

## Improving data to improve care for hospital-treated self-harm

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In Australia, self-harm accounts for over 30,000 hospital admissions every year. Improving care for people who self-harm, can not only improve immediate quality of life, but also prevent potential suicides, which is the leading cause of death for adults aged 15 - 44 years.

Released today by the Australian Healthcare and Hospitals Association's (AHHA) Deeble Institute for Health Policy Research, the Issues Brief 'Hospital-treated self-harm: Improving care through improved data' authored by 2022 Deeble Summer Scholar Dr Katie McGill. Sponsored HESTA, the Deeble Summer Scholarship program is an exceptional research opportunity for outstanding PhD candidates and Early Career Researchers with a background in health service research.

'For people presenting to hospital for self-harm treatment, connecting with community and outpatient services can be a vital part of recovery, but routine care is not always in line with best practice and can fall short of meeting people's needs and expectations,' says AHHA Chief Executive Kylie Woolcock.

'Reports of people experiencing stigmatising, judgemental and invalidating responses when presenting to health services for help after self-harm or with thoughts of suicide is a significant concern.

'By improving data quality and collection practices in relation to hospital-treated self-harm, we can form a better picture of this vitally important national health issue. Self-harm usually occurs alongside psychological distress and is often associated with suicidal intent, psychosocial stressors and poor mental health.

'Currently, self-harm surveillance data relies on clinical records from hospital admissions, and while there have been improvements in data accessibility, this data infrastructure is not designed for the purpose of improving care at a service level, or delivering improvements in patient-reported outcomes.

'Many areas of the health system are recognising that we need to shift towards measuring patient reported outcomes and experiences and mental health care is no different. By continuing to incorporate these metrics into how we plan and deliver care, it can create potentially life-changing results.'

This Issues Brief makes crucial recommendations to collection methods for hospital-treated self-harm data and the key recommendation that a clinical quality registry should be established.

'A clinical quality registry for hospital-treated self-harm would create the link between data and improved care. By building on existing data collection frameworks with emerging self-harm clinical register capability, we can implement monitoring and service improvements at a national level and improve the outcomes that matter to patients.'

The online version of this <u>media release</u> and the Issues Brief '<u>Hospital-treated self-harm: Improving care through improved data</u>' can be found on the AHHA website.

The Australian Healthcare and Hospitals Association is the national peak body for public and not-for-profit healthcare.

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