

Contributing Lives, Thriving Communities

AHHA Mental Health Network

Commissioning: Leading Change

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March 2016



Australian Government
National Mental Health Commission

“ To avoid duplication of services and ensure local needs were met... a fully integrated primary health care service system based upon the identified and agreed needs of their local communities; thereby cutting out duplication and waste and targeting those most in need.”

De-identified Medicare Local

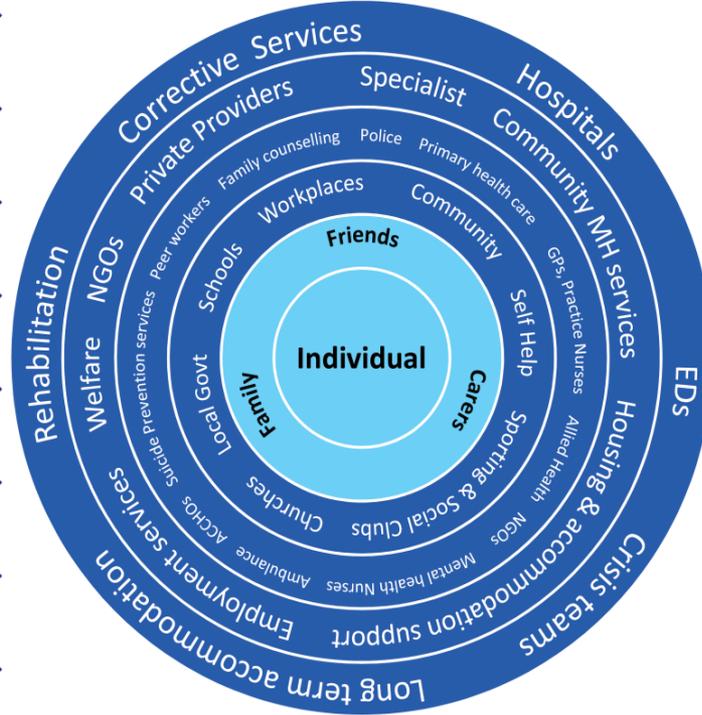
Key principles underpinning review recommendations

1. People with lived experience, their families and other support people are engaged and involved at all levels — “nothing about us without us”.
2. Person (and family) centred design principles: holistic, and inclusive – contributing lives, thriving communities (Social determinants).
3. A new system architecture – national leadership with regionally/locally co-designed and implemented responses.
4. Stepped care matched to need – focus on populations, with particular focus on a healthy start to life.
5. Shift focus to more efficient and effective “upstream” services and supports – prevention, early intervention and recovery.
6. Realise productivity and economic growth opportunities.

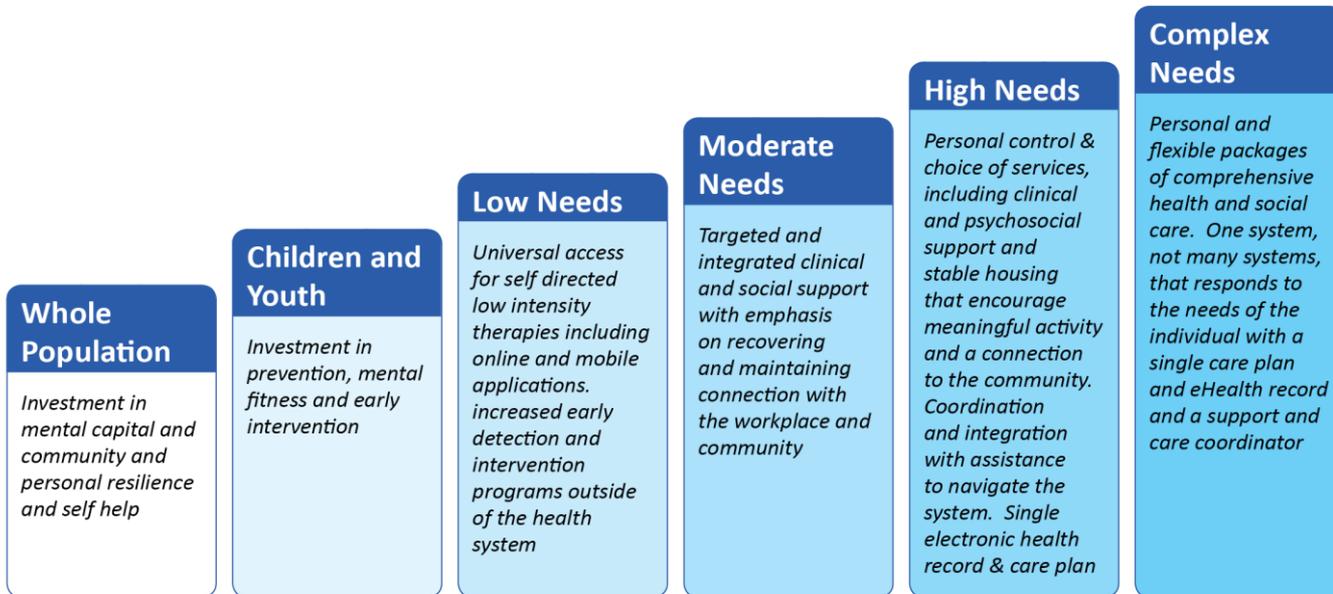
Design of a person-centred approach

BUILDING BLOCKS

- Funding Models:
 - Public: MBS, PBS, ABF, Welfare Benefits, Programme grants, private incentives
 - Private: PHI, Self funded, commercial & social investments
- Workforce training, development & distribution
- E-mental health & information systems
- Performance targets, indicators & data
- Planning & governance
- Research & evaluation
- Legislation
- Regional integration



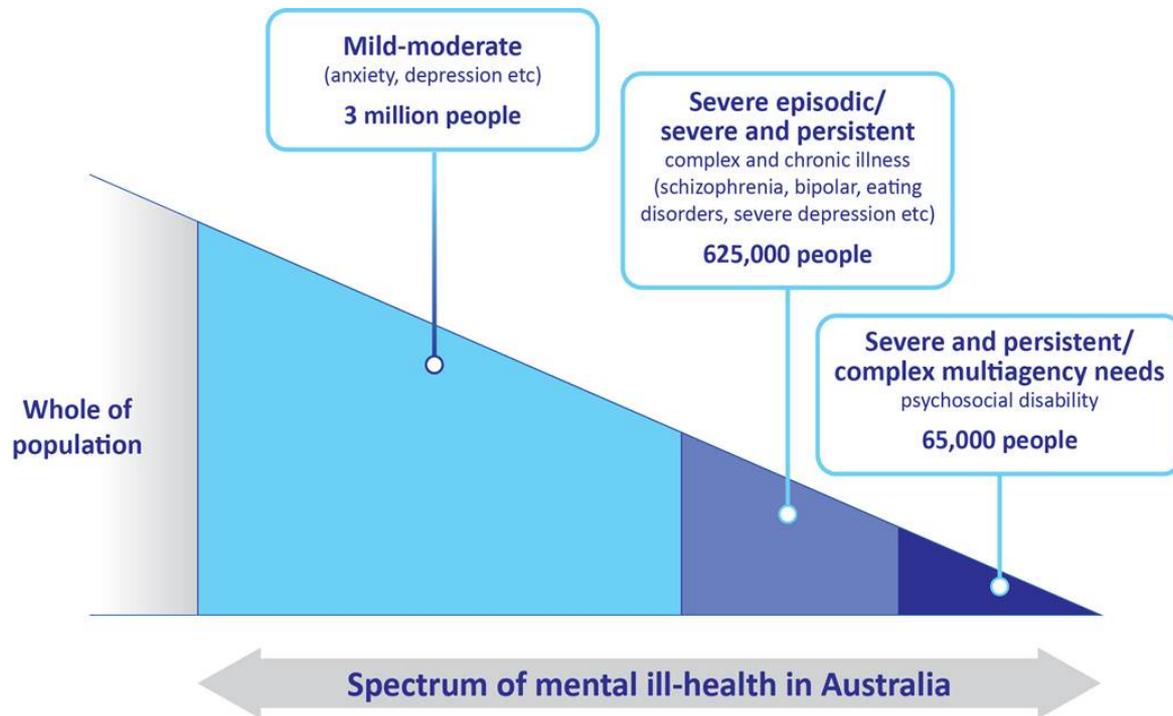
Stepped care, where services are matched to individual need



“ ... evidence-based early childhood programs [...] are the key to the primary prevention of both mental and physical illness and will save the community a lot of funding in the future in terms of jail, supported accommodation, employment etc.”

Central Australian Aboriginal Congress

Annual distribution of mental ill-health in Australia



“ (Responding to what works?) Support in terms of encouragement and friendly social support to feel you are once again part of the community. Goal setting, talking about the future, motivation. Lack of patronising and a certain amount of expectation of improvement in the situation.”

Person with lived experience, Western Australia

Commonwealth role: National leadership, regional integration

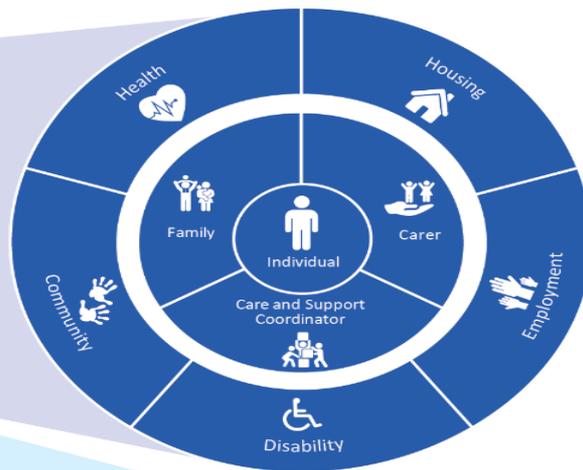
Nationally directed,
with services
delivered regionally



Regionally based
and funded services
Integrated Care Pathways
for Mental Health



National direction:
Self-care, individual resilience, and
community support and prevention



Web and
application-based self
directed therapies



Investment
to support
families and
children

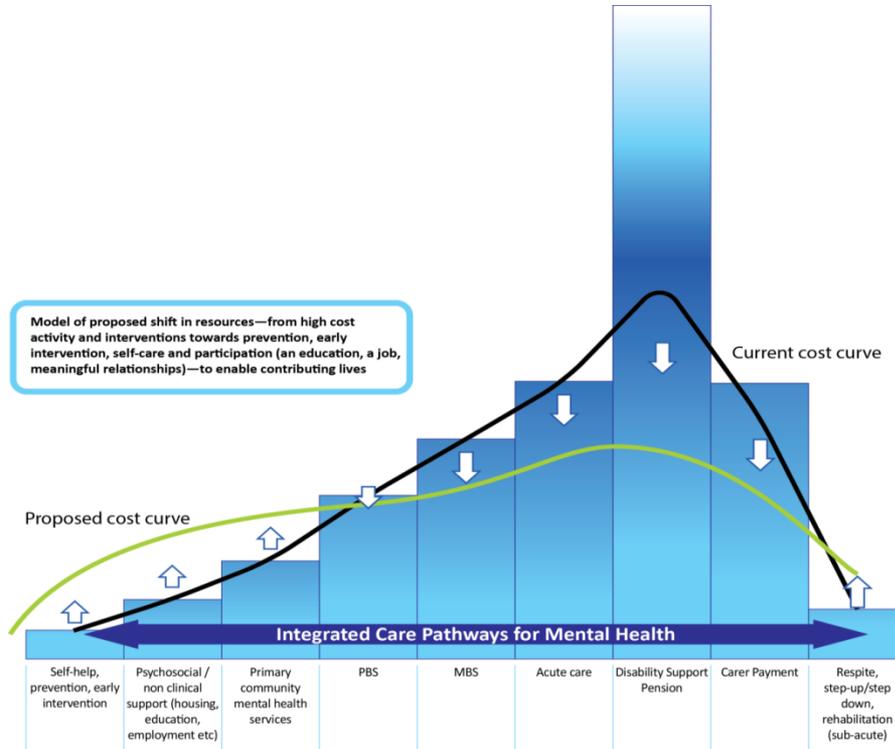


Stepped care: cost
effective care related
to individual needs

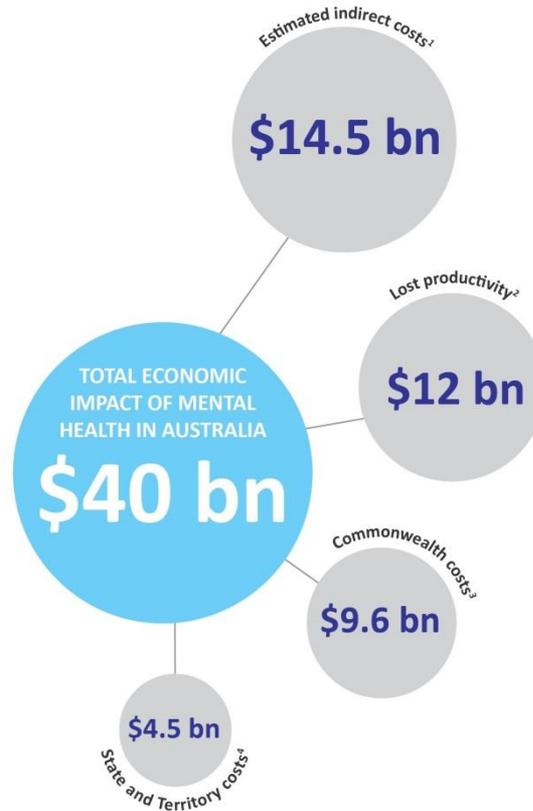


Build environments that
encourage better mental
health—mandated role
for schools and
workplaces

Model of proposed shift in resources



Economic impact



1 Estimate based on AIHW (2014) and Medibank and Nous Group (2013); 2 Harvey et al (2014); 3 NMHC (2014); 4 AIHW (2014)

Government response – six platforms

- Person centred care
- Planning and integration of services at a regional level
- Delivering services within a stepped care approach, to better target services to meet individual and local needs
- Effective early intervention across the lifespan
- Strengthened national leadership to support systemic change
- Making optimal use of digital mental health services

Government response - key changes

- Services to be commissioned, not delivered, through PHNs
- Coordinated packages of care for people with severe and complex needs and flexible support for people with mild and moderate needs
- A new approach to suicide prevention, coordinated by PHNs
- Changes to headspace model – integrate and act local
- Develop 5th National Mental Health and Suicide Prevention Plan
- Integrated ATSI mental health & social and emotional wellbeing services
- Single digital gateway
- Joined up support for child mental health

Challenges for PHNs – to operate as smart commissioners of integrated delivery systems

- Change management
- From purchasing and procuring to commissioning
- Promote innovation, change models of care, improve quality, reduce unnecessary variation, identify priorities, achieve value for money
- Requires engagement with people with lived experience, their families and other support people

Smart commissioning

- Also with those involved at front line in delivering services: clinicians, NGOs, other stakeholders to determine outcomes to be achieved
- Accountability then tied to achievement of outcomes agreed by consumers, carers, service providers
- Achieving vision may require building a market capable of delivering desired models of care and outcomes
- Identify skills gaps and work with providers to fill gaps eg. through practice development plans/practice support

Challenges for PHNs

- Build trust and mutual respect
- Ensure a person-centred approach
- Regional equity – quality and standards
 - Eg. Australian Atlas of Healthcare Variation
- Dispensing of antipsychotics to under 17s:
 - Rate per 100,000 22.5 times variation between local areas
 - 7.1 times variation after excluding highest and lowest

Challenges for PHNs2:

- Rebalance system upstream to stepped care including promotion, prevention, early intervention and recovery
- Act locally
- Establish the investment logic for mental health and wellbeing
- Ensure evaluation is built into contracts as part of the service offering
- Go beyond diagnosis to focus on functional impairment
- Undertake needs assessment and develop population health plans – not just health

“ Applying for jobs and going to interviews is stressful for anyone, but when you have anxiety it feels almost impossible. I know that if someone would just give me a chance that I am as capable as anyone else. I think that's why more emphasis should be placed on creating opportunities for job seekers with mental health problems, rather than throwing them in the pool with everyone else out there who is also looking for a job. .

Person with lived experience, Queensland

Where to from here?

- 5th National Mental Health (and Suicide Prevention) Plan
- Mental Health Reform structures eg. Stakeholder advisory group
- Ongoing role for National Commission includes
 - Monitoring and reporting on performance, reforms, 5th Plan
 - Supporting PHNs in implementation of reforms
 - Consumer and carer engagement, strategic/translational research, cross sectoral/cross agency coordination and advice, strengthened role on suicide prevention

But in a large part it is over to you
- Seize the opportunity