Submission on Australian Safety and Quality Goals for Health Care

Introduction

The Australian College of Mental Health Nurses (ACMHN) welcomes the opportunity to respond to the Australian Safety and Quality Goals for Health Care: Consultation Paper. The ACMHN is the peak professional organisation representing mental health nurses in Australia. Mental health nurses work in mental health across a variety of settings – acute psychiatric units in hospitals, specialist community mental health teams, general practices, emergency departments, as well as in policy, administration, management and research roles. Mental Health Nurses as individuals and a profession are a key component of Australia’s mental health care system.

A primary objective of the ACMHN is to enhance the mental health of the community through the pursuit of efforts to improve service and care delivery to those affected by mental illness and disorder. The College also sets standards of practice for the profession and promotes best practice of mental health nursing. In this way, the ACMHN plays a role in promoting safety and quality in the delivery of health care.

General Comments

The ACMHN supports the three nominated Australian Safety and Quality Goals and the priorities within those Goals. There are a number of ways in which these Goals will directly and indirectly improve the safety and quality of health care for people with mental health issues.

People with mental illness have more physical health problems than the general population and evidence shows the instance of coronary heart disease, metabolic disorders, respiratory disease, cancer, infection, obesity, endocrine disorders and dental disease is significantly greater in this group. In addition, these physical health problems in people with mental illness are less likely to be screened for, identified and treated. Given this situation, the ACMHN is pleased that the consultation paper acknowledges people with both physical and mental health conditions as a group which will need a specific focus within the context of the Goals.

Specific comments on Goal 1, Priority 1

Nurses play a central role in improving the quality use of medicines. Nurses are responsible for administering and monitoring medication, providing information and education to patients, family and carers regarding medication, supporting adherence to medication regimes and providing information about medication to consumers during the discharge process. Nurses also work with consumer to enable self-monitoring and self-management of medication. The ACMHN urges that nursing organisations be consulted in the next phase of the development of the Goals to identify ways in which the nursing profession can contribute to this priority area.
Medication is a significant component of treatment for many people with mental illness, however consumers also have concerns about their medications. For example, some antipsychotic medicines lead to significant weight gain, increasing the risk of diabetes. In addition, as mentioned about, people with persistent mental illness are likely to have comorbid physical health conditions. For these reasons, improving the quality use of medicines should include a particular focus on the needs of people with mental illness.

**Specific comments on Goal 2**

The consultation paper provides ample evidence to support the selection of the two priority areas under this Goal, type 2 diabetes and acute coronary syndrome or stroke. It is important that the relationship between these physical illnesses and mental health be taken into consideration when developing strategies to ensure people receive appropriate, evidence-based care.

The literature makes strong links between chronic disease and the development of mental health conditions, particularly depression. For example:

- The odds of developing depression and the rate of depression are doubled for people who have diabetes.
- Depression increases the risk of mortality in people with diabetes by 30 percent.
- The economic burden of diabetes alone is significant. When depression is present with diabetes, there is an additional increase in health care costs by 50-75 percent.
- People who have both diabetes and depression have more severe symptoms of both diseases, higher rates of work disability and use more medical services than those who have diabetes alone.
- In coronary heart disease, for patients with a history of myocardial infarction (heart attack), the prevalence of depression is estimated from 40 to 65 percent.
- Among coronary heart patients without a history of heart attack, 18-20% may experience depression.
- Major depression puts heart attack victims at greater risk and appears to add to the patients’ disability from heart disease. Depression can contribute to a worsening of symptoms as well as poor adherence to cardiac treatment regimens.
- People who survive heart attacks but suffer from major depression have a 3-4 times greater risk of dying within six months than those who do not suffer from depression.

(Reference: World Federation for Mental Health, Mental Health and Chronic Physical Illnesses: The need for continued and integrated care, 2010.)

It is important to recognise that mental health is an issue relevant to the health workforce as a whole, not just mental health professionals. Nurses are critical to the provision of timely, effective and appropriate treatment services to people with mental health problems, mental disorder or mental illness (World Health Organisation, Investing in Mental Health, 2003). Various studies have identified that nurses have a wide-ranging role and identifying and managing mental health issues is an important part of their work. However it is also identified that most nurses have not undertaken any post-registration training or education...
in mental health and therefore have varying degrees of skills to recognise and manage mental illness.


In identifying actions that should be taken to achieve the Safety and Quality Goal 2, consideration should be given to raising awareness and knowledge of mental health issues associated with physical illnesses, particularly chronic illness. An essential component of this will be ensuring the health workforce, particularly the nursing workforce, has the appropriate skills and knowledge around mental health issues.

**Specific Comments on Goal 3**

The ACMHN supports this Goal and it is consistent with the Australian Mental Health Nurse Standards of Practice 2010. However, as the consultation paper identified, work is still needed to improve the delivery of consumer centred care. The consultation paper listed a number of key facilitators that demonstrate effective partnerships must involve resources directed towards staff capacity, redesigning service delivery as well as directly towards consumers. The ACMHN strongly urges that actions taken to achieve this goal direct resources towards building staff and health professional capacity and service redesign, as well as to increasing consumer capacity.

**Conclusion**

Enhancing mental health care for all Australians through high quality mental health nursing is at the core of the ACMHN’s philosophy. The College will actively promote the Safety and Quality goals to mental health nurses and support the achievement of these goals. We are keen to contribute to the next phase of the Commission’s work to identify existing activities in place and future action.