



## Mental health nursing care

### It is the policy of the Australian Nursing and Midwifery Federation that:

1. All health care has an inherent mental health component. The provision of quality health care involves an holistic approach to the needs of the individual which incorporates their mental, psychosocial, environmental, cultural, spiritual, physical health and well-being.
2. Mental health care includes: promotion of health and well-being; prevention of ill health and management of risk factors; early intervention; illness interventions with a focus on recovery as defined by the individual, and health restoration; rehabilitation and chronic disease management, throughout the various life stages of individuals and is specific to each stage.
3. Mental health nursing practice is an essential component in the delivery of health services and requires skills and expertise in order to provide comprehensive and holistic mental health care to individuals affected by mental illness.
4. Mental health nursing care includes, with the clients' consent, collaboration with family, carers and other support persons nominated by the individual receiving care.
5. To ensure a viable current and future mental health nursing workforce, specific mental health nursing courses which include theoretical and clinical components, must continue to be offered at post graduate level. Undergraduate nursing courses must also offer core subject material in mental health.
6. Mental health nursing care is provided in the least restrictive manner by the observance of all the rights of individuals requiring care. The provision of care that maximises human liberty and freedom is essential, whilst maintaining the nurses' duty of care which does not compromise the safety of the individual.
7. The philosophy and principles of recovery and de-institutionalisation in the care of people experiencing mental illness or related conditions underpin the provision of adequate and appropriate community mental health care supported by in-patient specialist mental health services.
8. All individuals requiring mental health care are entitled to receive care at the facility that best addresses their needs. Health service catchment areas and funding systems should not impede access to care.
9. Mental health nursing is practised in a variety of settings which include, but are not restricted to public and private specialist mental health services, outpatient facilities, acute health services, alcohol and other drug services, rehabilitation and sub-acute care, prisons and the justice system, primary and secondary schools, maternal and child health programs, specialist child and youth services, primary health including general practice clinics, district nursing and community health centres, supported accommodation facilities, hospitals' inclusive of emergency departments with and without Psychiatric Emergency Care Centres and in the individual's own environment.
10. Mental health nursing practice is conducted in a variety of contexts which includes, but is not restricted to, direct twenty four hour care, community support and treatment, early diagnosis



and intervention, crisis intervention, consultation and liaison services to non-mental health services, and independent private practice. Mental health nursing practice may include providing care to individuals with co-morbidities (such as, physical illness, alcohol and other drug issues, or disability in addition to mental illness or disorder). When the primary care need is for a mental illness or condition, individuals with co-morbidities, whatever the setting, must always have access to appropriate mental health care as well as assessment and care of the other conditions.

11. Mental health care must be adequately resourced with a funding formula that correlates with the prevalence of mental disorder or mental illness within that area or district and the population profile.
12. Mental health nurses must coordinate or be directly involved in the assessment, planning, delivery and evaluation of, all aspects of mental health care to individuals. Mental health nurses should be included in service planning and service delivery at local, state/territory and federal government levels.
13. Mental health nurses should have access to continuing education appropriate to their area of practice and supportive of their individual professional development needs.
14. Erosion of mental health nursing positions and / or services in any setting by the employment of other staff categories, however titled, is strongly opposed.
15. Mental health nurses are entitled to provide and receive formal paid clinical supervision in the provision of mental health nursing services.
16. Mental health nurses must have access to career paths which will include clinical, administrative, managerial, education and research streams as well as undertaking post graduate qualifications leading to nurse practitioner endorsement and roles in both the public and private sector.
17. Professional lines of accountability to nursing must always be maintained for mental health nurses regardless of the setting in which they function. This does not preclude functional reporting within non-nursing organisational structures.
18. Mental health nurses, regardless of the setting in which they function, should be covered by nursing awards and/or agreements and they must have access to membership of nursing professional and industrial associations.
19. Mental health nurses have the right to practice in accordance with the relevant occupational health and safety legislation.
20. With regard to individuals to whom the forensic provisions of mental health legislation apply:
  - individuals who are not guilty of an offence due to mental illness must be accommodated in an appropriate mental health facility with the consideration of safety issues.
  - once it is established that an individual is unfit to plead due to mental illness in relation to a criminal charge, that individual should be treated at a suitable mental health facility, until such time as they are fit to plead.



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- a continuum of rehabilitation services should be available, whatever the setting of care with regard to mentally ill individuals to whom the forensic provisions of mental health legislation apply.
- to ensure appropriate care for individuals to whom the forensic provisions of mental health legislation apply, post registration educational opportunities in forensic mental health care should be available.

21. Credentiailling of mental health nurses is opposed as:

- separate and often expensive processes of private credentialling provided by professional organisations should not be required or used as the validation mechanism for mental health nursing practice nor for postgraduate qualifications in mental health nursing
- there is no place in Australia for private credentialling by professional organisations for mental health nursing practice that leads to restrictive employment practices in the area of mental health.
- the Australian public should not be deprived of mental health nursing services whereby organisational jurisdictions other than the NMBA, propose employment arrangements which are open only to individual mental health nurses who are privately credentialled by professional organisations.
- the preferred approach to recognise those registered nurses with postgraduate mental health nursing qualifications is endorsement by the NMBA. This entails accreditation of postgraduate programs by the Australian Nursing and Midwifery Accreditation Council (ANMAC).

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