CEO COMMENTARY

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The Integrated Atlas of Mental Health

https://ahha.asn.au/system/files/docs/publications/150803_august_15_tha_fa_web_view.pdf

A new visual tool evidence-informed planning

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During the last 30 years, considerable structural changes have been made in the Australian mental health system, including the closure or downsizing of many large psychiatric hospitals and the development of community mental healthcare. However, this journey has not been completed and application of reform has been patchy. For example, the Australian mental health system still has high rates of readmission to acute care, high rates of compulsory community treatment orders, and high rates of seclusion. These features are associated with a system characterised by fragmented, hospital-based, inefficient provision of care. It has been argued that we lack a clear service model, that reform has not been adequately informed by evidence, and that there are marked inequities in the geographical accessibility to care.

In this context, it is crucial to provide policy and service decision-makers with every tool and opportunity to make better, more intelligent choices about future investments in mental healthcare, including which services are needed and where, as well as how they can be most effectively delivered. Integrated Atlases of Mental Health include maps and graphics as a main visual form of presenting the data and are ideal tools to help planners in this process.

They allow policy planners and decision-makers to understand the landscape in which they work (including areas of gap or over-supply), make bridges between the different sectors and to better allocate services. This is particularly important as mental health services become more person-centred (placing the person and their needs at the centre of their care) and public investment focuses on care coordination programs such as Partners in Recovery (PIR) or the National Disability Insurance Scheme (NDIS).The need for a better knowledge of the local area motivated Western Sydney Partners in Recovery to fund the development of the Integrated Mental Health Atlas of Western Sydney, developed by a consortium of experts from the University of Sydney, University of Wollongong, Western Sydney University and the

Progressing Health Now

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local public agencies in Western Sydney. The Atlas uses a standard classification system, the Description and Evaluation of Services and Directories in Europe for long-term care (DESDE-LTC) model, to map the services.

The use of an internationally agreed common language has allowed us to compare the pattern of mental healthcare provided in Western Sydney with regions in Europe and, eventually, with other regions in Australia. These comparisons are not intended to replicate service delivery models implemented elsewhere but to provide relevant contextual information to better understand the local pattern of care delivery.

The Integrated Atlas of Western Sydney indicates that there is a structural problem in the construction of the public mental health system, as basic components of the community care model. If these core components are not available, the system may not show significant improvement regardless of the resources devoted to increase coordination and to the implementation of care programs for specific groups (e.g. suicide prevention in youth and adolescents, perinatal depression, early psychosis, and so on). The critical areas to be developed for system improvement which have been identified by the Atlas are:

- Alternatives to hospitalisation including residential facilities in the community (e.g. crisis housing) as well as high-intensity acute day care (e.g. Day Hospitals).

- Health-related non-acute day care centres staffed with highly skilled mental health professionals that can focus on recovery oriented rehabilitation. These centres promote social inclusion by providing the opportunity to socialise, while also offering training in skills related to the development of strategies both to manage their condition (e.g. stress management) and day to day activities of living.

- Scope and amount of specific services related to employment for people with a lived experience of mental ill-health. Other alternatives, such as 'social firms' or 'social enterprises', should also be implemented.

- Improve the information on public and community housing for those experiencing mental health problems to allow better planning.

These core components should be combined with a change in the culture of care at local level. This change should include a move from a reactive to a proactive system, with an increase of the overall robustness of the system which implies the provision of long-term funding mainly for the NGO sector, which could stabilise operations and allow for long-term planning. It should also incorporate systems thinking into policy and planning to encourage the development of an integrated mental health model of care.

The Integrated Atlas of Mental Health in Western Sydney fills an information gap in the current analysis of mental healthcare in Australia. The National Review of Mental Health Programmes and Services called for "comprehensive mapping of mental health services, programmes and supports available in regional, rural and remote areas through Commonwealth, state and territory and local governments, private and not-for-profit sectors."It recommended: 1) to develop more community-based psychosocial, primary and community mental health services, as alternatives to acute hospital care; and 2) to boost the role and capacity of NGOs and other service providers to provide more comprehensive, integrated and higher-level mental health services.

The atlases of mental healthcare may harness local evidence to change the mental health system, for the benefit of all of our fellow community members experiencing mental ill-health.

For more information on the Integrated Atlas of Mental Health Care in Western Sydney, go to: http://www.wentwest.com.au/component/k2/item/473-mental-health-atlas-of-western-sydney

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References

1. Zhang, J.Y.; Harvey, C. and Andrew C. (2011). Factors associated with length of stay and the risk of readmission in an acute psychiatric inpatient facility: a retrospective study. Australian & New Zealand Journal of Psychiatry 45(7): 578-85.

2. Light, E.; Kerridge,I.; Ryan, C. and Robertson, M. (2012). Community treatment orders in Australia: rates and patterns of use. Australasian Psychiatry 20(6): 478-82.

3. Australian Institute of Health and Welfare (2014).Mental health services—in brief 2013. Canberra: AIHW, 2014.

4. Mendoza, J. et al (2013). Obsessive Hope Disorder: Reflections on 30 years of mental health reform in Australia and visions for the future. Caloundra, QLD: ConNectica.

5. Salvador-Carulla, L. et al (2013). Evaluation of an integrated system for classification, assessment and comparison of services for long-term care in Europe: the eDESDE-LTC study. BMC Health Services Research 13(218): http://www.biomedcentral.com/1472-6963/13/218

6. National Mental Health Commission (2014). Report of the National Review of Mental Health Programmes and Services. Canberra: Australian Government.

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About WentWest

WentWest was established in 2002 to provide the Australian General Practice Training (AGPT) program for general practice vocational training in western Sydney. WentWest has a team of experienced medical educators who are all in active general practice and assist registered doctors to become vocationally registered general practitioners.

WentWest's focus on providing better health care in the community was strengthened with its appointment as a Tranche 1 Medicare Local in July 2011 to now operating as the Primary Health Network. WentWest has built on its experience as a Division of General Practice in supporting GPs and their practices, connecting health services to meet local needs, and striving for better health outcomes for western Sydney.

The population living in western Sydney is culturally, linguistically and socio-economically diverse, and we also have the largest urban Aboriginal community in Australia. WentWest works closely with doctors, allied health professionals, the Local Health District and many others to improve the coordination of local health and human services for these patients and their families.

WentWest has partnered with the Western Sydney Local Health District and the Aboriginal Medical Service Western Sydney to address the common health priorities within the region through joint planning, capacity building, programs and strategies. This work is critical to building a better primary health care system that the evidence shows is fundamental if we are to reduce this burden of disease and keep people out of hospital.

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