

NATIONAL DIGITAL MENTAL HEALTH FRAMEWORK



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CONTENTS



ACTION AREA 1

Strengthen the delivery of connected care to support each person to receive the right care, at the right time, at the right location



ACTION AREA 2

Enhance trust and confidence to adopt and deliver digital mental health services and, where appropriate, blended models of care



ACTION AREA 3

Enable equitable access to digital mental health services for consumer cohorts



ACTION AREA 4

Build monitoring and evaluation into digital mental health service programs to measure impact and drive continuous improvement



ACTION AREA 5

Enhance integration of digital mental health services with the broader system to support the delivery of persons centric and holistic care

	PAGE
Glossary	03
About this Framework	04
The Framework	05
The Action Areas	06
Digital Mental Health System Enablers	12
What Will Be Different?	13



GLOSSARY

Consumer

In this Report, a consumer refers to a user of a mental health or digital mental health service, including those who have, are, or will, receive treatment for mental health challenges.¹

Digital mental health service

The Australian Commission on Safety and Quality in Health Care defines Digital mental health services as 'mental health, suicide prevention or alcohol and other drug services that use technology to facilitate engagement and delivery care'.²

Digital mental health engagement

Refers to a person's understanding of the mental health condition and their willingness to engage in or accept mental health treatment.³

Health professionals

Health professionals include General Practitioners, allied health workers, pharmacists, psychologists, and psychiatrists

Health providers

Services that provide health services, including social work, counselling services

NSQDMH Standards

The National Safety and Quality Digital Mental Health Standards as developed by the Australian Commission on Safety and Quality in Health Care

PHN

Primary Health Network

The Fifth Plan

The Fifth National Mental Health and Suicide Prevention Plan

The Framework

National Digital Mental Health Framework

Warm referral

A warm referral typically involves a supported introduction to the new service (e.g. supporting the individual to make the initial contact with the new service or provider) and (with the consent of the individual) providing relevant written reports or notes.⁴

1. It is noted that, while the framework does not specifically refer to carers, it acknowledges the role that carers play in supporting individuals to access appropriate supports.

2. Australian Commission on Safety and Quality in Health Care (2020), National Safety and Quality Digital Mental Health Standards.

3. Australian Government Department of Health (2019). PHN guidance. Initial Assessment and Referral for Mental Health Care.

4. Australian Government Department of Health (2019). PHN guidance. Initial Assessment and Referral for Mental Health Care.

ABOUT THIS FRAMEWORK

Digital mental health services are transforming the way mental health services are accessed and delivered. They offer considerable potential to improve efficiencies and consumer access to services by addressing geographic, stigma, privacy and financial barriers across the spectrum of mental health. They enable digital triage and referral processes, increased peer support in the delivery of mental health services and offer the potential to be scaled up in a cost-effective way. As such, digital mental health services will continue to play an important role in meeting increasing demand for mental health services in Australia, meeting the gap between what people need and what current systems can deliver.

This National Digital Mental Health Framework ('the Framework') has been developed as an outcome of Action 32 of The Fifth National Mental Health and Suicide Prevention Plan (the Fifth Plan). Comprehensive research about the current state of Australia's digital mental health ecosystem and a series of national consultations with the sector, considered against recommendations made through the Productivity Commission's 2020 Inquiry into Mental health, has informed development of this Framework. The Framework establishes a set of objectives and is intended to act as a guide for governments and others to work together to more effectively and efficiently integrate planning and delivery of digital mental health and suicide prevention related services.

The Framework defines action areas to improve service access, reduce duplication of effort and investment, and embed digital mental health services in the broader mental health service system. It also documents the system enablers that will support service optimisation over time.

The Framework outlines a set of objectives that will enable governments to collectively work towards developing a digital mental health ecosystem that:

Objective 1: Places consumers at the centre of how products and services are designed and delivered. Consumers and their unique circumstances are placed at the forefront of decision-making processes that govern funding, regulation, design, delivery and inclusivity of digital mental health services.

Objective 2: Puts protections in place to minimise consumer harm. Consumers are protected from harm by robust quality and safety standards. Their privacy and confidentiality is considered and mechanisms are put in place to protect them as they seek information and use digital mental health services.

Objective 3: Builds trust and confidence in digital mental health products and services for stakeholders. Investments into research, education and awareness promotion, evidence translation, resources and tools contribute to building trust in the efficacy and effectiveness of digital mental health services for stakeholders.

Objective 4: Considers different funding models to drive uptake and behaviour change. Funding models are used to enable and influence service design and delivery towards outcomes, and support enablers of change and mechanisms that drive the evolution of care models and consumer pathways.

Objective 5: Simplifies information and access to information for stakeholders. Information is clear and accessible to stakeholders to better support and guide consumers through care pathways. There is a focus on presenting complex information simply and development of practical tools and guides that include for self-service and education along with knowledge curation and wayfinding assistance.

Objective 6: Integrates digital mental health services across the broader mental health and health systems. Services operate seamlessly as part of a connected mental health and health system in terms of data sharing and interoperability. This includes thoughtful design of entry, check-in and exit points across the system to support consumers through all stages of their mental health journey.

Digital mental health services are 'mental health, suicide prevention or alcohol and other drug services that use technology to facilitate engagement and delivery care'.⁵

5. Australian Commission on Safety and Quality in Health Care (2020), National Safety and Quality Digital Mental Health Standards.

THE FRAMEWORK

What is the 'Framework'?

The Digital Mental Health Framework is a guide to create a digital mental health ecosystem that provides evidence based digital mental health service options across the mental health spectrum, that enables consumer choice, and is integrated into the broader mental and health system, creating effective and scalable connections tailored around an individuals needs.

FRAMEWORK OBJECTIVES

Six key objective that provide specific direction on what the Framework seeks to achieve



Objective 1: Places consumers at the centre of how products and services are designed and delivered.



Objective 2: Puts protections in place to minimise consumer harm.



Objective 3: Builds trust and confidence in digital mental health products and services for stakeholders.



Objective 4: Considers different funding models to drive uptake and behaviour change.



Objective 5: Simplifies information and access to information for stakeholders.



Objective 6: Integrates digital mental health services across the broader mental health and health systems.

What will be different?

Change and progress across the digital mental health ecosystem will be measured across five service optimisation categories. Service optimisation categories provide a set of criteria intended to guide how and what existing and emerging digital mental health services are funded.



Experience and trust



Quality and safety



Interoperability



Monitoring and evaluation



Equity and access

Achieved through

Enabled by

ACTION AREAS

Five action areas that define key actions to take to achieve the intended objectives



Action Area 1: Strengthen the delivery of connected care to support each person to receive the right care, at the time, at the right location



Action Area 2: Enhance trust and confidence to adopt and deliver digital mental health services and, where appropriate, blended models of care



Action Area 3: Enable equitable access to digital mental health services for all consumer cohorts



Action Area 4: Build monitoring and evaluation into digital mental health service programs to measure impact and drive continuous improvement



Action Area 5: Enhance integration of digital mental health services with the broader system to support the delivery of person centric and holistic care



SYSTEM ENABLERS

Five critical system enablers that support the achievement of action areas and Framework objectives

Workforce capability

Funding models

Software programs, platforms, and information systems

Broadband, digital infrastructure, and digital devices

Digital and health literacy



ACTION AREA 1:

Strengthen the delivery of connected care to support each person to receive the right care, at the right time, at the right location

Digital mental health services can strengthen a “connected care” experience for consumers

Connected care is about consumers experiencing effective, efficient, seamless and appropriate care tailored to their individual needs. Digital tools and technologies enable a more connected care experience by supporting choice and access to evidence-based mental health care. Barriers that impact how consumers currently experience digital mental health services and broader access to appropriate support services include:

- The lack of a consistent, standardised approach to assess, triage and refer consumers to services based on risk and need.
- The minimal use of warm referrals to connect consumers to services, despite evidence demonstrating that warm referrals are more successful in engaging consumers, particularly for people who are vulnerable or have complex needs.⁶ Improving the accessibility of information about available services and associated waiting times would assist service providers in making referrals.
- A limited understanding by health professionals and providers about how digital mental health services may be best adopted to support consumers at each stage of the care continuum.

What are the action areas?

ACTION AREA 1.1

Implement comprehensive, national mental health platform that facilitates more consistent assessment, triage and referral of consumers. The solution should provide up-to-date information on the variety and availability of mental health services at a national, regional and local level with transparency on wait times for accessing services so that consumers, service providers and health professionals are better able to navigate the digital mental health services system.

ACTION AREA 1.2

Support health professionals and providers with evidence-based guidance on how to integrate digital mental health services into care delivery across the mental health spectrum, including as the severity of individual care needs change, considering how this might best be supported by technology. This includes building an understanding of the efficacy and suitability of digital mental health services for different consumer needs and preferences.

ACTION AREA 1.3

Develop evidence-based guidance, validated process maps and workflows for health professionals, and providers to successfully incorporate blended interventions into existing models of care. This should build capability and confidence in integrating digital mental health services into treatment planning pathways and support how mental health assessment tools inform the triage and referral process.

How will action areas support objectives?



Objective 3: Builds trust and confidence in digital mental health products and services for stakeholders by improving the experience and trust of health professionals in digital mental health services. Specifically, by equipping them with evidence based tools (practical guides) to incorporate digital interventions into existing treatment pathways and models of care.



Objective 5: Simplifies information and access to information for stakeholders by ensuring information is consistent and equally accessible across the sector. This involves providing tools and mechanisms that support access to standardised up-to-date information and guidance around connecting and delivering digital mental health services.

6. Marec C, Mills KL, Kingston R, Gournay K, Deady M, Kay-Lambkin F, Baker A, Teesson M (2016). Guidelines on the management of co-occurring alcohol and other drug and mental health conditions in alcohol and other drug treatment settings (2nd edition). University of New South Wales; Australian Government Department of Health (2020). National PHN Guidance: Initial Assessment and Referral for Mental Healthcare.



ACTION AREA 2:

Enhance trust and confidence to adopt and deliver digital mental health services and, where appropriate, blended models of care

Building trust and confidence in stakeholders will enable greater adoption of digital mental health services, providing consumers with more accessible and cost-effective choices

Health professionals are an important gateway for consumers in accessing evidence based information, enabling consumers to make informed choices about managing their mental health.⁷ Barriers that impact stakeholder awareness and willingness to adopt digital mental health services include the following:

- Consumers need a minimum level of digital literacy to access and use digital mental health services effectively.
- Many health professionals are not fully aware of the breadth of available digital mental health services, their effectiveness and suitability for different consumer needs and preferences, and the safety and quality of these services. This limits the extent to which they can maximise their adoption of digital mental health services.⁸

- Many digital mental health services are designed for people with high prevalence mental illness. This limits the digital mental health supports available for people with severe, complex and less prevalent disorders.
- There is poor availability of education and training for health professionals on the use of digital mental health services in the delivery of specialised, trauma informed, and/or culturally appropriate mental health care.⁹

What are the action areas?

ACTION AREA 2.1

Develop and publish the evidence base (effectiveness and outcomes) for digital mental health services for conditions across the mental health spectrum and across different cohorts.

ACTION AREA 2.2

Develop and launch a national information and education campaign that provides training programs and academic resources for health professionals and consumers to raise awareness of digital mental health services, effectiveness and how best to adopt services to augment existing face-to-face, telehealth and virtual care.

ACTION AREA 2.3

Develop specific education materials for health professionals that build confidence in how best to adopt digital mental health services as part of their mental health care planning and delivery.

ACTION AREA 2.4

Trial and implement strategies to increase and improve adoption of digital mental health services, including providing guidance to health professionals on best practice adoption of digital services and blended interventions. Guidance should consider the suitability of digital interventions for different conditions and consumer needs, consumer access to digital tools and a secure, private place to use digital mental health services, whether consumers have adequate digital literacy to use digital interventions, and processes to address confidentiality concerns. May be enabled by decision support tools.

7. Australian Committee on Safety and Quality in Health Care (2019), Certifying Digital Mental Health Services: Discussion paper for consultation participants

8. PricewaterhouseCoopers, National Digital Mental Health Framework National Consultations (2020)

9. Titov, Nick (2019), From Research to Practice: Ten Lessons in Delivering Digital Mental Health Services.

How will action areas support objectives?



Objective 3: Builds trust and confidence in digital mental health products and services for stakeholders by improving awareness and understanding of the evidence base, and placing practical tools to more directly influence adoption of digital mental health services.



Objective 4: Considers different funding models to drive uptake and behaviour change. Includes considering how bundled and outcomes driven funding models may drive willingness to adopt hybrid or blended models of mental health care into existing service models.



Objective 5: Simplifies information and access to information for stakeholders by supporting health professionals and consumer access to information about the availability, quality and safety of digital mental health services. Clear evidence and guidance, supported by decision support tools will guide and enable the safe and effective delivery of these services.





ACTION AREA 3:

Enable equitable access to digital mental health services for consumer cohorts

Improving the breadth and reach of digital mental health services can enable equitable access

Digital mental health services can improve access barriers for traditionally underserved cohorts by overcoming geographical and socio-economic barriers. They also provide consumers with the ability to exercise greater choice and control over when and where treatment will take place, presenting as a valuable option for consumers who are reluctant to use face-to-face services.¹⁰ However, not all people have fair and equitable access to digital mental health services. Key barriers that limit access include:

- The attitudes and cultural beliefs of an individual, their family, and their broader community can influence their likelihood of accessing mental health services, including digital mental health services.¹¹
- Some cohorts face barriers relating to affordability, access, or ability when using digital mental health services if they are not designed to meet their unique needs or cultural preferences.¹²

- Consumer preferences for different modes of delivery (e.g. website, mobile health apps, videoconferences), access channels (e.g. phone, computer) and delivery types (e.g. self managed, clinician led services) are cohort dependent and influence their likelihood to access services and complete treatment.
- There is unequal access to appropriate digital infrastructure for some population cohorts.¹³

What are the action areas?

ACTION AREA 3.1

Strengthen how Lived Experience, culturally appropriate and trauma-informed guidance is integrated into the co-creation, design and delivery of digital mental health services. This co-creation capability should identify and engage vulnerable cohorts, where access to high quality mental health care is limited, to support service design improvements into future.

ACTION AREA 3.2

Comprehensive review of coverage and reach of funding for services to address gaps in the availability of digital mental health services for specific cohorts of the population. This includes a review of the availability of different modes of delivery, access channels, and delivery types for funded digital mental health services to cater to diverse needs and preferences, beyond those solely funded by Commonwealth.

How will action areas support objectives?



Objective 1: Places consumers at the centre of how products and services are designed and delivered by embedding the skills and tools to build critical design capabilities throughout how services are developed and implemented. This should enable equitable access to digital mental health services for consumer cohorts by providing a more integrated approach to how services are designed and tailored to meet diverse consumer needs appropriately.

10. Andrews G, Cuijpers P, Craske MG, McEvoy P, Titov N. (2010). Computer therapy for the anxiety and depressive disorders is effective, acceptable and practical health care: Ameta-analysis.

11. Gopalkrishnan N. Cultural Diversity and Mental Health: Considerations for Policy and Practice. Front Public Health. 2018 Jun 19;6:179.

12. Lara Bishop, Andy Ransom, Martin Laverty, Lauren Gale (2017), Mental Health in Remote and Rural Communities; Mental Health in Multicultural Australia (2014), Framework for Mental Health in Multicultural Australia: Towards culturally inclusive service delivery; Megan Price & John Dalgleish (2013), Help-seeking among Indigenous Australian adolescents: Exploring attitudes, behaviours and barriers. Youth Studies Australia, 32(1).

13. Roy Morgan, RMIT University, Centre for social impact and Swinburne university (2018). Measuring Australia's digital divide. The Australian Digital Inclusion index 2018: AMA (2016). Better access to high speed broadband for rural and remote healthcare.



ACTION AREA 4:

Build monitoring and evaluation into digital mental health service programs to measure impact and drive continuous improvement

Monitoring and evaluation is key to building an evidence base to inform what is working and to identify opportunities for improvement across the digital mental health ecosystem.

Research, monitoring and evaluation activities are essential for building a comprehensive evidence base to increase broader trust in the efficacy of digital mental health services amongst consumers, health professionals and the broader community. However, key barriers restrict the monitoring and evaluation capabilities across the sector. These include:

- A lack of standardised evaluation guidance that is aligned to key outcome measures to enable consistent monitoring and evaluation of digital mental health services.
- A focus across most funding contracts being on activity based KPIs (e.g. the number of sessions or services delivered) which limits the extent to which services can focus on monitoring and evaluating the appropriateness and effectiveness of their programs and services.¹⁴
- Limited funding allocated to digital mental health services to support them in embedding monitoring and evaluation activities.

What are the action areas?

ACTION AREA 4.1

Develop an outcomes-based evaluation framework that includes standardised data definitions to monitor and assess the adoption and impact of digital mental health services in a consistent way across services. The framework should help services to collect meaningful data to support service optimisation, identify opportunities for improvement - and at system level - contribute to the evidence base, identify service access, coverage and/or quality gaps. Additionally, consumers, carers and the lived experience cohort should play a large role in defining consumer and population health outcomes.

ACTION AREA 4.2

Build research and evaluation costs into funding provided to digital mental health services to enable ongoing evaluation and continuous improvement practices.

ACTION AREA 4.3

Invest in new and innovative services, tools and programs through pilot funding to validate effectiveness, efficiency and viability before scaling and optimising services.

ACTION AREA 4.4

Define who is responsible for the implementation and ongoing management of the standardised outcomes-based evaluation, including the collection of data and reporting of outcomes. Critically, funders will need to work together to build a connected evidence base that informs both policy, regional service planning, impacts and outcomes.

How will action areas support objectives?



Objective 1: Places consumers at the centre of how products and services are designed and delivered by ensuring that continuous improvement practices are integrated across the digital mental health ecosystem and individual services to assess the effectiveness, impact, quality, safety and experience of digital mental health services, including to what extent they continue to meet need.



Objective 3: Builds trust and confidence in digital mental health products and services for stakeholders by enabling improved monitoring and evaluation of digital mental health services, clearly defining intended outcomes and determining whether funding is working across the digital mental health ecosystem and where it interfaces with broader health and social systems.

¹⁴. Australian Government Department of Health (2021).



ACTION AREA 5:

Enhance integration of digital mental health services with the broader system to support the delivery of person centric and holistic care

Digital mental health service integration is key to bringing the ecosystem together seamlessly

The integration of services, between the mental health system, including both digital and face to face services, and the broader health system is important for providing consumers with person-centric and holistic care. Integrated and coordinated approaches to care are key to ensuring people with mental illness, particularly those with comorbidities, experience better mental health care and outcomes. Current barriers in integrating digital mental health services within the broader mental health and health systems and enabling system interoperability include:

- A lack of a centralised portal through which the wealth of research, data, resources and information available can be shared across the sector to support sector-wide capability uplift.
- Limited interoperability between digital platforms and information systems across the mental health and broader health sectors, resulting in difficulties sharing data and information.
- Digital mental health service funding typically being targeted at service delivery functions rather than towards the underlying technology and capabilities required to deliver and progressively evolve services.

What are the action areas?

ACTION AREA 5.1

Develop a technology enabled community of practice network to share research, data and information across providers to reduce time taken to find information, and to ensure consumers, caregivers, service providers, health professionals, and the broader mental health sector are engaged in the development of digital mental health services through making their voices heard across the network.

ACTION AREA 5.2

Require and fund specific co-creation activities when investing in new and innovative services to encourage greater sector collaboration, enhance service integration and service continuity, and share lessons. This is especially needed at the entry and interface points of the ecosystem, where services refer and receive consumers. Co-creation is particularly relevant when a person's mental health needs are complex, or when multiple providers have been involved in a person's care on an ad-hoc basis. The economic benefit and cost of investments should be analysed prior to the distribution of funding. This will encourage targeted investment that is future focused.

ACTION AREA 5.3

Funding models and arrangements should encourage and incentivise interoperability and improved data sharing, requiring the use of interoperability in creating platforms and clinical information systems across digital mental health services and hybrid care settings.

How will action areas support objectives?



Objective 3: Builds trust and confidence in digital mental health products and services for stakeholders by enabling cooperation (ensuring competition is not at the expense of the consumer) and service integration through technology. This includes enabling interoperability of services and data sharing across health and mental health sectors and building the capability to use the technology effectively.



Objective 6: Integrates digital mental health services across the broader mental health and health systems using funding arrangements to drive and support creation of platforms and clinical information systems that enable information to be shared across the entire digital mental health ecosystem. This should enable a seamless experience for stakeholders.



DIGITAL MENTAL HEALTH SYSTEM ENABLERS

The enablers of the digital mental health ecosystem describe a range of requirements that sit outside of the digital mental health ecosystem but are fundamental to shaping the success of the action areas. These include infrastructure, support tools, mechanisms and capabilities that are necessary to facilitate the effective delivery of digital mental health services. An overview of key enablers is described below.

The system enablers recognise the critical role of supporting structures required to deliver optimal digital mental health services across the ecosystem.

Workforce capability

Investments into growing and upskilling the mental health and broader health workforce (including the lived experience and peer workforce) should actively integrate training, learning and development opportunities that encourage adoption of digital mental health services, equipping stakeholders with the skills to care for the needs of their cohorts and communities. There is an opportunity to provide targeted training for health professionals in the delivery of trauma informed, culturally appropriate care and how to use digital mental health services to support the unique needs of vulnerable cohorts.

Platforms and clinical information systems.

Systems will need to be interoperable across the digital mental health and broader health sectors so that information and data exchange is secure and safe, and effectively integrated into clinical workflows. This will need to consider the role of broader government digital infrastructure investments into health and how the emerging challenges of cyber security, user privacy, quality and safety more broadly, whilst preserving consumer-choice in how their personal data is used.

Broadband, digital infrastructure, and digital devices.

Consumers and health professionals would benefit from strong and reliable internet connection and data to enable equitable access, encourage uptake and build confidence in using blended models of care. Consumers will also need access to digital devices in order to access digital mental health services. This could include shared community resources or personal ownership. Barriers relating to affordability, access, or ability may also need to be overcome before some consumers can use digital mental health services.

Digital and health literacy

COVID-19 has highlighted the importance and value of digital inclusion as a means to support equal opportunity and enable everyone to participate socially. In health, digital inclusion plays a critical role in helping consumers to access support in the absence and/or low supply of health professionals to provide services. Digital inclusion can enable choice and flexibility, helping consumers to be equal partners in their own health care. To do this effectively and well, stakeholders (including health professionals) will require support with their digital skills to close the digital divide and enable meaningful and equitable participation.



WHAT WILL BE DIFFERENT?

Measuring change across the digital mental health ecosystem

Change and progress across the digital mental health ecosystem will be measured across five service optimisation categories. Service optimisation categories provide a set of criteria intended to guide how and what existing and emerging digital mental health services are funded, and support better outcomes, innovation, evaluation, and cooperation.

Moving from an ecosystem...

Towards an ecosystem...



Experience and trust

Evidence behind the effectiveness and suitability of digital mental health products and services should be readily available to increase trust in health professionals and consumers that use them. The workforce should feel confident in using and delivering digital mental health services, including as part of blended models of care.

- Where health professionals have limited knowledge, skills and technical capability to adopt the use of digital mental health tools optimally as part of their delivery of care, despite training and resources being available.
- Where co-creation of the design and delivery of digital tools and services with Lived Experience is not routine and could be strengthened throughout consumer pathways.

- Where formal training structures and requirements drive health professional and practitioner adoption of digital mental health services, through enhancing knowledge, skills and technical capability.
- Where health professionals view digital mental health tools as being essential to the delivery of mental health care, helping them to increase consumer access to appropriate mental health care that supports consumers to achieve positive mental health outcomes.
- With a mature co-creation and design capability integrated into the design and delivery of digital mental health services that is used alongside evaluation and monitoring data to support continuous improvement practices across the ecosystem.



Quality and safety

Consumers are protected by minimum health and digital quality and safety standards and have the option to privately and confidentially access and use digital mental health products and services that are evidence-based and minimise harm.

- Where standards to guide quality and safety of digital mental health services exist, but are not actively implemented across providers.
- With limited regulation of new and emerging digital mental health tools that contributes to a varied understanding of evidence based tools "approved" for use across the mental health spectrum.
- Where consumers and providers' understanding of issues relating to privacy, data security and consent could be better supported and improved.
- With uncertainty around roles and responsibilities and existing funding structures inhibit how accountability is defined.

- Where all digital mental health services are accredited against relevant and required standards, including the National Safety and Quality Digital Mental Health Service Standards.
- With comprehensive standards for digital mental health services in place that are actively implemented across mental health and health systems
- With structured regulation guidance and pathways to support new and emerging innovation, with a comprehensive suite of evidence based tools "approved" for use across the mental health spectrum.
- That consumers and providers feel confident navigating safely, securely across with a clear understanding of the evidence base behind digital mental health tools and services.
- Where roles and responsibilities across the digital mental health, mental health and broader health sectors are clearly defined, including structures and processes which define accountability for funding and decision making.



Moving from an ecosystem...

Towards an ecosystem...



Interoperability

Clinical programs, platforms and information systems in the mental health and broader health systems are interoperable. This is further supported by improved coordination across the digital mental health, mental health, and broader health sectors through consistent practices and definitions.

- Where tools and platforms have limited functionality for information sharing and shared workflows across systems.

- With interoperable tools and platforms that span the mental health spectrum, enabling more seamless referral, better connection, and blended care models to support promotion and awareness, prevention, assessment, intervention, monitoring and management.



Monitoring and evaluation

Digital mental health services and products should engage in continuous improvement activities whereby high quality, outcomes-focused data is collected and used to evaluate the success, impact and effectiveness of these services.

- With limited measurement of meaningful impact and outcomes from digital mental health services.
- Where digital mental health services define and measure outputs and outcomes within individual ecosystems.
- With no systematic or standardised way of sharing lessons learned.

- With a system-wide outcomes framework that enables standardisation and consistency in how digital mental health services define, measure and publish data and outcomes.
- With clear and consistent mechanisms for how data (quantitative and qualitative) across the ecosystem is used to continuously improve access, engagement, experience and effectiveness.
- With vibrant communities of practice in place to build transparency and encourage connectivity across the sector.



Equity and access

Digital mental health services should accommodate the unique needs of, and be appropriately accessible to, all population cohorts, including vulnerable cohorts, those in regional and remote areas, and those with comorbid physical and mental health conditions.

- With limited existing services that are accessible to, and address the specific needs of vulnerable populations and cohorts.
- With limited visibility around the demand for, and appropriateness of digital mental health services by vulnerable population and cohorts, with gaps that warrant specific service types to be identified and funded to better address need.

- That is able to identify what and where services are needed to better meet demand appropriately for different population cohorts and needs, adopting an integrated co-creation capability to design and deliver fit-for purpose services over time.





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