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URGENT

29 October 2004

Dr Rosemary Knight
Assistant Secretary
Health Priorities and Suicide Prevention Branch (MDP 37)
Department of Health and Ageing
GPO Box 9848
Canberra ACT 2601

Dear Dr Knight,

**re: Meeting of National Mental Health Working Group (NMHWG) on
5 November 2004**

Attached is a letter plus enclosures that I distributed to State and Territories Directors of Mental Health recently, to seek their continued support for the NHMRC Clinical Practice Improvement Network for Early Psychosis (CPIN).

When we took up the NHMRC award to evaluate early psychosis teams (a strategic research grant for mental health) we objected to the unrealistic two-year funding period without effect. We accepted the grant with the view that we would design evaluation procedures that could be used by services routinely and that built directly on the NOCC measures. As an act of faith, we have worked hard to develop this approach, in the belief that Commonwealth and State Mental Health policy makers could be persuaded of its high relevance and value, and would assist in continuation funding.

Although publications are pending, and three abstracts have been accepted for presentation at the upcoming Australasian Society for Psychiatric Research meeting later this year, we are yet to publish the study results. This simply relates to the fact that the prospective evaluation of the first six-months of care of first presentation patients with psychotic disorders will not be completed until June 2005. However, we have demonstrated the feasibility of the procedures as the evaluation is implemented in eight Area Mental Health Services. This number would be larger if our resources had been greater. Further evidence of CPIN's applicability is the strong endorsement of the State (Victoria, New South Wales, and Queensland) and Area Mental Health Directors participating in the prospective evaluation.

It is a matter of urgency that we request consideration of continuation funding by the NMHWG on 5 November 2004. It would be a huge loss of potential if our team was dissolved now that it has more experience in effectiveness evaluation in mental health than any other in Australia, and just as it is on the verge of showing its true potential.

A minimum of \$250,000 annually for 2 years is required to complete the initial study and identify the critical quality indicators and intervention codes that must be included in State-based automated information systems.

I will attempt to phone you before the meeting. This would be facilitated if your PA could email me convenient times when I could call.

Thanking you in anticipation.

Warmest regards,

Stan Catts, on behalf of the CPIN investigators Professor Vaughan Carr, Dr Brian O'Toole, Mr Terry Lewin, Ms Amanda Neil and Ms Meredith Harris