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Australian Government Department of Health
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To whom it may concern

The Royal Australian College of General Practitioners (RACGP) thanks the Department of Health for the opportunity to comment on the draft Fifth National Mental Health Plan.

Priority areas

The RACGP is satisfied with the national priority areas outlined in the draft Fifth Plan. These themes set an appropriate agenda for government action over the next five years. Change in each of the designated areas will require a coordinated approach led by the Federal Government. Recognition of those issues in the Plan is a positive step towards change.

Alignment with mental health reforms

The draft Fifth Plan could be improved by demonstrating how the actions under the priority areas align with the reforms outlined in the *Australian Government Response to Contributing Lives, Thriving Communities – Review of Mental Health Programmes and Services*. The RACGP is concerned that the vision for the sector described by the Government in the Response is undermined by a lack of discussion in the draft Fifth Plan about how those reforms will be implemented. The language of the draft Fifth Plan is not couched in the context of those reforms.

The draft Fifth Plan is unsuccessful in articulating the Government's vision for its proposed stepped care model. There is continuing uncertainty about who will provide care to which groups of patients under this model and the evidence that is informing its design. Concerns remain about the safety and quality of services that will be provided to patients under this model, and whether patients will receive timely care that meets their needs.

Linked to this is the absence of any mention of the Digital Mental Health Gateway, a cornerstone of the reforms outlined in 2015, in the draft Fifth Plan. The lack of discussion around the development of the Digital Gateway in the draft Fifth Plan is a significant shortcoming. More work needs to be done to ensure that this important initiative will integrate safely with existing, well-established care pathways such as that of general practice.

Central role of the GP

In its current form the Fifth Plan fails to recognise the key role that GPs play in providing and coordinating mental health services in Australia, as outlined in the RACGP's recently released *Position statement on mental health care in general practice* (available at www.racgp.org.au/support/policies/clinical-and-practice-management/).



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The position statement underlines the benefits of a GP-led patient-centred medical home model, in which an individual has an ongoing relationship with one general practice that coordinates that person's care. It notes that general practice is an ideal setting to manage an individual's mental health needs in that a GP can assess these in conjunction with that person's physical health needs. Given that improving the physical health of people with mental health issues is identified as a priority in the draft Fifth Plan, it is of concern that there is no discussion about the implementation of a medical home model that can help meet this need.

The RACGP's position statement also refers to the need for reform of payment systems such as the Medicare Benefits Schedule (MBS) to better reflect the time GPs spend in caring for patients with a mental health issue. The issue of MBS reform is not given any treatment in the draft Fifth Plan, signalling a worrying lack of government interest in supporting GPs to help mentally ill patients.

Over the last ten years, the role of GPs in delivering mental health care has grown considerably. The RACGP is keen to see the Government build upon the achievements of previous National Mental Health Plans. The current draft misses an opportunity to consolidate that work during a time of great change within the mental health sector. More work is needed to strengthen the Fifth National Mental Health Plan.

Yours sincerely

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President