

Submission To The Select Committee Into Mental Health And Suicide Prevention

I have worked as a registered Psychologist in Australia, Canada and England for the past 16 years. I have spent most of my career working in moderate to severe child and adolescent mental health and have firsthand seen how the mental health system in Australia is failing our young people. I have international experience as well as domestic experience to call upon and the alarming number of obstacles that exist in the Australian Mental Health system is a staggering. The system makes it incredibly hard for young people to self-refer and seek assistance whilst feeling they have a sense of privacy (not having to re-tell their story many times over). Many GPs have very minimal skills in the area of youth mental health and despite being a gate-keeper to greater services, they end up acting as an unnecessary obstacle, further red tape and costs for young people.

I would like to submit the following recommendations to help promote a mental health system that is user friendly, reduced obstacles to service and promote accessing mental health service as a valued service in our community;

- One-tier Medicare rebate for the clients of all registered psychologists in Australia.
- Raise the Medicare rebate to \$150 per session to allow for greater access, to facilitate more bulk billing, and to enable appropriate treatment rather than an inadequate psychological health care response.
- Cease discrimination of psychologists without clinical endorsement in areas including but not limited to employment opportunities, scope of practice and funding.
- Include Medicare rebated assessments funded at a sufficient level.
- Prioritise key prevention and early intervention settings such as schools and workplaces.
- Permanent universal telehealth.
- Implementing the Productivity Commission recommendation for up to 40 MBS rebated sessions per annum.
- Simplify the process of accessing a psychologist. This includes simplifying referrals, reviews, letters back to referrers, and upgrading the MBS to reduce the burden on psychologists. Psychologists should also not be held financially accountable for referral errors by medical practitioners.
- Broaden MBS rebatable sessions to psychologists to incorporate vital prevention and early intervention strategies in addition to responding to mental illness as well as couples counselling and family therapy.
- Re-instatement of self-referral processes integral for client's sense of autonomy, important for psychological recovery, to increase access to psychological services. In this model, the psychologist is once again, as had been in earlier times, relied upon to liaise and communicate with the client's treating medical practitioner/s as appropriate and as per the privacy and informed consent legislations.
- Fund a dedicated preventative/early intervention psychology workforce.
- Establish a 'Provisional Psychologist' Medicare rebate to boost the psychology workforce, increase access to mental health and provide reliable income for both employers and early career psychologists.
- Incentives for rural and remote psychologists- similar to GPs.

- Expand the evidence-based approaches able to be used by psychologists to allow the clinician to use any technique that has adequate Level I, Level II or in some specific conditions Level III evidence. Psychologists are trained in evaluating the evidence base for the use of therapeutic techniques and need to have the freedom to choose the best approach for each client independently rather than have restrictions on their treatment.
- Review the increasing trend toward mental health “hubs”. These hubs while attractive to Government, require a lot of funding to establish and maintain, generally have high turnover due to low financial remuneration for providers due to their reliance on bulk billed Medicare rebates for practitioners and often do not facilitate access to mental health services to those with disabilities, transport issues, or reside a distance away from the facility. Adequately funding the Medicare system to allow clients to choose a mental health clinician in their local area is the most cost effective and easily implemented strategy.

I am passionate about youth mental health and not only is the current systems deterring young people from accessing mental health help or continuing with mental health help, it is leading to a high burn out rate amongst Psychologist due to the poor remuneration.

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