Fact Sheet 10 – What this means for access to services according to need – stepped care

Key issues

- Resources in the mental health system should be allocated according to need, to eliminate waste and promote efficiency.

- A stepped care model aims to provide a match between individual need and supply. Stepped care services range from low and no-cost options for people who are generally healthy or at low risk, to wrap-around services for people with severe and persistent mental ill-health to enable them as far as is possible to live contributing lives in the community.

- Elements of the stepped care approach include building capacity for children and youth; and integrating physical, mental, social and emotional health and wellbeing within General Practice and primary health care.

- Providing individuals, families and communities with the tools they need to safely and confidently use self-care and take preventive steps to look after their own wellbeing also can also reduce pressure on other parts of the system and free up resources to be used to treat more people.

- In many cases, these approaches will prevent people from needing services in the first place, which in turn will enable more efficient allocation of resources. The ultimate objective is to help people and families avoid the experience of mental ill-health and the personal and financial cost this often entails.

- It also enables more effective and efficient use of resources, and supports a more productive economy with higher participation in education and employment.

Key responses

- The Commission proposes reforms and incentives to match services to different levels of need, from no or low cost/low intensity interventions to higher level clinical and non-clinical support. These include:
  - a more integrated and coordinated role for eMental health solutions—readily accessible services where consumers and organisations can easily navigate the system, with guided support and decision making
  - strengthening the central role of GPs in mental health care by:
    - Promoting use of evidence-based guidelines which support a stepped-care approach;
    - Changes to the Practice Incentives Programme (PIP) to promote quality mental health services in general practice;
    - Including a mental health assessment in Medicare Benefits Schedule (MBS) Health Assessment Items; and
    - Establishing a first phase rollout of Medical Homes for Mental Health.
- enhancing access to the Better Access Programme for those who need it most through changed eligibility and payment arrangements and a more equitable geographical distribution of psychological services; and
- introducing incentives to include pharmacists as key members of the mental health care team by allocating a percentage of the new 6th Community Pharmacy Agreement as reward payments to pharmacists who work as partners in the primary mental health team and including pharmacists under the existing Practice Nurse Incentive Programme payment arrangements.

**Stepped care, where services are matched to individual need**

Adapted from The Case For Mental Health Reform in Australia: a Review of Expenditure and System Design, Medibank Private and Nous Group (2013)