

FACT SHEET: AUSTRALIAN GOVERNMENT RESPONSE TO CONTRIBUTING LIVES, THRIVING COMMUNITIES – REVIEW OF MENTAL HEALTH PROGRAMMES AND SERVICES

The National Mental Health Commission's Review of Mental Health Programmes and Services, *Contributing lives, thriving communities*, highlighted the existing complexity, inefficiency and fragmentation of the mental health system.

There is a critical need for long-term reform. The Australian Government response to the Review of Mental Health Programmes and Services presents significant system reforms. These reforms are needed to produce an efficient, integrated and sustainable mental health system and to improve the targeting of efforts and outcomes for people with or at risk of mental illness.

The mental health consumer is at the centre of the reforms.

The focus of the reforms is primary mental health care services and areas of ongoing Commonwealth responsibility, while the response also encourages partnerships and better integration with other service providers.

Work will immediately commence on the nine key action areas identified in the Australian Government's Response to the Review of Mental Health Programmes and Services.

These key action areas are:

Locally planned and commissioned mental health services and a new flexible primary health care funding pool

PHNs will lead mental health planning and integration at a regional level, in partnership with Local Hospital Networks, non-government organisations, Aboriginal and Torres Strait Islander organisations, National Disability Insurance Scheme (NDIS) providers, and drug and alcohol services.

From 2016, Commonwealth mental health programme funding will be transitioned to Primary Health Networks (PHNs) to form a newly created mental health flexible funding pool.

PHNs will have the flexibility to use this funding to commission regionally delivered primary mental health services suited to local needs within a stepped care model.

Mental health priorities for PHNs will include:

- regional mental health plans to identify needs and gaps, reduce duplication and remove inefficiencies;
- improved links and innovative approaches to support clinical care coordination for people with severe mental illness and complex needs, including new joined up assessment arrangements;
- integrating Aboriginal and Torres Strait Islander mental health and social and emotional wellbeing services and other services at a local level;
- cross sectoral approaches to early intervention for children and young people and commissioning of services to support to a broader group of young people with or at risk of mental illness;
- a regional approach to suicide prevention, including community based activities and integrated post discharge care for people at high risk of suicide; and

- strategies to target services to people in rural and remote areas and other hard to reach and at risk populations.

A new, easy to access digital mental health gateway

Online mental health interventions, including self-help and exchanges with clinicians, have proven benefits. For some people suffering from depression and anxiety, digital services can be as effective as face-to-face sessions.

A new digital mental health gateway will be the first point of service for people looking for information, advice or an online psychological service. It will encourage consumers to use digital interventions, where appropriate.

The gateway will bring together existing evidence based information, advice and digital mental health services. People will be connected to services through a centralised telephone and web portal. Ease of access to crisis support services will be promoted through the gateway.

A 'stepped care' model for primary mental health care

Over a three year period, existing Commonwealth-funded primary mental health care programmes will be redesigned to reflect the different levels of care needed by consumers, moving from a 'one size fits all' approach to a system that optimally meet individual needs - people will get the right care at the right time.

Refocusing efforts to achieve better targeting of service within a stepped care model will involve:

- promoting the new digital mental health gateway as the first point of contact and service for many consumers;
- cost effective, low intensity services for people with mild mental illness, recognising digital services will not be appropriate for some people;
- better targeting of Medicare subsidised psychological services to the needs of people with moderate to severe mental illness;
- in parallel with broader primary health care reforms, developing new funding models to support coordination of care for people with ongoing, severe mental illness and complex needs, including young people with severe illness; and
- stronger support to GPs to enable them to assess and refer people to the best services, especially in relation to people with severe and complex mental illness.

Joined up support for child mental health

Commonwealth programmes in the health and education portfolios will be joined up to create more effective interventions for child mental health from early years to adolescence.

This will be achieved by:

- a single, integrated school based mental health programme to develop awareness of mental health issues, prevent problems and build resilience. This will build on the success of KidsMatter and MindMatters, and be promoted through the Safe Schools Hub;
- improved access for children and young people to telephone and web-based information and advice through the new digital mental health gateway;
- stepped care arrangements for children through PHNs;
- a national workforce support initiative to assist clinical and non-clinical professionals and services who work with children to identify, support and refer children at risk and to promote resilience building. This will include children who have experienced trauma; and

- partnerships at a regional level between clinical and non-clinical support services, including Family Mental Health Support Service providers, supported by the national workforce support initiative.

An integrated and equitable approach to youth mental health

Youth mental health services including headspace will be better integrated with primary care services in each region, through the local PHN. There will also be better integration of mental health and drug and alcohol services for young people.

Early intervention will be provided to a broader group of young people presenting to primary care services who have or are at risk of severe mental illness.

A trial will be held of a new model to better integrate employment and educational support for young people up to 25 years old who have a mental illness.

Through the Department of Social Services, employment specialists will be integrated into youth mental health services to help individuals find work or achieve their education goals.

Integration of Aboriginal and Torres Strait Islander mental health and social and emotional wellbeing services

Access to culturally sensitive mental health services for Aboriginal and Torres Strait Islander people will be increased through better planning, integration and commissioning of services by PHNs.

Social and emotional wellbeing support, mental health, suicide prevention and alcohol and other drug services for Indigenous people will be better joined up on the ground, in recognition of the links between these various needs.

Mental health will also be a high priority within the Implementation Plan for the National Aboriginal and Torres Strait Islander Health Plan 2013-2023.

A renewed approach to suicide prevention

A new national suicide prevention strategy will be implemented immediately, with four critical components:

- national leadership and infrastructure, including whole of population activity and crisis support services;
- a systematic and planned regional approach to community based suicide prevention. PHNs will commission regionally appropriate activities, in partnership with LHNs and other local organisations;
- efforts to prevent Aboriginal and Torres Strait Islander suicide will be refocused; and
- working with states and territories, including in the context of the Fifth National Mental Health Plan, to ensure people who have self-harmed or attempted suicide are given effective follow-up after discharge.

Improved services and coordination of care for people with severe and complex mental illness

Better, more coordinated support to people with severe mental illness and complex needs who are being managed with primary care, will be a priority.

Innovative funding models will allow funding to follow the consumer's needs, including young people with complex needs. These models will be implemented over time, in conjunction with primary health care reforms.

The role of mental health nurses will be promoted in coordinating the care for people with severe mental illness and supporting the role of GP as care manager.

Regionally based clinical assessment arrangements for people with severe and complex mental illness will be improved and linked to Local Hospital Network and NDIS assessment and referral processes based on the consumer need.

Mental health providers and consumers will be encouraged to use a single digital health record to improve communication and understanding.

The Government will also continue to work with state and territory governments to ensure the effective transition to the NDIS for people with severe and persistent mental illness and psychosocial disability.

It will periodically review progress of the transition to NDIS to ensure that the scheme provides choice and good support for people with a disability arising from mental illness, while people with severe mental illness who are not eligible for NDIS also receive continued support.

National leadership in mental health reform

In addition to leading reform and system change in the areas outlined above, the Commonwealth will continue to play a leading role in prevention and early intervention initiatives.

It will renew efforts to reduce the stigma associated with mental illness and promote access to services, including support available through the new digital gateway.

It will ensure the mental health needs of particular population groups are serviced, including Aboriginal and Torres Strait Islander people, humanitarian entrants who have experienced trauma, defence personnel and veterans.

It will enhance the evidence base to support national policy and planning for mental health services, including data collection and evaluation, as a key to continuous improvement.

It will support consumer participation, through a new consumer and carer participation framework.

The Australian Government is committed to working with the sector and stakeholders in moving these critical reforms forward and improving the mental health system for all Australians.

Australia's Mental Health System

CURRENT	FUTURE
Programmes and services restrained by programme boundaries and old models of care	<p>Through restructuring mental health programmes, and the pooled approach through PHNs, a more flexible and joined-up system will focus on the needs and views of consumers.</p> <p>Consumer choice and service contestability enhanced.</p>
Fragmentation, duplication, service gaps and complex service structure difficult to navigate	<p>Regionally planned, integrated and coordinated service system building on existing infrastructure, including close links between PHNs, LHNs and NDIS, and stronger local cross sectoral cooperation.</p> <p>Improved ease of navigation of the service system through the gateway.</p>
System that responds too late	<p>Effective early intervention across the lifespan and trajectory of mental illness and avoidable escalation of problems reducing long term burden on individuals, the system and Government.</p>
Lack of follow up of individual following self-harm or suicide attempt	<p>A commitment to developing with states and territories appropriate follow up arrangements for individuals after a self-harm or suicide attempt</p> <p>Evidence based approach to suicide prevention at a regional level, linking sectors.</p>
'One size fits all' coarsely targeted approach to primary mental health care service delivery	<p>New stepped care arrangements to better match services to consumer need, making optimal use of workforce, and better targeting Medicare based services.</p> <p>Reduced over and under servicing – people will get the right care at the right time.</p>
Reliance on old models of face to face service delivery	<p>Innovative use of Australia's world-leading technology and the new digital mental health gateway, improving ease of access to services and information.</p> <p>Flexible service delivery options including low intensity services.</p>
High health, social and economic cost of mental illness and suicide	<p>Continued support for people with mild to moderate illness will aim to preserve access and support productivity and economic participation.</p> <p>Better coordination for severe will help to reduce economic and social burden on individuals, families, communities and the nation.</p> <p>Overall improved efficiency, optimally targeted services and a sustainable approach to mental health and suicide prevention.</p>
Commonwealth leadership focused on funding and programme delivery	<p>Commonwealth leadership role to facilitate system change and partnerships at all levels.</p> <p>The Fifth National Mental Health Plan will be used to seek agreement from states and territories to key partnerships.</p>