



The Royal
Australian &
New Zealand
College of
Psychiatrists

Improving the mental health of the community

Introduction

We welcome the opportunity to submit our submission to SIRA on the Health Outcomes Framework for the WC and CTP schemes.

RANZCP is a membership organisation that trains doctors to be medical specialists in the field of psychiatry, supports and enhances clinical practice, advocates for people affected by mental illness and advises governments on mental health care. It has almost 6000 members bi-nationally, including more than 4000 qualified psychiatrists and around 1400 members who are training to be psychiatrists. RANZCP NSW Branch (NSW Branch) represents more than 1200 Fellows and 400 trainees.

As mental health specialists, psychiatrists are well positioned to provide constructive input into improving outcomes for people with mental health conditions.

About our submission

Our submission represents the collaborative views of psychiatrists who have experience in working in the CTP and WC systems, both as Assessors and as treating clinicians.

In principle, the College welcomes the document. The Framework provides one way forward for improving outcomes for injured persons, and other outcomes, in the current systems.

General Comments

There are strong opinions within our membership about issues within the current systems, but unfortunately, the data on the capacity, or otherwise, of the systems to deliver timely, appropriate and effective care is anecdotal.

Our members raised the following issues:

- There are concerns about delays in treatment, wrong diagnosis, inappropriate treatment, and ineffective treatment. If specialist input is required, it is usually several months before such input is accessed (due to approval delays, waiting lists, etc)
- There are issues with insurers making arbitrary decisions about treatment being stopped, apparent lack of trust in recommendations of treating clinicians, and then referrals to Independent Medical Experts (leading to further delays)
- Claimants with cognitive issues find appealing decisions difficult and onerous. A common theme was the difficulties for injured persons navigating the process and management of paperwork leading to aggravation of the original condition and/or development of new conditions.

To reiterate, these are anecdotal accounts. Real-world data is lacking and the Framework's focus on data as a critical component in the improvement in the injured person's journey is most encouraging.

Lastly, a common criticism from Medical Assessors in the current systems is the lack of broad consultation and input into the design and implementation of policy within the systems. The College recommends significant stakeholder engagement with RANZCP, RACP, RACS, RACGP and other relevant professional bodies, with clinician assessor groups, in addition to other scheme participants and injured persons.

You sought specific feedback on the following:

- ***How the outcomes framework can be most effectively used by SIRA and scheme participants to improve health outcomes and the value of healthcare expenditure***

The six domains cover the relevant areas in the vision to achieve value-based care. Of course, this being a Framework document, it does not deal with the 'how'. A critical component of this will be the success of stakeholder engagement.

- ***The implementation plan***

The plan appears comprehensive in scope and realistic in vision. Stakeholder engagement in Horizon 1 is fundamental to the success of the Framework. The governance framework will be critical to its success and the College is keen to provide input. Identifying key health issues in Horizon 2 is its major goal. Again, the College's membership can provide critical advice.

- ***What scheme participants can do to help advance the vision of value-based care***

Input from participants is critical. Participants can provide data about each component of their experience of the schemes.

- ***Areas where SIRA could focus its efforts to achieve value-based care in the WC and CTP schemes it regulates.***

Data collection has been missing to date and is critical. Medical Assessors are in a particularly unique position to provide information on the quality of the claimant's treatment journey, at the point of comprehensive assessment, considering all the medical evidence. Data from treating clinicians and injured persons is also critical.

Consideration should also be given to the development of specific treatment guidelines for conditions usually encountered in the schemes, as well as development of pathways to care documents. The College and other stakeholders would play a significant role in the development and evaluation of these resources.