

Hunter New England and Central Coast - Primary Mental Health Care 2019/20 - 2023/24 Activity Summary View



MH - 101 - MH1.01 Promotion of digital low intensity platforms



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

101

Activity Title *

MH1.01 Promotion of digital low intensity platforms

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 aim of this activity is to promote the use of digitally available, evidence-based platforms and resources for people with, or at risk of developing mild mental illness.

Description of Activity *

HNECC will continue to support and promote the Mental Health digital gateway (Head to Health) and facilitate use amongst key groups by way of direct recommendation to clients who are referred through the Central Access and Referral Service (activity 7.1). This will be an adjunct to a locally commissioned services (activity 1.2) HNECC PHN will support and promote the availability of validated self-help and digital mental health services as part of a Stepped Care approach to mental health service provision.

Similarly, HNECC will utilise social media to promote these resources and work to embed appropriate links in HealthPathways as a key activity to raise the awareness of online, low intensity resources for clinicians and consumers.

Needs Assessment Priorities *

Needs Assessment

HNECC PHN Needs Assessment 2019/20-2021/22

Priorities

Priority	Page reference
Limited availability of early intervention services	51
Stigma associated with mental illness including help seeking	51



Activity Demographics

Target Population Cohort

Whole of population

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Kempsey - Nambucca	10802
Inverell - Tenterfield	11002
Port Macquarie	10804
Lake Macquarie - East	11101
Lower Hunter	10601
Upper Hunter	10604
Taree - Gloucester	10805
Maitland	10602
Lake Macquarie - West	11102
Tamworth - Gunnedah	11004
Port Stephens	10603
Great Lakes	10801
Newcastle	11103
Wyong	10202
Moree - Narrabri	11003
Armidale	11001
Gosford	10201



Activity Consultation and Collaboration

Consultation

As this is a continuation of existing activities, consultation has been varied. However, a mix of consultation with providers, clinicians, consumers, carers, and Local Health Districts has occurred.

Collaboration

HNECC will work in collaboration with existing providers, Local Health Districts, consumers, and community members to continue to refine low intensity digital resources are integrated into existing service structures.



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2022

Service Delivery Start Date

01/07/2019

Service Delivery End Date

30/06/2022

Other Relevant Milestones



Activity Commissioning

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

Not Yet Known: Yes

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?

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?

Not Applicable

Co-design or co-commissioning comments

Not Applicable

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

No



MH - 102 - MH1.02 Low Intensity Integration



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

102

Activity Title *

MH1.02 Low Intensity Integration

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 aim of this activity is to continue to work with providers of low intensity services that are commissioned under other priority areas to improve whole of sector integration within a Stepped Care framework.

Description of Activity *

HNECC PHN will continue to manage commissioned low-intensity services (primarily commissioned through engaging a range of mental health professionals and vocationally qualified professionals to deliver evidence based mental health services to people that would otherwise have little or no access to such services) and work with providers to support integration of these services within the overall stepped care system. HNECC will also ensure commissioned low-intensity services are utilising existing digital resources to enhance commissioned service activity. Low intensity interventions may also be directed to address emerging local issues such as disaster recovery or to increase access to services for under-served population groups.

Needs Assessment Priorities ***Needs Assessment**

HNECC PHN Needs Assessment 2019/20-2021/22

Priorities

Priority	Page reference
Limited availability of early intervention services	51
Lack of integration and collaboration between mental health services	51



Activity Demographics

Target Population Cohort

Whole of population

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Kempsey - Nambucca	10802
Inverell - Tenterfield	11002
Port Macquarie	10804
Lake Macquarie - East	11101
Lower Hunter	10601
Upper Hunter	10604
Taree - Gloucester	10805
Maitland	10602
Lake Macquarie - West	11102
Tamworth - Gunnedah	11004
Port Stephens	10603
Great Lakes	10801
Newcastle	11103
Wyong	10202
Moree - Narrabri	11003
Armidale	11001

Gosford	10201
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Activity Consultation and Collaboration

Consultation

As this is a continuation of existing activities, consultation has been varied. However, a mix of consultation with providers, clinicians, consumers, carers, and Local Health Districts has occurred.

Collaboration

HNECC will work in collaboration with existing providers, Local Health Districts, consumers, and community members to continue to refine low intensity services which are integrated into existing service structures.



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2022

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?

Not Applicable

Co-design or co-commissioning comments

Not Applicable

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

No



MH - 201 - MH2.01 Commissioned Youth Mental Health Services



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

201

Activity Title *

MH2.01 Commissioned Youth Mental Health Services

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 ***

Commission existing and advocate for new headspace centres, outreach and satellite services in Gosford/Lake Haven, Maitland, Newcastle, and Tamworth.

The aim of this activity is to increase access for youth and their families to help with issues affecting wellbeing, and to maximise impact of services delivered.

Description of Activity *

Continue to commission existing and new youth mental health services via headspace services in five areas: Maitland, Newcastle, Tamworth, Taree, and Gosford, along with outreach centres in the New England, Hunter, and Central Coast Area. This will provide community-based services for young people in the HNECC footprint, including rural and remote communities, with or at risk of mental illness, in line with existing and future headspace service delivery model.

The PHN will integrate and link programmes into broader primary care activities such as youth complex and suicide prevention, via an approach that leverages its extensive network of primary care stakeholders, national peak bodies (i.e. Beyond Blue, Orygen and headspace National Office), and communities of practice, to identify new outreach/satellite services, and new youth mental health services, that can be enhanced and placed on the headspace platform, thus creating a 'no wrong door' approach.

Implementation of the PHN's Stepped Care, and Access and Referral System, will further support integration of programmes into the headspace platform, enabling person centred integration across physical, mental, behavioural, social, and vocational support,

and drug and alcohol services.

HNECCPHN will work with the headspace centres to develop and review annual activity work plans and undertake continuous improvement activities.

Needs Assessment Priorities *

Needs Assessment

HNECC PHN Needs Assessment 2019/20-2021/22

Priorities

Priority	Page reference
Mental health and suicide prevention needs of youth	51



Activity Demographics

Target Population Cohort

Young people aged 12-25 years

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Kempsey - Nambucca	10802
Inverell - Tenterfield	11002
Port Macquarie	10804
Lake Macquarie - East	11101
Lower Hunter	10601
Upper Hunter	10604
Taree - Gloucester	10805
Maitland	10602
Lake Macquarie - West	11102
Tamworth - Gunnedah	11004
Port Stephens	10603
Great Lakes	10801
Newcastle	11103
Wyong	10202
Moree - Narrabri	11003
Armidale	11001
Gosford	10201



Activity Consultation and Collaboration

Consultation

Through established communities of practice, continue to develop effective relationships with headspace Centres, lead agencies, and headspace National Office

Establish linkages between associated services to promote integration of care, support for digital enablement, and consultation around service re-modelling.

Work with the youth sector, young people, school link coordinators and Department of Education to develop models of service that can be delivered to rural and remote communities.

Collaboration

HNECCPHN will work in collaboration with existing providers, Local Health Districts, consumers, community members, headspace National Office, Beyond Blue, Orygen and young people, to design new outreach/satellite services and identify new services that enhance the stepped model of care.

HNECCPHN will support the local headspace centres to build and strengthen relationships with other relevant service providers, enabling a more holistic service response for young people.



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2020

Service Delivery Start Date

01/12/2019

Service Delivery End Date

30/06/2022

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?

Not Applicable

Co-design or co-commissioning comments

Not Applicable

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

Yes



MH - 202 - MH2.02 Commission youth complex services in areas of identified need



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

202

Activity Title *

MH2.02 Commission youth complex services in areas of identified need

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 ***

Improved outcomes for youth experiencing severe and/or complex mental illness

Description of Activity *

In collaboration and partnership with headspace National Office, Orygen, and stakeholders, commission youth complex services to support young people within the primary care setting who experience or are at risk of developing severe mental illness.

The Youth Complex Mental Health Service aims to address the following:

- Compliment, not duplicate, the existing service system;
- Utilising the Mental Health & Suicide Prevention Needs Assessment to identify service gaps in youth mental health services cross the HNECCPHN region;
- Commission services that address these gaps and integrate with existing services;
- Building workforce capacity and sustainability, particularly in rural and remote areas;
- Promotion of early intervention with the aim of altering disease trajectory and improve patient outcomes; and
- Provide the right clinical care and support as soon as possible with resultant improvements in a young person's mental health, well-being and other presenting issues that may impact their health, as well as providing benefits for the community more broadly.

Needs Assessment Priorities *

Needs Assessment

HNECC PHN Needs Assessment 2019/20-2021/22

Priorities

Priority	Page reference
Mental health and suicide prevention needs of youth	51



Activity Demographics

Target Population Cohort

Young people aged 12-25 years

In Scope AOD Treatment Type *

Indigenous Specific *

Yes

Indigenous Specific Comments

Through targeted activities and engagement with the sector via Youth Reference Groups, Interagency Meetings, and Aboriginal Medical Services

Coverage

Whole Region

No

SA3 Name	SA3 Code
Inverell - Tenterfield	11002
Lower Hunter	10601
Upper Hunter	10604
Taree - Gloucester	10805
Lake Macquarie - West	11102
Tamworth - Gunnedah	11004
Port Stephens	10603
Great Lakes	10801
Wyang	10202
Moree - Narrabri	11003
Armidale	11001
Gosford	10201



Activity Consultation and Collaboration

Consultation

As this is a continuation of existing activities, consultation has been varied. However, a mix of consultation with providers, clinicians, consumers, carers, and Local Health Districts has occurred.

Collaboration

HNECC will work in collaboration with existing providers, headspace National Office and Orygen Local Health Districts, consumers, and community members to continue to refine low intensity services which are integrated into existing service structures. The strategy, and model of attaching youth complex services to a headspace service provides greater sustainability of the service, enables services to be operational in less time and capacity, and commissioned providers to take a lead role in this activity within their locality.



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2020

Service Delivery Start Date

01/07/2019

Service Delivery End Date

30/06/2022

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?

Not Applicable

Co-design or co-commissioning comments

Not Applicable

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

Yes



MH - 301 - MH3.01 Psychological Services – Mental Health Services in Primary Care



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

301

Activity Title *

MH3.01 Psychological Services – Mental Health Services in Primary 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-served and / or hard to reach groups

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

This activity aims to provide efficient and effect evidence based psychological interventions for people with moderate mental illness who are not otherwise able to access services. This activity forms the moderate intensity step in HNECC's Stepped Care Model and provide a higher intensity service than services commissioned under activity 1.3 and a lower intensity service than services commissioned under activity 4.2.

Description of Activity *

This service will form part of a suite of services commissioned in a stepped care framework. The services will be client directed and better integrated with higher and lower intensity services, including services commissioned under activities 1.3 and 4.2 Access to services will be via a regional Access and Referral service activity 7.1 to ensure clients are directed to the most appropriate service. Services will be delivered by appropriately experienced and qualified allied health providers. Innovate models of delivery that improve access to hard-to-reach populations (such as outreach models and colocations) are encouraged.

Needs Assessment Priorities ***Needs Assessment**

HNECC PHN Needs Assessment 2019/20-2021/22

Priorities

Priority	Page reference
Reduced capacity of services to recruit and retain allied health staff	51
Lack of integration and collaboration between mental health services	51



Activity Demographics

Target Population Cohort

People with mild to moderate mental health issues who are otherwise unable to engage in psychological services due to a range of factors including, but not limited to age, socioeconomic status, rurality, Aboriginality, and cultural background.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Kempsey - Nambucca	10802
Inverell - Tenterfield	11002
Port Macquarie	10804
Lake Macquarie - East	11101
Lower Hunter	10601
Upper Hunter	10604
Taree - Gloucester	10805
Maitland	10602
Lake Macquarie - West	11102
Tamworth - Gunnedah	11004
Port Stephens	10603
Great Lakes	10801
Newcastle	11103
Wyong	10202
Moree - Narrabri	11003
Armidale	11001
Gosford	10201



Activity Consultation and Collaboration

Consultation

As this is a continuation of existing activities, consultation has been varied. However, a mix of consultation with providers, clinicians, consumers, carers, and Local Health Districts has occurred.

Collaboration

HNECC will work in collaboration with existing providers, Local Health Districts, consumers, and community members to continue to refine low intensity services which are integrated into existing service structures.



Activity Milestone Details/Duration

Activity Start Date

28/02/2018

Activity End Date

29/06/2022

Service Delivery Start Date

01/07/2019

Service Delivery End Date

30/06/2022

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?

Not Applicable

Co-design or co-commissioning comments

Not Applicable

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

Yes



MH - 401 - MH4.01 Transitional Care Packages



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

401

Activity Title *

MH4.01 Transitional Care Packages

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 ***

The aim of this activity is to reduce re-presentation and re-hospitalisation of people with mild to moderate mental illness who have complex psychosocial comorbidities.

Description of Activity *

In previous years, this activity was a pilot program. After a recent successful evaluation, HNECC is converting Transitional Care Packages to Business as Usual to complement the suite of services already available.. HNECC will continue to work collaboratively with both Local Health Districts to support people with mild to moderate mental illness who have complex presentations transitioning from acute services to primary care. The program is delivered by clinicians and peer workers who collocate with tertiary services.

Packages are time limited, and it is expected that appropriate referrals and linkages are made, including linkage to HNECC funded services such as AoD and psychosocial services thus ensuring increased service integration, enhanced client-centred care, and increased likelihood of continuity of care between tertiary and primary settings.

Packages are time limited and it is expected that appropriate referrals and linkages are made, thus ensuring continuity of care.

Needs Assessment Priorities *

Needs Assessment

HNECC PHN Needs Assessment 2019/20-2021/22

Priorities

Priority	Page reference
Stigma associated with mental illness including help seeking	51
Lack of integration and collaboration between mental health services	51



Activity Demographics

Target Population Cohort

People admitted with tertiary services with complex presentations.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Kempsey - Nambucca	10802
Inverell - Tenterfield	11002
Port Macquarie	10804
Lake Macquarie - East	11101
Lower Hunter	10601
Upper Hunter	10604
Taree - Gloucester	10805
Maitland	10602
Lake Macquarie - West	11102
Tamworth - Gunnedah	11004
Port Stephens	10603
Great Lakes	10801
Newcastle	11103
Wyong	10202
Moree - Narrabri	11003
Armidale	11001
Gosford	10201



Activity Consultation and Collaboration

Consultation

As this is a continuation of existing activities, consultation has been varied. However, a mix of consultation with providers, clinicians, consumers, carers, and Local Health Districts has occurred.

Collaboration

HNECC will work in collaboration with existing providers, Local Health Districts, consumers, and community members to continue to refine low intensity services which are integrated into existing service structures.



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2020

Service Delivery Start Date

01/07/2019

Service Delivery End Date

30/06/2022

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?

Not Applicable

Co-design or co-commissioning comments

Not Applicable

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

Yes



MH - 501 - MH5.01 Capacity building of Primary Care to respond effectively and in an ongoing way to Suicide.



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

501

Activity Title *

MH5.01 Capacity building of Primary Care to respond effectively and in an ongoing way to Suicide.

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 ***

Ensure primary care have a clear understanding of the role they play in suicide prevention and ongoing treatment and care for people who are suicidal, after an attempt or those bereaved by suicide. Ensure focus is paid to high-risk groups including but not limited to:

- Youth
- Males 25-65
- Males over 80
- Aboriginal and Torres Strait Islander people
- Older people in aged care facilities
- LGBTQI community

Description of Activity *

Development and implementation of a regional education program of suicide education, events discussion and integration to increase the primary care sectors ability to clearly understand their role in suicide prevention, ongoing treatment and reduction of stigma related to help seeking.

The goal of this education program will be to emphasise the understanding the 'Suicide Prevention is everybody's business'.

It will also explore and support the self-care of clinicians in the primary care sector to ensure they are seeking help when it is

needed.

HNECC have engaged SAFESIDE to deliver training that aligns with the MoH Towards Zero Suicide training. This will allow all clinicians across the region to be using the same language in response to suicide care planning. Work is also occurring in collaboration between HNECC and HNE LHD and CC LHD to encourage the use of the same safety planning template to improve patient outcomes and experiences when moving between the primary and tertiary sectors.

Needs Assessment Priorities *

Needs Assessment

HNECC PHN Needs Assessment 2019/20-2021/22

Priorities

Priority	Page reference
High rates of mental illness, intentional self-harm, and suicide	51
Mental health and suicide prevention needs of males aged 25-65 years	51
Mental health and suicide prevention needs of males aged over 80 years	51
Mental health and suicide prevention needs of Aboriginal and Torres Strait Islander people	51
Mental health and suicide prevention needs of members of LGBTIQ community members	51
Lack of cross-sectoral mental health promotion and prevention, and suicide prevention strategies	51
Barriers for mental health nurses to gain credentials to work in general practice	51
Stigma associated with mental illness including help seeking	51
Support for GPs to play a central role in mental health care	51
Mental health and suicide prevention needs of youth	51
Lack of integration and collaboration between mental health services	51



Activity Demographics

Target Population Cohort

Primary Care Clinicians including GPs

In Scope AOD Treatment Type *

Indigenous Specific *

Yes

Indigenous Specific Comments

Suicide prevention needs of Aboriginal and Torres strait Islander people are a high-risk group in the needs assessment so will be targeted in this plan. There will be consultation facilitated through the aboriginal health team with key local aboriginal people and groups to ensure the program will meet the needs of each different community.

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Kempsey - Nambucca	10802
Inverell - Tenterfield	11002
Port Macquarie	10804
Lake Macquarie - East	11101
Lower Hunter	10601
Upper Hunter	10604
Taree - Gloucester	10805
Maitland	10602
Lake Macquarie - West	11102
Tamworth - Gunnedah	11004
Port Stephens	10603
Great Lakes	10801
Newcastle	11103
Wyong	10202
Moree - Narrabri	11003
Armidale	11001
Gosford	10201



Activity Consultation and Collaboration

Consultation

HNECC PHN will take advantage of already established alliances with the two LHDs in our region, clinical and community councils and GP advocacy groups.

Also utilising a network of education providers and trainers.

Collaboration

HNECC PHN will collaborate with experts in suicide prevention, relevant primary care peak bodies, primary care clinicians and those with a lived experience of suicide to develop and implement this plan. This will take advantage of already established alliances, clinical and community councils and GP advocacy groups.



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2022

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: Yes

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?

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?

Yes

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

No

Decommissioning

No

Decommissioning details?

Not Applicable

Co-design or co-commissioning comments

Not Applicable

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

No



MH - 601 - MH6.01 Aboriginal and Torres Strait Islander Mental Health Services Commissioning



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

601

Activity Title *

MH6.01 Aboriginal and Torres Strait Islander Mental Health Services Commissioning

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 ***

Improve access to joined-up, integrated, culturally appropriate, and safe mental health services that holistically meet the mental health and healing needs of Aboriginal and Torres Strait Islander people.

Description of Activity *

The HNECC PHN utilises a commissioning framework in the contracting of Aboriginal and Torres Strait Islander Mental Health services including suicide post-vention services and care coordination and, group work, inclusive of the following activities;

Commission evidence-based primary mental health care services in line with a best practice stepped care approach that:

- provide a range of services to meet community local needs;
- make the best use of available workforce and technology;
- ensure workforce skills and qualifications are commensurate with the level of service being commissioned;
- complement and link to other closely connected services;
- are integrated across the whole mental health system;
- have the flexibility to enable service provision to be adjusted to address new and emerging priorities and/or hot spots; and
- are culturally appropriate and meet the needs and preferences of patients, their families and communities.

Develop and improve the cultural competence of service providers to ensure all services meet the needs and preferences of

Aboriginal and Torres Strait Islander people;

Enable linkages between commissioned and existing services to enable a joined approach with other closely connected services including social and emotional wellbeing, suicide prevention and alcohol and other drug services to enhance and better integrate Aboriginal and Torres Strait Islander mental health services at the local level;

Promote referral pathways and follow up services to support patients

Support the development of joined up assessment processes and referral pathways enabling patients to seamlessly transition between services as required.

Needs Assessment Priorities *

Needs Assessment

HNECC PHN Needs Assessment 2019/20-2021/22

Priorities

Priority	Page reference
Improve Aboriginal and Torres Strait Islander people's access to high quality, culturally appropriate health care, including primary care and care coordination services.	n/a



Activity Demographics

Target Population Cohort

Aboriginal and Torres Strait Islander people experiencing low – severe mental illness, across the life span.

In Scope AOD Treatment Type *

Indigenous Specific *

Yes

Indigenous Specific Comments

HNECC PHN works in collaboration with relevant local Indigenous organisations including Aboriginal Community Controlled Health Services (ACCHSs) and with mainstream primary health care organisations to identify and assess the ongoing, specific mental health needs of HNECC Aboriginal and Torres Strait Islander communities.

The HNECC PHN engages Aboriginal Communities, inclusive of Aboriginal Community Controlled Organisations, through ongoing collaboration with Regional Aboriginal Health Alliances inclusive of the HNE and CC LHDs Aboriginal Health Services Units and Aboriginal Medical Services, the HNECC PHN Aboriginal Health Access Team and Local Partnership Networks (including AoD Regional Partnership Networks).

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Kempsey - Nambucca	10802
Inverell - Tenterfield	11002
Port Macquarie	10804
Lake Macquarie - East	11101
Lower Hunter	10601
Upper Hunter	10604
Taree - Gloucester	10805
Maitland	10602
Lake Macquarie - West	11102
Tamworth - Gunnedah	11004
Port Stephens	10603
Great Lakes	10801
Newcastle	11103
Wyong	10202
Moree - Narrabri	11003
Armidale	11001
Gosford	10201



Activity Consultation and Collaboration

Consultation

Utilising a commissioning framework, the HNECC PHN works in partnership with HNECC Aboriginal Communities and Community Controlled services to;

- Understand the needs of the community by analysing data, engaging and consulting with Aboriginal consumers, clinicians, carers and providers, peak bodies, community organisations;
- Co-design solutions; engage with stakeholders, including consumer representatives, peak bodies, community organisations, potential providers and other funders, to develop evidence-based and outcome-focused solutions; and
- Manage through relationships; work in partnership, building connections at multiple levels of partner Community Controlled organisations and facilitate links between stakeholders

Collaboration

The HNECC PHN will seek to engage The Healing Foundation in the facilitation and development of Community Healing Plans in acknowledging that services that seek to support healing, work best when solutions are culturally strong, developed, driven at the local level, and led by Aboriginal and Torres Strait Islander people. HNECC PHN recognises that the healing needs and priorities of communities are different and in achieving the objective of this Activity, the HNECC PHN is committed to working in collaboration with The Healing Foundation to co-design and resource healing programs that meet the needs of local communities.



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2022

Service Delivery Start Date

01/07/2019

Service Delivery End Date

30/06/2022

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: Yes

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

Yes

Decommissioning details?

As the result of re-approaching the market for Indigenous Mental Health services, some existing service providers may be decommissioned where alternatives are identified through the tender process. Client transition between providers will be managed as required to ensure service continuity occurs and clients continue to feel safe in the healing journey.

Co-design or co-commissioning comments

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

Yes

Funding From Other Sources - Financial Details

Funding From Other Sources - Organisational Details



MH - 801 - MH8.01 Joint Regional Mental Health and Suicide Prevention Plan



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

801

Activity Title *

MH8.01 Joint Regional Mental Health and Suicide Prevention 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 *

To develop a joint Regional Mental Health and Suicide Prevention Plan with LHDs

Description of Activity *

A joint plan will be developed to identify barriers, enablers, and strategies to improve mental health services across the region in an integrated way.

Needs Assessment Priorities *

Needs Assessment

HNECC PHN Needs Assessment 2019/20-2021/22

Priorities

Priority	Page reference
Limited capacity of services to develop and implement an approach to quality	51

Lack of integration and collaboration between mental health services	51
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Activity Demographics

Target Population Cohort

Stakeholders

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Kempsey - Nambucca	10802
Inverell - Tenterfield	11002
Port Macquarie	10804
Lake Macquarie - East	11101
Lower Hunter	10601
Upper Hunter	10604
Taree - Gloucester	10805
Maitland	10602
Lake Macquarie - West	11102
Tamworth - Gunnedah	11004
Port Stephens	10603
Great Lakes	10801
Newcastle	11103
Wyong	10202
Moree - Narrabri	11003
Armidale	11001
Gosford	10201



Activity Consultation and Collaboration

Consultation

Exact consultation is to be determined, but it is envisaged that key stakeholders including consumers, carers, LHDs, service providers and clinicians will be involved in the development of the plan.

Collaboration

Local Health Districts



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2020

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: Yes

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?

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

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

No



MH - 1003 - MH1.03 Mental Health Services in Primary Care – Low Intensity



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

1003

Activity Title *

MH1.03 Mental Health Services in Primary Care – Low Intensity

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 ***

This activity aims to provide easy to access, non-clinical services for those with, or at risk of developing mild mental illness.

Description of Activity *

As part of commissioning a suite of services in a Stepped Care Framework, HNECC have will procured an appropriately experienced organisations to deliver an evidence based low intensity program. Low intensity services will be made available to eligible clients across the HNECC footprint through service delivery by trained and competent coaches.

Local service providers will be procured to deliver a suite of services, along with activities MH3.1 and MH4.2. As applicable, additional organisations or service types may be procured to address emerging issues, such as disaster recovery or to improve access to under-served groups.

Needs Assessment Priorities ***Needs Assessment**

HNECC PHN Needs Assessment 2019/20-2021/22

Priorities

Priority	Page reference
Transport barriers to mental health services	51
Limited availability of early intervention services	51
Stigma associated with mental illness including help seeking	51



Activity Demographics

Target Population Cohort

People with, or at risk of developing mild mental illness.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Kempsey - Nambucca	10802
Inverell - Tenterfield	11002
Port Macquarie	10804
Lake Macquarie - East	11101
Lower Hunter	10601
Upper Hunter	10604
Taree - Gloucester	10805
Maitland	10602
Lake Macquarie - West	11102
Tamworth - Gunnedah	11004
Port Stephens	10603
Great Lakes	10801
Newcastle	11103
Wyong	10202
Moree - Narrabri	11003
Armidale	11001

Gosford	10201
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Activity Consultation and Collaboration

Consultation

As this is a continuation of existing activities, consultation has been varied. However, a mix of consultation with providers, clinicians, consumers, carers, and Local Health Districts has occurred.

Collaboration

HNECC will work in collaboration with existing providers, Local Health Districts, consumers, and community members to continue to refine low intensity services which are integrated into existing service structures.



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2022

Service Delivery Start Date

01/12/2019

Service Delivery End Date

30/06/2022

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?

Not Applicable

Co-design or co-commissioning comments

Not Applicable

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

Yes



MH - 1101 - MH11.01 Empowering Communities – Drought



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

1101

Activity Title *

MH11.01 Empowering Communities – Drought

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Other Program Key Priority Area Description

Empowering Communities - Drought

Aim of Activity *

To support drought impacted and affected communities to build resilience and improve their physical and mental health.

Description of Activity ***MH11.01 Ongoing Drought Awareness**

Primary Care Improvement Officers – Drought Funding Awareness and Opportunity communication and education

- Drought support promotion embedded into Primary Care Improvement Officer primary care visits and engagements including:
 - o QPR Training (Mental Health First Aid Training) opportunities – subsidised by HNECC PHN
 - o Promotion of changes to Primary mental Health Care referral processes to improve access (via PHN and individual service providers)
 - o Development and promotion of Drought specific Referral Pathways - HealthPathways
 - o Information on available drought support – Patient Info
 - o Ongoing development and updating of the PeopleBank Drought Support page www.peoplebank/hneccphn.com.au

MH11.02 Community Grants Applications - January 2019 – September 2019

- Undertake a solicited, rolling grants process to distribute \$500,000 of the \$1million funds allowing for three tiers of grant

funding.

- Permanent panel assembled to assess and distribute funding (two PHN representatives, two community-based panel members (e.g. CWA, Local Land Services, DPI representative)).

MH11.03 Community-led wellbeing activities will be funded during this phase, including:

- Activities that foster community wellbeing and resilience, reduce stigma, raise awareness of mental health supports and encourage people who need mental health support to access services. This may include community events and workshops.
- Classes or training for community members addressing topics such as emotional wellbeing, mental health first aid, managing stress, anxiety or depression, and suicide prevention.
- Grant applications will be assessed by the panel every 10 days.

MH11.04 Targeted Community Grants Projects - May 2019 – May 2020

Multi-LGA projects that address:

- Early intervention and low intensity mental health services and resources, including services that individuals can access without a diagnosis of mental illness or a Mental Health Treatment Plan.
- Suicide prevention activities
- Workforce capability development projects that improve the capacity of the health and mental health workforce to support people experiencing drought-related distress and provide services that are culturally appropriate.

Examples of activities that may be funded include the proposed “Lend a Hand Locum program”.

Collaborative initiatives between NSW PHNs could also be funded under this activity phase.

Based on the outcomes and priorities identified in Phases 2 and 3, HNECC PHN would potentially undertake a further call for grants to address changing community need and/or supplement projects funded under Phase 3 for further expansion or scope.

Recognising and Minimising duplication

An environmental scan matrix of local services and drought relief activities has been created for drought affected communities and this will be cross-referenced as part of the assessment of submissions to ensure that funded proposals are not duplicitous. The environmental scan detail has been built from our engagement activities undertaken by our drought engagement officer. This has included internal and external liaison with stakeholders including current funded service providers, NGO organisations, drought charities, attendance at and recording of community events, participation on community drought working groups and taskforces, liaison with state and federal departments (e.g., local land services, department of primary industries), peak advisory groups (e.g. Rural Doctors Network) and other PHNs, particularly those with neighbouring boundaries (DDWM PHN, WNSW PHN). In terms of the risk of long-term dependency on funding, it will be made clear that grant funding is one-off payment. Additionally, applicants will need to outline additional partners and funding, to a) promote joined-up approaches and b) reduce the reliance of grant funding to deliver the activity, especially if a project’s budget is higher than the funding applied for. Sustainability will be assessed on a case-by-case basis, dependant on the type of activity that is being proposed.

Needs Assessment Priorities *

Needs Assessment

HNECC PHN Needs Assessment 2019/20-2021/22

Priorities

Priority	Page reference
Rural health disparities	42
Reduced access to services in rural and remote areas	42



Activity Demographics

Target Population Cohort

Drought impacted communities across the whole HNECC PHN region.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

No

SA3 Name	SA3 Code
Inverell - Tenterfield	11002
Lake Macquarie - East	11101
Lower Hunter	10601
Upper Hunter	10604
Taree - Gloucester	10805
Maitland	10602
Lake Macquarie - West	11102
Tamworth - Gunnedah	11004
Port Stephens	10603
Great Lakes	10801
Newcastle	11103
Wyong	10202
Moree - Narrabri	11003
Armidale	11001
Gosford	10201



Activity Consultation and Collaboration

Consultation

HNECC PHN will utilise its regular consultation structures including PeopleBank, Clinical and Community Advisory Committees and their wider network banks to facilitate several consultation processes. HNECC PHNs Rural Communities project officer will be regularly kept abreast of project developments and act as a further conduit between other important stakeholders including Local Health Districts and bordering PHNs.

Additionally, members of HNECC PHNs team will attend other relevant drought focussed events to further connect with communities most impacted and affected to ensure there is a full understanding of the kinds of help communities need and what

will work best for them in terms of access. Our existing communications structures and social media accounts will provide a conduit for information as will our relationships with existing PHN funded service providers and other relevant not-for-profit organisations working in the space to ensure partnerships are developed where appropriate and to minimise the risk duplication of service delivery and saturation.

HNECC has an open feedback portal available on our peoplebank drought response page that enables additional consultation with, and feedback from, affected communities. This compliments face-to-face community consultation and engagement activities. Feedback provided by the peoplebank platform is monitored daily by the HNECC engagement a strategy team, who are also coordinating Empowering our communities' activities. A communication process has been established that clarifies the dissemination of community feedback received for assessment and potential action. When online feedback is received, it is cross-referenced with our repository of local insight and key themes to ensure that it is either a) consistent with community feedback, or b) highlights additional need. The feedback is also referenced against funded activities (both geographically and activity type) to avoid any duplication of services. If there a new need/gap identified, a more detailed consultation will occur to determine if any activity can be implemented to address that need.

Collaboration

This activity is HNECC PHN led and as such consultation will occur we will collaborate where appropriate with individual grant recipients and



Activity Milestone Details/Duration

Activity Start Date

30/09/2018

Activity End Date

29/06/2021

Service Delivery Start Date

January 2019

Service Delivery End Date

June 2021

Other Relevant Milestones

Key milestones including planning, procurement and commencement of service delivery

- September – December, 2019 – Needs identification and stakeholder engagement
- January – Additional communication and marketing of upcoming community grant opportunities (traditional and digital communication channels), Community Grants applications open for submissions
- Ongoing from January 31 – 10 day rolling assessment of incoming grant applications and 10 day turnaround from approval to funding and service
- January – April, 2019 – Development of Identification of targeted projects
- May, 2019 – Commencement of targeted grant projects



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): Yes

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?

N/A

Co-design or co-commissioning comments

N/A

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

No



MH - 1301 - MH13.01 Psychological Services – Mental Health Services in Primary Care



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

1301

Activity Title *

MH13.01 Psychological Services – Mental Health Services in Primary Care

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Other Program Key Priority Area Description

Mental Health in Primary Care

Aim of Activity *

This activity aims to provide efficient and effect evidence based psychological interventions for people with moderate mental illness who are not otherwise able to access services. This activity forms the moderate intensity step in HNECC’s Stepped Care Model and provide a higher intensity service than services commissioned under activity 1.3 and a lower intensity service than services commissioned under activity 4.2.

Description of Activity *

This service will form part of a suite of services commissioned in a stepped care framework. The services will be client directed and better integrated with higher and lower intensity services, including services commissioned under activities 1.3 and 4.2 Access to services will be via a regional Access and Referral service activity 7.1 to ensure clients are directed to the most appropriate service. Services will be delivered by appropriately experienced and qualified allied health providers. Innovate models of delivery that improve access to hard-to-reach populations (such as outreach models and colocations) are encouraged.

Needs Assessment Priorities ***Needs Assessment**

HNECC PHN Needs Assessment 2019/20-2021/22

Priorities

Priority	Page reference
Reduced capacity of services to recruit and retain allied health staff	51
Lack of integration and collaboration between mental health services	51



Activity Demographics

Target Population Cohort

People with mild to moderate mental health issues who are otherwise unable to engage in psychological services due to a range of factors including, but not limited to age, socioeconomic status, rurality, Aboriginality, and cultural background.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Kempsey - Nambucca	10802
Inverell - Tenterfield	11002
Port Macquarie	10804
Lake Macquarie - East	11101
Lower Hunter	10601
Upper Hunter	10604
Taree - Gloucester	10805
Maitland	10602
Lake Macquarie - West	11102
Tamworth - Gunnedah	11004
Port Stephens	10603
Great Lakes	10801
Newcastle	11103
Wyong	10202
Moree - Narrabri	11003
Armidale	11001
Gosford	10201



Activity Consultation and Collaboration

Consultation

As this is a continuation of existing activities, consultation has been varied. However, a mix of consultation with providers, clinicians, consumers, carers, and Local Health Districts has occurred.

Collaboration

HNECC will work in collaboration with existing providers, Local Health Districts, consumers, and community members to continue to refine low intensity services which are integrated into existing service structures.



Activity Milestone Details/Duration

Activity Start Date

28/02/2018

Activity End Date

29/06/2022

Service Delivery Start Date

01/07/2019

Service Delivery End Date

30/06/2022

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?

Not Applicable

Co-design or co-commissioning comments

Not Applicable

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

Yes



MH - 4020 - MH4.02 Clinical Care Coordination – Mental Health Services in Primary Care



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

4020

Activity Title *

MH4.02 Clinical Care Coordination – Mental Health Services in Primary Care

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 ***

This activity aims to support General Practice to manage clients with mental health concerns in primary care by providing timely access to specialist advice.

Description of Activity *

To support General Practitioners to manage clients with mental health concerns appropriately in primary care, HNECC have co-commissioned a GP Psychiatry Consultation Service in collaboration with select partners from the NSW PHN Network. The service is free for GPs and provides consultation and advice from a psychiatrist around a range of queries including diagnosis; medication management; referral options; risk assessment and safety planning.

Needs Assessment Priorities ***Needs Assessment**

HNECC PHN Needs Assessment 2019/20-2021/22

Priorities

Priority	Page reference
Reduced access to psychiatrists	51
Support for GPs to play a central role in mental health care	51



Activity Demographics

Target Population Cohort

General Practitioners

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Kempsey - Nambucca	10802
Inverell - Tenterfield	11002
Port Macquarie	10804
Lake Macquarie - East	11101
Lower Hunter	10601
Upper Hunter	10604
Taree - Gloucester	10805
Maitland	10602
Lake Macquarie - West	11102
Tamworth - Gunnedah	11004
Port Stephens	10603
Great Lakes	10801
Newcastle	11103
Wyong	10202
Moree - Narrabri	11003
Armidale	11001
Gosford	10201



Activity Consultation and Collaboration

Consultation

Prior to commissioning this service, HNECC consulted with key stakeholders including General Practice and the LHDs. Other PHNs in the partnership also conducted local consultation.

Collaboration

HNECC continues to work in collaboration with existing providers, Local Health Districts, General Practice, and the NSW PHN Network to refine and improve this service.



Activity Milestone Details/Duration

Activity Start Date

29/06/2019

Activity End Date

29/06/2022

Service Delivery Start Date

01/07/2019

Service Delivery End Date

30/06/2022

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?

Yes

Decommissioning

No

Decommissioning details?

Not Applicable

Co-design or co-commissioning comments

Not Applicable

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

No



MH - 4030 - MH4.03 GP Psychiatry Consultation Service



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

4030

Activity Title *

MH4.03 GP Psychiatry Consultation Service

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 ***

This activity aims to support General Practice to manage clients with mental health concerns in primary care by providing timely access to specialist advice.

Description of Activity *

To support General Practitioners to manage clients with mental health concerns appropriately in primary care, HNECC have co-commissioned a GP Psychiatry Consultation Service in collaboration with select partners from the NSW PHN Network. The service is free for GPs and provides consultation and advice from a psychiatrist around a range of queries including diagnosis; medication management; referral options; risk assessment and safety planning.

Needs Assessment Priorities ***Needs Assessment**

HNECC PHN Needs Assessment 2019/20-2021/22

Priorities

Priority	Page reference
Reduced access to psychiatrists	51
Support for GPs to play a central role in mental health care	51



Activity Demographics

Target Population Cohort

General Practitioners

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Kempsey - Nambucca	10802
Inverell - Tenterfield	11002
Port Macquarie	10804
Lake Macquarie - East	11101
Lower Hunter	10601
Upper Hunter	10604
Taree - Gloucester	10805
Maitland	10602
Lake Macquarie - West	11102
Tamworth - Gunnedah	11004
Port Stephens	10603
Great Lakes	10801
Newcastle	11103
Wyong	10202
Moree - Narrabri	11003
Armidale	11001
Gosford	10201



Activity Consultation and Collaboration

Consultation

Prior to commissioning this service, HNECC consulted with key stakeholders including General Practice and the LHDs. Other PHNs in the partnership also conducted local consultation.

Collaboration

HNECC continues to work in collaboration with existing providers, Local Health Districts, General Practice, and the NSW PHN Network to refine and improve this service.



Activity Milestone Details/Duration

Activity Start Date

29/06/2019

Activity End Date

29/06/2022

Service Delivery Start Date

01/07/2019

Service Delivery End Date

30/06/2022

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?

Yes

Decommissioning

No

Decommissioning details?

Not Applicable

Co-design or co-commissioning comments

Not Applicable

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

No



MH - 5020 - MH5.02 Suicide Follow up and Support



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

5020

Activity Title *

MH5.02 Suicide Follow Up and Support

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 *

Effective follow up support for those in a suicidal crisis, have attempted suicide or are bereaved by suicide.

Description of Activity *

Commissioning of evidence-based aftercare services for those who have attempted suicide or are in a suicidal crisis. This activity will attempt to reduce representation to hospital.

Supporting the establishment and integration of local suicide postvention groups to minimise contagion and ensure all people effected by the suicide have their psychological needs met.

Needs Assessment Priorities *

Needs Assessment

HNECC PHN Needs Assessment 2019/20-2021/22

Priorities

Priority	Page reference
High rates of mental illness, intentional self-harm, and suicide	51
Mental health and suicide prevention needs of males aged 25-65 years	51
Mental health and suicide prevention needs of males aged over 80 years	51
Mental health and suicide prevention needs of Aboriginal and Torres Strait Islander people	51
Mental health and suicide prevention needs of older people residing in aged care facilities	51
Mental health and suicide prevention needs of members of LGBTIQ community members	51
Limited capacity of services to develop and implement an approach to quality	51
Lack of a systematic evidence-based post-vention strategy across communities	51
Stigma associated with mental illness including help seeking	51
Support for GPs to play a central role in mental health care	51
Mental health and suicide prevention needs of youth	51
Lack of integration and collaboration between mental health services	51



Activity Demographics

Target Population Cohort

Whole of population with priority to high-risk population groups

In Scope AOD Treatment Type *

Indigenous Specific *

Yes

Indigenous Specific Comments

Suicide prevention needs of Aboriginal and Torres strait Islander people are a high-risk group in the needs assessment so will be targeted in this activity. There will be consultation facilitated through the aboriginal health team with key local aboriginal people and groups to ensure the program will meet the needs of each different community.

Coverage

Whole Region

No

SA3 Name	SA3 Code
Port Macquarie	10804
Lake Macquarie - East	11101
Lower Hunter	10601
Upper Hunter	10604
Taree - Gloucester	10805
Maitland	10602
Lake Macquarie - West	11102
Tamworth - Gunnedah	11004
Port Stephens	10603
Great Lakes	10801
Newcastle	11103
Wyong	10202
Moree - Narrabri	11003
Armidale	11001
Gosford	10201



Activity Consultation and Collaboration

Consultation

As this is a continuation of existing activities, consultation has been varied. However, a mix of consultation with providers, clinicians, consumers, carers, and Local Health Districts has occurred

Collaboration

HNECC will work in collaboration with existing providers, Local Health Districts, consumers, and community members to continue to refine low intensity services which are integrated into existing service structures



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2022

Service Delivery Start Date

01/07/2019

Service Delivery End Date

30/06/2022

Other Relevant Milestones



Activity Commissioning

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

Not Yet Known: Yes

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?

Yes

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

Yes

Decommissioning

No

Decommissioning details?

N/A

Co-design or co-commissioning comments

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

Yes



MH - 5030 - MH5.03 Regional planning for suicide prevention



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

5030

Activity Title *

MH5.03 Regional planning 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 ***

Evidenced based and partnered regional planning of suicide prevention using dynamic simulation

Description of Activity *

To ensure evidence based commissioning of suicide prevention services that are co-designed with local LHDs, services providers and those with a lived experience HNECC PHN will be engaging the Sax Institute to do a Dynamic Simulation process for a regional plan for suicide prevention, that will inform the joint Regional Mental Health and Suicide Prevention Plan (activity MH8.1)

This process will not only support evidenced based procurement but will support the commissioning cycle through evaluation and support service providers to be accountable to the community they work for.

This process will assist HNECC PHN to effectively commission services with the limited available suicide prevention resources to targeted populations and areas in the region. This may involve decommissioning of some services based on the outcomes of the tool.

Needs Assessment Priorities *

Needs Assessment

HNECC PHN Needs Assessment 2019/20-2021/22

Priorities

Priority	Page reference
High rates of mental illness, intentional self-harm, and suicide	51
Mental health and suicide prevention needs of males aged 25-65 years	51
Mental health and suicide prevention needs of males aged over 80 years	51
Mental health and suicide prevention needs of Aboriginal and Torres Strait Islander people	51
Mental health and suicide prevention needs of older people residing in aged care facilities	51
Mental health and suicide prevention needs of members of LGBTIQ community members	51
Lack of cross-sectoral mental health promotion and prevention, and suicide prevention strategies	51
Limited capacity of services to develop and implement an approach to quality	51
Lack of a systematic evidence-based post-vention strategy across communities	51
Limited availability of early intervention services	51
Stigma associated with mental illness including help seeking	51
Support for GPs to play a central role in mental health care	51
Mental health and suicide prevention needs of youth	51
Lack of integration and collaboration between mental health services	51



Activity Demographics

Target Population Cohort

Whole of population

In Scope AOD Treatment Type *

Indigenous Specific *

Yes

Indigenous Specific Comments

Suicide prevention needs of Aboriginal and Torres strait Islander people are a high-risk group in the needs assessment so will be targeted in this plan. There will be consultation facilitated through the aboriginal health team with key local aboriginal people and groups to ensure the program will meet the needs of each different community.

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Kempsey - Nambucca	10802
Inverell - Tenterfield	11002
Port Macquarie	10804
Lake Macquarie - East	11101
Lower Hunter	10601
Upper Hunter	10604
Taree - Gloucester	10805
Maitland	10602
Lake Macquarie - West	11102
Tamworth - Gunnedah	11004
Port Stephens	10603
Great Lakes	10801
Newcastle	11103
Wyong	10202
Moree - Narrabri	11003
Armidale	11001
Gosford	10201



Activity Consultation and Collaboration

Consultation

Customisation and validation of the system dynamics model

The consultation involves the co-development of the decision support tool in partnership with the LHD and local stakeholders. To achieve this, will be three participatory workshops as follows:

- Workshop 1. A collaborative model building team, consisting of expert modellers as well as multidisciplinary subject matter experts and local stakeholders, come together in a 1-day face-to-face workshop to review the existing tool in depth and identify aspects for customisation to the HNECC context and to prioritise interventions to be integrated. The customisation of the model will draw on published literature / evidence, available local data sources, local knowledge, and expert consensus to arrive at a plausible, testable, locally appropriate model. The behaviour of the system over time will be displayed graphically by the computer modelling engine solving a set of difference equations using integration approximation and other numerical analysis techniques.
- Workshop 2. The collaborative model building team come together for a second workshop to view and critique the model that

has been customised based on the discussions at workshop 1 and between-workshop consultations with stakeholders. During Workshop 2 the model architecture, key assumptions and interventions integrated are discussed by the group. Further required data sources (inputs) to inform the parameterisation of the model are identified and processes required to gain access to these data are discussed.

- Workshop 3. The team come together again (for a half day). At this workshop the penultimate version of the model (revised based on input received at Workshop 2) is presented back to the collaborative model building group for verification, discussion, consensus, feedback of results, and further input on preferred visualisation of model outputs. The key insights derived from the model and their implications for service planning, commissioning and evaluation are presented and discussed.

Collaboration

LHDs will partner through financial and in-kind contribution to the project.

All other stakeholders will be involved in development of the model and supporting the commissioning priorities for the region.



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2020

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: Yes

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?

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?

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

No

Decommissioning

Decommissioning details?

Dependent on outcomes of the tool

Co-design or co-commissioning comments

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

No



MH - 5040 - MH5.04 Lifespan support and sustainability



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

5040

Activity Title *

MH5.04 Lifespan support and sustainability

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 ***

Evidenced based and partnered regional planning of suicide prevention using dynamic simulation

Description of Activity *

To ensure evidence based commissioning of suicide prevention services that are co-designed with local LHDs, services providers and those with a lived experience HNECC PHN will be engaging the Sax Institute to do a Dynamic Simulation process for a regional plan for suicide prevention, that will inform the joint Regional Mental Health and Suicide Prevention Plan (activity MH8.1)

This process will not only support evidenced based procurement but will support the commissioning cycle through evaluation and support service providers to be accountable to the community they work for.

This process will assist HNECC PHN to effectively commission services with the limited available suicide prevention resources to targeted populations and areas in the region. This may involve decommissioning of some services based on the outcomes of the tool.

Needs Assessment Priorities *

Needs Assessment

HNECC PHN Needs Assessment 2019/20-2021/22

Priorities

Priority	Page reference
High rates of mental illness, intentional self-harm, and suicide	51
Mental health and suicide prevention needs of males aged 25-65 years	51
Mental health and suicide prevention needs of males aged over 80 years	51
Mental health and suicide prevention needs of Aboriginal and Torres Strait Islander people	51
Mental health and suicide prevention needs of older people residing in aged care facilities	51
Mental health and suicide prevention needs of members of LGBTIQ community members	51
Lack of cross-sectoral mental health promotion and prevention, and suicide prevention strategies	51
Limited capacity of services to develop and implement an approach to quality	51
Lack of a systematic evidence-based post-vention strategy across communities	51
Limited availability of early intervention services	51
Stigma associated with mental illness including help seeking	51
Support for GPs to play a central role in mental health care	51
Mental health and suicide prevention needs of youth	51
Lack of integration and collaboration between mental health services	51



Activity Demographics

Target Population Cohort

Whole of population

In Scope AOD Treatment Type *

Indigenous Specific *

Yes

Indigenous Specific Comments

Suicide prevention needs of Aboriginal and Torres strait Islander people are a high-risk group in the needs assessment so will be targeted in this plan. There will be consultation facilitated through the aboriginal health team with key local aboriginal people and groups to ensure the program will meet the needs of each different community.

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Kempsey - Nambucca	10802
Inverell - Tenterfield	11002
Port Macquarie	10804
Lake Macquarie - East	11101
Lower Hunter	10601
Upper Hunter	10604
Taree - Gloucester	10805
Maitland	10602
Lake Macquarie - West	11102
Tamworth - Gunnedah	11004
Port Stephens	10603
Great Lakes	10801
Newcastle	11103
Wyong	10202
Moree - Narrabri	11003
Armidale	11001
Gosford	10201



Activity Consultation and Collaboration

Consultation

Customisation and validation of the system dynamics model

The consultation involves the co-development of the decision support tool in partnership with the LHD and local stakeholders. To achieve this, will be three participatory workshops as follows:

- Workshop 1. A collaborative model building team, consisting of expert modellers as well as multidisciplinary subject matter experts and local stakeholders, come together in a 1-day face-to-face workshop to review the existing tool in depth and identify aspects for customisation to the HNECC context and to prioritise interventions to be integrated. The customisation of the model will draw on published literature / evidence, available local data sources, local knowledge, and expert consensus to arrive at a plausible, testable, locally appropriate model. The behaviour of the system over time will be displayed graphically by the computer modelling engine solving a set of difference equations using integration approximation and other numerical analysis techniques.
- Workshop 2. The collaborative model building team come together for a second workshop to view and critique the model that

has been customised based on the discussions at workshop 1 and between-workshop consultations with stakeholders. During Workshop 2 the model architecture, key assumptions and interventions integrated are discussed by the group. Further required data sources (inputs) to inform the parameterisation of the model are identified and processes required to gain access to these data are discussed.

- Workshop 3. The team come together again (for a half day). At this workshop the penultimate version of the model (revised based on input received at Workshop 2) is presented back to the collaborative model building group for verification, discussion, consensus, feedback of results, and further input on preferred visualisation of model outputs. The key insights derived from the model and their implications for service planning, commissioning and evaluation are presented and discussed.

Collaboration

LHDs will partner through financial and in-kind contribution to the project.

All other stakeholders will be involved in development of the model and supporting the commissioning priorities for the region.



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2020

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: Yes

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?

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?

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

No

Decommissioning

Decommissioning details?

Dependent on outcomes of the tool

Co-design or co-commissioning comments

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

No



MH - 5050 - MH5.05 Community based suicide prevention activities



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

5050

Activity Title *

MH5.05 Community based suicide prevention activities

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 ***

Recommissioning of current suicide prevention community-based programs

Description of Activity *

Recommissioning of current suicide prevention community-based programs including community education, community capacity building and counselling services. Outcomes of the dynamic simulation process will support future recommendations for this activity.

Needs Assessment Priorities ***Needs Assessment**

HNECC PHN Needs Assessment 2019/20-2021/22

Priorities

Priority	Page reference
High rates of mental illness, intentional self-harm, and suicide	51
Mental health and suicide prevention needs of males aged 25-65 years	51
Mental health and suicide prevention needs of Aboriginal and Torres Strait Islander people	51
Mental health and suicide prevention needs of members of LGBTIQ community members	51
Stigma associated with mental illness including help seeking	51
Mental health and suicide prevention needs of youth	51



Activity Demographics

Target Population Cohort

Whole of population

In Scope AOD Treatment Type *

Indigenous Specific *

Yes

Indigenous Specific Comments

Suicide prevention needs of Aboriginal and Torres strait Islander people are a high-risk group in the needs assessment so are be targeted in this program. There will be consultation facilitated through the aboriginal health team with key local aboriginal people and groups to ensure the program will meet the needs of each different community.

Coverage

Whole Region

SA3 Name	SA3 Code
Kempsey - Nambucca	10802
Inverell - Tenterfield	11002
Port Macquarie	10804
Lake Macquarie - East	11101
Lower Hunter	10601
Upper Hunter	10604
Taree - Gloucester	10805
Maitland	10602
Lake Macquarie - West	11102
Tamworth - Gunnedah	11004
Port Stephens	10603
Great Lakes	10801
Newcastle	11103
Wyong	10202
Moree - Narrabri	11003
Armidale	11001
Gosford	10201



Activity Consultation and Collaboration

Consultation

This is an existing activity and feedback on service appropriateness is through quarterly reporting, clinical and community councils, and other alliance meetings,

Collaboration

n/a



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2022

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?

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?

Dependent on outcomes of regional suicide prevention planning

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



MH - 7010 - MH7.01 Central Access and Referral



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

7010

Activity Title *

MH7.01 Central Access and 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 ***

Core to the Stepped Care Model is a Central Access and Referral Service that consistently assesses and equitably facilitates client referrals to appropriate service types along the Stepped Care Continuum.

Description of Activity *

Following an extensive co-design process, HNECC have commissioned services in a stepped care framework (activities MH1.3, MH3.1 and MH4.2). A key element of the model is a Central Access and Referral Service which conducts a standardised clinical assessment of all referrals to services provided under activities 3.1 and 4.2. This is aligned with Department Guidance and stratifies and facilitates referral into services or to appropriate digital platforms (activity MH1.1).

HNECC's commissioning will focus on maximising capacity within the local Primary Health sector to provide services across the spectrum of stepped care. To augment the steps commissioned by HNECC, the joint regional mental health and suicide intervention plan will underpin integration and service development.

Through the commissioning of all services outlined in this AWP, HNECC work to strengthen standards regarding clinical governance, clinical information storage, performance reporting and consumer and staff feedback processes. This will be further supported by continued development of electronic referral pathways and common data management processes.

Needs Assessment Priorities ***Needs Assessment**

Priorities

Priority	Page reference
High rates of mental illness, intentional self-harm, and suicide	51
Mental health and suicide prevention needs of males aged 25-65 years	51
Mental health and suicide prevention needs of males aged over 80 years	51
Mental health and suicide prevention needs of Aboriginal and Torres Strait Islander people	51
Mental health and suicide prevention needs of older people residing in aged care facilities	51
Mental health and suicide prevention needs of members of LGBTIQ community members	51
Limited capacity of services to develop and implement an approach to quality	51
Stigma associated with mental illness including help seeking	51
Support for GPs to play a central role in mental health care	51
Mental health and suicide prevention needs of youth	51
Lack of integration and collaboration between mental health services	51



Activity Demographics

Target Population Cohort

All of population

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Kempsey - Nambucca	10802
Inverell - Tenterfield	11002
Port Macquarie	10804
Lake Macquarie - East	11101
Lower Hunter	10601
Upper Hunter	10604
Taree - Gloucester	10805
Maitland	10602
Lake Macquarie - West	11102
Tamworth - Gunnedah	11004
Port Stephens	10603
Great Lakes	10801
Newcastle	11103
Wyong	10202
Moree - Narrabri	11003
Armidale	11001
Gosford	10201



Activity Consultation and Collaboration

Consultation

As this is a continuation of existing activities, consultation has been varied. However, a mix of consultation with providers, clinicians, consumers, carers, and Local Health Districts has occurred

Collaboration

HNECC will work in collaboration with existing providers, Local Health Districts, consumers, and community members to continue to refine low intensity services which are integrated into existing service structures



Activity Milestone Details/Duration

Activity Start Date

30/06/2018

Activity End Date

29/06/2022

Service Delivery Start Date

01/07/2019

Service Delivery End Date

30/06/2022

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?

N/A

Co-design or co-commissioning comments

N/A

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

No



MH - 7020 - MH7.02 Commissioned Service Integration and Stepped Care



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

7020

Activity Title *

MH7.02 Commissioned Service Integration and Stepped Care

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 ***

To improve access to HNECC commissioned services, this activity will work to enhance eReferral capability between General Practitioners and service providers. By using platforms including HealthPathways, this should increase the likelihood of appropriate and secure referrals being made and received.

Description of Activity *

HNECC will work with General Practitioners and Service Providers to improve their capability to send and receive eReferrals. This will include development of pathways and procedures to streamline the referral process for all stakeholders, including the client.

Needs Assessment Priorities ***Needs Assessment**

HNECC PHN Needs Assessment 2019/20-2021/22

Priorities

Priority	Page reference
Support for GPs to play a central role in mental health care	51



Activity Demographics

Target Population Cohort

General Practitioners and Service Providers

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

LHD, GPs and current service providers

Collaboration

LHD, GPs and current service providers



Activity Milestone Details/Duration

Activity Start Date

01/03/2020

Activity End Date

29/12/2020

Service Delivery Start Date

March 2020

Service Delivery End Date

December 2020

Other Relevant Milestones



Activity Commissioning

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

Not Yet Known: Yes

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?

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?

N/A

Co-design or co-commissioning comments

We will work with LHD's, GPs and current service providers to design this service.

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

No



MH - 9010 - MH9.01 Response to PFAS Exposure: Additional specialised mental health and counselling services



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

9010

Activity Title *

MH9.01 Response to PFAS Exposure: Additional specialised mental health and counselling services

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Other Program Key Priority Area Description

Response to PFAS

Aim of Activity *

To ensure affected community members in Williamstown can gain access to appropriate education, services, testing, and support including reimbursement if they fear they may have been exposed to contamination.

Description of Activity *

Briefing held for all current contracted providers of PHN MHS to alert them to supplementary funding available for eligible consumers affected by the contamination, with rates in line with current contracts. Resourcing provided and information, including provider list and reimbursement claim form and statutory declaration placed on website for public access. Services promoted through local meetings and community leaders. Due to transient nature of some of the workforce in the affected area and timeframe of contamination, all providers in the HNECC footprint have received resourcing and education. The PHN will maintain current arrangements and facilitate payment of sessions.

Needs Assessment Priorities ***Needs Assessment**

HNECC PHN Needs Assessment 2019/20-2021/22

Priorities

Priority	Page reference
A lack of health service integration, coordination, and information sharing	42



Activity Demographics

Target Population Cohort

Describe the cohort that this activity will target.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Kempsey - Nambucca	10802
Inverell - Tenterfield	11002
Port Macquarie	10804
Lake Macquarie - East	11101
Lower Hunter	10601
Upper Hunter	10604
Taree - Gloucester	10805
Maitland	10602
Lake Macquarie - West	11102
Tamworth - Gunnedah	11004
Port Stephens	10603
Great Lakes	10801
Newcastle	11103
Wyong	10202
Moree - Narrabri	11003
Armidale	11001
Gosford	10201



Activity Consultation and Collaboration

Consultation

Please provide details of stakeholder engagement and consultation activities undertaken or to be undertaken to support this activity.

Consultation will be conducted with key stakeholders via the MH/D&A expert reference group as well as through provider networks. Consumer consultation will be conducted utilising PHN online consumer engagement platform (PeopleBank) as well as the community advocacy and support group representing the Williamstown community.

Collaboration

List and describe the role of each stakeholder that will be involved in designing and/or implementing the activity, including stakeholders such as Local Health Networks, state/territory governments, or other relevant support services.

Collaboration with other government departments in providing GP, provider, and public education.

Collaboration with local community leaders to promote available service pathways.

Collaboration with PHN MHS providers and GPs to ensure access for affected consumers across the PHN footprint.

Collaboration with other PHN and primary care providers outside HNECC footprint in cases where eligible participants have left the footprint.



Activity Milestone Details/Duration

Activity Start Date

30/06/2016

Activity End Date

29/06/2022

Service Delivery Start Date

February 2019

Service Delivery End Date

June 2022

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: Yes
Open Tender: No
Expression Of Interest (EOI): No
Other Approach (please provide details): Yes

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

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

No



MH - 10010 - MH10.01 Mental Health in Residential Aged Care Facilities



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

10010

Activity Title *

MH10.01 Mental Health in Residential Aged Care Facilities

Existing, Modified or New Activity *

New Activity



Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Other Program Key Priority Area Description

Mental Health in RACFs

Aim of Activity *

To improve access to primary mental health care services to people living in the region's Residential Aged Care Facilities.

Description of Activity *

HNECC currently commission service providers to deliver evidence based short term evidence based psychological interventions in a primary care setting, for people with mental illness or the provisional diagnosis of mental illness who are less likely to have their needs met through other primary mental health care services. In line with old ATAPS guidelines, these services have traditionally not been allowed to be delivered into Residential Aged Care Facilities. HNECC have funded a small number of sessions of psychological services into Residential Aged Care through allied health funding in two LGAs and have more recently expanded these services in an additional two pilot locations. To enhance the reach of these clinical services, sessions and funding will be allocated specifically for provision of service to the target cohort.

Additionally, a three-year strategy has been developed to pilot a range of evidence-based interventions in the RACF setting. These activities span the stepped care spectrum and aim to provide choice in intervention and diversity of workforce while achieving clinical outcomes. Activities will be subject to an evaluation, which will further inform commissioning of services for this cohort.

Needs Assessment Priorities *

Needs Assessment

HNECC PHN Needs Assessment 2019/20-2021/22

Priorities

Priority	Page reference
Mental health and suicide prevention needs of older people residing in aged care facilities	51



Activity Demographics

Target Population Cohort

Residents of Aged Care Facilities living in the HNECC PHN region with or at risk of developing mental illness.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Kempsey - Nambucca	10802
Inverell - Tenterfield	11002
Port Macquarie	10804
Lake Macquarie - East	11101
Lower Hunter	10601
Upper Hunter	10604
Taree - Gloucester	10805
Maitland	10602
Lake Macquarie - West	11102
Tamworth - Gunnedah	11004
Port Stephens	10603
Great Lakes	10801
Newcastle	11103
Wyong	10202
Moree - Narrabri	11003
Armidale	11001
Gosford	10201



Activity Consultation and Collaboration

Consultation

Consultation has occurred with a range of stakeholders including RACFs, residents, carers, GPs, geriatricians, community pharmacists and councils. A literature review and environmental scan of organisations currently delivering interventions in the space has also occurred.

Collaboration

Collaboration will occur with relevant aged care stakeholders, including RACFs, LHD aged care services, psycho-geriatricians, consumers, and their carers.



Activity Milestone Details/Duration

Activity Start Date

30/11/2018

Activity End Date

29/06/2022

Service Delivery Start Date

January 2019

Service Delivery End Date

June 2022

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: Yes

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?

N/A

Co-design or co-commissioning comments

Over the past 12 months, HNECC engaged Nexus Management Consultants to facilitate a co-design process. The process undertaken consisted of:

- Literature Review
- National review of current service models
- One strategy workshop engaging a range of stakeholders
- Three regional workshops that engaged a broad range of stakeholder to consider a proposed model
- GP focus groups
- Online consultation

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

Yes



MH - 12020 - MH12.02 Capacity build Psychological Services delivering to vulnerable and hard to reach cohorts



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

12020

Activity Title *

MH12.02 Capacity build Psychological Services delivering to vulnerable and hard to reach cohorts

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 ***

Several barriers to delivering services too hard to reach and vulnerable communities have been identified. This includes delivery into RACFs, to older people living in the community and to people with, or at risk of homelessness. To mitigate these challenges, HNECC have identified strategies to improve access and effectiveness of services delivered. By investing funding to trial and evaluate appropriate models of care, along with investing resources to build sustainable partnerships and referral partnerships should assist in embedding these services into challenging environments.

Description of Activity *

In parallel to provision of sessional psychological therapies in RACFs, HNECC will work with service providers and RACFs to codesign, trial and evaluate models of care suitable for RACFs. To assist embedding these services, HNECC will provide resources to existing providers to effectively build sustainable relationships and referral pathways. It is anticipated that this will ensure the long-term effectiveness of services in the RACF setting.

Needs Assessment Priorities *

Needs Assessment

HNECC PHN Needs Assessment 2019/20-2021/22

Priorities

Priority	Page reference
Cost barriers to accessing mental health and suicide prevention services	51
Reduced capacity of services to recruit and retain allied health staff	51
Limited capacity of services to develop and implement an approach to quality	51
Stigma associated with mental illness including help seeking	51
Support for GPs to play a central role in mental health care	51



Activity Demographics

Target Population Cohort

Service Providers

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

Hard to reach populations or their advocates, GPs, RACFs, other aged care providers, current service providers

Collaboration

Hard to reach populations or their advocates, GPs, RACFs, other aged care providers, current service providers



Activity Milestone Details/Duration

Activity Start Date

01/03/2020

Activity End Date

29/06/2021

Service Delivery Start Date

March 2020

Service Delivery End Date

June 2021

Other Relevant Milestones



Activity Commissioning

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

Not Yet Known: Yes

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?

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

We will work with key stakeholders to develop and design these services

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

No



MH - 12030 - MH12.03 Outcome based commissioning capacity building



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

12030

Activity Title *

MH12.03 Outcome based commissioning capacity building

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 ***

To improve the capacity of providers to identify and report against outcomes to demonstrate quality and value of services.

Description of Activity *

This activity is for the further development and maturity of commissioning and performance, in how we will describe performance, quality and value of our services and programs and demonstrate the difference our PHN is making.

The objectives are:-

Develop KPI's and outcomes that describe a holistic picture of how services are performing regarding utilisation of quality and integrated care requirements (i.e. eReferrals, Health Pathways, Patient measures, cultural requirements, access), session targets etc.

Provide an overall description of commissioning performance that enables structured quality reports back to our service providers and to the Department on things that really matter, and that systematically support service improvement.

When considering decommissioning a service and/or withholding payment, determine what the individual service reports could contain to enable an informed decision.

Needs Assessment Priorities *

Needs Assessment

HNECC PHN Needs Assessment 2019/20-2021/22

Priorities

Priority	Page reference
Limited capacity of services to develop and implement an approach to quality	51



Activity Demographics

Target Population Cohort

Service Providers

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

Current service providers

Collaboration

Current service providers



Activity Milestone Details/Duration

Activity Start Date

01/03/2020

Activity End Date

29/06/2021

Service Delivery Start Date

March 2020

Service Delivery End Date

30/06/2021

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

This activity will be co designed with all current service providers, consumers, carers, community and clinical councils, and State and National Peak Bodies

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

No



MH - 120010 - MH12.01 Workforce development and capacity building in mental health



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

120010

Activity Title *

MH12.01 Workforce development and capacity building in mental health

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 ***

To implement a full suite of stepped care services into the future, HNECC need to develop the workforce who will be required to work within the prescribed models of care. This includes building new workforces (such as peer work), upskilling existing workforces (such as clinicians working in Residential Aged Care Facilities), sustaining workforces (such as credentialled mental health nurses), and protecting the limited workforce from burn-out. This activity will help develop efficient and effective workforces, particularly in areas where workforce shortage and workforce failure has previously been identified. Activities may include funding specific professional development, scholarships to assist credentialing and targeted traineeships. To further support the implementation of Stepped Care HNECC will upskill non-mental health trained medical and allied health professionals in mental health. This activity will assist in improving the skills and confidence of medical and allied health professionals who regularly work with people who may be experiencing, or at risk of developing mild to moderate mental illness to identify and appropriately refer to the range of services, including low intensity services.

Description of Activity *

HNECC will engage key stakeholders, including current commissioned providers and the clinical and community councils to identify skills gaps and opportunities. Other sources such as the National Mental Health Planning Framework, the HNECC Joint Regional Plan and data collected from provider quarterly reports will also be referenced when identifying needs

Needs Assessment Priorities *

Needs Assessment

HNECC PHN Needs Assessment 2019/20-2021/22

Priorities

Priority	Page reference
Mental health and suicide prevention needs of Aboriginal and Torres Strait Islander people	51
Reduced capacity of services to recruit and retain allied health staff	51
Limited availability of early intervention services	51
Support for GPs to play a central role in mental health care	51
Lack of integration and collaboration between mental health services	51



Activity Demographics

Target Population Cohort

Mental health service providers, General Practitioners, and allied health professionals, including pharmacists

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

Current providers, RACFs, GPs, Peak Bodies

Collaboration

Current providers, RACFs, GPs, Peak Bodies



Activity Milestone Details/Duration

Activity Start Date

01/03/2020

Activity End Date

29/06/2021

Service Delivery Start Date

March 2020

Service Delivery End Date

June 2021

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

This activity will be codesign with key stakeholders, including current commissioned providers and the clinical and community councils.

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

No



MH-CV19 - 1301 - MH13.01 Older Australians - Covid Mental Health Support



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH-CV19

Activity Number *

1301

Activity Title *

MH13.01 Older Australians - Covid Mental Health Support

Existing, Modified or New Activity *

New Activity



Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Other Program Key Priority Area Description

PHN COVID-19 Emergency Mental Health Support

Aim of Activity *

Reduce the disproportionate impact of physical distancing measures associated with COVID-19 on the mental health and wellbeing of older people.

Description of Activity *

*Promotion and coordination of connections to services and support in the region for older people experiencing social isolation and/or loneliness.

*Improve access to physical and mental health services for older people experiencing social isolation and/or loneliness who may be at risk of mental illness, including those who may have experienced service disruption.

Needs Assessment Priorities *

Needs Assessment

HNECC PHN Needs Assessment 2019/20-2021/22

Priorities

Priority	Page reference
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A lack of health service integration, coordination, and information sharing	42
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Activity Demographics

Target Population Cohort

People over 65, including Aboriginal and Torres Strait Islander people over 55, living either in the community or in Residential Aged Care Facilities (RACFs) who are experiencing social isolation and/or loneliness because of the Pandemic and who are at risk of, or have, mental health issues. This includes older carers of people with mental or physical health issues who are also likely to have lost access to normal social networks and supports, which assist their wellbeing, due to the Pandemic.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

Existing Service Providers
 The region's RACFs
 Community and Clinical Advisory Committees

Collaboration



Activity Milestone Details/Duration

Activity Start Date

13/09/2020

Activity End Date

30/12/2021

Service Delivery Start Date

September 2020

Service Delivery End Date

31/12/2021

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



MH-CV19 - 1302 - MH13.02 Indigenous Australians - Covid Mental Health Support



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH-CV19

Activity Number *

1302

Activity Title *

MH13.02 Indigenous Australians - Covid Mental Health Support

Existing, Modified or New Activity *

New Activity



Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Other Program Key Priority Area Description

PHN COVID-19 Emergency Mental Health Support

Aim of Activity *

Support Indigenous Australians who may be socially isolated or financially impacted by the COVID-19 pandemic to access mental health services and supports.

Description of Activity *

Commission culturally safe additional mental health services, to build capacity of existing services funded by PHNs in the region for Aboriginal and Torres Strait Islander People;

Build capacity of the workforce providing services to Aboriginal and Torres Strait Islander people to restore services as restrictions associated with the pandemic are lifted; and

Consult with regional Aboriginal Controlled Community Health Services (ACCHSs) regarding implementation of the enhanced services.

Needs Assessment Priorities *

Needs Assessment

HNECC PHN Needs Assessment 2019/20-2021/22

Priorities

Priority	Page reference
A lack of health service integration, coordination, and information sharing	42



Activity Demographics

Target Population Cohort

Aboriginal and Torres Strait Islander people

In Scope AOD Treatment Type *

Indigenous Specific *

Yes

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

Existing service providers
Clinical and Community Advisory Committees
Regional AMS/ ACCHOS and Land Councils as appropriate

Collaboration

As above when appropriate



Activity Milestone Details/Duration

Activity Start Date

13/09/2020

Activity End Date

30/12/2021

Service Delivery Start Date

September 2020

Service Delivery End Date

31/12/2021

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



MH-CV19 - 1303 - MH13.03 CALD Populations - Covid Mental Health Support



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH-CV19

Activity Number *

1303

Activity Title *

MH13.03 CALD Populations - Covid Mental Health Support

Existing, Modified or New Activity *

New Activity



Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Other Program Key Priority Area Description

PHN COVID-19 Emergency Mental Health Support

Aim of Activity *

Support members for culturally and linguistically diverse groups those that are socially isolated or financially impacted by the COVID-19 pandemic to access mental health services and supports.

Description of Activity *

Enhance existing commissioned mental health services targeting people from a CALD background;

Promote availability of mental health services and supports associated with the mental health response to the pandemic to CALD groups in the region; or

Build capacity of services to better meet the needs of people from a CALD background during the pandemic and to build protective factors.

Needs Assessment Priorities ***Needs Assessment**

HNECC PHN Needs Assessment 2019/20-2021/22

Priorities

Priority	Page reference
A lack of health service integration, coordination, and information sharing	42



Activity Demographics

Target Population Cohort

People from a culturally and linguistically diverse (CALD) background

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

Existing service providers
Community and Clinical Advisory committees

Collaboration



Activity Milestone Details/Duration

Activity Start Date

13/09/2020

Activity End Date

30/12/2021

Service Delivery Start Date

September 2020

Service Delivery End Date

31/12/2021

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



CHHP - 2040 - MH2.04 headspace Demand Management - Maitland & Tamworth



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

CHHP

Activity Number *

2040

Activity Title *

MH2.04 headspace Demand Management - Maitland & Tamworth

Existing, Modified or New Activity *

New Activity



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 headspace Demand Management & Enhancement Program aims to: -

- Improve demand management at headspace services, increasing access and reducing wait time for young people aged 12 to 25 years to access high quality youth friendly mental health support; and
- Enhancing quality of experience for young people aged 12-25 years accessing mental health services provided through headspace.

Specifically, under this Program we will deliver the following: -

headspace Maitland: -

- Provide refurbishment and fit-out of the existing Maitland site, creating two new consulting rooms; and

headspace Tamworth: -

- Engage mental health workers to provide brief interventions/assessment clinics and walk-in services including group therapy;
- Undertake minor IT upgrades; and
- Deliver additional staff training

Description of Activity *

headspace Maitland: -

- Engage a builder to complete minor internal building works at headspace Maitland centre. This building project will increase the Centre's capacity through the addition of two more consulting rooms by the end of 2020/beginning of 2021. The increase in capacity will assist with the waitlist reduction strategy by adding more space for private providers. The Centre will also offer more

clinical space to relevant services that the Centre currently struggles with to accommodate (including alcohol and other drug services, carer support services and domestic violence services).

headspace Tamworth: -

- The Brief Assessment Clinic is designed to reduce wait times for young people within the Tamworth and New England Northwest region. It is proposed 2 FTE qualified staff be employed to attend to young people who are new referrals to the headspace centre via a “Walk-in” basis or within 7 days via videoconference/telephone intake assessment for those out of the Tamworth and New England Northwest areas. The team will provide welfare checks and care coordination/case management to young people who have undertaken the brief assessment clinic and are awaiting one-to-one intervention and provide group therapy to young people waiting for individual services.

Needs Assessment Priorities *

Needs Assessment

HNECC PHN Needs Assessment 2019/20-2021/22

Priorities

Priority	Page reference
A lack of health service integration, coordination, and information sharing	42
Youth health needs	42
Rural health disparities	42
Lack of prevention and early intervention services	42
Reduced access to services for children and youth	42
Reduced access to services in rural and remote areas	42
High rates of mental illness, intentional self-harm, and suicide	51
Mental health and suicide prevention needs of members of LGBTIQ community members	51
Cost barriers to accessing mental health and suicide prevention services	51
Lack of cross-sectoral mental health promotion and prevention, and suicide prevention strategies	51
Limited support for families and carers of people living with mental illness	51
Limited availability of early intervention services	51
Mental health and suicide prevention needs of youth	51



Activity Demographics

Target Population Cohort

Young people aged 12 - 25

In Scope AOD Treatment Type *

Indigenous Specific *

Yes

Indigenous Specific Comments

Through targeted activities and engagement with the sector via Youth Reference Groups, Inter-agency Meetings, and Aboriginal Medical Services

Coverage**Whole Region**

No

SA3 Name	SA3 Code
Maitland	10602
Tamworth - Gunnedah	11004

**Activity Consultation and Collaboration****Consultation**

headspace Maitland and headspace Tamworth will continue to collaborate with other services in the sector to ensure they are receiving referrals that are appropriate and referring to services that are youth friendly and appropriate for young people. They will collaborate with other agencies and services to identify trends, themes and/or common presentation in young people that can be best met in partnership or via group response. Further, they will consult with clients about how they feel their needs can be met and Consortia for clinical practice and wait list reduction strategies. Consultation will occur with Youth Reference Group for services being offered, potential partnerships to put in place, areas of need they can identify, and the fit out of the two new spaces at headspace Maitland.

Collaboration

headspace Maitland and headspace Tamworth will ensure that all current collaboration partners remain in place to meet the needs of young people. Collectively we will work with the headspace National Office team, Orygen the Centre of Excellence for Youth, to put in place any partnerships that will assist in the preparation of the two new consulting rooms and walk-in service.

**Activity Milestone Details/Duration****Activity Start Date**

30/06/2020

Activity End Date

29/06/2022

Service Delivery Start Date

01/07/2020

Service Delivery End Date

30/06/2022

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?

Not Applicable

Co-design or co-commissioning comments

headspace Maitland and headspace Tamworth will continue to engage Youth Reference Groups, Parent & Family Groups, AMS's, community-based organisations etc to design and develop consultation rooms and walk-in service.



CHHP - 2300 - MH2.03 – Community Health and Hospitals Program - headspace Wait Time Reduction Program - headspace



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

CHHP

Activity Number *

2300

Activity Title *

MH2.03 – Community Health and Hospitals Program - headspace Wait Time Reduction Program - headspace

Existing, Modified or New Activity *

New Activity



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 headspace Wait Time Reduction Program:

- Identifies existing headspace services experiencing high wait times for clinical services and develops and implements activities and initiatives to assist in reducing these wait times.
- Supports the long-term sustainability of the headspace program by improving access to services, appropriately managing demand and improving the health outcomes of young people aged 12 to 25 with, or at risk of, mental illness access headspace services, and their families.
- Improves data collection and reporting on headspace wait times to support planning, research and analysis of headspace services demand.
- Increasing the efficiency and effectiveness of primary mental health services for young people aged 12 to 25 with, or at risk of, mental illness; and
- Improving access to and integration of primary mental health care services to ensure young people with mental illness receive the right care in the right place at the right time.

Description of Activity *

This activity supports strategies aimed at increasing access to headspace services and reducing wait times at headspace sites for young people aged to 12 to 25.

- Collaborate with headspace National Office and PHN to undertake analysis, plan, co-design and implement strategies that aim to reduce wait times at headspace services.
- Potential activities include increasing clinical workforce capacity, capital works improvements, providing additional group or drop in sessions, or implementing improved prioritisation and wait time reduction procedures, monitoring cancellations to maximise attendance from wait lists, referrals to alternative services, arranging student placements to increase staffing capacity, implementing quality improvement initiatives, and augmenting the existing headspace platform to provide better care for young people with severe and complex conditions.
- Target activities to improve wait times for young people with the highest need, including a focus on reducing wait times at headspace Maitland.
- Ensure activities are compliant with the headspace Model Integrity Framework and Trade Mark Licence Deed.

Needs Assessment Priorities *

Needs Assessment

HNECC PHN Needs Assessment 2019/20-2021/22

Priorities

Priority	Page reference
Lack of prevention and early intervention services	42
Mental health and suicide prevention needs of members of LGBTIQ community members	51
Cost barriers to accessing mental health and suicide prevention services	51
Limited availability of early intervention services	51
Mental health and suicide prevention needs of youth	51
Lack of integration and collaboration between mental health services	51
Lack of integration, flexibility and cultural appropriateness of mental health and drug and alcohol services	60



Activity Demographics

Target Population Cohort

Young people aged 12 - 25

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

No

SA3 Name	SA3 Code
Armidale	11001
Gosford	10201



Activity Consultation and Collaboration

Consultation

Headspace Maitland will collaborate with other services in the sector to ensure we are receiving referrals that are appropriate and referring to services that are youth friendly and appropriate for young people.

We will collaborate with other agencies and services to identify trends, themes and/or common presentation in young people that can be best met in partnership or via group response.

We will consult with clients about how they feel their needs can be met. Consultation will occur with our Youth Reference Group for services being offered, potential partnerships to put in place and areas of need they can identify.

We will continue to consult with our Consortia for clinical practice and wait list reduction strategies.

Collaboration

Headspace Maitland will ensure that all current collaboration partners remain in place to meet the needs of young people.

We will work with the headspace National Office team, Orygen the Centre of Excellence for Youth, and the PHN, to put in place any partnerships that will assist in reducing wait times for young people – this may look like a formal collaboration with universities for clinical placements, external providers, or other services to make this process effective.



Activity Milestone Details/Duration

Activity Start Date

26/09/2019

Activity End Date

24/09/2020

Service Delivery Start Date

December 2019

Service Delivery End Date

June 2022

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?

Not Applicable

Co-design or co-commissioning comments

HNECC PHN will work with the lead agency, and headspace National to develop strategies to reduce wait time.



CHHP-Op - 205 - CCHP 2.05 Community Health and Hospitals Program - headspace Wait Time Reduction



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

CHHP-Op

Activity Number *

205

Activity Title *

CCHP 2.05 Community Health and Hospitals Program - headspace Wait Time Reduction

Existing, Modified or New Activity *

New Activity



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

