Mental health-related services provided by general practitioners

General practitioners (GPs) are often the first port of call for people seeking help with a mental illness. GPs provide a variety of mental health care services to people in need, and may refer patients on to specialised services. This section presents information on mental health-related services provided by GPs, from 2 data sources:

- 1. Bettering the Evaluation and Care of Health (BEACH) survey of general practice activity, which provides detailed information about GP encounters (Britt et al. 2016) based on data collected from a sample of GPs (throughout this section referred to as estimated GP encounters). The last survey was conducted during the 2015–16 period.
- 2. Mental health-specific Medicare Benefits Schedule (MBS) items provided by GPs (throughout this section referred to as Medicare-subsidised mental health-specific services).

These 2 data sources provide complementary insights into mental health-related GP care. Not all mental health-related GP encounters are billed using mental health-specific Medicare Benefits Schedule (MBS) item numbers. Consequently the number of estimated GP encounters deemed to be mental health-related from the BEACH survey were greater than the number of Medicare-subsidised mental health-specific services. More details can be found in the data source section.

The cessation of the BEACH survey prevents ongoing comparison between the BEACH survey data and the Medicare data. The information presented in this section provides a summary of the 2015–16 data period and will not be updated further. The AIHW is actively pursuing the identification of alternative data sources to more accurately present information on mental health care provided by GPs.

Data downloads:

<xls link> General practitioners 2018 tables

<pdf link> General practitioners 2018 section

This section was last updated in October 2018

Key points

- According to the BEACH survey, around 12.4% of all GP encounters mental health-related in 2015–16, an increase from 10.8% in 2007–08.
- *Depression* was the most commonly managed problem during a mental health-related estimated GP encounter (about one-third, or 32.1%).

- The most common management of mental health-related problems was for the GP to prescribe, supply or recommend medication (61.6 per 100 mental health-related problems managed).
- People aged 65+ had the highest rate of encounters of all the age groups (1,198.2 per 1,000 population), compared to a national rate of 749.9.

Service provision

The BEACH survey estimated that 12.4% of all GP encounters in 2015–16 were mental health-related encounters. This translates to almost 18.0 million mental health-related estimated GP encounters, or 749.9 encounters per 1,000 population. By comparison, in the same year about 3.2 million Medicare-subsidised mental health-specific GP services were provided, or 135.5 services per 1,000 population. More recent detailed data on Medicare-subsidised mental health-specific GP services section of this website.

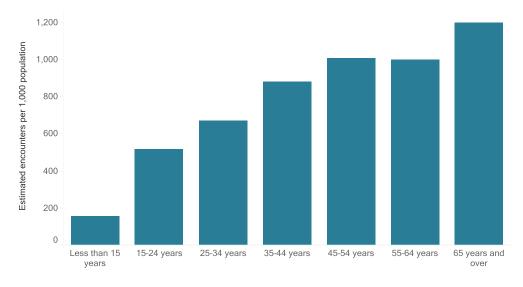
The proportion of all estimated GP encounters identified by the BEACH survey as being mental health-related increased from 10.8% in 2007–08 to 12.4% in 2015–16.

Since the introduction of GP specific services in November 2006, the proportion of estimated GP mental health-related activity billed as Medicare-subsidised mental health-specific GP services has increased from around 10% in 2007–08 to around 18% in 2016–17 (Medicare services section).

Patient characteristics

Demographic characteristics

The 2015–16 BEACH survey found that people aged 65+ (1,198.2 per 1,000 population) had the highest rate of mental health-related estimated GP encounters, compared to the general population (749.9) (Figure GP.1).





Source: BEACH survey of general practice activity, Table GP.2.

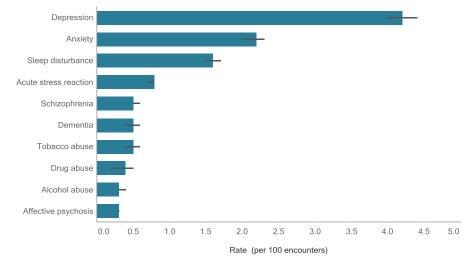
Source data: Mental health-related services provided by general practitioners Table GP.2 (4.25MB XLS)

After adjusting for differences in age structure between Indigenous and non-Indigenous Australians, the rate of encounters was higher for non-Indigenous Australians than for Indigenous Australians (658.6 and 578.7 per 1,000 population respectively). For remoteness area categories, the rate of encounters was highest for people living in Inner Regional areas (947.5 per 1,000 population) while the rate for people living in Remote and very remote areas was the lowest (339.2).

Problems encountered

The BEACH survey found that *Depression*, *Anxiety* and *Sleep disturbance* were the 3 most frequently GP managed mental health-related problems in 2015–16, accounting for 60.8% of all mental health-related problems managed (Figure GP.2) and 5.1% of all health problems managed. Mental health-related problems were managed at a rate of 13.1 per 100 encounters, including encounters where multiple problems were managed.

Figure GP.2: Estimated GP encounters for the 10 most frequent mental health-related problems managed, 2015-16



 $\it Source: BEACH$ survey of general practice activity, Table GP.3

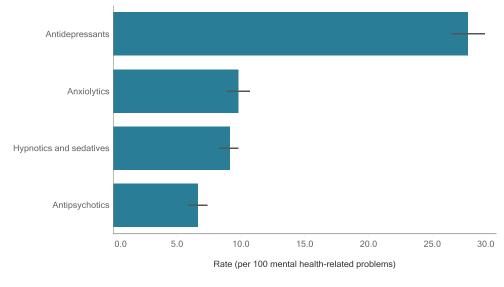
Source data: Mental health-related services provided by general practitioners Table GP.3 (4.25MB XLS).

Management of problems

According to the 2015–16 BEACH survey, the most common form of management of mental health related problems was the prescription, supply or recommendation of medications (61.6 per 100 mental health-related problems managed).

Antidepressants were the most commonly prescribed, recommended or supplied medication (27.8), followed by *Anxiolytics* (9.8), and *Hypnotics* and *Sedatives* (9.1) (Figure GP.3).

Figure GP.3: Most common medication prescribed, recommended or supplied during mental health-related GP encounters, 2015-16



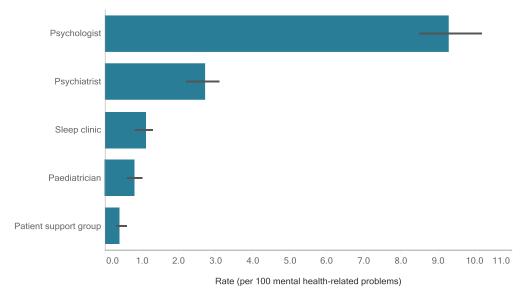
Source: BEACH survey of general practice activity, Table GP.4.

Source data: Mental health-related services provided by general practitioners Table GP.4 (4.25MB XLS)

The second most common form of management of mental health-related problems was counselling, advice or other clinical treatments provided by a GP (49.6 per 100 mental health-related problems managed) with *Psychological counselling* (22.6) being the most frequently provided treatment in this category.

Referrals were given at a rate of 18.8 per 100 mental health-related problems managed. The most common referrals made by GPs for mental health-related problems were to psychologists (9.3) and to psychiatrists (2.7) (Figure GP.4).

Figure GP.4: Most common referral types for management of mental health-related problems for GP encounters, 2015-16



Source: BEACH survey of general practice activity, Table GP.4.

Source data: Mental health-related services provided by general practitioners Table GP.4 (4.25MB XLS)

Reference

Britt H, Miller GC, Henderson J, Bayram C, Harrison C, Valenti L, Wong C, Gordon J, Pollack AJ, Pan Y, Charles J. 2016. General practice activity in Australia 2015–16. General practice series no. 40. Sydney: Sydney University Press.

Data source

Bettering the Evaluation and Care of Health survey

The BEACH surveys of general practice activity were conducted by the Family Medicine Research Centre at the University of Sydney from 1998 to 2016. The 2015–16 BEACH data collection is the last BEACH survey to be conducted.

For each year's data collection, each of a random sample of about 1,000 general practitioners (GPs) report details of 100 consecutive patient encounters on structured patient encounter forms. Each form collects information about the consultation (for example, date and item number(s) charged), the patient (for example, date of birth, sex, and demographics), the problems managed and the management of each problem (for example, clinical and procedural treatments provided, prescriptions and referrals). GP and practice characteristics (for example, GP age, sex and geographical location). Data on patient risk factors, such as height, weight, alcohol consumption and smoking status, are also collected for a subset of the patient encounter forms.

The BEACH data presented for 2015–16 relates to 96,500 GP encounters from a sample of 965 GPs over the period from April 2015 to March 2016, inclusive. After post-stratification weighting (to ensure that national general practice activity patterns are reflected) the data include 97,398 (weighted) encounters (Britt et al. 2016).

Additional information on the 2015–16 BEACH survey can be obtained from *General practice activity in Australia 2015–16* (Britt et al. 2016).

For the purpose of this report, mental health-related GP encounters are defined as those where a mental health-related problem was managed. Mental health-related problems are those that are classified in the psychological chapter (that is, the 'P' chapter) of the International Classification of Primary Care, 2nd edition (ICPC-2). For more detailed information, refer to the online Technical information.

Medicare Benefits Schedule data

The Department of Human Services collects data on the activity of all persons making claims through the Medicare Benefits Schedule and provides this information to the Department of Health. Information collected includes the type of service provided (MBS item number) and the benefit paid by Medicare for the service. For this legacy analysis, the item numbers and benefits paid by Medicare are based on the *Medicare benefits schedule book* (DoH 2015). Services that are not included in the MBS are not included in the data. The list of all MBS items that have been defined as mental health-specific are available in the data source section of Medicare-subsidised mental health-services section.

Reference

Britt H, Miller GC, Henderson J, Bayram C, Harrison C, Valenti L, Wong C, Gordon J, Pollack AJ, Pan Y, Charles J. 2016. General practice activity in Australia 2015–16. General practice series no. 40. Sydney: Sydney University Press.

DoH 2015. Medicare Benefits Schedule Book, effective 1 January 2015. Canberra: Commonwealth of Australia.

Key concepts

Mental health-related services provided by general practice

Key Concept	Description
Encounter	Encounter refers to any professional interchange between a patient and a GP; it includes both direct, face-to-face encounters and indirect encounters where there is no face-to-face meeting but where a service is provided (for example, a prescription, referral or case-conference) (Britt et al. 2016).
General practitioners (GPs)	General practitioners (GPs) are those medical practitioners who are vocationally registered under Section 3F of the <i>Health Insurance Act 1973</i> , or are Fellows of the Royal Australian College of General Practitioners or trainees for vocational registration.
Mental health-related encounters	Mental health-related encounters are those encounters during which at least one mental health-related problem was managed.
Mental health-related problems	Mental health-related problems , for the purposes of this section, are those that are classified in the psychological section (that is, the 'P' section) of the International Classification of Primary Care, 2nd edition (ICPC-2). A list of the 'P' section codes for problems, which includes alcohol and drug-related problems, is provided in the online Technical information.
Mental health- specific MBS items	 Since 2002, several additional items have been included on the MBS to provide support to GPs coordinating the treatment needs of patients with mental health related problems: The 2002 Better Outcomes in Mental Health Care initiative was designed to improve community access to quality primary mental health services by providing better education and training for GPs and more support for them from allied health professionals and psychiatrists; and introduced new MBS items for eligible GPs under the headings '3 Step Mental Health Process' and 'Focussed Psychological Strategies'.

- The November 2006 Better Access initiative was designed to improve access to, and better teamwork among, psychiatrists, clinical psychologists, GPs and other allied health professionals; and introduced the GP Mental Health Care items as well as psychiatrist and allied health worker MBS items that are linked to these plans.
- From 1 January 2010 4 new items (items 2700, 2701, 2715 and 2717) were introduced to replace items 2702 and 2710 for the development of a GP Mental Health Treatment Plan. Items 2700 and 2701 have a lower schedule fee for GPs who have not undertaken accredited Mental Health Skills Training. The schedule fees for the review consultation items 2712 and 2713 were reduced. Allied health services were capped at ten services per patient per calendar year, and the provision for an additional six services under exceptional circumstances was removed. Item 2719, an additional Treatment plan item, was introduced in November 2011.

The MBS groups, subgroups and item numbers associated with these initiatives are detailed in the <u>data source</u> section of Medicare-subsidised mental health-services section.

References

Britt H, Miller GC, Henderson J, Bayram C, Harrison C, Valenti L, Wong C, Gordon J, Pollack AJ, Pan Y, Charles J. 2016. General practice activity in Australia 2015–16. General practice series no.40. Sydney: Sydney University Press.