

## RANZCP NSW Branch response to an additional question

It is our general contention that the palliative care needs of people with severe mental illness are not recognised and treated in a timely manner. This issue is likely to be exacerbated for people living in rural areas where palliative care services are limited or non-existent.

People with severe mental illness face many challenges accessing cancer treatment and palliative care. For instance, we know their disorder can affect their ability to process information and communicate symptoms.

We also know that a lack of suitably skilled staff and integration and cooperation between palliative and mental healthcare can further complicate adequate palliative care provision to this patient group.

To ensure people with severe mental illness are well supported at the end of life a model of palliative care is required that offers both specialised services and capacity building within the pre-existing health workforce.

Psychiatrists, in particular Consultation-Liaison, have an important role to play in facilitating patient centred-care and integrating mental health care into palliative care. They may be involved in assessing and offering treatment for people who have symptoms of mental illness as part of a terminal illness, and in supporting people with their suffering.