

## PRIORITY AREA 5: CHRONIC DISEASE

### Objective Description

Domain	National Objective	Rationale
MENTAL HEALTH	Divisions will support general practices/GPs to provide early intervention and optimal care and contribute to the achievement of the best possible health outcomes for patients with mental health disorders, and assist in the reduction of the impact of mental disorder on individuals, families and communities in collaboration with other mental health services as appropriate.	This objective is consistent with the aims of the National Mental Health Strategy, reaffirmed in the National Mental Health Plan, 2003-08.

### National Performance Indicators

Level	Indicator	Results for the reporting period	Explanatory Text
1	<b>N_MNH 1.1</b> Division collaborates with other organisations, service providers and consumer/carer groups to facilitate patient access to early intervention and optimal mental health care and assist in the reduction of the impact of mental health disorder on individuals, families and communities, in collaboration with other mental health services as appropriate.	<p><b>Significant Achievement</b></p> <p>Aim:</p> <p>Improve collaborations with key stakeholders to facilitate patient access to mental health care</p> <p>Actions Taken:</p> <ul style="list-style-type: none"> <li>Hosted a joint workshop for GPs and Allied Health Providers subcontracted to provide Focussed Psychological Strategies (FPS) GPs to meet and share experiences, expertise, discuss issues and exchange information.</li> </ul> <p>Outcomes:</p> <ul style="list-style-type: none"> <li>The workshop produced a series of recommendations to better improve access arrangements for patients requiring mental health care, including ways to better integrate the services provided by different health care professionals.</li> <li>The workshop also increased awareness of the GPs and AHP of each others experience and limitation.</li> <li>Follow-up reference group established to oversee implementation of recommendations, with follow-up workshop scheduled for 6 months time.</li> <li>The first recommendation (the establishment of a register of mental health care providers and areas of interest/speciality) has been undertaken by Division and circulated to all mental health providers.</li> </ul>	
	<b>N_MNH 1.2</b> Division takes a systematic approach to support general practices/GPs to provide early intervention and optimal mental health care.	<p>Significant Achievement</p> <p>Aim: Provide information to GPs regarding the Better Outcomes in Mental Health Care Initiative</p> <p>Actions Taken:</p> <ul style="list-style-type: none"> <li>Mental Health Project Officer conducted familiarisation training at general practices with 50 GPs.</li> <li>Articles published in "GP News" on the changes to EPC items and the GP Mental Health Care Plan,</li> <li>Links added to our Division's website to new Familiarisation Training materials.</li> </ul>	

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Level	Indicator	Results for the reporting period	Explanatory Text
		<p>Outcomes:</p> <ul style="list-style-type: none"> <li>Increased availability of information to GPs and website users</li> <li>95% of GPs expressed satisfaction with familiarisation training, and indicated that they were more likely to utilise the GP Mental Health Care Plan.</li> <li>A further 3 practices (8 GPs) have approached the Division to request familiarisation training, which has been scheduled within the next three months.</li> </ul>	
	<b>N_MNH 1.3</b> Division facilitates access to effective Continuing Professional Development (CPD) for mental health care.	<p>We undertook a Level One Mental Health training activity - titled 'Time Efficient Mental Health Solutions for Time Poor GPs'. Three 2 hour workshops were also held in May on:</p> <ul style="list-style-type: none"> <li>Anxiety/Substance Abuse</li> <li>Somatisation/Depression</li> <li>Postnatal Depression</li> </ul> <p>Comments: This training was completed by 45 GPs.</p>	Further Level One Mental Health Workshops will be conducted during the first quarter of the next reporting period.
	<b>N_MNH 1.4</b> Number and proportion of GPs from whom the Division is receiving electronic patient records to provide feedback for quality improvement in mental health care.	<a href="#">Table N MNH 1.4</a>	<a href="#">Table N MNH 1.4</a>
	<b>N_MNH 1.5</b> Division takes a systematic approach to support general practices/GPs to consistently capture and record Aboriginal and/or Torres Strait Islander origin for patients who have participated in a GP Mental Health Care Plan* on the practice register/recall/reminder systems.	<p>Significant Achievement Aim: Support GPs with documenting ATSI origin</p> <p>Actions Taken:</p> <ul style="list-style-type: none"> <li>An audit of the General Practices in the Division who record ATSI origin of patients has been undertaken.</li> <li>Visited individual practice to provide education and information on privacy and process for reporting indigenous status.</li> <li>Completed formal documentation on the collection of ATSI origin patient data referred to the Allied Health Providers (AHP) for focused psychological strategies by the AHPs, with specific regards to the GP Mental Health Care Plan,</li> </ul> <p>Outcomes:</p> <ul style="list-style-type: none"> <li>Improved access to ATSI origin documentation by AHPs who provide focused psychological strategies.</li> </ul>	Information is passed onto the Division and downloaded with all relevant data into the National Database.
2	<b>N_MNH 2.2</b> Number and proportion of general practices using a practice register/recall/reminder system to identify those patients who have participated in a GP Mental Health Care Plan with their GP, for review	<a href="#">Table N MNH 2.2</a>	<a href="#">Table N MNH 2.2</a>

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Level	Indicator	Results for the reporting period	Explanatory Text
	and appropriate action.		
	<b>N_MNH 3.1</b> Number of GP Mental Health Care Plans claimed by GPs practicing in the Division's area, compared to the estimated population in the Division's area who could benefit from the development of a GP Mental Health Care Plan.	<a href="#"><i>Table N MNH 3.1</i></a>	<a href="#"><i>Table N MNH 3.1</i></a>

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**Table N\_MNH 1.4** Number and proportion of GPs from whom the Division is receiving patient records to provide feedback for quality improvement in mental health care. Black Division June 2006

	Receiving records & providing feedback	Not receiving records	Total number of GPs in Division
<b>Number</b>	30	520	550
<b>Percent</b>	5.5%	94.5%	100
<b>Explanatory text:</b> Education on the benefits of using computerised systems is incorporated into regular site visits.			

**Table N\_MNH 2.2** Number and proportion of general practices using a practice register/recall/reminder system to identify patients who have participated in a GP Mental Health Care Plan with their GP, for review and appropriate action , Black Division, June 2006

	No Practice register/recall/reminder system (No to Q(1))	Practice register/recall/reminder but not used for identifying patients who have participated in a GP Mental Health Care Plan with their GP for review and appropriate action (Yes to Q(1) and No to Q(2))	Practice register/recall/reminder used for identifying patients who have participated in a GP Mental Health Care Plan with their GP for review and appropriate action (Yes to both Q(1) and Q(2))	Not known/missing	Number of practices for whom data available	Total number of practices in the Division
<b>Number</b>	50	90	20	40	160	200
<b>Percent</b>	31.25%	56.25%	12.5%	N/A	100	N/A
<b>Explanatory text:</b> Good improvement on last year's numbers re use of computerised systems. Education on the benefits of using computerised systems is incorporated into regular site visits.						
<b>QA: How were these data obtained?</b> GP/Practice survey						

**Table N\_MNH 3.1** Number of GP Mental Health Care Plans completed by GPs practicing in the Division's area, compared to the estimated population in the Division's area who could benefit from participating in a GP Mental Health Care Plan. Black Division, June 2006

	Number of GP Mental Health Care Plans	Estimated population who could benefit	GP Mental Health Care Plans: population ratio
<b>Number</b>	349	32400	0.01:1
<b>Explanatory text:</b> The Division acknowledges the importance of the national priority area and the provision of GP Mental Health Care Plans to those patients who could benefit. As the skills learnt at the workshops conducted over the past months are yet to be put into practice by attendees, we expect to see a big improvement in these figures over the next reporting period.			

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Domain
MENTAL HEALTH

### Reflection on work towards all objectives within this domain

Notable achievements and key contributing factors	<ul style="list-style-type: none"> <li>• There have more than 300 referrals into the ATAPS programs this financial year.</li> <li>• Several GPs completed the level one training ('Time Efficient Mental Health Solutions for time poor GPs) held over three months June - August this FY.</li> <li>• Development of partnerships with Mission Australia and the local Aboriginal Legal Service (target groups youth and ATSI) supporting access to BOiMHCI program. Program further developed with several GPs taking on youth/ATSI who presently don't have their own GP.</li> <li>• Number of practices utilising an RRR system has increased for this reporting period.</li> </ul>
Notable challenges and key contributing factors	<ul style="list-style-type: none"> <li>• There continues to be very limited access to mental health services in the region.</li> <li>• Issues continue for the GPs in initiating the SIP payment. Patients often do not return for the review process as they 'feel well'. The Division has been supporting practices to implement an RRR system at Practice level.</li> </ul>
What did the Division learn from the strategic approaches used?	<ul style="list-style-type: none"> <li>• Further support for General Practices in establishing effective RRR systems for the review process is required.</li> <li>• Through discussion and the developing of partnerships with Mission Australia and the local Aboriginal Legal Service (target groups youth/ATSI) it was necessary to provide clinical FPS services from venues within these groups comfort zones.</li> <li>• The majority of the youth ATSI clients do not have a regular GP. A register has been developed to identify GPs willing to take on new patients in these target groups.</li> </ul>
How were community needs met?	Partnerships have been developed with Mission Australia and the local Aboriginal Legal Service to support an increase in the ATSI and youth target groups access to General Practice, mental health support and links to other initiative i.e. CDM.
Recommendations	<ul style="list-style-type: none"> <li>• Level one training / workshops to continue.</li> <li>• Continue local initiatives to increase community awareness of access to mental health services in the region.</li> <li>• Continue providing support to GPs with establishing RRR systems.</li> </ul>