

## LEARNING OUTCOMES

- Critically appraise the contribution of a recovery-oriented framework to best practice in perinatal and infant mental health.
- Understand biopsychosocial vulnerabilities particular to perinatal and infant mental health and their impact on parents, the infant and significant others.
- Conceptualise and critically appraise appropriate interventions through an attachment and mentalising framework, keeping diversity in mind.

## WEEKLY SCHEDULE

<b>Week 1</b>	Recovery and resilience in perinatal and infant mental health
<b>Week 2</b>	The concept of resilience
<b>Week 3</b>	Resilience in practice
<b>Week 4</b>	Resilience and the infant brain
<b>Week 5</b>	Infant's internal risk and protective factors
<b>Week 6</b>	Family and environmental risk and protective factors
<b>Week 7</b>	Attachment
<b>Week 8</b>	The impact of loss, stress and trauma I
<b>Week 9</b>	The impact of loss, stress and trauma II
<b>Week 10</b>	Resilient parenting
<b>Week 11</b>	Children of parents with a disability
<b>Week 12</b>	Children of parents with mental illness
<b>Week 13</b>	Mental health and wellbeing of fathers
<b>Week 14</b>	Incarcerated mothers and their children
<b>Week 15</b>	The importance of play

# Assessment and Formulation in Perinatal and Infant Mental

This unit presents a relationship-based, developmental approach to assessment and formulation in perinatal and infant mental health. Given the centrality of early relationships in shaping infant development, the primary focus is on building student capacity to work collaboratively with parents, to identify and understand strengths, vulnerabilities, and potential for change in these early relationships. The impact of wider social and cultural factors is discussed, and case studies and workplace learning experiences facilitate the integration of theoretical concepts and practical applications. The context and principles of assessment, process of assessment, clinical formulation, assessment of risk, parenting capacity and the parent-infant relationship are explored.

## LEARNING OUTCOMES

- Demonstrate collaborative assessment processes in the identification, interpretation and reporting of biopsychosocial risk and protective factors important in shaping perinatal and infant mental health.
- Articulate a collaborative, individualised case formulation that includes strengths, adaptive capacities, short and long-term needs, and review of progress.
- Develop a comprehensive intervention plan that is evidence-based and consistent with the case formulation above.

## WEEKLY SCHEDULE

<b>Week 1</b>	Principles of assessment in perinatal and infant mental health
<b>Week 2</b>	The assessment process
<b>Week 3</b>	Formulation and care planning
<b>Week 4</b>	Parental mental health I: Anxiety and mood disorders
<b>Week 5</b>	Parental mental health II: Suicidality and low prevalence disorders
<b>Week 6</b>	Trauma
<b>Week 7</b>	Attachment I: Theoretical perspectives
<b>Week 8</b>	Attachment II: Internal working models
<b>Week 9</b>	Assessing attachment in clinical practice
<b>Week 10</b>	Parental reflective functioning
<b>Week 11</b>	Risk in the parent-child relationship
<b>Week 12</b>	Specific measures
<b>Week 13</b>	Developmental assessments
<b>Week 14</b>	Diagnostic classification system: Zero to three
<b>Week 15</b>	Professional challenges and report writing

# Recovery and Resilience in Child and Youth Mental Health

This unit employs a recovery focused framework for working with children, young people and their families. Students will develop knowledge and understanding of the theory and practice relevant to children and young people presenting with anxiety, depression, trauma, psychosis, neurodevelopmental disorders and other presentations commonly seen in child and youth mental health settings. This unit will provide students with the opportunity to enhance their skills as well as to critically appraise contemporary approaches to working in child and youth mental health.

## LEARNING OUTCOMES

- Demonstrate an understanding of the application of a recovery-oriented framework to best practice in child and youth mental health.
- Conceptualise and critically appraise appropriate interventions for a range of presentations commonly seen in child and youth mental health settings.
- Integrate current research findings with theory and practice relevant to child and youth mental health.

## WEEKLY SCHEDULE

<b>Week 1</b>	Recovery
<b>Week 2</b>	Building resilience
<b>Week 3</b>	Emotional wellbeing
<b>Week 4</b>	Nervous and shy
<b>Week 5</b>	Excessive worry and panic
<b>Week 6</b>	Unusual behaviours
<b>Week 7</b>	Eating and sleeping problems
<b>Week 8</b>	Cognitive challenges
<b>Week 9</b>	Autism
<b>Week 10</b>	Rule breaking
<b>Week 11</b>	Grief and trauma
<b>Week 12</b>	Depression and self-harm
<b>Week 13</b>	Psychosis
<b>Week 14</b>	Substance use and physical health
<b>Week 15</b>	Uncommon presentations

# Psychosocial Practice in Child and Youth Mental Health

This unit incorporates recovery principles and emphasises the importance of taking a developmentally appropriate approach to biopsychosocial assessment, formulation and intervention in child and youth mental health. Students will examine normal development and the effects trauma and adversity can have on the mental health and wellbeing of children, young people and their families. Students will be provided with opportunities to reflect on clinical practice, develop care planning skills, examine relevant social and cultural factors and build their capacity to work collaboratively with children, young people, and families in partnership with other health providers and agencies including education and child protection.

## LEARNING OUTCOMES

- Demonstrate an ability to consider a developmental context and apply a biopsychosocial framework to the assessment of children, young people and families who present with mental health concerns.
- Articulate an individualised, person-centred case formulation that considers the impact of culture and includes identification of strengths.
- Engage in reflective practice and demonstrate self-awareness and transparent communication through collaborative work practices.

## WEEKLY SCHEDULE

<b>Week 1</b>	Attachment theory
<b>Week 2</b>	Difficulties with attachment
<b>Week 3</b>	Infant development (birth-2 years)
<b>Week 4</b>	Child development (3-11 years)
<b>Week 5</b>	Adolescent development (12-17 years)
<b>Week 6</b>	Young adulthood (18-24 years)
<b>Week 7</b>	Friendships, bullying and sexual identity
<b>Week 8</b>	Working with families
<b>Week 9</b>	Self-care and burn-out
<b>Week 10</b>	Engagement and building rapport
<b>Week 11</b>	Assessments and interviews
<b>Week 12</b>	Formulation and care planning
<b>Week 13</b>	Child protection and out of home care
<b>Week 14</b>	Collaboration and partnership
<b>Week 15</b>	Legal and ethical considerations

# Adult Mental Health in Practice

This unit enhances students' recovery-oriented skills for biopsychosocial assessment, formulation and person-led care planning. Evidence-based approaches to common sources of psychological distress will be examined, including anxiety and low mood. The relationship between physical and mental health will be considered, along with strategies for enhancing resilience. Students will be provided with an opportunity to critically reflect on their clinical practice and enhance their ability to provide collaborative evidence-based care.

## LEARNING OUTCOMES

- Critically reflect on theoretical understandings and practical approaches to working with people who experience commonly occurring adult mental health presentations and life-stage issues, including consideration of the relationship between physical and mental health.
- Demonstrate the ability to apply a biopsychosocial framework to assessment, formulation and care-planning in collaboration with adults experiencing psychological distress, including consideration of the relationship between physical and mental health.
- Develop an application of a recovery-oriented framework to best practice when working with adults who experience a range of commonly occurring adult mental health conditions.

## WEEKLY SCHEDULE

<b>Week 1</b>	The adult lifespan
<b>Week 2</b>	Collaborative biopsychosocial assessment and MSE
<b>Week 3</b>	Enhancing collaborative formulation
<b>Week 4</b>	Low mood and depressive conditions I
<b>Week 5</b>	Low mood and depressive conditions II
<b>Week 6</b>	Enhancing resilience
<b>Week 7</b>	Physical and mental health
<b>Week 8</b>	Anxiety I
<b>Week 9</b>	Anxiety II
<b>Week 10</b>	Bipolar disorders
<b>Week 11</b>	Eating disorders
<b>Week 12</b>	Neurological and neurodevelopmental conditions
<b>Week 13</b>	Obsessive compulsive conditions
<b>Week 14</b>	Domestic violence
<b>Week 15</b>	Review

# Working with Complexity in Adult Mental Health

This unit provides an opportunity for students to examine recovery-oriented and evidence-based approaches to working with adults who experience enduring or coexisting mental health conditions, such as trauma, psychosis or co-occurring substance use. Students will enhance their capacity to work with complexity and to deliver contemporary mental health services that are safe, effective and founded on a genuine collaboration with consumers and carers.

## LEARNING OUTCOMES

- Critically reflect on theoretical understandings and practical approaches to working with people who experience complex presentations, including enduring and coexisting mental health conditions.
- Demonstrate an understanding of the application of a recovery-oriented framework to best practice when working with adults who experience enduring or coexisting mental health conditions.
- Critically appraise evidence-based recommendations for care planning and conceptualise application to adults who experience mental health conditions.

## WEEKLY SCHEDULE

<b>Week 1</b>	Working with complexity
<b>Week 2</b>	PTSD
<b>Week 3</b>	Complex trauma
<b>Week 4</b>	Disclosure, dissociation and somatic conditions
<b>Week 5</b>	Personality
<b>Week 6</b>	Borderline personality disorder
<b>Week 7</b>	Suicide prevention
<b>Week 8</b>	Psychosis I
<b>Week 9</b>	Psychosis II
<b>Week 10</b>	Psychosis III
<b>Week 11</b>	Prevention of seclusion and restraint
<b>Week 12</b>	Substance-related and addictive conditions I
<b>Week 13</b>	Substance-related and addictive conditions II
<b>Week 14</b>	Vicarious trauma and self-care
<b>Week 15</b>	Review

# Recovery-Oriented Mental Health Care with Older People

As the Australian population ages, there is an increasing demand for recognising the different needs of people as they first transition into old age. This unit provides a framework for students to apply recovery-oriented practices when working with people who are moving into old age. It explores the reality of challenges and developmental changes that occur with age, recognises the ongoing contribution of older people to society and identifies the factors that support positive ageing. Students will be adapting assessment, care planning, management and interventions to meet the needs of older people, as well as applying their knowledge of old age and common causes of mental illness and distress during this life stage.

## LEARNING OUTCOMES

- Demonstrate knowledge about normal development, mental illness and distress, and recovery with focus on old age (over 60 years) and the impact, use and management of current therapies and interventions.
- Analyse the biopsychosocial situation of an individual and their personal ecology including assessment and identification of any relevant factors including all forms of diversity and for prevalent mental health illnesses.
- Formulate age appropriate biopsychosocial management and care plans using evidence-based therapies and interventions in collaboration with all key stakeholders who interact with the consumer.
- Proactively consider and develop responses to improve mental health for older people through mental health promotion, policy, clinical or legal practice including collaborative strategies with other professionals, older people and important peoples within older peoples' lives.

## WEEKLY SCHEDULE

<b>Week 1</b>	What happens to mental health as people age?
<b>Week 2</b>	Exploring the personal ecology
<b>Week 3</b>	Impact of ageing
<b>Week 4</b>	Strengths based approaches
<b>Week 5</b>	Living with depression
<b>Week 6</b>	Improving outcomes for older people living with depression
<b>Week 7</b>	Living with psychoses
<b>Week 8</b>	Improving outcomes for older people living with psychoses
<b>Week 9</b>	Early onset dementia and providing support
<b>Week 10</b>	Living with substance and medication use and abuse
<b>Week 11</b>	Adapting therapies and interventions for older people: Considering trauma
<b>Week 12</b>	Adapting therapies and Interventions for older people: Metallisation and CBT
<b>Week 13</b>	Aboriginal consumers: Culture, inclusion and choice
<b>Week 14</b>	CALD consumers: Inclusion and choice
<b>Week 15</b>	What does 2030 look like?

# Improving the Mental Health of Very Old People

The number of people living to very old age is increasing. This unit applies a person-centred recovery-oriented focus for working with people who are moving into very old age. It investigates the challenges in recognising and supporting the potential for very old people to contribute to society, as well as the concept of recovery in the presence of cognitive decline or severely impaired health. It evaluates key aspects of person-centred care, its practicalities in everyday practice and its effectiveness in improving clinical outcome. Students will be adapting assessment, care planning, management and interventions to meet the needs of very old people, as well as deepening their knowledge of very old age, grief, ethico-legal issues, the psychotic spectrum, dementia and behavioural and psychological changes that may occur in the presence of dementia. This unit also prepares students for the responsibility of completing a report related to Guardianship proceedings.

## LEARNING OUTCOMES

- Demonstrate knowledge about normal development, mental illness and distress, and recovery with focus on the very old, and the impact, use and management of current therapies and interventions.
- Analyse the biopsychosocial situation of an individual and their personal ecology, including assessment and identification of any relevant factors including all forms of diversity and for prevalent mental health illnesses.
- Formulate age appropriate biopsychosocial management and care plans using evidence-based therapies and interventions in collaboration with all key stakeholders who interact with the consumer.
- Proactively consider and develop responses to improve outcomes for very old people with mental ill health through mental health promotion, policy, and legal or clinical practice including collaborative strategies with both other professionals, very old people and important peoples' within very old peoples' lives.

## WEEKLY SCHEDULE

<b>Week 1</b>	The impact and implications of living at a very old age
<b>Week 2</b>	Challenges for the very old living with mental ill health
<b>Week 3</b>	Living in aged care facilities: The mental health implications
<b>Week 4</b>	Capacity, power, advocacy and getting older: Assessment and impacts
<b>Week 5</b>	Ethical dilemmas for different stakeholders
<b>Week 6</b>	Dementia and delirium
<b>Week 7</b>	Living with dementia: Reducing concerning behaviours
<b>Week 8</b>	Working with people with dementia and mental illness
<b>Week 9</b>	Depression and suicide: What's different for the very old?
<b>Week 10</b>	Anxiety and anxiety disorders: What's different for older people?
<b>Week 11</b>	Pain and medication management for mental health and mental ill-health
<b>Week 12</b>	Adapting therapies and interventions for very old people
<b>Week 13</b>	Sexuality: Considerations and choice
<b>Week 14</b>	The big questions: Loss and grief, and end of life
<b>Week 15</b>	What should 2030 look like?

# Innovation and Improvement in Mental Health Care

This unit introduces students to contemporary examples of innovation and improvement and examines opportunities for mental health professionals, in collaboration with people with lived experience of mental illness, to create, innovate and improve services. Students will critically reflect on the role of interprofessional practice and leadership in promoting supportive environments for practice improvement and the role of clinical governance as a vehicle for continuous improvement. Students will explore the rationale for increasing the focus on the physical health of people who access mental health services and consider the complex topic of 'changing the culture of mental health services'. The unit provides opportunities to appraise a range of tools for innovation before focusing on implementing and sustaining change in the context of innovation and improvement in mental health care.

## LEARNING OUTCOMES

- Demonstrate an understanding of effective partnership and collaboration with people with lived experience of mental illness regarding the improvement of mental health care services.
- Critically appraise the evidence about the factors that support innovation and how interprofessional practice and leadership can encourage and promote supportive environments for practice improvement.
- Critically reflect on the role of clinical governance in quality improvement in mental health services.
- Critically evaluate a range of methods and tools for generating innovative thinking.
- Evaluate contemporary examples of innovation and improvement in mental health care with respect to their focus on physical health, alignment to recovery-oriented approaches and relevance to specific life stage and health setting.

## WEEKLY SCHEDULE

<b>Week 1</b>	Innovation in mental health care
<b>Week 2</b>	Consumer involvement
<b>Week 3</b>	Engaging consumers and carers
<b>Week 4</b>	Supporting innovation
<b>Week 5</b>	Leadership
<b>Week 6</b>	Clinical governance
<b>Week 7</b>	Barriers, obstacles and errors
<b>Week 8</b>	Recovery
<b>Week 9</b>	Changing the culture
<b>Week 10</b>	Innovative thinking
<b>Week 11</b>	Tools for innovation
<b>Week 12</b>	Developing a project
<b>Week 13</b>	Quality and safety
<b>Week 14</b>	Implementing and sustaining change
<b>Week 15</b>	Review

# Therapeutic Perspectives Across the Lifespan

This unit examines current issues and debates on psychotherapeutic theory and practice in contemporary mental health services across the lifespan. It includes an analysis of contemporary debate around, and evaluation of, common therapeutic interventions in the context of recovery-oriented approaches. This unit will enhance students' knowledge of current psychotherapeutic interventions and encourage exploration of the impact and role of these therapies in the treatment of infants, children, adults and older persons as part of recovery-oriented services. It is relevant to practitioners working in a range of settings with diverse populations experiencing mental distress at all points across the lifespan.

## LEARNING OUTCOMES

- Assess current issues and debates about the role of psychotherapeutic theory and practice in contemporary mental health services using a recovery-based framework.
- Critically evaluate evidence-based therapeutic interventions from current research/literature and critically evaluate their application at a specified life stage or practice setting.
- Apply professional collaborative decision making about treatment choices and its role alongside a range of other types of resilience promoting supports, skills and strengths.
- Engage consumers and carers in partnership-based relationships to offer the most appropriate therapeutic options and supports in the context of person-centred approach.
- Apply appropriate management/interventions to respond to the presentation of mental health issues in a specific life stage/health setting.
- Understand and apply therapeutic approaches as applied to diverse community.

## WEEKLY SCHEDULE

<b>Week 1</b>	General principles in psychotherapy
<b>Week 2</b>	Integrating therapy into recovery-oriented framework
<b>Week 3</b>	Application of psychodynamic psychotherapy
<b>Week 4</b>	Application of cognitive behaviour therapy
<b>Week 5</b>	Application of interpersonal psychotherapy and family therapy
<b>Week 6</b>	Person-centred care and Person-centred therapy
<b>Week 7</b>	Motivational interviewing and motivational enhancement therapy
<b>Week 8</b>	Application of group psychotherapy
<b>Week 9</b>	Biological psychiatric treatment
<b>Week 10</b>	Complementary and alternative therapy
<b>Week 11</b>	Teamwork and collaboration
<b>Week 12</b>	Working with diverse community I
<b>Week 13</b>	Working with diverse community II
<b>Week 14</b>	Evidence-based therapies across lifespan
<b>Week 15</b>	Psychotherapy for common mental health concerns

# Research Methods and Evaluation for Recovery-Oriented Mental Health Practice

This unit will develop students' capacity to be critical consumers of research, especially the evidence for contemporary recovery-focused, person-centred treatment modalities, including those related to assessment and planning, intervention and evaluation. Students will learn how to locate, evaluate and critique methodological approaches used in recovery research. This unit will explore the similarities and differences to methods commonly adopted in traditional health care research, as well as the translation of recovery research into practice.

## LEARNING OUTCOMES

- Demonstrate a critical understanding of the relationship between “evidence-based practice” and “recovery”.
- Demonstrate a critical understanding of similarities and differences between traditional research approaches and recovery-oriented research.
- Demonstrate a critical understanding of ethical conduct of research and the challenge that may arise in recovery-oriented research.
- Identify how recovery research may be applied in day-to-day practice.

## WEEKLY SCHEDULE

<b>Week 1</b>	Research and evaluation in mental health care
<b>Week 2</b>	Evidence-based practice
<b>Week 3</b>	Integrating evidence-based practices and the recovery model
<b>Week 4</b>	Asking the right questions
<b>Week 5</b>	Locating current best evidence
<b>Week 6</b>	Appraising current best evidence
<b>Week 7</b>	Evidence from quantitative studies
<b>Week 8</b>	Evidence from qualitative studies
<b>Week 9</b>	Evidence from systematic reviews
<b>Week 10</b>	Evidence from guidelines
<b>Week 11</b>	Using evidence to inform clinical decisions
<b>Week 12</b>	Engaging consumers and carers
<b>Week 13</b>	Ethics in research
<b>Week 14</b>	Developing an evidence-based practice Culture
<b>Week 15</b>	Reflection and Next Steps

# Relationship Based Approaches to Intervention in Perinatal and Infant Mental Health

Early relationships and the early years of development are critical determinants of a child's capacity for resilience, learning, health and wellbeing throughout life. This unit introduces students to a range of intervention models specific to an infant mental health perspective. Students will evaluate and integrate approaches in contemporary practice and will apply their knowledge to the development of intervention plans that promote collaborative care and evidence-based treatment. The experiential component of the course facilitates the integration of theory and practice and develops capacity for observation and reflection. These core skills will enable students to better understand infant development, facilitative parent-infant interactions and work with families in a relationships-based framework.

## LEARNING OUTCOMES

- Understand intervention models specific to contemporary practice in perinatal and infant mental health.
- Develop advanced observational skills specific to infant communication, parent-infant interaction and awareness of the infant's subjective emotional experience.
- Critically apply theoretical frameworks to the observation process considering diversity of individuals and families and the influence of a range of social contextual and cultural factors.
- Apply understanding of principles of a relationship-based approach to the formulation and development of a management plan in a clinical case of an infant and their family.

## WEEKLY SCHEDULE

<b>Week 1</b>	Introduction to intervention in perinatal and infant mental health
<b>Week 2</b>	Getting started: Essential clinician skills
<b>Week 3</b>	Models of observation
<b>Week 4</b>	Observation in practice
<b>Week 5</b>	Attachment based interventions I
<b>Week 6</b>	Attachment based interventions II
<b>Week 7</b>	The transition to parenthood
<b>Week 8</b>	Interventions in sleeping, settling and feeding difficulties
<b>Week 9</b>	Toddlerhood
<b>Week 10</b>	Trauma interventions
<b>Week 11</b>	Psychoeducation and health promotion
<b>Week 12</b>	Peer-Run interventions
<b>Week 13</b>	Complementary and alternative interventions
<b>Week 14</b>	Interventions with specific populations
<b>Week 15</b>	The self of the clinician in perinatal and infant mental health

**GRADUATE DIPLOMA**  
SEMESTER 2 - ELECTIVE

# Family-Oriented Care in Mental Health

This unit provides a framework for the understanding of major models of family therapy. It allows students to examine current issues and debates about the applicability of working collaboratively with peers, persons and their families. This unit will enhance the student's knowledge and skills of current family therapy practice and encourages exploration of the integration of family work to enhance the care of a person presenting with mental distress. It also encourages students to debate how and when to apply models of family work in their practice, and to develop interventions that promote collaborative care planning and evidence-based treatment.

## LEARNING OUTCOMES

- Demonstrate an understanding of the core principles of recovery-oriented family focused interventions in mental health across the lifespan.
- Use advanced problem-solving skills to apply collaborative, family-oriented interventions and be able to critically evaluate outcomes.
- Critically review, analyse and synthesise family therapy literature and research applied within a best practice recovery framework considering mental health models of care and policy and procedures.
- Critically review mental health services and be able to apply family-oriented interventions in the workplace.

## WEEKLY SCHEDULE

<b>Week 1</b>	Family-oriented practice within a recovery framework
<b>Week 2</b>	A family-oriented approach to mental health practice
<b>Week 3</b>	Applying family-oriented mental health in practice - Part I
<b>Week 4</b>	Applying family-oriented mental health in practice - Part II
<b>Week 5</b>	Assessing families Part I - Recovery and the family life cycle
<b>Week 6</b>	Assessing families Part II - Recovery and the family life cycle
<b>Week 7</b>	Systemic case formulation and engaging families
<b>Week 8</b>	The first family therapy interview
<b>Week 9</b>	Solution-focused brief therapy
<b>Week 10</b>	Structural family therapy
<b>Week 11</b>	Narrative therapy
<b>Week 12</b>	Systemic family therapy
<b>Week 13</b>	Evidence-based practice, research and evaluation
<b>Week 14</b>	Applications of family-oriented therapy
<b>Week 15</b>	More applications, ethics, professional development and training

# Individual Therapies in Mental Health Care

This unit investigates current issues and debates on the role of psychotherapy, e-therapies and other therapies and technologies in different settings and models of care. Students will consider the suitable application of different psychotherapeutic techniques to practice. They will develop intervention plans that promote collaborative care planning and evidence-based treatment, including models of support for people using e-therapy. As a study focus, this elective unit examines the core principles of Cognitive Behavioural Therapy (CBT) and Motivational Interviewing (MI) within recovery-oriented mental health care, and explores key adaptations required for individuals across life stages. It will enhance students' knowledge and skills in the application of CBT and MI to enhance the care of a person presenting with mental distress.

## LEARNING OUTCOMES

- Demonstrate an understanding of core principles of individual psychotherapy focused interventions (CBT and Motivational Interviewing) in mental health across the lifespan.
- Use advanced problem-solving skills to apply collaborative, individual oriented therapy and be able to critically evaluate outcomes.
- Demonstrate enhanced clinical judgement when applying individual psychotherapeutic interventions considering socio-economic, political, gender, spiritual and cultural contexts of practice in mental health.
- Critically review mental health services and be able to support people in undertaking e-therapy.

## WEEKLY SCHEDULE

<b>Week 1</b>	Recovery-oriented individual psychotherapy
<b>Week 2</b>	Cognitive behavioural therapy: Key principles and case formulation
<b>Week 3</b>	Cognitive behavioural therapy: Cognitive interventions
<b>Week 4</b>	Cognitive behavioural therapy: Relaxation training
<b>Week 5</b>	Cognitive behavioural therapy: Behavioural interventions
<b>Week 6</b>	Mindfulness and emotion regulation
<b>Week 7</b>	Motivational interviewing - I
<b>Week 8</b>	Motivational interviewing - II
<b>Week 9</b>	Transference and the therapeutic alliance
<b>Week 10</b>	Evidence supported practice and monitoring outcomes
<b>Week 11</b>	E-therapy
<b>Week 12</b>	Strengths-based approaches
<b>Week 13</b>	Cultural and spiritual diversity
<b>Week 14</b>	Gender and sexuality issues
<b>Week 15</b>	Integrative therapy case scenarios

# Leadership Practice in Mental Health

Leadership is emerging as one of the most important capabilities for recovery-oriented mental health service delivery. This unit examines contemporary approaches to leadership and how these relate to the challenges presented by the complex environment of mental health care. Leadership practice is explored from the perspectives of mental health policy and practice, inter-agency collaboration, peer support, consumer advocacy, and workplace culture. Contemporary theories and behavioural models of leadership are explored, drawing on research findings in neuroscience, emotional intelligence competencies, and leadership capability frameworks.

## LEARNING OUTCOMES

- Demonstrate advanced and integrated knowledge of contemporary leadership concepts, theories and models and their application to recovery-oriented practice, systems thinking and clinical leadership.
- Critically evaluate and challenge the concept of mental health services as complex adaptive systems and the implications of this for leadership practice in a risk-averse culture.
- Critically appraise leadership capability frameworks, to determine and apply the most appropriate capabilities for enhancing leadership practice in mental health.
- Critically evaluate evidence-based leadership models and practices which enable clarity of purpose, inclusive leadership, empowerment of others, ethical practice and recovery-oriented processes.
- Advocate for mental health consumers, challenging discrimination and public discourse, ensuring decision making processes meet cultural requirements in an environment of complexity and uncertainty, understanding how these skills are applied in situations of shared leadership between professionals and those with lived experience.
- Enhance critical thinking to lead others in challenging assumptions underpinning those world views through applying validated evaluation instruments to assess levels of success and sustainability of leadership interventions and change management initiatives.

## WEEKLY SCHEDULE

<b>Week 1</b>	What constitutes a leader?
<b>Week 2</b>	Introduction to leadership in mental health
<b>Week 3</b>	Contemporary leadership capability frameworks, theories, concepts and models
<b>Week 4</b>	Leadership style
<b>Week 5</b>	The Australian Mental Health System
<b>Week 6</b>	Recovery as the context for mental health practice
<b>Week 7</b>	Partnership in leadership
<b>Week 8</b>	Creating a culture of inclusivity and mutual respect in mental health
<b>Week 9</b>	Nature of decision making in mental health
<b>Week 10</b>	Decision making based on evidence
<b>Week 11</b>	Decision making by consumers
<b>Week 12</b>	Decision making to enhance partnerships and collaboration
<b>Week 13</b>	Ethics in mental health practice
<b>Week 14</b>	Ethics of consumer and carer participation
<b>Week 15</b>	Ethical considerations in creating cultures of inclusion and diversity

# Research and Project Planning

This unit provides students with the skills and an understanding of how to integrate their knowledge and experiences into a capstone project that generates new knowledge and/or insights for the improvement of mental health care. This unit brings together students from the Masters of Applied Mental Health Studies and the Masters of Psychiatric Medicine, maximising opportunities for interdisciplinary insight and collaboration, both during study and in practice settings. Students will formulate a detailed proposal for either a research or non-research capstone project to a standard that meets submission requirements for ethics committee review.

## LEARNING OUTCOMES

- Critically review and synthesise research and other relevant literature in response to the proposed project.
- Formulate a proposal relevant to mental health which explains the rationale for the project and its design, considers ethical implications, and outlines plans for implementation, data analysis and dissemination of findings.
- Communicate in a compelling and authoritative way regarding the proposed project, its theoretical significance, and its application in the workplace.

## WEEKLY SCHEDULE

<b>Week 1</b>	Introduction and orientation
<b>Week 2</b>	Capstone Project strategies
<b>Week 3</b>	The project development process
<b>Week 4</b>	Mental Health Capstone proposal
<b>Week 5</b>	Resources and planning
<b>Week 6</b>	Searching and evaluating the literature
<b>Week 7</b>	Preparing and delivering an effective oral presentation
<b>Week 8</b>	Writing and reporting
<b>Week 9</b>	Ethics and ethics applications
<b>Week 10</b>	Survey design
<b>Week 11</b>	Planning and conducting focus groups
<b>Week 12</b>	Designing and conducting interviews
<b>Week 13</b>	Data collection and organisation
<b>Week 14</b>	Creating effective conference posters
<b>Week 15</b>	Unit summary and reflection

# Clinical Supervision Theory and Practice

This unit equips students to apply a leadership role in supervision, effectively manage ethical and legal issues and develop, apply and model reflective skills in practice. It requires students to critically analyse and apply best practice clinical supervision within a mental health recovery focused framework. Students will develop reflective facilitative skills within their leadership and mentoring roles, developing these skills to effectively supervise health care professionals to manage their clinical practice, systemic workplace issues and self-care.

## LEARNING OUTCOMES

- Critically analyse a range of frameworks/ models and supporting research for clinical supervision and its potential for application in the workplace.
- Recognise and manage difficult situations/ issues in clinical supervision in the workplace.
- Engage in reflective practice through open and honest discussions with colleagues, showing ethical consideration of issues presented, and collaboration in work practices.

## WEEKLY SCHEDULE

<b>Week 1</b>	What is clinical supervision?
<b>Week 2</b>	Approaches to clinical supervision
<b>Week 3</b>	Developing & maintaining a working alliance
<b>Week 4</b>	Evaluation in clinical supervision I
<b>Week 5</b>	Evaluation in clinical supervision II
<b>Week 6</b>	Reflection and the formative function of clinical supervision
<b>Week 7</b>	Feedback in clinical supervision
<b>Week 8</b>	The normative function of clinical supervision
<b>Week 9</b>	The restorative function of clinical supervision
<b>Week 10</b>	Group & institutional dynamics
<b>Week 11</b>	Implementing clinical supervision in your workplace
<b>Week 12</b>	Managing difficult situations in clinical supervision I
<b>Week 13</b>	Managing difficult situations in clinical supervision II
<b>Week 14</b>	Multicultural awareness & diversity in clinical supervision
<b>Week 15</b>	Where to from here?

# Mental Health Capstone

This unit builds on the skills, knowledge and understanding developed in the Research and Project Planning unit. Students critically evaluate and consolidate their knowledge and learning experiences, related to the Course Learning Outcomes and Graduate Attributes, in a project generating new knowledge or insights which can be applied to the improvement of mental health care, development of their professional career, or as a first step toward further postgraduate study. The Mental Health Capstone is a final unit of study for students enrolled in the Masters of Applied Mental Health Studies, and the Masters of Psychiatric Medicine.

## LEARNING OUTCOMES

- Integrate and synthesise information from a range of relevant sources to actively create a project that incorporates and values contributions of people with diverse backgrounds, experiences and communities.
- Critically reflect upon the breadth of competencies to support people with mental illness in pursuing recovery and the implications for student lifelong learning.
- Consistently and judiciously use information technology; communicate via a compelling and authoritative written and verbal style.
- Apply, review and evaluate the transferability of psychiatric, mental health and other health research findings across practice settings and disciplines.
- Analyse implications of Aboriginal social and emotional wellbeing for mental health improvements.
- Demonstrate an advanced and integrated understanding of complex mental health issues through the translation of research outcomes to improve mental health care.
- Contribute to the generation of new knowledge through research, service evaluation and/or advanced academic endeavour.

## WEEKLY SCHEDULE

<b>Week 1</b>	Introduction to Capstone Studies and toolkit
<b>Week 2</b>	Cultural competency 1: Aboriginal and Torres Strait Islander communities
<b>Week 3</b>	Cultural competency 2: Culturally and Linguistically Diverse communities
<b>Week 4</b>	Working with quantitative data workshop
<b>Week 5</b>	Working with qualitative data workshop
<b>Week 6</b>	Recovery revisited
<b>Week 7</b>	Research translation
<b>Week 8</b>	Independent study
<b>Week 9</b>	In focus 1: Clinical practice contexts
<b>Week 10</b>	In focus 2: Interdisciplinarity
<b>Week 11</b>	In focus 3: Neurosciences
<b>Week 12</b>	In focus 4: Global mental health
<b>Week 13</b>	Independent study
<b>Week 14</b>	Research and project dissemination
<b>Week 15</b>	The future of psychiatry

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