

## Mental health nurses could help fill the gap in mental health care for people with moderate and complex needs

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In an ABC Radio National interview with Fran Kelly on 8 October Professor Ian Hickie commented on the \$100 million funding increase for the Better Access programme announced in the Federal Budget on Tuesday night. The increased funding is to address the mental health impacts of the COVID 19 pandemic. Professor Hickie raised well known concerns regarding the current design of Better Access, a programme introduced in 2001. The Professor argued that Better Access urgently needs redesign for the 21st century. In particular, he suggested, there is a need to address the 'big gap' in services for people with moderate and high intensity needs. At present Better Access favours people with low intensity needs living in capital cities where most service providers work and people can afford to pay. The availability of services under Better Access has always been limited in regional and rural locations and over time has further declined; out of pocket expenses are high for sessions under Better Access. As Professor Hickie points out, the 'big gap' is in the moderate and low intensity areas and this needs to be addressed by redesigning services away from single provider models to team-based combinations of care. Hickie points to the irony that in its current form Better Access probably results in less access and the injection of funding announced in the Budget may further reduce access, increase waiting times and increase the amount of out of pocket expenses given the doubling of sessions from 10 to 20.

The Australian College of Mental Health Nurses shares the concerns expressed by Professor Hickie and agrees there is a need to move beyond an individual practitioner model of servicing to a team-based approach. Mental health nurses could play a very important role in providing care to people with moderate and complex needs in team-based combinations of care. There are currently about 1000 credentialed mental health nurses in Australia and many more with the qualifications and experience necessary to contribute to the type of team-based approaches to care envisaged by Professor Hickie. Mental health nurses could make up some of the short fall in services and are well placed to move, alongside psychiatrists and GPs, into new service models based on combinations of care, and team-based delivery, in any re-design of Better Access. Some mental health nurses are already co-located with GPs and psychiatrists. While these arrangements currently sit outside of Better Access, they provide examples of how team-based care could work in a future redesign of the programme. Credentialed Mental Health Nurses can also function as independent clinicians; many have qualifications and advanced capabilities in psychological interventions. They are uniquely placed to bridge the service gaps referred to by Professor Hickie, while addressing both mental and physical health needs, usually with no or little gap fee charges.

Qualified mental health nurses can offer a significant impact and return on investment for spending on mental health; many feel their knowledge and skills are under-utilised. With the country facing a significant increase in demand for mental health services given the impact of COVID 19 and the recession, failure to fully utilise the knowledge and skills of mental health nurses would be to waste a very precious resource.

**For further comment, please contact ACMHN President, Dr Mike Hazelton on 0448 121 012 or at [president@acmhn.org](mailto:president@acmhn.org).**

### About

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*The Australian College of Mental Health Nurses (ACMHN) is the pre-eminent and authoritative voice of the mental health nursing profession in Australia. It provides leadership to, and advocacy for mental health issues across the mental health sector and nursing, as well as setting national standards of practice in mental health nursing.*