## Carmen Zhang

Christopher Harrison Helena Britt Janice Charles

# **Focussed Psychological** Strategy encounters in general practice

## **Keywords**

general practice; mental health



In November 2001, Focussed Psychological Strategy (FPS) Medicare item numbers were created under the Better Outcomes in Mental Health Care initiative to reimburse general practitioners trained in the provision of evidence based psychological therapies.

From 2003-04 to 2011-12 in the BEACH (Bettering the Evaluation and Care of Health) program, information was collected on 879 400 encounters from 8794 GPs. At least one psychological problem was managed at one in 9 encounters (n=103,334; 11.8%) by 8716 GPs (99.1%). Medicare item numbers for the provision of FPS were claimed at only 153 encounters (0.15% of psychological encounters) by 57 GPs.

Female GPs manage more psychological problems than their male counterparts<sup>1</sup> but there was no significant difference between male and female GPs in the proportion of psychological encounters where an FPS Medicare item number was claimed.

The rate at which FPS Medicare item numbers were claimed was significantly higher at encounters with patients aged 15-24 years, 25-44 years and 45-64 years, than at encounters with patients aged 65 years and older (Figure 1). There was a trend for FPS Medicare item numbers to be claimed more often at encounters with patients from a major city, and with patients from an English speaking background (ESB) but this was not statistically significant, possibly due to the small sample size.

Psychological problems accounted for 76.6% of all problems managed at FPS encounters. The most common problem managed was depression (38.5%), followed by anxiety (10.0%), acute stress reaction (3.9%), affective psychosis (3.9%) and chronic alcohol abuse (3.0%).

Table 1 shows the types of management provided for psychological problem(s) at FPS encounters apart from psychological counselling, which is required at all FPS encounters. Medications were commonly prescribed, with antidepressants accounting for almost two-thirds (64.4%) of all medications recorded by GPs for psychological problems at these encounters. Most referrals for psychological problems at these encounters were to psychologists and psychiatrists.

Psychological problems are commonly managed in general practice but FPS Medicare item numbers are rarely being claimed by GPs for encounters where psychological problems are managed.

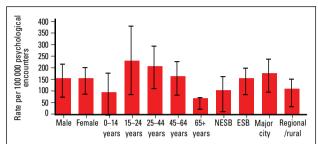


Figure 1. Patient characteristic rate of Focussed Psychological Strategy items claimed per 100 000 psychological encounters with 95% confidence intervals

## Table 1. Management provided at FPS encounters

Management types	Rate per 100 FPS encounters (n=153)
Medications	47.7
Antidepressants	30.7
Medications for drug addiction	4.6
Antipsychotics	3.9
Referrals	10.5
Psychologist	4.6
Psychiatrist	2.0

#### **Authors**

Carmen Zhang, Christopher Harrison, Helena Britt and Janice Charles, Family Medicine Research Centre, University of Sydney, New South Wales. Conflict of interest: none declared.

## **Acknowledgements**

The authors thank the GP participants in BEACH and all members of the BEACH team. Funding contributors to BEACH from April 2003-04 to April 2011 to March 2012: Abbott Australasia Pty Ltd; Australian Government Department of Health and Ageing; AstraZeneca Pty Ltd (Australia); Bayer Australia Ltd; CSL Biotherapies Pty Ltd; GlaxoSmithKline Australia Pty Ltd; Janssen-Cilag Pty Ltd; Merck, Sharp and Dohme (Australia) Pty Ltd; National Prescribing Service Ltd; Novartis Pharmaceuticals Australia Pty Ltd; Pfizer Australia; Roche Products Pty Ltd, Sanofi-Aventis Australia Pty Ltd; Wyeth Australia Pty Ltd.

### Reference

1. Harrison CM, Britt HC, Charles J. Sex of the GP–20 years on. Sydney: Med J Aust 2011;195:192-6.

correspondence afp@racgp.org.au