# Inquiry into the equity, accessability, and appropriate delivery of outpatient and community mental health care in New South Wales



### Responses to questions on notice

Question 1: With the model fidelity framework that you mentioned and that sort of auditing measure that's in place, it's my understanding that there are several headspaces that struggle to pass that auditing system. Is that the case? ... I might ask if you could provide on notice for the Committee, certainly for New South Wales, what those results are across New South Wales.

## **Response to Question 1:**

headspace centres across Australia operate under a national model of care that uses a strong evidence base. This ensures that young people in each state and territory have access to consistent, accessible and holistic prevention and early intervention mental health services delivered by a multidisciplinary workforce under appropriate governance arrangements.

The current 155 headspace services nationally are operated by over 71 different lead agencies and are contracted by 31 different Primary Health Networks. To operate a headspace service, a lead agency is required to hold a Trade Mark License Deed (TMLD) with headspace National Youth Mental Health Foundation and meet the requirements of the headspace Model Integrity Framework.

The headspace Model Integrity Framework (hMIF) is a comprehensive framework that provides detail to guide services in the provision of quality care under the headspace brand to young people and their families. Certification is undertaken every three years and all headspace services are required to participate in and reach certification.

The hMIF certification supports and guides the headspace national network with the implementation of the headspace model. Under this certification headspace services demonstrate how they stay true to the headspace model while also adapting the core components of the model to respond to meet local needs.

There are overlapping components of the model that allow centres to demonstrate how the service is delivered in their region – for example core components such as Service Integration, Supported Transition, Enhanced Access and enabling components such as Consortium, Lead Agency Governance and Blended Funding.

The hMIF also provides a framework for the assessment of model integrity and supports headspace services through the assessment process and ongoing quality improvement required to operate a safe and effective service.

At the time of responding to this enquiry, 37 services (including 4 Satellites) across New South Wales have been assessed. Of these, 29 are certified with 7 remaining services participating in the latest assessment round which is due to be completed by March 2024. One service did not reach certification within the standard timeframe and is being supported by headspace National and the PHN. As this service continues to embed quality improvement measures and strengthen its clinical governance, we expect that this service will reach certification in 2024.

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Question 2: I wanted to confirm that all of your centres are free of charge... We'd be very interested to find out if there were centres that were now charging fees.

## **Response to Question 2:**

All headspace centres are required to provide services to young people at no or low cost.

headspace is funded under a blended model (rather than a fully salaried model). Each headspace centre receives a core funding grant to employ a small number of clinicians and other support staff. All services delivered by core grant funds are provided free of charge with no out-of-pocket costs for young people.

headspace centres have multiple sources of funding and in-kind contributions to enable them to increase service offerings as demand for services grows, and allow them flexibility and sustainability to meet the needs of young people and their community.

Many headspace centres rely on attracting private practitioners (GPs, psychologists, social workers, etc) who bill Medicare for the services they deliver. These private practitioners are expected to provide services with no out-of-pocket costs. There may be occasions where they charge a low fee, but these are infrequent and waived when the young person cannot pay.

headspace centres are finding it increasingly challenging to attract and retain bulk-billing clinicians, due to acute workforce shortages and competition. Over the seven years from 2016-17 to 2022-23, MBS activity in headspace centres in NSW/ACT declined by 47 per cent, despite an equivalent increase over the same period in the number of centres in operation. This is consistent with the national trend, and corresponds with a 27 per cent decrease in the number of service providers recording MBS funded services in NSW/ACT over this period.