Country SA - Primary Mental Health Care 2019/20 - 2023/24 Activity Summary View



MH - 1000 - Empowering our Communities SA - updated



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

МН

Activity Number *

1000

Activity Title *

Empowering our Communities SA - updated

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Mental Health

Other Program Key Priority Area Description

Aim of Activity *

Service continuity for clinical services previous funded under the Drought initiative.

Description of Activity *

6 month continuation of psychological therapies services from January 2021 - June 2021.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Integrated and coordinated holistic services (MH-5)	68
Low intensity service delivery to reduce waiting lists and increased access of mental health to areas of high disadvantage (MH-1)	65
Address service gaps in the provision of psychological therapies and outreach to rural and remote areas (MH-3)	67
Community education and training opportunities for sector staff (MH-7)	69



Activity Demographics

Target Population Cohort

Drought effected communities.

CSAPHN's consumer focus is translated through John and Jenny. John and Jenny live, work and play in communities across country South Australia. The consumer focus of John and Jenny as a whole person living in country SA supports a holistic approach that takes consideration of multiple factors that may impact the ability of the individual, family or community to experience health optimisation and wellbeing as they go about their daily lives.

John and Jenny represent all members of our community. They are individuals across all age groups, cultural values, family groupings, ability or disability, advantage or disadvantage, sexual orientation.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



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Collaboration

-



Activity Milestone Details/Duration

Activity Start Date

30/06/2018

Activity End Date

29/06/2021

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: 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?

Yes

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

No
Has this activity previously been co-commissioned or joint-commissioned?
No
Decommissioning
No
Decommissioning details?
-
Co-design or co-commissioning comments
-
Is this activity in scope for data collection under the Mental Health National Minimum Dataset?
Yes
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MH - 1100 - Continuation of Integrated low intensity activity within psychological therapies - updated



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

1100

Activity Title *

Continuation of Integrated low intensity activity within psychological therapies - updated

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 *

1.1 Invigorate investment in low intensity workforce development and capacity building to remove barriers to access and lead to an increase the in number of clients accessing low intensity services, enabling clients to have their service level aligned to their requirements.

Establishing referral pathways into psychological therapy triage and allocation practices to assist with demand management, priority step up referrals as part of the integrated regional stepped care approach.

1.2 Continue to commission low intensity mental health services across the CSAPHN region pending to 2020/21.

Increase delivery of low intensity psychological therapy sessions across CSAPHN via increase in access and availability through a range of targeted, cost effective service modalities.

Targeted low intensity services and psychological interventions to support people most appropriately with, or at risk of, mild mental illness as part of a stepped care approach to mental health service delivery.

Description of Activity *

1.1 Results expected to be achieved within planning period

- Face to face and phone low intensity services and referral pathways embedded into psychological therapy triage and allocation practices.
- Workforce development and education of low intensity workers within 5 regional psychological therapies providers
- 1.2 Results expected to be achieved within planning period
 - 24/7 phone and online low intensity psychological therapies service, with priority referral to face to face high Intensity psychological therapies provider
 - Face to face low intensity psychological therapies services in areas of need

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority		Page reference
1	ce delivery to reduce waiting access of mental health to vantage (MH-1)	65



Activity Demographics

Target Population Cohort

People with or at risk of mild mental illness targeting but not limited to:

- young people;
- people living in rural and remote communities;
- people at risk of suicide.

CSAPHN's consumer focus is translated through John and Jenny. John and Jenny live, work and play in communities across country South Australia. The consumer focus of John and Jenny as a whole person living in country SA supports a holistic approach that takes consideration of multiple factors that may impact the ability of the individual, family or community to experience health optimisation and wellbeing as they go about their daily lives.

John and Jenny represent all members of our community. They are individuals across all age groups, cultural values, family groupings, ability or disability, advantage or disadvantage, sexual orientation.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

SA3 Name	SA3 Code
Campbelltown (SA)	40104
Lower North	40502
Mid North	40503
Gawler - Two Wells	40201
Yorke Peninsula	40504
Murray and Mallee	40703
Limestone Coast	40702
Barossa	40501
Outback - North and East	40602
Eyre Peninsula and South West	40601
Fleurieu - Kangaroo Island	40701
Adelaide Hills	40102



Consultation

CSAPHN has ongoing commitments to consultation through our established Primary Health Care Committees, which cover much of our regional catchment including:

- Barossa Local Health Cluster
- Far West Local Health Cluster
- Fleurieu Region Community Services Advisory Committee
- Limestone Coast Community Service Round Table (LCCSRT)
- Lower Eyre Local Health Cluster
- Mid North Local Health Cluster
- Riverland Community Services Alliance
- Roxby Downs Community Board Health Forum
- Upper Eyre Local Health Cluster
- Yorke Peninsula Local Health Cluster

These Committees are essential to provide the community perspective to Country SA PHN and ensure that decisions, investments are innovations are patient centred, cost-effective, locally relevant and aligned to local care experiences and expectations.

Mental Health, Alcohol and Other Drug community consultations were conducted with both service providers and community members providing context to data already gathered through the literature.

CSAPHN is also developing an evidence based Foundation Plan for Mental Health and Suicide Prevention in the region with CHSA LHN and other key stakeholders. Once completed it will provide a vital resource to the region to support the integrated delivery of mental health and suicide prevention services within the community. The Plan will identify needs and gaps, reduce duplication, remove inefficiencies and encourage innovation.

Also, in conjunction with CHSA LHN, we have undergone extensive service mapping of core and commissioned services across both sectors with the stepped care model and held 6 jointly chaired forums focusing on the findings as well as key issues surrounding:

- local service gaps;
- pressure points;
- points of intersection; and
- areas of opportunity to further collaborate.

Collaboration

Ongoing collaboration and operations strategies with the regions 5 Psychological Therapy providers for referral, step up and down of clients:

- Country and Outback Health
- Focus One Health
- Sonder
- Summit Health
- Murray Mallee General Practice Network

In supporting the stepped care approach collaboration would occur across the sector, specifically between the:

- mental health sector
- alcohol and other drugs sector
- broader primary health care environment
- acute services
- community services
- aged care services
- child and youth services
- social services
- Aboriginal health services
- Royal Flying Doctor Service



Activity Milestone Details/Duration

30/06/2019

Activity End Date

29/06/2023

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones



Yes

Please identify your intended procurement approach for commissioning services under this activity:
Not Yet Known: No Continuing Service Provider / Contract Extension: Yes Direct Engagement: No Open Tender: No Expression Of Interest (EOI): No Other Approach (please provide details): No
Is this activity being co-designed?
No
Is this activity the result of a previous co-design process?
Yes
Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?
No
Has this activity previously been co-commissioned or joint-commissioned?
No
Decommissioning
No
Decommissioning details?
Co-design or co-commissioning comments

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



MH - 2100 - Continuation of funding to current regional headspace Centres - updated



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

2100

Activity Title *

Continuation of funding to current regional headspace Centres - updated

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 *

Continue to fund and maintain headspace Centres in our region in line with the service delivery model as directed by the Department. Extension of the headspace Centres in new locations will occur during this period with new satellites opening in two towns.

Description of Activity *

Results expected to be achieved within planning period

- Young people within key regional locations at Mt Gambier, Port Augusta, Murray Bridge, Whyalla and Berri will continue to access services within the headspace Centres.
- Service access includes support for mental health, drug and alcohol, work and study and physical health needs across all centres.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Lack of Mental Health support for young people (MH-2)	67



Activity Demographics

Target Population Cohort

Children and young people aged 12-25 with, or at risk of mental illness (including those with severe mental illness who are being managed in primary care), particularly young people with more complex care needs, in high need locations.

Regional coverage:

2.1 LGA regions:

- Berri Barmera
- Mount Gambier
- Murray Bridge
- Port Augusta
- Whyalla
- Mount Barker (satellite)
- Victor Harbor (satellite)

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In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

No

SA3 Name	SA3 Code
Murray and Mallee	40703
Limestone Coast	40702
Outback - North and East	40602
Eyre Peninsula and South West	40601
Fleurieu - Kangaroo Island	40701
Adelaide Hills	40102



Consultation

All of the headspace Centres are regularly visited, consulted and supported by CSAPHN. Ongoing monitoring and discussions are undertaken to ensure that the services remain effective and efficient.

Collaboration

CSAPHN will collaborate with headspace National Office as required. CSAPHN will continue to have a relationship with lead agencies at all five rural sites. By proxy of the consortia model, centres have a collaboration relationship with primary care, mental health, alcohol and drug and vocational services.



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2023

Service Delivery Start Date

July 2019

Service Delivery End Date

June 2023

Other Relevant Milestones



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?

N/A

Co-design or co-commissioning comments

Contract and maintain service delivery within headspace centres, in line with the existing headspace service delivery model.

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

Yes



MH - 2300 - Continuation of the Youth Triple C program for young people requiring more complex care - updated



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

2300

Activity Title *

Continuation of the Youth Triple C program for young people requiring more complex care - updated

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 *

Continuation of the Youth Triple C program through regional headspace centres and general practice, which supports people with severe and complex mental illness in the primary care setting through Mental Health Nursing led clinical care coordination and integration with regional LHN acute services.

Description of Activity *

Results expected to be achieved within planning period

 Increase of young people accessing mental health support in locations that are experiencing high needs, and/or have limited access to service.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Integrated and coordinated holistic services (MH-5)	68
Lack of Mental Health support for young people (MH-2)	67
Step Up and Down interface with acute services (MH-6)	69



Activity Demographics

Target Population Cohort

Children and young people aged 12-25 with, or at risk of mental illness (including those with severe mental illness who are being managed in primary care), particularly young people with more complex care needs, in high need locations.

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In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

No

SA3 Name	SA3 Code
Mid North	40503
Limestone Coast	40702
Outback - North and East	40602
Fleurieu - Kangaroo Island	40701



Consultation

Ongoing monitoring and discussions occur with commissioned agencies to meet set key performance indicators.

Collaboration

Within the stepped care approach, CSAPHN seeks evidence of establishment and formalisation of partnerships between organisations and services in the region to facilitate 'joined up' service provision, specifically between the:

- mental health sector
- alcohol and other drugs sector
- broader primary health care environment
- acute services
- community services
- aged care services
- child and youth services
- social services
- Aboriginal health services

All of our providers must provide evidence how their service model:

- incorporates and formalises effective mechanisms to enable appropriate clinical handover of an individual's care.
- ensures an individual's transition through the steps of care are seamless and appropriate.
- has systems in place to support the integration and coordination of services.
- supports referrals and referrers to ensure individuals are appropriately triaged to the most suitable stepped level of treatment available.
- interacts with the broader social services sector.
- engages with the local health networks and acute sector.

Our providers must provide evidence how they are working collaboratively with consumers/clients of their service. Young people are to be an integral part of service design, implementation, governance and evaluation.



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2023

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones



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?

N/A

Co-design or co-commissioning comments

Direct negotiation with current commissioned providers.

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

Yes



MH - 2400 - Continuation of Additional Mental Health Support Services - Mayo - updated



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

2400

Activity Title *

Continuation of Additional Mental Health Support Services - Mayo - updated

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 *

Improve access to youth specific mental health care delivery particularly for young people with more complex care needs on the Fleurieu Peninsula.

Description of Activity *

Results expected to be achieved within planning period

Provide increased clinical care coordination services for young people to complement existing services such as headspace and expand on existing tailored mental health supports.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Integrated and coordinated holistic services (MH-5)	68
Lack of Mental Health support for young people (MH-2)	67
Step Up and Down interface with acute services (MH-6)	69



Activity Demographics

Target Population Cohort

Children and young people aged 12-25 with, or at risk of mental illness (including those with severe mental illness who are being managed in primary care), particularly young people with more complex care needs, in high need locations.

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In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

No

SA3 Name	SA3 Code
Fleurieu - Kangaroo Island	40701
Adelaide Hills	40102



Consultation

Ongoing monitoring and discussions occur with commissioned agencies to meet set key performance indicators.

Collaboration

Within the stepped care approach, CSAPHN seeks evidence of establishment and formalisation of partnerships between organisations and services in the region to facilitate 'joined up' service provision, specifically between the: mental health sector

- alcohol and other drugs sector
- broader primary health care environment
- acute services
- community services
- aged care services
- child and youth services
- social services
- Aboriginal health services

All of our providers must provide evidence how their service model:

- incorporates and formalises effective mechanisms to enable appropriate clinical handover of an individual's care.
- ensures an individual's transition through the steps of care are seamless and appropriate.
- has systems in place to support the integration and coordination of services.
- supports referrals and referrers to ensure individuals are appropriately triaged to the most suitable stepped level of treatment available.
- interacts with the broader social services sector.
- engages with the local health networks and acute sector.

Our providers must provide evidence how they are working collaboratively with consumers/clients of their service. Young people are to be an integral part of service design, implementation, governance and evaluation.



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2020

Service Delivery Start Date

July 2019

Service Delivery End Date

June 2020

Other Relevant Milestones

time limited funding ceased June 2020.



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?

Funding ceased June 2020, end of contract for extended service funded.

Co-design or co-commissioning comments

Direct negotiation with current commissioned provider.

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

Yes



MH - 2500 - Expansion of regional headspace services via upgrade of Mt Barker Satellite to a full Centre



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

2500

Activity Title *

Expansion of regional headspace services via upgrade of Mt Barker Satellite to a full Centre

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 *

Improve access to youth specific mental health care delivery particularly for young people on the Fleurieu Peninsula, Adelaide Hills and Eyre Peninsula in line with headspace new service implementation guidelines.

Description of Activity *

Results expected to be achieved within planning period

Young people within Mount Barker region will have increased access to headspace services with the upgrade to a full Centre.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Lack of mental health support for young people	67



Activity Demographics

Target Population Cohort

Children and young people aged 12-25 with, or at risk of mental illness (including those with severe mental illness who are being managed in primary care), particularly young people with more complex care needs, in high need locations.

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Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

No

SA3 Name	SA3 Code
Adelaide Hills	40102



Activity Consultation and Collaboration

Consultation

-

Collaboration

-



Activity Milestone Details/Duration

Activity Start Date

31/03/2021

Activity End Date

29/06/2023

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?

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



MH - 2600 - Expansion of regional headspace services via establishment of three Satellite sites - updated



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

2600

Activity Title *

Expansion of regional headspace services via establishment of three Satellite sites - updated

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 *

Improve access to youth specific mental health care delivery particularly for young people on the Fleurieu Peninsula, Adelaide Hills and Eyre Peninsula in line with headspace new service implementation guidelines.

Description of Activity *

Results expected to be achieved within planning period

Young people in Victor Harbor, Mount Barker and Port Lincoln will be able to access headspace services with the addition of three new satellite sites.

Service access includes support for mental health, drug and alcohol, work and study and physical health needs across all satellite services

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Lack of Mental Health support for young people (MH-2)	67



Activity Demographics

Target Population Cohort

Children and young people aged 12-25 with, or at risk of mental illness (including those with severe mental illness who are being managed in primary care), particularly young people with more complex care needs, in high need locations.

CSAPHN's consumer focus is translated through John and Jenny. John and Jenny live, work and play in communities across country South Australia. The consumer focus of John and Jenny as a whole person living in country SA supports a holistic approach that takes consideration of multiple factors that may impact the ability of the individual, family or community to experience health optimisation and wellbeing as they go about their daily lives.

John and Jenny represent all members of our community. They are individuals across all age groups, cultural values, family groupings, ability or disability, advantage or disadvantage, sexual orientation.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

No

SA3 Name	SA3 Code
Eyre Peninsula and South West	40601
Fleurieu - Kangaroo Island	40701
Adelaide Hills	40102



Consultation

All of the headspace satellites regularly visited, consulted and supported by CSAPHN. Ongoing monitoring and discussions are undertaken to ensure that the services remain effective and efficient.

Collaboration

CSAPHN will collaborate with headspace National Office and Royal Flying Doctor Service as required. CSAPHN will continue to have a relationship with lead agencies responsible for Flying headspace. By proxy of the consortia model, centres have a collaboration relationship with primary care, mental health, alcohol and drug and vocational services.



Activity Milestone Details/Duration

Activity Start Date

30/11/2019

Activity End Date

29/06/2023

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?

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
Direct negotiation with current commissioned provider.
Is this activity in scope for data collection under the Mental Health National Minimum Dataset?
Yes



MH - 3100 - Continuation of commissioned activity for Psychological Therapy Services (PTS) - updated



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

3100

Activity Title *

Continuation of commissioned activity for Psychological Therapy Services (PTS) - updated

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

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

Other Program Key Priority Area Description

Aim of Activity *

3.1 This activity aims to address service gaps in the provision of psychological therapies for people in rural and remote areas and other under-serviced and/or hard to reach populations via service continuation and stability within regional areas.

The 5 current providers of regional mental health services will continue to be commissioned to deliver PTS across the CSAPHN region into the next reporting period pending review and approval of 2019/20 AWPs.

- 3.2 Commission evidence-based low and high intensity psychological services appropriate to the needs of older people within a stepped care approach, in partnership with RACFs, for residents with a diagnosed mental illness.
- 3.3 Commission additional general and specialised psychological services to fund tailored mental health support services across the spectrum of mild to severe mental illness, in the Adelaide Hills, Fleurieu Peninsula and Kangaroo Island regions

Description of Activity *

3.1 Results expected to be achieved within planning period

Continued access to psychological therapies and effective, low cost treatment for people with a mental illness who may not otherwise be able to access services across regional, rural and remote South Australia.

3.2 Results expected to be achieved within planning period

Continued delivery of PTS in RACFs in the Barossa region with the extension of services into additional regions during 19/21 activity period.

3.3 Continued delivery of additional psychological services across the Adelaide Hills, Fleurieu Peninsula and Kangaroo Island regions.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Address service gaps in the provision of psychological therapies and outreach to rural and remote areas (MH-3)	67



Activity Demographics

Target Population Cohort

3.1 People in rural and remote areas and other under-serviced and/or hard to reach populations with a diagnosable mild, moderate, and in some cases severe mental illness, or to people who have attempted, or who are at risk of suicide or self-harm where access to other services is not appropriate.

In particular, population groups that may be underserviced include (but are not limited to):

- People who are not able to access Medicare funded mental health services;
- People who are less able to pay fees;
- Carers with a diagnosis of mental illness;
- Culturally and linguistically diverse (CALD) communities;
- Aboriginal and Torres Strait Islander people;
- People who are experiencing, or are at risk of, homelessness;
- Children with or at risk of developing a mental disorder;
- People in remote locations;
- People who have self-harmed or attempted suicide or are at risk of suicide; and
- Women with perinatal depression.
- 3.2: People with a diagnosed mental illness who are residents of residential aged care. Services are expected to primarily target residents with mild to moderate symptoms of common mental illness. However, residents with severe mental illness who are not more appropriately managed by a State or Territory Government Older Persons Mental Health Service, and who would benefit from psychological therapy are not excluded from the measure and may be a target group.

Services may also target people who are assessed as at risk of mental illness. The 'at risk' group is defined for this measure as individuals who are experiencing early symptoms and are assessed as at risk of developing a diagnosable mental illness over the

following 12 months if they do not receive appropriate and timely services.

3.3: People with mild to severe mental illness living in the Adelaide Hills, Fleurieu Peninsula and Kangaroo Island regions.

Regional coverage:

3.1- LGA Regional Areas:

- Outback
- Eyre Peninsula
- Central Local Gov
- Murray Mallee
- Southern & Hills
- South East

3.2 - LGA Region:

Barossa *19/20 - Implementation of program expansion - regions/locations to be explored further

3.3 - LGA Regions:

- Alexandrina
- Kangaroo Island
- Mount Barker
- Victor Harbor
- Yankalilla

CSAPHN's consumer focus is translated through John and Jenny. John and Jenny live, work and play in communities across country South Australia. The consumer focus of John and Jenny as a whole person living in country SA supports a holistic approach that takes consideration of multiple factors that may impact the ability of the individual, family or community to experience health optimisation and wellbeing as they go about their daily lives.

John and Jenny represent all members of our community. They are individuals across all age groups, cultural values, family groupings, ability or disability, advantage or disadvantage, sexual orientation.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

No

SA3 Name	SA3 Code
Lower North	40502
Mid North	40503
Gawler - Two Wells	40201
Yorke Peninsula	40504
Murray and Mallee	40703
Limestone Coast	40702
Barossa	40501
Outback - North and East	40602
Eyre Peninsula and South West	40601
Fleurieu - Kangaroo Island	40701
Adelaide Hills	40102



Consultation

CSAPHN has ongoing commitments to consultation through our established Primary Health Care Committees, which cover much of our regional catchment including:

- Barossa Local Health Cluster
- Far West Local Health Cluster
- Fleurieu Region Community Services Advisory Committee
- Limestone Coast Community Service Round Table (LCCSRT)
- Lower Eyre Local Health Cluster
- Mid North Local Health Cluster
- Riverland Community Services Alliance
- Roxby Downs Community Board Health Forum
- Upper Eyre Local Health Cluster
- Yorke Peninsula Local Health Cluster

These Committees are essential to provide the community perspective to Country SA PHN and ensure that decisions, investments are innovations are patient centred, cost-effective, locally relevant and aligned to local care experiences and expectations.

Mental Health, Alcohol and Other Drug community consultations were conducted with both service providers and community members providing context to data already gathered through the literature.

CSAPHN is also developing an evidence-based Foundation Plan for Mental Health and Suicide Prevention in the region with CHSA LHN and other key stakeholders. Once completed it will provide a vital resource to the region to support the integrated delivery of mental health and suicide prevention services within the community. The Plan will identify needs and gaps, reduce duplication, remove inefficiencies and encourage innovation.

Also, in conjunction with CHSA LHN, we have undergone extensive service mapping of core and commissioned services across both sectors with the stepped care model and held 6 jointly chaired forums focusing on the findings as well as key issues surrounding:

- local service gaps;
- pressure points;

- points of intersection; and
- areas of opportunity to further collaborate.

Collaboration

Within the stepped care approach CSAPHN has directed all providers of psychological services to establish and formalise partnerships between organisations and services in their region to facilitate 'joined up' service provision, specifically between the:

- mental health sector;
- alcohol and other drugs sector;
- broader primary health care environment;
- acute services;
- community services;
- aged care services;
- child and youth services;
- social services;
- residential aged care facilities
- · Aboriginal health services; and
- Local hospital networks.



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

28/06/2023

Service Delivery Start Date

July 2019

Service Delivery End Date

June 2023

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?
No
Is this activity the result of a previous co-design process?
Yes
Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?
No
Has this activity previously been co-commissioned or joint-commissioned?
No
Decommissioning
No
Decommissioning details?
-
Co-design or co-commissioning comments
Commission Method: 3.1 - Contract and maintain service delivery with current PTS providers
3.2 – Direct negotiation with current PTS commissioned providers / open tender process dependent on availability of resources throughout the region
3.3 – Direct approach to suitable provider
Is this activity in scope for data collection under the Mental Health National Minimum Dataset?
Yes



MH - 4100 - Continuation of commissioned activity for Triple C - updated



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

4100

Activity Title *

Continuation of commissioned activity for Triple C - updated

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 *

4.1 CSAPHN aims to continue the commissioning of the Triple C (Clinical Care and Coordination) Program that provides mental health services and support to people with severe and complex mental illness across multiple locations in Country SA.

Description of Activity *

4.1 Results expected to be achieved within planning period

Targeted and appropriate mental health services continue to be provided to support people with severe and complex mental illness across Country SA.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Integrated and coordinated holistic services (MH-5)	68
Step Up and Down interface with acute services (MH-6)	69



Activity Demographics

Target Population Cohort

People with severe and complex mental illness

Regional coverage:

LGA Regions -

- Barossa
- Berri Barmera
- Clare and Gilbert Valleys
- Copper Coast
- Lower Eyre
- Mount Barker
- Mount Gambier
- Naracoorte Lucindale
- Port Lincoln
- Outback Areas

CSAPHN's consumer focus is translated through John and Jenny. John and Jenny live, work and play in communities across country South Australia. The consumer focus of John and Jenny as a whole person living in country SA supports a holistic approach that takes consideration of multiple factors that may impact the ability of the individual, family or community to experience health optimisation and wellbeing as they go about their daily lives.

John and Jenny represent all members of our community. They are individuals across all age groups, cultural values, family groupings, ability or disability, advantage or disadvantage, sexual orientation.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

No

SA3 Name	SA3 Code
Lower North	40502
Yorke Peninsula	40504
Murray and Mallee	40703
Limestone Coast	40702
Barossa	40501
Outback - North and East	40602
Eyre Peninsula and South West	40601
Adelaide Hills	40102



Activity Consultation and Collaboration

Consultation

4.1 CSAPHN will continue to liaise, monitor progress and support Triple C service providers as required to ensure local needs are met.

Collaboration

- 4.1 Collaboration with existing and new providers of the program will continue, these are:
 - Sonder Care
 - Murray Mallee GP Network
 - FocusOne Health
 - Neami



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

28/06/2023

Service Delivery Start Date

July 2019

Service Delivery End Date

June 2023

Other Relevant Milestones



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:** 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?

1a. Does this activity include any decommissioning of services?

Yes

Open tender for services 2021/22 - as a result of this tender several current service providers will be decommissioned. These are:

- Medical Clinic Millicent
- Kapunda Medical Practice
- Clare Medical Centre
- Summit Health
- Country and Outback Health (CObH)
- Yorke and Northern LHN

Mitigation strategies are in place to cover the regions/locations previously serviced by the program, to ensure for continuity of client care for active clients and community.

Co-design or co-commissioning comments

-

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

Yes



MH - 5100 - Continuation of commissioned activity for Aboriginal & Torres Strait Islander SP - updated



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

5100

Activity Title *

Continuation of commissioned activity for Aboriginal & Torres Strait Islander SP - updated

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 *

- 5.1 Increase the number of at risk Aboriginal and Torres Strait Islander clients accessing linked up and integrated services. Increase the number of suicide prevention education and community activities
- 5.2 Continue to fund, maintain and expand post suicide attempt discharge support services. Maintain service delivery through integrated and systems-based approach in partnerships with LHNs, key stakeholders and local organisations. Increased access to services for individuals following a recent suicide attempt inclusive of coordinated discharge planning and care coordination.

Description of Activity *

- 5.1 Results expected to be achieved within planning period
 - Culturally appropriate face to face support for those at risk of or impacted by suicide or suicide attempt.
 - Community capacity building and evidence based suicide prevention training
 - Creating systems based on regional approaches inclusive of community based and led activities in suicide prevention.
- 5.2 Results expected to be achieved within planning period
 - Aftercare service delivery, rapid and assertive support for people post discharge following a suicide attempt
 - Face to face support and brief intervention therapy for up to 3 months after a suicide attempt

• Improved patient journey through scalation and de-escalation of severity within the stepped care model, especially within the context of a recent suicide attempt and joined up services with coordinated discharge planning.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Aboriginal Health (GEN-1)	45
Address service gaps in the provision of psychological therapies and outreach to rural and remote areas (MH-3)	67



Activity Demographics

Target Population Cohort

Individuals and groups at risk of suicide targeting but not exclusive to:

- Aboriginal and Torres Strait Islander communities that are at high risk of suicide;
- Individuals after a suicide attempt.

Regional coverage:

5.1 LGA regions - Port Augusta and Whyalla

5.2 LGA regions - Mount Barker and Strathalbyn

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John and Jenny represent all members of our community. They are individuals across all age groups, cultural values, family groupings, ability or disability, advantage or disadvantage, sexual orientation.

In Scope AOD Treatment Type *

Indigenous Specific *

Yes

Indigenous Specific Comments

Indigenous specific:

Activity 5.1: Yes; Service provider will deliver a service high in both cultural competencies and clinical governance. They will develop and or support an Aboriginal and Torres Strait Islander lived experience reference group, who will advise the provider.

Activity 5.2: No

Coverage

Whole Region

No

SA3 Name	SA3 Code
Outback - North and East	40602
Eyre Peninsula and South West	40601
Fleurieu - Kangaroo Island	40701
Adelaide Hills	40102



Activity Consultation and Collaboration

Consultation

A targeted survey was also conducted in April 2016, focusing on both service providers and consumers of suicide prevention services and activity. 168 Respondents, of which 15.6 % identified as Aboriginal and 20% as Lived Experience of suicide. The rurality of respondents was high at 75.4%, living in regional or remote and remote South Australia.

Additionally, between November 2017 - January 2018 CSAPHN has engaged with over 500 individuals from regional and rural communities under the National Suicide Prevention Trial, gathering information to support implementation of a systems approach to suicide in regional SA.

CSAPHN continues to engage in ongoing consultations and collaborative practise workshops with Adelaide PHN, Country Health SA, SA Health, ACCHO's, SA Suicide Prevention Networks, Office of the Chief Psychiatrist and Suicide Prevention Australia.

Meetings across CSAPHN with SA Suicide Prevention Networks and the support of the Networks strategic planning activity where appropriate

Collaboration

5.1 Collaborate closely with current commissioned service providers, ACCHO's and their communities.

5.2 In supporting the stepped care approach collaboration occurs across the sector, specifically between the:

- mental health sector
- alcohol and other drugs sector
- broader primary health care environment
- acute services
- community services
- aged care services
- child and youth services
- social services Aboriginal health services

CSAPHN has representation on state and national advisory groups such as:

- SA Postvention Advisory group StandBy Response
- Everymind Life in Mind National Communications Charter
- Suicide Prevention Australia, State Committee
- The Premier's Council for Suicide Prevention, SA Government

Maintain ongoing formal communication and collaboration with the Office of the Chief Psychiatrist and SA Health. CSAPHN commissioning activity will support the integrity and priority areas of the South Australian Suicide Prevention Strategy' 2017 – 2021.



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

28/06/2023

Service Delivery Start Date

July 2019

Service Delivery End Date

June 2023

Other Relevant Milestones



Activity Commissioning

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

Not Yet Known: No

Continuing Service Provider / Contract Extension: Yes

Direct Engagement: No **Open Tender:** No

Expression Of Interest (EOI): No

Other Approach (please provide details): No

Is this activity being co-designed?

No

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

Yes

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

No

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

No

Decommissioning

No

Decommissioning details?

-
Co-design or co-commissioning comments
Is this activity in scope for data collection under the Mental Health National Minimum Dataset?
Yes



MH - 6100 - Continuation of commissioned activity for Aboriginal and Torres Strait Islander MH - updated



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

6100

Activity Title *

Continuation of commissioned activity for Aboriginal and Torres Strait Islander MH - updated

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 *

6.1 Work collaboratively with regional Aboriginal Community Controlled Organisations and communities to identify shortcomings and develop potential strategies to better support local Aboriginal specific organisations to tender and provide commissioned services to communities across the region.

6.2 Continuation of ACCHO commissioned dual focussed Mental Health and Drug and Alcohol Comorbidity programs ensuring clients with mental illness and substance abuse disorders presenting with co-morbidities receive a culturally appropriate integrated and coordinated service for their needs.

Description of Activity *

Describe the activity, including what work will be undertaken, and how the activity and/or services will be delivered.

- 6.1 Results expected to be achieved within planning period
 - Continue to work towards increasing a level of trust and reassurance with communities and key stakeholders local Aboriginal communities have a voice during delivery and development of new and existing services.
 - Evidence of improvements in connection of Aboriginal clients to all relevant service providers and services.
- 6.2 Results expected to be achieved within planning period
 - Service continuation and stability while ongoing federal funding is debated.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Aboriginal Health (GEN-1)	45



Activity Demographics

Target Population Cohort

Aboriginal and Torres Strait Islander people across the CSAPHN region

Regional coverage:

LGA Regions -

- Berri Berri Barmera
- Coober Pedy
- Elliston
- Lower Evre
- Mount Gambier
- Outback Areas
- Port Augusta
- Streaky Bay
- Whyalla

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John and Jenny represent all members of our community. They are individuals across all age groups, cultural values, family groupings, ability or disability, advantage or disadvantage, sexual orientation.

In Scope AOD Treatment Type *

Indigenous Specific *

Yes

Indigenous Specific Comments

6.1 Engagement with Aboriginal & Torres Strait Islander service providers is often face to face and following a direct invitation to the organisation or community.

Coverage

Whole Region

No

SA3 Name	SA3 Code
Murray and Mallee	40703
Limestone Coast	40702
Outback - North and East	40602
Eyre Peninsula and South West	40601



Activity Consultation and Collaboration

Consultation

Consultation with ACCHOS enables the delivering a culturally safe and appropriate services to their local indigenous communities. A commitment to further consultation, co-design and collaboration with peak bodies Aboriginal Drug and Alcohol Council (SA) Aboriginal Corporation (ADAC) and Aboriginal Health Council of South Australia (AHCSA) are part of ongoing activities.

CSAPHN abides to the following principles when engaging with Aboriginal and Torres Strait Islander peoples:

- Recognition and regard for Aboriginal and Torres Strait Islander peoples' rights
- Respect for Aboriginal and Torres Strait Islander peoples culture and difference, particularly decision-making processes
- Ensure Aboriginal and Torres Strait Islander peoples' free, prior and informed consent.

CSAPHN has ongoing commitments to consultation through our established Primary Health Care Committees, which cover much of our regional catchment including:

- Barossa Local Health Cluster
- Far West Local Health Cluster
- Fleurieu Region Community Services Advisory Committee
- Limestone Coast Community Service Round Table (LCCSRT)
- Lower Eyre Local Health Cluster
- Mid North Local Health Cluster
- Riverland Community Services Alliance
- Roxby Downs Community Board Health Forum
- Upper Eyre Local Health Cluster
- Yorke Peninsula Local Health Cluster

These Committees are essential to provide the community perspective to Country SA PHN and ensure that decisions, investments are innovations are patient centred, cost-effective, locally relevant and aligned to local care experiences and expectations.

Collaboration

6.1 & 6.2

All preferred providers for Aboriginal mental health service delivery activity have been issued with contracts that outline the stepped care approach and are required to establish and formalise partnerships between organisations and services in the region to facilitate 'joined up' service provision, specifically between the:

- mental health sector
- alcohol and other drugs sector
- broader primary health care environment
- acute services
- community services
- aged care services
- child and youth services

- social services
- Aboriginal health services

All service providers commissioned must develop and enhance their service delivery models that:

- Incorporate and formalise effective mechanisms to enable appropriate clinical handover of an individual's care.
- Ensure an individual's transition through the steps of care are seamless and appropriate.
- Have systems in place to support the integration and coordination of services.
- Support referrers, in particular General Practice, to ensure individuals are appropriately triaged to the most suitable "stepped-level" of treatment available.
- Support referrers, in particular General Practice, to ensure individuals are jointly monitored to determine the selected treatment effectiveness and further care decisions.
- Interact with the broader social services sector.
- Engage with the local health networks and acute sector.



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2023

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?

Yes

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

Yes
Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?
No
Has this activity previously been co-commissioned or joint-commissioned?
No
Decommissioning
No
Decommissioning details?
-
Co-design or co-commissioning comments
-
Is this activity in scope for data collection under the Mental Health National Minimum Dataset?
Vec



MH - 7000 - Service Planning, Integration and Quality Assurance - updated



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

7000

Activity Title *

Service Planning, Integration and Quality Assurance - updated

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 *

- 7.1 To support and champion the stepped care approach across mental health and Alcohol and Other Drugs through co design, promotion and commissioning of primary mental health services within a person-centred stepped care approach.
- 7.2 To facilitate the implementation of the stepped care approach through stakeholder education via promotion of core elements of the reform. Through conducting rural forums to local stakeholders and in partnership with our regional preferred providers, CSAPHN will seek to promote and champion the stepped care approach ensuring a properly integrated and holistic service across the primary mental health sector inclusive of the drug and alcohol sector.

Description of Activity *

Describe the activity, including what work will be undertaken, and how the activity and/or services will be delivered.

- 7.1 Results expected to be achieved within planning period
- Continued implementation of the stepped care reform through service design, contract management and stakeholder education.
- 7.2 Results expected to be achieved within planning period

Progression towards de siloing of the regional service provider sectors across primary mental health and drug and alcohol.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Integrated and coordinated holistic services	68
Mental Health and Drug and Alcohol co-morbidity	65



Activity Demographics

Target Population Cohort

Identified CSAPHN regions that have a lack of Low Intensity and Severe and Complex Mental Illness services.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

CSAPHN has ongoing commitments to consultation through our established Primary Health Care Committees, which cover much of our regional catchment including:

- Barossa Local Health Cluster
- Far West Local Health Cluster
- Fleurieu Region Community Services Advisory Committee
- Limestone Coast Community Service Round Table (LCCSRT)
- Lower Eyre Local Health Cluster
- Mid North Local Health Cluster
- Riverland Community Services Alliance
- Roxby Downs Community Board Health Forum

- Upper Eyre Local Health Cluster
- Yorke Peninsula Local Health Cluster

These Committees are essential to provide the community perspective to Country SA PHN and ensure that decisions, investments are innovations are patient centred, cost-effective, locally relevant and aligned to local care experiences and expectations.

Mental Health, Alcohol and Other Drug community consultations were conducted with both service providers and community members providing context to data already gathered through the literature.

CSAPHN is also developing an evidence-based Foundation Plan for Mental Health and Suicide Prevention in the region with CHSA LHN and other key stakeholders. Once completed it will provide a vital resource to the region to support the integrated delivery of mental health and suicide prevention services within the community. The Plan will identify needs and gaps, reduce duplication, remove inefficiencies and encourage innovation.

Also, in conjunction with CHSA LHN, we have undergone extensive service mapping of core and commissioned services across both sectors with the stepped care model and held 6 jointly chaired forums focusing on the findings as well as key issues surrounding:

- local service gaps;
- pressure points;
- points of intersection; and
- areas of opportunity to further collaborate.

Collaboration

Within the stepped care approach CSAPHN has directed all providers to establish and formalize partnerships between organisations and services in their region to facilitate 'joined up' service provision, specifically between the:

- mental health sector;
- alcohol and other drugs sector;
- broader primary health care environment;
- acute services;
- community services;
- aged care services;
- child and youth services;
- social services;
- · Aboriginal health services; and
- Local hospital networks.



Activity Milestone Details/Duration

Activity	✓ Start	Date
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30/06/2019

Activity End Date

29/06/2023

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones



No

Activity Commissioning

Disease identify, your intended procurement approach for commissioning convices under this activity.
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 so designed?
Is this activity being co-designed?
No
Is this activity the result of a previous co-design process?
Yes
Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?
No
Has this activity previously been co-commissioned or joint-commissioned?
No
Decommissioning
No
Decommissioning details?
Co-design or co-commissioning comments
Is this activity in scope for data collection under the Mental Health National Minimum Dataset?



MH - 8000 - Ongoing development of a comprehensive RMH plan and suicide SP plan - updated



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

8000

Activity Title *

Ongoing development of a comprehensive RMH plan and suicide SP plan - updated

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 *

- 8.1 Implementation of a joint Foundation Plan with an aim to help build momentum and shared interest in joint regional planning so as to set a framework for ongoing activity and improved integration over time.
- 8.2 Work towards the creation of a comprehensive regional plan including a focus on Indigenous mental health, to support integrated delivery of mental health and suicide prevention services developed in consultation with and endorsed by, LHNs and other regional stakeholders.

Description of Activity *

8.1 Results expected to be achieved within planning period

Stronger more formalised relationships with the LHNs in order to create a more cyclic, consistent service planning framework for the future.

8.2 Results expected to be achieved within planning period

Progression, endorsement and support of future regional plan will be obtained via collaboration with state LHNs and other key regional stakeholders.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Integrated and coordinated holistic services	68
Health systems integration and coordination	29
Step Up and Down interface with acute services	69
Improved service mapping for efficient commissioned and targeting or services	69



Activity Demographics

Target Population Cohort

- 8.1 Country Health SA Local Health Network
- 8.2 Consumers, carers and people with lived experience. Six new regional LHNs and their Governing Boards

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

Consultation would be inclusive of but not exclusive to:

- 6 newly formed LHN's
- South Australian Mental Health Commission
- Consumers and carers
- Aboriginal community controlled health services
- community managed organisations

- NDIS providers
- private providers
- social service agencies
- mental health and suicide prevention sector
- broader primary health care environment
- acute services
- health advisory councils
- suicide prevention networks
- child and youth services

Collaboration

Collaboration and partnership with the following key stakeholders and working groups:

- Barossa Hills Fleurieu Local Health Network
- Eyre and Far North Local Health Network
- Flinders and Upper North Local Health Network
- Riverland Mallee Coorong Local Health Network
- South East Local Health Network
- Yorke and Northern Local Health Network
- SA Health
- Office of the Chief Psychiatrist
- SA NDIS Psychosocial Disability Transition Taskforce



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

30/12/2021

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): Yes 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? Yes Has this activity previously been co-commissioned or joint-commissioned? Yes **Decommissioning** No Decommissioning details? **Co-design or co-commissioning comments** Ongoing development of a comprehensive Regional mental health and suicide prevention plan with new LHN regions

No



NSPT - 1000 - National Suicide Prevention Trial - updated



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

NSPT

Activity Number *

1000

Activity Title *

National Suicide Prevention Trial - updated

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Mental Health

Other Program Key Priority Area Description

Aim of Activity *

Mates in Construction will use training as a tool to raise awareness about suicide and it's contributing risk factors, delivering a suite of training and providing access to ongoing support to workers at risk.

Continuation of male targeted training to build scale and sustainability of suicide prevention knowledge and skills within regional industries.

Description of Activity *

Continuation of Commissioned activity under the NSPT for an Integrated program of community development and support for male dominated industry and workplaces

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Community-led approaches to Suicide Prevention (SP-1)	73



Activity Demographics

Target Population Cohort

Individuals and groups at risk of suicide targeting but not exclusive to:

- Aboriginal and Torres Strait Islander communities that are at high risk of suicide;
- Individuals after a suicide attempt.

CSAPHN's consumer focus is translated through John and Jenny. John and Jenny live, work and play in communities across country South Australia. The consumer focus of John and Jenny as a whole person living in country SA supports a holistic approach that takes consideration of multiple factors that may impact the ability of the individual, family or community to experience health optimisation and wellbeing as they go about their daily lives.

John and Jenny represent all members of our community. They are individuals across all age groups, cultural values, family groupings, ability or disability, advantage or disadvantage, sexual orientation.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

No

SA3 Name	SA3 Code
Outback - North and East	40602
Eyre Peninsula and South West	40601



Activity Consultation and Collaboration

Consultation

A targeted survey was also conducted in April 2016, focusing on both service providers and consumers of suicide prevention services and activity. 168 Respondents, of which 15.6 % identified as Aboriginal and 20% as Lived Experience of suicide. The rurality of respondents was high at 75.4%, living in regional or remote and remote South Australia.

Additionally, between November 2017 -January 2018 CSAPHN has engaged with over 500 individuals from regional and rural communities under the National Suicide Prevention Trial, gathering information to support implementation of a systems approach to suicide in regional SA.

CSAPHN continues to engage in ongoing consultations and collaborative practise workshops with Adelaide PHN, Country Health SA, SA Health, ACCHO's, SA Suicide Prevention Networks, Office of the Chief Psychiatrist and Suicide Prevention Australia.

Meetings across CSAPHN with SA Suicide Prevention Networks and the support of the Networks strategic planning activity where appropriate

Collaboration

-



Activity Milestone Details/Duration

Activity Start Date

30/06/2021

Activity End Date

30/12/2021

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones



Activity Commissioning

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

Not Yet Known: No

Continuing Service Provider / Contract Extension: No

Direct Engagement: Yes **Open Tender:** No

Expression Of Interest (EOI): No

Other Approach (please provide details): No

Is this activity being co-designed?

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?
Yes
Has this activity previously been co-commissioned or joint-commissioned?
No
Decommissioning
No
Decommissioning details?
-
Co-design or co-commissioning comments
-



MH-CV19 - 9000 - COVID-19 Pandemic Mental Health Funding



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH-CV19

Activity Number *

9000

Activity Title *

COVID-19 Pandemic Mental Health Funding

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 support vulnerable people, including frontline health workers, older Australians,

Indigenous Australians, and those that are socially isolated or financially impacted by the COVID-19 pandemic to access mental health services and supports.

Description of Activity *

9.1 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 by providing small grants targeted to existing providers.

9.2 People from a culturally and linguistically diverse (CALD) background

Build capacity of services in identified region of need to better meet the needs of people from a CALD background during the pandemic and to build protective factors. Targeted funding to area of need via commissioned service provider to increase capacity.

9.3 Older Australians

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

of older people through targeted sustainable programs through appropriate engaged providers within the space. Activity extended to December 31st via existing funding.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Aboriginal Health	42
CALD populations	11
Ageing population	7



Activity Demographics

Target Population Cohort

Support vulnerable people, including frontline health workers, older Australians, Indigenous Australians, and those that are socially isolated or financially impacted by the COVID-19 pandemic to access mental health services and supports.

CSAPHN's consumer focus is translated through John and Jenny. John and Jenny live, work and play in communities across country South Australia. The consumer focus of John and Jenny as a whole person living in country SA supports a holistic approach that takes consideration of multiple factors that may impact the ability of the individual, family or community to experience health optimisation and wellbeing as they go about their daily lives.

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In Scope AOD Treatment Type *

Indigenous Specific *

Yes

Indigenous Specific Comments

Component of funding is Indigenous Specific

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Cons	ults	atio	'n

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Collaboration

-



Activity Milestone Details/Duration

Activity Start Date

30/09/2020

Activity End Date

30/12/2021

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones



Activity Commissioning

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

Not Yet Known: No

Continuing Service Provider / Contract Extension: No

Direct Engagement: Yes **Open Tender:** No

Expression Of Interest (EOI): No

Other Approach (please provide details): No

Is this activity being co-designed?

Yes

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

Nο

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 - 1000 - Expansion of regional headspace services via Demand Management and Enhancement Program



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

CHHP

Activity Number *

1000

Activity Title *

Expansion of regional headspace services via Demand Management and Enhancement Program

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 *

Improve access to youth specific mental health care delivery particularly for young people on the Fleurieu Peninsula, Adelaide Hills and Eyre Peninsula in line with headspace new service implementation guidelines.

Description of Activity *

Results expected to be achieved within planning period

Young people within key regional locations at Mt Gambier, Port Augusta, Murray Bridge and Berri will have increased access and decreased wait times within the headspace Centres

Needs Assessment Priorities*

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Lack of mental health support for young people	67



Activity Demographics

Target Population Cohort

Children and young people aged 12-25 with, or at risk of mental illness (including those with severe mental illness who are being managed in primary care), particularly young people with more complex care needs, in high need locations.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

No

SA3 Name	SA3 Code
Murray and Mallee	40703
Limestone Coast	40702
Outback - North and East	40602



Activity Consultation and Collaboration

Consultation

Collaboration

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Activity Milestone Details/Duration

Activity Start Date

30/06/2020

Activity End Date

29/06/2023

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?

Yes

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

Yes

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

No

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

No

Decommissioning

No

Decommissioning details?

Co-design or co-commissioning comments



CHHP - 2500 - Continuation of funding for Flying Headspace to provide mental health support to young people - UD



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

CHHP

Activity Number *

2500

Activity Title *

Continuation of funding for Flying Headspace to provide mental health support to young people - UD

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 *

Continue to provide access to youth specific mental health care delivery particularly for young people in very remote locations in partnership with the Royal Flying Doctor Service.

Description of Activity *

Results expected to be achieved within planning period

• Increase access to mental health supports for young people in very remote locations that have limited and/or no access to service.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment For Country SA

Priorities

Priority	Page reference
Integrated and coordinated holistic services (MH-5)	68
Lack of Mental Health support for young people (MH-2)	67



Activity Demographics

Target Population Cohort

Children and young people aged 12-25 with, or at risk of mental illness (including those with severe mental illness who are being managed in primary care), particularly young people with more complex care needs, in high need locations.

CSAPHN's consumer focus is translated through John and Jenny. John and Jenny live, work and play in communities across country South Australia. The consumer focus of John and Jenny as a whole person living in country SA supports a holistic approach that takes consideration of multiple factors that may impact the ability of the individual, family or community to experience health optimisation and wellbeing as they go about their daily lives.

John and Jenny represent all members of our community. They are individuals across all age groups, cultural values, family groupings, ability or disability, advantage or disadvantage, sexual orientation.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

No

SA3 Name	SA3 Code
Outback - North and East	40602



Activity Consultation and Collaboration

Consultation

Ongoing monitoring and discussions occur with the commissioned service provider, Royal Flying Doctor Service and key stakeholders in the remote locations to ensure the service meet local needs and requirements.

Collaboration

CSAPHN will collaborate with headspace National Office as required. CSAPHN will continue to have a relationship with lead agencies responsible for the three satellite sites. By proxy of the consortia model, centres have a collaboration relationship with primary care, mental health, alcohol and drug and vocational services.



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?

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

Direct negotiation with current commissioned provider.