

# Brisbane North - Primary Mental Health Care

## 2022/23 - 2026/27

### Activity Summary View



## MH-H2H - 3600 - Head to Health Phone Service



### Activity Metadata

#### Applicable Schedule \*

Primary Mental Health Care

#### Activity Prefix \*

MH-H2H

#### Activity Number \*

3600

#### Activity Title \*

Head to Health Phone Service

#### Existing, Modified or New Activity \*

Existing



### Activity Priorities and Description

#### Program Key Priority Area \*

Mental Health Priority Area 8: Regional mental health and suicide prevention plan

#### Other Program Key Priority Area Description

#### Aim of Activity \*

The Head to Health Phone Service was developed as a response to both the Productivity Commission's (PC) findings from its Inquiry into Mental Health and the response to the COVID-19 pandemic. The PC report found that the mental health system was complex and that many people who needed treatment and care were unable to access appropriate services that were well integrated with other parts of the system - both those funded through the Commonwealth and state and territory services.

To address this, the phone service is intended to provide initial assessment and service navigation support to connect people to the right mental health service to meet their needs. It is designed to complement, not replace, or duplicate, mental health support lines and services already provided in the community. In addition to the phone service, the Head to Health Service Navigation

team delivers a range of other activities with the aim to improve integration of local health services, promote multi-disciplinary care, and make the health system more accessible. As well as assisting consumers, families, carers, GPs and allied health professionals navigate mental health services in the North Brisbane and Moreton Bay region.

Head to Health operates the national assessment and referral telephone service and online service navigation assistance via the My Mental Health website. The aim of the service is to offer a seamless care pathway for consumers to access the right mental health service to meet their identified needs. Head to Health is designed to address fragmentation in the mental health system and enhance local service integration.

### **Description of Activity \***

Note: This activity is being transitioned to another provider after December 2024. There is no decommissioning occurring with this transfer.

The Service Navigation team based at Brisbane North PHN will continue to assist to assist consumers, carers, GPs and other health professionals navigate and access mental health, alcohol and other drug and suicide prevention services across the North Brisbane and Moreton Bay region

This activity will be achieved by providing intake, assessment and referral to services commissioned by the Brisbane North PHN or other community based services. Specific activities include:

- Service promotion with consumers, referrers and service providers to build awareness of Head to Health.
- Provision of a consistent approach to intake, assessment and referral informed by the IAR-DST tool.
- Provision of information and advice on locally available mental health services and supports.
- Development and maintenance of resources for consumers, referrers and service providers (e.g. My Mental Health website and Services Map + Magazine).
- Expanded referral pathways and service mapping to IAR level of care
- Lead digital enhancements to improve workflows and end-user experience (e.g. web-chat function, Power BI dashboard of services, rediCASE)
- Maintain service policies, procedures and guidance material, for example Clinical Governance Framework.
- To develop and implement a project plan for growth and development of the Head to Health service in line with guidance and funding provided by the Dept. of Health. Activities will include; recruitment, training, after-hours phone coverage and integration with MH CALL

### **Needs Assessment Priorities \***

#### **Needs Assessment**

2023\_Refresh\_BrisbaneNorthPHN\_HNA

#### **Priorities**

<b>Priority</b>	<b>Page reference</b>
Mental health	69
Service System	72



### **Activity Demographics**

#### **Target Population Cohort**

Whole of population – consumers, families, carers, GPs, service providers and other allied health professionals.

#### **In Scope AOD Treatment Type \***

#### **Indigenous Specific \***

No

**Indigenous Specific Comments**

**Coverage**

**Whole Region**

Yes



**Activity Consultation and Collaboration**

**Consultation**

In 2018/19, the PHN consulted with a range of consumer and carer representatives, service providers and other stakeholders to review psychological services and services for people with severe mental illness. This informed the development of the service model and the PHN's approach to the delivery of Service Navigation. We anticipate further engagement activities in 2023/24 as part of the implementation of the Head to Health national service model.

**Collaboration**

The Head to Health Service Navigation program is delivered by the Brisbane North PHN, reporting to the manager of Mental Health Reform, and clinical governance oversight from the Clinical Advisory Group (CAG).



**Activity Milestone Details/Duration**

**Activity Start Date**

29/06/2019

**Activity End Date**

28/06/2026

**Service Delivery Start Date**

01/07/2020

**Service Delivery End Date**

30/06/2026

**Other Relevant Milestones**



**Activity Commissioning**

Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: No  
 Continuing Service Provider / Contract Extension: No  
 Direct Engagement: Yes  
 Open Tender: No  
 Expression Of Interest (EOI): No  
 Other Approach (please provide details): No

Is this activity being co-designed?

No

Is this activity the result of a previous co-design process?

Yes

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

No

Has this activity previously been co-commissioned or joint-commissioned?

No

Decommissioning

No

Decommissioning details?

Co-design or co-commissioning comments

In 2018/19, the PHN consulted with a range of consumer and carer representatives, service providers and other stakeholders to review psychological services and services for people with severe mental illness. This informed the development of the service model and the PHN's approach to the delivery of Service Navigation. We anticipate further engagement activities in 2023/24 as part of the implementation of the Head to Health national service model.



## Activity Planned Expenditure

### Planned Expenditure

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27
H2H Intake and Assessment Phone Service	\$0.00	\$2,027,668.00	\$1,622,526.39	\$846,845.00	\$0.00

Totals

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27	Total
H2H Intake and Assessment Phone Service	\$0.00	\$2,027,668.00	\$1,622,526.39	\$846,845.00	\$0.00	\$4,497,039.39
Total	\$0.00	\$2,027,668.00	\$1,622,526.39	\$846,845.00	\$0.00	\$4,497,039.39

**Funding From Other Sources - Financial Details**

**Funding From Other Sources - Organisational Details**



**Activity Comments**

**Activity Status**

Submitted

**PHN Comments**

Subject	Description	Commented By	Date Created
---------	-------------	--------------	--------------

**Comments from the Department**

Comment	Date Created
---------	--------------



## MH - 1100 - MH 1.1 - New Access service



### Activity Metadata

**Applicable Schedule \***

Primary Mental Health Care

**Activity Prefix \***

MH

**Activity Number \***

1100

**Activity Title \***

MH 1.1 - New Access service

**Existing, Modified or New Activity \***

Existing



### Activity Priorities and Description

**Program Key Priority Area \***

Mental Health Priority Area 1: Low intensity mental health services

**Other Program Key Priority Area Description****Aim of Activity \***

The National Mental Health Service Planning Framework's Planning Support Tool estimates that over 88,000 people in the PHN region will have a mild mental health condition in 22-23. Results from the PHN's brief therapy and regional plan consultation identified the need to provide mental health services that intervene early and prevent the need for more moderate and severe psychological therapy services.

The aim of this activity is to improve access to low intensity services for people aged 12 years and over. Brisbane North PHN will achieve this aim by continuing to commission structured, time-limited, evidence-based low intensity psychological services.

The over-arching purpose of the Primary Mental Health Care Program in relation to brief therapies is to improve the targeting of psychological interventions to most appropriately support people with mild mental illness at the local level through the development and/or commissioning of brief therapy mental health services.

A key focus of the NewAccess program is to enable greater access to brief psychological therapy living in the Brisbane North region. People can self-refer into the NewAccess program and do not need to have a diagnosed mental health condition, a GP referral or a mental health care plan.

The overall outcomes of the NewAccess program are for people to experience:

- decreased levels of anxiety, depression and psychological distress
- improved capacity to manage life stressors

### Description of Activity \*

The PHN will commission a specialist service provider to deliver NewAccess to reach the mainstream population residing in the Brisbane North region. The NewAccess brief therapy service will be embedded within a wider range of stepped mental health care services and supports for the individual as needed. Referral pathways to more moderate psychological therapy services will be established and included in the provider's service delivery model.

Brief therapy services will be promoted via PHN communication and mental health distribution channels. A brief therapy GP and Health Professional Communication and Education Strategy will be co-designed and implemented to increase awareness, understanding and credibility about:

- where evidence based brief psychological therapies sit within the stepped model of primary mental health
- how brief therapy services can support people who are at risk of/experiencing mild mental health conditions or recovering from a more moderate/severe mental health condition
- who would benefit from accessing a brief psychological therapy
- what evidence based brief psychological therapies are available to people living in the Brisbane North region

The provider's service delivery and client outcomes will be monitored by the PHN via the following processes:

- Quarterly progress and finance report (includes collection of participant feedback and complaints and consumer and carer involvement)
- Bi-monthly National Primary Mental Health Care Minimum Data Set (PMHC-MDS) reporting
- Participation in National PHN Evaluation activities

The New Access program is delivered across ten sessions:

- assessment: 60-minute initial assessment
- up to 6 x 20-30 minute subsequent sessions (face-to-face/phone/video call)
- end and follow-up: stepped up or down as needed
- check in at 4 weeks and 6 months.

PMHC-MDS is collected via redicase

### Needs Assessment Priorities \*

#### Needs Assessment

2023\_Refresh\_BrisbaneNorthPHN\_HNA

#### Priorities

Priority	Page reference
Mental health	69



## Activity Demographics

### Target Population Cohort

This activity is broadly targeted to people with mild mental illness and those in distress who may be at risk of developing a mental illness.

### In Scope AOD Treatment Type \*

### Indigenous Specific \*

No

#### Indigenous Specific Comments

#### Coverage

Whole Region

Yes



## Activity Consultation and Collaboration

### Consultation

Brisbane North PHN consulted with a wide range of stakeholders in the development of a range of activities and for the development of the Planning for Wellbeing: A regional plan for North Brisbane and Moreton Bay focusing on mental health, suicide prevention and alcohol and other drug treatment services 2018-2025. This outcomes of this activity contribute to the success of the regional plan.

In 2017-18, consultation to inform the initial development of this activity highlighted the importance of not simply parachuting in new models of care which can further fragment service delivery, but to ensure any procurement increases coordination and connection across the system. Participants at co-design workshops consistently reported the silo nature of services, the fragmented nature of the service system and the need for service and system navigation. Achievement of an effective person-centred, stepped care model requires significant reform, and an understanding of how the various components within low-intensity services operate and coordinate with each other.

Further consultation in the development of the procurement strategy for this activity involved:

- Online Discussion paper & Survey – Distributed to 750+ people, 400 + visitors to the online site, 60 downloads of discussion paper, 78 (10% response rate) survey responses
- Stakeholder meetings – 8 meetings with key stakeholders including Beyond Blue, Sane Australia, Brook RED, Peach Tree and Institute for Urban Indigenous Health.

From the engagement activities Brisbane North PHN identified three key strategy areas for low intensity mental health services needed in the Brisbane North region:

1. access to low intensity psychological services, in a variety of modalities
2. education and support for GP's and other primary health and
3. community service providers building the evidence base for low intensity services.

### Collaboration

This activity will be implemented by Brisbane North PHN, under the guidance of the Psychological Therapies Group.

Membership of this group is drawn from the Metro North Hospital and Health Service, Psychological Therapy Peak Associations,, Queensland Government agencies, consumers and families.



## Activity Milestone Details/Duration

### Activity Start Date



29/06/2019

**Activity End Date**

28/06/2026

**Service Delivery Start Date**

01/07/2019

**Service Delivery End Date**

30/06/2026

**Other Relevant Milestones**

---



## Activity Commissioning

**Please identify your intended procurement approach for commissioning services under this activity:**

**Not Yet Known:** No

**Continuing Service Provider / Contract Extension:** Yes

**Direct Engagement:** No

**Open Tender:** No

**Expression Of Interest (EOI):** No

**Other Approach (please provide details):** No

**Is this activity being co-designed?**

No

**Is this activity the result of a previous co-design process?**

Yes

**Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?**

No

**Has this activity previously been co-commissioned or joint-commissioned?**

No

**Decommissioning**

No

**Decommissioning details?**

**Co-design or co-commissioning comments**

Consultation to inform Procurement Strategy and Service Co-design:

- 2016-18 - Online Discussion paper & Survey – Distributed to 750+ people, 400 + visitors to the online site, 60 downloads of discussion paper, 78 (10% response rate) survey responses
- 2016-18 Stakeholder meetings – 8 meetings with key stakeholders including Beyond Blue, Sane Australia, Brook RED, Peach Tree and Institute for Urban Indigenous Health.
- 2017-18 Regional Plan consultation process Planning for Wellbeing
- 2018-19 Psychological Therapies Review (Low intensity included in this review)

Is this activity in scope for data collection under the Mental Health National Minimum Dataset?

Yes



**Activity Planned Expenditure**

**Planned Expenditure**

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$317,594.14	\$330,701.08	\$337,524.96	\$0.00

**Totals**

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27	Total
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$317,594.14	\$330,701.08	\$337,524.96	\$0.00	\$985,820.18

Total	\$0.00	\$317,594.14	\$330,701.08	\$337,524.96	\$0.00	\$985,820.18
-------	--------	--------------	--------------	--------------	--------	--------------

**Funding From Other Sources - Financial Details**

**Funding From Other Sources - Organisational Details**



**Activity Comments**

**Activity Status**

Submitted

**PHN Comments**

Subject	Description	Commented By	Date Created
---------	-------------	--------------	--------------

**Comments from the Department**

Comment	Date Created
---------	--------------



## MH - 1200 - MH 1.2 - Problem Management Plus program



### Activity Metadata

**Applicable Schedule \***

Primary Mental Health Care

**Activity Prefix \***

MH

**Activity Number \***

1200

**Activity Title \***

MH 1.2 - Problem Management Plus program

**Existing, Modified or New Activity \***

Existing



### Activity Priorities and Description

**Program Key Priority Area \***

Mental Health Priority Area 1: Low intensity mental health services

**Other Program Key Priority Area Description****Aim of Activity \***

The National Mental Health Service Planning Framework's Planning Support Tool estimates that over 95,000 people in the PHN region will have a mild mental health condition in 2020, and 50% of those people will seek treatment via a brief therapy service. Results from the PHN's brief therapy and regional plan consultation identified key issues for people from CALD communities including the need for better access to a range of services, the need for greater connection with community for people from CALD backgrounds, and the lack of affordability of services for people ineligible for assistance through Medicare.

The aim of this activity is to improve access to low intensity services for culturally and linguistically diverse people aged 12 years and over. Brisbane North PHN (the PHN) will achieve this aim by continuing to commission structured, time-limited, evidence-based low intensity psychological services.

The over-arching purpose of the Primary Mental Health Care Program in relation to brief therapies is to improve the targeting of psychological interventions to most appropriately support people with mild mental illness at the local level through the development and/or commissioning of brief therapy mental health services.

A key focus of the PM+ program is to enable access to psychological therapy for people who identify as culturally and linguistically diverse. People can self-refer into the PM+ program and do not need to have a diagnosed mental health condition, a GP referral or

a mental health care plan.

The overall outcomes of the PM+ program are for people who identify as CALD to experience:

- decreased levels of anxiety, depression and psychological distress
- improved capacity to manage life stressors and adversity.

#### **Description of Activity \***

The PHN will commission a specialist service provider to deliver an evidence informed CALD-specific mental health brief therapy service/program to people who identify as CALD. The CALD-specific mental health brief therapy service will be embedded within a wider range of stepped mental health care services and supports for the individual and their community as needed. Referral pathways to more moderate psychological therapy services will be established and included in the provider's service delivery model.

Brief therapy services will be promoted via PHN communication and mental health distribution channels. A brief therapy GP and Health Professional Communication and Education Strategy will be co-designed and implemented to increase awareness, understanding and credibility about:

- where evidence based brief psychological therapies sit within the stepped model of primary mental health
- how brief therapy services can support people who are at risk of/experiencing mild mental health conditions or recovering from a more moderate/severe mental health condition
- who would benefit from accessing a brief psychological therapy
- what evidence based brief psychological therapies are available to people living in the Brisbane North region

The provider's service delivery and client outcomes will be monitored by the PHN via the following processes:

- Quarterly progress and finance report (includes collection of participant feedback and complaints and consumer and carer involvement)
- Bi-monthly National Primary Mental Health Care Minimum Data Set (PMHC-MDS) reporting
- Participation in National PHN Evaluation activities

Brisbane North PHN will continue to commission a provider to deliver the Problem Management Plus program. This program supports the culturally and linguistically diverse population through a range of low intensity mental health services.

There are two Problem Management Plus program options available, based on client needs and preferences. Option A is designed for clients who require individual sessions. Option B is designed for clients who require group sessions.

Option A will consist of seven individual sessions. These sessions are made up of two face to face and/or virtual assessment and planning sessions and five weekly face to face and /or virtual intervention sessions. Telehealth support between sessions will also be available for clients who require extra levels of support, along with additional support through existing group programs.

Option B will consist of seven sessions. These sessions are made up of two face to face assessment planning sessions and five group support sessions of eight to ten participants. Clients will also be offered additional support through existing support programs.

The activity will be delivered as an outreach model in various locations throughout the Brisbane North PHN region. Individual support will also be provided in people's homes or a safe place where required.

The PMHC-MDS is collected via redicase.

#### **Needs Assessment Priorities \***

##### **Needs Assessment**

2023\_Refresh\_BrisbaneNorthPHN\_HNA

##### **Priorities**

<b>Priority</b>	<b>Page reference</b>
Mental health	69



## Activity Demographics

### Target Population Cohort

This activity is specifically targeted to culturally and linguistically diverse populations, including refugees who have a mild mental illness or who may be at risk of developing a mental illness.

### In Scope AOD Treatment Type \*

### Indigenous Specific \*

No

### Indigenous Specific Comments

### Coverage

#### Whole Region

Yes



## Activity Consultation and Collaboration

### Consultation

Brisbane North PHN consulted with a wide range of stakeholders in the development of a range of activities and for the development of the Planning for Wellbeing: A regional plan for North Brisbane and Moreton Bay focusing on mental health, suicide prevention and alcohol and other drug treatment services 2018-2025. This outcomes of this activity contribute to the success of the regional plan.

In 2017-18, consultation to inform the initial development of this activity highlighted the importance of not simply parachuting in new models of care which can further fragment service delivery, but to ensure any procurement increases coordination and connection across the system. Participants at co-design workshops consistently reported the silo nature of services, the fragmented nature of the service system and the need for service and system navigation. Achievement of an effective person-centred, stepped care model requires significant reform, and an understanding of how the various components within low-intensity services operate and coordinate with each other.

Further consultation in the development of the procurement strategy for this activity involved:

- Online Discussion paper & Survey – Distributed to 750+ people, 400 + visitors to the online site, 60 downloads of discussion paper, 78 (10% response rate) survey responses
- Stakeholder meetings – 8 meetings with key stakeholders including Beyond Blue, Sane Australia, Brook RED, Peach Tree and Institute for Urban Indigenous Health.

From the engagement activities Brisbane North PHN identified three key strategy areas for low intensity mental health services needed in the Brisbane North region:

5. access to low intensity psychological services, in a variety of modalities
6. education and support for GP's and other primary health and community service providers building the evidence base for low

intensity services.

### Collaboration

This activity will be implemented by Brisbane North PHN, under the guidance of the Psychological Therapies Partnership Group.

Membership of this group is drawn from the Metro North Hospital and Health Service, Psychological Therapy Peak Associations, Queensland Government agencies, consumers and families.



## Activity Milestone Details/Duration

### Activity Start Date

29/06/2019

### Activity End Date

28/06/2026

### Service Delivery Start Date

01/07/2019

### Service Delivery End Date

30/06/2026

### Other Relevant Milestones



## Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

**Not Yet Known:** No

**Continuing Service Provider / Contract Extension:** Yes

**Direct Engagement:** No

**Open Tender:** No

**Expression Of Interest (EOI):** No

**Other Approach (please provide details):** No

**Is this activity being co-designed?**

No

**Is this activity the result of a previous co-design process?**

Yes

**Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?**

No

**Has this activity previously been co-commissioned or joint-commissioned?**

No

**Decommissioning**

No

**Decommissioning details?**

**Co-design or co-commissioning comments**

Consultation to inform Procurement Strategy and Service Co-design:

- 2016-18 - Online Discussion paper & Survey – Distributed to 750+ people, 400 + visitors to the online site, 60 downloads of discussion paper, 78 (10% response rate) survey responses
- 2016-18 Stakeholder meetings – 8 meetings with key stakeholders including Beyond Blue, Sane Australia, Brook RED, Peach Tree and Institute for Urban Indigenous Health.
- 2017-18 Regional Plan consultation process Planning for Wellbeing
- 2018-19 Psychological Therapies Review (Low intensity included in this review)

**Is this activity in scope for data collection under the Mental Health National Minimum Dataset?**

Yes



**Activity Planned Expenditure**

**Planned Expenditure**

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$155,252.00	\$88,220.91	\$90,041.31	\$0.00

**Totals**



Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27	Total
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$155,252.00	\$88,220.91	\$90,041.31	\$0.00	\$333,514.22
Total	\$0.00	\$155,252.00	\$88,220.91	\$90,041.31	\$0.00	\$333,514.22

**Funding From Other Sources - Financial Details**

**Funding From Other Sources - Organisational Details**



**Activity Comments**

**Activity Status**

Submitted

**PHN Comments**

Subject	Description	Commented By	Date Created
---------	-------------	--------------	--------------

**Comments from the Department**

Comment	Date Created
---------	--------------



## MH - 1300 - MH 1.3 - Sunshine Parenting Program



### Activity Metadata

**Applicable Schedule \***

Primary Mental Health Care

**Activity Prefix \***

MH

**Activity Number \***

1300

**Activity Title \***

MH 1.3 - Sunshine Parenting Program

**Existing, Modified or New Activity \***

Existing



### Activity Priorities and Description

**Program Key Priority Area \***

Mental Health Priority Area 1: Low intensity mental health services

**Other Program Key Priority Area Description****Aim of Activity \***

The National Mental Health Service Planning Framework's Planning Support Tool estimates that over 88,000 people in the PHN region will have a mild mental health condition in 2022-2023. Results from the PHN's brief therapy and regional plan consultation demonstrated a strong need to support family's living in the Brisbane North region with perinatal mental health needs.

The aim of this activity is to improve the perinatal mental health among people aged 18 years and over in the Brisbane North PHN region. This was identified as a need in both the needs assessment and from the consultation associated with the development of the mental health, suicide prevention and alcohol and other drug treatment services regional plan.

This activity will improve access to low intensity services for mothers of infants aged 0 to 12 months at risk of and/or experiencing mild postnatal depression and/or anxiety symptoms. The aim of the program is to reduce mother's psychological distress and support social inclusion by encouraging greater social connectedness. Brisbane North PHN will achieve this aim by continuing to commission structured, time-limited, evidence-based low intensity psychological services.

The over-arching purpose of the Primary Mental Health Care Program in relation to brief therapies is to improve the targeting of psychological interventions to most appropriately support people with mild mental illness at the local level through the development and/or commissioning of brief therapy mental health services.

A key focus of the SPP program is to enable access to psychological therapy for mothers with infants aged 0-12 months. Mothers can self-refer into the SPP program and do not need to have a diagnosed mental health condition, a GP referral or a mental health care plan.

The overall outcomes of the SPP program are for mothers to experience:

- decreased levels of perinatal anxiety and depression
- improved capacity to manage life stressors
- increased social connectedness

#### **Description of Activity \***

The PHN will commission a specialist service provider to deliver an evidence informed peer-delivered perinatal mental health brief therapy service/program to mothers with infants aged 0-12 months. The perinatal mental health brief therapy service will be embedded within a wider range of stepped mental health care services and supports for the individual and their family as needed. Referral pathways to more moderate psychological therapy services will be established and included in the provider's service delivery model.

Brief therapy services will be promoted via PHN communication and mental health distribution channels. A brief therapy GP and Health Professional Communication and Education Strategy will be co-designed and implemented to increase awareness, understanding and credibility about:

- where evidence based brief psychological therapies sit within the stepped model of primary mental health
- how brief therapy services can support people who are at risk of/experiencing mild mental health conditions or recovering from a more moderate/severe mental health condition
- who would benefit from accessing a brief psychological therapy
- what evidence based brief psychological therapies are available to people living in the Brisbane North region

The provider's service delivery and client outcomes will be monitored by the PHN via the following processes:

- Quarterly progress and finance report (includes collection of participant feedback and complaints and consumer and carer involvement)
- Bi-monthly National Primary Mental Health Care Minimum Data Set (PMHC-MDS) reporting
- Participation in National PHN Evaluation activities

The SPP is delivered via:

- 6 x 2-hour weekly participant group workshops (groups facilitated by 2 x Peer Workers with lived experience of perinatal mental health challenges)
- optional service referral to psychologist available if required

The Sunshine Parenting Program is delivered via face-to-face group sessions in two locations and offers online options:

1. Peach Tree Moreton Bay - Caboolture
2. Peach Tree North Brisbane - Geebung
3. Online

#### **Needs Assessment Priorities \***

##### **Needs Assessment**

2023\_Refresh\_BrisbaneNorthPHN\_HNA

##### **Priorities**

<b>Priority</b>	<b>Page reference</b>
Mental health	69
Children's Health	68



## Activity Demographics

### Target Population Cohort

Women who are at risk of experiencing symptoms of distress or mild symptoms of mental illness (i.e. anxiety, depression) during a perinatal period. Women who have been experiencing symptoms of distress or mild symptoms of mental illness (i.e. anxiety, depression) during a perinatal period. Women who have a history of moderate to severe mental health conditions at risk of relapse during a perinatal period.

### In Scope AOD Treatment Type \*

### Indigenous Specific \*

No

### Indigenous Specific Comments

### Coverage

#### Whole Region

Yes



## Activity Consultation and Collaboration

### Consultation

Brisbane North PHN consulted with a wide range of stakeholders in the development of a range of activities and for the development of the Planning for Wellbeing: A regional plan for North Brisbane and Moreton Bay focusing on mental health, suicide prevention and alcohol and other drug treatment services 2018-2025.

The consultation for Planning for Wellbeing also covered the development of activities included in this Activity Work Plan. This consultation occurred over a two year period between 2016 and 2018.

Specific consultation to inform the procurement strategy of this activity consisted of:

- An online discussion paper and survey, Distributed to 750+ people, 400 + visitors to the online site, 60 downloads of discussion paper, 78 (10% response rate) survey responses
- A range of meetings held with key stakeholders including Beyondblue, Sane Australia, Brook RED, Peach Tree and the Institute for Urban Indigenous Health.

### Collaboration

This activity will be implemented by Brisbane North PHN, under the guidance of the Psychological Therapies Partnership Group. Membership of this group is drawn from the Metro North Hospital and Health Service, Psychological Therapy Peak Associations, Queensland Government agencies, consumers and families.

Governance of the SPP is managed by a Reference Group providing program support, expertise, and guidance. The overall decision-making authority remains with Peach Tree Perinatal Wellness as the contracted Lead Site agent. The SPP management committee includes Viv Kissane (Peach Tree, CEO/Founder) and Rani Farmer (Operations Manager).

In the event of arising issues, the Reference Group will follow a 'grievance structure' whereby the Reference Group will approach the management committee and/or funding body to seek resolution.

SPP Reference Group meetings are held as required due to the nature of program start and ends dates and relevant information to be discussed. It is assuring for the SPP team to know the Reference Group is available to more effectively strengthen and resolve program issues when needed.



## Activity Milestone Details/Duration

### Activity Start Date

29/06/2019

### Activity End Date

28/06/2026

### Service Delivery Start Date

01/07/2019

### Service Delivery End Date

30/06/2026

### Other Relevant Milestones



## Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

**Not Yet Known:** No

**Continuing Service Provider / Contract Extension:** Yes

**Direct Engagement:** No

**Open Tender:** No

**Expression Of Interest (EOI):** No

**Other Approach (please provide details):** No

**Is this activity being co-designed?**

No

**Is this activity the result of a previous co-design process?**

Yes

**Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?**

No

**Has this activity previously been co-commissioned or joint-commissioned?**

No

## Decommissioning

No

## Decommissioning details?

## Co-design or co-commissioning comments

Consultation to inform Procurement Strategy and Service Co-design:

- 2016-18 - Online Discussion paper & Survey – Distributed to 750+ people, 400 + visitors to the online site, 60 downloads of discussion paper, 78 (10% response rate) survey responses
- 2016-18 Stakeholder meetings – 8 meetings with key stakeholders including Beyond Blue, Sane Australia, Brook RED, Peach Tree and Institute for Urban Indigenous Health.
- 2017-18 Regional Plan consultation process Planning for Wellbeing
- 2018-19 Psychological Therapies Review (Low intensity included in this review)

## Is this activity in scope for data collection under the Mental Health National Minimum Dataset?

Yes



## Activity Planned Expenditure

### Planned Expenditure

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$306,881.05	\$104,989.96	\$107,156.38	\$0.00

### Totals

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27	Total
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$306,881.05	\$104,989.96	\$107,156.38	\$0.00	\$519,027.39
Total	\$0.00	\$306,881.05	\$104,989.96	\$107,156.38	\$0.00	\$519,027.39

**Funding From Other Sources - Financial Details**

**Funding From Other Sources - Organisational Details**



**Activity Comments**

**Activity Status**

Submitted

**PHN Comments**

Subject	Description	Commented By	Date Created
---------	-------------	--------------	--------------

**Comments from the Department**

Comment	Date Created
---------	--------------



## MH - 1400 - MH 1.4 - Nexus Program



### Activity Metadata

**Applicable Schedule \***

Primary Mental Health Care

**Activity Prefix \***

MH

**Activity Number \***

1400

**Activity Title \***

MH 1.4 - Nexus Program

**Existing, Modified or New Activity \***

Existing



### Activity Priorities and Description

**Program Key Priority Area \***

Mental Health Priority Area 1: Low intensity mental health services

**Other Program Key Priority Area Description****Aim of Activity \***

The National Mental Health Service Planning Framework's Planning Support Tool estimates that over 95,000 people in the PHN region will have a mild mental health condition in 2020, and 50% of those people will seek treatment via a brief therapy service. Results from the PHN's brief therapy and regional plan consultation identified key issues for people from CALD communities including the need for better access to a range of services, the need for greater connection with community for people from CALD backgrounds, and the lack of affordability of services for people ineligible for assistance through Medicare.

The Nexus program is a continuing service funded under the Department of Health (DoH) Primary Mental Health Care Program. The over-arching purpose of the Primary Mental Health Care Program in relation to brief therapies is to improve the targeting of psychological interventions to most appropriately support people with mild mental illness at the local level through the development and/or commissioning of brief therapy mental health services.

A key focus of brief therapy psychological services is to enable access to psychological therapy that does not require a GP referral or a mental health care plan. People can self-refer into brief therapies and do not need to have a diagnosed mental health condition to access the service. Services are designed to support people through significant life transitions and/or events that may cause psychological distress, anxiety and depression (i.e. leaving school, moving house/countries, studying, changing jobs, unemployment, becoming a parent, being a parent, retirement, moving and/or living in an aged care facility) and to build/maintain



resilience after recovering from a more moderate/severe mental health condition.

The aim of this activity is to improve access to low intensity psychological services for people of a culturally and linguistically diverse background who may be at risk of suicide. This includes community based activities and liaison with the Metro North Hospital and Health Service and other providers to help ensure appropriate follow-up and support arrangements are in place at a regional level for individuals after a suicide attempt and for other people at high risk of suicide.

This activity will ensure continuity of care for people who access suicide prevention services who may be at risk if the service is withdrawn by providing the necessary supports through commissioning services targeted to people from a refugee and culturally diverse background.

#### **Description of Activity \***

The PHN will partner with Brisbane South PHN to commission a specialist service provider to deliver an evidence informed brief therapy suicide prevention program that aims to promote wellbeing and build resilience in young people who identify as culturally and linguistically diverse (CALD). The service will be embedded within a wider range of stepped mental health care services and supports for the individual and their family as needed. Referral pathways to more moderate psychological therapy services will be established and included in the provider's service delivery model.

In partnership with Brisbane South PHN, Brisbane North PHN has contributed funding to support The Queensland Program of Assistance to Survivors of Torture and Trauma (QPASTT) to deliver the NEXUS Program - a brief therapy suicide prevention program that aims to promote wellbeing and build resilience in young people who identify as culturally and linguistically diverse (CALD) by increasing three major preventative factors against suicide:

1. Connectedness
2. Locus of control
3. Perceived academic performance

The program involves:

- School, recreational and employment readiness activities
- Peer support and developmental groups
- Identification, monitoring and counselling of at-risk individuals
- Training of school staff

Brisbane North PHN contributes a proportion (13%) of funding to this project, based on the percentage of clients residing in our region.

BSPHN responsible for all contract management. Quarterly progress reports sent to BNPHN by BSPHN. Any issues should be raised with BSPHN. PMHC-MDS requirements are handled by BSPHN.

#### **Needs Assessment Priorities \***

##### **Needs Assessment**

2023\_Refresh\_BrisbaneNorthPHN\_HNA

##### **Priorities**

<b>Priority</b>	<b>Page reference</b>
Mental health	69
Children's Health	68



## **Activity Demographics**

### Target Population Cohort

This activity is targeted at school aged young people who identify as culturally and linguistically diverse.

### In Scope AOD Treatment Type \*

### Indigenous Specific \*

No

### Indigenous Specific Comments

### Coverage

#### Whole Region

Yes



## Activity Consultation and Collaboration

### Consultation

Consultation to inform the development of this activity initially occurred throughout the 2017-18 financial year. This consultation involved:

- Suicide Prevention Forums – 102 people attended 2 Forums, including consumers, GP's, psychologists, HHS staff, community and private services providers, youth services, Aboriginal and Torres Strait Islander services and academic and research bodies
- stakeholder meetings – 5 meetings with stakeholders including Redcliffe Hospital Collaborative and HHS Mental Health services and Queensland Police Service.

The feedback from the Forums helped us to identify the need for a trial follow up service model in the Redcliffe region. Subsequent stakeholder meetings informed the key elements required for this model. Additional feedback throughout all of the engagement also identified the need for:

- improved networking amongst existing service providers to improve patient outcomes
- workforce capacity training.

This feedback was incorporated into the development of the service model.

### Collaboration

This activity will be jointly implemented in partnership with Brisbane South PHN, who are the lead agency.



## Activity Milestone Details/Duration

### Activity Start Date

29/06/2019

**Activity End Date**

28/06/2026

**Service Delivery Start Date**

01/07/2019

**Service Delivery End Date**

30/06/2026

**Other Relevant Milestones****Activity Commissioning**

Please identify your intended procurement approach for commissioning services under this activity:

**Not Yet Known:** No  
**Continuing Service Provider / Contract Extension:** Yes  
**Direct Engagement:** No  
**Open Tender:** No  
**Expression Of Interest (EOI):** No  
**Other Approach (please provide details):** No

**Is this activity being co-designed?**

No

**Is this activity the result of a previous co-design process?**

Yes

**Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?**

Yes

**Has this activity previously been co-commissioned or joint-commissioned?**

No

**Decommissioning**

No

**Decommissioning details?****Co-design or co-commissioning comments**

Stakeholder and community consultation as part of the development of the Regional Plan identified key issues for people from CALD communities including the need for better access to a range of services, the need for greater connection with community for people from CALD backgrounds, and the lack of affordability of services for people ineligible for assistance through Medicare.

Consultation to inform the development of this activity initially occurred throughout the 2017-18 financial year. This consultation involved:

- Suicide Prevention Forums – 102 people attended 2 Forums, including consumers, GP’s, psychologists, HHS staff, community and private services providers, youth services, Aboriginal and Torres Strait Islander services and academic and research bodies

- stakeholder meetings – 5 meetings with stakeholders including Redcliffe Hospital Collaborative and HHS Mental Health services and Queensland Police Service.

The feedback from the Forums helped us to identify the need for a trial follow up service model in the Redcliffe region. Subsequent stakeholder meetings informed the key elements required for this model. Additional feedback throughout all of the engagement also identified the need for:

- improved networking amongst existing service providers to improve patient outcomes
- workforce capacity training.

This feedback was incorporated into the development of the service model.

This program will be delivered by the Queensland Program of Assistance to Survivors of Torture and Trauma, through a joint arrangement with Brisbane South PHN. Both Brisbane North PHN and Brisbane South PHN will co-commission this service, with joint funding. Contractual management will be overseen by Brisbane South PHN in partnership with Brisbane North.

**Is this activity in scope for data collection under the Mental Health National Minimum Dataset?**

Yes



**Activity Planned Expenditure**

**Planned Expenditure**

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$43,633.58	\$27,874.88	\$28,450.07	\$0.00

**Totals**

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27	Total
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$43,633.58	\$27,874.88	\$28,450.07	\$0.00	\$99,958.53
Total	\$0.00	\$43,633.58	\$27,874.88	\$28,450.07	\$0.00	\$99,958.53

**Funding From Other Sources - Financial Details**

**Funding From Other Sources - Organisational Details**



**Activity Comments**

**Activity Status**

Submitted

**PHN Comments**

Subject	Description	Commented By	Date Created
---------	-------------	--------------	--------------

**Comments from the Department**

Comment	Date Created
---------	--------------



## MH - 1410 - MH 14.1 - TRISP: Regional & Community Based Investment After Care Activities - LGBTI+



### Activity Metadata

**Applicable Schedule \***

Primary Mental Health Care

**Activity Prefix \***

MH

**Activity Number \***

1410

**Activity Title \***

MH 14.1 - TRISP: Regional & Community Based Investment After Care Activities - LGBTI+

**Existing, Modified or New Activity \***

Modified



### Activity Priorities and Description

**Program Key Priority Area \***

Mental Health Priority Area 8: Regional mental health and suicide prevention plan

**Other Program Key Priority Area Description****Aim of Activity \***

Although many lesbian, gay, bisexual, transgender and intersex (LGBTI) Australians live healthy and happy lives, research has demonstrated that a disproportionate number experience poorer mental health outcomes and have higher risk of suicidal behaviours than their peers. These health outcomes are directly related to experiences of stigma, prejudice, discrimination and abuse on the basis of being LGBTI. Often there are not appropriate services to provide the support required by LGBTI people especially regionally and non-city centric locations. Suicide rates remain extremely high and disproportionate to the general community.

**Description of Activity \***

Brisbane North PHN commissions providers to deliver short term clinical and non-clinical services to individuals and/or group work as part of the aftercare for people experiencing suicidality. Referrals to aftercare services will originate from general practitioners, self referrals, the Brisbane North PHN Service Navigation team and community organisations and groups.

The service model differs between the commissioned organisations but with links to each of the organisations providing therapies and aftercare. This is to assist with specialist referrals and referral pathways. Case management and care coordination meetings will occur across the organisations where cross referrals and shared clients exist.

Service user and community engagement:

- Services will be provided through face-to-face contact, phone support or video conferencing. Group work will also be provided as part of the care coordination and care pathways.

Assessment, Intake and referral

- referrals via rediCASE. Capture and report PMHC MDS
- Eligible clients undertake initial assessments and providers work with clients to determine their care pathways and care coordination
- Delivery of psychology services

Evaluation and reporting:

- Quarterly reporting to the PHN
- Collection of participant feedback and complaints

Activities required as part of the provision of consultancy services to universal aftercare providers regarding delivery of safe and appropriate LGBTI+ care are as follows: completing scoping/mapping, completing advisory planning, implementing project plan, and completing an evaluation of this work.

**Needs Assessment Priorities \***

**Needs Assessment**

2023\_Refresh\_BrisbaneNorthPHN\_HNA

**Priorities**

Priority	Page reference
Mental health	69



**Activity Demographics**

**Target Population Cohort**

Aboriginal and Torres Strait Islander, LGBTIQ+ and Sistergirls and Brotherboy communities.

**In Scope AOD Treatment Type \***

**Indigenous Specific \***

Yes

**Indigenous Specific Comments**

All processes must be culturally safe and culturally appropriate. Input from Aboriginal and Torres Strait LGBTI Sistergirl and Brotherboy People with a lived experience. Cultural Guidance from Aboriginal and Torres Strait Islander Elders.

**Coverage**

**Whole Region**

Yes



## Activity Consultation and Collaboration

### Consultation

Co-design commenced beginning with Community consultations to assess the needs of the region and to gain input from community and those with a lived experience within the Aboriginal and Torres Strait Islander Community, the LGBTIQ+Sistergirl&Brotherboy communities and stake holders.

The Co-design process identified that there were community groups well placed to deliver suicide prevention strategies and implement these directly into the communities. The Co-design process identified many of the needs specific to Aboriginal and Torres Strait Islander Communities and the LGBTIQ+ communities in the Brisbane Regions.

The Aboriginal and Torres Strait Islander and the LGBTI Implementation Groups were formed to guide and inform the needs of the community and the response to suicide prevention.

The Implementation Groups continue to drive the ongoing nature of the Co-design process and acknowledges this movement/evolutionary journey given that this is a Trial designed to seek new ways and approaches specific to the local needs.

### Collaboration

The activity will be managed by contract management and also be overseen by NSPT LGBTI Implementation Group.



## Activity Milestone Details/Duration

### Activity Start Date

29/06/2018

### Activity End Date

29/06/2026

### Service Delivery Start Date

### Service Delivery End Date

### Other Relevant Milestones



## Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

**Not Yet Known:** No

**Continuing Service Provider / Contract Extension:** Yes

**Direct Engagement:** No

**Open Tender:** No

**Expression Of Interest (EOI):** No



**Other Approach (please provide details):** No

**Is this activity being co-designed?**

No

**Is this activity the result of a previous co-design process?**

Yes

**Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?**

No

**Has this activity previously been co-commissioned or joint-commissioned?**

No

**Decommissioning**

No

**Decommissioning details?**

**Co-design or co-commissioning comments**

Co-design commenced beginning with Community consultations to assess the needs of the region and to gain input from community and those with a lived experience within the Aboriginal and Torres Strait Islander Community, the LGBTIQ+Sistergirl&Brotherboy communities and stake holders.

The Co-design process identified that there were community groups well placed to deliver suicide prevention strategies and implement these directly into the communities. The Co-design process identified many of the needs specific to Aboriginal and Torres Strait Islander Communities and the LGBTIQ+ communities in the Brisbane Regions.

The Aboriginal and Torres Strait Islander and the LGBTI Implementation Groups were formed to guide and inform the needs of the community and the response to suicide prevention.

The Implementation Groups continue to drive the ongoing nature of the Co-design process and acknowledges this movement/evolutionary journey given that this is a Trial designed to seek new ways and approaches specific to the local needs.

**Is this activity in scope for data collection under the Mental Health National Minimum Dataset?**

Yes



## Activity Planned Expenditure

### Planned Expenditure

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$523,000.00	\$0.00	\$0.00	\$0.00

**Totals**

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27	Total
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$523,000.00	\$0.00	\$0.00	\$0.00	\$523,000.00
Total	\$0.00	\$523,000.00	\$0.00	\$0.00	\$0.00	\$523,000.00

**Funding From Other Sources - Financial Details**

**Funding From Other Sources - Organisational Details**



## Activity Comments

### Activity Status

Submitted

### PHN Comments

Subject	Description	Commented By	Date Created
---------	-------------	--------------	--------------

### Comments from the Department

Comment	Date Created
---------	--------------



## MH - 1501 - MH 15.1 - TRISP Regional & Community Based Investment-After Care-Aboriginal & Torres Strait Islander



### Activity Metadata

**Applicable Schedule \***

Primary Mental Health Care

**Activity Prefix \***

MH

**Activity Number \***

1501

**Activity Title \***

MH 15.1 - TRISP Regional & Community Based Investment-After Care-Aboriginal & Torres Strait Islander

**Existing, Modified or New Activity \***

Modified



### Activity Priorities and Description

**Program Key Priority Area \***

Mental Health Priority Area 8: Regional mental health and suicide prevention plan

**Other Program Key Priority Area Description****Aim of Activity \***

The suicide rate among Aboriginal and Torres Strait Islander peoples in the Brisbane North region is twice that of the non-Indigenous population, with suicides occurring at much younger ages.

The commissioned services will provide follow up and After Care services for the Aboriginal and Torres Strait Islander peoples within the Brisbane North region.

Social & Emotional Wellbeing, and emergency and follow-up care for people experiencing suicidality, loss of a loved one due to suicide and for those who have attempted suicide. This service must be culturally safe and culturally appropriate and must be delivered by a dedicated Aboriginal and Torres Strait Islander organisation.

The activity aims to achieve the following outcomes:

- Reduction of suicides, suicide attempts and support for Aboriginal and Torres Strait Islander people experiencing suicidality.
- Improved social and emotional wellbeing
- Increased connection to culture and cultural resilience
- Appropriate pathways to care that are culturally responsive
- Access to culturally safe services
- Wrap around care that includes family, community and Elders

**Description of Activity \***

Brisbane North PHN will commission providers to deliver short term clinical and non-clinical services to individuals and/or group work as part of the aftercare for people experiencing suicidality. Referrals to aftercare services will originate from general practitioners, self referrals, the Brisbane North PHN Service Navigation team and community organisations and groups. The provider will also deliver connector training.

The service model differs between the commissioned organisations but with links to each of the organisations providing therapies and aftercare. This is to assist with specialist referrals and referral pathways. Case management and care coordination meetings will occur across the organisations where cross referrals and shared clients exist.

Service user and community engagement:

- Services will be provided through face-to-face contact, phone support or video conferencing. Group work will also be provided as part of the care coordination and care pathways.

Assessment, Intake and referral

- referrals via rediCASE. Capture and report PMHC MDS
- Eligible clients undertake initial assessments and providers work with clients to determine their care pathways and care coordination

Delivery of psychology services

Evaluation and reporting:

- Quarterly reporting to the PHN
- Collection of participant feedback and complaints

Culturally appropriate service entry into Psychological supports and interventions

Group supports

Connections to Culture and Community

Access to Elders and Cultural Connectors.

## Needs Assessment Priorities \*

### Needs Assessment

2023\_Refresh\_BrisbaneNorthPHN\_HNA

#### Priorities

Priority	Page reference
Mental health	69
Aboriginal & Torres Strait Islander Health	67



## Activity Demographics

### Target Population Cohort

Aboriginal and Torres Strait Islander peoples

### In Scope AOD Treatment Type \*

### Indigenous Specific \*

Yes

### Indigenous Specific Comments

All processes must be culturally safe and culturally appropriate. Input from Aboriginal and Torres Strait People with a lived experience. Elders to be involved at every level. Sound Cultural Governance required.

## Coverage

### Whole Region

Yes



## Activity Consultation and Collaboration

### Consultation

Co-design commenced beginning with Community consultations to assess the needs of the region and to gain input from community and those with a lived experience within the Aboriginal and Torres Strait Islander Community and stake holders. The Co-design process identified that there were community groups well placed to deliver suicide prevention strategies and implement these directly into the communities. The Co-design process identified many of the needs specific to Aboriginal and Torres Strait Islander Communities within the Brisbane Region.

The Aboriginal and Torres Strait Islander Implementation Groups were formed to guide and inform the needs of the community and the response to suicide prevention.

The Implementation Groups continue to drive the ongoing nature of the Co-design process and acknowledges this movement/evolutionary journey given that this is a Trial designed to seek new ways and approaches specific to the local needs. The PHN facilitates the co-design as part of the commissioning and implementation process but allows the Co-design to be lead by the community, stakeholders and the community implementation teams.

### Collaboration

Aboriginal and Torres Strait Islander Implementation Group oversees the implementation of the programs and guides the service pathways.

Partnerships have been formed and, where required, MOU's to further sustain partnerships.



## Activity Milestone Details/Duration

### Activity Start Date

29/06/2018

### Activity End Date

29/06/2026

### Service Delivery Start Date

### Service Delivery End Date

### Other Relevant Milestones



## Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

**Not Yet Known:** No  
**Continuing Service Provider / Contract Extension:** Yes  
**Direct Engagement:** No  
**Open Tender:** No  
**Expression Of Interest (EOI):** No  
**Other Approach (please provide details):** No

**Is this activity being co-designed?**

No

**Is this activity the result of a previous co-design process?**

Yes

**Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?**

No

**Has this activity previously been co-commissioned or joint-commissioned?**

No

**Decommissioning**

No

**Decommissioning details?**

**Co-design or co-commissioning comments**

Co-design commenced beginning with Community consultations to assess the needs of the region and to gain input from community and those with a lived experience within the Aboriginal and Torres Strait Islander Community and stake holders. The Co-design process identified that there were community groups well placed to deliver suicide prevention strategies and implement these directly into the communities. The Co-design process identified many of the needs specific to Aboriginal and Torres Strait Islander Communities within the Brisbane Region. The Aboriginal and Torres Strait Islander Implementation Groups were formed to guide and inform the needs of the community and the response to suicide prevention. The Implementation Groups continue to drive the ongoing nature of the Co-design process and acknowledges this movement/evolutionary journey given that this is a Trial designed to seek new ways and approaches specific to the local needs. The PHN facilitates the co-design as part of the commissioning and implementation process but allows the Co-design to be lead by the community, stakeholders and the community implementation teams.

**Is this activity in scope for data collection under the Mental Health National Minimum Dataset?**

Yes



## Activity Planned Expenditure

## Planned Expenditure

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$447,880.00	\$0.00	\$0.00	\$0.00

## Totals

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27	Total
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$447,880.00	\$0.00	\$0.00	\$0.00	\$447,880.00
Total	\$0.00	\$447,880.00	\$0.00	\$0.00	\$0.00	\$447,880.00

## Funding From Other Sources - Financial Details

## Funding From Other Sources - Organisational Details





## Activity Comments

### Activity Status

Submitted

### PHN Comments

Subject	Description	Commented By	Date Created
---------	-------------	--------------	--------------

### Comments from the Department

Comment	Date Created
---------	--------------



## MH - 1601 - MH 16.1 - TRISP: Regional & Community Based Investment - Mental Health and Resilience



### Activity Metadata

**Applicable Schedule \***

Primary Mental Health Care

**Activity Prefix \***

MH

**Activity Number \***

1601

**Activity Title \***

MH 16.1 - TRISP: Regional & Community Based Investment - Mental Health and Resilience

**Existing, Modified or New Activity \***

Modified



### Activity Priorities and Description

**Program Key Priority Area \***

Mental Health Priority Area 8: Regional mental health and suicide prevention plan

**Other Program Key Priority Area Description****Aim of Activity \***

There is a need to provide orientation to care pathways that are culturally appropriate for Aboriginal and Torres Strait Islander students in the Brisbane North Region. Aboriginal and Torres Strait Islander students often report that schools are not a culturally safe environment for them. There is a need to assist students to become self-empowered and have knowledge of appropriate pathways to care. There is a need to build the capacity of schools to foster cultural connections for Aboriginal and Torres Strait Islander students. There is also a need to connect students to local Elders and cultural leaders to build cultural resilience and community empowerment within suicide prevention.

Project Yarn Circle is a suicide prevention program designed to increase cultural connectedness and reduce suicidality in Aboriginal and Torres Strait Islander school students aged 10-17yrs. Project Yarn Circle provides specialist cultural engagement for Aboriginal and Torres Strait Islander students whilst building cultural resilience and connecting students with appropriate referral pathways to local mental health services.

The program also provides strong community and social connections, giving young Aboriginal and Torres Strait Islander peoples opportunity to engage in group or one-on-one supports if required. Additionally, Project Yarn Circle builds the capacity of the schools to assist in social, emotional and mental health supports for the students.

**Description of Activity \***

The PHN will commission services to work with schools to deliver specific Aboriginal and Torres Strait Islander Yarning circles that engage students and have leadership from Elders, Cultural leaders, Cultural facilitators. These will have modules designed to cover specific issues that allow students to embrace and engage with Culture. Each program will run over six weeks and will bring other service providers in as guest presenters to orientate students to care pathways and support pathways. Specific cultural modules will also be developed and implemented across all schools. This includes resources that will provide ongoing supports for schools to continue to support students. These activities will allow students to become more connected to culture, become aware of care pathways and become culturally empowered and resilient.

## Needs Assessment Priorities \*

### Needs Assessment

2023\_Refresh\_BrisbaneNorthPHN\_HNA

#### Priorities

Priority	Page reference
Mental health	69



## Activity Demographics

### Target Population Cohort

Aboriginal and Torres Strait Islander school students aged 10-17 years.

### In Scope AOD Treatment Type \*

### Indigenous Specific \*

Yes

### Indigenous Specific Comments

All processes must be culturally safe and culturally appropriate. Input from Aboriginal and Torres Strait Islander People with a lived experience.

Cultural Guidance from Aboriginal and Torres Strait Islander Elders.

### Coverage

#### Whole Region

Yes



## Activity Consultation and Collaboration

### Consultation

Co-design commenced beginning with Community consultations to assess the needs of the region and to gain input from community and those with a lived experience within the Aboriginal and Torres Strait Islander Communities and stake holders.

The Co-design process identified that there were community groups well placed to deliver suicide prevention strategies and implement these directly into the communities. The Co-design process identified many of the needs specific to Aboriginal and Torres Strait Islander Communities.

### Collaboration

The activities will be governed through contract management.



## Activity Milestone Details/Duration

### Activity Start Date

06/01/2020

### Activity End Date

29/06/2026

### Service Delivery Start Date

### Service Delivery End Date

### Other Relevant Milestones



## Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

**Not Yet Known:** No

**Continuing Service Provider / Contract Extension:** Yes

**Direct Engagement:** No

**Open Tender:** No

**Expression Of Interest (EOI):** No

**Other Approach (please provide details):** No

**Is this activity being co-designed?**

No

**Is this activity the result of a previous co-design process?**

Yes

**Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?**

No

**Has this activity previously been co-commissioned or joint-commissioned?**

No

**Decommissioning**

No

**Decommissioning details?****Co-design or co-commissioning comments**

Co-design commenced beginning with Community consultations to assess the needs of the region and to gain input from community and those with a lived experience within the Aboriginal and Torres Strait Islander Communities and stake holders. The Co-design process identified that there were community groups well placed to deliver suicide prevention strategies and implement these directly into the communities. The Co-design process identified many of the needs specific to Aboriginal and Torres Strait Islander Communities.

**Is this activity in scope for data collection under the Mental Health National Minimum Dataset?**

Yes

**Activity Planned Expenditure****Planned Expenditure**

<b>Funding Stream</b>	<b>FY 22 23</b>	<b>FY 23 24</b>	<b>FY 24 25</b>	<b>FY 25 26</b>	<b>FY 26 27</b>
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$0.00	\$484,983.00	\$491,928.00	\$0.00

**Totals**

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27	Total
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$0.00	\$484,983.00	\$491,928.00	\$0.00	\$976,911.00
Total	\$0.00	\$0.00	\$484,983.00	\$491,928.00	\$0.00	\$976,911.00

**Funding From Other Sources - Financial Details**

**Funding From Other Sources - Organisational Details**



**Activity Comments**

**Activity Status**

Submitted

**PHN Comments**

Subject	Description	Commented By	Date Created
---------	-------------	--------------	--------------

**Comments from the Department**

Comment	Date Created
---------	--------------



## MH - 2100 - MH 2.1 - Headspace



### Activity Metadata

**Applicable Schedule \***

Primary Mental Health Care

**Activity Prefix \***

MH

**Activity Number \***

2100

**Activity Title \***

MH 2.1 - Headspace

**Existing, Modified or New Activity \***

Existing



### Activity Priorities and Description

**Program Key Priority Area \***

Mental Health Priority Area 2: Child and youth mental health services

**Other Program Key Priority Area Description****Aim of Activity \***

Research indicates that 50 per cent of young people with a diagnosed mental health disorder had developed their disorder before the age of 14 and 75 per cent before the age of 25. There is a clear need and opportunity to intervene early, reduce psychological distress and prevent the development of more advanced stage of mental illness. headspace encourages help seeking and delivers age-appropriate and holistic models of care to young people.

This activity aims to improve the mental health of young people aged 12 to 25 years of age. Brisbane North PHN will achieve this aim by working with Headspace centres throughout the Brisbane North region to continue to provide early intervention services for young people.

This activity addresses the identified needs assessment priority of children and young people's health through the continued provision of mental health services for young people with mild to moderate mental illness.

**Description of Activity \***

Brisbane North PHN will continue to fund five existing Headspace sites located at Caboolture, Nundah, Redcliffe, Strathpine and Indooroopilly. Lead agencies will be contracted to continue to deliver Headspace services. A multidisciplinary workforce at headspace provides support and interventions across 4 streams: mental health, alcohol and other drug, vocational education and

physical health. headspace centres also deliver community awareness and engagement activities.

A sixth headspace site at Bribie Island is currently being procured and discussions are being held with headspace National and UIIH for a Brisbane centre led by UIIH.

All headspace centres collect the PMHC-MDS via hAPI.

### Needs Assessment Priorities \*

#### Needs Assessment

2023\_Refresh\_BrisbaneNorthPHN\_HNA

#### Priorities

Priority	Page reference
Mental health	69
Children's Health	68



## Activity Demographics

#### Target Population Cohort

This activity is targeted to young people aged 12 to 25 years with mild to moderate mental health issues.

#### In Scope AOD Treatment Type \*

#### Indigenous Specific \*

No

#### Indigenous Specific Comments

#### Coverage

##### Whole Region

Yes



## Activity Consultation and Collaboration

#### Consultation

The Headspace service model is a national model. As such, consultation on the development of the model has not occurred.

Brisbane North PHN consulted with a wide range of stakeholders in the development of a range of activities and for the development of the Planning for Wellbeing: A regional plan for North Brisbane and Moreton Bay focusing on mental health,



suicide prevention and alcohol and other drug treatment services 2018-2023.

The consultation for Planning for Wellbeing also covered the development of activities included in this Activity Work Plan. This consultation occurred over a two year period between 2016 and 2018.

Further consultation to support the implementation of this activity was undertaken in 2018 as part of the child and youth mental health services review in the Brisbane North PHN region.

#### **Collaboration**

Each headspace centre has a headspace consortium. This is part of the headspace model.



### **Activity Milestone Details/Duration**

#### **Activity Start Date**

29/06/2019

#### **Activity End Date**

28/06/2026

#### **Service Delivery Start Date**

01/07/2019

#### **Service Delivery End Date**

30/06/2026

#### **Other Relevant Milestones**



### **Activity Commissioning**

Please identify your intended procurement approach for commissioning services under this activity:

**Not Yet Known:** No

**Continuing Service Provider / Contract Extension:** Yes

**Direct Engagement:** No

**Open Tender:** No

**Expression Of Interest (EOI):** No

**Other Approach (please provide details):** No

**Is this activity being co-designed?**

No

**Is this activity the result of a previous co-design process?**

No

**Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?**

No

Has this activity previously been co-commissioned or joint-commissioned?

No

Decommissioning

No

Decommissioning details?

Co-design or co-commissioning comments

Is this activity in scope for data collection under the Mental Health National Minimum Dataset?

Yes



### Activity Planned Expenditure

#### Planned Expenditure

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$7,770,132.53	\$7,041,032.00	\$7,187,093.00	\$0.00

**Totals**

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27	Total
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$7,770,132.53	\$7,041,032.00	\$7,187,093.00	\$0.00	\$21,998,257.53
Total	\$0.00	\$7,770,132.53	\$7,041,032.00	\$7,187,093.00	\$0.00	\$21,998,257.53

**Funding From Other Sources - Financial Details**

**Funding From Other Sources - Organisational Details**



**Activity Comments**

**Activity Status**

Submitted

**PHN Comments**

Subject	Description	Commented By	Date Created
---------	-------------	--------------	--------------

**Comments from the Department**

Comment	Date Created
---------	--------------



## MH - 2200 - MH 2.2 - Services for young people with or at risk of a severe mental illness - Moreton Bay North



### Activity Metadata

**Applicable Schedule \***

Primary Mental Health Care

**Activity Prefix \***

MH

**Activity Number \***

2200

**Activity Title \***

MH 2.2 - Services for young people with or at risk of a severe mental illness - Moreton Bay North

**Existing, Modified or New Activity \***

Existing



### Activity Priorities and Description

**Program Key Priority Area \***

Mental Health Priority Area 2: Child and youth mental health services

**Other Program Key Priority Area Description****Aim of Activity \***

There is a gap in service delivery for young people with, or at risk of severe mental illness - the missing middle - those who are considered too severe/complex for headspace and primary mental health care services yet do not meet threshold for CYMHS and State-run adult mental health services. There is an additional gap for those that are disengaged and 'hard to reach'. Early intervention is important to prevent duration and severity of mental ill-health. Brisbane North PHNs' needs assessment indicates that the highest need for mental health services among this cohort reside in the Moreton Bay North region.

This activity aims to improve access to mental health services for young people aged 12 to 25 years of age who experience, or at risk of, a severe mental illness. This activity also aims to better support families in addressing issues associated with poor mental health among the target cohort.

**Description of Activity \***

Brisbane North PHN will continue to commission a provider to deliver holistic, evidence-based outreach services in the Moreton Bay North region. The service will undertake centre based and outreach activities. This is a targeted service that supports vulnerable young people who either have, or are at risk of developing a severe mental illness. Asha applies a youth-appropriate holistic approach in working with young people. It focuses on engagement and relationship building as a means of achieving clinical outcomes, and places equal value on social inclusion, psychosocial and clinical outcomes. The multidisciplinary team

employs allied health professionals as well as youth and family workers. Staff provide individualised case management and therapeutic interventions for eligible young people.

Activities undertaken by the commissioned provider include:

- Case formulation and treatment planning
- Care coordination
- Stepped care clinical and simultaneous psychosocial case management
- Clinical monitoring and simultaneous focus on social inclusion and active participation
- Interagency collaboration and partnerships
- Information and referral for families.

The service provider provides a PMHC-MDS extract on a quarterly basis for integration with the RediCASE system.

## Needs Assessment Priorities \*

### Needs Assessment

2023\_Refresh\_BrisbaneNorthPHN\_HNA

#### Priorities

Priority	Page reference
Mental health	69
Children's Health	68



## Activity Demographics

### Target Population Cohort

This activity is targeted to young people aged 12 to 25 years residing in the Moreton Bay North region with, or at risk of developing, a severe mental illness and who are difficult to engage, hard to reach, vulnerable and socially disadvantaged.

### In Scope AOD Treatment Type \*

### Indigenous Specific \*

No

### Indigenous Specific Comments

### Coverage

#### Whole Region

No

SA3 Name	SA3 Code
Redcliffe	31305
Caboolture Hinterland	31303
Narangba - Burpengary	31304
Bribie - Beachmere	31301
Caboolture	31302



## Activity Consultation and Collaboration

### Consultation

The following consultation was undertaken to inform the procurement strategy for services for young people with, or at risk of developing, severe mental illness.

- Headspace Centre meetings – meeting with lead agencies and key staff from each headspace centre in the region to workshop ideas for future service provision and local needs
- stakeholder meetings – 25 meetings with stakeholders including Act for Kids, Children’s Health Queensland, Brisbane Youth Services, YourTown, Open Minds, Create Foundation and Mercy Services
- focus Groups – workshops with Caboolture, Nundah and Redcliffe headspace youth reference groups
- Advisory Group meetings – two meetings including workshoping activities with a cross sectoral stakeholder advisory group.

This extensive consultation process informed the procurement strategy for services for young people with, or at risk of developing, severe mental illness and the key service design components as outlines in the description above.

In 2018-19, Brisbane North PHN worked with consumers, carers, service providers and other stakeholders to review activities and plan for the future. Consumer and carer representatives were actively recruited from the Peer Participation in Mental Health Services (PPIMS) network and community mental health services to contribute to the reviews, which focused on the following areas:

- Psychological services
- Infant, child and youth mental health services
- Services for people with severe mental illness.

The outcomes of the review of infant, child and youth mental health services refined the service model outlined in this activity work plan.

### Collaboration

This activity will be implemented by Brisbane North PHN, under the guidance of an Infant, Child and Youth Partnership Group. This group’s membership is drawn from the Metro North Hospital and Health Service, Allied Health providers, Queensland Government agencies, consumers and families.



## Activity Milestone Details/Duration

### Activity Start Date

29/06/2019

### Activity End Date

28/06/2026

**Service Delivery Start Date**

01/07/2019

**Service Delivery End Date**

30/06/2026

**Other Relevant Milestones**



## Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

**Not Yet Known:** No

**Continuing Service Provider / Contract Extension:** Yes

**Direct Engagement:** No

**Open Tender:** No

**Expression Of Interest (EOI):** No

**Other Approach (please provide details):** No

**Is this activity being co-designed?**

No

**Is this activity the result of a previous co-design process?**

Yes

**Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?**

No

**Has this activity previously been co-commissioned or joint-commissioned?**

No

**Decommissioning**

No

**Decommissioning details?**

**Co-design or co-commissioning comments**

The following consultation was undertaken to inform the procurement strategy for services for young people with, or at risk of developing, severe mental illness.

- Headspace Centre meetings – meeting with lead agencies and key staff from each headspace centre in the region to workshop ideas for future service provision and local needs
- stakeholder meetings – 25 meetings with stakeholders including Act for Kids, Children’s Health Queensland, Brisbane Youth Services, YourTown, Open Minds, Create Foundation and Mercy Services
- focus Groups – workshops with Caboolture, Nundah and Redcliffe headspace youth reference groups
- Advisory Group meetings – two meetings including workshopping activities with a cross sectoral stakeholder advisory group.

This extensive consultation process informed the procurement strategy for services for young people with, or at risk of developing,

severe mental illness and the key service design components as outlines in the description above.

In 2018-19, Brisbane North PHN worked with consumers, carers, service providers and other stakeholders to review activities and plan for the future. Consumer and carer representatives were actively recruited from the Peer Participation in Mental Health Services (PPIMS) network and community mental health services to contribute to the reviews, which focused on the following areas:

- Psychological services
- Infant, child and youth mental health services
- Services for people with severe mental illness.

The outcomes of the review of infant, child and youth mental health services refined the service model outlined in this activity work plan.

**Is this activity in scope for data collection under the Mental Health National Minimum Dataset?**

Yes



**Activity Planned Expenditure**

**Planned Expenditure**

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$1,462,189.81	\$1,522,533.51	\$1,553,950.34	\$0.00

**Totals**



Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27	Total
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$1,462,189.81	\$1,522,533.51	\$1,553,950.34	\$0.00	\$4,538,673.66
Total	\$0.00	\$1,462,189.81	\$1,522,533.51	\$1,553,950.34	\$0.00	\$4,538,673.66

**Funding From Other Sources - Financial Details**

**Funding From Other Sources - Organisational Details**



**Activity Comments**

**Activity Status**

Submitted

**PHN Comments**

Subject	Description	Commented By	Date Created
---------	-------------	--------------	--------------

**Comments from the Department**

Comment	Date Created
---------	--------------



## MH - 2300 - MH 2.3 - Services for young people with or at risk of a severe mental illness - other regions



### Activity Metadata

**Applicable Schedule \***

Primary Mental Health Care

**Activity Prefix \***

MH

**Activity Number \***

2300

**Activity Title \***

MH 2.3 - Services for young people with or at risk of a severe mental illness - other regions

**Existing, Modified or New Activity \***

Existing



### Activity Priorities and Description

**Program Key Priority Area \***

Mental Health Priority Area 2: Child and youth mental health services

**Other Program Key Priority Area Description****Aim of Activity \***

Young people with, or at risk of, severe / complex mental illness have needs that may not be met by a 10 session Medicare model. These young people may not meet threshold for state mental health services.

There is a need to support young people with severe mental illness through clinical support and team-based care coordination at a frequency that meets the complex needs of each young person, and to reduce future burden on mental health services as interventions help to change the young person mental health trajectory

This activity aims to improve access to mental health services for young people aged 12 to 25 years of age who experience, or at risk of, a severe mental illness who can be managed at at headspace centre. This activity targets young people within the 'missing middle' cohort - those who require more intensive support than headspace primary, yet do not meet threshold for child youth mental health services or adult mental health services. The activity will include limited, intensive clinical support and coordinated team based care for each young person to meet both clinical and non-clinical needs.

Brisbane North PHN will achieve this aim by commissioning holistic, evidence-based services for young people who require more intensive support than what primary headspace can offer, yet do not meet eligibility for state tertiary services.

Outcomes include the reduction in future burden on mental health services as early interventions help change the young persons' mental health trajectory and engagement with activities such as attending work, school and university.

### Description of Activity \*

Brisbane North PHN will continue to support existing headspace centres in the inner, west and north regions to respond to young people with severe mental illness who can be managed at a headspace centre. Young people with, or at risk of, severe mental illness who are accepted into the program undergo qualitative assessment, goal setting and tracking and clearly developed case formulation (biopsychosocial-spiritual and 4P's based).

The activity will include limited, intensive clinical support and coordinated team based care for each young person that meets both clinical and non-clinical needs. Specifically, it will include initial assessment screening, clinical review, delivery of psychological therapies (including suicide prevention), and development of case formulation.

Empirical supervision is provided to young people using this service by way of 'My Life Tracker' – a brief mental health outcome measure designed for young people. It consists of the following five items targeting areas of importance to young people.

Headspace collects the PMHC-MDS for this extension via RediCASE.

### Needs Assessment Priorities \*

#### Needs Assessment

2023\_Refresh\_BrisbaneNorthPHN\_HNA

#### Priorities

Priority	Page reference
Mental health	69
Children's Health	68



## Activity Demographics

### Target Population Cohort

This activity is targeted to young people aged 12 to 25 years residing in the Brisbane inner, west and north regions with, or at risk of developing, a severe/complex mental illness.

### In Scope AOD Treatment Type \*

#### Indigenous Specific \*

No

#### Indigenous Specific Comments

### Coverage

#### Whole Region

No

SA3 Name	SA3 Code
Sherwood - Indooroopilly	30403
Brisbane Inner	30501
The Gap - Enoggera	30404
Chermside	30202
Kenmore - Brookfield - Moggill	30402
Sandgate	30204
Brisbane Inner - North	30503
Nundah	30203
Bald Hills - Everton Park	30201
Brisbane Inner - West	30504



## Activity Consultation and Collaboration

### Consultation

In 2018-19, Brisbane North PHN worked with consumers, carers, service providers and other stakeholders to review activities and plan for the future. Consumer and carer representatives were actively recruited from the Peer Participation in Mental Health Services (PPIMS) network and community mental health organisations to contribute to the reviews, which focused on the following areas:

- Psychological services
- Infant, child and youth mental health services
- Services for people with severe mental illness.

The outcomes of the infant, child and youth mental health services review informed the service model outlined in this activity work plan.

### Collaboration

Each headspace centre has a headspace consortium as a part of the headspace model. They also have an advisory group, clinical reference group and youth reference group to inform their service.

In addition to this they also have:

- Clinical and Operations manuals
- Lead Agency/headspace Policies and procedures
- headspace Practice Principles



## Activity Milestone Details/Duration

### Activity Start Date

29/06/2019

### Activity End Date

28/06/2026

**Service Delivery Start Date**

01/07/2019

**Service Delivery End Date**

30/06/2026

**Other Relevant Milestones**



**Activity Commissioning**

**Please identify your intended procurement approach for commissioning services under this activity:**

**Not Yet Known:** No

**Continuing Service Provider / Contract Extension:** Yes

**Direct Engagement:** No

**Open Tender:** No

**Expression Of Interest (EOI):** No

**Other Approach (please provide details):** No

**Is this activity being co-designed?**

No

**Is this activity the result of a previous co-design process?**

Yes

**Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?**

No

**Has this activity previously been co-commissioned or joint-commissioned?**

No

**Decommissioning**

No

**Decommissioning details?**

**Co-design or co-commissioning comments**

Consumer and carer representatives were actively recruited from the Peer Participation in Mental Health Services (PPIMS) network to contribute to the reviews, which focused on the following areas:

- Psychological services
- Infant, child and youth mental health services
- Services for people with severe mental illness.

The outcomes of the review of infant, child and youth mental health services refined the service model outlined in this activity work plan.

Is this activity in scope for data collection under the Mental Health National Minimum Dataset?

Yes



**Activity Planned Expenditure**

**Planned Expenditure**

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$294,797.19	\$306,963.60	\$313,297.66	\$0.00

**Totals**

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27	Total
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$294,797.19	\$306,963.60	\$313,297.66	\$0.00	\$915,058.45
<b>Total</b>	<b>\$0.00</b>	<b>\$294,797.19</b>	<b>\$306,963.60</b>	<b>\$313,297.66</b>	<b>\$0.00</b>	<b>\$915,058.45</b>

**Funding From Other Sources - Financial Details**

**Funding From Other Sources - Organisational Details**



**Activity Comments**

**Activity Status**

Submitted

**PHN Comments**

Subject	Description	Commented By	Date Created
---------	-------------	--------------	--------------

**Comments from the Department**

Comment	Date Created
---------	--------------



## MH - 3100 - MH 3.1 - Commission evidence-based psychological therapies for children 0-11 years



### Activity Metadata

**Applicable Schedule \***

Primary Mental Health Care

**Activity Prefix \***

MH

**Activity Number \***

3100

**Activity Title \***

MH 3.1 - Commission evidence-based psychological therapies for children 0-11 years

**Existing, Modified or New Activity \***

Existing



### Activity Priorities and Description

**Program Key Priority Area \***

Mental Health Priority Area 2: Child and youth mental health services

**Other Program Key Priority Area Description****Aim of Activity \***

The aim of this activity is to address service gaps by commissioning psychological therapy services for people in underserved and hard to reach populations, where there are barriers in accessing Medicare Benefits Schedule based psychological interventions. The aim is for individuals to get the number of sessions that they require without a maximum amount, the average number of sessions is tracked which assist in identifying who requires a service other than psychological therapies if they require long/ongoing support.

Commissioned providers will be able to deliver therapeutic groups and support people to access evidence based e-mental health. There will also be flexibility to provide a higher number of sessions for people with greater needs.

The key focus of the program is to commission psychological services to complement MBS based mental health Services and address service gaps in target population groups. It is recognised and acknowledged that not everyone can access MBS mental health services. Non GP referral pathways will be established to address service gaps to reach clients not connected to mainstream general practice.

**Description of Activity \***

Brisbane North PHN will commission providers to deliver short term individual psychological therapy services to financially disadvantaged children aged 0-11 and their families. Referrals to psychological therapies will originate from general practitioners



and comprise part of a GP Mental Health Treatment Plan. There will be limited flexibility for provisional referrals from people who are eligible for the program and are referred through other established pathways.

This activity will be achieved by contracting providers to deliver structured, time limited, evidence-based psychological therapies that are embedded into a wider range of services and supports that are funded or provided from other sources. This will increase access to integrated services with 'wrap around' supports.

The service model for this activity has been modified as a result of a review of the delivery of psychological therapies for underserved and hard-to-reach populations. Psychological therapies will be embedded within a wider range of wrap-around services and supports for the individual and their family as needed. Psychological therapies will not be provided in isolation, but rather as part of a wider range of services and supports that are funded or provided from other sources.

Longer term outcomes for this activity include improved wellbeing for children aged 0-11 years experiencing moderate levels of distress who have benefited from accessing evidence-based psychological therapies.

The Brisbane Mind 4 Kids providers collect the PMHC-MDS via RediCASE

### Needs Assessment Priorities \*

#### Needs Assessment

2023\_Refresh\_BrisbaneNorthPHN\_HNA

#### Priorities

Priority	Page reference
Mental health	69
Children's Health	68



### Activity Demographics

#### Target Population Cohort

Financially disadvantaged children aged 0-11 and their families.

#### In Scope AOD Treatment Type \*

#### Indigenous Specific \*

No

#### Indigenous Specific Comments

#### Coverage

#### Whole Region

Yes



## Activity Consultation and Collaboration

### Consultation

Brisbane North PHN consulted with a wide range of stakeholders in the development of a range of activities and for the development of the Planning for Wellbeing: A regional plan for North Brisbane and Moreton Bay focusing on mental health, suicide prevention and alcohol and other drug treatment services 2018-2023. The outcomes of this activity contribute to the success of the regional plan.

In 2018-19, Brisbane North PHN worked with consumers, carers, service providers and other stakeholders to review activities and plan for the future. Consumer and carer representatives were actively recruited from the Peer Participation in Mental Health Services (PPIMS) network to contribute to the reviews, which focused on the following areas:

- Psychological services
- Infant, child and youth mental health services
- Services for people with severe mental illness.

As part of the review for infant, child and youth mental health services, Brisbane North PHN consulted with:

- People with a lived experience
- Consumers
- Carers
- Psychology providers
- GPs and practice staff
- Mental health providers
- Metro North Hospital and Health Service
- Academics and policy experts
- Professional bodies.

The outcomes of the review into infant, child and youth mental health services informed the development of the service model outlined in this activity plan.

### Collaboration

This activity will be implemented by Brisbane North PHN, under the guidance of an Infant, Child and Youth Partnership group and Psychological Therapies Advisory group.

Membership of these groups are drawn from the Metro North Hospital and Health Service, Allied Health providers, Queensland Government agencies, consumers and families.



## Activity Milestone Details/Duration

### Activity Start Date

29/06/2019

### Activity End Date

28/06/2026

### Service Delivery Start Date

01/07/2019

**Service Delivery End Date**

30/06/2026

**Other Relevant Milestones**



**Activity Commissioning**

**Please identify your intended procurement approach for commissioning services under this activity:**

**Not Yet Known:** No

**Continuing Service Provider / Contract Extension:** Yes

**Direct Engagement:** No

**Open Tender:** No

**Expression Of Interest (EOI):** No

**Other Approach (please provide details):** No

**Is this activity being co-designed?**

No

**Is this activity the result of a previous co-design process?**

Yes

**Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?**

No

**Has this activity previously been co-commissioned or joint-commissioned?**

No

**Decommissioning**

No

**Decommissioning details?**

**Co-design or co-commissioning comments**

In 2018-19, Brisbane North PHN worked with consumers, carers, service providers and other stakeholders to review activities and plan for the future. Consumer and carer representatives were actively recruited from the Peer Participation in Mental Health Services (PPIMS) network to contribute to the reviews, which focused on the following areas:

- Psychological services
- Infant, child and youth mental health services
- Services for people with severe mental illness.

As part of the review for infant, child and youth mental health services, Brisbane North PHN consulted with:

- People with a lived experience
- Consumers
- Carers

- Psychology providers
- GPs and practice staff
- Mental health providers
- Metro North Hospital and Health Service
- Academics and policy experts
- Professional bodies.

The outcomes of the review into infant, child and youth mental health services informed the development of the service model outlined in this activity plan.

**Is this activity in scope for data collection under the Mental Health National Minimum Dataset?**

Yes



**Activity Planned Expenditure**

**Planned Expenditure**

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$279,171.42	\$660,521.27	\$674,151.15	\$0.00

**Totals**

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27	Total
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$279,171.42	\$660,521.27	\$674,151.15	\$0.00	\$1,613,843.84
Total	\$0.00	\$279,171.42	\$660,521.27	\$674,151.15	\$0.00	\$1,613,843.84

**Funding From Other Sources - Financial Details**

**Funding From Other Sources - Organisational Details**



**Activity Comments**

**Activity Status**

Submitted

**PHN Comments**

Subject	Description	Commented By	Date Created
---------	-------------	--------------	--------------

**Comments from the Department**

Comment	Date Created
---------	--------------



## MH - 3200 - MH 3.2 - Commission evidence-based psychological therapies for 12-25 years



### Activity Metadata

**Applicable Schedule \***

Primary Mental Health Care

**Activity Prefix \***

MH

**Activity Number \***

3200

**Activity Title \***

MH 3.2 - Commission evidence-based psychological therapies for 12-25 years

**Existing, Modified or New Activity \***

Existing



### Activity Priorities and Description

**Program Key Priority Area \***

Mental Health Priority Area 3: Psychological therapies for rural and remote, under-serviced and / or hard to reach groups

**Other Program Key Priority Area Description****Aim of Activity \***

The national mental health service planning framework's planning support tool estimates that over 94,000 people in the PHN region will have a mild mental health condition in 2020, an estimated 9 per cent of the PHN region's total population. Of this population, it is likely that over 47,000 people will require treatment.

The prevalence of mental health issues has increased over the last five years, particularly among younger residents of the region. Rates of psychological distress and estimated mental and behavioural disorders are highest in Moreton Bay North (12.2 per cent) and Redcliffe-North Lakes (11.4 per cent).

One third of people living in the Moreton Bay North subregion are considered to be most disadvantaged. In 2016, the median family income per annum in Moreton Bay North was \$73,354 (\$1410 per week), which was \$26,429 less than the median family income (\$99,783 per annum) for the overall PHN region.

People residing outside of the major metropolitan areas in the PHN region are more likely to access PBS subsidised antidepressants compared to people residing in the metropolitan areas, indicating that a higher need exists in the Moreton Bay North area.

During the COVID-19 period, it was identified that the mental health needs of young people were disproportionately higher than

normal and required additional resources to address this need.

The psychological therapies program for 12-25 year olds provides psychological therapy services to identified target population groups who have moderate mental illness and are financially disadvantaged. The target population groups include young people, aged 12-25 years. The aim of the program is to reduce psychological distress and improve wellbeing to eligible clients.

#### **Description of Activity \***

Brisbane North PHN will commission the headspace Caboolture, Strathpine and Redcliffe Centres to deliver short term individual psychological therapy services to young people aged 12 to 25years. Referrals to psychological therapies will originate from general practitioners and comprise part of a GP Mental Health Treatment Plan. There will be limited flexibility for provisional referrals from people who are eligible for the program and are referred through other established pathways.

Specific services will include a maximum of 12 sessions per person of individual psychological therapy. Commissioned providers will be able to deliver therapeutic groups and support people to access evidence based e-mental health. There will also be flexibility to provide a higher number of sessions for people with greater needs.

The service model for this activity was modified in 2019-20 as a result of a review of the delivery of psychological therapies for underserved and hard-to-reach populations. Psychological therapies will be embedded within a wider range of wrap-around services and supports for the individual and their family as needed. Psychological therapies will not be provided in isolation, but rather as part of a wider range of services and supports that are funded or provided from other sources.

All headspace centres collect the PMHC-MDS via RediCASE for this top-up.

#### **Needs Assessment Priorities \***

##### **Needs Assessment**

2023\_Refresh\_BrisbaneNorthPHN\_HNA

##### **Priorities**

<b>Priority</b>	<b>Page reference</b>
Mental health	69
Population health	71



## **Activity Demographics**

### **Target Population Cohort**

Young people aged 12-25 with mild - moderate mental health difficulties

### **In Scope AOD Treatment Type \***

### **Indigenous Specific \***

No

### **Indigenous Specific Comments**

### **Coverage**

Whole Region

No

SA3 Name	SA3 Code
Redcliffe	31305
Strathpine	31403
Caboolture	31302



## Activity Consultation and Collaboration

### Consultation

Brisbane North PHN consulted with a wide range of stakeholders in the development of a range of activities and for the development of the Planning for Wellbeing: A regional plan for North Brisbane and Moreton Bay focusing on mental health, suicide prevention and alcohol and other drug treatment services 2018-2023. The outcomes of this activity contribute to the success of the regional plan.

In 2018-19, Brisbane North PHN worked with consumers, carers, service providers and other stakeholders to review activities and plan for the future. Consumer and carer representatives were actively recruited from the Peer Participation in Mental Health Services (PPIMS) network and community mental health organisations to contribute to the reviews, which focused on the following areas:

- Psychological services
- Infant, child and youth mental health services
- Services for people with severe mental illness.

As part of the review for infant, child and youth mental health services, Brisbane North PHN consulted with:

- People with a lived experience
- Consumers
- Carers
- Psychology providers
- GPs and practice staff
- Mental health providers
- Metro North Hospital and Health Service
- Academics and policy experts
- Professional bodies.

The outcomes of the review into infant, child and youth mental health services informed the development of the service model outlined in this activity plan.

### Collaboration

This activity will be implemented by Brisbane North PHN, under the guidance of an Infant, Child and Youth Partnership group and Psychological Therapies Advisory group.

Membership of these groups are drawn from the Metro North Hospital and Health Service, Allied Health providers, Queensland Government agencies, consumers and families.





## Activity Milestone Details/Duration

### Activity Start Date

29/06/2019

### Activity End Date

28/06/2026

### Service Delivery Start Date

01/07/2019

### Service Delivery End Date

30/06/2026

### Other Relevant Milestones



## Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: No

Continuing Service Provider / Contract Extension: Yes

Direct Engagement: No

Open Tender: No

Expression Of Interest (EOI): No

Other Approach (please provide details): No

Is this activity being co-designed?

No

Is this activity the result of a previous co-design process?

Yes

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

No

Has this activity previously been co-commissioned or joint-commissioned?

Decommissioning

No

Decommissioning details?

Co-design or co-commissioning comments

In 2018-19, Brisbane North PHN worked with consumers, carers, service providers and other stakeholders to review activities and plan for the future. Consumer and carer representatives were actively recruited from the Peer Participation in Mental Health

Services (PPIMS) network and community mental health organisations to contribute to the reviews, which focused on the following areas:

- Psychological services
- Infant, child and youth mental health services
- Services for people with severe mental illness.

As part of the review for infant, child and youth mental health services, Brisbane North PHN consulted with:

- People with a lived experience
- Consumers
- Carers
- Psychology providers
- GPs and practice staff
- Mental health providers
- Metro North Hospital and Health Service
- Academics and policy experts
- Professional bodies.

The outcomes of the review into infant, child and youth mental health services informed the development of the service model outlined in this activity plan.

**Is this activity in scope for data collection under the Mental Health National Minimum Dataset?**

Yes



## Activity Planned Expenditure

### Planned Expenditure

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental	\$0.00	\$317,547.53	\$330,652.33	\$337,475.20	\$0.00

Health Flexible					
-----------------	--	--	--	--	--

### Totals

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27	Total
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$317,547.53	\$330,652.33	\$337,475.20	\$0.00	\$985,675.06
Total	\$0.00	\$317,547.53	\$330,652.33	\$337,475.20	\$0.00	\$985,675.06

### Funding From Other Sources - Financial Details

### Funding From Other Sources - Organisational Details



### Activity Comments

#### Activity Status

Submitted

#### PHN Comments

Subject	Description	Commented By	Date Created
---------	-------------	--------------	--------------

#### Comments from the Department

Comment	Date Created
---------	--------------



## MH - 3300 - MH 3.3 - Commission evidence-based psychological therapies to vulnerable populations



### Activity Metadata

**Applicable Schedule \***

Primary Mental Health Care

**Activity Prefix \***

MH

**Activity Number \***

3300

**Activity Title \***

MH 3.3 - Commission evidence-based psychological therapies to vulnerable populations

**Existing, Modified or New Activity \***

Existing



### Activity Priorities and Description

**Program Key Priority Area \***

Mental Health Priority Area 3: Psychological therapies for rural and remote, under-serviced and / or hard to reach groups

**Other Program Key Priority Area Description****Aim of Activity \***

The national mental health service planning framework's planning support tool estimates that over 94,000 people in the PHN region will have a mild mental health condition in 2020, an estimated 9 per cent of the PHN region's total population. Of this population, it is likely that over 47,000 people will require treatment.

The prevalence of mental health issues has increased over the last five years, particularly among younger residents of the region. Rates of psychological distress and estimated mental and behavioural disorders are highest in Moreton Bay North (12.2 per cent) and Redcliffe-North Lakes (11.4 per cent).

One third of people living in the Moreton Bay North subregion are considered to be most disadvantaged. In 2016, the median family income per annum in Moreton Bay North was \$73,354 (\$1410 per week), which was \$26,429 less than the median family income (\$99,783 per annum) for the overall PHN region.

People residing outside of the major metropolitan areas in the PHN region are more likely to access PBS subsidised antidepressants compared to people residing in the metropolitan areas, indicating that a higher need exists in the Moreton Bay North area.

Higher levels of mental health needs exist among LGBTIQ, and culturally and linguistically diverse populations. Higher rates of

psychological distress is also evidenced within disadvantaged areas with poorer health determinates. High prevalence of mild mental health conditions exist including anxiety and depression.

In conjunction with target population groups identified in the guidelines, the PHN has also identified target population groups in the Population Health Report 2019 and through the Brisbane MIND Service Review 2018. These target population groups are:

- People at risk of suicide
- People with a history of trauma or abuse
- People who identify as LGBTIQ
- People from CALD backgrounds
- People from geographically isolated regions. (Bribie Island/ Kilcoy regions)

The aim of this activity is to address service gaps by commissioning psychological therapy services for people in underserved and hard to reach populations, where there are barriers in accessing Medicare Benefits Schedule based psychological interventions.

This activity will be achieved by contracting providers to deliver structured, time limited, evidence-based psychological therapies that are embedded into a wider range of services and supports that are funded or provided from other sources. This will increase access to integrated services with 'wrap around' supports.

Longer term outcomes for this activity include improved wellbeing for people from underserved groups experiencing moderate levels of distress who have benefited from accessing evidence-based psychological therapies

#### **Description of Activity \***

Brisbane North PHN will commission providers to deliver short term individual psychological therapy services to underserved populations. Referrals to psychological therapies will originate from general practitioners and comprise part of a GP Mental Health Treatment Plan. There will be limited flexibility for provisional referrals from people who are eligible for the program and are referred through other established pathways.

Specific services will include individual psychological therapy as well as therapeutic groups and supports for people to access evidence based e-mental health. Psychological therapies will be embedded within a wider range of wrap-around services and supports for the individual and their family as needed. Psychological therapies will not be provided in isolation, but rather as part of a wider range of services and supports that are funded or provided from other sources

All providers will collect the PMHC MDS via RediCASE.

#### **Needs Assessment Priorities \***

##### **Needs Assessment**

2023\_Refresh\_BrisbaneNorthPHN\_HNA

##### **Priorities**

Priority	Page reference
Mental health	69



## **Activity Demographics**

### **Target Population Cohort**

The activity comprises part of the psychological therapies for underserved and hard to reach groups program, which is targeted to underserved and vulnerable populations within the Brisbane North PHN region. The program will specifically target a range of vulnerable populations including:

- Culturally and linguistically diverse people
- People at risk of suicide
- People who have experienced trauma and abuse
- People who identify as LGBTIQ+
- People who live in geographically isolated regions of the PHN

**In Scope AOD Treatment Type \***

**Indigenous Specific \***

No

**Indigenous Specific Comments**

**Coverage**

**Whole Region**

Yes



**Activity Consultation and Collaboration**

**Consultation**

Brisbane North PHN consulted with a wide range of stakeholders in the development of a range of activities and for the development of the Planning for Wellbeing: A regional plan for North Brisbane and Moreton Bay focusing on mental health, suicide prevention and alcohol and other drug treatment services 2018-2023. These outcomes of this activity contribute to the success of the regional plan.

In 2018-19, Brisbane North PHN worked with consumers, carers, service providers and other stakeholders to review activities and plan for the future. Consumer and carer representatives were actively recruited from the Peer Participation in Mental Health Services (PPIMS) network to contribute to the reviews, which focused on the following areas:

- Psychological services
- Infant, child and youth mental health services
- Services for people with severe mental illness.

As part of the review for psychological services, Brisbane North PHN consulted with:

- People with a lived experience
- Consumers
- Carers
- Psychology providers
- GPs and practice staff
- Mental health providers
- Metro North Hospital and Health Service
- Academics and policy experts
- Professional bodies.

The outcomes of the review into psychological services informed the development of the service model outlined in this activity

plan.

### Collaboration

This activity will be implemented by Brisbane North PHN, under the guidance of the Psychological Therapies Advisory group and Strategic Coordination group.

Membership of these groups are drawn from the Metro North Hospital and Health Service, Psychological therapies peak associations, Queensland Government agencies, consumers and families.



## Activity Milestone Details/Duration

### Activity Start Date

29/06/2019

### Activity End Date

28/06/2026

### Service Delivery Start Date

01/07/2019

### Service Delivery End Date

30/06/2026

### Other Relevant Milestones



## Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

**Not Yet Known:** No

**Continuing Service Provider / Contract Extension:** Yes

**Direct Engagement:** No

**Open Tender:** No

**Expression Of Interest (EOI):** No

**Other Approach (please provide details):** No

**Is this activity being co-designed?**

No

**Is this activity the result of a previous co-design process?**

Yes

**Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?**

No

**Has this activity previously been co-commissioned or joint-commissioned?**



No

#### **Decommissioning**

No

#### **Decommissioning details?**

#### **Co-design or co-commissioning comments**

In 2018-19, Brisbane North PHN worked with consumers, carers, service providers and other stakeholders to review activities and plan for the future. Consumer and carer representatives were actively recruited from the Peer Participation in Mental Health Services (PPIMS) network to contribute to the reviews, which focused on the following areas:

- Psychological services
- Infant, child and youth mental health services
- Services for people with severe mental illness.

As part of the review for psychological services, Brisbane North PHN consulted with:

- People with a lived experience
- Consumers
- Carers
- Psychology providers
- GPs and practice staff
- Mental health providers
- Metro North Hospital and Health Service
- Academics and policy experts
- Professional bodies.

The outcomes of the review into psychological services informed the development of the service model outlined in this activity plan.

#### **Is this activity in scope for data collection under the Mental Health National Minimum Dataset?**

Yes



### **Activity Planned Expenditure**

#### **Planned Expenditure**

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$1,888,459.40	\$1,893,783.36	\$1,932,860.46	\$0.00

**Totals**

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27	Total
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$1,888,459.40	\$1,893,783.36	\$1,932,860.46	\$0.00	\$5,715,103.22
Total	\$0.00	\$1,888,459.40	\$1,893,783.36	\$1,932,860.46	\$0.00	\$5,715,103.22

**Funding From Other Sources - Financial Details**

**Funding From Other Sources - Organisational Details**



## Activity Comments

### Activity Status

Submitted

### PHN Comments

Subject	Description	Commented By	Date Created
---------	-------------	--------------	--------------

### Comments from the Department

Comment	Date Created
---------	--------------



## MH - 3400 - MH 3.4 - Commission evidence-based psychological therapies to people with severe mental illness



### Activity Metadata

**Applicable Schedule \***

Primary Mental Health Care

**Activity Prefix \***

MH

**Activity Number \***

3400

**Activity Title \***

MH 3.4 - Commission evidence-based psychological therapies to people with severe mental illness

**Existing, Modified or New Activity \***

Existing



### Activity Priorities and Description

**Program Key Priority Area \***

Mental Health Priority Area 3: Psychological therapies for rural and remote, under-serviced and / or hard to reach groups

**Other Program Key Priority Area Description****Aim of Activity \***

The aim of this activity is to address service gaps by commissioning psychological therapy services for people in underserved and hard to reach populations, where there are barriers in accessing Medicare Benefits Schedule based psychological interventions.

This activity will be achieved by contracting providers to deliver structured, time limited, evidence-based psychological therapies that are embedded into a wider range of services and supports that are funded or provided from other sources. This will increase access to integrated services with 'wrap around' supports.

Longer term outcomes for this activity include improved wellbeing for people from underserved groups experiencing moderate to high levels of distress who have benefited from accessing evidence-based psychological therapies.

**Description of Activity \***

This activity delivers services through mental health hubs that consist of single organisations that are able to provide access to existing infrastructure and a wider range of services, or single providers that are co-located with other services providers that can provide a range of supports. Specific services will include therapeutic group work and limited individual sessions for assessment and review.

Psychological therapies services will be integrated with a wider range of separately funded wrap around services as required. This may involve a single organisation providing multiple services, colocation of services in a single location or a network of services providing in-reach and outreach services. This will ensure that providers will work together to provide appropriate wrap around care to patients.

The integrated mental health hubs all collect and submit the PMHC-MDS via rediCASE.

## Needs Assessment Priorities \*

### Needs Assessment

2023\_Refresh\_BrisbaneNorthPHN\_HNA

#### Priorities

Priority	Page reference
Mental health	69



## Activity Demographics

### Target Population Cohort

The activity comprises part of the psychological therapies for underserved and hard to reach groups program, which is targeted to underserved and vulnerable populations within the Brisbane North PHN region.

Specifically, this activity is targeted to people who were previous clients of the Commonwealth community mental health programs Partners in Recovery (PIR), Day to Day Living (D2DL) and the Personal Helpers and Mentors (PHaMs) who are found ineligible for supports under the NDIS. It is also targeted to people with severe mental illness who are not eligible for assistance through the NDIS, and who are not receiving psychosocial services through other programs.

### In Scope AOD Treatment Type \*

#### Indigenous Specific \*

No

#### Indigenous Specific Comments

### Coverage

#### Whole Region

Yes



## Activity Consultation and Collaboration

### Consultation

Brisbane North PHN consulted with a wide range of stakeholders in the development of a range of activities and for the development of the Planning for Wellbeing: A regional plan for North Brisbane and Moreton Bay focusing on mental health, suicide prevention and alcohol and other drug treatment services 2018-2025. The outcomes of this activity contribute to the success of the regional plan.

In 2018-19, Brisbane North PHN worked with consumers, carers, service providers and other stakeholders to review activities and plan for the future. Consumer and carer representatives were actively recruited from the Peer Participation in Mental Health Services (PPIMS) network to contribute to the reviews, which focused on the following areas:

- Psychological services
- Infant, child and youth mental health services
- Services for people with severe mental illness.

As part of the review for psychological services and services for people with severe mental illness, Brisbane North PHN consulted with:

- People with a lived experience
- Consumers
- Carers
- Psychology providers
- GPs and practice staff
- Mental health providers
- Metro North Hospital and Health Service
- Academics and policy experts
- Professional bodies.

The outcomes of the review into psychological services and services for people with severe mental illness informed the development of the service model outlined in this activity plan.

### **Collaboration**

This activity will be implemented by Brisbane North PHN, under the guidance of the Psychological Therapies Advisory group and the Collaboration in Mind partnership group.

Membership of these groups are drawn from the Metro North Hospital and Health Service, Allied Health providers, Queensland Government agencies, consumers and families



## **Activity Milestone Details/Duration**

### **Activity Start Date**

29/06/2019

### **Activity End Date**

28/06/2026

### **Service Delivery Start Date**

01/07/2019

### **Service Delivery End Date**

30/06/2026

### **Other Relevant Milestones**



## Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

**Not Yet Known:** No

**Continuing Service Provider / Contract Extension:** Yes

**Direct Engagement:** No

**Open Tender:** No

**Expression Of Interest (EOI):** No

**Other Approach (please provide details):** No

Is this activity being co-designed?

No

Is this activity the result of a previous co-design process?

Yes

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

No

Has this activity previously been co-commissioned or joint-commissioned?

No

**Decommissioning**

No

**Decommissioning details?**

### Co-design or co-commissioning comments

In 2018-19, Brisbane North PHN worked with consumers, carers, service providers and other stakeholders to review activities and plan for the future. Consumer and carer representatives were actively recruited from the Peer Participation in Mental Health Services (PPIMS) network to contribute to the reviews, which focused on the following areas:

- Psychological services
- Infant, child and youth mental health services
- Services for people with severe mental illness.

As part of the review for psychological services and services for people with severe mental illness, Brisbane North PHN consulted with:

- People with a lived experience
- Consumers
- Carers
- Psychology providers
- GPs and practice staff
- Mental health providers
- Metro North Hospital and Health Service
- Academics and policy experts

- Professional bodies.

The outcomes of the review into psychological services and services for people with severe mental illness informed the development of the service model outlined in this activity plan.

**Is this activity in scope for data collection under the Mental Health National Minimum Dataset?**

Yes



## Activity Planned Expenditure

### Planned Expenditure

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$381,821.07	\$397,578.60	\$405,782.47	\$0.00

### Totals



Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27	Total
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$381,821.07	\$397,578.60	\$405,782.47	\$0.00	\$1,185,182.14
Total	\$0.00	\$381,821.07	\$397,578.60	\$405,782.47	\$0.00	\$1,185,182.14

**Funding From Other Sources - Financial Details**

**Funding From Other Sources - Organisational Details**



**Activity Comments**

**Activity Status**

Submitted

**PHN Comments**

Subject	Description	Commented By	Date Created
---------	-------------	--------------	--------------

**Comments from the Department**

Comment	Date Created
---------	--------------



## MH - 3500 - MH 3.5 - Psychological treatment services for people living in residential aged care



### Activity Metadata

**Applicable Schedule \***

Primary Mental Health Care

**Activity Prefix \***

MH

**Activity Number \***

3500

**Activity Title \***

MH 3.5 - Psychological treatment services for people living in residential aged care

**Existing, Modified or New Activity \***

Existing



### Activity Priorities and Description

**Program Key Priority Area \***

Mental Health Priority Area 3: Psychological therapies for rural and remote, under-serviced and / or hard to reach groups

**Other Program Key Priority Area Description****Aim of Activity \***

Mental health services are not routinely available to older people living in aged care and are not within scope of the personal care or accommodation services that aged care facilities provide. There is evidence that residents of aged care have high rates of common mental illness, with an estimated 39 per cent of all permanent aged care residents living with mild to moderate depression. Experience with other initiatives such as Better Access suggests that up to half of this group of older people with mild to moderate depression may wish to receive mental health services if they were available to them. The funding provided to PHNs is intended to address this service gap.

The aim of this activity is to enable residents of aged care facilities with mental illness to access mental health services similar to those available in the community through improved access to psychologists, psychiatrists and general practitioners through the MBS Better Access initiative. A key focus of the PAC Well-being program is to provide psychological therapy services into RACFs that does not require a GP referral or a mental health care plan. Residents (or their family members on behalf of the resident) can self-refer into the program and do not need to have a diagnosed mental health condition to access the service.

The overall outcomes of the PAC Well-being program are for residents to have:

- access to psychological therapy for residents who are having significant transition issues and experiencing adjustment disorders or abnormal symptoms of grief and loss, for whom early treatment may avert descent into a more serious mood disorder

- access to psychological therapy for residents with mild to moderate anxiety and/or depression.
- access to psychological therapy for residents with past history of mental illness for which they received services before being admitted which could not be continued.
- improved levels of mental health and well-being (as measured through relevant outcome tools) are expected for these sub-groups of residents living in aged care facilities.

### **Description of Activity \***

Brisbane North PHN will continue to commission a provider to deliver the Psychology in Aged Care (PAC) Well-being Program that provides mild and moderate psychological services. These services will be similar to those available in the community under the MBS Better Access initiative. The model is designed to support early, low and severe episodic needs, where there is an identified service gap. This activity addresses the needs assessment priority of access to psychological therapies for underserved and hard to reach population groups.

This activity consists of three main components, including:

- Low intensity psychological supports
- Psychological therapy services
- Psychoeducation workshops.

The psychological supports will consist of five weekly sessions of 60 minutes duration every six weeks, or as needed by the aged care facility. These sessions will provide support to all new residents who are transitioning into aged care and adjusting to a new community living environment. Adjustment assessments will also take place during the low intensity sessions, and people who have been identified as having mild to moderate mental health needs will be stepped up into psychological therapy services.

The psychological therapy service will consist of five sessions of evidence based psychological therapies per episode of care. The sessions will be delivered to aged care residents who have been identified as having mild to moderate mental health needs. Residents who have accessed a severe/complex State service will have access to psychological therapies post acute phase to support maintenance of well-being. A range of external specialist consultants (i.e. gerontologist) will provide case consultancy as required and monthly professional development sessions to the workforce.

The psychoeducation workshops will be available as required to aged care facility staff to support learning and development in topics that are relevant to the mental health needs of aged care residents. Family members and carers will also be able to attend the workshops, where it has been identified that the aged care resident's condition is directly impacted by family and carer relationships.

The activity is embedded within the stepped care continuum of primary mental health care. Aged care residents are assessed to ensure that their mental health needs are being met, or whether they would benefit from more intensive or less intensive care, depending on the circumstance. Referrals into the activity can originate from a range of sources, with service providers triaging accordingly to ensure continuity of care.

The program will offer services based on the stepped care continuum of primary mental health care with a particular focus on providing mild to moderate psychological therapies.

There are three components to the program:

- (1) low intensity psychological groups
- (2) psychological therapy services
- (3) Psychoeducation workshops.

The service provider submits the PMHC-MDS via a merge with the Redicase system on a monthly basis.

### **Needs Assessment Priorities \***

#### **Needs Assessment**

2023\_Refresh\_BrisbaneNorthPHN\_HNA

#### **Priorities**

Priority	Page reference
Mental health	69
Aged Care	70



## Activity Demographics

### Target Population Cohort

The target population is residents living in aged care facilities that need support transitioning to living in a communal environment and residents at risk of and/or experiencing mild-moderate depression and/or anxiety symptoms.

### In Scope AOD Treatment Type \*

### Indigenous Specific \*

No

### Indigenous Specific Comments

### Coverage

#### Whole Region

Yes



## Activity Consultation and Collaboration

### Consultation

Brisbane North PHN consulted with a wide range of stakeholders in the development of a range of activities and for the development of the Planning for Wellbeing: A regional plan for North Brisbane and Moreton Bay focusing on mental health, suicide prevention and alcohol and other drug treatment services 2018-2025. This outcomes of this activity contribute to the success of the regional plan.

In 2018-19, Brisbane North PHN worked with consumers, carers, service providers and other stakeholders to review activities and plan for the future. Consumer and carer representatives were actively recruited from the Peer Participation in Mental Health Services (PPIMS) network to contribute to the reviews, which focused on the following areas:

- Psychological services
- Infant, child and youth mental health services
- Services for people with severe mental illness.

As part of the review for psychological services, Brisbane North PHN consulted with:

- People with a lived experience

- Consumers
- Carers
- Psychology providers
- GPs and practice staff
- Mental health providers
- Metro North Hospital and Health Service
- Academics and policy experts
- Professional bodies.

The outcomes of the review into psychological services informed the development of the service model outlined in this activity plan.

#### **Collaboration**

This activity will be implemented by Brisbane North PHN, under the guidance of the Psychological Therapies Partnership Group.

Membership of this group is drawn from the Metro North Hospital and Health Service, Psychological Therapy Peak Associations, Queensland Government agencies, consumers and families.



### **Activity Milestone Details/Duration**

#### **Activity Start Date**

29/06/2019

#### **Activity End Date**

28/06/2026

#### **Service Delivery Start Date**

01/07/2019

#### **Service Delivery End Date**

30/06/2026

#### **Other Relevant Milestones**



### **Activity Commissioning**

Please identify your intended procurement approach for commissioning services under this activity:

**Not Yet Known:** No

**Continuing Service Provider / Contract Extension:** Yes

**Direct Engagement:** No

**Open Tender:** No

**Expression Of Interest (EOI):** No

**Other Approach (please provide details):** No

**Is this activity being co-designed?**

Yes

**Is this activity the result of a previous co-design process?**

Yes

**Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?**

No

**Has this activity previously been co-commissioned or joint-commissioned?**

No

**Decommissioning**

No

**Decommissioning details?**

**Co-design or co-commissioning comments**

Change Futures has been delivering low intensity psychological services since January 2017. In this time, a Formal Governance Structure has been established to enable ongoing consultation, engagement and feedback about the service delivery model. Feedback about how best to implement mental health services to Residents of Aged Care Facilities and how to support staff and carer's/family understanding and knowledge about resident's mental health care needs are key focus areas. The Residential Advisory Groups will expand to Six Resident Advisory Groups and will be established in each of the PHN's sub-regions (Moreton Bay North, Redcliffe – North Lakes, Pine Rivers, Brisbane North, Brisbane Inner City and Brisbane West). Resident Advisory Groups will support the co-design, implementation and evaluation of an appropriate and responsive service. Group members include:

- 3-4 residents
- 1 x RACF staff
- 1 x Family/carer representative/s; and
- Change Futures staff will facilitate and minute meetings.

**Is this activity in scope for data collection under the Mental Health National Minimum Dataset?**

Yes



## Activity Planned Expenditure

### Planned Expenditure

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Funding					
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$1,115,475.00	\$1,161,511.01	\$1,184,312.00	\$0.00

### Totals

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27	Total
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$1,115,475.00	\$1,161,511.01	\$1,184,312.00	\$0.00	\$3,461,298.01
Total	\$0.00	\$1,115,475.00	\$1,161,511.01	\$1,184,312.00	\$0.00	\$3,461,298.01

### Funding From Other Sources - Financial Details

### Funding From Other Sources - Organisational Details



### Activity Comments

#### Activity Status

Submitted

#### PHN Comments

Subject	Description	Commented By	Date Created
---------	-------------	--------------	--------------

#### Comments from the Department

Comment	Date Created
---------	--------------





## MH - 3700 - MH 3.7 - My Mental Health Initial Assessment & Referral



### Activity Metadata

**Applicable Schedule \***

Primary Mental Health Care

**Activity Prefix \***

MH

**Activity Number \***

3700

**Activity Title \***

MH 3.7 - My Mental Health Initial Assessment & Referral

**Existing, Modified or New Activity \***

Existing



### Activity Priorities and Description

**Program Key Priority Area \***

Mental Health Priority Area 7: Stepped care approach

**Other Program Key Priority Area Description****Aim of Activity \***

One in five Australian adults (aged 16 to 85 years) will experience a mental illness each year and almost half will experience a mental disorder in their lifetime.<sup>1</sup> Anxiety disorders and affective (mood) disorders are the most common, affecting approximately 14% and 6%, respectively, of the adult population each year, with these conditions often co-occurring. In addition, almost one in seven (14%) young people (aged 4 to 17 years) are estimated to have experienced a mental illness in the previous year.

The experience of mental health conditions ranges across a wide spectrum. The most common experience is of approximately 5.8 million people 'at risk' who do not meet criteria for a diagnosis but who have some mental health need. This includes people who have had a previous illness and are at risk of relapse without ongoing care, as well as those who have early symptoms and are at risk of developing a diagnosable illness. For these people, prevention, and early intervention through primary health care (mainly general practitioners), digital mental health and self-help services are most relevant. These services are predominantly the responsibility of the Commonwealth.

People with mild mental illnesses, estimated at 2.3 million people, as well as those with moderately severe mental illness, with around 1.1 million people, represent the next largest groups. People with mild to moderately severe illnesses are also predominantly managed in the primary mental health care system, with the bulk of services currently being provided through general practice and the Medicare Better Access initiative. Again, this layer of service responsibility rests with the Commonwealth.

At the highest end of the spectrum of need, there are approximately 775,000 people with severe mental illness. For this group, the responsibility for clinical services is shared between the Commonwealth and states as well as private hospitals. The National Disability Insurance Scheme provides support to eligible individuals experiencing the most significant disability associated with severe mental illness.

People seeking mental health support may present with a range of interrelated factors that can make it challenging to determine the most appropriate level of stepped care. The IAR provides a standardised, evidence-based and objective approach to assist with mental health care recommendations.

In the 2021-22 Budget, the Australian Government announced a \$2.3 billion investment in mental health through the National Mental Health and Suicide Prevention Plan (the Plan) to lead landmark reform. The Plan includes \$34.2 million to expand and implement the Initial Assessment and Referral (IAR) tool in primary care settings. As part of this funding, Primary Health Networks (PHNs) will each receive funding for an IAR Training and Support Officer (IAR TSO) to support General Practitioners (GPs) and clinicians in their network to learn about, use and embed the IAR in clinical practice. It is expected that around half of the GP workforce in the Brisbane North PHN region (approximately 936) will be trained in the tool by June 2025.

The intent of stepped care is that a person presenting to the health system will be matched to the least intensive level of care that most suits their current treatment need. A secondary and key feature of stepped care is ongoing outcome and experience measurement to provide close to real-time feedback on outcomes allowing treatment intensity to be adjusted (stepping up or stepping down) as necessary.

This approach is intended to:

- have less burden on the consumer,
- prevent over servicing, and
- place less pressure on the existing mental health system.

The IAR Guidance and DST toolkit was developed to provide PHNs, referrers, and commissioned providers with guidance on the different levels of care and criteria to assist in determining an appropriate level of care using a holistic decision support tool to implement the least intensive level of appropriate care for consumers.

#### **Description of Activity \***

The IAR is undertaken by a clinician who is suitably qualified and experienced to perform a mental health assessment to generate a recommended level of care. This recommendation, combined with clinician knowledge, professional judgement and supported consumer decision-making guides the decision about a referral to a service that is most likely to provide the right type and intensity of treatment. Clinicians are also expected to apply their knowledge of local resources and services (e.g., waiting lists and service availability, health service pathways) when making referrals.

The main focus of this project is to deliver IAR training to GPs and other referrers.

PHN Website- The Brisbane North PHN website will host an IAR webpage to provide information and registration links.

Promotion- A training calendar will be established and distributed across the sector. Promotion of the training will be via normal PHN channels. ( Flyer, event slides, Network link, Practice Link, eDM social media, direct enquiry etc)

Delivery- IAR training will be delivered via online and face to face. Formal training currently takes 2 hours. A 30 minute pre recorded video that introduces the IAR will be made available for participants to view prior to actual training. This will reduce actual training time to 90 minutes. It is anticipated that there may be an adjustment to training time when future adaptations of the IAR (Child and Youth, Aboriginal and Torres Strait Islander, older persons and veteran) are made available. Included in the training will be a brief introduction to access and using the My Mental Health eReferral form as well as describing and explaining the services available at each level of care within our region.

CPD- To incentivise training, GPs will receive CPD points on the completion this training. (RACGP Educational Activities 1hr, Reviewing Performance 1hr) (ACCRM- 2hrs CPD)

Payment- To further incentivise training eligible GPs will receive up to \$300 on completion of the training.

Follow up and check-ins- Follow up support may require onsite visits or telephone or video check ins. Scope will be made for this in the project.

Refresher training- It is anticipated the training will only need to be completed once, with potentially some refresher training or communication in relation to updated guidance as new adaptations are developed.

Evaluation- Participants will be encouraged to provide feedback, during and after the training. There will be provision for participants to feedback comments in regards to the all aspects of the conduct of the IAR training as well as specific feedback on the IAR tool (Vignettes etc) and guidelines. A 3 month survey will be sent to participants to gauge uptake and use of the IAR-DST

IAR TSO requirements-

- Complete monthly and quarterly reporting requirements.
- Attend monthly TSO meeting with the Department and/or National Project Manager
- Work towards training the target number of allocated GPs.

The IAR tool forms part of the H2H component of PMHC-MDS and is collected through redicase.

## Needs Assessment Priorities \*

### Needs Assessment

2023\_Refresh\_BrisbaneNorthPHN\_HNA

#### Priorities

Priority	Page reference
Mental health	69
Service System	72



## Activity Demographics

### Target Population Cohort

General Practitioners (GP) and other clinicians seeking to determine the most appropriate care type and intensity for individuals.

Service providers and intake teams responsible for undertaking initial assessments which may involve making recommendations on the level of care required (including HHS staff).

### In Scope AOD Treatment Type \*

#### Indigenous Specific \*

No

#### Indigenous Specific Comments

### Coverage

#### Whole Region

Yes



## Activity Consultation and Collaboration

### Consultation

Details and methods for engaging with GP's and other health professionals have been developed in collaboration with the Primary Care team, along with GPLO's and the CAG, which will provide valuable insight to the needs of GP's and ensure the training is most appropriate.

### Collaboration

Feedback will be sought from participants to inform the future delivery of the training and the efficacy of the tool in practice.

---



## Activity Milestone Details/Duration

### Activity Start Date

30/12/2021

### Activity End Date

28/06/2026

### Service Delivery Start Date

### Service Delivery End Date

### Other Relevant Milestones

---



## Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: No

Continuing Service Provider / Contract Extension: No

Direct Engagement: Yes

Open Tender: No

Expression Of Interest (EOI): No

Other Approach (please provide details): No

Is this activity being co-designed?

No

Is this activity the result of a previous co-design process?

No

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

No

Has this activity previously been co-commissioned or joint-commissioned?

No

Decommissioning

No

Decommissioning details?

Co-design or co-commissioning comments

Is this activity in scope for data collection under the Mental Health National Minimum Dataset?

No



### Activity Planned Expenditure

#### Planned Expenditure

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$661,599.00	\$111,383.00	\$0.00	\$0.00

**Totals**

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27	Total
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$661,599.00	\$111,383.00	\$0.00	\$0.00	\$772,982.00
Total	\$0.00	\$661,599.00	\$111,383.00	\$0.00	\$0.00	\$772,982.00

**Funding From Other Sources - Financial Details**

**Funding From Other Sources - Organisational Details**



**Activity Comments**

**Activity Status**

Submitted

**PHN Comments**

Subject	Description	Commented By	Date Created
---------	-------------	--------------	--------------

**Comments from the Department**

Comment	Date Created
---------	--------------



## MH - 4100 - MH 4.1 - Commission innovative primary mental health care services for people with severe mental ill



### Activity Metadata

**Applicable Schedule \***

Primary Mental Health Care

**Activity Prefix \***

MH

**Activity Number \***

4100

**Activity Title \***

MH 4.1 - Commission innovative primary mental health care services for people with severe mental ill

**Existing, Modified or New Activity \***

Existing



### Activity Priorities and Description

**Program Key Priority Area \***

Mental Health Priority Area 4: Mental health services for people with severe and complex mental illness including care packages

**Other Program Key Priority Area Description****Aim of Activity \***

An estimated 3% of Australian adults have severe disorders, judged according to the type of illness (diagnosis), intensity of symptoms, duration of illness (chronicity), and the degree of disability caused. As of June 30, 2019, Commonwealth mental health programs Partners in Recovery, Day to Day Living and Personal Helpers and Mentors Scheme ceased. Without these programs, there was limited support other than the NDIS or NPS-T programs to support people with severe and persistent mental illness. The mental health system is difficult to navigate and with the ending of these Commonwealth programs, a coordinated response was lacking to support people with a severe and persistent mental illness.

The Brisbane North PHN combined 4 streams of funding - Psychosocial Support (previously CoS + NPS-M), Psychological Therapies and Care Coordination to create integrated mental health service hubs that were placed in three hospital catchments to meet the needs of people in the Brisbane North area. The integrated mental health hubs are part of a stepped care approach to mental health, where people's needs are assessed and understood, and they are easily connected to the right service.

The aim of this activity is to deliver innovative primary mental health care services to people who are being managed in primary care. Brisbane North PHN will achieve this aim through the provision of best practice clinical care coordination for people with severe and complex mental illness who are being managed in primary care, through the use of mental health nurses. These supports will be located within service hubs, which include a range of clinical and non-clinical supports.

The provision of clinical mental health supports within broader service hubs for people with severe mental illness addresses the needs assessment priorities associated with improving access to mental health services. This activity is a part of the overall stepped care approach to mental health, where people’s needs are understood and they connect to the right service for them.

Brisbane North PHN commissioned three integrated mental health service hubs, The Recovery and Discovery Centre, The Living and Learning Centre and Stride Hub Caboolture (formally Aftercare). The mental health service hubs deliver both clinical and non-clinical services for people with severe mental illness. The overall aim of the service hubs is to support people with severe mental illness to:

- live well in the community;
- access integrated clinical and non-clinical services, matched to their level of need; and
- achieve their recovery goals.

#### **Description of Activity \***

Brisbane North PHN will continue to commission clinical mental health nurse services to support the needs of people with severe and complex mental illness who are best managed in primary health care.

The mental health nurse services will be located within service ‘hubs’, and complement separately funded clinical and non-clinical mental health services for people living with severe mental illness. The service hubs will leverage off and strengthen existing infrastructure by providing access to a wider range of services and supports in a single location. By negotiation, other services will provide in-reach into each of the service hubs. This will expand the service offerings available and facilitate connections to other services as appropriate.

This activity will fund the care coordination and mental health nurse components present in the service hubs. This includes the following services:

- Agreed clinical care within the scope of practice of the mental health nurse, in accordance with the agreed treatment plan
- Monitoring a client’s mental state
- Liaising with carers and families as appropriate
- Administering and monitoring medication compliance
- Providing information on and assisting in addressing physical health needs where appropriate.

Continuity of care will be assured for this activity by the use of a single multiagency care plan for people with severe and complex mental illness including wrap around psychosocial, psychological and functional supports.

The integrated mental health hubs all collect and submit the PMHC-MDS via RediCASE.

#### **Needs Assessment Priorities \***

##### **Needs Assessment**

2023\_Refresh\_BrisbaneNorthPHN\_HNA

##### **Priorities**

<b>Priority</b>	<b>Page reference</b>
Mental health	69



## **Activity Demographics**

### **Target Population Cohort**

This activity is broadly targeted to people who are experiencing a severe mental illness.



The mental health nursing components of this activity contain an eligibility criteria which must be met:

- a diagnosed mental disorder (according to criteria defined in the Diagnostic and Statistical Manual of Mental Health Disorders – Fifth Edition or the World Health Organisation Diagnostic and Management Guidelines for Mental Health Disorders in Primary Care: ICD-10 Chapter V Primary Care Version) which is severe and either episodic or persistent in nature
- the mental disorder significantly impacts at least two areas of the persons social, personal and/or occupational functioning
- the person has, or is at risk of developing, a physical health problem
- the mental disorder has resulted in hospital treatment in the previous 2 years or there is a risk of hospitalisation within the next 12 months if clinical care by a mental health nurse is not provided
- the patient is expected to need ongoing treatment and management of their mental disorder over the next two years
- a primary care based GP or psychiatrist is the main person responsible for the patients clinical mental health care
- they are not currently receiving clinical care coordination from another service
- they are over 18 years of age (services for young people with severe mental illness are being procured through a separate process)
- the patient provides consent to treatment from a mental health nurse.

**In Scope AOD Treatment Type \***

**Indigenous Specific \***

No

**Indigenous Specific Comments**

**Coverage**

**Whole Region**

Yes



## Activity Consultation and Collaboration

### Consultation

Brisbane North PHN consulted with a wide range of stakeholders in the development of a range of activities and for the development of the Planning for Wellbeing: A regional plan for North Brisbane and Moreton Bay focusing on mental health, suicide prevention and alcohol and other drug treatment services 2018-2025. This outcomes of this activity contribute to the success of the regional plan.

In 2018-19, Brisbane North PHN worked with consumers, carers, service providers and other stakeholders to review activities and plan for the future. Consumer and carer representatives were actively recruited from the Peer Participation in Mental Health Services (PPIMS) network to contribute to the reviews, which focused on the following areas:

- Psychological services
- Infant, child and youth mental health services
- Services for people with severe mental illness.

As part of the review for services for people with severe mental illness, Brisbane North PHN contracted an engagement consultant to hold a number of sessions. These sessions focused on reviewing the current landscape and workshopping potential solutions to identified problems. Representation at these workshops consisted of:

- People with a lived experience
- Consumers
- Carers
- Psychology providers
- GPs and practice staff
- Mental health providers
- Metro North Hospital and Health Service
- Academics and policy experts
- Professional bodies.

The outcomes of the review into services for people with people with severe mental illness informed the development of the service model outlined in this activity plan.

#### **Collaboration**

This activity will be implemented by Brisbane North PHN, under the guidance of the Collaboration in Mind partnership group.

Membership of this group is drawn from the Metro North Hospital and Health Service, Allied Health providers, Queensland Government agencies, peak bodies, consumers and families.



### **Activity Milestone Details/Duration**

#### **Activity Start Date**

29/06/2019

#### **Activity End Date**

28/06/2026

#### **Service Delivery Start Date**

01/07/2019

#### **Service Delivery End Date**

30/06/2026

#### **Other Relevant Milestones**



### **Activity Commissioning**

Please identify your intended procurement approach for commissioning services under this activity:

**Not Yet Known:** No

**Continuing Service Provider / Contract Extension:** Yes

**Direct Engagement:** No

**Open Tender:** No

**Expression Of Interest (EOI):** No

**Other Approach (please provide details):** No

**Is this activity being co-designed?**

No

**Is this activity the result of a previous co-design process?**

Yes

**Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?**

No

**Has this activity previously been co-commissioned or joint-commissioned?**

No

**Decommissioning**

No

**Decommissioning details?**

**Co-design or co-commissioning comments**

In 2018-19, Brisbane North PHN worked with consumers, carers, service providers and other stakeholders to review activities and plan for the future. Consumer and carer representatives were actively recruited from the Peer Participation in Mental Health Services (PPIMS) network to contribute to the reviews, which focused on the following areas:

- Psychological services
- Infant, child and youth mental health services
- Services for people with severe mental illness.

As part of the review for services for people with severe mental illness, Brisbane North PHN contracted an engagement consultant to hold a number of sessions. These sessions focused on reviewing the current landscape and workshopping potential solutions to identified problems. Representation at these workshops consisted of:

- People with a lived experience
- Consumers
- Carers
- Psychology providers
- GPs and practice staff
- Mental health providers
- Metro North Hospital and Health Service
- Academics and policy experts
- Professional bodies.

The outcomes of the review into services for people with people with severe mental illness informed the development of the service model outlined in this activity plan.

**Is this activity in scope for data collection under the Mental Health National Minimum Dataset?**

Yes



**Activity Planned Expenditure**

**Planned Expenditure**

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$1,977,261.43	\$1,848,070.48	\$1,886,204.00	\$0.00

**Totals**

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27	Total
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$1,977,261.43	\$1,848,070.48	\$1,886,204.00	\$0.00	\$5,711,535.91
Total	\$0.00	\$1,977,261.43	\$1,848,070.48	\$1,886,204.00	\$0.00	\$5,711,535.91

**Funding From Other Sources - Financial Details**

**Funding From Other Sources - Organisational Details**



## Activity Comments

### Activity Status

Submitted

### PHN Comments

Subject	Description	Commented By	Date Created
---------	-------------	--------------	--------------

### Comments from the Department

Comment	Date Created
---------	--------------



## MH - 5300 - MH 5.3 - Commission suicide prevention services for Aboriginal and Torres Strait Islander people



### Activity Metadata

**Applicable Schedule \***

Primary Mental Health Care

**Activity Prefix \***

MH

**Activity Number \***

5300

**Activity Title \***

MH 5.3 - Commission suicide prevention services for Aboriginal and Torres Strait Islander people

**Existing, Modified or New Activity \***

Existing



### Activity Priorities and Description

**Program Key Priority Area \***

Mental Health Priority Area 6: Aboriginal and Torres Strait Islander mental health services

**Other Program Key Priority Area Description****Aim of Activity \***

Aboriginal and Torres Strait Islander people are experiencing high levels of mental health/suicide issues and there is a need for a whole of region integrated and coordinated response. The Brisbane North PHN Health Needs Assessment determined that Aboriginal and Torres Strait Islanders are priority populations that need priority support and resourcing.

The aim of this activity is to encourage and promote a systems based regional approach to suicide prevention. This approach includes community based activities and liaison with the Metro North Hospital and Health Service and other providers.

Brisbane North PHN will achieve this aim by commissioning a suicide prevention service that is specifically targeted to Aboriginal and Torres Strait Islander people.

**Description of Activity \***

This activity will continue to commission a service provider specific to Aboriginal and Torres Strait Islander people. The provider will work together to ensure appropriate follow-up and support arrangements are in place, at the regional level, for individuals after a suicide attempt. This approach is also designed to support other people at high risk of suicide and includes Aboriginal and Torres Strait Islander people. This activity will deliver culturally responsive suicide prevention services to Indigenous people, and promote and sustain social and emotional wellbeing.

The service will continue to be part of a broader, holistic, integrated mental health and alcohol and drug service for Indigenous people. Brisbane North PHN will continue to commission the Institute for Urban Indigenous Health to deliver this activity.

UIIH supplies the PMHC-MDS in a bi-monthly extract to the PHN that is then uploaded to Logicy.

This activity is coupled with MH 6.1 as part of an integrated, holistic approach to First Nations mental health needs.

### **Needs Assessment Priorities \***

#### **Needs Assessment**

2023\_Refresh\_BrisbaneNorthPHN\_HNA

#### **Priorities**

<b>Priority</b>	<b>Page reference</b>
Mental health	69
Aboriginal & Torres Strait Islander Health	67



## **Activity Demographics**

#### **Target Population Cohort**

This activity is targeted to Aboriginal and Torres Strait Islander people.

#### **In Scope AOD Treatment Type \***

#### **Indigenous Specific \***

Yes

#### **Indigenous Specific Comments**

Brisbane North PHN engages with the Indigenous sector via the Institute for Urban Indigenous Health in the ongoing development and implementation of this activity. Brisbane North PHN will also continue to engage with the Indigenous sector through the Aboriginal and Torres Strait Islander Engagement Steering Group and Brisbane North Elders Network.

#### **Coverage**

##### **Whole Region**

Yes



## **Activity Consultation and Collaboration**

#### **Consultation**

Consultation to inform the development of this activity initially occurred throughout the 2017-18 financial year. This consultation

involved:

- Suicide Prevention Forums – 102 people attended 2 Forums, including consumers, GP's, psychologists, HHS staff, community and private services providers, youth services, Aboriginal and Torres Strait Islander services and academic and research bodies
- stakeholder meetings – 5 meetings with stakeholders including Redcliffe Hospital Collaborative and HHS Mental Health services and Queensland Police Service.

The feedback from the Forums helped us to identify the need for a trial follow up service model in the Redcliffe region. Subsequent stakeholder meetings informed the key elements required for this model. Additional feedback throughout all of the engagement also identified the need for:

- improved networking amongst existing service providers to improve patient outcomes
- workforce capacity training.

This feedback was incorporated into the development of the service model.

### **Collaboration**

This activity was implemented by Brisbane North PHN, under the guidance of the Suicide Prevention Strategic Partnership Group and Aboriginal and Torres Strait Islander Engagement Steering Group.

Membership of these groups were drawn from the Metro North Hospital and Health Service, Allied Health providers, Queensland Government agencies, consumers and families.



## **Activity Milestone Details/Duration**

### **Activity Start Date**

29/06/2019

### **Activity End Date**

28/06/2026

### **Service Delivery Start Date**

30/06/2019

### **Service Delivery End Date**

30/06/2026

### **Other Relevant Milestones**



## **Activity Commissioning**

Please identify your intended procurement approach for commissioning services under this activity:

**Not Yet Known:** No

**Continuing Service Provider / Contract Extension:** Yes

**Direct Engagement:** No

**Open Tender:** No



**Expression Of Interest (EOI):** No  
**Other Approach (please provide details):** No

**Is this activity being co-designed?**

No

**Is this activity the result of a previous co-design process?**

Yes

**Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?**

No

**Has this activity previously been co-commissioned or joint-commissioned?**

No

**Decommissioning**

No

**Decommissioning details?**

**Co-design or co-commissioning comments**

In 2017, the PHN worked with the Institute for Urban Indigenous Health to identify needs and service gaps in Aboriginal and Torres Strait Islander mental health services.

Following this, the PHN entered into a direct tender negotiation with the Institute for Urban Indigenous Health for the delivery of integrated mental health, suicide prevention and alcohol and drug treatment services

**Is this activity in scope for data collection under the Mental Health National Minimum Dataset?**

Yes



## Activity Planned Expenditure

### Planned Expenditure

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$96,646.00	\$100,635.01	\$102,711.00	\$0.00

### Totals

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27	Total
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$96,646.00	\$100,635.01	\$102,711.00	\$0.00	\$299,992.01
Total	\$0.00	\$96,646.00	\$100,635.01	\$102,711.00	\$0.00	\$299,992.01

### Funding From Other Sources - Financial Details

### Funding From Other Sources - Organisational Details



### Activity Comments

#### Activity Status

Submitted

#### PHN Comments

Subject	Description	Commented By	Date Created
---------	-------------	--------------	--------------

#### Comments from the Department

Comment	Date Created
---------	--------------



## MH - 6100 - MH 6.1 - Commission mental health services for Aboriginal and Torres Strait Islander people



### Activity Metadata

**Applicable Schedule \***

Primary Mental Health Care

**Activity Prefix \***

MH

**Activity Number \***

6100

**Activity Title \***

MH 6.1 - Commission mental health services for Aboriginal and Torres Strait Islander people

**Existing, Modified or New Activity \***

Existing



### Activity Priorities and Description

**Program Key Priority Area \***

Mental Health Priority Area 6: Aboriginal and Torres Strait Islander mental health services

**Other Program Key Priority Area Description****Aim of Activity \***

Aboriginal and Torres Strait Islander people are experiencing high levels of mental health/suicide issues and there is a need for a whole of region integrated and coordinated response. The Brisbane North PHN Health Needs Assessment determined that Aboriginal and Torres Strait Islanders are priority populations that need priority support and resourcing.

The aim of this activity is to enhance access to and better integrate Aboriginal and Torres Strait Islander mental health services at a local level, facilitating a joined up approach with other closely connected services. These services include social and emotional wellbeing, suicide prevention and alcohol and other drug services.

**Description of Activity \***

Brisbane North PHN will continue to commission a service provider for the delivery of an integrated social and emotional health and wellbeing program, suicide prevention and alcohol and drug treatment services for Aboriginal and Torres Strait Islander people living in the Brisbane North PHN region.

- a Senior Social Health Professional to carry out intake assessments
- a Child Psychologist to deliver services and respond to the demand for children-centred services
- a Psychologist to extend and deliver services

- a Social Health Care Coordinator to work closely with other Care Coordinator type roles (i.e. ITC,) to support clients with complex chronic and mental health conditions
- a Mental Health Nurse (Registered Nurse) to deliver services.

These services form part of an integrated social and emotional health and wellbeing approach, together with suicide prevention and alcohol and other drug treatment services.

UIH supplies the PHN with a bi-monthly PMHC-MDS extract that is submitted to Logicly.

This activity is bundled with MH 5.3.

### Needs Assessment Priorities \*

#### Needs Assessment

2023\_Refresh\_BrisbaneNorthPHN\_HNA

#### Priorities

Priority	Page reference
Mental health	69
Aboriginal & Torres Strait Islander Health	67



### Activity Demographics

#### Target Population Cohort

This activity is targeted to Aboriginal and Torres Strait Islander people.

#### In Scope AOD Treatment Type \*

#### Indigenous Specific \*

Yes

#### Indigenous Specific Comments

Brisbane North PHN engages with the Indigenous sector via the Institute for Urban Indigenous Health in the ongoing development and implementation of this activity. Brisbane North PHN will also continue to engage with the Indigenous sector through the Aboriginal and Torres Strait Islander Engagement Steering Group.

#### Coverage

##### Whole Region

Yes



### Activity Consultation and Collaboration

## Consultation

Brisbane North PHN consulted with a wide range of stakeholders in the development of a range of activities and for the development of the Planning for Wellbeing: A regional plan for North Brisbane and Moreton Bay focusing on mental health, suicide prevention and alcohol and other drug treatment services 2018-2025. This outcomes of this activity contribute to the success of the regional plan.

In 2017, the PHN worked with the Institute for Urban Indigenous Health to identify needs and service gaps in Aboriginal and Torres Strait Islander mental health services.

Following this, the PHN entered into a direct tender negotiation with the Institute for Urban Indigenous Health for the delivery of integrated mental health, suicide prevention and alcohol and drug treatment services. A plan of activity and a contract has been agreed. The Institute for Urban Indigenous Health (IUIH) will subcontract some of the service delivery to Brisbane Aboriginal and Torres Strait Islander Community Health Service. Brisbane North PHN will continue to engage the wider Aboriginal and Torres Strait Islander via IUIH as part of the implementation of the regional plan.

## Collaboration

This activity will be implemented by Brisbane North PHN, under the guidance of the Aboriginal and Torres Strait Islander Engagement Steering Group.

Membership of this group is drawn from the Metro North Hospital and Health Service, Allied Health providers, Queensland Government agencies, consumers and families.



## Activity Milestone Details/Duration

### Activity Start Date

27/06/2019

### Activity End Date

28/06/2026

### Service Delivery Start Date

29/06/2019

### Service Delivery End Date

30/06/2025

### Other Relevant Milestones



## Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

**Not Yet Known:** No

**Continuing Service Provider / Contract Extension:** Yes

**Direct Engagement:** No

**Open Tender:** No

**Expression Of Interest (EOI):** No

**Other Approach (please provide details):** No

**Is this activity being co-designed?**

No

**Is this activity the result of a previous co-design process?**

Yes

**Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?**

No

**Has this activity previously been co-commissioned or joint-commissioned?**

No

**Decommissioning**

No

**Decommissioning details?**

**Co-design or co-commissioning comments**

In 2017, the PHN worked with the Institute for Urban Indigenous Health to identify needs and service gaps in Aboriginal and Torres Strait Islander mental health services.

Following this, the PHN entered into a direct tender negotiation with the Institute for Urban Indigenous Health for the delivery of integrated mental health, suicide prevention and alcohol and drug treatment services. A plan of activity and a contract has been agreed. The Institute for Urban Indigenous Health (UIIH) will subcontract some of the service delivery to Brisbane Aboriginal and Torres Strait Islander Community Health Service.

Brisbane North PHN will continue to engage the wider Aboriginal and Torres Strait Islander via UIIH as part of the implementation of the regional plan.

**Is this activity in scope for data collection under the Mental Health National Minimum Dataset?**

Yes



## Activity Planned Expenditure

### Planned Expenditure

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$849,567.00	\$879,302.00	\$0.00	\$0.00

**Totals**

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27	Total
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$849,567.00	\$879,302.00	\$0.00	\$0.00	\$1,728,869.00
Total	\$0.00	\$849,567.00	\$879,302.00	\$0.00	\$0.00	\$1,728,869.00

**Funding From Other Sources - Financial Details**

**Funding From Other Sources - Organisational Details**





## Activity Comments

### Activity Status

Submitted

### PHN Comments

Subject	Description	Commented By	Date Created
---------	-------------	--------------	--------------

### Comments from the Department

Comment	Date Created
---------	--------------



## MH - 7100 - MH 7.1 - Promote a stepped care approach to mental health service provision



### Activity Metadata

**Applicable Schedule \***

Primary Mental Health Care

**Activity Prefix \***

MH

**Activity Number \***

7100

**Activity Title \***

MH 7.1 - Promote a stepped care approach to mental health service provision

**Existing, Modified or New Activity \***

Existing



### Activity Priorities and Description

**Program Key Priority Area \***

Mental Health Priority Area 7: Stepped care approach

**Other Program Key Priority Area Description****Aim of Activity \***

The aim of this activity is to develop a continuum of primary mental health services within a person-centred stepped care approach so that a range of service types, making the best use of available workforce and technology, are available within local regions to better match with individual and local population need.

To meet this aim, Brisbane North PHN will continue to commission primary mental health care services across the continuum of needs, from low intensity psychological services, to psychological services for hard-to-reach groups, to services for people with severe mental illness, to follow-up services for people after a suicide attempt. Contracts with service providers will require them to work within a stepped care approach and to refer on consumers whose needs change.

**Description of Activity \***

Brisbane North PHN will continue to develop educational resources to promote an understanding and use of a stepped care approach to mental health services. Communications from Brisbane North PHN and funded providers will reference the stepped care approach. Stepped care will be an overall theme in the implementation of Planning for Wellbeing: A regional plan for North Brisbane and Moreton Bay focusing on mental health, suicide prevention and alcohol and other drug treatment services 2018-2025.

Working with other PHNs, Brisbane North PHN has developed an IT solution, rediCASE, which includes the collection of the Primary Mental Health Care Minimum Dataset (PMHC-MDS) from providers. This system is a comprehensive IT and case management solution that incorporates screening/triage, referral, assessment and billing.

Should a national approach emerge, this local approach will cease. MDS data is either entered directly into the web-based system provided, or returned to the PHN on a bi-monthly basis (as per providers contracts) and reviewed. In addition, this data is ingested into a visualisation software to allow for ease of reporting and analysis of service contact volume by principal focus of treatment, and therefore understand the implementation of the stepped care model in our region. We use this data for regular reporting to our Board and as a part of an Organisational Performance Report based on the Quadruple Aim of healthcare. It is by these means that we assess the effectiveness of our mental health commissioned services.

The Queensland Department of Health and the Metro North Hospital and Health Service are continuing to work locally on a number of projects to develop and implement systems to support sharing of consumer clinical information between health care service providers and consumers.

This includes GP access to the Health Provider Portal 'The Viewer' (read only access to hospital records) and a trial of shared-care clinical records. Brisbane North PHN is an active partner in these developments. This is continually flagged with health providers and uptake of the system by GPs and others is increasing on a monthly basis. Our GPLOs and Primary Care team in addition to the QH team are constantly advocating and communicating to enhance awareness and uptake.

We have actively explored the possibility of implementing Lumos for further coordination of client records, however this is in early stages and is planned to continue over the financial year. Our ADHA work is also progressing and advancing the uptake of 'My Health Record' with GPs, private care providers and specialists. In addition, in June we are anticipating the release of the Provider Connect portal. This will link all health providers to one information portal nationally. The introduction of the RLAT aspect of the Smart Referrals Program has also enhanced the receipt and tracking of a specialist to the public system and will keep GPs informed of the patient's referral progress.

The QH sponsored 'Connecting your Care' program is also working on the establishment of a GP advice program which will enhance bidirectional communication and access to vital clinical information.

The PHN will continue to work with providers to explore approaches to consumer feedback, including complaints). At present, feedback and complaints about services are made to the service provider in the first instance and can be escalated to the PHN as funded if necessary.

The YES Survey implementation build has been completed in our software system RediCASE. By this means, we are able to initiate the send of surveys to attendees of the mental health commissioned services at particular points in time to gauge their satisfaction with and experience of the service. A consultant is being engaged to facilitate the speedy implementation of the YES survey into the PHN systems, and to ensure that appropriate consent arrangements are in place before proceeding. It is intended that YES survey data be collected and collated via SMS and email reminders by the time 12 month report submission is made in September.

## Needs Assessment Priorities \*

### Needs Assessment

2023\_Refresh\_BrisbaneNorthPHN\_HNA

#### Priorities

Priority	Page reference
Mental health	69



## Activity Demographics

### Target Population Cohort

Brisbane North community members who require mental health, suicide prevention and alcohol and other drugs services.

## In Scope AOD Treatment Type \*

### Indigenous Specific \*

Yes

### Indigenous Specific Comments

First Nations communities are a high risk group for mental health, suicide and alcohol and other drugs issues, as such this groups needs and requirements will be considered carefully in the establishment of the Commissioning Collaborative and its implementation.

### Coverage

#### Whole Region

Yes



## Activity Consultation and Collaboration

### Consultation

Brisbane North PHN consulted with a wide range of stakeholders in the development of a range of activities and for the development of the Planning for Wellbeing: A regional plan for North Brisbane and Moreton Bay focusing on mental health, suicide prevention and alcohol and other drug treatment services 2018-2025. The outcomes of this activity contribute to the success of the regional plan.

The approach to and implementation of stepped care for mental health will continue to be a topic of consultation through the implementation of the regional plan.

### Collaboration

This project will be governed by the PHN and HHS Joint Board Committee.

his activity will be implemented by Brisbane North PHN, under the guidance of the following groups:

- Aboriginal and Torres Strait Islander Engagement Steering Group
- Collaboration in Mind
- Suicide Prevention Strategic Partnership Group
- Alcohol and Drug Partnership Group
- Infant, Child and Youth Partnership Group
- Psychological Therapies Advisory Group
- Strategic Coordination Group.

Membership of these groups are drawn from the Metro North Hospital and Health Service, Allied Health providers, Queensland Government agencies, peak bodies, consumers and families.



## Activity Milestone Details/Duration

**Activity Start Date**

26/06/2019

**Activity End Date**

28/06/2026

**Service Delivery Start Date**

27/06/2019

**Service Delivery End Date**

29/06/2026

**Other Relevant Milestones****Activity Commissioning**

Please identify your intended procurement approach for commissioning services under this activity:

**Not Yet Known:** No**Continuing Service Provider / Contract Extension:** No**Direct Engagement:** Yes**Open Tender:** No**Expression Of Interest (EOI):** No**Other Approach (please provide details):** No**Is this activity being co-designed?**

Yes

**Is this activity the result of a previous co-design process?**

No

**Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?**

No

**Has this activity previously been co-commissioned or joint-commissioned?**

No

**Decommissioning**

No

**Decommissioning details?****Co-design or co-commissioning comments**

Brisbane North PHN consulted with a wide range of stakeholders in the development of a range of activities and for the development of the Planning for Wellbeing: A regional plan for North Brisbane and Moreton Bay focusing on mental health, suicide prevention and alcohol and other drug treatment services 2018-2025. This outcomes of this activity contribute to the success of the regional plan.

The approach to and implementation of stepped care for mental will continue to be a topic of consultation through the

implementation of the regional plan.

The Commissioning Collaborative will be co-designed by the Health Alliance, Brisbane North PHN, Metro North HHS and health partners (State and Federal Governments). Significant input from consumers and the community will be sought, and feedback previously obtained from the community will also be utilised.

**Is this activity in scope for data collection under the Mental Health National Minimum Dataset?**

No



## Activity Planned Expenditure

### Planned Expenditure

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

### Totals

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27	Total
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

**Funding From Other Sources - Financial Details**

**Funding From Other Sources - Organisational Details**



**Activity Comments**

**Activity Status**

Submitted

**PHN Comments**

Subject	Description	Commented By	Date Created
---------	-------------	--------------	--------------

**Comments from the Department**

Comment	Date Created
---------	--------------



## MH - 8100 - MH 8.1 - Implement and review a mental health and suicide prevention regional plan



### Activity Metadata

**Applicable Schedule \***

Primary Mental Health Care

**Activity Prefix \***

MH

**Activity Number \***

8100

**Activity Title \***

MH 8.1 - Implement and review a mental health and suicide prevention regional plan

**Existing, Modified or New Activity \***

Existing



### Activity Priorities and Description

**Program Key Priority Area \***

Mental Health Priority Area 8: Regional mental health and suicide prevention plan

**Other Program Key Priority Area Description****Aim of Activity \***

The aim of this activity is to implement an evidence based joint regional mental health and suicide prevention plan, which has been developed and agreed with the Hospital and Health Service, and other stakeholders.

The regional plan will provide a vital resource to State Government, non-government and Commonwealth services in the region to support integrated delivery of mental health and suicide prevention services within the community.

The plan identifies needs and gaps, reduces duplication, removes inefficiencies and encourage innovation. It is evidence based and informed by comprehensive needs assessments and service mapping.

**Description of Activity \***

Brisbane North PHN will oversee the implementation of the joint regional plan, in partnership with the Metro North Hospital and Health Service. Content areas of the plan include 14 chapters, divided into four main parts. The content areas are:

- Our Vision
- Better Health in Brisbane North
  - a. People with a lived experience leading change
  - b. Supporting families and carers



- c. Sustaining good mental health
- d. Commissioning services
- e. Delivering integrated services
- f. Responding to diversity

- Focus areas

- a. Aboriginal and Torres Strait Islander social and emotional wellbeing
- b. Alcohol and other drug treatment services
- c. Infants, children, young people and families
- d. Psychological therapies
- e. Severe and complex mental illness
- f. Suicide prevention

- Measuring, monitoring, reporting

- a. Our governance approach
- b. Measuring outcomes, implementing, and reviewing the Plan.

As per the National Agreement on Mental Health, the PHN in partnership with the local HHS, will facilitate a process of developing a new joint regional plan, based on the guidance to be published by government. This will include reviewing what worked and didn't work in the existing plan, undertaking a gap analysis (using the NMHSPF), consulting with stakeholders including people with a lived experience and ensuring appropriate governance mechanisms.

## Needs Assessment Priorities \*

### Needs Assessment

2023\_Refresh\_BrisbaneNorthPHN\_HNA

#### Priorities

Priority	Page reference
Mental health	69



## Activity Demographics

### Target Population Cohort

This activity is targeted to residents and services providers in the Brisbane North PHN region.

### In Scope AOD Treatment Type \*

### Indigenous Specific \*

Yes

### Indigenous Specific Comments

The overarching governance mechanism, which is the Strategic Coordination Group, includes senior representatives from the Institute for Urban Indigenous Health. This group provides oversight and guidance across the whole plan, including implementation, monitoring, review and evaluation.

### Coverage

#### Whole Region

Yes



## Activity Consultation and Collaboration

### Consultation

Brisbane North PHN consulted with a wide range of stakeholders in the development of Planning for Wellbeing: A regional plan for North Brisbane and Moreton Bay focusing on mental health, suicide prevention and alcohol and other drug treatment services 2018-2025. These stakeholders included:

- People with a lived experience
- Consumers
- Carers
- Psychology providers
- GPs and practice staff
- Mental health providers
- Metro North Hospital and Health Service
- Academics and policy experts
- Professional bodies.

Following an extended period of development, the regional plan moved into the implementation phase in 2018-19. This phase will continue in the 2023/2024 financial year.

### Collaboration

The development of the mental health, suicide prevention and alcohol and drug regional plan is a joint initiative between Brisbane North PHN and the Metro North Hospital and Health Service.

In 2017, the PHN established ongoing Partnership Groups in the following areas:

- child & youth mental health
- people with severe mental illness (Collaboration in Mind)
- suicide prevention
- alcohol and other drugs.

In 2020/21 the PHN established two additional partnership groups to oversee implementation of activities in this plan:

- Psychological therapies partnership group
- People with Lived Experience Advocating for Strategic Engagement

Membership and structure of the partnership groups has been reviewed and reconfirmed. These Partnership Groups will continue to guide the development, content and implementation of the regional plan in their areas of interest. The PHN has also established a high-level Strategic Coordination Group to oversee and address system wide issues that were identified throughout the consultation process of the regional plan. The PHN anticipates that specific partnership groups will report to the high-level Strategic Coordination Group.



## Activity Milestone Details/Duration

### Activity Start Date

26/06/2019

### Activity End Date

28/06/2026

**Service Delivery Start Date**

27/06/2019

**Service Delivery End Date**

29/06/2026

**Other Relevant Milestones**

---



## Activity Commissioning

**Please identify your intended procurement approach for commissioning services under this activity:**

**Not Yet Known:** No

**Continuing Service Provider / Contract Extension:** No

**Direct Engagement:** No

**Open Tender:** No

**Expression Of Interest (EOI):** No

**Other Approach (please provide details):** Yes

**Is this activity being co-designed?**

No

**Is this activity the result of a previous co-design process?**

Yes

**Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?**

No

**Has this activity previously been co-commissioned or joint-commissioned?**

No

**Decommissioning**

No

**Decommissioning details?**

**Co-design or co-commissioning comments**

Brisbane North PHN consulted with a wide range of stakeholders in the development of a range of activities and for the development and implementation of Planning for Wellbeing: A regional plan for North Brisbane and Moreton Bay focusing on mental health, suicide prevention and alcohol and other drug treatment services 2020-2025. These stakeholders included:

- People with a lived experience
- Consumers
- Carers
- Psychology providers
- GPs and practice staff
- Mental health providers

- Metro North Hospital and Health Service
- Academics and policy experts
- Professional bodies.

**Is this activity in scope for data collection under the Mental Health National Minimum Dataset?**

No



## Activity Planned Expenditure

### Planned Expenditure

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

### Totals

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27	Total
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Flexible						
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

**Funding From Other Sources - Financial Details**

**Funding From Other Sources - Organisational Details**



**Activity Comments**

**Activity Status**

Submitted

**PHN Comments**

Subject	Description	Commented By	Date Created
---------	-------------	--------------	--------------

**Comments from the Department**

Comment	Date Created
---------	--------------



## MH - 10001 - MH 10.1 - Norfolk Island Mental Health Services



### Activity Metadata

**Applicable Schedule \***

Primary Mental Health Care

**Activity Prefix \***

MH

**Activity Number \***

10001

**Activity Title \***

MH 10.1 - Norfolk Island Mental Health Services

**Existing, Modified or New Activity \***

Existing



### Activity Priorities and Description

**Program Key Priority Area \***

Mental Health Priority Area 3: Psychological therapies for rural and remote, under-serviced and / or hard to reach groups

**Other Program Key Priority Area Description****Aim of Activity \***

Brisbane North PHN started working with the Norfolk Island community in July 2022 and commenced a health needs assessment (HNA) consultation process. A range of risk behaviours, health conditions, service needs and priority populations emerged within a complex social, historical and political context that is unique to Norfolk Island.

**Historical context:**

Norfolk Island is a remote external territory of Australia located in the Pacific Ocean and situated between New Zealand and New Caledonia. It has a total land area of 35 km<sup>2</sup>. There is an estimated residential population of 2000 people as of 2022. The population is ageing (with a median age of 52.2 years) and is also diverse. Norfolk Island was previously occupied by the seafaring Polynesians, then as a British convict settlement from 1788 until 1814, and a subsequent phase of convict settlement between 1825 and 1855. In 1856 the Island was settled by the Pitcairn Island descendants of the Bounty mutineers and Tahitians. Norfolk Island is now home to a diverse group of people including people with family ties to the United Kingdom and Tahiti (both through Pitcairn descent and directly), elsewhere in Australia, the United States of America, Canada, New Zealand, Fiji, the Philippines, and other Pacific islands. Of the total residents in 2022, 81.5% were Australian citizens, however 48.7% of people spoke a language other than English at home. Norfolk, a creole language that originates from a blend of English and Tahitian is the co-official language of Norfolk Islanders.

#### Political context:

Until 2015, the island had largely operated as an independent community. However, the Norfolk Island Legislation Amendment Act 2015 resulted in governance reform that saw the integration of some\* commonwealth laws, including Medicare and Pharmaceutical Benefits scheme access for residents. Soon after the Norfolk Island Health Service Plan, prepared by KPMG on behalf of the Department of Infrastructure and Regional Development was developed. The consultation for the health plan identified five key themes: (1) The Norfolk Island context; (2) Health promotion and wellness; (3) Healthy and active ageing; (4) Healthy children and families; and (5) Specialist services. Of particular interest within the healthy children and families theme was an increased focus on children, young people and their families' well-being in Norfolk Island's unique context.

[\*Whilst Norfolk Island is governed by some commonwealth laws around health and education, not all apply. For example, there are no drink driving, seat belt wearing, domestic violence laws and people can start driving at 15 years old. There is no tax on tobacco products which means people can purchase a packet of cigarettes for \$11].

Norfolk Island was then transitioned to the jurisdiction of Brisbane North PHN in June 2022, following an Intergovernmental Agreement (IGA) in October 2021. This agreement supports the provision of Queensland services to Norfolk Island when previous arrangements with the New South Wales Government ceased on 31 December 2021. Given this, Metro North Health has taken the responsibility of providing support and services to the island's main healthcare service, the Norfolk Island Health and Residential Aged Care Service (NIHRACS).

#### Social context:

The unique historical and political context of Norfolk Island impacts on the social context that residents are living in and is relevant (and connected) to the risk behaviours, health and service needs and priority population groups that emerged during the 2022-23 Norfolk Island HNA. A range of community stakeholders reported low levels of health literacy around a broad range of risk behaviours and problematic health conditions. Risk behaviours include: tobacco, sexual health, sedentary lifestyles, alcohol and other drugs, obesity, road safety, social disconnection, food security and nutrition. Problematic health conditions for Norfolk Island residents include behavioural and developmental disorders, mental health and wellbeing, cardiovascular disease, diabetes, sleep disorders, cancer, dementia, kidney disease, musculoskeletal disease and chronic pain.

Low levels of health literacy were raised in the context of Norfolk Island's unique social setting (i.e. remoteness, historical and political backdrop). Norfolk Island residents gained access to MBS and Australian Government support for health and education in 2016 which means community access to public health and health promotion strategies is predicted to be approximately 20 years behind Australia. The need for a long-term and sustainable approach to whole of community health promotion strategies is critical to address levels of health literacy and improved overall health and wellbeing.

In addition to health literacy, a significant need emerged to support children, young people and their families mental health in a way that responds to the unique complexities of living in a remote and small community. The community expressed a strong need for a mental health service that can be delivered from neutral community settings with confidential access points.

In consultation around problematic health conditions, community stakeholders raised several service and system needs that are both connected and linked to people's experience of health and wellbeing. For example, because of the Island's remoteness, residents experience access issues to specialist care, primary care, psychosocial support, palliative care, respite services and programs like the National Disability Insurance Scheme (NDIS). Linked to this experience is the need for improved service navigation, coordination and integration, a more consistent and reliable health workforce and the need for better quality data to articulate people's health and wellbeing experiences.

These 2022-23 Norfolk Island HNA findings reinforce, align and build on the five themes that emerged from the community consultation conducted in 2019 by the Department of Infrastructure, Transport, Cities and Regional Development to develop the Norfolk Island Health Service Plan.

The Norfolk Island Mental Health and Wellbeing Program has two aims including:

- Provide children, young people and families access to mental health clinician services, including psychological therapies, and activities supporting mental health and suicide prevention, awareness, help seeking and resilience building.
- Improve access to health and wellbeing activities that increases health literacy, awareness and access to activities and services that meets the needs of the community. Activities and services includes those prioritised in the health needs assessment (but not

limited to) mental health, chronic disease management, drug and alcohol misuse, aged care, immunisation and My Health Record. The health and wellbeing activity includes implementing a whole of community approach to health and wellbeing through a health promotion plan.

### Description of Activity \*

Mental health clinician:

- Co-locate with appropriate community services to provide short-term psychological services to eligible children, young people (aged 0-25 years) and their families living on Norfolk Island (i.e. Norfolk Island Central School, Banyan Park Early Learning Centre, appropriate community organisations, Norfolk Island Health and Residential Aged Care Services).
- Receive self-referrals as well as referrals from General Practitioners, Paediatricians, and other approved provisional referrers.
- Confirm referred clients meet prescribed eligibility criteria for the Norfolk Island program and are appropriate for short-term psychological therapies.
- Refer on referrals not deemed appropriate to a more appropriate service.
- Manage the intake of referrals and client sessions to ensure continuous service delivery through contracted period and within the allocated budget.
- Embed psychological therapies within a wider range of wrap-around services and supports for the individual and their family as needed.
- Provide psychoeducation group sessions to support children, young people and their families' mental health literacy in community services and organisations (i.e. Norfolk Island Central School, Banyan Park Early Learning Centre, NI Connect Holiday Programs, Life Without Barriers sessions etc).
- Work within a stepped care framework, making onward referrals as appropriate and according to client needs.
- Ensure people's improved wellness and reablement is measured via the K10 and other appropriate outcome measure tools as deemed appropriate.
- Comply with any guidelines or procedures released by the Company in relation to the Norfolk Island program.

### Needs Assessment Priorities \*

#### Needs Assessment

2023\_Refresh\_BrisbaneNorthPHN\_HNA

#### Priorities

Priority	Page reference
Mental health	69



## Activity Demographics

### Target Population Cohort

Mental Health: The intended target population is children, young people and their families of Norfolk Island.

Health and Wellbeing: The intent target population for the health and wellbeing work is the whole of Norfolk Island community that designs activities around four key population groups: children, young people and their families; adults (women and men); older people and whole of community.

(Note: Norfolk Island is unavailable in as an SA3 to select in PPERS).

### In Scope AOD Treatment Type \*

### Indigenous Specific \*

No



## Indigenous Specific Comments

### Coverage

#### Whole Region

No



## Activity Consultation and Collaboration

### Consultation

Activities for both the Mental Health Clinician and Health and Wellbeing team were developed based on the consultation findings from the 2022-23 Norfolk Island Health Needs Assessment conducted by Brisbane North PHN. All health and wellbeing activities are required to be co-designed with the Norfolk Island community.

### Collaboration

Work collaboratively with the Norfolk Island community to develop, implement and evaluate a health promotion plan that is based on best practice health promotion values and principles and The Ottawa Charter for Health Promotion as defined by the World Health Organisation. This includes working with the community and relevant organisations and service providers to:

- o Identify and map the current health and wellbeing activities and programs accessible to people living on Norfolk Island.
- o Identify gaps and prioritise health and wellbeing activities according to community needs (as identified in the Health Needs Assessment\* (HNA) and ongoing community consultation processes). \*The HNA builds on a range of existing community consultation processes that have taken place on Norfolk Island since 2015 (i.e. Central Eastern Sydney PHN HNA (2016), KPMG Norfolk Island Health Needs Assessment Consultation Report (2019), R & S Muller Enterprise - Norfolk Island Hospital Enterprise Health Services Survey Report (2015), NIHRACS Health Service Planning Consultation Processes (current)
- o Ensure the health promotion plan has a strategy mix that aligns with all five Ottawa Charter action areas and other relevant best practice health promotion theory and evidence base.
  1. Develop personal skills
  2. Strengthen community action
  3. Create supportive environments
  4. Reorient (health) services to be health promoting
  5. Build healthy public policy
  - Partner with relevant community members, organisations and service providers to implement, monitor and evaluate health and wellbeing activities.
  - Use Process, Impact and Outcome evaluation processes to monitor, track and amend health promotion activities and strategies as required throughout the life of the health promotion plan.



## Activity Milestone Details/Duration

### Activity Start Date

29/06/2022

### Activity End Date

28/06/2026

**Service Delivery Start Date**

01/07/2022

**Service Delivery End Date**

30/06/2026

**Other Relevant Milestones**



**Activity Commissioning**

**Please identify your intended procurement approach for commissioning services under this activity:**

**Not Yet Known:** No

**Continuing Service Provider / Contract Extension:** Yes

**Direct Engagement:** No

**Open Tender:** No

**Expression Of Interest (EOI):** No

**Other Approach (please provide details):** No

**Is this activity being co-designed?**

Yes

**Is this activity the result of a previous co-design process?**

No

**Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?**

No

**Has this activity previously been co-commissioned or joint-commissioned?**

No

**Decommissioning**

No

**Decommissioning details?**

**Co-design or co-commissioning comments**

Activities for both the Mental Health Clinician and Health and Wellbeing team were developed based on the consultation findings from the 2022-23 Norfolk Island Health Needs Assessment conducted by Brisbane North PHN. All health and wellbeing activities are required to be co-designed with the Norfolk Island community.

**Is this activity in scope for data collection under the Mental Health National Minimum Dataset?**

No



## Activity Planned Expenditure

### Planned Expenditure

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$278,200.00	\$339,122.00	\$314,640.00	\$0.00

### Totals

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27	Total
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$278,200.00	\$339,122.00	\$314,640.00	\$0.00	\$931,962.00
Total	\$0.00	\$278,200.00	\$339,122.00	\$314,640.00	\$0.00	\$931,962.00

### Funding From Other Sources - Financial Details

### Funding From Other Sources - Organisational Details



## Activity Comments

### Activity Status

Submitted

### PHN Comments

Subject	Description	Commented By	Date Created
---------	-------------	--------------	--------------

### Comments from the Department

Comment	Date Created
---------	--------------



## MH - 11100 - MH 11.1 - Targeted Regional Initiatives for Suicide Prevention



### Activity Metadata

**Applicable Schedule \***

Primary Mental Health Care

**Activity Prefix \***

MH

**Activity Number \***

11100

**Activity Title \***

MH 11.1 - Targeted Regional Initiatives for Suicide Prevention

**Existing, Modified or New Activity \***

Existing



### Activity Priorities and Description

**Program Key Priority Area \***

Mental Health Priority Area 5: Community based suicide prevention activities

**Other Program Key Priority Area Description****Aim of Activity \***

Suicide is a complex and important health concern in Australia. It is recognised that not everyone who experiences suicidality or dies by suicide has lived experience of mental ill health, rather the causes that lead to suicidal distress are multifactorial and strongly linked to broader social determinants of health and wellbeing. Due to this complexity, a one-size-fits-all approach to suicide prevention is not suitable on a national scale. The causes of suicide, as well as resources and services required to prevent it, are unique for each region and community.

The need for a dedicated suicide prevention coordinator position was identified in the National Suicide Prevention Adviser's Final Advice, the evaluation of the National Suicide Prevention Trial and evaluations of the Victorian Place-Based Suicide Prevention Trial and the LifeSpan Trial. This resourced position has proved critical to driving suicide prevention action at the local level.

The Suicide Prevention Regional Response Coordinator will take primary responsibility for engagement, coordination and integration of early intervention and suicide prevention activities across regional stakeholders and service providers. This will include establishing governance groups, developing local action plans and establishing response protocols.

The Suicide Prevention Regional Response Coordinator will also have a role in contributing to the implementation of the suicide prevention measures under the National Mental Health and Suicide Prevention Agreement. This includes supporting the co-design

and implementation of universal aftercare and the transition from the Way Back Support Program where applicable.

This also includes follow up and After Care services for the LGBTI Community and Aboriginal and Torres Strait Islander Community

Social and Emotional Wellbeing and emergency and follow up care for people experiencing suicidality, loss of a loved one due to suicide and for those who have attempted suicide

The Suicide Prevention Regional Response Coordinator will also be a key contact for the National Aboriginal Community Controlled Health Organisation Culture Care Connect Program, which is a first of its kind Aboriginal and Torres Strait Islander community-controlled approach to suicide prevention service coordination, aftercare services and training in alignment with the National Agreement on Closing the Gap.

The key aim and outcomes are effective systems-based approaches to suicide prevention that improve outcomes in the Brisbane North area, including by addressing service fragmentation.

#### **Description of Activity \***

2023/24 will see the development of a new suicide prevention plan for the region.

This plan will be used to inform commissioning of funds “freed up” by the movement of The Way Back Support Service (Inner Brisbane) to the bilateral schedule.

This AWP will be updated to reflect the specific use of these funds, prior to the end of the financial year 2023/24.

Brisbane North PHN commissions providers to deliver short term clinical and non-clinical services to individuals and/or group work as part of the aftercare for people experiencing suicidality.

The service model differs between the commissioned organisations but with links to each of the organisations providing therapies and aftercare. This is to assist with specialist referrals and referral pathways. Case management and care coordination meetings will occur across the organisations where cross referrals and shared clients exist.

The PHN will also commission services to work with schools to deliver specific Aboriginal and Torres Strait Islander Yarning circles that engage students and have leadership from Elders, Cultural leaders, Cultural facilitators. These will have modules designed to cover specific issues that allow students to embrace and engage with Culture. Each program will run over four weeks and will bring other service providers in as guest presenters to orientate students to care pathways and support pathways.

Referrals to aftercare services will originate from general practitioners, self referrals, the Brisbane North PHN Service Navigation team and community organisations and groups.

Service user and community engagement:

- Services will be provided through face-to-face contact, phone support or video conferencing. Group work will also be provided as part of the care coordination and care pathways.

Assessment, Intake and referral

- referrals via rediCASE. Capture and report PMHC MDS
- Eligible clients undertake initial assessments and providers work with clients to determine their care pathways and care coordination

Delivery of psychology services

Evaluation and reporting:

- Quarterly reporting to the PHN
- Collection of participant feedback and complaints

Culturally appropriate service entry into Psychological supports and interventions

Group supports

Connections to Culture and Community

Access to Elders and Cultural Connectors

The outputs will be delivered through the following activities: regular participation in the Suicide Prevention Community of Practice, appropriate planning for Suicide Prevention Partnership Group meetings, the analysis of available data on the suicide

prevention-related needs of the Brisbane North area, a scoping and mapping exercise of existing national and relevant regional suicide prevention plans, and facilitation of the next Suicide Prevention Regional plan (in partnership with the Suicide Prevention Partnership Group and other key stakeholders).

All service providers collect the PMHC-MDS via the RediCASE system.

## Needs Assessment Priorities \*

### Needs Assessment

2023\_Refresh\_BrisbaneNorthPHN\_HNA

#### Priorities

Priority	Page reference
Mental health	69



## Activity Demographics

### Target Population Cohort

This program aims to target the following population cohort:

Aboriginal and Torres Strait Islander

LGBTIQA+

General Population

### In Scope AOD Treatment Type \*

### Indigenous Specific \*

Yes

### Indigenous Specific Comments

All processes must be culturally safe and culturally appropriate. Input from Aboriginal and Torres Strait People with a lived experience. Elders to be involved at every level.

- Sound Cultural Governance

- Cultural Guidance from Aboriginal and Torres Strait Islander Elders

### Coverage

#### Whole Region

Yes



## Activity Consultation and Collaboration

### Consultation

- Crisis Reform Strategy developed in partnership with Metro North Mental Health and the Suicide Prevention Partnership Group

- Bimonthly Suicide Prevention Partnership Group meetings being held
- Regular participation in the Suicide Prevention Community of Practice
- Community consultations to assess the needs of the region and to gain input from community and those with a lived experience within the Aboriginal and Torres Strait Islander Community, the LGBTIQ+, Sistergirl, & Brotherboy communities and stake holders.

#### Collaboration

- The activities will be managed by contract management and also be overseen by Community Implementation Groups.
- Partnership frameworks and MOU's to guide sound Collaboration.
- Aboriginal and Torres Strait Islander Implementation Group oversees the implementation of the programs and guides the service pathways
- Partnerships have been formed and where needed MOU's further sustain the partnerships.



### Activity Milestone Details/Duration

#### Activity Start Date

29/06/2023

#### Activity End Date

28/06/2026

#### Service Delivery Start Date

01/07/2023

#### Service Delivery End Date

30/06/2026

#### Other Relevant Milestones



### Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

**Not Yet Known:** No

**Continuing Service Provider / Contract Extension:** Yes

**Direct Engagement:** No

**Open Tender:** No

**Expression Of Interest (EOI):** No

**Other Approach (please provide details):** No

Is this activity being co-designed?

Yes

Is this activity the result of a previous co-design process?

No

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?



No

**Has this activity previously been co-commissioned or joint-commissioned?**

No

**Decommissioning**

No

**Decommissioning details?**

**Co-design or co-commissioning comments**

Co-design commenced beginning with Community consultations to assess the needs of the region and to gain input from community and those with a lived experience within the Aboriginal and Torres Strait Islander Community, the LGBTIQ+Sistergirl&Brotherboy communities and stake holders.

The Co-design process identified that there were community groups well placed to deliver suicide prevention strategies and implement these directly into the communities. The Co-design process identified many of the needs specific to Aboriginal and Torres Strait Islander Communities and the LGBTIQ+ communities in the Brisbane Regions.

The Aboriginal and Torres Strait Islander and the LGBTI Implementation Groups were formed to guide and inform the needs of the community and the response to suicide prevention.

The Implementation Groups continue to drive the ongoing nature of the Co-design process and acknowledges this movement/evolutionary journey given that this is a Trial designed to seek new ways and approaches specific to the local needs.

The Implementation Groups continue to drive the ongoing nature of the Co-design process and acknowledges this movement/evolutionary journey given that this is a Trial designed to seek new ways and approaches specific to the local needs.

**Is this activity in scope for data collection under the Mental Health National Minimum Dataset?**

Yes



## Activity Planned Expenditure

### Planned Expenditure

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

**Totals**

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27	Total
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

**Funding From Other Sources - Financial Details**

**Funding From Other Sources - Organisational Details**



**Activity Comments**

**Activity Status**

Submitted

**PHN Comments**

Subject	Description	Commented By	Date Created
---------	-------------	--------------	--------------

**Comments from the Department**

Comment	Date Created
---------	--------------



## MH - 17100 - MH 17.1 - IAR TSO



### Activity Metadata

**Applicable Schedule \***

Primary Mental Health Care

**Activity Prefix \***

MH

**Activity Number \***

17100

**Activity Title \***

MH 17.1 - IAR TSO

**Existing, Modified or New Activity \***

New Activity



### Activity Priorities and Description

**Program Key Priority Area \***

Mental Health

**Other Program Key Priority Area Description****Aim of Activity \***

Up to 2023, this national support function was provided by DoHAC who contracted Morgan Campbell Health Consultants. Following the cessation of Morgan Campbell Health Consultants' role, DoHAC has now funded the PHN Cooperative to re-establish these functions under a PHN-led approach.

The aim of this activity is to provide PHN-led national support, mentoring, and capacity building for all PHN IAR Training and Support Officers and GP Champions who are delivering IAR training and support.

The PHN Cooperative proposal to DoHAC envisaged the following roles, as a minimum, noting that the budget can likely accommodate additional FTE:

- Clinical Director: an appropriately qualified clinician to lead the national clinical liaison and support function of the project. The role would be recruited from the currently employed IAR workforce of GPs, clinicians and trainers, and may provide PHN liaison for collaboration with DoHAC on the of alignment of the IAR within GP mental health training and practice via the RACGP and GPMHSC.
- Project Manager/Lead to provide day to day management of the project activities
- Administration support role as appropriate

**Description of Activity \***

The IAR TSO National Support project will support the quality and outcomes of the IAR-TSO Program through the following activities:

- a national IAR community of practice
- a central practice leadership, clinical liaison, and mentoring function for TSOs
- coordinate a national IAR Training program for PHNs who have training gaps.
- Identify PHNs with gaps in their IAR workforce who are unable to deliver local IAR training.
- Engage other PHN IAR trainers to deliver training into regions of need.

The National Support Project will include the following:

- Deliver a Community of Practice for national networking, knowledge sharing, quality activities and Branch-PHN-provider engagement.
- Employ a Clinical Director to provide practice leadership for TSOs, and lead Community of Practice knowledge sharing and quality activities.
- Administer the National IAR Training funding pool (\$250,000) to ensure PHNs are remunerated for provision of additional IAR training.

## Needs Assessment Priorities \*

### Needs Assessment

2023\_Refresh\_BrisbaneNorthPHN\_HNA

#### Priorities

Priority	Page reference
Mental health	69



## Activity Demographics

### Target Population Cohort

The national IAR TSO program workforce including Training and Support Officers and IAR GP Champions employed by PHNs.

### In Scope AOD Treatment Type \*

#### Indigenous Specific \*

No

#### Indigenous Specific Comments

### Coverage

#### Whole Region

Yes



## Activity Consultation and Collaboration

### Consultation

Consultation will occur through monthly national IAR community of practice meetings.

### Collaboration

Following an EOI, a lead PHN will be commissioned by BNPHN to implement the activities. The lead PHN will employ the project team and Clinical Director.

Led by the employed Clinical Director, the activity will establish a central practice leadership group, comprised of a pool of appropriately qualified clinicians and IAR trainers to offer clinical liaison, mentoring and training support activities to the national IAR workforce.

The IAR TSO National Support Project is required to coordinate with Murray PHN to ensure alignment between national activities and the Victorian project work.

National governance will be provided by the PHN Cooperative, MHAOD Coordination Committee in its role overseeing national mental health capacity building projects, as illustrated below.



## Activity Milestone Details/Duration

### Activity Start Date

31/05/2024

### Activity End Date

31/05/2027

### Service Delivery Start Date

### Service Delivery End Date

### Other Relevant Milestones



## Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

**Not Yet Known:** No

**Continuing Service Provider / Contract Extension:** No

**Direct Engagement:** No

**Open Tender:** No

**Expression Of Interest (EOI):** Yes

**Other Approach (please provide details):** No

**Is this activity being co-designed?**

Yes

**Is this activity the result of a previous co-design process?**

No

**Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?**

No

**Has this activity previously been co-commissioned or joint-commissioned?**

No

**Decommissioning**

No

**Decommissioning details?**

**Co-design or co-commissioning comments**

Two establishment co-design workshops with PHNs have been completed to define activity implementation and develop a position description for the role of Clinical Director.

**Is this activity in scope for data collection under the Mental Health National Minimum Dataset?**

No



## Activity Planned Expenditure

### Planned Expenditure

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Initial Assessment and Referral	\$0.00	\$0.00	\$789,747.00	\$0.00	\$0.00
---------------------------------	--------	--------	--------------	--------	--------

**Totals**

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27	Total
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
PHN Lead Site Funding	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Norfolk Island	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$789,747.00	\$0.00	\$0.00	\$789,747.00
Total	\$0.00	\$0.00	\$789,747.00	\$0.00	\$0.00	\$789,747.00

**Funding From Other Sources - Financial Details**



**Funding From Other Sources - Organisational Details**



**Activity Comments**

**Activity Status**

Submitted

**PHN Comments**

Subject	Description	Commented By	Date Created
---------	-------------	--------------	--------------

**Comments from the Department**



Comment	Date Created
---------	--------------



# MH-Op - 1000 - Mental Health Operational



## Activity Metadata

**Applicable Schedule \***

Primary Mental Health Care

**Activity Prefix \***

MH-Op

**Activity Number \***

1000

**Activity Title \***

Mental Health Operational

**Existing, Modified or New Activity \***

Existing



## Activity Priorities and Description

**Program Key Priority Area \***

**Other Program Key Priority Area Description**

**Aim of Activity \***

**Description of Activity \***

**Needs Assessment Priorities \***

**Needs Assessment**

**Priorities**



## Activity Demographics

Target Population Cohort

In Scope AOD Treatment Type \*

Indigenous Specific \*

Indigenous Specific Comments

Coverage

Whole Region



## Activity Consultation and Collaboration

Consultation

Collaboration



## Activity Milestone Details/Duration

Activity Start Date

Activity End Date

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones



## Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: No  
Continuing Service Provider / Contract Extension: No  
Direct Engagement: No  
Open Tender: No  
Expression Of Interest (EOI): No  
Other Approach (please provide details): No

Is this activity being co-designed?

Is this activity the result of a previous co-design process?

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

Has this activity previously been co-commissioned or joint-commissioned?

Decommissioning

Decommissioning details?

Co-design or co-commissioning comments



## Activity Planned Expenditure

### Planned Expenditure

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Mental Health Operational	\$0.00	\$2,280,604.38	\$1,727,734.00	\$1,620,239.00	\$0.00
---------------------------	--------	----------------	----------------	----------------	--------

**Totals**

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27	Total
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Operational	\$0.00	\$2,280,604.38	\$1,727,734.00	\$1,620,239.00	\$0.00	\$5,628,577.38
Total	\$0.00	\$2,280,604.38	\$1,727,734.00	\$1,620,239.00	\$0.00	\$5,628,577.38

**Funding From Other Sources - Financial Details**



**Funding From Other Sources - Organisational Details**



**Activity Comments**

**Activity Status**

Submitted

**PHN Comments**

Subject	Description	Commented By	Date Created
---------	-------------	--------------	--------------

**Comments from the Department**

Comment	Date Created
---------	--------------



## CHHP - 5100 - CHHP 5.1 Headspace Wait Time Reduction Program



### Activity Metadata

**Applicable Schedule \***

Primary Mental Health Care

**Activity Prefix \***

CHHP

**Activity Number \***

5100

**Activity Title \***

CHHP 5.1 Headspace Wait Time Reduction Program

**Existing, Modified or New Activity \***

Existing



### Activity Priorities and Description

**Program Key Priority Area \***

Mental Health Priority Area 2: Child and youth mental health services

**Other Program Key Priority Area Description****Aim of Activity \***

Research indicates that 50 per cent of young people with a diagnosed mental health disorder had developed their disorder before the age of 14 and 75 per cent before the age of 25. There is a clear need and opportunity to intervene early, reduce psychological distress and prevent the development of more advanced stage of mental illness. headspace encourages help seeking and delivers age-appropriate and holistic models of care to young people.

headspace centres throughout Australia have large waiting lists, with Covid exacerbating demand for services. As such, the Department of Health allocated additional funding for headspace centres to apply for, called Wait Time Reduction (WTR).

headspace sites exist at Caboolture, Nundah, Redcliffe, Strathpine and Indooroopilly. All headspace centres in the Brisbane North PHN region are experiencing unprecedented wait times due to increase in demand and difficulties recruiting and retaining Allied Health Professionals. In order to address these issues, this proposal is to increase staff capacity to provide brief intervention support across all centres. In Brisbane North - Nundah, Strathpine, Indooroopilly and Redcliffe have all been successful in receiving WTR funding to address their wait lists. Caboolture did not receive any WTR funding.

**Description of Activity \***

A multidisciplinary workforce at headspace provides support and interventions across 4 streams: mental health, alcohol and other

drug, vocational education and physical health. headspace centres also deliver community awareness and engagement activities.

Demand Management funds to reduce wait times for services have been allocated to Nundah, Strathpine, Indooroopilly and Redcliffe. Redcliffe also received capital works funding to upgrade their site to accommodate service delivery options and workforce increases to meet demand as well as improving the layout, look and feel of the older centre. Caboolture did not receive any WTR funding.

Brisbane North PHN will fund headspace Nundah, Strathpine, Redcliffe and Indooroopilly to deliver the following activities.

- Employment of a Brief Intervention worker to increase access to short-term brief intervention for young people who have low mental health support requirements.
- Employment of an intake worker to increase capacity for phone screening and face to face intake appointments.
- The provision of clinical Supervision for students within the centre, allowing students to actively participate as part of the Intake and Assessment team, further increasing the centres capacity for phone screen appointments, face to face Intake Assessments, brief interventions and group programs.

## Needs Assessment Priorities \*

### Needs Assessment

2023\_Refresh\_BrisbaneNorthPHN\_HNA

#### Priorities

Priority	Page reference
Mental health	69



## Activity Demographics

### Target Population Cohort

This activity is targeted to young people aged 12 to 25 years with mild to moderate mental health issues.

### In Scope AOD Treatment Type \*

### Indigenous Specific \*

No

### Indigenous Specific Comments

### Coverage

#### Whole Region

No

SA3 Name	SA3 Code
Sherwood - Indooroopilly	30403
Redcliffe	31305
Strathpine	31403
Nundah	30203



## Activity Consultation and Collaboration

### Consultation

The Headspace service model is a national model. As such, consultation on the development of the model has not occurred.

### Collaboration

Brisbane North PHN will collaborate with headspace National and the headspace Lead agency to implement the wait time reduction activity.

---



## Activity Milestone Details/Duration

### Activity Start Date

28/06/2019

### Activity End Date

28/06/2026

### Service Delivery Start Date

30/06/2019

### Service Delivery End Date

30/06/2026

### Other Relevant Milestones

---



## Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: No

Continuing Service Provider / Contract Extension: Yes

Direct Engagement: No

Open Tender: No

Expression Of Interest (EOI): No

Other Approach (please provide details): No

Is this activity being co-designed?

No

Is this activity the result of a previous co-design process?



No

**Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?**

No

**Has this activity previously been co-commissioned or joint-commissioned?**

No

**Decommissioning**

No

**Decommissioning details?**

**Co-design or co-commissioning comments**



### Activity Planned Expenditure

#### Planned Expenditure

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27
CHHP - Way Back Support Services	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
CHHP - Safe Spaces	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
CHHP – headspace Wait Time Reduction Program	\$0.00	\$1,034,597.17	\$272,579.93	\$0.00	\$0.00

#### Totals

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27	Total
CHHP - Way Back Support Services	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
CHHP - Safe Spaces	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
CHHP – headspace Wait Time Reduction Program	\$0.00	\$1,034,597.17	\$272,579.93	\$0.00	\$0.00	\$1,307,177.10
<b>Total</b>	\$0.00	\$1,034,597.17	\$272,579.93	\$0.00	\$0.00	\$1,307,177.10

#### Funding From Other Sources - Financial Details

**Funding From Other Sources - Organisational Details**



**Activity Comments**

**Activity Status**

Submitted

**PHN Comments**

Subject	Description	Commented By	Date Created
---------	-------------	--------------	--------------

**Comments from the Department**

Comment	Date Created
---------	--------------



## CHHP - 5200 - CHHP 5.2 - Safe Spaces in Brisbane North



### Activity Metadata

**Applicable Schedule \***

Primary Mental Health Care

**Activity Prefix \***

CHHP

**Activity Number \***

5200

**Activity Title \***

CHHP 5.2 - Safe Spaces in Brisbane North

**Existing, Modified or New Activity \***

Existing



### Activity Priorities and Description

**Program Key Priority Area \***

Mental Health Priority Area 5: Community based suicide prevention activities

**Other Program Key Priority Area Description****Aim of Activity \***

There were 13,203 presentations to Metro North HHS emergency departments in 2017/18 with mental and behavioural disorders. 78% were not admitted to hospital and 22% were triaged as category 4 or 5. Emergency departments are not suitable for people in non-acute mental distress, yet EDs are the main source of care, particularly afterhours. This represents an unwarranted cost to the hospital system, yet does not provide optimal care in an appropriate setting.

In addition, many people in mental distress will seek help from other locations, such as community centres, libraries and pharmacies or present to the ambulance or police services. While familiar and accessible to the individual, they may not have the skills, experience or time to respond appropriately.

The need for this Safe Spaces project has emerged from the research undertaken by the PiR program in 2016-2017, and following Safe Space trials in the region in 2018-19 through Metro North Health LINK funding. Based on this trial project Brisbane North PHN, in collaboration with local mental health services, applied for CHHP funding to continue this program in 2019. CHHP funding, has now been received and contracted for service delivery from June 2021 – June 2024.

The project aims to provide people experiencing mental distress access to safe space alternatives to ED that are connected and enabling.

## Description of Activity \*

This project involves the establishment of four safe spaces in the catchments of the Caboolture, Redcliffe, Prince Charles and Royal Brisbane hospitals. This project will involve direct service delivery via the Safe Space hubs, along with the development of an informal network of safe space locations throughout the community, including a tool kit and region wide coordination.

The Safe Space hubs will:

- operate outside business hours
- provide clinical and non-clinical support and staffing, including on-call clinical supports as well as appropriate use of peer workforces
- offer supportive chat, soft entry for people in distress
- provide activities such as arts and sensory modulation, and individual safety planning
- provide outreach and in reach to hospital EDs
- operate with recovery oriented & trauma informed care approaches
- connect people to supports in the community

It is expected that the following outcomes will result:

- Reduced attendance at emergency departments and admission to hospital
- Improved ability to cope with and manage distress
- Reduced levels of distress
- Connection to appropriate services and supports

## Needs Assessment Priorities \*

### Needs Assessment

2023\_Refresh\_BrisbaneNorthPHN\_HNA

### Priorities

Priority	Page reference
Mental health	69



## Activity Demographics

### Target Population Cohort

The target population for this activity includes:

- People who present at emergency departments in a state of distress, who do not require emergency department support.
- People who do not present to emergency departments, yet are in distress and require safe space alternatives (e.g. present to ambulance, police or GPs).
- People who seek a range of safe space alternatives through relationships with people and places (e.g. friends, family, neighbourhood centres, libraries).

### In Scope AOD Treatment Type \*

### Indigenous Specific \*

No

### Indigenous Specific Comments

## Coverage

### Whole Region

Yes



## Activity Consultation and Collaboration

### Consultation

In 2016 -17 North Brisbane Partners in Recovery funded a literature review and co-design consultation across the region to develop an agreed approach to safe spaces for people in mental distress (<https://www.mymentalhealth.org.au/page/services/self-care-and-informal-support/safe-space-network/>). A Safe Spaces partnership group was then established to take forward recommendations.

#### Stakeholders:

- People with a lived experience of mental distress and illness
- Carers and family members
- Metro North HHS – emergency departments and mental health service
- Ambulance and police services
- Existing Brisbane North Safe Space partnership group
- NGOs in the community
- Informal safe spaces e.g. neighbourhood centres, libraries, pharmacies.

### Collaboration

The following stakeholders are involved in the design and/or implementation of the activity as a partnership group facilitated by the PHN.

Metro North Hospital and Health Service, Richmond Fellowship Queensland, Communify, Aftercare, Neami, Collaboration In Mind Partnership Group (Severe/complex mental illness), Wesley Mission Queensland, and Suicide Prevention Strategic Partnership Group.



## Activity Milestone Details/Duration

### Activity Start Date

29/06/2021

### Activity End Date

28/06/2026

### Service Delivery Start Date

11/04/2022

### Service Delivery End Date

30/06/2026

### Other Relevant Milestones



## Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: No

Continuing Service Provider / Contract Extension: Yes

Direct Engagement: No

Open Tender: No

Expression Of Interest (EOI): No

Other Approach (please provide details): No

Is this activity being co-designed?

No

Is this activity the result of a previous co-design process?

Yes

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

No

Has this activity previously been co-commissioned or joint-commissioned?

No

Decommissioning

No

Decommissioning details?

Co-design or co-commissioning comments

In 2016 -17 North Brisbane Partners in Recovery funded a literature review and co-design consultation across the region to develop an agreed approach to safe spaces for people in mental distress (<https://www.mymentalhealth.org.au/page/services/self-care-and-informal-support/safe-space-network/>). A Safe Spaces partnership group was then established to take forward recommendations. In 2018 Metro North HHS funded the partnership to deliver a safe space in Caboolture and Redcliffe as a trial for one year with limited hours (weekend days).



## Activity Planned Expenditure

Planned Expenditure

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27
CHHP - Way Back Support Services	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
CHHP – headspace Wait Time Reduction Program	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
CHHP - Safe Spaces	\$0.00	\$4,166,195.22	\$0.00	\$0.00	\$0.00

**Totals**

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27	Total
CHHP - Way Back Support Services	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
CHHP – headspace Wait Time Reduction Program	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
CHHP - Safe Spaces	\$0.00	\$4,166,195.22	\$0.00	\$0.00	\$0.00	\$4,166,195.22
Total	\$0.00	\$4,166,195.22	\$0.00	\$0.00	\$0.00	\$4,166,195.22

**Funding From Other Sources - Financial Details**

**Funding From Other Sources - Organisational Details**



**Activity Comments**

**Activity Status**

Submitted

**PHN Comments**

Subject	Description	Commented By	Date Created
---------	-------------	--------------	--------------

**Comments from the Department**

Comment	Date Created
---------	--------------



# CHHP-Op - 1000 - CHHP Operational



## Activity Metadata

**Applicable Schedule \***

Primary Mental Health Care

**Activity Prefix \***

CHHP-Op

**Activity Number \***

1000

**Activity Title \***

CHHP Operational

**Existing, Modified or New Activity \***

Existing



## Activity Priorities and Description

**Program Key Priority Area \***

**Other Program Key Priority Area Description**

**Aim of Activity \***

**Description of Activity \***

**Needs Assessment Priorities \***

**Needs Assessment**

**Priorities**





## Activity Demographics

Target Population Cohort

In Scope AOD Treatment Type \*

Indigenous Specific \*

Indigenous Specific Comments

Coverage

Whole Region



## Activity Consultation and Collaboration

Consultation

Collaboration



## Activity Milestone Details/Duration

Activity Start Date

Activity End Date

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones



## Activity Commissioning

Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: No  
Continuing Service Provider / Contract Extension: No  
Direct Engagement: No  
Open Tender: No  
Expression Of Interest (EOI): No  
Other Approach (please provide details): No

Is this activity being co-designed?

Is this activity the result of a previous co-design process?

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

Has this activity previously been co-commissioned or joint-commissioned?

Decommissioning

Decommissioning details?

Co-design or co-commissioning comments



## Activity Planned Expenditure

### Planned Expenditure

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27
CHHP - Way Back Support Services - Operational	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

CHHP - headspace Wait Time Reduction Operational	\$0.00	\$276,471.95	\$26,301.57	\$0.00	\$0.00
CHHP - Safe Spaces - Operational	\$0.00	\$688,173.89	\$0.00	\$0.00	\$0.00

**Totals**

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27	Total
CHHP - Way Back Support Services - Operational	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
CHHP - headspace Wait Time Reduction Operational	\$0.00	\$276,471.95	\$26,301.57	\$0.00	\$0.00	\$302,773.52
CHHP - Safe Spaces - Operational	\$0.00	\$688,173.89	\$0.00	\$0.00	\$0.00	\$688,173.89
Total	\$0.00	\$964,645.84	\$26,301.57	\$0.00	\$0.00	\$990,947.41

**Funding From Other Sources - Financial Details**



**Funding From Other Sources - Organisational Details**



**Activity Comments**

**Activity Status**

Submitted

**PHN Comments**

Subject	Description	Commented By	Date Created
---------	-------------	--------------	--------------

**Comments from the Department**

Comment	Date Created
---------	--------------