

## Access to Allied Psychological Services (ATAPS) Program

The Sutherland ATAPS Program commenced in 2003 with Australian Government funding through the *Better Outcomes in Mental Health Care* initiative. Unlike other divisions who provided psychological services through the direct employment of psychologists or contracting services from local private psychologists, Sutherland Division contracted psychological services from Sutherland Division of Mental Health (SDMH). In the 4 years the service has been in operation, it has expanded and in 2006-2007 has a budget of \$193,000.00. Government funding has been committed until 2009.

### ***How does it work?***

SDMH employs additional clinical psychologists to see clients referred by GPs. There are currently 1.5 FTE clinical psychologists. Sometimes, intern clinical psychologists also see patients. Sutherland Alcohol and Other Drugs Service also provides a facilitator for the co-morbidity group. Up to 12 sessions per patient per annum are available. These are delivered via individual or group programs. Group programs are available for:

- Depression
- Panic and avoidance
- Co-morbidity (depression/anxiety plus alcohol use).

These services are free of charge to the patient.

To make a referral, GPs complete a mental health assessment and mental health plan and fax them – with a specific fax coversheet – to SDMH. The clinical psychologists phone the patient within a few days to make an appointment. The initial appointment is likely to be within a couple of weeks but this will depend on any waiting list at the time.

### ***Who can refer?***

Initially, only GPs who had attended mental health training and had registered at either Level 1 or Level 2 could refer patients but since the introduction of the *Better Access to Mental Health Care* initiative in November 2006, all GPs can now refer patients.

### ***Who should be referred?***

The majority of clients seen by ATAPS have either depression or an anxiety disorder. Only conditions amenable to therapy using time-limited (up to 12 sessions) focussed psychological strategies are suitable. Cognitive Behavioural Therapy is the most commonly used technique. Conditions such as personality disorders are inappropriate for referral as they are not amenable to treatment in 12 sessions and can actually deteriorate due to abrupt cessation of treatment. Similarly, complex conditions such as eating disorders that require a team-based approach over a longer period of time are also inappropriate.

Because of the fixed budget, the ATAPS program can deliver a limited number of services. As there is no patient charge for these services, only patients on low incomes who are unable to pay any gap fee for MBS services from private psychologists, or clients being referred for group programs should be referred.

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