



QRC: 3556

Price

One Day : \$460 inc. GST

Two Days: \$610 inc. GST

Date

29 - 30 Apr 2019

Venue

Venue TBA, Brisbane

-- , Brisbane, QL, --

CPD Hours

11 Hours | 0 Mins

Brisbane Mental Health Conference 2019

An Essential 2 Day Update for All Nurses and Midwives

Need for Program

People who enter a general healthcare setting with a physical health complication and also have a concurrent mental illness must receive comprehensive care. The ability of nurses and other health professionals to provide holistic health care to all people with a co-existing mental illness is highly dependent on a sound knowledge base. There is a timely need for an evidence-based update on a range of common mental health disorders and conditions so that informed health professionals are better positioned to support a person with a mental illness.

Purpose of Program

To provide nurses and other health professionals who work across a range of general healthcare settings with a comprehensive update on common mental illnesses so as to improve a person's health outcomes.

Learning Outcomes

At the conclusion of this program it is expected that the participants will be able to:

- People in your care who have a concurrent mental illness will experience a trauma-informed approach to care
- Your improved understanding of mental illness will result in greater patient satisfaction in general healthcare environments
- People hospitalised with a physical health complication who have a concurrent mental illness will feel safe and secure as a result of practical techniques being employed
- You will establish clear personal boundaries and maintain them to promote a strong, safe therapeutic alliance

Program Schedule

Day One

Coming soon

Day Two

Coming soon

Presenters

To Be Determined

Registration form

Please fill out this form and mail it to: **Ausmed Education Pty. Ltd.**
121 Arden Street,
North Melbourne VIC 3051



Which program would you like to attend?

Program Name

.....

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City

.....

Dates

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Quick Registration Code

Do you know the program's QRC?
If you do, just write it below and we will know exactly which program you would like to attend.

QRC _ _ _ _

① Your details

First Name

.....

Last Name

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Workplace

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Address

.....

Phone ()

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Postcode

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Mobile

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Email

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② Billing details

Same as the details above? ☐

First Name

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Last Name

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Address

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Postcode

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Phone ()

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Email

..... @

Mobile

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③ Payment

Select payment method:

☐ Money Order / Cheque

OR



(1% Surcharge will be applied)

Postal Address:
Ausmed Education Pty. Ltd.
121 Arden Street,
North Melbourne VIC 3051

Email: ausmed@ausmed.com.au

Ph: (03) 9326 8101

Fax: (03) 9326 8179

Name on Card

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Total \$

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