



THE ROYAL
AUSTRALIAN AND NEW ZEALAND
COLLEGE OF PSYCHIATRISTS



Australian Divisions of **General Practice** Ltd

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MEDIA RELEASE

PSYCHIATRISTS AND GPs AGREE TO WORK TOGETHER ON COLLABORATIVE CARE INITIATIVE

The RANZCP, the ADGP and the Mental Health Council of Australia have agreed that there should be more professional cooperation between psychiatrists and general practitioners.

In an Australian first, last week the RANZCP and the ADGP jointly hosted a workshop – *General Practice and Private Psychiatry: Working Towards A Best Practice Model of Care* – to discuss general practice and psychiatry liaison. The workshop involved all major GP groups and the Mental Health Council of Australia.

Professor Philip Boyce, President of the RANZCP said “The collaboration signals a strong commitment to work more effectively together to improve mental health outcomes for the community”.

Almost 1 in 5 Australians suffer a mental health problem or disorder yet only 38 per cent present to a health care service.

“With statistics like this, the community needs better access to mental health services. There is scope for GPs and psychiatrists to do much better in the way they work together”, said Dr Rob Walters, Chair, ADGP.

“Mental health is common in general practice. Depression is the second most common illness managed in general practice, but GPs are not always confident in managing mental health cases without consultation with professional colleagues.”

Workshop participants agreed in-principle to a range of new measures that will enhance the quality of referrals GPs make to psychiatrists and provide incentives to psychiatrists to enhance their consultancy role for GPs.

Measures under active consideration include:

- a national referral directory;
- guidelines for best practice referral,
- mechanisms to promote communication and collaborative care between GPs and psychiatrists;
- new items in the Medicare Benefits Schedule that will allow psychiatrists to function as consultants to GPs in addition to their current role in ongoing management;
- a systematic, organised approach to collaborative care through the Divisions of General Practice;
- training in primary care for psychiatric registrars: and
- enhancing the use of case conferences and telepsychiatry.

“Mental health can’t be considered in isolation. We know that people with chronic disease have a higher incidence of mental disorder and that those with a mental disorder have a higher risk of physical disease”, said Professor Boyce.

“Enhanced collaborative care between general practice and psychiatry will result in better overall management of both physical and mental health outcomes.”

“Both our organisations hope that this workshop and the work to develop enhanced general practice and psychiatry liaison that will follow will be the next wave of primary mental health care development in Australia. This work will be in harmony with the philosophy, intent, evidence-base and system provided by the Better Outcomes in Primary Mental Health Care program,” said Dr Walters.

The collaboration will be consulting widely with GPs, Divisions of General Practice, all national GP groups, psychiatrists, consumers and carers and other stakeholders in March-April 2004 and will meet again in June to finalise a comprehensive submission to Government.

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Royal Australian and New Zealand College of Psychiatrists

The RANZCP is the principal organisation representing the medical specialty of psychiatry in Australia and New Zealand. There are currently 2600 Fellows of the College who account for approximately 85 per cent of all practicing psychiatrists in Australia and over 50 per cent of psychiatrists in New Zealand

Australian Divisions of General Practice

ADGP is the peak national body representing 120 Divisions of General Practice, across Australia, and was established in 1998. About 95% of GPs are members of a local Division of General Practice.