

**COMHWA Member Briefing Paper – May
2023**



**Report from the Office of the Auditor General:
'Management of Long Stay Patients in Public
Hospitals' (November 2022)**

Purpose

To ensure that people are not kept in hospital past the point where they are medically ready to be discharged and that they are discharged with appropriate support in the community.

Background

'Long stay patients' are defined as 'a patient¹ who has been assessed as medically ready for discharge but remains in hospital'². The report is focused on the following impacts longer stays have on hospitals and consumers:

- The cost to hospitals and governments for providing unnecessary services.
- The increased stress placed on staff members at hospitals managing long stay patients.
- The effect this allocation of resources has upon the availability of hospital services for other members of the community.
- The negative effect of longer stays on consumers who are distanced from their communities and social services, while not receiving the most suitable form of care³.

The report focuses on how the Department of Health, the Mental Health Commission and the Department of Communities have monitored long stay numbers and how they have tried to reduce the instances of long stays. The two key cohorts identified in the audit as the primary recipients of long stays in hospitals are persons receiving aged care and mental health consumers.

The report notes that 88% of all mental health consumers ready for discharge were unable to be discharged due to a lack accommodation with mental health treatment and support⁴. The key factor preventing discharge for these patients to more suitable care providers was the lack of access to required social services, such as available community accommodation with support staff. Accordingly, the challenges facing long stay patients are another example of the already well-documented problems faced by consumers when trying to access adult mental health services⁵.

¹ 'Patients' is the language used in the report; however, CoMHWA acknowledges that this is not necessarily the preferred term and that dominant language often does not include room for our experiences or understandings.

² Western Australian Auditor General's Report. 2022. 'Management of Long Stay Patients in Public Hospitals' p. 6 https://audit.wa.gov.au/wp-content/uploads/2022/11/Report-9_Management-of-Long-Stay-Patients-in-Public-Hospitals.pdf

³ Western Australian Auditor General's Report. 2022. 'Management of Long Stay Patients in Public Hospitals' pp. 8–9

⁴ Western Australian Auditor General's Report. 2022. 'Management of Long Stay Patients in Public Hospitals' p. 13

⁵ Western Australian Auditor General's Report. 2019. "Access to State-Managed Adult Mental Health Services" <https://audit.wa.gov.au/wp-content/uploads/2019/08/Access-to-State-Managed-Adult-Mental-Health-Services.pdf>

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The Issue

The Auditor General's report titled 'Management of Long Stay Patients in Public Hospitals' (November 2022) is an audit focused on the challenges facing public hospitals and health care providers in relation to 'long stay patients' and the responses addressing this concern to date. The report discusses how consumers identified as long stay patients can suffer from adverse outcomes stemming from risks in hospital environments and disconnection from social services and community engagement⁶. However, the cause of such long stays in hospital for mental health consumers is often because of an insufficient range and capacity of social support services.

Response to date

- In March 2021 the Department established the 'long stay patient steering committee and working group' to help address the concern over long stay patients.
- While the Western Australian State Government has allocated funding to help reduce long stay patient numbers, 80% of this funding has been targeted at providing transitional aged care beds.
- The Federal Government has focused on more effectively integrating the services of the NDIS with hospitals to assist in reducing the number of long stay patients⁷. However, it is unclear how these initiatives will be enacted and monitored.
- The recommendations of the Auditor General's report focus upon the need to clearly define long stay patients and develop rigorous systems of data collection. While the report emphasises the need for better methods to produce numerical information about long stay frequency and location, the solution to achieving better management of consumers is implicitly assumed to be achievable through data-driven efficiency measures.
- Following in the trend of the 2019 'Access to State-Managed Adult Mental Health Services' report, the possibility of increasing funding or resources to address systemic problems appears to be foreclosed⁸.

CoMHWA's Position and Response

- CoMHWA supports reducing the incidence of long stays for consumers, because such extension results in exposure to incidental harm in hospital environments or isolation from community supports and services.
- CoMHWA believes that the issue of consumers identified as long stay patients is fundamentally linked to the range and quantity, or lack thereof, of community support services. In particular, there is an undersupply of accommodation for consumers that incorporates mental health treatment and other support services. We will continue to advocate on national and state levels for improved access to holistic, person-centred and affordable supports for mental health consumers.

⁶ Western Australian Auditor General's Report. 2022. 'Management of Long Stay Patients in Public Hospitals'

⁷ Western Australian Auditor General's Report. 2022. 'Management of Long Stay Patients in Public Hospitals' p.7

⁸ Western Australian Auditor General's Report. 2019. "Access to State-Managed Adult Mental Health Services" p. 6

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- CoMHWA strongly encourages allocation of further resources to alleviate this problem. Increased funding would ensure that these essential consumer supports are in place to provide the best quality care and avoid unneeded long stay patients.
- It is CoMHWA's strong position that providing holistic, peer-led alternatives to presenting to Emergency Departments will prevent unnecessary hospital admissions and therefore will prevent Long Stays. Examples of such approaches include the Urgent Mental Health Care Centre⁹ in Adelaide and the Safe Haven Cafés¹⁰ in W.A.
- CoMHWA will continue to advocate that discussion of Long Stay Patients must recognise how mental health consumer and aged care cohorts do overlap and require intersectional understanding and discussion.
- CoMHWA insists upon the inclusion of the lived experience of consumers as a part of the drive for increased data on long stay patients. The lived experience of consumers should not be ignored and understanding the issues associated with long stay patients will require more than abstract numerical figures.
- CoMHWA will consult our members to gather information on their Long Stay experiences to provide nuance to the recommendations and findings of the report.

Have your say:

CoMHWA is dedicated to representing your views on this issue. To have your say, please get in touch with our Systemic Advocacy Team at sysadvocacy@comhwa.org.au.

⁹ Hunt, Greg. 2021. 'First adult mental health centre opens in Adelaide' <https://www.health.gov.au/ministers/the-hon-greg-hunt-mp/media/first-adult-mental-health-centre-opens-in-adelaide>

¹⁰ Government of Western Australia Mental Health Commission. 2021. 'Safe Haven Cafes' <https://www.mhc.wa.gov.au/about-us/major-projects/safe-haven-cafes/>

