Core and Specialist Skills Assessment

AREA 6: Practice Area – Acute Care Team

Scope and Objectives

This Core and Specialist Assessment (CSAt) will enable the allied health professional to:

- Build on their knowledge and skills within an *Acute Care Team (ACT)*. This includes understanding their professional role within an ACT service, whilst also building on core skills of mental health allied health practitioner service to this consumer group.
- Develop a sound understanding of acute care and the opportunities and challenges in providing this service to consumers, significant others, families and carers living in the community.
- Develop a sound understanding of mental health triage, assessment, acute care service delivery including single session, brief intervention, and referral pathways for people in acute distress.

This CSAt outlines the core practice skills and considerations for graduates working in acute mental health settings.

This CSAt should be used in conjunction with professional supervision and the Allied Health MHAOD New Graduate Program Framework. The framework and associated resources are available at: https://qheps.health.qld.gov.au/allied-health/mental-health

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The CSAt reflects best practice and agreed process for conduct of the task at the time of approval and should not be altered. Feedback, including proposed amendments to this published document, should be directed to the Office of the Chief Allied Health Officer (OCAHO) at: OCAHO-MHAODS@health.qld.gov.au

Prior to use, please check https://qheps.health.qld.gov.au/allied-health/mental-health for the latest version of this CSAt.

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An electronic version of this document is available at https://qheps.health.qld.gov.au/allied-health/mental-health

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Requisite training, knowledge, skills and experience

Training opportunities

- Training as outlined in the New Graduate Framework "Graduate Training Schedule and Record".
- Australian Mental Health Outcomes and Classification Network (AMHOCN) training.
- Internal linkage opportunities within the HHS:
    - Senior or advanced clinical roles of each profession within the team.
    - Connect with the acute teams within the HHS such as Acute Mental Health Inpatient Unit, Acute Response Team (ART), Consultation Liaison (CL), Crisis Support Space, Drug and Alcohol Brief Intervention Team (DABIT), Emergency mental health, MH CALL or tele-triage services, Step Up Step Down (SUSD) service (where available).
    - Connect with specialised roles within the HHS such as Alcohol and Other Drugs (AOD) Dual Diagnosis roles, Co-responder (CORE) roles, Multicultural Mental Health Coordinator (MMHC), Perinatal Mental Health, Suicide Prevention roles, and Way Back Clinical Care Coordinator roles (where available).
- External linkage opportunities:
    - Other government agency linkages agency linkages may include Services Australia (Centrelink), Department of Housing and Public Works, Queensland Public Trustee, Office of the Public Guardian, Department of Families, Seniors, Disability Services and Child Safety, National Disability Insurance Scheme (NDIS), Department of Housing and Public Works, Queensland Public Trustee, Office of the Public Guardian.
    - Local community supports, social infrastructure and organisations which offer sustainable community connections. These might include:
        - Common support pathways including GP's and Mental Health Care Plan, Medicare Mental Health services.
        - Community centres and Non-Government Organisations (NGO's) which offer groups, activities and psychosocial supports.
        - Crisis support services such as charity or religious services who provide emergency relief, food vouchers, etc.
        - Council facilities and activities such as libraries, pools, groups.
- Graduate Reflective Learning Sessions or peer learning groups and supervision.

Clinical knowledge/evidence

The following are examples of demonstrating content knowledge by an allied health professional:

- Demonstrates an understanding of the variety of consumer presentations encountered by an ACT service, balancing risk and recovery considerations, including prevalent diagnoses, levels of complexity and risk, and the treatment and referral pathways for care within the community.
- Recognises deteriorating mental state and/or escalating risk and discusses plans to support a consumer, significant other, family and carers with senior clinicians and/or medical staff as per local clinical governance processes.
- Links consumers with:
    - General Practitioner (GP) and other healthcare providers, encouraging development of a GP Mental Health Care Plan and regular monitoring of physical and mental health.

- Other community-based support providers which may include support to navigate and access and appropriate sharing of relevant clinical information.

- Utilises outcome measures (HONOS, LSP, MHI) as a therapeutic engagement tool encouraging the consumer to reflect on their health and wellbeing through comparing results over time.

References and supporting documents

National Safety and Quality Health Service Standards (second edition) alignment

1. Clinical Governance Standard

2. Partnering with Consumers Standard

4. Medication Safety Standard

5. Comprehensive Care Standard

6. Communicating for Safety Standard

8. Recognising and responding to Acute Deterioration Standard

National

- Australian Mental Health Outcomes and Classification Network (AMHOCN).
- RANZCP guidelines and clinical resources.

Queensland

- Clinical guidelines, policies and resources developed by the Mental Health, Alcohol and Other Drugs Branch (the Branch) supports the statewide development, delivery and enhancement of safe, quality, evidence-based clinical and non-clinical services in the specialist areas of mental health and alcohol and other drugs treatment. Key documents include:
  - Comprehensive Care - Partnerships in Care and Communication. (2020).
  - Co-occurring substance use disorders and other mental health disorders: policy position statement for Mental Health Alcohol and Other Drugs Service. (2021).
  - Early Psychosis Care Pathway. (2025).
  - Strengthening the state funded mental health alcohol and other drugs (MHAOD) service response for people from culturally and linguistically diverse (CALD) communities. (2023).
  - Suicide Prevention Pathway Statewide CIMHA Guidelines. (2025).
  - Supporting Metabolic Health for Queenslanders living with Serious Mental Illness and/or Substance Use Disorders. (2023).
- Additional resources available via Insight, Queensland Health.

Assessment: performance criteria

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Name: **Position:** **Work Unit:**

	Assessment criteria	Applicable (Y/N)	Date achieved	Assessor initial
1	Completes triage assessments including mental state, risk assessment and single session/brief intervention, including safety plan, in line with the HHS policy and procedures with a person in acute distress.			
2	Demonstrates an understanding of the role of graduate's profession within ACT including their scope of practice, assessments, professional formulation and treatments provided including single session and brief interventions.			
3	Develops a therapeutic relationship (inclusive of trust, rapport and positive communication skills) with the person, their significant other, family or carers, giving consideration to contact method (in-person, telephone, telehealth).			
4	Demonstrates an understanding of how to effectively work with significant other, family or carers considering factors including competing demands and priorities, carer fatigue and burnout, family structures and dynamics.			
5	Demonstrates an understanding of key considerations for persons presenting in acute distress including capacity and consent, psychosocial stressors (relationships, finances, accommodation, substance use), and protective factors (personal supports, strengths and resources).			
6	Explains risk considerations for working with a person in acute distress. Examples may include access to weapons or lethal means, impaired capacity, substance use and intoxication, recognising and responding to a deteriorating person (RRDP), domestic and family violence (DFV).			
7	Completes consistent, high quality clinical documentation relevant to acute care and triage settings in alignment with the MHAOD comprehensive care resource guide e.g. triage assessment, risk assessment, safety plan and care review summary.			
8	Demonstrates the ability to identify risks or RRDP such as recognising early warning signs and symptoms of deterioration while in the community and implements agreed management strategies as per their recovery and care plans.			
9	Provides a range of single session, brief interventions and psychoeducation sessions for core diagnoses and clinically significant outcomes e.g. stress-vulnerability model, distress tolerance, safety planning, substance use harm minimisation.			
10	Demonstrates sound knowledge of other service providers and non-government organisations that work with ACT to deliver a seamless/integrated service to consumers.			
11	Demonstrates a sound understanding of the local process required when supporting an acutely unwell person which may include: • Suicide Prevention Pathway (SPP); • develop safety plans that balance identified risks, safety and recovery philosophies; • urgent outpatient assessment or within an Emergency Department; • admission to the inpatient unit or Step Up Step Down (SUSD).			
12	Demonstrates an understanding of the Mental Health Act (2016) and the requirements of an allied health professional within an ACT setting e.g. explaining an examination authority (EA), recommendation for assessment (RA), or treatment authority (TA).			
13	Demonstrates understanding of the purpose and roles of: • Child Safety; • the Office of the Public Guardian (OPG) • the Queensland Public Trustee; And relevant legislation including: • The Child Protection Act (1999); • Child Safe Organisations Act (2024); • Public Guardian Act (2014); • Guardianship and Administration Act (2000); • Public Health Act (2005); • The Public Trustee Act (1978).			
14	Identifies and escalates concerns about a person's mental state and/or risk as per local clinical governance processes and procedures.			

	Reflective practice (mandatory)	Date achieved	Assessor initial
R1	Reflects on professional and personal thoughts, feelings, values and self-care strategies when working with people in acute distress. Consider scenarios with undesirable outcomes (e.g. vulnerable person being lost to follow-up, consumer death by suicide).		
R2	Reflects on how to build rapport, trust and engagement with a person presenting in acute distress, considering the potential for trauma (presenting issues, engagement with the service), capacity and informed consent, mode and brevity of contact.		
R3	Completes a clinical case study and reflects on perception of assessment and intervention in an acute setting from a discipline specific perspective.		

Comments:

Record of assessment competence:

Assessor name and signature:		Assessor position:		Competence achieved:	/ /
Assessor name and signature:		Assessor position:			
Assessor name and signature:		Assessor position:			