

## **National Review of Mental Health Programmes and Services**

### **Summary update for APS members – 23 April 2015**

The final report of the National Review of Mental Health Programmes and Services, conducted by the National Mental Health Commission throughout 2014, was released on 16 April 2015.

The Commission's primary area of focus was the efficiency and effectiveness of Commonwealth services and programs, and whether the overall investment of Commonwealth funds is producing the best outcomes. The Review found no evidence that specific Commonwealth-funded services or programs were not adding value or should be defunded due to lack of impact. However, its overarching conclusion was that the mental health system as a whole is operating inefficiently and ineffectively.

The Review's 25 recommendations seek to address this system failure. It proposes a new system architecture based around the primary care system and makes a number of recommendations to shift the balance of spending in mental health away from acute care and emergency interventions towards more efficient and effective prevention, early intervention and community-based services.

A summary of the Review's key recommendations for the mental health system that have implications for psychologists, psychological services and psychological research is provided below.

**It is important to note that APS summary documents prepared for members outline the recommendations of the National Mental Health Commission in their report of the Review and NOT the Government's response.** On the day of the report's release, the Federal Government announced that it will establish an expert working group and a consultation process to inform its response to the Review. The APS is already working to have strong involvement in assisting the Government to formulate its response.

#### **New system architecture for mental health**

- The Review proposes an expanded role for Primary Health Networks (to be renamed Primary and Mental Health Networks) in mental health. Primary Health Networks (PHNs) would be responsible for local-level planning and contestable commissioning and contract management of services, supported by local area mapping of needs and service availability, best practice guidelines on assessment, treatment, monitoring and referral, and the development of new Integrated Care Pathways.
- This system architecture would be supported by the clarification of roles and responsibilities of Commonwealth and State/Territory governments through a new National Mental Health and Suicide Prevention Plan – the Fifth National Mental Health Plan – to be developed in consultation with the broad mental health sector.

### **Changes to Better Access**

- The Review proposes a number of changes to the existing arrangements for the Better Access initiative, including an increase in the maximum number of annual sessions, optimal use of GP Mental Health Treatment Plans, incentives for service provision in rural areas and possible 'cashing out' of funding for redistribution to the Primary Health Networks. (Read the APS summary update of the Review's Better Access recommendations [here](#) [sent to members last week].)

### **Implications for other existing services (e.g., ATAPS)**

- The Review makes very few specific recommendations about the implications of its findings for Commonwealth-funded programs. Rather, it identifies a number of alternative options for Government to consider and decide at a later stage. For example, the following actions in relation to ATAPS are referenced throughout the Review's report:
  - Roll ATAPS into larger regional programs
  - Transition administration to PHNs
  - Broadband ATAPS funding instead of having tiers or target groups
  - Transfer Indigenous-specific elements to existing primary health care models already in place in Indigenous communities.
- There may be different implications for programs across Australia, as it would be for each PHN to determine how to spend its mental health funding allocation. A PHN might choose to continue a program in its current form or alternatively, pool the funding for a new, larger program based, for instance, on population groups or on service type.

### **Coordinating care for people with severe and complex needs**

- The Review recommends the following actions in order to achieve better coordinated care for people with severe and complex needs.
  - General practices should be provided with incentives to take on responsibility for coordination of care for people voluntarily enrolled with the practice, as part of a 'Mental Health Medical Home'.
  - Funding (from Commonwealth and/or State-level programs) could be pooled to form individual budgets, which could then be used to purchase services coordinated through PHNs.
  - e-health records should be implemented on an opt-out basis.
  - The use of single care plans should be a requirement of funding for organisations providing services for people with complex needs.

### **Self-help, e-therapy and lifestyle supports**

- The Review highlights the potential efficacy and cost-effectiveness benefits of increasing mental health self-care and online supports as part of a stepped-care approach, particularly amongst groups who are currently low users of face-to-face services.
- To increase up-take of e-mental health services, the Review recommends the first-line response to mental illness by GPs should, where appropriate, be referrals to:
  - Evidence-based self-help resources and online e-therapy programs ('blue prescriptions')
  - Information and supports to make lifestyle changes ('green prescriptions').

- The Review also makes recommendations around increasing access to services through infrastructure improvements in online and telephone-based mental health support, including by streamlining information technology platforms, implementing nationally agreed standards in online service delivery, requiring e-mental health services to link into local face-to-face services, and re-tendering existing e-mental health contracts on a competitive basis.

### **Suicide prevention**

- The Review has a strong focus on the need for more sustained, comprehensive and evidence-based approaches to suicide prevention. It recommends:
  - The reduction of suicide and suicide attempts by 50 per cent over the next decade, as part of a suite of national targets in mental health and suicide prevention.
  - The urgent development of a mental health and suicide prevention strategy for rural, regional and remote areas.
  - Trials to develop and implement suicide-prevention strategies in 12 regions across Australia.
  - A specific focus on suicide prevention for PHNs, in the new National Mental Health and Suicide Prevention Plan between the Commonwealth and State/Territory governments, and in mental health research.

### **Children, adolescents and young adults**

- The Review has a specific focus on measures to build resilience and support the mental health of children, adolescents and young adults. Some of its recommendations and proposed actions include:
  - Making child, adolescent and young adult mental health a priority for PHNs
  - A national study into the scaling up of the Positive Parenting Partnership (Triple P) program
  - Developing 'Childspaces' or new Children's Wellbeing Centres for vulnerable children, integrated with early childhood and other services
  - School-based prevention and early intervention programs such as KidsMatter and MindMatters in primary and secondary schools
  - A study into the cost to society of childhood trauma
  - Long-range national infant and child wellbeing research.

### **Aboriginal and Torres Strait Islander mental health**

- Throughout its report, the Review recognises the appalling mental health outcomes experienced by Aboriginal and Torres Strait Islander people, and makes several recommendations, including:
  - A new mental health-specific target within the COAG Closing the Gap strategy
  - The establishment of mental health and social and emotional wellbeing teams in Indigenous Primary Health Care Organisations
  - Specific consultation with Aboriginal people, communities, organisations and other representatives
  - Applied research into Aboriginal and Torres Strait Islander mental health.

### **Mental health promotion and stigma reduction in workplaces and the community**

- The Review recommends further work to improve mental health safety and wellbeing, self-help and reducing stigma and discrimination in the workplace, through the Mentally Health Workplace Alliance, as well as the promotion of mental wellbeing, resilience and community-wide reductions in stigma and discrimination.

### **Increased resources for mental health research**

- The Review recommends a doubling of funding for mental health research, to be spent in line with a new National Mental Health Research Strategy. The Strategy would canvass both applied and experiential research across a number of domains, including prevention and early intervention, suicide prevention, and recovery and support.

### **Mental health first aid training for workers across sectors**

- The Review recommends that all workers likely to come into contact with people with mental illness – such as Centrelink officers, social services workers, teachers, and managers in the workplace – receive adequate training to recognise and respond to signs of poor mental health.