



POLICY STATEMENT 10

BEST PRACTICE PROVISION OF PRIVATE MENTAL HEALTH SERVICES

Background

People who access mental health services within the private sector generally report better continuity of treatment and care. They do, however, have to contend with issues, which are different to public sector consumers. These issues include the following.

- The impact of changes to private health insurance legislation on the funding of private inpatient services.
- Variations in funding coverage of psychiatric services between Health Insurers.
- Limitations in access to services as a result of tendering processes for psychiatric services.
- Substantial 'out-of-pocket' costs in a number of situations.

The Guidelines for determining benefits for health insurance purposes for private patient hospital-based mental health care (Guidelines) are intended to assist Health Insurers when approving psychiatric care programs for the purpose of paying private health insurance benefits. They cover the range of services that can be delivered by private hospitals with psychiatric beds. As such they provide an excellent guide to the kind of services that should be provided across the continuum of care.

The Network believes these Guidelines represent current best practice for private sector mental health services, although in reality, many of the services identified in the Guidelines are not necessarily available in all private hospital-based settings.

The Guidelines state:

It is recognised that people with a mental illness, or mental disorder ideally require access to a comprehensive range of services, with an emphasis on coordination, integration and individualised care.

There should be a range of specialist treatment and support services available for patients. Funding for some of these services will be provided by health funds, while other services will be funded through the CMBS, the Australian Government, State and Territory and Local Governments, other funders, and by the patients themselves.

The continuum of care may include the following.

- *Early intervention*
- *Crisis assessment*

- *Domiciliary/community care*
- *Outpatient services*
- *Day, half-day, partial-day and evening services*
- *Hospital programs*
- *Admitted overnight services, where necessary*
- *Maintenance and supportive care*
- *Patient and carer education*
- *Preventative care*
- *Discharge Planning*

Additionally, the Guidelines call for care delivery as follows.

Care delivery should, where applicable to private patients, meet the principles for guiding the delivery of care as recommended by the National Standards for Mental Health Services, and should include the following.

Choice, and access to a range of treatment options in consultation with the patient and, where ever possible, their family or carer(s).

- *Social, cultural and developmental context, meeting social and cultural values, beliefs and practices.*
- *Continuous and coordinated care delivered via a range of services across a variety of care settings.*
- *Comprehensive individualised care, access to treatment and support services able to meet specific needs during the various stages of the individual's illness.*
- *Treatment in the most facilitative environment.*
- *Care, which is documented and transparent, for example, through the use of Clinical Care Pathways and Clinical Practice Guidelines.*
- *Priority given to the most appropriate effective and cost-effective treatment options."*

Whilst these Guidelines provide guiding principles, there is no requirement for private hospitals with psychiatric beds, nor private health insurers, to implement them as part of their contractual arrangements under their Hospital Purchaser Provider Agreements. The Guidelines are also not recognised by the authorised accreditation agencies in Australia, as part of the accreditation processes. No reference is made to the Guidelines in the Australian Government's National Standards for Mental Health Services.

Policy

1. That the Guidelines be sufficiently strong to ensure that mental health services provided in private hospitals with psychiatric beds comply with the Guidelines.
2. That the Guidelines ensure that mental health services funded by health insurers comply with the Guidelines.

Review of the Guidelines must be undertaken on a regular basis and must include consumers and carers in the review process.

3. Compliance with the Guidelines should also be a requirement of approved accreditation authorities in Australia.
4. The current Guidelines dated 2012 are endorsed by the Network.

Policy approved:2012
Policy to be reviewed:2014