Hospitality in mental health nursing

By Eimear Muir-Cochrane

The experience of psychiatric inpatient hospitalisation has received increasing scrutiny over recent years.

Risk to self or others is usually the core reason for admission to hospital, and as such nurses are required to maintain safety for patients. However, patients have mixed feelings about their hospitalisation which is often negative. The trauma experienced has been termed ‘sanctuary harm’ to recognise the impact of the experience. Thus, it is important to provide a therapeutic milieu for service users to improve their recovery and experience of hospitalisation.

Hospitality is an ancient concept and one that provides cohesion in societies in every culture. The word hospitality derives from the Latin ‘hospes’ and refers to host and guest or stranger. Hospitality involves showing respect for one’s guests (strangers), providing for their needs, and treating them as equals. Hospitality is at the core of human connection, empathy and genuineness. The role of the host is to protect and provide for the guest, and create an environment that is empathic and nurturing. I contend that this is a powerful and therapeutic way for clinicians to view and engage with patients - as guests who are not familiar to them and who are likely to experience strangeness in the environment around them and those within it. To extend this concept then, the illness and symptoms of the patient are also strange to the nurse and their role is to become familiar with the phenomenon of illness from the patient’s perspective. This is highly skilled work requiring genuine concern and engagement with people in mental distress. Importantly, I am not suggesting that nurses behave as if they are exchanging goods and services such as in the hotel or food industry. Not at all, I am proposing that nurses in all settings (not just mental health) can be fabulous hosts to patients and their significant others, creating a sense of care and kindness that can facilitate personal engagement and a positive hospitalisation experience. A well-known fast food chain has a three metre rule… if a worker is within three metres of a customer, they greet them in a friendly and smiling manner. I challenge all of us to do this in our everyday work in all workplaces. I look forward to your comments about this.

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Open borders

By Sheila Mortimer-Jones

Borderline personality disorder is characterised by emotional instability, intense and unstable relationships and fear of abandonment. People with this disorder frequently present in crisis to emergency departments following an episode of self-harm or suicide attempt, which often results in hospital admission.

To address this Hampton Road Service, a public, state-wide residential facility for mental health consumers in Western Australia, commenced their Open Borders program. This is an innovative project that offers those diagnosed with borderline personality disorder an alternative to hospitalisation by allowing them to arrange their own admission, rather than going through the usual channels. The theory of this program is that self-harm behaviours will be less frequent if consumers can access immediate support. The aim is to improve mental health while greatly reducing the cost to the health service.

Dr Sheila Mortimer-Jones, a registered mental health nurse and lecturer at the School of Health Professions, Murdoch University, will study the efficacy of the program in collaboration with South Metropolitan Health Service. This research will explore whether the Open Borders program is an effective alternative to general psychiatric treatment by a process of assessment and data collection over two years; comparing social functioning and the number of presentations and hospital admissions with a comparable group of consumers who are not in the program. If this study shows that the program is successful it could become a model for the treatment of this group of consumers and have important implications for practice nationwide, freeing up some of the inpatient beds that are constantly in such short supply. This project therefore has national significance and may have demonstrable application for health policy and services.

Dr Mortimer-Jones is leading the research team that includes Dr Ahmed Munib, consultant psychiatrist at Armadale-Kelmscott Memorial Hospital and Clinical Associate Professor in Psychiatry at the University of Western Australia; Professor Paul Morrison, Dean of Health Professions, Murdoch University; Professor Dianne Wynaden, School of Nursing and Midwifery, Curtin University; Ms Amanda Bostwick, Coordinator of Hampton Road Service, Fremantle Hospital.

Dr Sheila Mortimer-Jones is located in the School of Health Professions at Murdoch University in WA.