

15 May 2019

Ms Rosemary Dickson  
Network Coordinator  
AMHOCN  
Mental Health – HETI  
Locked Bag 7118  
Parramatta BC NSW 2124  
E: [rosemary.dickson@health.nsw.gov.au](mailto:rosemary.dickson@health.nsw.gov.au)

Dear Ms Dickson,

**Re: National Mental Health and Suicide Prevention Information Priorities 3<sup>rd</sup> edition**

The Royal Australian College of General Practitioners (RACGP) thanks the Australian Mental Health Outcomes and Classification Network (AMHOCN) for the opportunity to provide feedback on the draft *National Mental Health and Suicide Prevention Information Priorities 3rd edition*.

The RACGP's response covers the following:

1. The role of GPs in mental health care
2. Recommendations on data to be collected

**1. The role of GPs in mental health care**

As recognised in the document, GPs are often the first point of call for people seeking help with a mental illness. Approximately 88% of the Australian population visit their GP each year. Psychological issues (including depression, mood disorders and anxiety) are the most common health issue managed by GPs in the Australian population.<sup>1</sup> GPs play an important role in identifying people at risk of suicide, ensuring patients get the right help at the right time. This is especially important in rural and regional areas, where there may be limited availability of mental health specialists<sup>2</sup>.

As such, the RACGP agrees that activities and outcomes in relation to GPs delivering mental health services should be key areas for information development.

**2. Recommendations on data to be collected**

The RACGP recommends that collection of the following data will assist in planning, delivery and evaluation of mental health services.

- **Cardiovascular risk** – Cardiovascular disease is the main potentially avoidable contributor to early deaths in patients with severe mental illness.<sup>3</sup> It is therefore important that data on key cardiovascular risk factors is collected for people with severe mental illness.
- **Talking therapy outcome measures** – Outcomes related to the number of occasions talking therapies are provided should be monitored. This will help assess the optimal amount of talking therapy required for a successful patient outcome.

- **Distribution and access to mental health services** – The distribution and access to mental health services data should be collected and monitored as part of planning for services. This should include data on patient access to psychiatric services.
- **Employment data and independent living data** – This will provide additional and overall information to assist in comprehensively assessing outcomes of mental health patients.
- **Components of collaborative care** – Collaborative care models (planned, proactive and team-based care) offer great scope for system wide improvements. Identifying the components of exemplar collaborative care models that are operating in general practice will be highly valuable.
- **Data should sit with AIHW** - Data should intersect with, or sit within, the Australian Institute on Health and Welfare's Primary Care Data Asset, given that the vast majority of services are provided in primary care.

The RACGP once again thanks the Australian Mental Health Outcomes and Classification Network for the opportunity to comment. If you have any further queries please contact Mr Stephan Groombridge, Manager, e-Health and Quality Care on (03) 8669 0544 or at [stephan.groombridge@racgp.org.au](mailto:stephan.groombridge@racgp.org.au)

Yours Sincerely



**Dr Harry Nespolon**  
President

## References

1. The Royal Australian College of General Practitioners. General Practice: Health of the Nation 2018. East Melbourne, Vic: RACGP, 2018.
2. The Royal Australian College of General Practitioners. Mental health care in general practice. East Melbourne, Vic: RACGP, 2016.
3. Correll, C.U., Solmi, M., Veronese, N., Bortolato, B., Rosson, S., Santonastaso, P., Thapa-Chhetri, N., Fornaro, M., Gallicchio, D., Collantoni, E., Pigato, G., Favaro, A., Monaco, F., Kohler, C., Vancampfort, D., Ward, P. B., Gaughran, F., Carvalho, A. F. and Stubbs, B. (2017), Prevalence, incidence and mortality from cardiovascular disease in patients with pooled and specific severe mental illness: a large-scale meta-analysis of 3,211,768 patients and 113,383,368 controls. *World Psychiatry*, 16: 163-180. doi:10.1002/wps.20420