

Evaluation of the Better Access initiative

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STRATEGIC DATA

Better Access

- Introduced in November 2006
- Enables consumers to receive a specified number of Medicare-reimbursable sessions of mental health care from an allied health professional (on referral from a GP who completes a Mental Health Treatment Plan), or sessions of mental health care from the GP him/herself
- Modified in recent Federal Budget:
 - Reduction in permissible number of sessions with allied health professionals
 - Introduction of two-tier rebate for GP Mental Health Treatment Plans

Evaluation

Drew on 20 different data sources to answer a range of questions about the appropriateness and effectiveness of Better Access:

| | |
|---|---|
| 1 & 2. Components A and A.2: Studies of consumers and their outcomes | 12. Independent analyses of service-level MBS data |
| 3. Component B: Analysis of Medicare Benefits Schedule (MBS) and Pharmaceutical Benefits Scheme (PBS) data | 13. The Bettering the Evaluation and Care of Health (BEACH) program |
| 4. Component C: An analysis of allied mental health workforce supply and distribution | 14. A study of uptake of Better Access item numbers by women |
| 5. Component D: Stakeholder consultations | 15. Australian Psychological Society (APS) surveys of members |
| 6. Component E: Evaluation of main education and training projects | 16. Independent surveys of occupational therapists |
| 7. Component F: An analysis of the 2007 National Survey of Mental Health and Wellbeing (NSMHWB) | 17. Independent survey of psychologists |
| 8. Independent analyses of the 2007 NSMHWB, including comparisons with the 1997 NSMHWB | 18. APS survey of consumers |
| 9. Relevant DoHA documentation | 19. A study of outcomes for consumers seen by psychologists through Better Access |
| 10. Post-implementation review of Better Access | 20. A study of outcomes for consumers seen by occupational therapist through Better Access |
| 11. Australian Institute of Health and Welfare (AIHW) analyses of service-level and patient-level MBS data | |

Component A: A study of consumers and their outcomes

- Novel methodology under which participating psychologists, GPs (and psychiatrists) recruited consumers when they first presented for services via the Better Access item numbers
- Consumers were followed during the course of their care, and their outcomes monitored
- Primary data were collected via a password-protected minimum dataset (provider-level, consumer-level, session-level)
- Supplementary data were collected via telephone interviews with providers and consumers

Actual and target samples of providers

| | Approached | Recruited | Retained (i.e., did not actively withdraw) | Participated | Original target | Revised target |
|-----------------------------|------------|-----------|---|--------------|--------------------|-------------------|
| Clinical psychologists | 509 | 77 | 57 | 41 | 20 | 40 |
| Registered psychologists | 640 | 81 | 73 | 49 | 20 | 40 |
| GPs | 1,280 | 125 | 90 | 39 | 40 | 160 |
| TOTAL | 2,429 | 283 | 220 | 129 | 80 | 240 |

Actual and target samples of consumers

| | Recruited, retained and participated | Original target | Revised target |
|----------------------------------|--------------------------------------|-----------------|----------------|
| Seen by clinical psychologists | 289 | 100-200 | 200-400 |
| Seen by registered psychologists | 317 | 100-200 | 200-400 |
| Seen by GPs | 277 | 200-400 | 800-1,600 |
| TOTAL | 883 | 400-800 | 1,200-2,400 |

Nature of participation by providers

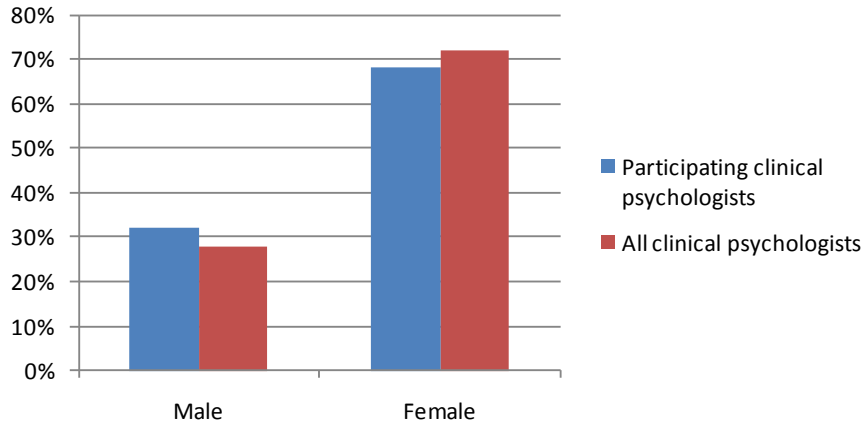
| | Recruited consumers and entered data into minimum dataset | Provided views on delivering care through Better Access | | |
|---------------------------------|---|---|------------------|------------|
| | | Took part in interview | Completed survey | Total |
| Clinical psychologists (n=40) | 40 | 39 | 0 | 39 |
| Registered psychologists (n=48) | 48 | 44 | 1 | 45 |
| GPs (n=39) | 39 | 31 | 1 | 32 |
| TOTAL (n=127) | 127 | 114 | 2 | 116 |

Nature of participation by consumers

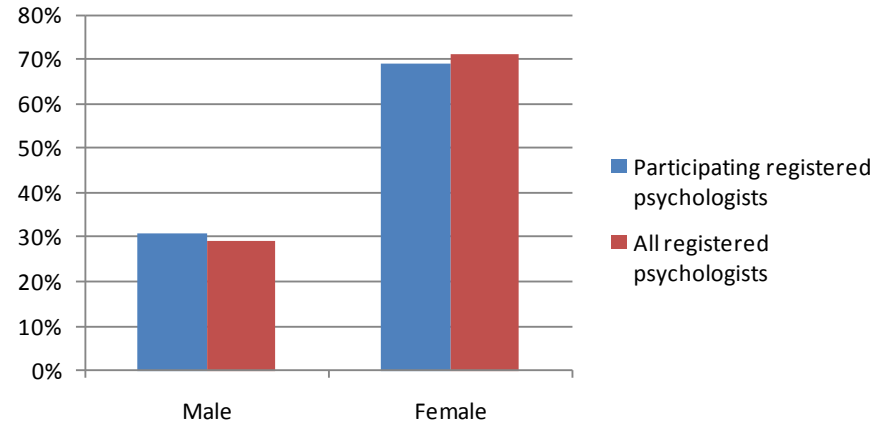
| | Had relevant socio-demographic, clinical and treatment data entered into minimum dataset | Had pre- and post-treatment outcome data entered into minimum dataset | Provided views on receiving care through Better Access | | |
|--|--|---|--|------------------|------------|
| | | | Took part in interview | Completed survey | Total |
| Seen by clinical psychologists (n=289) | 289 | 205 | 112 | 21 | 133 |
| Seen by registered psychologists (n=317) | 317 | 208 | 136 | 16 | 152 |
| Seen by GPs (n=277) | 277 | 177 | 104 | 17 | 121 |
| TOTAL (n=883) | 883 | 590 | 352 | 54 | 406 |

Providers: Gender

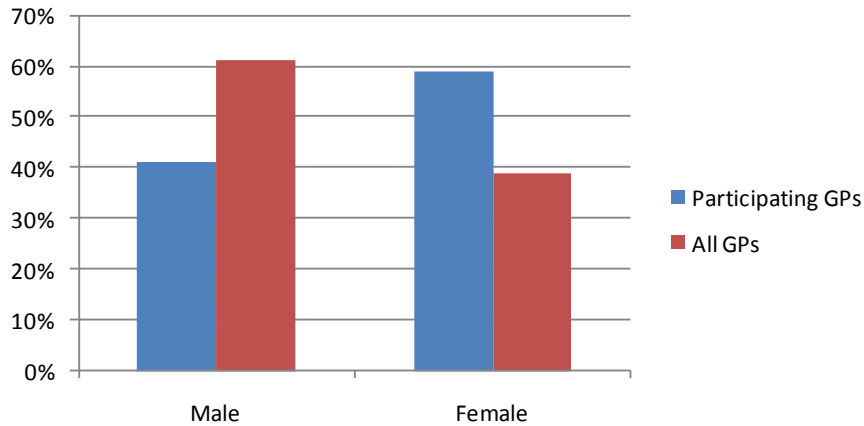
Clinical psychologists



Registered psychologists

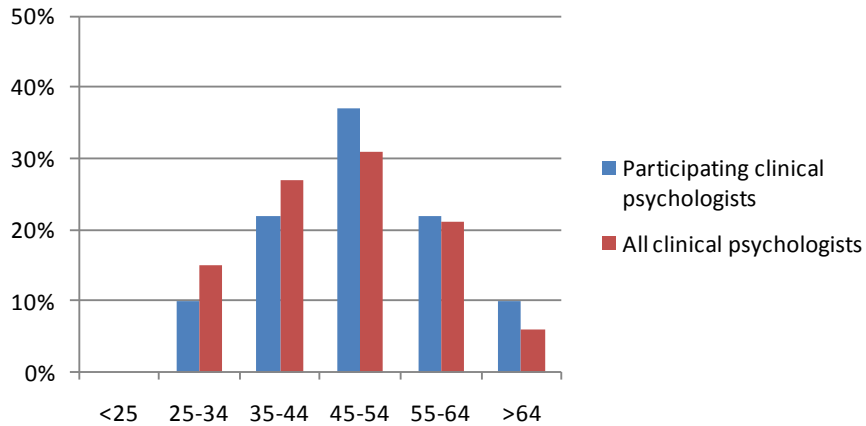


GPs

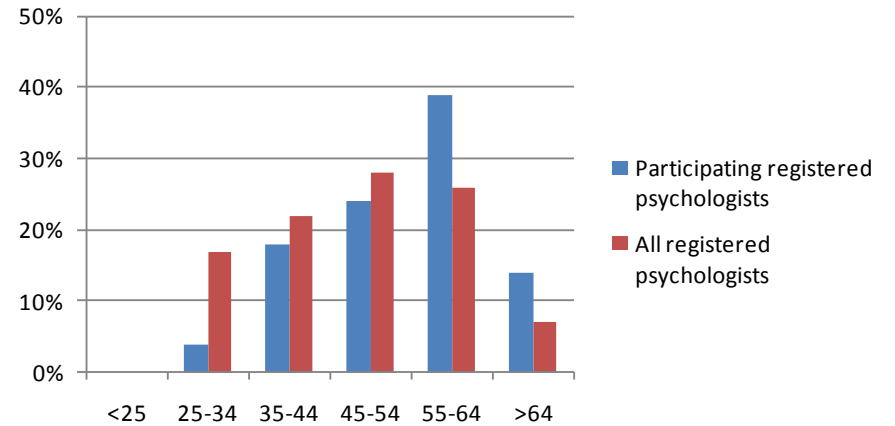


Providers: Age

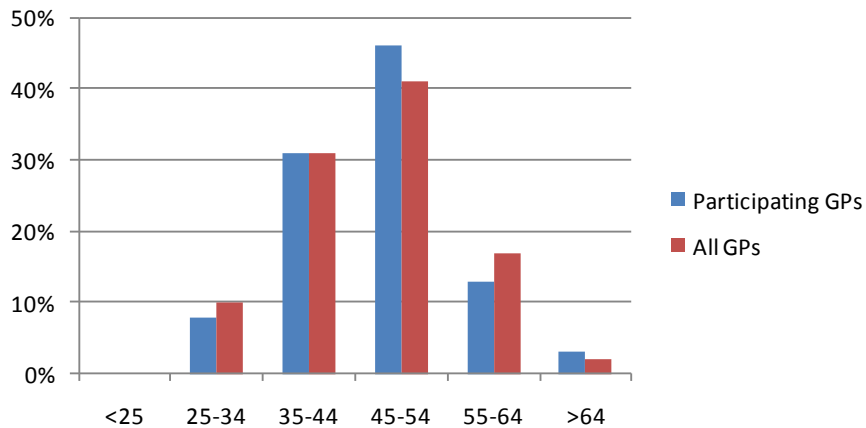
Clinical psychologists



Registered psychologists

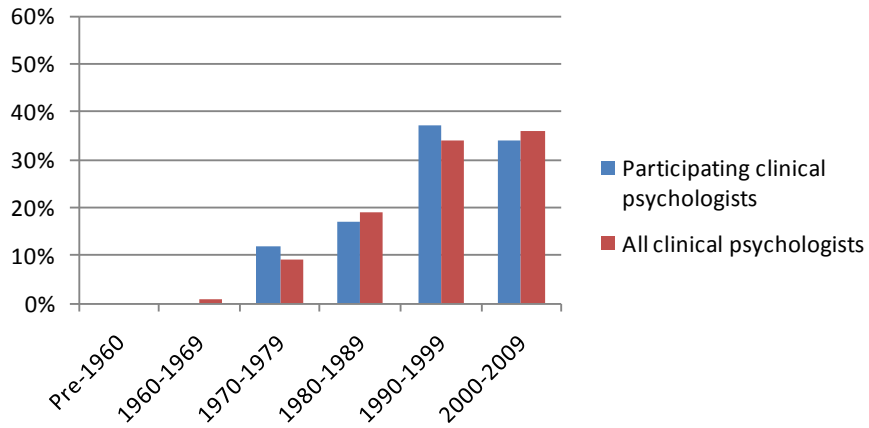


GPs

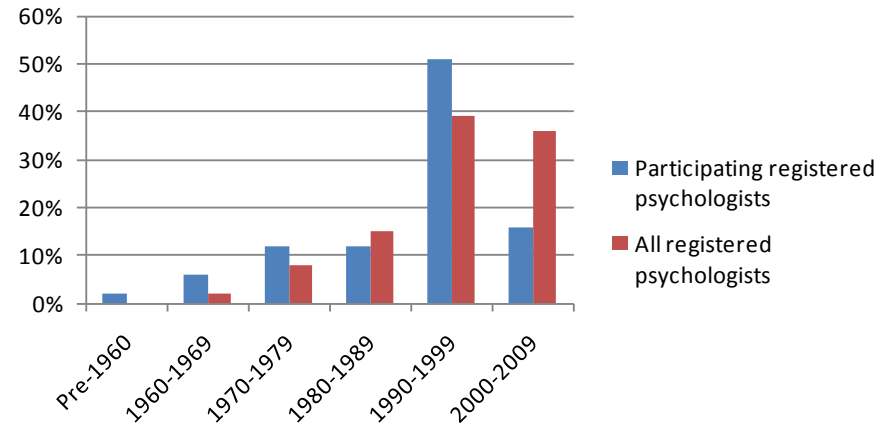


Providers: Year of qualification

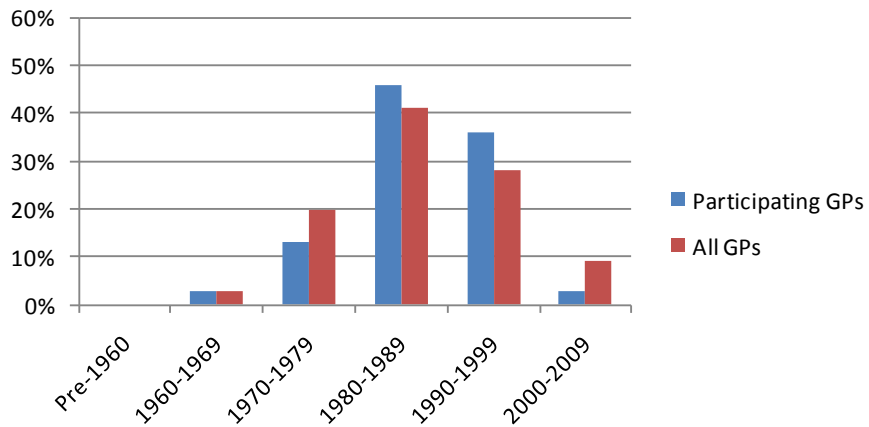
Clinical psychologists



Registered psychologists

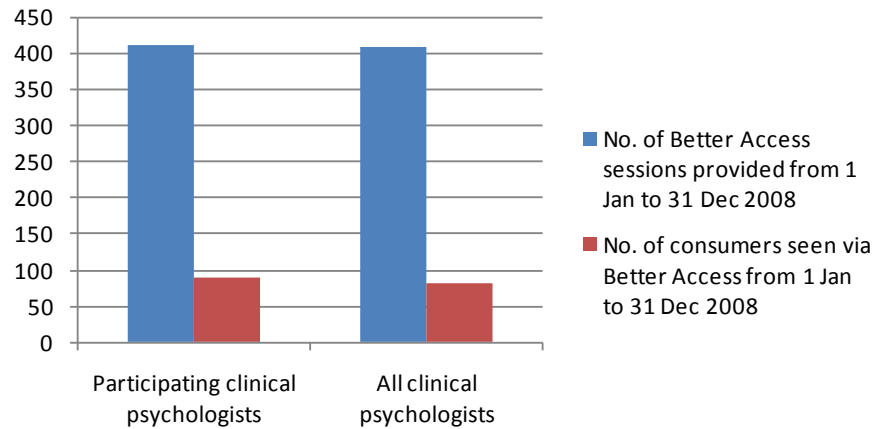


GPs

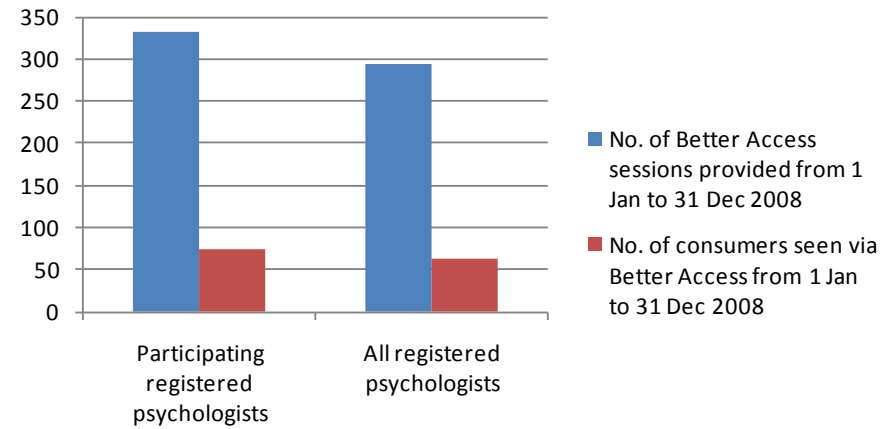


Providers: Better Access sessions/consumers

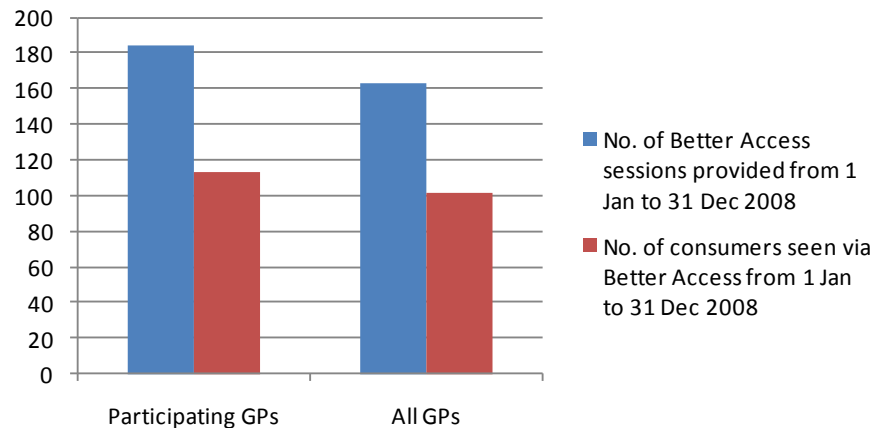
Clinical psychologists



Registered psychologists

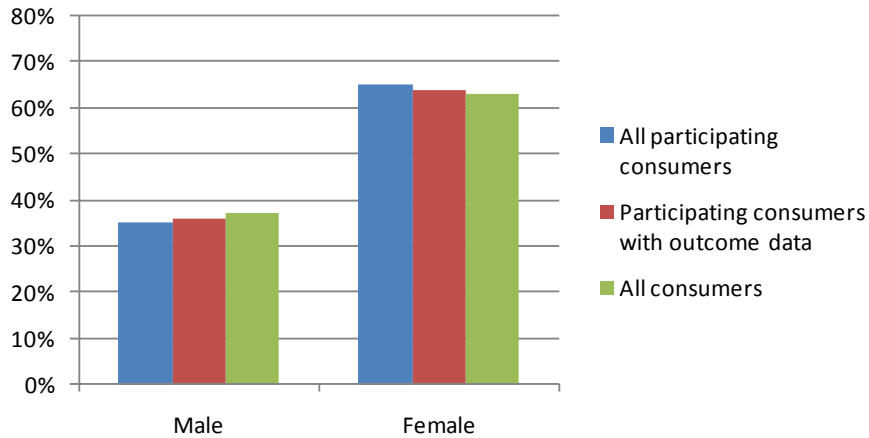


GPs

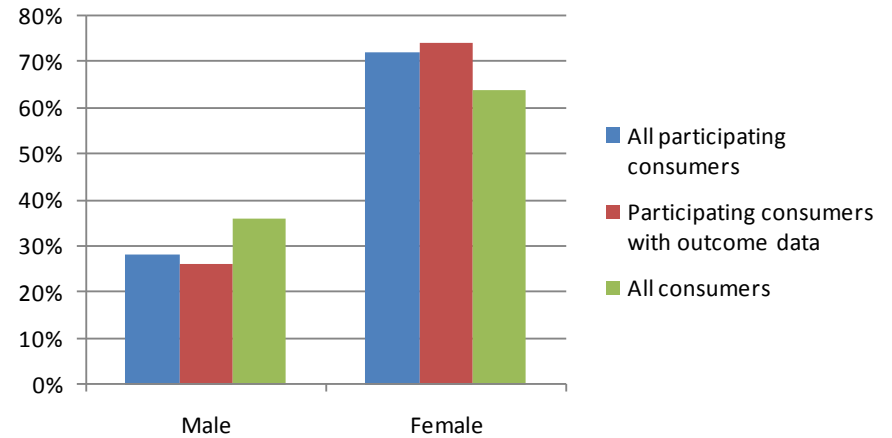


Consumers: Gender

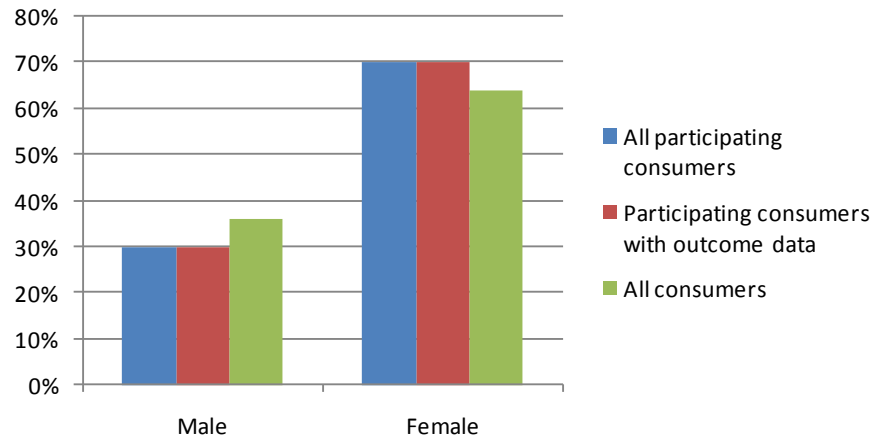
Consumers seen by clinical psychologists



Consumers seen by registered psychologists

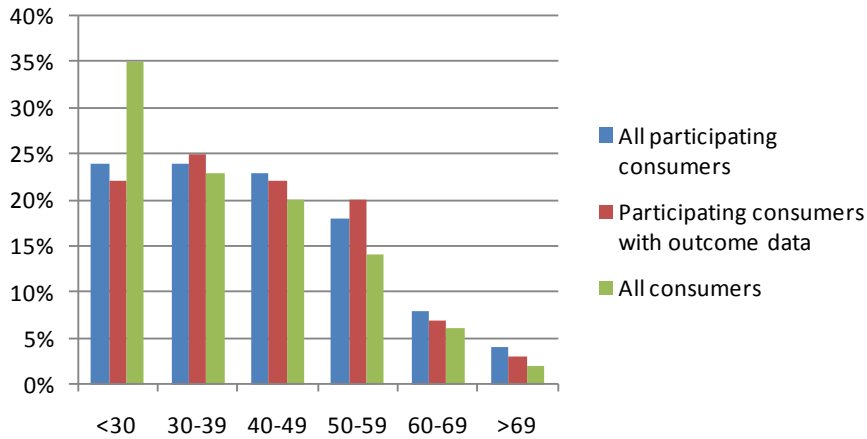


Consumers seen by GPs

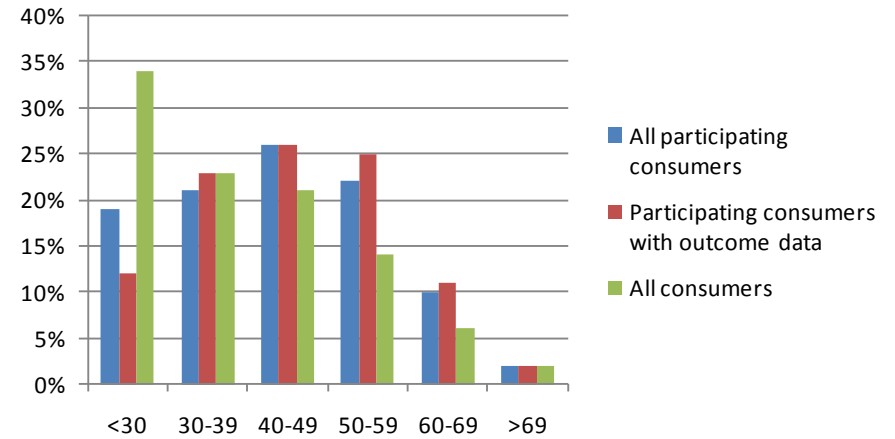


Consumers: Age

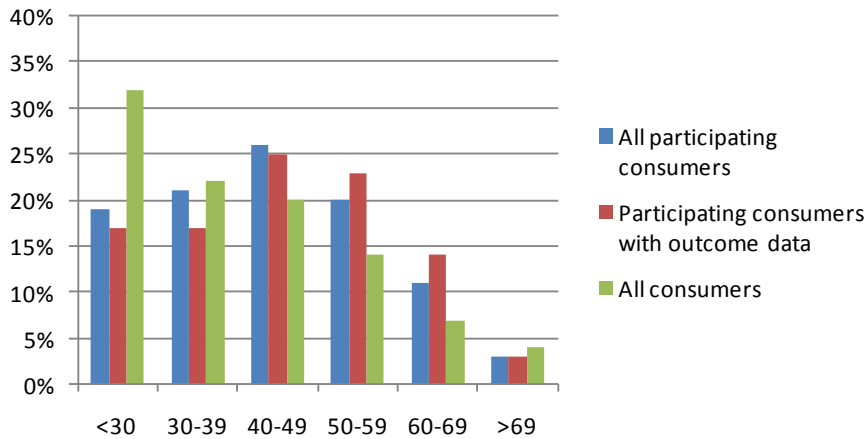
Consumers seen by clinical psychologists



Consumers seen by registered psychologists

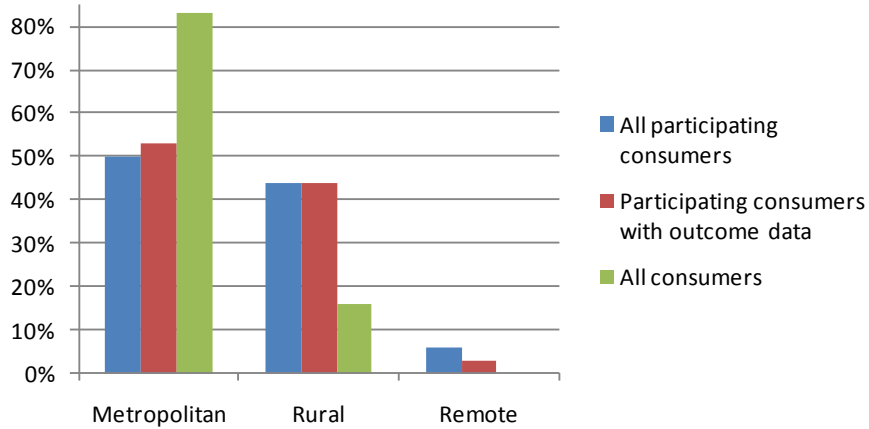


Consumers seen by GPs

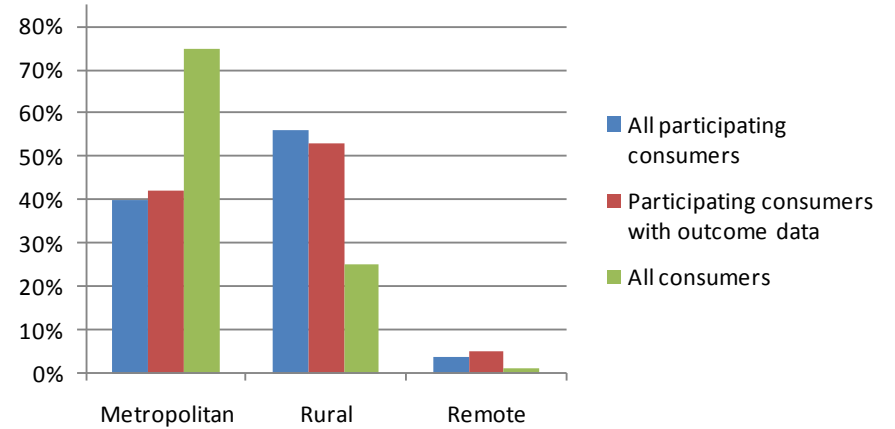


Consumers: Region

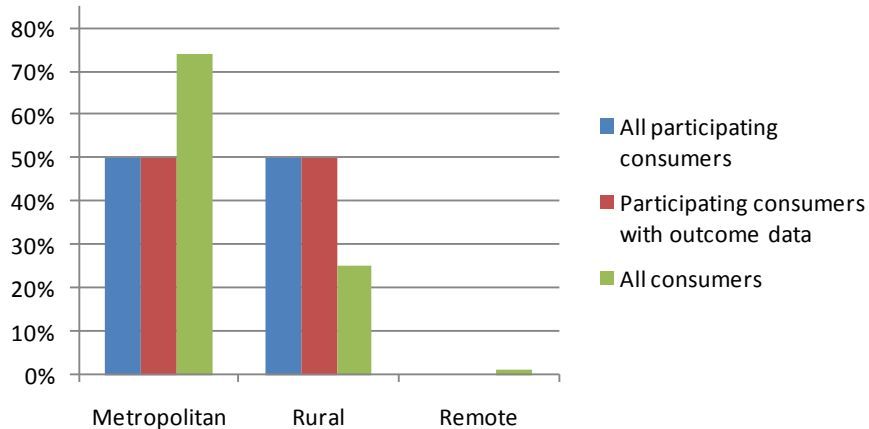
Consumers seen by clinical psychologists



Consumers seen by registered psychologists

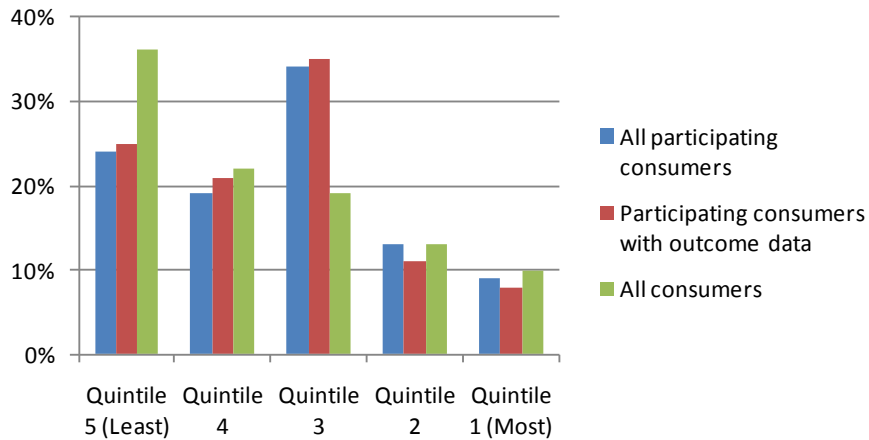


Consumers seen by GPs

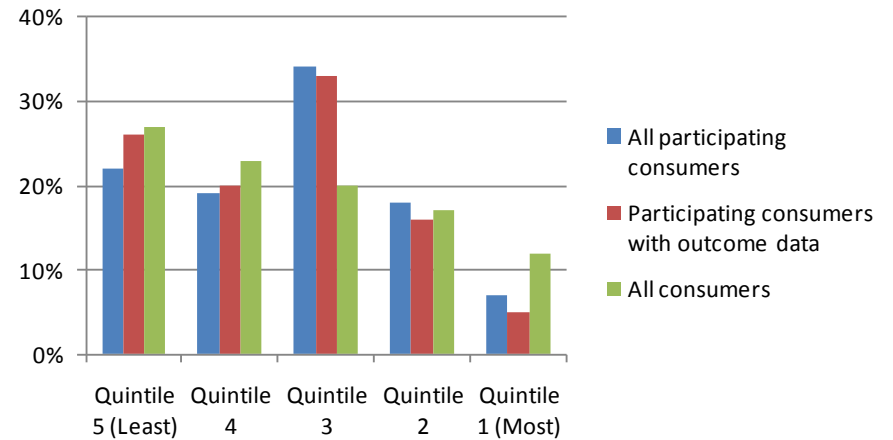


Consumers: Socio-economic disadvantage

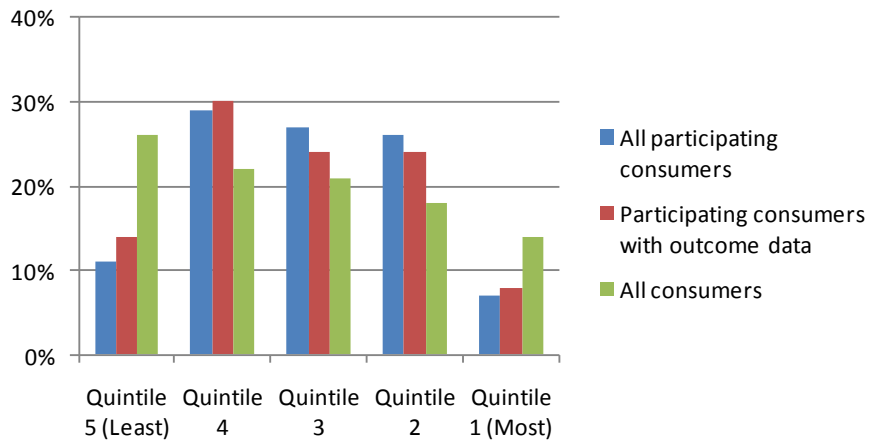
Consumers seen by clinical psychologists



Consumers seen by registered psychologists

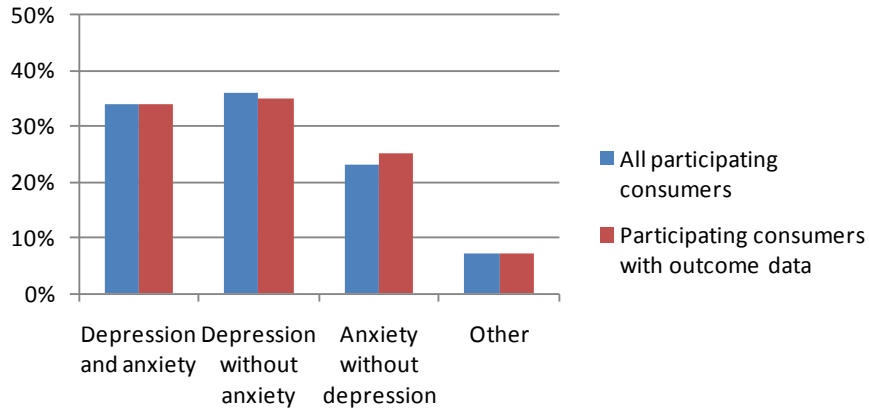


Consumers seen by GPs

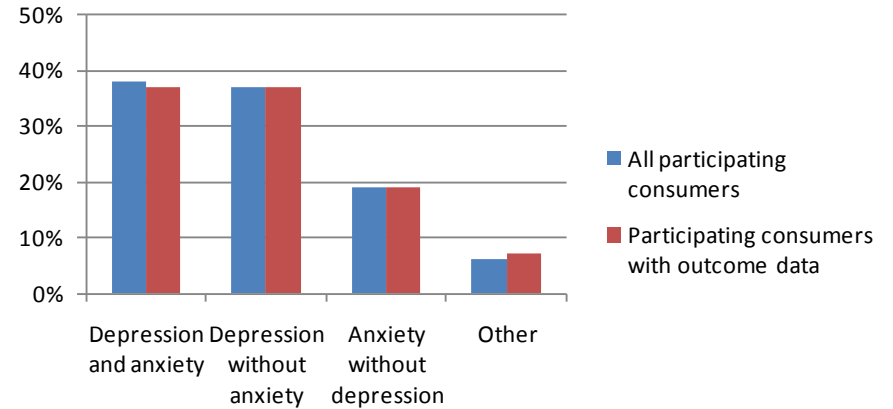


Consumers: Diagnosis

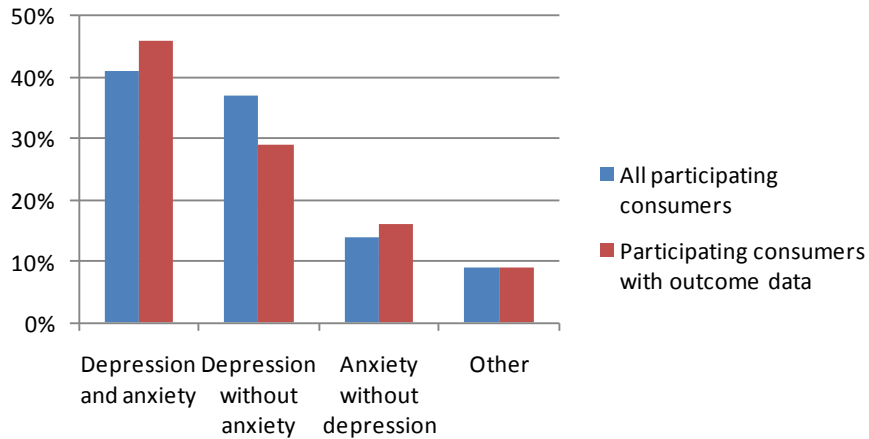
Consumers seen by clinical psychologists



Consumers seen by registered psychologists

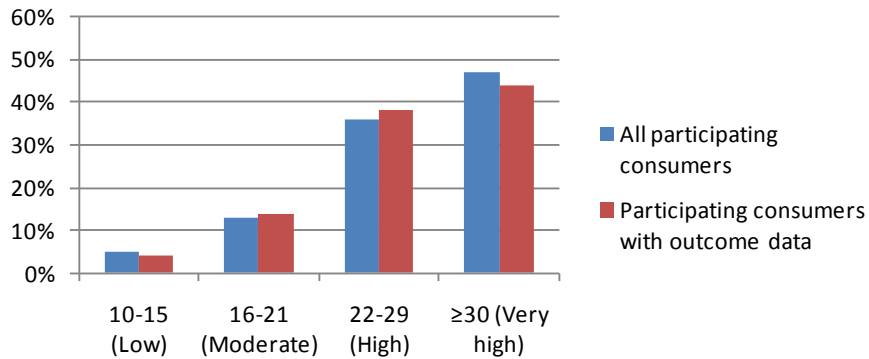


Consumers seen by GPs

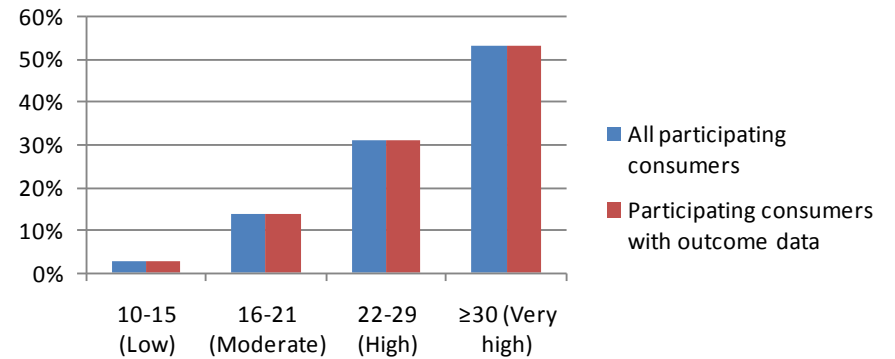


Consumers: Pre-treatment K10 score

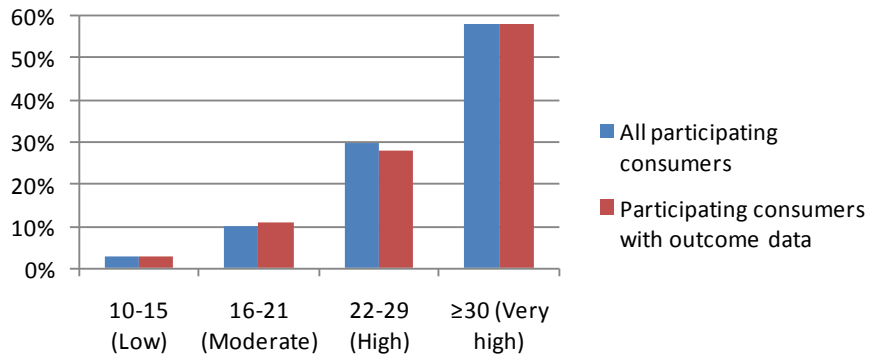
Consumers seen by clinical psychologists



Consumers seen by registered psychologists

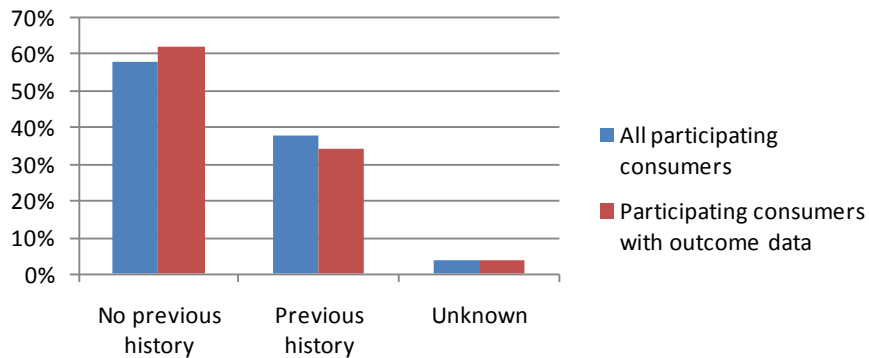


Consumers seen by GPs

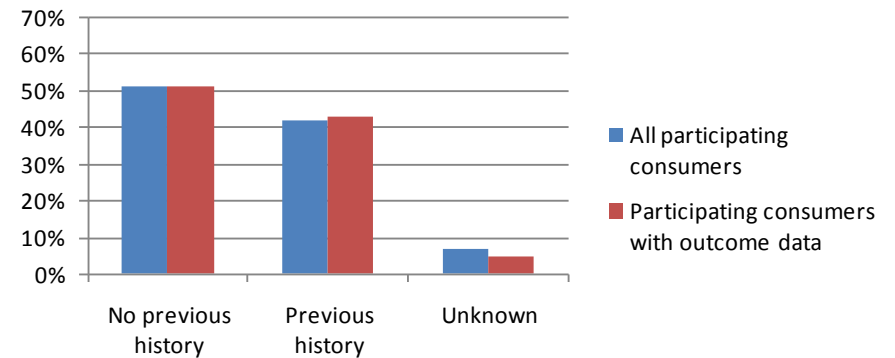


Consumers: Previous history of mental health care

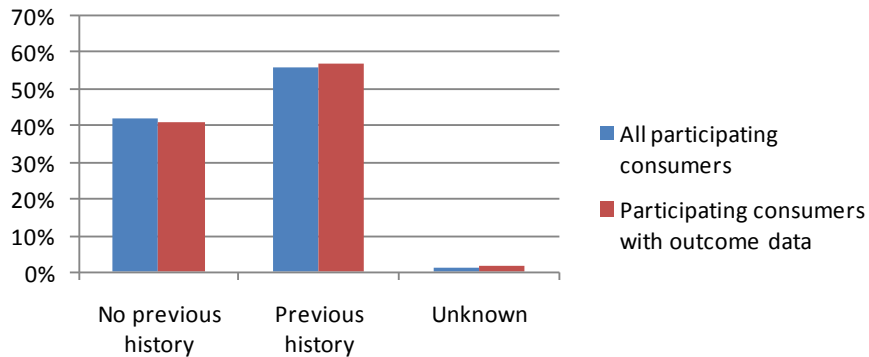
Consumers seen by clinical psychologists



Consumers seen by registered psychologists

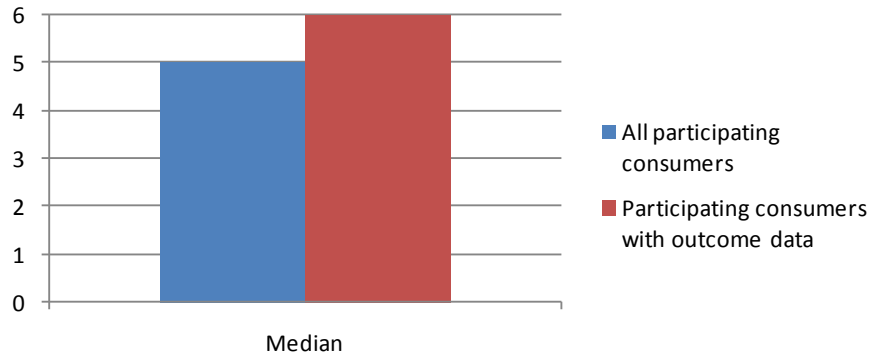


Consumers seen by GPs

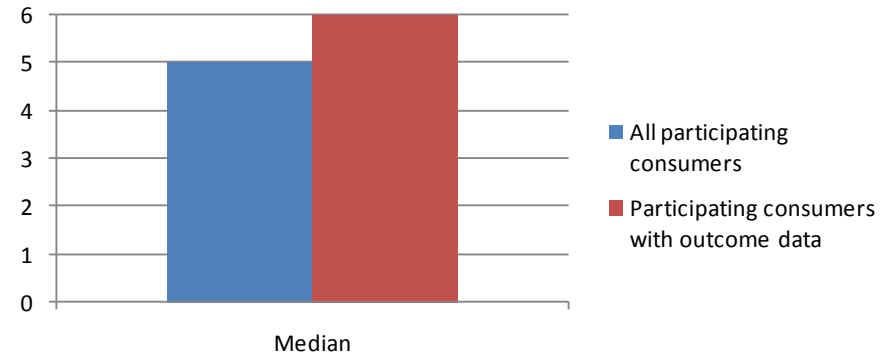


Consumers: Median number of sessions

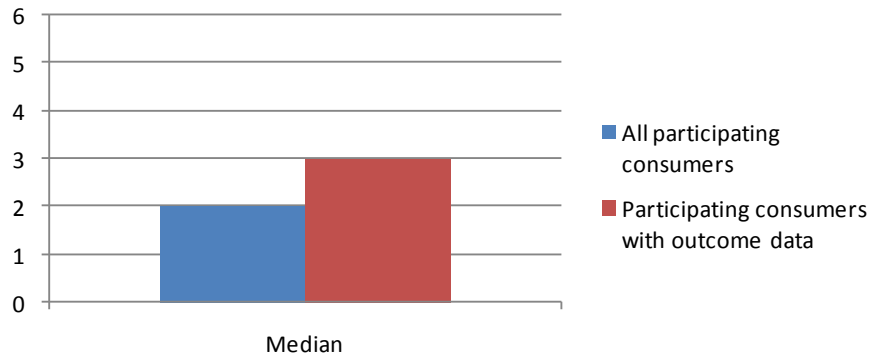
Consumers seen by clinical psychologists



Consumers seen by registered psychologists

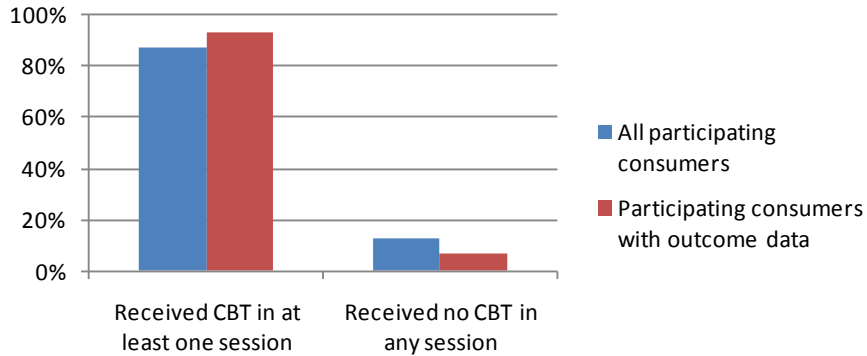


Consumers seen by GPs

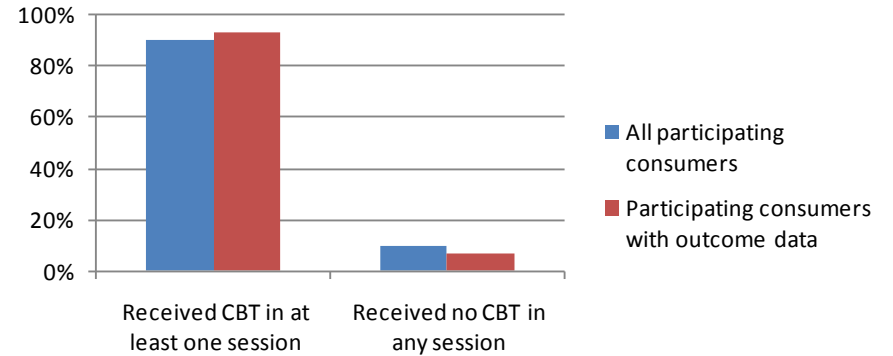


Consumers: Treatment received

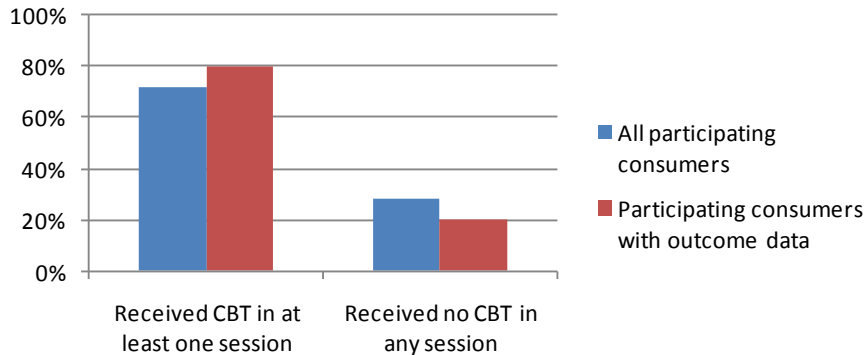
Consumers seen by clinical psychologists



Consumers seen by registered psychologists

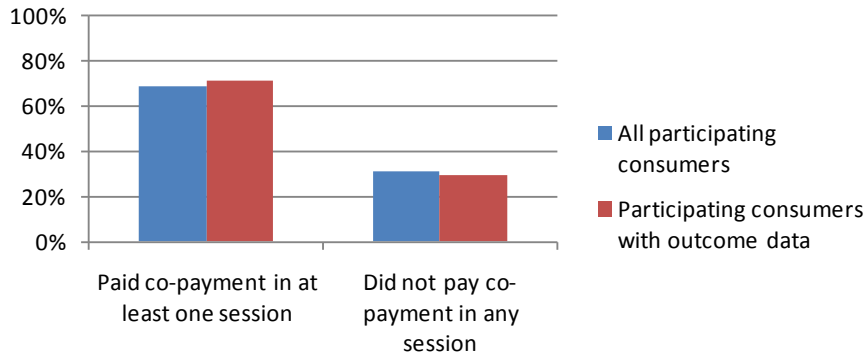


Consumers seen by GPs

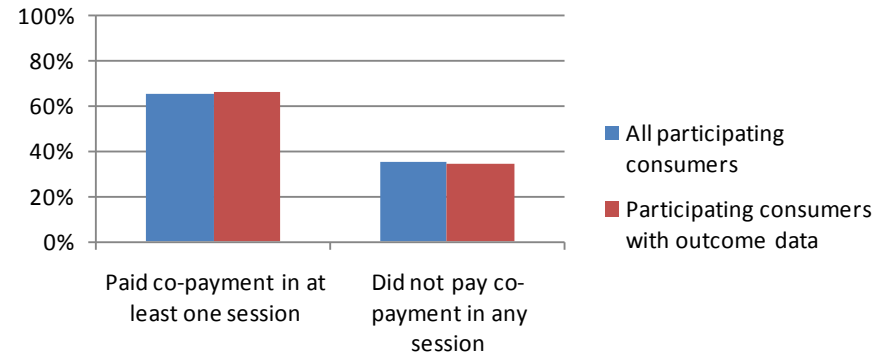


Consumers: Copayment

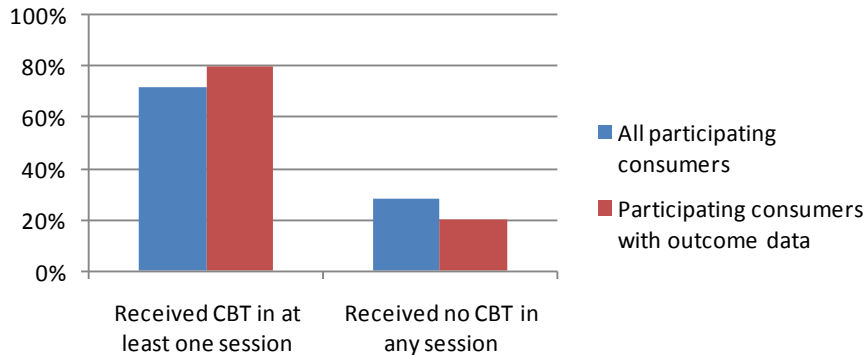
Consumers recruited by clinical psychologists



Consumers recruited by registered psychologists



Consumers recruited by GPs



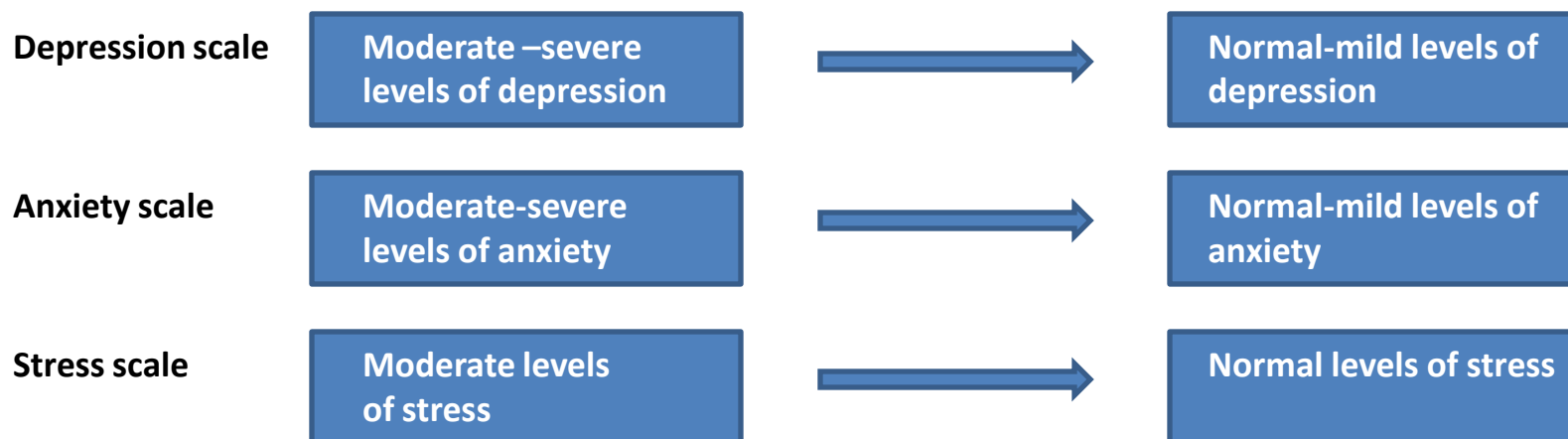
Consumers' pre- and post-treatment K-10 scores, by provider type

| | Seen by clinical psychologists (n=189) | Seen by registered psychologists (n=174) | Seen by GPs (n=77) |
|----------------------------|--|--|--------------------|
| Mean pre-treatment scores | 28.63 | 29.44 | 30.89 |
| Mean post-treatment scores | 19.09 | 18.86 | 22.88 |



Consumers' pre- and post-treatment DASS-21 scores, by provider type

| | | Seen by clinical psychologists (n=205) | Seen by registered psychologists (n=204) |
|------------------|----------------------------|--|--|
| Depression scale | Mean pre-treatment scores | 21.02 | 20.41 |
| | Mean post-treatment scores | 9.66 | 8.96 |
| Anxiety scale | Mean pre-treatment scores | 14.75 | 15.34 |
| | Mean post-treatment scores | 7.58 | 6.55 |
| Stress scale | Mean pre-treatment scores | 22.85 | 23.91 |
| | Mean post-treatment scores | 12.93 | 12.22 |



Providers' experiences of delivering care through Better Access (1)

- Extremely positive
- Has enabled psychologists to establish or expand private practice, and provided GPs with referral pathway not previously available
- Psychologists' caseloads have grown and GPs are seeing more people with mental health problems
- Consumers seen by these providers often have complex needs and are on low incomes, and many would not have had access to mental health care in the past
- Providers have developed mutual respect and improved collaboration
- Positive experiences with dealing with Medicare
- Varying charging policies

Providers' experiences of delivering care through Better Access (2)

- Few negative impacts
- Sometimes communication has been sub-optimal
- Some administrative issues
- Some confusion over the 'rules' of Better Access
- Some queries re. restrictions on number of sessions and forms of therapy
- Some dissatisfaction with levels of rebate

Consumers' experiences of receiving care through Better Access (1)

- Extremely positive
- Many had experienced hurdles to accessing mental health care in the past and appreciated fact that Better Access made mental health care more readily available
- Most had found the process of dealing with Medicare straightforward
- Most felt that the clinical care met their needs
- Many specifically commented on the attributes and skills of the providers they had seen, and on the usefulness of therapy they had received
- Majority indicated that they had experienced significant changes for the better in terms of their mental health and their ability to cope
- Most attributed these changes, at least in part, to the care they had received through Better Access

Consumers' experiences of receiving care through Better Access (2)

- Few complaints
- Those who did identify negative aspects tended to focus on the restricted number of sessions, or on residual difficulties with out-of-pocket payments
- Some also found the process of “opening up” about their mental health issues confronting

Conclusions

- Clinical psychologists, registered psychologists and GPs who are providing therapy under Better Access are playing an important role in meeting the community's previously unmet need for mental health care
- They are making an important contribution in terms of facilitating access to care, and offering a service that consumers appreciate
- Perhaps the most important arbiter of the success of Better Access, however, is that the therapeutic efforts of these providers are yielding significant improvements in consumers' mental health and wellbeing