Work with people with mental health issues

Assessment 1 of 2

Short Answer Questions

Assessment Details

This section is for SUT VE Quality and Compliance review and feedback and must be deleted in the student version of the assessment.

SECTION 1

UNIT OF COMPETENCY DETAILS

Code	Title
CHCMHS001	Work with people with mental health issues

COURSE AND MODULE DETAILS

Assessments may be published in more than one course. Add lines for additional courses as needed.

Course Code (UPed)	Module Number (Order)	Module Code (UPed)

ASSESSMENT TYPE

Assessment Method: *Select all that apply.*	**Questioning**	Choose an item.	Choose an item.

SECTION 2

STUDENT INSTRUCTIONS

The following instructions detail the requirements of the assessment and are captured in the LMS assessment page. This includes a description of the student instructions, associated files and submission instructions.

Student instructions

This is assessment 1 of 2 assessments for CHCMHS001 Work with people with mental health issues.

This assessment requires you to answer 15 short answer questions to test your knowledge as required of this unit.

To be assessed as competent, you must complete all tasks in the spaces provided.

You are required to download your assessment by clicking on the assessment document icon below (see Let's begin) and upload your completed assessment for submission.

Supporting documents

Not applicable

Files for submission

Submit the assessment document with all questions completed in the spaces provided.

Submission instructions

<div style="border:1px solid black; padding:10px;">

PDF File Submissions

Please save all Word documents as PDF files before submitting.

IMPORTANT: Word documents will **not** be accepted.

Most modern web browsers can open and display a PDF file. If you have an older operating system, however, you may need a PDF reader installed on your device such as the Acrobat Reader, available from Adobe.

Windows: Word 2013 and newer

Choose **File > Export > Create PDF/XPS**.

Windows: Word 2010

1. Click the **File** tab
2. Click **Save As**
   - To see the Save As dialog box in Word 2013 and Word 2016, you have to choose a location and folder
3. In the **File Name** box, enter a name for the file, if you haven't already
4. In the **Save** as type list, click **PDF** (*.pdf).
   - If you want the file to open in the selected format after saving, select the Open file after publishing check box.
   - If the document requires high print quality, click Standard (publishing online and printing).
   - If the file size is more important than print quality, click Minimum size (publishing online).
5. Click **Options** to set the page to be printed, to choose whether markup should be printed, and to select output options. Click **OK** when finished.
6. Click **Save**.

macOS: Office for Mac

To save your file as a PDF in Office for Mac follow these easy steps:

1. Click the **File**
2. Click **Save As**
3. Click **File Format** towards the bottom of the window
4. Select **PDF** from the list of available file formats
5. Give your file a name, if it doesn't already have one, then click **Export**

For more detailed instructions refer to <u>Microsoft Support</u>.

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SECTION 3

ASSESSMENT TASK CRITERIA AND OUTCOME

This assessment will be graded as Satisfactory (S) or Unsatisfactory (US).

To achieve Satisfactory; valid, sufficient, authentic, and current evidence of meeting the criteria must be submitted.

Refer to the mapping spreadsheet for details for this unit.

SECTION 4

ASSESSMENT DETAILS

Please refer to SECTION 2 to confirm how the assessment tools will be built and the methods that will be used to collect evidence i.e., Student's will type answers directly into LMS or will upload of files of completed assessment tasks.

The STUDENT INSTRUCTIONS above will be added directly into the LMS.

All associated files will be accessed via the LMS, as will any Assessor Guides, Matrix, Templates etc.

Students and Assessors have restricted permissions in the LMS. Assessor Guides, including model answers, will be available to Assessors ONLY.

The following pages contain the draft assessment which will be built into the LMS once reviewed. This includes:

☒ Instructions to students

☒ Questions /tasks

☒ Templates /tables where applicable

☐ Links to supporting files /websites

☒ Instructions to assessors

☒ Sample answers /examples of benchmark answers

SECTION 5

STAKEHOLDERS AND SIGN OFF

List all that apply for each of the stakeholder roles below.

UPed Learning Designer/Author name	
SUT VE Quality Compliance name	Simon Hitchick
Date approved	

Assessment Instructions

Task overview

This assessment task includes fifteen (15) short answer questions.

Read each question carefully before capturing your response in the spaces provided.

Please consider the environment before printing this assessment.

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Question 1

In the community services and health context describe each of the following legal and ethical considerations. Include a short summary of how they are applied in the workplace, their impact on workers and potential consequences for any breach.

Assessor instructions: Students must describe each of the terms below and how it relates to the community services and health industry, impacts workers in this field and potential consequences for a breach.

Sample answers are provided below.

Each answer must include and overview capturing:

- A description of the term

- How it applies to the community services and health industry

- How it relates to or impacts workers in this area

- Potential consequences for a breach or non-compliance.

TERM	DESCRIPTION (Approximately 100 words each)
1. Codes of practice	A code of practice in community services is a set of guidelines that outline the best practices and standards for delivering community services. It provides a framework for the delivery of quality services that meet the needs of clients and are in line with ethical and legal requirements. Consequences for breaching these guidelines may range from disciplinary action to criminal charges depending on the breach.
2. Discrimination	Discrimination is the unfair treatment of an individual or group based on certain personal characteristics, such as race, gender, age, religion, sexual orientation, disability, or any other protected attribute. Discrimination can take many forms, including exclusion, harassment, and differential treatment. Employees in the community services and health industry have a responsibility to prevent discrimination and promote diversity and inclusion in their workplaces. By doing so, they can create safe, respectful, and inclusive environments that promote the health and well-being of all individuals. Anyone found in breach of discrimination-based legislation is liable to face legal consequences and penalties.
3. Dignity of risk	Dignity of risk is based on the belief that all individuals should have the opportunity to make their own decisions and take risks in order to lead fulfilling lives. However, this concept also recognises that individuals may require support and guidance to make informed decisions and manage potential risks. This may seem in contradiction to other legal and ethical responsibilities health and community services workers must comply with, so it is recommended that they conduct thorough risk assessments, develop supportive strategies and consult with colleagues/ supervisors as needed to ensure the right outcome is achieved.

4. Duty of care	In the community services and health industry, employees have a duty of care to ensure the safety, well-being, and rights of the individuals they support. The duty of care is based on the principle that individuals have a right to be protected from harm, and that those who are in a position to do so have a responsibility to take action to prevent harm from occurring. A breach of a duty of care may result in legal and disciplinary consequences, such as lawsuits, loss of professional license, or termination of employment.
5. Informed consent	Informed consent outlines an individual's right to receive and understand information about their care or treatment options, including any potential risks or benefits, and to make an informed decision about their care. It must also be determined that the client has the capacity to provide informed consent. Failure to obtain informed consent or to uphold an individual's right to make their own decisions can result in legal and ethical consequences for employees, including lawsuits and disciplinary action.
6. Mandatory reporting	Mandatory reporting requires workers to report suspected cases of abuse or neglect of children, elderly, or vulnerable individuals to the relevant authorities. The purpose is to protect those who may be at risk of harm and ensure that appropriate interventions can be implemented to prevent further harm. Failure to report suspected cases of abuse or neglect can result in legal and ethical consequences for employees, including fines, disciplinary action, and criminal charges.
7. Privacy, confidentiality and disclosure	Privacy refers to an individual's right to control the collection, use, and disclosure of their personal information. Confidentiality refers to the obligation to protect and keep confidential any information that is shared by a client. This involves: - Obtaining informed consent - Maintaining accurate and secure records - Minimising sharing information - Complying with legal requirements etc. Failure to maintain privacy and confidentiality can result in legal and ethical consequences for employees, including disciplinary action, loss of licensure or certification, and legal liability.

8. Policy frameworks	Policy frameworks provide a set of guidelines and procedures for employees to follow when delivering services to clients, and they outline the expectations and standards of behaviour that employees are expected to adhere to. Policy frameworks cover: - Client care - Health and safety - Human resources - Code of conduct - Code of practice etc. It is essential employees be aware of and understand these policies and procedures and seek clarification when needed. Failure to comply with these policies can result in disciplinary action, loss of employment, or legal liability.
9. Records management	Records management is the practice of creating, storing, maintaining, and disposing of records in a manner that ensures their accuracy, completeness, and security. Employees in the community services and health industry have legal and ethical obligations to maintain accurate and complete records of their interactions with clients. Failure to comply with records management policies can have serious legal and ethical consequences for employees and organisations such as legal action or loss of reputation for a breach in privacy or serious consequences for client health and well-being where mis information is recorded.
10. Work role boundaries – responsibilities and limitations	Work role boundaries refer to the ethical and professional guidelines that govern the interactions and relationships between employees and clients in the community services and health industry. These boundaries may include: - Avoiding dual relationships - Maintaining professional distance - Respecting client autonomy - Establishing clear communications etc. Failure to maintain appropriate client boundaries can result in legal and ethical consequences for employees, including disciplinary action, loss of licensing or certification, and legal liability.

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11. Work health and safety	The Work Health and Safety Act legally mandates a safe and healthy work environment through an organisations legal duty of care to ensure the safety and well-being of workers and clients and identifying and mitigating workplace risks.
	Ethically, it reflects a commitment to worker and client well-being and safety.
	It involves comprehensive WHS policies, regular risk assessments, and ongoing training to create a safe and ethical workplace.
	It empowers workers with a safe environment, promoting well-being, job satisfaction, and confidence in their roles.
	Potential consequences for a breach may include legal penalties, fines, and regulatory sanctions, damage to reputation, loss of trust, and compromised safety.

Question 2

Identify the relevant legislation, regulations and/or policies that apply to the community services and health industry for each of the following legal and ethical considerations at the international, national, state/ territory and local level as identified. Provide a short description for each.

NOTE: Indicate State/Territory to represent your own state or territory. If your state or territory does not have a specific legislation related to the consideration, include the relevant answer for an alternative state. To answer this question please ensure you have read the learning content thoroughly.

Assessor instructions: Students must identify and describe legislation relevant to each of the legal and ethical considerations identified. These must include the name of the legal tool and a short description in relation to the work role.

Correct legislation is provided below. Where there are multiple options, this is indicated in the sample answer. Descriptions may vary, however must capture the key components of each legislation as it relates to the consideration.

LEGAL AND ETHICAL CONSIDERATION		LEVEL	LEGISLATION, REGULATION & POLICY	DESCRIPTION (Approximately 20-50 words each)
1.	Children in the workplace	International	United Nations Convention on the Rights of the Child (UNCRC)	The UNCRC is an international human rights treaty that sets out the civil, political, economic, social, and cultural rights of children. Australia ratified the UNCRC in 1990.
		National	Child Protection (Working with Children) Act 2012	This Act establishes a framework for screening individuals who work or volunteer with children, including requiring a Working with Children Check.
		National	Child Wellbeing and Safety Act 2005	This Act sets out the legal obligations of organisations to protect the safety and wellbeing of children in their care, including requirements for reporting child abuse and neglect.
		State/ Territory	Child Protection Act (varies by state/territory) This may include: - Child Protection Act 1999 (Qld)	Each state and territory has its own child protection legislation that sets out the legal obligations and requirements for organisations and individuals working with children, including mandatory reporting requirements for child abuse and neglect.

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		National	- Children and Young Persons (Care and Protection) Act 1998 (NSW) - Children and Young People Act 2008 (ACT) - Child Employment Act 2003 (VIC) - Children, Young Persons and Their Families Act 1997 (TAS) - Child Safety (Prohibited Persons) Act 2016 (SA) - Children and Community Services Act 2004 (WA) - Care and Protection of Children Act 2007 (NT)	
2.	Discrimination	International	United Nations Universal Declaration of Human Rights (UDHR)	This prohibits discrimination on the basis of race, color, sex, language, religion, political or other opinion, national or social origin, property, birth, or other status.
		International	International Labour Organisation (ILO) Convention 111 on Discrimination in Employment and Occupation	Requires member states to eliminate discrimination in the workplace.
		National	Australian Human Rights Commission Act 1986	This Act establishes the Australian Human Rights Commission (AHRC) and gives it the power to investigate and resolve complaints of discrimination and breaches of human rights.
		National	Disability Discrimination Act 1992	This Act prohibits discrimination against people with disabilities, including children with disabilities, in employment, education, access to premises, and the provision of goods and services.
		National	Sex Discrimination Act 1984	This Act prohibits discrimination based on sex, gender identity, and intersex status, including in employment, education, access to premises, and the provision of goods and services.
		National	Racial Discrimination Act 1975	This Act prohibits discrimination based on race, colour, ethnicity, and national origin, including in employment, education, access to premises, and the provision of goods and services.

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		State/Territory	Each Australian state and territory have their own anti-discrimination laws such as: - Anti-Discrimination Act 1977 (NSW) - Victorian Charter of Human Rights and Responsibilities Act 2006	It is unlawful to discriminate on the grounds of race, sex, age, sexual orientation, marital or domestic status, disability, transgender status, and other factors.
		Local	Inclusion (Anti-Discrimination) Policy	Outlines the City of Sydney council's commitment to promoting a safe and inclusive community for all residents and visitors.
3.	Dignity of risk	International	United Nations Convention on the Rights of Persons with Disabilities (CRPD)	Recognises the right of persons with disabilities to enjoy the same rights and freedoms as others, including the right to make their own choices and take risks.
		National	Aged Care Quality Standards	Promotes and supports individual autonomy and decision-making.
		National	National Disability Insurance Scheme (NDIS) Practice Standards	Promotes and supports individual autonomy and decision-making.
		State/Territory	Some states provide individual decision-making legislation including: - Guardianship and Administration Act 2019 (Qld) - Mental Health Act 2014 (Vic)	Provide frameworks for decision-making and capacity assessments for individuals who may require support.
4.	Duty of care	International	United Nations Convention on the Rights of the Child (UNCRC) Or the United Nations Convention on the Rights of Persons with Disabilities (CRPD)	At the international level, the United Nations Convention on the Rights of the Child (UNCRC) and the United Nations Convention on the Rights of Persons with Disabilities (CRPD) both include provisions related to duty of care for vulnerable individuals.
		National	Work Health and Safety Act 2011 (Cth) Or	At the national level in Australia, the Work Health and Safety Act 2011 (Cth) imposes a duty of care on

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			Aged Care Act 1997 (Cth) Or National Disability Insurance Scheme Act 2013 (Cth)	employers to ensure the health and safety of workers and others in the workplace. The Aged Care Act 1997 (Cth) and the National Disability Insurance Scheme Act 2013 (Cth) also impose duties of care on providers of aged care and disability services, respectively.
		State/Territory	Health Records and Information Privacy Act 2002 (NSW) Or Privacy and Data Protection Act 2014 (Vic)	State and territory laws also impose a duty of care on community services and health industry professionals. For example, the Health Records and Information Privacy Act 2002 (NSW) and the Privacy and Data Protection Act 2014 (Vic) require health practitioners to maintain the confidentiality and security of patient information.
5.	Informed consent	International	The principle of informed consent is recognised in various international declarations and guidelines, such as: - World Medical Association's Declaration of Helsinki - UNESCO Universal Declaration on Bioethics and Human Rights.	These documents emphasise the importance of obtaining voluntary and informed consent from individuals involved in research or medical procedures.
		National	National Health and Medical Research Council (NHMRC) National Statement on Ethical Conduct in Human Research	It provides guidelines for research involving humans, including requirements for obtaining informed consent.
		State/Territory	Each Australian state and territory has its own laws and regulations that govern informed consent in the healthcare context. These include: - Health Records and Information Privacy Act 2002 (NSW) - Health Records Act 2001 (VIC) - Consent to Medical	These outline the requirements for obtaining and documenting informed consent in healthcare settings.

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			Treatment and Palliative Care Act 1995 (SA)	
		Local (Organisa	Hospice policies or research ethics guidelines.	These policies aim to ensure compliance with relevant legislation and ethical standards.
6.	Mandatory reporting	National	Family Law Act 1975	This legislation requires certain professionals, such as doctors, psychologists, and social workers, to report child abuse or neglect if they have reasonable grounds to suspect it during their work.
		National	Crimes Act 1914	This Act imposes a general obligation on all individuals to report offenses they believe have been committed against children.
		National	National Disability Insurance Scheme Act 2013	This legislation establishes mandatory reporting obligations for registered NDIS providers in relation to serious incidents or abuse against participants.
		State / Territory	Child Protection Act (varies by state/territory)	Each state and territory has its own child protection legislation that sets out the requirements and processes for reporting child abuse and neglect. These laws typically outline who is required to report, what should be reported, and the procedures to be followed.
		State/ Territory	Domestic Violence Protection Act (varies by state/territory)	Legislation relating to domestic violence often includes provisions for mandatory reporting in situations where children are at risk or witnessing domestic violence.
7.	Privacy, confidentiality and disclosure	International	General Data Protection Regulation (GDPR)	This applies to organisations that handle the personal data of individuals in the European Union. It sets out requirements for the collection, use, and protection of personal information, including the rights of individuals regarding their data.
		National	Privacy Act 1988	The Privacy Act establishes a national framework for the handling of personal information. It includes Australian Privacy Principles (APPs) that apply to most private sector organisations and government agencies. The APPs govern the collection, use, disclosure, and storage of personal information.
		State/ Territory	Health Records and Information Privacy Act (HRIPA) (varies by state/territory)	Each Australian state and territory has its own HRIPA or similar legislation that specifically addresses privacy and confidentiality in the healthcare sector. For example, in New South Wales, the Health Records and Information Privacy Act 2002 (NSW) governs the handling of health information by health service providers.
8.	Mental health legislation	State/ Territory	Mental Health Act (varies by state/territory) This may include:	Each Australian state and territory has its own MHA that specifically governs the assessment, treatment, and rights of people with mental illness.

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			- Mental Health Act 2007 (NSW) - Mental Health Act 2014 (Vic) - Mental Health Act 2016 (Qld) - Mental Health Act 2014 (WA) - Mental Health Act 2009 (SA) - Mental Health Act 2013 (Tas) - Mental Health Act 2015 (ACT) - Mental Health and Related Services Act 1998 (NT)	
9.	Work health and safety	International	The ILO's: - Occupational Safety and Health Convention - Occupational Safety and Health Recommendation	The International Labour Organisation (ILO), set standards and guidelines that influence national legislation.
		National	Work Health and Safety Act 2011 (Cth)	The model legislation establishes the framework for work health and safety across Australia, emphasising a duty of care, risk management, and worker consultation.
		State/ Territory	Work Health and Safety Act (varies by state/territory) This may include: - Work Health and Safety Act 2011 (NSW - Occupational Health and Safety Act 2004 (Vic) - Work Health and Safety Act 2011 (Qld) - Occupational Safety and Health Act 1984 (WA) - Work Health and Safety Act 2012 (SA) - Work Health and Safety Act 2012 (Tas) - Work Health and Safety Act 2011 (ACT)	Each Australian state and territory has its own WHS Act that adopts the model legislation, regulating work health and safety in the state/territory.

				- Work Health and Safety (National Uniform Legislation) Act 2011 (NT)	

Question 3

Describe the Human Rights-Based Approach (HRBA) to work in the community services and health industry.

(Approximate word count: 50-60 words)

Assessor instructions: Students must describe the term HRBA as it relates to work in the community services and health industry.

A sample answer is provided below. Students' answers may vary, however they must address the elements set out in the assessor instructions above.

This approach emphasizes the principles of dignity, equality, participation, and accountability. It integrates human rights standards and principles into all aspects of service delivery, policy development, and decision-making. It ensures that services and interventions are designed and implemented in a manner that respects and upholds each persons basic human rights.

Question 4

Identify and provide a short summary of the 6 key principles and rights captured in the Universal Declaration of Human Rights (UDHR).

Assessor instructions: Students must describe the 6 principles and rights captured in the Universal Declaration of Human Rights (UDHR).

A sample answer is provided below. Students descriptions may vary however they must align to the 6 key principles and rights of the UDHR as idneitified.

KEY PRINCIPLES & RIGHTS		SUMMARY (Approximately 50 words each)
1.	Equality and non-discrimination	All individuals are born free and equal in dignity and rights, without any distinction based on race, color, sex, language, religion, political or other opinion, national or social origin, property, birth, or other status. It promotes equal treatment, opportunities, and protection for all, fostering inclusive and diverse societies.
2.	Right to life, liberty, and security	Every person has the right to life, liberty, and security of person. This includes protection from arbitrary deprivation of life, unlawful imprisonment, and physical or psychological harm. It ensures individuals are free from torture, slavery, and other forms of cruel or inhumane treatment.
3.	Freedom of thought, expression, and religion	This right encompasses the freedom to hold opinions, express ideas, and seek, receive, and impart information and knowledge through any medium. It also guarantees the freedom of religion or belief, including the freedom to worship, practice, and manifest one's religion individually or in community.

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4.	Right to fair treatment	This principle guarantees that everyone is entitled to a fair and public hearing by an independent and impartial tribunal when facing legal issues or disputes. It includes the right to be presumed innocent until proven guilty, the right to legal counsel, and protection against arbitrary arrest, detention, or exile.
5.	Right to education, health, and social security	This right ensures that every individual has access to education, including free and compulsory primary education, and the opportunity to develop their full potential. It also encompasses the right to the highest attainable standard of physical and mental health and social security, including access to medical care, social assistance, and social services.
6.	Right to work, just wages, and labor protections	Everyone has the right to work, free choice of employment, and just and favorable conditions of work. This includes fair remuneration for work, equal pay for equal work, and the right to form and join trade unions to protect and promote their interests. It also safeguards against exploitation, forced labor, child labor, and unfair treatment in the workplace.

Question 5

Describe the legal and ethical rights and responsibilities of workers, employers and clients in the community services and health industry.

(Approximate word count: 40 words each)

Assessor instructions: Students must describe legal and ethical rights and responsibilities for workers, employers and clients in the community services and health industry.

Sample answers are provided below. Students answers may vary, however they must reflect both legal and ethical components for each stakeholder group identified.

PARTIES	LEGAL	ETHICAL
	RIGHTS AND RESPONSIBILITIES (Approximately 40 words each)	
Workers	Workers have the right to a safe and healthy work environment, fair wages, reasonable working hours, protection against discrimination and harassment, and the right to join trade unions and engage in collective bargaining.	Workers have a responsibility to provide high-quality services, respect client autonomy and dignity, maintain confidentiality, engage in ongoing professional development, adhere to professional codes of conduct, and advocate for the rights and well-being of clients.
Employers	Employers are responsible for providing a safe and healthy work environment, complying with employment laws and regulations, preventing discrimination and harassment, ensuring fair wages and working conditions, and providing appropriate training and support for workers.	Employers have the right to expect employees to perform their duties competently and professionally, adhere to organisational policies and procedures, and act in the best interests of clients and the organisation.
Clients	Clients have the right to receive appropriate and quality services, be treated with dignity and respect, make informed decisions about their care, have their confidentiality protected, and access information about their rights and the services available to them.	Clients have a responsibility to provide accurate information about their needs, actively participate in their care and decision-making, respect the rights and dignity of workers, and comply with the agreed-upon treatment plans and guidelines.

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Question 6

Describe the impact of mental health legislation on individual workers and consequences of a breach in line with the areas identified below.

Assessor instructions: Students must describe the impacts of mental health legislation on workers and potential consequences for non-compliance.

Sample answers are provided below. Students answers may vary, however they must address the impact on individual workers and potential consequences for breaches for each of the areas identified.

	MENTAL HEALTH AREAS		DESCRIPTION (Approximately 30 words each)
1.	Impact on individual workers	Protection of rights	Mental health legislation outlines the rights of individuals with mental health issues, ensuring they receive fair and respectful treatment.
		Criteria for involuntary treatment	Mental health laws typically specify criteria for involuntary treatment, emphasising the necessity of balancing the rights of individuals with the duty of care.
		Duty of care obligations	Mental health legislation reinforces the duty of care that workers owe to individuals receiving mental health services.
		Privacy and confidentiality requirements	Workers are bound by legal and ethical obligations to maintain confidentiality and privacy. Mental health legislation often includes provisions regarding the secure handling of sensitive information.
		Informed consent practices	Legislation may outline requirements for obtaining informed consent before providing mental health interventions to ensure individuals have sufficient information to make autonomous decisions about their treatment.
		Anti-discrimination measures	Mental health legislation includes provisions to prevent discrimination against individuals with mental health issues to ensure an inclusive and supportive environment.
2.	Consequences of a breach	Legal considerations	Breaching mental health legislation can result in legal actions, including fines and legal proceedings. Workers may face personal liability for their actions if they fail to comply with the law.
		Professional disciplinary actions	Regulatory bodies and professional associations may take disciplinary actions against workers who breach mental health legislation. This can include suspension or revocation of professional licenses and memberships.

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		Damage to professional reputation	Breaching mental health laws can have long-term consequences for a worker's professional reputation. Public awareness of legal violations can undermine trust in the individual's competence and integrity.
		Compensation claims	Individuals who experience harm due to a worker's breach of mental health legislation may pursue compensation claims. This can lead to financial consequences for the worker and their employing organisation.
		Organisational repercussions	Employers may face consequences for workers' breaches of mental health legislation, including legal actions and damage to the organisation's reputation. This can impact the overall functioning of the mental health service.
		Loss of employment	Breaches of mental health legislation may lead to termination of employment. Employers may take such actions to demonstrate their commitment to legal and ethical standards.

Question 7

Describe the values and principles of the mental health sector as listed below.

Assessor instructions: Students must describe each of the values and principles identified in the table below as they relate to support work for clients with mental health issues.

Sample answers are provided below. Students answers must reflect those given below.

VALUE AND PRINCIPLE	DESCRIPTION (Approximately 40 words each)
1. Recovery	Acknowledges that individuals with mental health challenges can regain a fulfilling life beyond the limitations of their condition. It prioritises hope, resilience, and personal growth, fostering a belief in the capacity for recovery.
2. Recovery oriented practice	Approaches mental health care with a focus on supporting individuals in their recovery journey, emphasising collaboration and person-centered care. It recognises the individual's agency, strengths, and goals, promoting self-determination and autonomy.
3. Health promotion and prevention	Aims to enhance mental well-being and prevent mental health issues through proactive measures, education, and awareness. It emphasises the importance of early interventions and community initiatives to improve overall mental health.
4. Holistic approach	Considers the interconnectedness of physical, psychological, social, and environmental factors in addressing mental health. It advocates for comprehensive and integrated care that attends to the diverse aspects of an individual's life.

5. Empowerment and disempowerment	Empowerment involves supporting individuals to make decisions and take control of their lives. Disempowerment refers to processes that limit autonomy. This encourages practices that empower individuals, involving them in decision-making, and avoids actions that diminish autonomy.	
6. Access and equity	Ensures that mental health services are accessible to all, regardless of socio-economic status, ethnicity, or geographical location. It strives for fairness and inclusivity, addressing barriers to access and promoting equal opportunities for mental health care.	
7. Early intervention	Involves timely and proactive measures to address mental health issues at their early stages, preventing escalation. It recognises the significance of early identification and intervention to enhance outcomes and reduce the impact of mental health challenges.	
8. Rights	Upholds the human rights of individuals with mental health issues, including the right to dignity, privacy, and participation in decision-making. It advocates for the protection of fundamental rights, ensuring individuals are treated with respect and without discrimination.	
9. Social justice and inclusion	Promotes fairness and equality in the distribution of resources and opportunities, advocating for the inclusion of individuals with mental health challenges in all aspects of community life. It works towards dismantling stigma and discrimination, fostering a society where everyone has equal access to social, economic, and educational opportunities.	
10. Citizenship	Recognises individuals with mental health issues as active members of society with the right to participate fully in community life. It encourages the integration of individuals with mental health challenges into the broader community, emphasising their roles as citizens with rights and responsibilities.	

Question 8

Describe the different contexts of work in the mental health industry. Define and describe the approach to mental health work in the historical, social, political and economic contexts as reflected below.

Assessor instructions: Students must define mental health in each of the different contexts captured in the table below.

Sample answers are provided below. Students answers must reflect those given below.

CONTEXT	DESCRIPTION (Approximately 50 words each)

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1. Historical: How has the historical perception of mental health evolved in Australia?	Historically, mental health issues were often stigmatised, and treatment was inadequate. Advances in understanding, deinstitutionalisation, and a shift towards community-based care mark contemporary changes. Early history witnessed a focus on asylums and isolation; modern approaches emphasise community integration, person-centered care, and destigmatisation.
2. Social: How have societal views and attitudes toward mental health changed in the Australian community?	There is a growing awareness and acceptance, with campaigns promoting mental health as an integral part of overall well-being gaining traction. Advocacy groups have been instrumental in reducing stigma, fostering understanding, and advocating for policy changes to improve mental health support. Contemporary views emphasise destigmatisation, mental health awareness campaigns, and promoting inclusivity. Person-centered and recovery-oriented approaches have gained prominence.
3. Political: What are the current government policies addressing mental health in Australia and how do political decisions influence funding and resource allocation for mental health programs?	Policies like the National Mental Health Strategy and Mental Health Care Plan focus on enhancing accessibility, prevention, and quality of mental health services. Government initiatives vary, from funding mental health programs to enacting legislation that protects the rights of individuals with mental health challenges. Political decisions impact funding levels, affecting the capacity to implement and sustain mental health initiatives and services across the nation.
4. Economic: How does the economic climate impact mental health funding, and what challenges does it pose for service delivery?	The economic climate can significantly influence mental health funding, affecting the resources available for mental health services and support Economic downturns may strain mental health resources, while economic growth can lead to increased investment in mental health services. Advocacy for resource allocation is critical in ensuring adequate support.

Question 9

Working with people with mental health issues requires that you allow the person to express their own opinions and feel safe that they will not be judged. Take some time to reflect upon your current values and beliefs that have the potential to impact your work with such clients. Consider how these values and beliefs may impact how you work with people who have mental health issues. Briefly summarise your reflections and how you intend to ensure you do not impose your values and beliefs on your clients.

(Approximate word count: 135 - 150 words)

Assessor instructions: This is a self-reflection question. Each student will have an individual answer. However, students' responses must demonstrate a reflection of their values and beliefs, how this could impact their work with clients with mental health issues, and how they intend to ensure that they do not impose their beliefs onto clients. Wording may differ, but appropriate answers must reflect the themes and characteristics of the following example.

"I have a need to protect people, and I believe that I might have a tendency to be over-protective of clients with mental health needs, believe that I know better than them, and try to influence or make decisions on their behalf. I also have a particular set of values that everyone may not hold. I value financial security, education, and independence. I may have clients who have mental health issues that do not hold these same values, and I will need to ask them questions that will help me understand how they view the world to ensure that I do not impose my values on them. I will also continually monitor my day-to-day interactions with the clients to ensure that plans developed reflect the client's goals rather than imposing my goals onto the client."

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Question 10

People with mental health issues commonly face discrimination, prejudice, and the effects of social stigma. Briefly outline five(5) major impacts that these experiences can have on the individual.

(Approximate word count: 50 - 60 words)

Assessor instructions: The student's response must demonstrate an understanding of the key impacts of prejudice, discrimination and stigma on people with mental health issues. Wording may differ, but appropriate answers must reflect the themes and characteristics of the following example.

- Social isolation.
- Discourages people in need from seeking treatment.
- Limits recreation and employment opportunities.
- Impacts the individual's self-esteem, and negative perceptions can become internalised.
- Individuals can begin to blame themselves for their issues and believe they are not worthy of treatment or entitled to the same rights as everyone else.

Question 11

Identify and briefly explain 5 (five)myths about mental illness and clarify with the appropriate fact based statement for each.

Assessor instructions: Students must capture 5 myths about mental illness, dispelling them by providing the correct fact statement for each.

Sample answers are provided below. Students answers may vary, however must include a myth statement and the correct and matching fact statement that addresses it.

	MYTH (Approximately 10 words each)	FACT (Approximately 30 words each)
1.	Mental illness is a sign of weakness.	Mental illnesses are medical conditions that result from a combination of biological, genetic, environmental, and psychological factors. They are not a reflection of personal weakness.
2.	People with mental illnesses are violent and dangerous.	The majority of individuals with mental illnesses are not violent. People with mental health challenges are more likely to be victims of violence than perpetrators.
3.	Mental illnesses are not real medical conditions.	Mental illnesses are legitimate medical conditions with biological, neurological, and psychological components. They can be diagnosed, treated, and managed effectively.
4.	Only certain demographics are affected by mental illness.	Mental illness can affect anyone, regardless of age, gender, race, socioeconomic status, or background. It is a widespread and diverse health concern.
5.	People with mental illnesses cannot lead fulfilling lives.	With appropriate treatment and support, many individuals with mental illnesses can lead productive, fulfilling lives. Recovery is possible, and people can achieve their goals and aspirations.

Alternative answers may include:

	Mental illnesses are rare and uncommon.	Mental illnesses are common and affect a significant portion of the population. According to the World Health Organisation

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	(WHO), one in four people will experience a mental health issue at some point in their lives.
Mental health is separate from physical health.	Mental and physical health are interconnected. Mental illnesses can impact physical health, and vice versa. For example, conditions like depression can contribute to physical health challenges.
There's no benefit to early intervention in mental health.	Early recognition and intervention can significantly improve outcomes for individuals with mental health challenges. Seeking help at the first signs of distress is essential for effective treatment.
Once diagnosed, individuals cannot recover from mental illness.	Many people with mental illnesses recover fully or manage their conditions effectively with appropriate treatment, support, and self-care. Recovery is a dynamic and achievable process.
People are either mentally healthy or mentally ill.	Mental health exists on a continuum, and everyone experiences fluctuations in their mental well-being. Mental health is not an all-or-nothing concept, and seeking support is a positive step for everyone.

Question 12

Describe each of the most common types of mental illness a community services client may live with as listed below and provide a short description.

Assessor instructions: Students must provide an example of each of the disorder types listed and provide a short description.

Sample answers are provided below. Students answers may vary, however must include an example and a description of a mental illness related to each of the disorder types listed.

TYPE OF DISORDER	DESCRIPTION (Approximately 10-30 words each)
1. Depressive disorders	Characterised by persistent feelings of sadness, hopelessness, and a lack of interest or pleasure in daily activities. Alternatively students may answer: Persistent Depressive Disorder (Dysthymia): Involves chronic, low-grade depression lasting for at least two years.
2. Anxiety disorders	Involves excessive worry and fear about various aspects of life, often without a specific cause. Alternatively students may answer: Panic Disorder: Characterised by recurrent panic attacks, sudden episodes of intense fear or discomfort.
3. Bipolar disorders	Involves manic episodes (elevated mood, increased energy) alternating with major depressive episodes. Alternatively students may answer: Bipolar II Disorder: Features hypomanic episodes (less severe than full mania) and major depressive episodes.
4. Psychotic disorders	Involves distorted thinking, hallucinations, delusions, and impaired social functioning. Alternatively students may answer: Schizoaffective Disorder: Combines symptoms of schizophrenia and mood disorders.

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5.	Obsessive-compulsive disorders	Involves persistent, intrusive thoughts (obsessions) and repetitive behaviours or mental acts (compulsions). Alternatively students may answer: Body Dysmorphic Disorder (BDD): Characterised by an obsessive focus on perceived flaws in appearance.
6.	Trauma and stress-related disorders	Occurs after exposure to a traumatic event, leading to distressing memories, flashbacks, and hypervigilance. Alternatively students may answer: Moral Injury: Occurs after exposure to an event in direct contradiction to someone's personal moral code (beliefs and values), leading to in inability to accept actions, depression, distressing memories etc.
7.	Eating disorders	Involves restrictive eating, an intense fear of gaining weight, and a distorted body image. Alternatively students may answer: Bulimia Nervosa: Characterised by binge eating followed by compensatory behaviours like vomiting or excessive exercise.
8.	Personality disorders	Features instability in relationships, self-image, and emotions, as well as impulsive behaviour. Alternatively students may answer: Antisocial Personality Disorder (ASPD): Involves a persistent pattern of disregard for the rights of others and a lack of empathy.
9.	Attention-deficit/ hyperactivity disorder (ADHD)	Characterised by difficulty sustaining attention and organising tasks. Alternatively students may answer: ADHD, Predominantly Hyperactive-Impulsive Type: Involves hyperactivity and impulsive behaviour.
10.	Neurodevelopmental disorders	Impacts social interaction, communication, and behaviour, often diagnosed in childhood. Alternatively students may answer: Intellectual Disability: Involves limitations in intellectual functioning and adaptive behaviours.

Question 13

Identify five (5) existing services that support a client's needs and rights. Include the service type, an example and a short description of the purpose for each.

Assessor instructions: Students must identify services already available that support clients needs and rights. For each they must reflect the service type, provide an example of the type of service and provide a brief description of the services purpose.

Sample answers are provided below. Students answers may vary, however must reflect existing services that support clients in community services and mental health industries and address the details outlined in the assessor instructions above.

SERVICE TYPE (Up to 5 words each)	EXAMPLE (Up to 5 words each)	PURPOSE (Approximately 15 words each)
1. Counseling and therapy services	Therapist	To provide emotional and psychological support.

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2.	Mental health clinics	Psychiatric hospital	Specialised services for mental health assessment and treatment.
3.	Health care services	Doctors office	General health services, including preventive care and management of chronic conditions.
4.	Drug and alcohol support services	Support groups	To assist individuals dealing with substance abuse issues.
5.	Employment and training services	Job training programs	To support individuals in gaining and maintaining employment.

Alternative answers may include:

	Disability services	Respite care	To support individuals with disabilities in achieving independence and inclusion.
	Aged care services	Nursing homes	To meet the needs of the elderly population.
	Youth services	Outreach programs	To address the specific needs of young people.
	Domestic violence support	Women's shelters	To provide assistance and protection to those experiencing domestic violence.
	Legal aid services	Legal aid clinic	To provide legal assistance and advice.
	Homelessness services	Homeless shelters	To address housing instability and homelessness.
	Community centres	Council or Recreational Centre	To provide a hub for community engagement and activities.
	Crisis intervention services	Crisis hotline	Immediate support during crises or emergencies.
	Advocacy and rights protection	Human rights commissions	To advocate for the rights of individuals and address social justice issues.
	Cultural and linguistic support	Translation services	To cater to the diverse needs of culturally and linguistically diverse populations.

Question 14

When working with clients with mental health issues, it is particularly important to be able to respond promptly and supportively when they are experiencing distress or crisis.

a) List three (3) situations of distress or crisis you may encounter in your work.

(Approximate word count: 30 - 40 words)

Assessor instructions: The student's response must demonstrate an understanding of three possible situations of crisis or distress. Wording may differ, but appropriate answers must reflect the themes and characteristics of the following example.

- Clients are threatening to harm themselves.
- Clients are threatening to harm others.
- Clients are at risk of harm from others.
- Situations in which there have been significant/sudden changes to the client's situation.

b) Explain the **ALGEE** approach to responding to changes in mental health, mental distress and crisis situations.

(Approximate word count: 65 - 75 words)

- A – Approach, assess and assist with any crisis. This involves assessing any immediate risks of suicide or harm, signs of trauma, or high anxiety.
- L – Listen to the client's full story and concerns non-judgmentally.
- G – Give the client reassurance, support, and information.
- E – Encourage the client to seek appropriate professional help.
- E – Encourage the client to seek other support strategies.

Question 15

Identify 3 (three) circumstances in which referral to a health or other professional is appropriate when working in community services. Include a short description of the indicators and reasoning for the referral.

CIRCUMSTANCES FOR REFERRAL (Approximately 5 words each)		INDICATORS AND JUSTIFICATION (Approximately 30 words each)
1.	Serious mental health issues	Severe depression, suicidal thoughts, hallucinations, delusions, or any other signs of severe mental distress. Trained mental health professionals can conduct thorough assessments, provide accurate diagnoses, and offer specialised interventions for severe mental health issues.
2.	Risk of harm to self or others	Expressions of intent to harm oneself or others, escalating violence, or clear signs of imminent danger. Immediate intervention by mental health or emergency services may be necessary to ensure the safety of the individual and others.
3.	Medical issues impacting mental health	Physical health issues that have a significant impact on mental health or mental health symptoms that may be indicative of an underlying medical condition. A healthcare professional can assess the interplay between physical and mental health and provide appropriate medical interventions.

Alternative answers may include:

	Suspected substance abuse or addiction	Signs of substance abuse or addiction affecting mental well-being. Referral to addiction specialists or substance abuse counselors can provide targeted support and intervention for individuals struggling with substance use.
	Specialised therapeutic needs	Individuals requiring specific therapeutic modalities (e.g., trauma-focused therapy, dialectical behaviour therapy). Specialised therapists or clinicians with expertise in particular therapeutic approaches can provide tailored support.
	Legal or criminal justice involvement	Involvement with the legal system due to mental health-related issues.

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		Referral to legal professionals or court-ordered mental health services may be necessary to address legal concerns.
	Children and adolescents with mental health issues	Mental health issues in children or adolescents that require specialised child and adolescent mental health services. Child psychologists, pediatricians, or child and adolescent mental health professionals can provide age-appropriate interventions.
	Lack of progress or deterioration	Lack of improvement or worsening of symptoms despite community-based interventions. Referral to professionals with specialised expertise may be necessary to reassess and adjust the treatment plan.
	Need for medication management	Individuals requiring prescription medications for mental health conditions. Referral to psychiatrists or medical professionals for medication assessment and management.

Assessment checklist:

Students must have completed all questions within this assessment before submitting. This includes:

15 short answer questions to be completed in the spaces provided	☐

✓ **Congratulations you have reached the end of Assessment 1!**