

## MENTAL HEALTH SERVICE BUSINESS RULE

SESLHDBR/054

<b>Name</b>	Transitioning Nurses in Mental Health Services		
<b>What it is</b>	It is a guide for nurses who are new to South Eastern Sydney Mental Health Service (SESLHD MHS) and their clinical supervisors on: Orientation processes and workplace culture, rostering, professional development, training and education, support and ongoing employment.		
<b>Risk rating</b>	Medium	<b>Review date</b>	December 2025
<b>What it is not</b>	It is not a guide to clinical nursing care of mental health consumers.		
<b>Who it applies to</b>	This business rule applies to all nurses who are new to the service (including from other nursing specialties) and their supervisors.		
<b>Definitions</b>	<p><b>GradStart:</b> A Registered Nurse (RN) who has recently graduated from an approved nursing course that leads to enrolment or registration with the Nursing and Midwifery Board of Australia (part of the Australian Health Practitioner Regulation Agency (AHPRA)).</p> <p><b>Transitioning to Professional Practice (TPP) Nurse:</b> A Registered Nurse (RN) or Enrolled Nurse (EN) who is commencing employment in the mental health specialty for the first time, or who has less than two years of experience in mental health nursing.</p> <p><b>Orientation:</b> A finite activity designed to welcome a new employee to the organisation and to acquaint them with the broad governance structures, policies and processes, key roles and relationships, as well as employer/employee responsibilities and expectations.</p> <p><b>Preceptee:</b> A Nurse who is new to an organisation, unit or role.</p> <p><b>Preceptor:</b> An experienced Nurse who assists in facilitating a preceptee's orientation and integration in the professional practice environment, while sharing clinical expertise and providing support as preceptee's learn their new roles and responsibilities as Mental Health Nurses. <a href="#">The Superguide: A Supervision Continuum for Nurses and Midwives</a>.</p> <p><b>Supernumerary:</b> A Nurse working under supervision, in addition to requisite staffing (ie not replacing regular staffing).</p>		
<b>What to do</b>	<ul style="list-style-type: none"> <li>• All staff are to follow each activity relevant to their roles.</li> <li>• Use this document to guide the transition to practice</li> </ul>		

	<p>process.</p> <ul style="list-style-type: none"> <li>• Use this document to enhance a culture of learning and safety.</li> </ul>
<p><b>Orientation and Culture</b></p>	<p>SESLHD MHS embodies a just restorative culture and celebrates a strong focus on wellbeing. The following orientation processes within the MHS align with this culture:</p> <ul style="list-style-type: none"> <li>• On commencement of employment, GradStart and Transitioning Nurses attend: <ul style="list-style-type: none"> <li>• A corporate orientation.</li> <li>• A nursing orientation.</li> <li>• eMR training.</li> <li>• Safety For All training.</li> <li>• A local site orientation, to be a structured and comprehensive induction period of up to five days blended with theoretical, team/unit processes, team/unit values and supernumerary point of care teaching.</li> </ul> </li> <li>• The period and conditions of preceptorship should be explicitly agreed at commencement. Preceptees should be asked to provide feedback at the conclusion of the transition to enable ongoing improvements to, and the enhancement of, the preceptorship process.</li> <li>• SESLHD MHS staff have access to a range of professional development opportunities.</li> </ul>
<p><b>Support</b></p>	<p><b>Local educators</b></p> <ul style="list-style-type: none"> <li>• Are responsible for introducing Transitioning Nurses to their assigned preceptor and mentors, and distinguish between the different roles. Refer to Health and Education Training Institute <a href="#">‘The Superguide: A Supervision Continuum for Nurses and Midwives’</a>.</li> </ul> <p><b>Preceptors</b></p> <ul style="list-style-type: none"> <li>• The preceptor role may be shared by two or more experienced RNs to allow for rostering flexibility.</li> <li>• Preceptors would benefit from attending the “Clinical Supervision foundation Level Workshop”</li> <li>• Preceptors will be provided with the “SESLHD Mental Health Preceptorship Guide: A guide for Managers, Educators and Preceptors” guidebook.</li> <li>• Preceptor and preceptee are encouraged during the first week to debrief during changeover of shift to provide support, give and receive feedback, allow for critical reflection and analysis of practice and to answer any questions.</li> <li>• After week one, it is encouraged that preceptor and preceptee meet regularly with clear professional development objectives and goals.</li> </ul> <p><b>Clinical Supervision</b></p> <ul style="list-style-type: none"> <li>• It is the responsibility of the service to provide GradStart and Transitioning Nurses with Clinical Supervision, either group or individual 1:1 sessions at commencement of employment.</li> <li>• It is the responsibility of the GradStart and Transitioning</li> </ul>

	<p>Nurse to make initial contact with allocated Clinical Supervisor and arrange ongoing regular, protected time and day for facilitated, in-depth reflection on clinical practice. All GradStart and Transitioning Nurses are to participate in regular clinical supervision, as per <a href="#">SESLHDGL/027 - Clinical Supervision of Nurses and Midwives</a>.</p> <ul style="list-style-type: none"> <li>• GradStart and Transition Nurses are also to be made aware of existing local group supervision times that they are expected to attend each month.</li> </ul> <p><b>Clinical Workload</b></p> <ul style="list-style-type: none"> <li>• GradStart and Transitioning Nurses are to be allocated an appropriate clinical workload, commensurate with their level of experience.</li> </ul> <p><b>Deployment</b></p> <ul style="list-style-type: none"> <li>• Deployment of GradStart and Transitioning Nurses to another Unit should only be considered when there is no other suitable nursing alternative available. Appropriate support and supervision must be provided if deployment is unavoidable.</li> </ul> <p><b>Performance Review</b></p> <ul style="list-style-type: none"> <li>• GradStart and Transitioning Nurses must have a performance review with their Nurse Unit Manager/Clinical Manager, in consultation with the Clinical Nurse Educator/Clinical Nurse Consultant and the Transitioning Nurses' Preceptors at three, six, nine and twelve months during their twelve month temporary contract. Performance reviews occur annually thereafter.</li> <li>• Performance reviews provide the Gradstart and Transitioning Nurse with opportunity to receive and give feedback, explore their progress, develop appropriate professional development goals and celebrate achievements</li> <li>• Performance reviews will provide Nurse Unit Managers/ Clinical Managers, in consultation with Clinical Nurse Educators/Clinical Nurse Consultant and the Transitioning nurse' Preceptors, with the opportunity to give feedback about performance, progression and practice, receive feedback about the experience of the GradStart and Transitioning Nurse, support the development of appropriate professional development goals for the GradStart and transitioning nurse and celebrate achievements.</li> </ul>
<p><b>Training and Education</b></p>	<ul style="list-style-type: none"> <li>• State mandatory study days</li> <li>• Local mandatory training as detailed in <a href="#">SESLHDBR/011 - Mental Health Mandatory Training for Clinical Staff</a></li> <li>• Online training via Mental Health Pathways in Practice modules accessed via <a href="#">My Health Learning</a>.</li> <li>• New to service staff are to seek out Professional Development opportunities through their local education teams</li> </ul>

	<ul style="list-style-type: none"> <li>• GradStart and Transitioning Nurses are to attend seven allocated study days within the SESLHD MHS GradStart Transition to Practice Program and the SESLHD MHS Introduction to Mental Health Nursing Program.</li> </ul>
<p><b>Rostering</b></p>	<ul style="list-style-type: none"> <li>• Wherever possible, GradStart and Transitioning Nurses should be rostered on <b>Monday – Friday shifts (AM or PM)</b> in the initial three-week period of employment.</li> <li>• GradStart and Transitioning Nurses are to work as supernumerary for the initial three working shifts at the service. GradStart and Transitioning Nurses are to be rostered with their preceptor on these days so that consistent support can be established.</li> <li>• After the supernumerary period, as a matter of priority, every effort should be made to roster a preceptor onto the same shift as the preceptee, for at least the first three weeks on the unit. Where multiple Transitioning Nurses are commencing in a clinical area at any one time, consideration should be given to the implications of their rostering on the current skill mix eg where there are three GradStart or Transitioning Nurses commencing in a clinical area at one time, it is suggested that two GradStart or Transitioning Nurses should be rostered on a morning shift and the other GradStart or Transitioning Nurse on an evening shift in the first week.</li> <li>• The roster should allow for each GradStart and Transitioning Nurse to be rostered on both evening and morning shifts in the initial three-week period.</li> <li>• GradStart and Transitioning Nurses who are new to mental health may be rostered on night duty after three months of employment, where there is an appropriate level of supervision and clinical support available.</li> <li>• GradStart and Transitioning Nurses should have their individual level of experience and ability taken into consideration prior to rostering, particularly on shifts where supervision is limited, eg a GradStart or Transitioning Nurse with previous EN or Assistant in Nursing (AIN) experience in a mental health setting may not have the same support needs as someone without previous Mental Health Nursing experience.</li> <li>• Within the first rotation, overtime should be limited for GradStart and Transitioning Nurses, to promote and support self-care and well-being of new staff.</li> </ul> <p><b>Allocated Days Off (ADOs)</b></p> <ul style="list-style-type: none"> <li>• All ADOs are to be allocated and taken when they fall due in each 28-day roster, unless negotiated between the GradStart or Transitioning Nurse and the Nursing Unit Manager (NUM) of the relevant clinical area.</li> <li>• ADOs are only to be accrued and carried over to a new unit or facility if the future NUM/Manager is in agreement.</li> </ul> <p><b>Annual Leave</b></p> <ul style="list-style-type: none"> <li>• GradStart Nurses are eligible for annual leave at the</li> </ul>

	<p>completion of 12 months employment but are encouraged to take pro rata leave after the first six months.</p> <ul style="list-style-type: none"> <li>• This is to minimise annual leave liability being carried over to subsequent cost centres when the GradStart or Transitioning Nurse transfers to another unit and also to ensure the GradStart or Transitioning Nurse is afforded regular periods of recreation and rest during the transition year.</li> </ul> <p><b>Note:</b> In accordance with the NSW Ministry of Health Policy Directive <a href="#">PD2022_006 - Leave Matters for the NSW Health Service</a>, Nurses are required to take annual leave within six months of it falling due. The taking of pro rata annual leave within the first 12 months of employment is made with mutual agreement between the Nurse and the NUM.</p> <p><b>Training and Education Days</b></p> <ul style="list-style-type: none"> <li>• GradStart and Transitioning Nurses, including experienced Nurses new to mental health, require a customised, individual program that aligns with principles under SESLHD MHS Preceptorship Guide.</li> <li>• GradStart and Transitioning Nurses who are employed by SESLHD MHS are expected to participate in either the SESLHD MHS GradStart or SESLHD MHS Introduction to Mental Health Nursing Program. Nurses participating in these programs are required to attend allocated study days in their first year. The dates are advised by the Nurse Educator Coordinating the programs.</li> <li>• GradStart and Transitioning Nurses who are participants in either the SESLHD MHS Gradstart Program or the SESLHD Introduction to Mental Health Nursing Program, are responsible for ensuring that these days are reflected in their roster, in consultation with the relevant Nurse Unit Manager or Clinical Manager.</li> </ul>
<b>Ongoing Employment</b>	GradStart and Transitioning Nurses are offered a 12-month temporary employment contracts. It should be noted that completion of the SESLHD MHS Gradstart Program, or SESLHD MHS Introduction to Mental Health Nursing Program, does not guarantee continued employment at the end of the 12 months. At the completion of the 12 months, in alignment with the 12 month Performance Review, opportunities to apply for permanent positions often become available.
<b>When to use it</b>	This business rule is to be used whenever Nurses are Transitioning into the SESLHD MHS.
<b>Why the rule is necessary</b>	This business rule provides consistent direction for GradStart and Transitioning Nurses and their Managers with respect to orientation process and workplace culture, ongoing support and appropriate rostering to assist Nurses new to mental health, to transition safely and effectively into the workplace. This business rule aims to ensure the maintenance of wellbeing, whilst still ensuring safe practice and effective clinical nursing care.
<b>Who is responsible</b>	Responsible staff include all Nurses transitioning into the

	SESLHD. MHS and those staff responsible for their supervision.
<b>Ministry of Health/ SESLHD reference</b>	<p><b>NSW Ministry of Health References</b></p> <ul style="list-style-type: none"> <li>• <a href="#">PD2022_006 - Leave Matters for the NSW Health Service</a></li> </ul> <p><b>SESLHD References</b></p> <ul style="list-style-type: none"> <li>• SESLHD MHS Preceptorship Guide</li> <li>• <a href="#">SESLHDGL/027 - Clinical Supervision of Nurses and Midwives</a></li> <li>• <a href="#">SESLHDBR/011 - Mental Health Mandatory Training for Clinical Staff</a></li> <li>• <a href="#">SESLHDPD/204 - Orientation and Induction – Mental Health</a></li> <li>• <a href="#">Orientation Manual, Mental Health Service T18/5437</a></li> </ul> <p><b>Other References</b></p> <ul style="list-style-type: none"> <li>• <a href="#">HETI - The Superguide: A Supervision Continuum for Nurses and Midwives</a></li> <li>• <a href="#">National Practice Standards for the Mental Health Workforce (National Mental Health Strategy 2013)</a></li> <li>• <a href="#">Standards of Practice in Mental Health Nursing (Australian College of Mental Health Nurses)</a></li> <li>• <a href="#">National Safety and Quality Health Service (NSQHS) Second Edition: Standard 1 Clinical Governance: Safety and quality training 1.19, 1.20), Safety and quality roles and responsibilities (1.25, 1.26)</a></li> </ul>
<b>Executive Sponsor</b>	Sharon Carey, General Manager, MHS
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## Revision and Approval History

Date	Revision Number	Author and Approval
October 2013	1	Original draft prepared by Nicola DiMichiel, Clinical Operations Manager, and STG MHS (on secondment).
January 2015	2	Edits to 'Study Days' section after confirmation of the criteria for transitioning nurses i.e. new graduates and the process for experienced nurses new to Mental Health.
February 2015	3	Minor edits suggested by members of the MHS District Document Development and Control Committee.
April 2015	4	Document endorsed by SESLHD MHS Clinical Council.
August 2018	5	Minor review completed by SESLHD MHS Policy and Document Development Officer. Major review in progress with SESLHD MHS Workforce Capabilities Nursing Educator. Endorsed by DDDCC and Executive Sponsor.
August 2018	5	Executive Services format and publish.
June 2019	6	Reviewed by Policy & Document Development Officer Confirmed correct template Document reviewed for gender diversity Links checked and updated Standards aligned to NSHQ Second Edition
June 2019	6.1	Reviewed by Emma McIntosh, Workforce Capabilities CNE, Ben Chidester, Workforce Capabilities Nurse Educator Circulated to DDCC for review and feedback.
July 2019	6.2	Incorporates DDCC and nominated staff's feedback. Reviewed by MH Nursing Workforce
July 2019	6.3	Reviewed by Workforce Capabilities Nurse Educator
August 2019	6.3	Endorsed by SESLHD MHS DDCC Endorsed by SESLHD MHS Clinical Council Minor review to reflect name change to GradStart and process updated - approved by Executive Sponsor
August 2019	6.3	Processed by Executive Services prior to publishing
September 2022	7.0	Routine review commenced. Links checked and updated.
October 2022	7.1	Reviewed by author
November 2022	7.2	Links checked and updated. Reviewed by DDCC. Endorsed out-of-session for publication.
December 2022	7.2	Endorsed for publication by Executive Sponsor