

Sue-Ellen Taylor

I would like to comment on proposed changes to the Better Access to Mental Health Initiative. I am a psychologist in a rural area currently delivering services to the community as a sole trading private practitioner in clinical practice. Despite 6 years of specialised training including a Masters Degree in psychology, I am identified in the current baseless and discriminatory “two tier” rebate system as “Generalist” psychologist. I am therefore running my practice very close to the bone as the clients that I see are given \$30 less rebate than those of “Clinical” psychologists delivering exactly the same services as myself, and an even lesser rebate than GPs who have almost no training at all (a 26 hour course) in the treatment of mental health disorders. Despite this discrimination, I believe that I deliver a high quality service to the community. This is substantiated by consistently positive client outcomes. I collect feedback surveys from my clients who rate my services extremely highly. My figures would definitely compare to the APS 2008 client survey that reported that 91% of clients who had received treatment from a psychologist under Better Access indicated that the treatment had resulted in a Significant or Very Significant improvement in their symptoms. Consistent also with the findings of this survey, the majority of my clients report that they have not seen a psychologist before and would not be able to see a psychologist to assist them with their moderate to severe mental health difficulties without the rebate provided through the Better Access initiative.

One of the reasons given by the Minister for changes to the current system has been an inequity of access to services, particularly regarding low socioeconomic and rural groups. At least 95% of my client group is both low socioeconomic and rural. The proposed changes to service delivery will extremely disadvantage this group and are already devastating my business. In the few weeks since the announcement of proposed changes I have not received **any** new referrals from doctors and my client bookings have decreased dramatically week by week as a result. As stated previously, the clients that I see cannot afford to see anyone without the Medicare rebate and in response to the announcements, doctors have ceased all new referrals. I am aware that this is the case in other locations also.

I was born and bred in the bush and would dearly love to have provided services to more isolated areas through the wonderful new technological mediums such as skype that are now available. The lack of imagination inherent in the previous initiative did not allow claims for therapy in any other form than face to face. As a result, people in remote areas have missed out entirely, and will now also continue now to miss out under the new arrangements.

Of great concern to me also is the predicament of clients with severe mental health difficulties who are successfully self-managing and living unsupported within the community at present. These clients rely on psychologists to monitor them and work in collaboration with their psychiatrist and GP to identify if any changes to medications are necessary so that they can stay mentally well. The Better Access program has allowed this group access to a psychologist once a month which has suited this purpose and allowed them to live successfully within the community. Under the current proposal these individuals may be left with no support for months at a time. A schizophrenic client of mine stated that he was extremely concerned

regarding how the new proposal for service delivery will affect him. He contacted the Richmond Clinic (North Coast Area Mental Health Service) to ask them what services could be provided to him if he were unable to continue with his monthly appointments. They told him that he would have to be extremely unwell and to the point of obviously requiring admission (i.e. brought to them by the police) before they would or could have any input into his case.

People with mental health problems are the most vulnerable of all groups within the community. To use an old bush adage in relation to what the current proposal means for psychologists and their clients: The government have provided us with a suit (the Better Access initiative), then cut the arms and legs off, and now they are telling us that we are well dressed. The claims of “increased” funding and “new” initiatives for mental health are a cynical PR snow job to cover up what amount to drastic cuts to a program that was providing real outcomes for people suffering mental health difficulties. The Better Access initiative was flawed and inequitable for both clients and psychologists providing services, as has been outlined in previous senate submissions (see the submission by Lyn Littlefield of the APS, Submission to the Senate Standing Committee on Community Affairs, May 2008). The current proposal however will ensure that we cannot be effective in the delivery of our services, therefore providing the necessary excuse to make further cuts to the Better Access program. Those that will always have the most to lose are those with mental health difficulties.

Significantly for myself and many thousands of other psychologists, however, is the prospect that the businesses that we have built to support ourselves and our families over the past five years will now evaporate. This is no graduated withdrawal of funding. The system is already crashing at the mere announcement of changes. These changes proposed by the government are not yet enacted and already the writing is on the wall for thousands of private practitioners who have provided the workforce to deliver Better Access services. There are no jobs waiting for us to go to, and with the economic times as they are the majority of us are without any financial buffer or superannuation to run to when it all comes tumbling down. This represents a devastating loss of skills and expertise previously directly available to the community for the support and betterment of the community.

Inevitably there will be many casualties, possibly myself among them, as a result of a government that prefers spin to substance in the delivery of vital services to the most vulnerable people within the community. I may well be joining my clients in the welfare queue at the end of it all.