

Glossary

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| Access | Ability of consumers or potential consumers to obtain required or available services when needed within an appropriate time. |
| Acute | A condition that requires immediate medical attention. |
| Adverse drug events | A particular type of adverse drug event where a drug or medication is implicated as a causal factor in the adverse event. This encompasses both harm that results from the intrinsic nature of medicine (an adverse drug reaction) as well as harm that results from medication errors or system failures associated with the manufacture, distribution or use of medicines. |
| Advocacy | Representing the concerns and interests of consumers and carers, speaking on their behalf, and providing training and support so they can represent themselves. |
| Appropriate | Care, intervention or action provided is relevant to the consumer needs and based on established standards. |
| Assessment | Process by which the characteristics and needs of consumers, groups or situations are evaluated or determined so they can be addressed. The assessment forms the basis of a plan for services or action. |
| Available | Information, services and support that is present in the catchment area of the mental health service. |
| Best available evidence | Pre-appraised evidence such as systematic reviews, clinical practice guidelines and critically appraised papers and topics. |
| CALD | Culturally and linguistically diverse. |
| Care | All services and interventions provided to a person with a mental health problem and / or mental illness by health and other sectors, community organisation, family and carers. |
| Care management | A cyclical process, in which needs are assessed, services are delivered in response, and needs are re-assessed, leading to a changed service response. |

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| Care plan | A written statement developed for entitled persons which states the nursing and other interventions to be undertaken, the health outcomes to be achieved and the review of care which will occur at regular intervals. |
| Carer | <p>A person whose life is affected by virtue of close relationship with a consumer, or who has a chosen caring role with a consumer.</p> <p>Carer, in this document, may also refer to the consumer's identified family, including children and parents, as well as other legal guardians and people significant to the consumer.</p> |
| Clinical trial | Any research project that prospectively assigns human participants or groups to one or more health-related interventions to evaluate the effects on health outcome. |
| Community | How the community is defined depends on the purpose, structure and type of service. The community may be determined by a target population, such as consumers and / or clinicians who access the service or, in the case of public services, a defined catchment area. |
| Community living | The ability of the consumer to live independently in the community with the best possible quality of life. |
| Co-morbid condition | Existing simultaneously with and usually independently of another medical condition. |
| Confidentiality | The restriction of access to personal information to authorised persons, entities and processes at authorised times and in an authorised manner. |
| Consent | Consumer agreement based on an understanding of the implications of a particular activity or decision and the likely consequences for the consumer. |
| Consumer | A person who is currently using, or has previously used, a mental health service. |

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| Consumer advocate | People who have been given the power by consumers to speak on their behalf, who represent the concerns and interest of the consumer as directed by the consumer, and seek the outcomes desired by the consumer. Although government and others may give power to advocates, such advocacy is token unless it is directly accountable to the consumer. |
| Consumer representative | A member of a government, professional body, industry or non-government organisation committee who voices consumer perspectives and takes part in the decision-making process on behalf of consumers. This person is nominated by, and is accountable to, an organisation of consumers. The role of a consumer representative is to provide a consumer perspective. |
| Continuity of care | Linkage of components of individualised treatment and care across health service agencies according to individual needs. |
| Coordinate | To bring together in a common and harmonious action or effort. |
| Culture | A shared system of values, beliefs and behaviour. |
| Data | Information collected for analysis or reference. |
| Data collection | A store of data captured in an organised way for a defined purpose. |
| Diagnosis | A decision based on the recognition of clinically relevant symptomatology, the consideration of causes that may exclude a diagnosis of another condition and the application of clinical judgment. |
| Disability | A concept of several dimensions relating to an impairment in body structure or function, a limitation in activities (such as mobility and communication), a restriction in participation (involvement in life situations such as work, social interaction and education), and the affected person's physical and social environment. |

Discharge / exit planning

A process for ensuring transfer of care of a consumer between service providers.

Discharge planning results in a formal written discharge plan, the aim of which is to ensure continuity of services that are necessary for successful community living. The discharge plan is a negotiated enterprise between the consumer, carer or family, referring doctor, community mental health team and the inpatient unit. It includes medical information, follow-up appointments and the desired outcomes of treatment.

The process of discharge planning begins at the time of admission. Barriers to discharge are identified at the time of admission and specific planning initiated to address these barriers, for example anticipated difficulties in finding suitable accommodation.

The relevant stakeholders who are not directly involved in the discharge planning should also be notified of the anticipated discharge date, for example general practitioner and supported accommodation provider.

Diversity

A broad concept that includes age, personal and corporate background, education, function and personality. Includes lifestyle, sexual orientation, ethnicity and status within the general community.

Documentation

Process of recording information in the health record and other documents that are a source of information; a written, tangible record of care and services provided.

Early intervention

Interventions targeting people displaying the early signs and symptoms of a mental health problem or mental disorder.

Education

Systematic instruction and learning activities to develop or bring about change in knowledge, attitudes, values or skills.

Effective

Producing the intended or expected result.

Efficiency

Achieving desired results with most cost effective use of resources.

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| Entry | The process provided by the mental health service which assists the consumer and their carers to make contact with the mental health service and receive appropriate assistance. |
| Equitable | Minimising avoidable disparities in health and its determinants, including but not limited to health care, between groups of people who have different levels of underlying social attributes. |
| Evaluation | Judging the value of something by gathering valid information about it in a systematic way and by making a comparison. The purpose of evaluation is to help the user of the evaluation to decide what to do, or to contribute to scientific knowledge |
| Exit | When the consumer no longer requires treatment, support, or any other service from the mental health service, and there has been a last review of the case with peers and the case is closed. Exit is prepared for in a collaborative manner with the consumer. This may be referred to as discharge in some services. |
| Exit plan | See discharge plan. |
| Feedback | A communication from a consumer relaying how delivered products, services and messages compare with consumer expectations. |
| First contact | The first time the consumer makes contact with the mental health service during any episode of care. |
| Follow-up | Processes and actions taken after a service has been completed. |
| Funders | State and territory governments, Australian government, private health funds. |
| Governance | The system by which organisations are directed and controlled. It ensures the power of organisations is harnessed for the agreed purpose. Governance spells out the rules and procedures for making decisions on organisational affairs. |
| Human resources | The personnel requirements of the organisation. |
| Incidence | The number of new cases (of an illness or event etc.) occurring during a given period. |

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| Incident | An event or circumstance which led to, or could have, unintended and / or unnecessary harm to a person, and / or a complaint, loss or damage. |
| Individual health record | Term to cover consumer record, medical record, care record, health care record or record that documents care or service to a consumer. A health record is a legal document that outlines the total needs, care and management of consumers. |
| Induction | A process of bringing a new employee into the organisation. This program assimilates them into the culture, accepted practices, and performance standards of the organisation. |
| Infection control | Measures practised by healthcare personnel in healthcare facilities to decrease transmission and acquisition of infectious agents. This includes proper hand hygiene, scrupulous work practices and use of personal protective equipment (PPE)—masks or respirators, gloves, gowns, and eye protection. Infection control measures are based on how an infectious agent is transmitted and include standard, contact, droplet, and airborne precautions. |
| Information | Data elements that have been organised and analysed and that provide a basis for decision making. |
| Information system | A system that provides access to information using hardware, software, supplies, policies, procedures and people. |

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| Informed consent | <p>Consent obtained freely, without coercion, threats or improper inducements, after questions asked by the consumer have been answered, after appropriate disclosure to the patient, adequate and understandable information in a form and language demonstrably understood by the patient.</p> <p>Such answers and disclosures must be sufficient to enable the consumer to make a fully informed decision based on all relevant factors including the nature of treatment involved, the range of other options and the possible outcomes and implications, risks and benefits for the consumer and others.</p> <p>In the context of mental health, this means that the client provides permission for a specific treatment to occur based on their understanding of the nature of the procedure, the risks involved, the consequences of withholding permission and their knowledge of available alternative treatments.</p> |
| Inpatient psychiatric service | <p>A ward / unit / facility in a general hospital, private psychiatric hospital, stand alone psychiatric hospital or some other location used primarily for the treatment of mental health problems and / or mental illness.</p> |
| Integration | <p>The process whereby inpatient and community components of a mental health service become coordinated as a single, specialist network and include mechanisms which link intake, assessment, crisis intervention, and acute, extended and ongoing treatment using a case management approach to ensure continuity of care.</p> |
| Interdisciplinary team | <p>Care or a service given with input from more than one discipline or profession.</p> |
| Intervention | <p>An activity or set of activities aimed at modifying a process, course of action or sequence of events, to change one or several of their characteristics such as performance or expected outcome.</p> |
| Involuntary | <p>Where persons are detained in hospital or compulsorily treated in the community under mental health legislation for the purpose of assessment or provision of appropriate treatment or care.</p> |

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| Leadership | Ability to provide direction and cope with change. It involves establishing a vision, developing strategies for producing the changes needed to implement the vision, aligning people and motivating and inspiring people to overcome obstacles. |
| Legislation | The body of laws made by Parliament. These laws consist of Acts of Parliament and Regulations, Ordinances and / or Rules which are also called subordinate or delegated legislation. |
| Links | Connections, contacts and working relationships established with others. |
| Management | Setting targets or goals for the future through planning and budgeting, establishing processes for achieving those targets and allocating resources to accomplish those plans. Ensuring that plans are achieved by organising, staffing, controlling and problem-solving. |
| Medication and other medical technologies | The range of evidence-based therapeutic and diagnostic approaches which use medication and other technology as their basis, for example seclusion or ECT. |
| Mental health | The capacity of individuals within the groups and the environment to interact with one another in ways that promote subjective wellbeing, optimal development and use of mental abilities (cognitive, affective and relational) and achievement of individual and collective goals consistent with justice. |
| Mental health problems | A disruption in the interaction between the individual, the group and the environment, producing a diminished state of mental health. |
| Mental health professional | A person who offers services for the purpose of improving an individual's mental health or to treat mental illness. These professionals include psychiatrists, clinical psychologists, clinical social workers, occupational therapists, psychiatric nurses as well as other professionals. |
| Mental health promotion | Action to maximise mental health and wellbeing among populations and individuals. Mental health promotion is concerned with promoting wellbeing across entire population groups for people who are currently well, for those at-risk, and for those experiencing illness. |

Mental health service (MHS) Specialised mental health services are those with the primary function to provide treatment, rehabilitation or community health support targeted towards people with a mental illness or psychiatric disability. These activities are delivered from a service or facility that is readily identifiable as both specialised and serving a mental health care function.

Mental illness A clinically diagnosable disorder that significantly interferes with an individual's cognitive, emotional or social abilities.

The diagnosis of mental illness is generally made according to the classification systems of the *Diagnostic and Statistical Manual of Mental Disorders*, Fourth Edition Text Revision (DSM-IV-TR) or the *International Classification of Diseases*, Tenth Edition (ICD-10). These classification systems apply to a wide range of mental disorders (for the DSM-IV) and mental and physical disorders (for the ICD-10). Not all the DSM-IV mental disorders are within the ambit of the National Mental Health Plan 2003–2008.

In Australia, drug and alcohol problems are primarily the responsibility of the drug and alcohol service system and there is a separate, but linked, national strategy. Similarly, dementia is treated primarily in aged care settings. Both are considered important in terms of their co-morbidity with mental illness.

Monitor To check, observe critically, measure or record the progress of an activity, action or system on a regular basis to identify change.

Ongoing care The process of care that follows an admission to a health care organisation.

Onset A beginning or start.

Operational plan A plan on a short term basis that provides details of how the strategic plan will be accomplished.

Orientation The process by which staff become familiar with all aspects of the work environment and their responsibilities.

Outcome A measurable change in the health of an individual, or group of people or population, which is attributable to interventions or services.

Personal and health related information

Any information or an opinion about a person whose identity is apparent or can reasonably be ascertained from the information or opinion. Personal information can include a person's name, date of birth, address, telephone number, family members or any other information that could allow the person to be identified.

Health related information includes symptoms or observations about the person's health, prescriptions, billing details, pathology or other test results, dental records, Medicare or health insurance numbers, admission and discharge details, genetic information and any other sensitive information about things such as race, sexuality or religion when it's collected by a health service. In the context of these standards, personal and health related information, where it can lead to the identity of the consumer, is considered in the same way.

Physical

Relating to the body.

Plan

Any detailed scheme, program or method developed for the accomplishment of an objective. Detailed notes of intended proceedings.

Planning

To formulate a scheme or program for the accomplishment or attainment of an object.

Policy

A documented statement that formalises the approach to tasks and concepts which is consistent with organisational objectives.

Prevention

Interventions that occur before the initial onset of a disorder (Mrazek and Haggerty, 1994, p. 23).

Primary care provider

Staff or individuals who, in cooperation with the consumer, assume responsibility for all aspects of care in response to the diagnosis and needs of the consumer.

Procedure

A set of documented instructions conveying the approved and recommended steps for a particular act or sequence of acts.

Process

A series of actions, changes / functions that bring about an end or result.

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| Program | A part or function of the mental health service such as the rehabilitation team, health promotion unit, the crisis team, the living skills centre or inpatient psychiatric unit. Some mental health services may have only one team which performs all of these functions. |
| Promotion | See mental health promotion. |
| Quality | The extent to which the properties of a service or product produces a desired outcome. |
| Quality improvement | Ongoing response to quality assessment data about a service in ways that improve the process by which services are provided to consumers. |
| Recovery | A deeply personal, unique process of changing one's attitudes, values, feelings, goals, skills and / or roles. It is a way of living a satisfying, hopeful and contributing life. Recovery involves the development of new meaning and purpose in one's life as one grows beyond the catastrophic effects of psychiatric disability. |
| Referral processes / pathways | Systems and protocols that ensure linkages between services to support continuity of care and ensure that consumers of services are able to negotiate the system in a seamless and timely manner. |
| Relapse | <p>A subsequent episode of mental illness. It is a recurrence of symptoms of mental illness similar to those that have previously been experienced. The threshold of symptoms required to identify a relapse varies according to the differing perspectives of the person experiencing the symptoms, their family and carers, and service providers.</p> <p>Relapse is generally agreed to have occurred when the person experiencing the symptoms is not able to cope using their usual supports and requires a greater intensity of intervention. The word 'relapse' is viewed by many as a negative and medicalised term, and the words 'episode' or 'being unwell' may be preferred.</p> |
| Research | An active, diligent and systematic process of inquiry to discover, interpret or revise facts, events, behaviours, or theories, or to make practical applications with the help of such facts, laws or theories. |

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| Restraint | A restrictive intervention that relies on external controls to limit the movement or response of a person. |
| Rights | Something that can be claimed as justly, fairly, legally or morally one's own. A formal description of the services that consumers can expect and demand from an organisation. |
| Risk | The chance of something happening that will have a (negative) impact. It is measured in terms of consequence and likelihood. |
| Risk assessment | The process of identification, analysis and evaluation of a risk. |
| Risk management | In health care, designing and implementing a program of activities to identify and avoid or minimise risks to patients, employees, visitors and the institution; to minimise financial losses (including legal liability) that might arise consequentially; and to transfer risk to others through payment of premiums (insurance). |
| Safety | Freedom from hazard. |
| Seclusion | The act of confining a patient in a room when it is not within their control to leave. It should not be confused with the practice of time out, where a patient is requested to seek voluntary social isolation for a minimum period of time. |
| Sentinel event | Events in which death or serious harm to a patient has occurred. They signal catastrophic system failure and have the potential to seriously undermine public confidence in the health-care system. |
| Service provider | A person, usually with professional qualifications, who receives remuneration for providing services to people who have a mental health problem and / or mental illness. |
| Services | Products of the organisation delivered to consumers or units of the organisation that deliver products to consumers. |
| Settings | The setting in which assistance or services are provided. |
| Social | Of or relating to life and relation to human beings in a community. |
| Staff | Term which includes employed, visiting, sessional, contracted or volunteer personnel. |

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| Stakeholder | Individuals, organisations or groups that have an interest of share in services. |
| Strategic plan | Plan that is organisation-wide, that establishes an organisation's overall objectives. |
| Support services | Direct services and interventions provided for a person with a mental health problem and / or mental illness and associated disability aimed at reducing handicap and promoting community tenure, for example assistance with cooking and cleaning. Support services do not necessarily have a treatment or rehabilitation focus. |
| System | A group of interacting, interrelated or interdependent elements forming or regarded as forming a collective entity. |
| Therapies | The range of therapeutic approaches which reflect best available evidence and are used in mental health care, excluding medication and other technologies. Therapies could include psycho-therapeutic, psycho-educational, rehabilitative, collaborative approaches using individual and / or group methods. |
| Training | The teaching of vocational or practical skills and relates to specific useful skills; often referred to as professional development. |
| Treatment | Specific physical, psychological and social interventions provided by health professionals aimed at the reduction of impairment and disability and / or the maintenance of current level of functioning. |
| Triage | A system for determining the relative priority of new referrals. Might also be called intake or engagement. |
| Values | Principles and beliefs that guide an organisation and may involve social or ethical issues. |
| Voluntary admission | Admission to a mental health unit for treatment that results from the client making the decision for admission and signing the necessary agreement for inpatient treatment. |
| Wellbeing | The state of complete physical, mental and social wellbeing and not merely the absence of disease or infirmity. The enjoyment of the highest attainable standard of health is one of the fundamental rights of every human being without distinction of race, religion, political belief or economic and social condition. |