

Finance and Public Administration Committee
PO Box 6100
Parliament House
Canberra ACT 2600

Dear Sir / Madam,

The Australian College of Mental Health Nurses is the peak professional organisation representing mental health nurses. Members of the College are nurses who 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.

The ACMHN would like to raise a number of concerns with the Committee concerning the recent COAG announcements and the subsequent Budget papers.

1. The Mental Health component of the COAG agreement is inadequate. Mental health requires a substantial investment and an overhaul in how this funding is delivered. The announcements include only \$31.4 million in new funding for mental health and \$65.4 million in restored or redistributed funding. The introduction of coordinated care packages under the Access to Allied Psychological Services program (ATAPS) is a welcome move, but we do not support this occurring at the expense of removing mental health Social Workers and Occupational Therapists from the Better Access initiative. We would also like to draw attention to the fact that mental health nurses working under ATAPS are well placed to provide coordinated care packages as well as mental health Social Workers and Occupational Therapists.

The COAG announcement foreshadows a Commonwealth takeover of specialist community mental health services. We applaud the commitment to improve the connections between community mental health and primary health care. However, we are concerned that there is no detail and no definition of specialist community mental health services.

Mental health nurses are the largest component of the workforce delivering these specialist community mental health services. COAG must consult with the mental health nursing profession, including the ACMHN, to ensure that the Commonwealth takeover benefits from the perspective of mental health nurses as a profession.

We also welcome the other mental health initiatives, particularly the \$58.5 million for coordinated care packages in primary care.

2. The Mental Health Nurse Incentive Program received what has been called ‘additional funding’ of \$13 million over two years. The MHNIP program has been a successful initiative. However, due to the fact that no funding has been allocated to the promotion of the program, uptake was initially slow and has been less than anticipated. As a result, funding was stripped from the program in the 2008-2009 financial year the announced \$13 million is therefore merely returning funding to the program. It should be noted that this still only returns the program funding to around 35% of the original commitment.

The ACMHN believes that the MHNIP program requires additional investment to promote the program to mental health nurses, general practitioners and psychiatrists and support the uptake of the program by these key groups. Such support is essential to ensure there is sufficient supply of mental health nurses and awareness among GPs and psychiatrists that this help is available for their clients without funding to support these stakeholders, the ACMHN is deeply concerned that there will be insufficient mental health nurses recruited to work under the MHNIP and the opportunity to provide primary mental health care through this innovative model will be lost.

The ACMHN believes that the MHNIP program needs to be independently evaluated as a matter of urgency. Despite repeated reassurance that an evaluation would be completed by 30 June 2010, in fact, the evaluation process has not even begun. While the MHNIP model has been successful in many regards, there are some structural components of the model and associated issues that are consistently creating difficulties for mental health nurses and eligible organisations. Without addressing and resolving these issues, recruitment and retention of mental health nurses to this program will be increasingly difficult.

3. Investment in nursing workforce. The ACMHN notes that there is \$523 million to support nurses in the area of general practice and aged care, some of which is redirected funding from the Bringing Nurses Back into the Workforce program. However, for a profession with over 250,000 members Australia wide, playing key roles in all aspects of the health care system, this is woefully inadequate.

The ACMHN is disappointed that less than half the total investment in the health workforce is being spent on the nursing profession. Furthermore, despite the recent changes to allow nurse practitioners access to the MBS and PBS, the government has not provided additional funding to support the development of more nurse practitioners.



the Australian College
of Mental Health Nurses Inc.

In summary, while the ACMHN believes that the COAG health reforms are a step in the right direction, we believe that the investment in mental health, mental health nursing and nursing more broadly is inadequate.

Yours sincerely

Kim Ryan
CEO