

Productivity Commission Submission from NovoPsych

Addressable challenges in the mental health sector

1. The problem that funding models promote 'activity-based' services because the key data measured is activity, not outcomes.
2. The highly successful Better Access initiative does not have routine outcome monitoring baked into its structure.
3. The mental health sector has, to date, not had the same emphasis on use of technology to assist in diagnosis and recovery compared to other health fields.
4. Collaboration between clinician and patient is key, and systems to help individuals understand and monitor their own health and self-management are currently lacking.

NovoPsych

NovoPsych is a technology platform designed for mental health clinicians to improve the efficiency and accuracy of mental health assessments, measurement of outcomes, communication between clinicians, and help patients in self-management.

We currently have over 3000 clinicians using the platform, primarily psychologists in private practice, but also work with larger agencies integrating the system into their model of care. The popularity and wide acceptance of our software platform is attributed to the focus on understanding the needs of clinicians, and educating them about the instant and measurable benefits for patients of routine outcome monitoring.

Routine Outcome Monitoring



Routine outcome monitoring is the regular evaluation of a patient's treatment response during the course of treatment and provides health care professionals with information relevant to a patient's progress. This monitoring can improve patient outcomes by enabling clinicians to detect and treat functional and psychological problems that previously may have been missed.

The monitoring is not only useful for clinician and patients themselves, but also provides an opportunity for treatment effectiveness to be evaluated at a systemic level.



Psychologists have specific training in this area on how to interpret outcome measures and understand how to evaluate such measures' psychometric properties for appropriate use. This is a core skill of psychologists that is under-utilized in the current system.

While state based funded mental health services collect and report on outcome data through the Australian Mental Health Outcomes and Classification Network (AMHOCN) there is no such collection of outcome data being undertaken in MBS funded Better Access services. This was identified as a gap in the initial evaluation of the initiative and considering the significant level of investment in primary mental health care it remains a major gap in the collection of data to inform service planning and the effectiveness of funded services. While many clinicians regularly collect such data using NovoPsych as part of their clinical practice, outcomes measurement is not currently a requirement of the Medicare Benefits Schedule items.

Using Data Analytics to Improve Care

Advances in data analytics and computing power mean that large datasets are an important resource in the decision making process. The best datasets are generally those that are routinely collected by clinicians as a core part of practice– but contain enough detail for researchers and funders to use for valuable secondary analysis.

It is possible to use these datasets to understand trends, patterns and correlations at a large scale and investigate a range of questions much more rapidly and cost-effectively than using methods such as surveys and clinical trials alone. Not only this, datasets can be used to predict with a high degree of accuracy the progression of illness, and therefore what interventions/funding would be optimal.

The wealth of high quality longitudinal data collected by NovoPsych (over 200 million pieces of health information for over 150,000 patients) provides an opportunity to undertake an evaluation of programs and design systems to provide people the best care in a real-time, evidence-based way. Rather than funding models where “one size fits all”, this health data system could be used to provide objective triggers for staged care.

Reducing the strain on Australia’s mental healthcare system requires finding novel approaches to sustainable healthcare delivery. Key to this is investing in a mental healthcare environment that predicts, prevents and delays the onset of chronic and long-term dysfunction, eliminates low-value care and has the capacity to scrutinize and adjust funding in a timely way.

It is urgent that funding systems be person centric, have a degree of precision in the likely outcomes of treatment, and be able to measure the outcome of treatment reliably.

Yours Sincerely,

Dr Ben Buchanan
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