Diagnosis: Adolescent Mental Health

#### **Overview**

**Target Audience:** 2 x Master of Nursing Science, Speech Pathology, Social Work Students

Estimated pre briefing time: 30 minutes

**Estimated simulation time: 60 MINUTES** 

**Estimated debriefing time: 45minutes** 

Setting: Inpatient Adolescent Mental Health Ward

**Simulation method: Standardised Patient** 

#### **Brief summary of scenario**

This case presents Taylor a 15 year old girl who has several health issues. She has Type 1 diabetes, learning difficulties and an emerging personality disorder. Taylor is feeling overwhelmed and alone in her day to day living and things have come to a critical point where she has harmed herself. Several things have been highlighted about Taylor's health, which will require ongoing support from her Interprofessional health team.

The impact of Mental Health illness in young people can have long term affect on families, communities and society in general. Data from the Australian Bureau of Statistics and the Australian Institute of Health and Welfare show that 25% of young people will experience a mental disorder in any 12 month period. Mental health is a key health Concern facing many young Australians. Mental Health Disorders account for over 60% of health issues faced by young Australians in the 15-24 year age group.

http://oyh.org.au/why-youth-mental-health/evidence Orygen Youth Health, Victoria Australia

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	Learning objectives				
Interprofessional					
1	Interpersonal and Communication Skills: Consistently communicates sensitively in a responsive and responsible manner demonstrating the interpersonal skills necessary for Interprofessional collaboration				
(	Patient-Centred and/or Family-Focused Care: Through working with others negotiates and provides optimal integrated care by being respectful of and responsive to patient/client and/or family perspectives, needs and values				
	<b>Collaborative Decision Making</b> : Establishes and maintains effective and health working partnerships with other professionals whether or not a formalised team exists				
	Roles and Responsibilities: Consults, seeks advice and confers with other team members based on a clear understanding of everyone's capabilities, expertise and culture				
□ <sup>1</sup>	<b>Team Functioning</b> : Uses team building skills to negotiate, manage conflict, mediate between different interests and facilitate building of partnerships within a formalised team setting rce: The British Columbia Competency Framework for Interprofessional Collaboration, 2008)				
Discipline Specific - Speech Pathology					
☐ Speech Pathology to conduct a communication interview with Taylor and complete an initial screening of the patient's communication skills.					
Discipline Specific - Social Work					
	To discuss with the client ways to manage her behaviour				
Discipline Specific - Nursing					
☐ Mental health assessment and ISBAR hand over to the Interprofessional team.					

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Equipment checklist				
□ Bed				
☐ Name band				
☐ Bedside chairs for interviewing				
☐ Crepe bandage for left wrist/hand				
☐ Patient in own comfortable clothing				
Preparation of simulation and environment				
☐ Taylor will be in her own clothes				
☐ She will be at her bedside or in her bed				
☐ The Interprofessional team will conduct assessments and or interviews at the bedside				
☐ Taylor will have her left hand /wrist bandaged				

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#### **Patient story**

Taylor, 15, lives with her mother and 13 year old brother Seb, in a rental property in Footscray Victoria. Taylor has not been attending high school classes as she states that she has been feeling extremely stressed out about her studies for the upcoming VET. Taylor also states that she feels people are constantly making fun of her. Taylor says she is dumb because she doesn't understand the preparation and instructions for her school work. Taylor stated that she gets very confused when reading and writing, she states that all she can visualise are the letters forming words and most of the time it often doesn't make sense to the content of what she is attempting to read .Taylor stated that is was almost like the sequencing of the letters that form words, somehow re arrange to become another word (i.e. reverse becomes reserve)

Taylor also expressed that she feels extremely self-conscious when she has to inject herself with insulin while at school. Taylor believes that her inability to cope with her school work and her health issues are the reason why no one likes here and her peers call her a freak and make nasty comments to her most of the time.

Taylor stated it all became too much with the pressure of the exams, other kids teasing her, not understanding what was required of her in the preparation of the exams, and generally feeling unwell, she said she doesn't feel like doing anything, has no interest at all, the only thing that felt good was an overwhelming urge to hurt herself...to cut herself

During Taylor's initial acute admission it was established /diagnosed that Taylor has an emerging personality disorder-

Taylor was re admitted to the psychiatric unit for 1 week, where she was transferred to the adolescent Mental Health facility as an inpatient. Taylor was transferred from the acute ward where she has made a remarkable recovery from self inflicted lacerations to her left wrist and hand. The wounds to her left hand and wrist required 5 sutures. Taylor has good range of movement and sensation in her left hand and a crepe bandage remains Insitu for support and comfort.

Taylor also has Type 1 Diabetes, which up until her acute admission was not managed well resulting in Taylor having many hypoglycaemic events.

Initially it was noted that Taylor did not adhere to her Diabetes regime and it was further noted that Taylor had great difficulties in reading the literature on her Diabetes Care plan. Taylor stated that she doesn't care much about her diabetes management and that she hates that she has to inject herself; she wishes everyone would just leave her alone.

The diabetes nurse was able to help Taylor with education and a greater understanding of the importance of effectively managing her diabetes.

Since the self inflicted wrist wounds, Taylor's mother (Anna) has stated that she is very concerned for Taylor's mental health and wellbeing. Taylor's mother states she is very concerned about Taylor and fears she may do something really terrible- worse than slashing her wrists/hand.

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Taylors mother also stated that she feels she is constantly "nagging" Taylor to get up and do somethingshe feels that she is continually "at" Taylor- she also states Taylor is generally withdrawn from "life" Taylor spends the vast majority of her time alone in her bedroom, watching TV.

Anna also states that Taylor has in general been a difficult child to deal with throughout her child hood. Although she is absolutely devastated by Taylor's self-harm, it certainly has not come as a surprise as she has been unsettled and different since she was a young child. Anna stated that Taylor has a distrust of people, frequent mood swings she has an explosive temper, poor impulse control and has great difficulties in making and then maintaining friendships- she barely gets along with her brother. Mrs Swift states that Taylor has not been settled or a "usual" kid since, around the time of divorcing Taylor's father eight years ago.

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Additional information (on request)						

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### **Proposed correct action**

The checklists below provide a guide of the anticipated actions of students when participating in this rio. Use this list to tick off each action as it is

	ue during debriefing in the comments box below.
	<b>eech Pathology</b> <u>Preliminary</u> Read patient information and file notes prior to meeting the patient/family. Plan eech pathology communication screen prior to meeting the patient/family.
Ass	sessment
Int	roduce self to patient (Taylor) and family (mother).
Exp	plain speech pathology role and provide an overview/outline the objective of the session.
	nduct an interview with the patient/family, to gather further information regarding the patient's communication lls (including oral language, pragmatic-social skills, academic development & functional communication).
	nducts a brief screening of the patient's communication using an appropriate screening checklist to guide the essment (completed through interview with the patient and self-report).
Dis	cuss the patient's/family's concerns regarding the patient's communication skills.
	Demonstrate empathy, understanding and acknowledgement of the patient's concerns and Demonstrate effective, appropriate and respectful communication with patient and family.
	Management
	Discuss results of initial communication screening with patient/family  Outline recommendations for further assessment and referral to other professionals (including obtaining further information from school teachers and case managers, as appropriate; referral for further speech pathology assessment through CAMHS, community services and/or private practice)
	Document session notes in patient file and report pertinent information to Interprofessional team members as required
	Debriefing
	Reflect on and evaluate own performance, including what went well and what could be done differently next time.
	Identify areas and opportunities for improvement.  Demonstrate the ability to problem solve and apply theory to practice, appropriate to stage of student training.
So	cial Work
Ass	sess the client's level of insight into her behaviours and their impact on her relationships;
Cha	allenge the client's blind spots around any faulty thinking;
Ass	sess the client's readiness for change
Nu	rsing
	Mental health assessment and ISBAR hand over to the Interprofessional team.

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Additional Comments:		

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## **Debriefing overview**