

Realistic Job Preview ***Mental Health Worker (MHW)***

Bob MacLeod: Hi, I'm Bob MacLeod, CEO of New Hampshire Hospital, the state's only publicly-run in-patient psychiatric hospital. Thank you for taking the time to consider applying for a position at New Hampshire Hospital. Over the next few minutes you will hear from members of our staff about what it means to be a Mental Health Worker in an in-patient psychiatric hospital setting. The teams of professionals are committed to providing compassionate quality care to individuals who are in crisis due to a psychiatric illness. Our Mental Health Workers play a vital role in the care of our patients and work with other professionals to help stabilize the patients' condition. Perhaps even more importantly though, as a Mental Health Worker, you will assist in establishing the foundation for a patient's successful and sustainable life within the community when they leave New Hampshire Hospital. I am incredibly proud of the hundreds of talented clinicians and support personnel who have chosen to work in a patient-centered, fast-paced, caring environment. If you choose to join our team, you will become part of one of the best psychiatric hospitals in the country and become part of a team of dedicated staff devoted to making a difference to those we serve. As you review the realistic job preview, please give careful thought about the challenges and rewards of being a Mental Health Worker. And whatever decision you make, I want to thank you for considering a position at New Hampshire Hospital.

James: I love that line. "Come walk with me." How can you refuse it? We were walking down and the patient turned to me and said, "James how is it that you came to find this job?" And I looked at them without even thinking and I said, "I didn't, it found me."

Rosemary, Nurse Coordinator: Patients that come here are probably some of the sickest patients in the, in the state and they have the highest acuity, as far as mental illness goes. Um, many of them have burned their bridges elsewhere, um, and this is the final stop for them. And they come here against their will, most folks, uh; they don't want to be here so we try to make it as comfortable for them as possible.

Kelly, Nurse Coordinator: Mental Health Workers are an integral part of our team here that really we have, you know maybe five or six or eight Mental Health Workers on the unit. There may be three or four nurses, um, and then a treatment team but the Mental Health Workers are with the patients all the time.

Dr. Alex deNesnera: I really depend on them to tell me how they see the patient is doing. Because a lot of the times, the patient is not going to talk to the physician, because they simply don't want to do that or they just don't feel that they have to. But the nature of a Mental Health Worker's work allows them to be on the unit for long periods of time to develop that one-on-one relationship.

Mike, MHW: We're the front lines. We're who they turn to. We're the people that they look to when they need something. I mean, they, and if they need something they come find us because we are the people that actually get it for them.

Kelly, Nurse Coordinator: We have patients that need to be cared for twenty-four hours a day, seven days a week, whether it's Christmas or it's snowing or there's a blizzard, we all come to work, we're all considered essential personnel. We work three shifts, we have three shifts: seven to three, uh, three to eleven, and eleven to seven.

Dr. Alex deNesnera: They're not out there alone. Um, they are part of a unit; they'll be working on a unit. Um, they're part of a team. They have people to turn to.

Jo Anne, MHW: We let them talk instead of us talking. We try to encourage them to talk. Or if they're pacing and they just want to vent, you know they, we'll walk with them and...or sit down if they choose, so choose to sit down. Mainly we're there to listen because a lot of people in their lives haven't listened to them and they need that.

James, MHW: You have to keep in the forefront when they're your patients. They're not your friends, and you're not their friend. You have to be there for them and their issues. And a lot of people, with the issues that they have, they're not in complete control. You have to be. That's your job. That's your responsibility for them.

Jenna, MHW: They're in their own world that you will never be able to experience, so you don't really know what they're going through. You're just trying to get them through it and get them well.

Kelly, Nurse Coordinator: The Mental Health Worker Orientation Program consists of a five-week clinical and classroom component of classes that range from crisis management and how to deal with an agitated patient to classes on vital signs and how to give a bed bath.

Allison, MHW: When I was working up on J, which is the long-term, um, elderly unit – I gave a few baths in my day, and you know what, they're not that bad.

Gisela, Professional Development: And I'm not just talking about helping a patient shave or brush their teeth. I'm talking about helping the patient bathe or shower, um, especially if they've had it, um, you know if they've been incontinent.

Mike, MHW: I think a lot of new Mental Health Workers come on the floor and they get really weirded out because the patients act all really strange and they're like, you know, they get really spooked when they first get out there. But once you're on the floor for a while and you start to learn these people you really find out that even the people who are the sickest people are really just people. And once you get to know them, some of them are really great people.

Jenna, MHW: Oh, yes. We've had many stories, um, people come in thinking they're gods, people coming in, "I'm gonna call the CIA and get them here and involved".

Sean, MHW: One thing that you'll hear, I've heard from a couple of patients is that they own the hospital, you know and you tell them something about the hospital and they're like, "Yeah, I know that because I started that, you know, I started that policy".

Jenna, MHW: You don't want to give in to their delusions but you don't want to...you don't want to tell them, "Well that's not real". You know, cause for them it might truly be real.

Ray, MHW: There was a patient, um, who had come up to the desk. She was very upset and I said, "Well what's the matter?" And she says, "Well, um, I'm a little embarrassed". I was like, "About what?" And she says, "Well I was incontinent". And I said, "Well which continent were you in?" And she laughed and she says, "Thank you for making me laugh." She goes, "I was so embarrassed about what I did." She said, "That helped a great deal." She goes, "Thank you so much."

Allison, MHW: These are people that we're working with. Um, very little separates that patient from being your mom, your brother, your sister. And we all have some family members who, you know, maybe we recognize a little bit of them in some our patients and it's important to keep that in mind. They're people, too.

James, MHW: I've been called a coward. Uh, you know, they're assailed in any number of ways.

Anthony, MHW: People are, you know, screaming and yelling in your face. You know, calling you names, so there's some things you got to adapt to.

Jo Anne, MHW: I guess what surprised me was, um, how things can, how a situation can rapidly turn bad, as far as the patient goes. When you're out on the floor with them, you know, it can be good and then...

Jenna, MHW: They strip all their clothes off. So now this patient is doing naked handstands down the hallway and, you know, here we are, we're just like, "Please don't do anything. Please don't do anything that requires us to have to do anything." And sure enough, barrels were being thrown, we have laundry hampers – those were being tossed around.

Mike, MHW: If it's gonna be a bad one, generally they'll take everybody into the back room and say, "Okay, this is what we're gonna do. I want you to do this, I want you to do this, I want you to do this." So by the time we get there, everybody knows exactly what they're supposed to do.

Gisela, Professional Development: They will see things that they probably have never seen in their lifetime, you know, and this is the work. Um, remembering that you will be working with some very, very sick, um, individuals. Um, because of their illness, you know, they're not able to manage their behavior.

Snjezana, MHW: Because the patients are punching the walls, breaking the chairs, throwing the books...

Jenna, MHW: They would disimpact themselves, cover their body in feces, just smear it all over themselves, rub it in their hair.

Allison, MHW: As I entered the bathroom and pulled aside the shower curtain, I noticed that the patient was on the ground and she had hung herself from one of the shower bars. And she was sitting down in a slouching position, and her face was the color of a blueberry. And it was probably one of the scariest things that I've seen ever in my life.

Dr. Alex deNesnera: When patients are admitted that are at high risk for killing themselves, we typically, uh, put them on what's called "Level One Precautions". That means that they need to be with a staff member at all times. Um, and, uh, that person that is with that patient is a Mental Health Worker.

Jenna, MHW: You have to, you have to realize that these people come in here and they're not themselves. This isn't who they are. They're sick; they're ill; they're somebody's brother, sister, parent, child...so you have to take that into consideration that they're not, "Oh, they're just acting this way" or "Oh, this is all behavioral". You know sometimes it is behavioral but sometimes it's truly them being ill.

Ray, MHW: If I can make a difference in someone's day, um, whether it be staff or patients, um, just getting a smile from somebody, a thank you, um a thank you is worth more than a hundred dollars. You know, somebody just coming up and saying, "Thank you for helping me. Thank you for doing what you did".

Snjezana, MHW: I didn't it was going to be that rewarding. I didn't it was gonna be, I'm gonna like it that much. You know, I knew I'm gonna work with mentally ill and knew I'm gonna help them but you never know it's going to be so rewarding when you see patients leaving, they get better then they're happy. You just see a smile on their faces.

Anthony, MHW: You actually see somebody improve, see medication start to work, you see that they get a smile back on their face or they, you know, they can go home to their family now who they've been away from for six months or something.

Allison, MHW: I can't think of another place that is more unique, more people-centered, um, and more exciting. It's exciting to come to work. Every day is a new day and you never know what you're going to get.

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