



Charles Sturt  
University

Three Rivers  
Department of  
Rural Health

## Community Mental Health Experience Program

A collaboration between

Three Rivers Department of Rural Health and LikeMind

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# Acknowledgments

As members of the Charles Sturt community, we acknowledge the words of the Wiradjuri people, on whose land our university was founded, and share their aspiration of Yindyamarra Winhanganha, the aim for us all to learn the wisdom of respectfully living well, in a land worth living in. We pay our respect to the Traditional Custodians of the lands on which we live and work. The project team wishes to sincerely thank the staff at LikeMind Orange and Wagga Wagga and the program participants who were willing to share their life experiences and perspectives with students and facilitators. The work detailed in this document was conducted as a collaboration between Three Rivers Department of Rural Health (DRH), Charles Sturt University and LikeMind Orange and Wagga Wagga. The project was funded by Three Rivers DRH under the Australian Government's Rural Health Multidisciplinary Training Program.

## Project Team



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# Contents

<b>Acknowledgments .....</b>	<b>2</b>
Project Team .....	2
<b>Contents .....</b>	<b>3</b>
Background .....	4
Partner information.....	5
Program Overview .....	6
CMHE Program Content .....	7
Project evaluation.....	11
Summary of Student Placement Weeks .....	13
CMHE Program Achievements .....	14
Conclusion .....	14
References.....	15

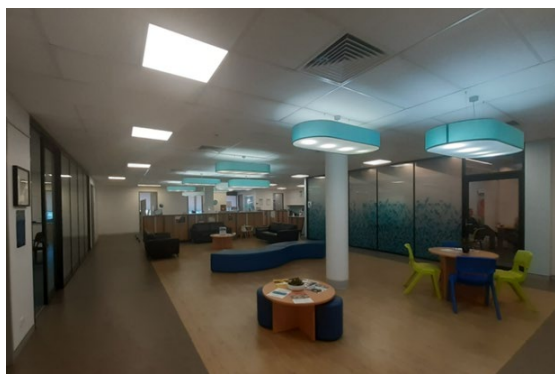
## Background

Mental health continues to be a significant concern for Australians across the lifespan with approximately 44% of the population having experienced a mental health challenge during their lifetime (Australian Institute of Health and Welfare (AIHW), 2022). Access to government-funded support for people living in rural areas is almost half of what their metropolitan counterparts are provided. Subsequently, rural, and remote communities experience higher levels of psychological distress, increased need for higher levels of care, and higher rates of death by suicide (Dashputre, 2023; Kelly, 2010; Lee, 2008; AIHW, 2024, National Rural Health Alliance (NRHA), 2021).



Rural Australia also faces workforce recruitment and retention challenges which impacts health service accessibility (Guerrero, 2019). In rural areas, healthcare providers are skilled generalists working to the top of their scope of practice (Kaveanagh, 2022; NRHA, 2021). This creates a demand for student health professionals to be equipped with skills that match the realities of rural work, particularly in their early careers. More broadly across Australia, it is recognised that the mental health sector needs to provide positive early experiences to encourage people to work in the field. Simultaneously, the sector has a shortage of clinical supervisors to support apprentice-style placement models (Department of Health, Australian Government, 2022).

To address calls to equip health students with the professional capabilities needed to work with community members experiencing mental ill-health, and in recognition of the ceiling of work-integrated learning (WIL) opportunities in rural areas, the Community Mental Health Experience (CMHE) program was developed. The program is aimed at supporting undergraduate health students to expand their skills, knowledge, and experience in working with people experiencing mental health concerns. The CMHE program is a placement within a host organisation based in Wagga Wagga or Orange, NSW.



### *LikeMind Orange*

During the placement, an interprofessional group of students work in a primary mental health setting alongside a range of key mental health professionals. This project has initially targeted students from the disciplines of social work, paramedicine, and nursing to complete this placement which meets the requirement for one of their mandatory work-integrated learning placements.

An evaluation of the CMHE was designed by staff from the placement host organisation, students who were involved in early iterations of the placement, and academic staff from the Three Rivers DRH. The research aimed to explore the student learning experience and the impact of having regular undergraduate student rotations on the host organisation.

## Partner information

### Three Rivers DRH

Three Rivers DRH is a key initiative of the Australian Government under the Rural Health Multidisciplinary Training Program. The objective of this program is to improve the recruitment and retention of dental, nursing, and allied health professionals in rural and remote Australia.

Three Rivers works with our Consortium partners and stakeholders to achieve this objective through the following priority areas:

1. Delivering effective rural training experiences for nursing, midwifery, allied health, and dental students (before gaining professional registration).
2. Ensuring rural training experiences are of high quality.
3. Developing processes to improve rural student recruitment.
4. Engaging with the local community to support the delivery of training to students.
5. Maintaining and progressing an evidence base and the rural health research agenda.
6. Supporting improvements in Aboriginal and Torres Strait Islander health.
7. Providing regional leadership in developing innovative training solutions to address rural workforce recruitment retention.



*LikeMind Students with Educator*

### Stride and LikeMind

LikeMind service is an integrated mental health service providing support for people aged 18 – 65 years.

LikeMind receives referrals from anywhere including GP's, self-referrals, and other agencies.

LikeMind service supports people from those seeking support to manage anxiety better, to people with numerous complexities including alcohol and other drug misuse, family violence, child protection issues, homelessness, and severe mental health concerns.

Students can expect to learn skills in building rapport with people, comprehensive biopsychosocial assessment, use of outcome measures, treatment planning, brief intervention, referral and advocacy, care coordination, service navigation, case conferencing, stakeholder engagement, case note writing and file maintenance, participation in a multi-disciplinary team and group work.

## Program Overview

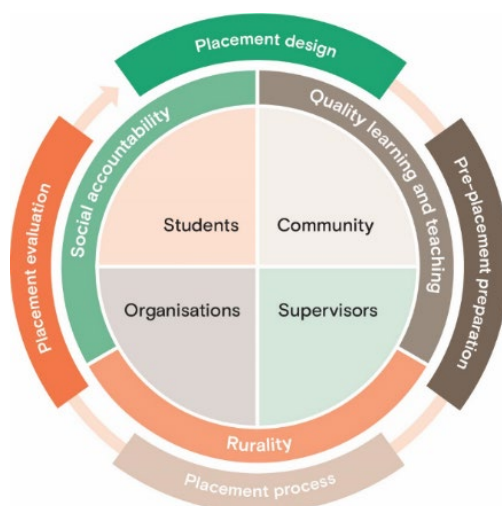
### Aim

The aim of the CMHE program is to:

1. Increase student confidence in working with people who have a lived experience of mental illness.
2. Increase student confidence in delivering information about mental health to consumers.

### Program Design

The CMHE Program required an industry-university partnership to create an authentic learning experience that modelled the professional capabilities required for contemporary rural mental health practice and to provide a host organisation for student learning. To achieve this, Three Rivers DRH partnered with LikeMind, a community-based organisation funded by the New South Wales Ministry of Health that provides free and confidential services for adults experiencing any mental health concerns (LikeMind, 2024). Foundational elements of the collaborative partnership between Three Rivers DRH and LikeMind included funding allocation to ensure a student educator was employed to solely work on the program at both sites (Wagga Wagga and Orange). Employed as a LikeMind staff member, the educators work closely with the Rural Mental Health Academic at Three Rivers DRH to develop, revise, and implement the program. The program was developed and expanded over 12 months using the principles of improvement and implementation science and was guided by the framework by Green et al. (2024) as shown in Figure 1. This approach nurtures a collaborative, best-practice learning environment which enhances the experience and commitment for all involved.



*Figure 1. Three Rivers Rural Placement Framework (Green et al., 2024)*

Recognising the knowledge that experts by experience hold in the future education and training of health professionals has been a key element of success in this collaborative work along with partnering with external organisations in the local community. Valuable and practical knowledge is often held by mental health workers who typically do not have the capacity or supervision qualification requirements to host student placements which indirectly limits the student's options and exposure to the mental health field more

broadly. Holding a placement at LikeMind provided an opportunity for students to be based at LikeMind and visit other services throughout the placement. In addition to the contribution of LikeMind staff to the CMHE program, several stakeholder groups are involved at various stages and are shown in Figure 2.

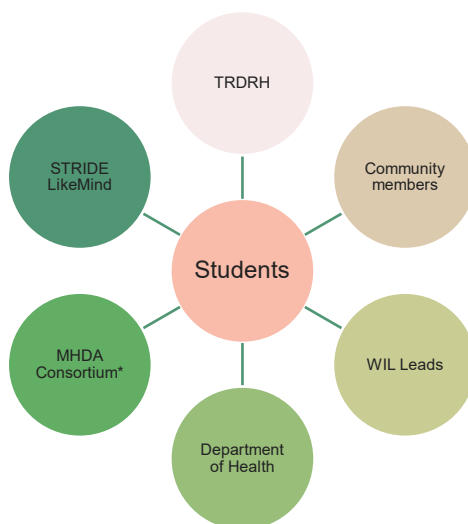


Figure 2. Depiction of stakeholders supporting student WIL experience on CMHE placement. \*Note the MHDA Consortium includes services and programs in the acute, sub-acute, rehabilitation and community field.

### CMHE Program Content

Initially, social work, paramedicine, and nursing students were targeted to participate in the CMHE program. Each discipline varies in the length of placement, supervision requirements and competencies depending on year level. Through a rigorous mapping process of these variables along with the required learning objectives, a WIL program was created. The program is designed to help students gain more awareness, confidence, and capability in the field of mental health. The targeted learning domains and student activities are shown in Table 1. These activities are then linked to specific learning objectives for each discipline. Table 2 outlines how the learning activities are integrated in the placement program.

#### Learning domain

#### Student Activities

Learning domain	Student Activities
<b>Core capabilities related to mental health practice</b>	<ul style="list-style-type: none"> <li>• De-escalation and safety skills</li> <li>• Mental Health First Aid</li> <li>• Student wellbeing</li> <li>• Mental health care structures and supports in rural Australia and local area</li> <li>• Professional identity and role in mental health as comprehensive care</li> </ul>

**Skill enhancement activities**

- Observe 1:1 sessions with clients and clinicians (with informed consent) followed by critical reflection tasks
- Provide a clinical handover of a new client at the LikeMind team meeting
- Practice administering key assessments such as Mental State Exam and Risk Assessments

**Workshop Series Delivered by an educator or relevant expert clinical in the community**

- Trauma Informed Care
- Linking Physical and Mental Health
- Primary Care Suicide Prevention
- Rural Adversity Mental Health Program
- Family Violence
- Pathways in the Drug and Alcohol services

**Connection Visits**

- Community-based wellbeing groups
- Day programs supporting people living with chronic mental ill health
- Local inpatient mental health unit which includes subacute and recovery units

Table 1. Learning domains mapped against student placement activities.

Learning Activity	Learning Objectives	Location
<b>Orientation and E-Learning Modules</b>	<ul style="list-style-type: none"> <li>• Site tour</li> <li>• Stride In</li> <li>• Bullying and Harassment</li> <li>• De-escalation and Aggression Management</li> <li>• Workplace Health and Safety</li> </ul>	Orange + Wagga
<b>Community Mental Health Experience Project Presentation and Explanation</b>	<ul style="list-style-type: none"> <li>• Orientation and discussion of project purpose, values</li> <li>• Discussion of research methodology and quality improvement process</li> </ul>	Orange + Wagga
<b>Preplacement questionnaire</b>	<ul style="list-style-type: none"> <li>• Ascertain their baseline level of knowledge before placement to determine outcomes.</li> </ul>	Orange + Wagga
<b>Meet and greet with Three Rivers Team</b>	<ul style="list-style-type: none"> <li>• Establish a contact person for Three Rivers</li> <li>• Consideration for future rural health placements.</li> </ul>	Orange + Wagga



- Provide rationale and background for the project.
- Discuss evaluation surveys at completion.

**Intake meeting**

- Enable the students to observe how a multidisciplinary team collaborates in order to triage and refer clients appropriately.
- Being able to present a case for one of the clients whose intake assessment they have observed allows them to practice and demonstrate a clinical handover.

Orange + Wagga

**Sit in and observe intake assessments**

- Learn interpersonal communication skills and how to establish rapport/ therapeutic relationships.
- Allow them to develop their own interview style and practice
- Learn rationale behind why we ask the questions we do

Orange + Wagga

**Inservices:**

- **MSE**
- **Risk Assessments**
- **Trauma Informed Care**
- **Snapshot of Mental Health in our Region**

- To be able to learn and develop useful skills they will need to work with clients in any setting who may be struggling with mental health issues or are at risk
- Learn about the epidemiology of mental health in our region and possible challenges specific to a regional/ rural context

Orange + Wagga

**MPHN Suicide prevention coordinator visit**

- Provide a snapshot and overview of the epidemiology and rates of suicide in MLHD.
- Explanation of how a multi-agency response works, and the other services in our region to support survivors and bereaved families.
- Provide contact details for students from out of area to enable them to contact the suicide prevention coordinator at their local PHN if needed.

Wagga

<b>Men's Behaviour Change Workshop</b>	<ul style="list-style-type: none"> <li>To explore the mental health support available for DV offenders and some of the things to consider when working with this client group</li> </ul>	Orange + Wagga
<b>Veterans Wellbeing Centre Visit</b>	<ul style="list-style-type: none"> <li>Learn some of the unique physical and mental health challenges veterans face in our community.</li> <li>Learn specific strategies to consider when dealing with veterans in a health context</li> </ul>	Wagga
<b>Wellbeing groups</b>	<ul style="list-style-type: none"> <li>To observe how an effective group is designed, prepared for and facilitated.</li> <li>Exposure to clients struggling with mental health issues in a controlled setting.</li> </ul>	Orange + Wagga
<b>Visit to Sunflower House</b>	<ul style="list-style-type: none"> <li>Reduce stigma around what a mental health client looks like and their capability to function within the community</li> <li>Spend time interacting with people struggling with mental health challenges within a non-clinical recovery-focused setting.</li> <li>Learn how a multidisciplinary team manages client care in the community</li> </ul>	Wagga
<b>RAMHP Workshop</b>	<ul style="list-style-type: none"> <li>Provide students with the skills and knowledge to deal effectively with clients experiencing stress, to minimise the negative impacts of their own experiences with clients, and to identify when it may be necessary to seek further assistance and link clients with appropriate services.</li> <li>Students also learn how to look after their own mental wellbeing, how to recognise when a colleague, friend or family member may be struggling with their mental health or at risk of suicide and how to both seek and provide appropriate help.</li> </ul>	Orange + Wagga
<b>Visit to SPOT and Safe Haven</b>	<ul style="list-style-type: none"> <li>Exposure to the role of peer workers in the mental health space</li> </ul>	Wagga

- Experience how suicidality and crises can be managed in a non-hospital setting, utilising principals other than a medical model.
- Learn the criteria and referral pathways for this service.

<b>Pathways Drug and Alcohol service</b>	<ul style="list-style-type: none"> <li>• To attend a harm minimization group with AoD clients and learn the rationale behind this approach</li> <li>• Explore the linkages between AoD and mental health</li> <li>• Learn about referral pathways and options for community-based intervention</li> </ul>	Orange + Wagga
<b>Visit to Wagga Base Hospital Mental Health</b> <ul style="list-style-type: none"> <li>• <b>Recovery Unit</b></li> <li>• <b>MHECS</b></li> <li>• <b>Sub-Acute unit</b></li> </ul>	<ul style="list-style-type: none"> <li>• Spend time in the recovery unit talking to clients and hearing about their experience of care from their perspective.</li> <li>• Participate in group and ward activities as appropriate</li> <li>• Witnessing the interaction between clients with mental health issues and therapy dogs and the rationale about why this is beneficial</li> <li>• Spending time talking to the MHECS team and hear how they triage clients and what happens to clients once they are brought into ED.</li> <li>• Tour of the sub-acute unit to practice interacting with more unwell clients.</li> </ul>	Wagga
<b>Post placement questionnaire</b>	<ul style="list-style-type: none"> <li>• Determine the outcome of placement and suggested areas of improvement</li> </ul>	Orange + Wagga

Table 2. Example placement program at LikeMind

## Project evaluation

### Program logic

Using a program logic model, we have been able to identify and track the implementation, review informal feedback, and make alterations and improvements to the CMHE program (see Figure 3 below). Early identification of the inputs, outputs and key resources have helped the team remain focused on the short- and long-term goals for all stakeholders.

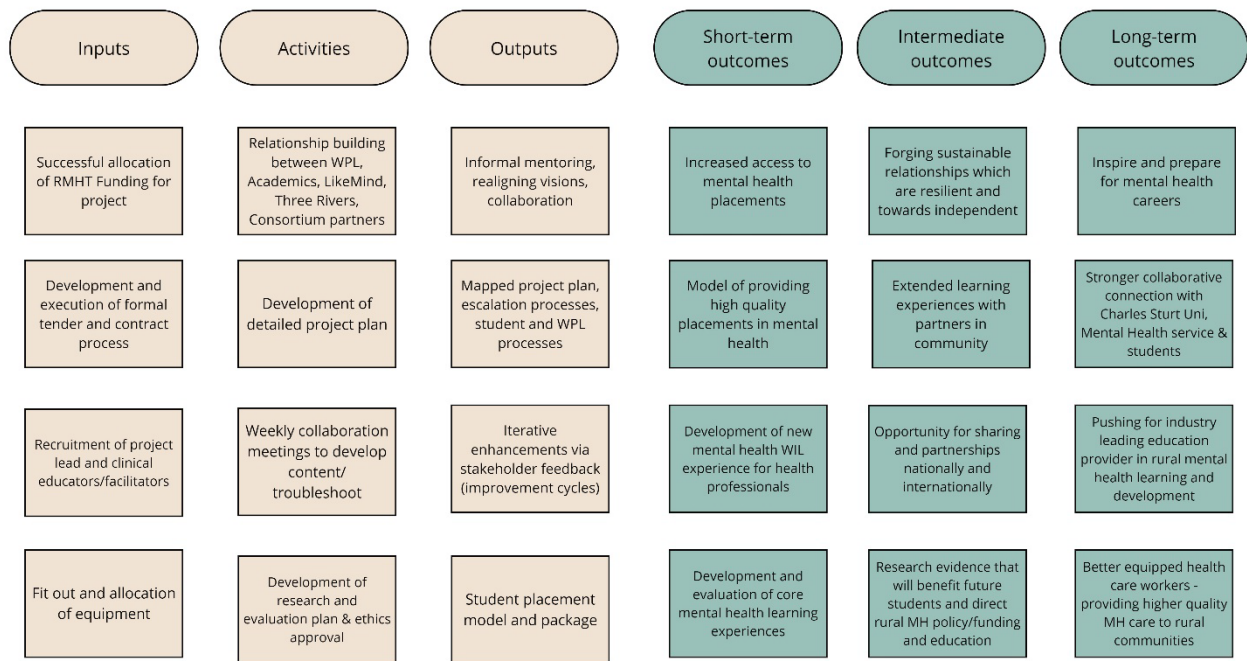


Figure 3. Summary of Program Logic noting the key inputs, outputs, and outcomes.

*"Yeah I think I want to work in mental health now. .. I like to interact with my patients and that's why I think I have like this placement so much because it's like yeah let's get out there, let's interact, let's socialise, lets see what we can do to improve the person's quality of life, but yeah I definitely think that it's opened up a career path for me."*

3rd year Nursing Student

The Rural WIL Placement Framework (see earlier, Figure 1) considers evaluation an integral component of every WIL program. Reflecting the purpose of the CMHE Program, a mixed-method evaluation project was designed using a concurrent triangulation design (Creswell, et al., 2003). The evaluation focuses on data collected via pre- and post-placement student surveys and interviews, and staff interviews.

Survey data will be compared to the student and staff interview data, which will utilise interpretive phenomenological analysis (Smith et al., 2021) to explore the student experience of the CMHE Program. The complete results of the evaluation will be disseminated in early 2025.

*"As a future paramedic, I have benefitted from this placement as it has allowed me to gain a deeper understanding of the care provision needed for these patients. I believe I am now better equipped to recognise the signs and symptoms of distress, offer appropriate support and help de-escalate any potential crisis".*

Paramedic Student

## Summary of Student Placement Weeks

A summary of the student placement weeks facilitated by the CMHE program are shown below.

### Placement weeks – LikeMind Orange

<u>Orange 2023</u>		
Paramedic students	16 students	32 placement weeks
Social work students	3 students	1070 hours (30 weeks equiv.)
<u>Orange 2024</u>		
Paramedic students	9 students	18 placement weeks
Social work students	1 Student	500 hours (14 weeks equiv.)

### Placement weeks – LikeMind Wagga Wagga

<u>Wagga Wagga 2023</u>		
Paramedic students	5 students	10 placement weeks
Nursing students	8 students	16 placement weeks
Social work students	2 students	920 hours (26 weeks equiv.)
<u>Wagga Wagga 2024</u>		
Paramedic students	3 students	6 placement weeks
Nursing students	4 students	8 placement weeks

**Total**

**160 placement weeks**

*“After completing this placement and reflecting on my experiences, I feel like the experience has exceeded my expectations. The knowledge that I have been exposed to and developed, as well as the people I have been privileged to meet and the services I have been introduced to, have been incredibly beneficial and will help to shape my future practice as a paramedic.”*

Paramedic student



Community advisors brainstorming with student and Educator at LikeMind Orange

“I believe that the placement of paramedic students in mental health facilities is quite beneficial. Our observation has shown that these students gain an enhanced understanding of mental health conditions from the start of their placement to the end. This exposure has helped them develop better knowledge of mental health symptoms, appropriate response techniques, and how to conduct thorough assessments. Through one-on-one interactions, they also learned how to identify signs of mental distress and provide appropriate support and care to individuals experiencing mental health emergencies. During debriefs, students expressed how they learned to take into account both physical and mental health aspects when assessing and treating patients, thereby improving overall patient care and outcomes. Moreover, the students were able to develop empathy and compassion towards individuals facing mental health difficulties, which will positively impact their interaction with patients across various healthcare settings. This will promote patient-centred care and reduce the stigma around mental health.”

*Staff Member – LikeMind*

## CMHE Program Achievements

The project team have been successful in the following:

### **2023 Charles Sturt University, Excellence Awards (Student category) recipients**

<https://researchoutput.csu.edu.au/en/prizes/2023-excellence-awards-student-category>

### **2023 Rural Mental Health Conference, Oral Presentation**

### **2023 9th Rural and Remote Health Scientific Symposium, Poster Presentation**

<https://www.ruralhealth.org.au/9rrhss/wp-content/uploads/2023/06/Primary-Mental-Health-a-rural-student-placement-model.pdf>

### **2024 Global Impact Grant Advance HE, recipients**

<https://www.advance-he.ac.uk/membership/member-benefits-2023-24/global-impact-grants-2023-24#successful>

## Conclusion

The CMHE program has been successfully established and early data demonstrates that the program is positively impacting student learning about mental health. The project team are in the process of analysing research data from the evaluation and aims to disseminate this in 2025. Student placements will continue for the remainder of 2024 at LikeMind Wagga while the project team explores opportunities for continued funding of the program.

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