

ACMHN statement on supporting mental health nursing during the coronavirus pandemic

Thursday 9 April 2020

The Australian College of Mental Health Nurses (ACMHN) is the pre-eminent and authoritative voice of the mental health nursing profession in Australia.

This statement:

- asserts the principle that mental health matters during the coronavirus crisis
- recognises and applauds the contribution that mental health nurses and others working in the mental health field during this time, are invaluable, and
- acknowledges the impact of the current crisis on mental health nursing students and educators, and on the conduct of mental health nursing and related research.

Looking abroad

As Australia continues to navigate the impact of COVID-19, we look to countries which are ahead of us in both their timeline but also in their ability to report on tried and tested methods for care, failures, research and findings. It is very important to be well read beyond Australia when understand the social and economic impacts that we are facing. In this document we have provided some useful links and reading on topics that we deem are directly impacting Australian mental health nurses.

State of play: provision of mental health services

In late March 2020, the Government announced an allocation of more than \$1bn to a range of support services, including \$669m to expand Medicare-subsidised telehealth services and \$150m under the national domestic violence initiative.

In a gross oversight by the Government, mental health nurses were overlooked to provide services under the abovementioned stimulus package. ACMHN are currently advocating to have mental health nurses included as providers of Telehealth services. The college has been in communication with the Minister's office, who state support and advocacy for CMHNs, and the department at a number of levels who also voice support.

The importance of Telehealth

Telehealth includes numerous routes of delivery including "patient consultations via video conferencing, transmitting still images, e-health with patient portals, remote monitoring of vital signs, continual medical education, consumer-focused wireless applications and nursing call centers" (Dowling, 2015, p. 27), e-mail, text messaging, remote data capture, and surgical training (Bramstedt et al., 2014). Telemedicine routes can also be described with specific associations within a particular medical specialty such as teleradiology or remote intensive care monitoring of vital signs (Dowling, 2015). The terms telehealth and telemedicine are synonymous and used interchangeably (Wicklund, 2018). However, for the purpose of this article, the term telehealth will be used.

- [When eHealth goes viral: The strengths and weaknesses of health tech during COVID-19](#)
- [Telehealth: A Balanced Look at Incorporating This Technology Into Practice](#)
- [Telehealth and patient satisfaction: a systematic review and narrative analysis](#)

- [The Role of Telehealth in Reducing the Mental Health Burden from COVID-19](#)

Mental health nursing: responses and guidance for practitioners

Mental health nurses are skilled and knowledgeable in supporting people with ongoing, and often severe, mental health difficulties. In fulfilling their roles they are part of the health and social care coronavirus frontline.

As nurses know, people using specialist hospital and community mental health services are amongst the most vulnerable and stigmatised in society. Many now are frightened, struggling to cope and are at heightened risk of the social and economic (as well as the clinical) consequences of the virus. The additional mental health impact of COVID-19, now and stretching into the future long after the virus itself has been contained, will continue to be felt by many thousands of bereaved and traumatised individuals and families. Included amongst these will be large numbers of people working in health and social care. Nurses and those they work alongside in mental health services (including psychiatrists, psychologists, occupational therapists and other allied health professionals, social workers, lived experience and support workers) will be there, offering their help.

Advice and guidance for frontline staff

During this time and in any crisis, advice and guidance given to frontline staff should be authorised, approved and issued by your organisation in accordance with [Public Health and Government guidelines](#) on Covid-19.

There is a lot of information circulating which is sometimes inaccurate or misleading causing unnecessary anxiety in staff teams. Having clear and consistent guidance from your organisation helps to avoid confusion and may ease staff anxieties especially if the advice given is based on information from a credible source such as a Government department, professional body or academic institution, published research, and/or guidance and advice from a recognised specialist (e.g. infection control specialist).

Vulnerable members of society

From what we understand, COVID-19 is enhanced in those with compromised immunity or pre-existing conditions. There are also many members of our society that will experience life events during this time which may heighten their need for mental health services. This includes children, older Australians, pregnant women and those experiencing family violence. There are anecdotal reports that Googling family and domestic violence services has increased by 75 per cent in Australian during the lockdown period, which is of significant concern.

Experienced mental health nurses are well placed to assist the more vulnerable members of our community during this time.

- [Maternity care during COVID-19](#)
- [Dementia care during COVID-19](#)
- [Impact of COVID-19 on mental health care for Veterans: Improve, adapt and overcome](#)
- [Abused children and partners, people with mental illness are all especially vulnerable with stay-at-home orders from coronavirus](#)

Further links and reading

- [Coronavirus Disease \(COVID-19\): Psychological, Behavioral, Interpersonal Effects, and Clinical Implications for Health Systems](#)
- [Introducing COVID-19 and acute disturbance](#)
- [Psychological interventions for people affected by the COVID-19 epidemic](#)
- [Mental health care for medical staff in China during the COVID-19 outbreak](#)
- [COVID-19, Mental Health and Aging: A Need for New Knowledge to Bridge Science and Service](#)
- [Mental health survey of 230 medical staff in a tertiary infectious disease hospital for COVID-19](#)