Were the budgetary reforms to the Better Access to Mental Health Care initiative appropriate? — No

Mental health policy expert Sebastian Rosenberg and psychiatrist Ian Hickie want more change

The Australian Government had little option but to reform the Better Access to Mental Health Care initiative in the federal Budget. The surprise is their timidity. The changes reduce some of the bureaucracy and waste while promoting more targeted services for those in greatest need.

Better Access was the largest single component of the Council of Australian Governments’ 2006 National Action Plan on Mental Health, and has been likened to a runaway giant, already costing more than three times its initial 4-year estimate of $538 million, or more than $10 million each week.

The focus of the federal government’s changes are GP Mental Health Care Plans. Under pressure from doctors, Better Access removed the requirement for the collaborative, interdisciplinary approach embodied in the earlier Better Outcomes in Mental Health program, despite repeated positive evaluations. The professions championed shifting their role in primary mental health care to fee-for-service, a model of payment shown to be ineffective in generating collaborative care.

The Better Access program suggests that, after several sessions of psychological therapy, patients return to their general practitioners for review of their mental health care plans. Latest data indicates that this is happening for only one in every three plans written. The number of GP Mental Health Care Plans prepared by GPs (Medicare Item 2710) has also declined significantly over the past 12 months. Twenty per cent of all Better Access clients are now having their psychological therapy, patients return to their general practitioners for review of their mental health care plans.

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There is a clear role for GPs in coordinating genuine primary mental health care. At present, that role is largely vacant. The timing is right for the professions to abandon self-interest and argue for a planned, evidence-based overhaul of the Better Access program.

Competing interests: Ian Hickie is a board member of headspace: Australia’s National Youth Mental Health Foundation and a member of the clinical reference group for the BUPA Australia group. He has also been a member of the National Advisory Council on Mental Health.

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References

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