

Country SA - Primary Mental Health Care 2023/24 - 2026/27 Activity Summary View



MH-H2H - 1000 - H2H Intake and Assessment Phone Service



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH-H2H

Activity Number *

1000

Activity Title *

H2H Intake and Assessment Phone Service

Existing, Modified or New Activity *

Modified



Activity Priorities and Description

Program Key Priority Area *

Mental Health Priority Area 7: Stepped care approach

Other Program Key Priority Area Description

Aim of Activity *

The Head to Health intake and assessment phone service is designed to operate alongside Head to Health centres and satellites and the Head to Health digital platform to provide a suite of entry points to engagement, assessment and treatment for people with a range of mental health needs. Providing multiple entry pathways (website, phone, face-to-face) into mental health services under the consistent and trusted “Head to Health” brand will allow consumers to access the services that best meet their needs through their preferred platform.

The intake service is intended to provide service navigation to connect people to the right mental health services to meet their identified needs. It is designed to complement, not replace or duplicate, mental health support lines and services already provided

in the community, including crisis support lines and state-funded triage services facilitating intake into tertiary services.

Description of Activity *

Country SA PHN will commission an external provider, leveraging off an existing service arrangement to meet short term operational expectations from the July 1st commencement date to June 30 2023.

Establishment Phase activity

On the Line will commence on boarding of additional required staff and technology and infrastructure upgrade and set up on agreement of proposed service model and execution of future contract pending PHN funding agreement.

CSAPHN staff recruitment and progress of service directory activity would also commence on execution of scheduled arrangements.

Phase 1 – 1 July 22- 30 June 23

The proposed service model seeks to meet the Core Service Elements of the Head to Health intake and assessment phone service to:

- Provide a central point to connect people to other services in the region, including through offering information and advice about mental health and AOD use
- Holistic assessment of needs provided by a mental health professional using the Commonwealth’s Initial Assessment and Referral tool
- Connect people seamlessly to the most appropriate local service to meet their identified needs
- Work with service providers to create seamless referral pathways into and out of the Head to Health Intake Phone Service
- Collect data about the number of callers, the IAR level of care, referrals in source, referral out destination, and average wait time for a client to access services.

As a result of tender activity in 2023/24 Neami has been appointed as the new service provider, with a transition of active service to occur by 1 July 2024 between the previous service provider and Neami.

In 2024 CSAPHN has transitioned to a statewide model in alignment with Adelaide PHN for the delivery of the national Assessment and Referral Phone Service, further enhancements are planned with the addition of receipt and triage of MHTP from GPs in country SA.

Continued collaboration and participation in on the SA phone integration project with the SA Health Mental Health Strategy directorate, LHN's and relevant state governments departments.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment 2022-2025 (Nov 2023) V3

Priorities

| Priority | Page reference |
|--|----------------|
| Access to suicide prevention and services | 67 |
| Access to low intensity MH services | 66 |
| Access to mental health services in rural and remote areas | 66 |
| Access to specialist MH services for young people | 66 |
| Integrated and coordinated care across the health system | 65 |
| Access to specialist MH services | 68 |



Activity Demographics

Target Population Cohort

People residing within the Country SA PHN, the Head to Health phone line can be accessed by consumers, their families, carers, as well as GPs, service providers and other health professionals.

Country SA PHN's consumer focus is translated through the experience and outcomes of consumers who live, work and play in communities across country South Australia. The consumer focus supports a holistic approach to services 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. Supporting all members of our community; across all age groups, cultural values, family groupings, ability or disability, advantage or disadvantage, and sexual orientation.

Country SA PHN is committed to working with lived experience representatives of mental ill-health and/or suicide, their families and carers, to embed lived experience knowledge as central to the design, planning, delivery and evaluation of services. Lived Experience Representatives are formally engaged to support the implementation of the Bilateral Schedule on Mental Health and Suicide Prevention: South Australia, and our broader mental health program activity.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

Continued engagement with tertiary referral and sector partners, GPs across planning, comprehensive mapping of the local service landscape to inform advice and referral pathways for consumers.

Country SA PHN are participating in a statewide phone integration project with the SA Health Mental Health Strategy directorate to ensure best possible experience for people living in Country SA.

Country SA PHN and Adelaide PHN worked collaboratively to explore and establish a state-wide integrated intake service working under a nationally consistent model to ensure better outcomes for all people accessing the phone service in South Australia during 2023.

Country SA PHN proceeded to competitive tender in late 2023 with a successful service provider Neami appointed in early 2024 now aligning with Adelaide PHN in providing a statewide approach.

Collaboration

Country SA PHN maintains a strong relationship with 6 regional LHN's and the local mental health teams within. The Mental Health and Suicide Prevention Regional Foundation Plan was published in 2019 and established agreements between the PHN and its partner LHN to collaboratively work together regarding co commissioning opportunities, stepped carer ideology and workforce retention.

Country SA PHN is also a member of the SA Mental Health Phone Intake and Assessment Project Steering Committee.

Following phase 1 of establishment and inaugural 12 months operations, Country SA PHN in partnership with Adelaide PHN explored commissioning of ongoing services to a new third-party provider from 2023 onwards with phase 2 and 3 seeing a ramping of service scope to broaden the intake and assessment phone service model and enhance integration with other digital platforms.

Using the IAR levels of care approach Country SA PHN has directed all providers of Low Intensity 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
- Aboriginal health services
- Local hospital networks



Activity Milestone Details/Duration

Activity Start Date

01/01/2021

Activity End Date

30/06/2026

Service Delivery Start Date

01/07/2022

Service Delivery End Date

30/06/2026

Other Relevant Milestones



Activity Commissioning

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

Not Yet Known: No
Continuing Service Provider / Contract Extension: 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?

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 - 8000 - MH - 8000 - Initial Assessment and Referral



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

8000

Activity Title *

MH - 8000 - Initial Assessment and Referral

Existing, Modified or New Activity *

Modified



Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Other Program Key Priority Area Description

Initial Assessment and Referral Training and Support Officers

Aim of Activity *

Support General Practitioners (GPs) and clinicians in learning and implementing the Initial Assessment and Referral (IAR) tool into clinical practice and workflow. This will contribute to achieving nationally consistent levels of care for persons presenting with similar conditions.

Description of Activity *

Implement and enhance GPs and clinicians in the primary care setting, use of the stepped care model to select the least intensive level of care, for a person presenting for mental health assistance by using the IAR tool.

Deliver training to and build strong relationships with and provide ongoing support to GPs, clinicians and key stakeholders (other health professionals, including as required in Local Hospital Networks/Districts) to encourage local adoption and implementation of the IAR tool in primary care settings.

2021/22 recruited an Initial Assessment and Referral Training and Support Officer position with onboarding and training.

2022/23 activity commenced on scheduled training and meeting set targets. Country SA PHN has been allocated 2.2% share of GP workforce as at 31 December 2019, and this equates to a target of 442 over the four years, to 30 June 2025.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment 2022-2025 (Nov 2023) V3

Priorities

| Priority | Page reference |
|--|----------------|
| Integrated and coordinated care across the health system | 65 |
| Access to specialist MH services | 68 |



Activity Demographics

Target Population Cohort

GP's, commissioned service providers and clinicians in the primary health care setting in Country SA.

Country SA PHN's consumer focus is translated through the experience and outcomes of consumers who live, work and play in communities across country South Australia. The consumer focus supports a holistic approach to services 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. Supporting all members of our community; across all age groups, cultural values, family groupings, ability or disability, advantage or disadvantage, and sexual orientation.

Country SA PHN is committed to working with lived experience representatives of mental ill-health and/or suicide, their families and carers, to embed lived experience knowledge as central to the design, planning, delivery and evaluation of services. Lived Experience Representatives are formally engaged to support the implementation of our broader mental health program activity.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

Country SA PHN will consult with Clinical Councils and local GPs to develop a plan for disseminating and implementing the National IAR Guidelines locally

Collaboration

Country SA PHN will implement this activity using the National IAR Guidelines and under the guidance of the Primary Health Network Initial Assessment and Referral Training and Support Officers document.

This will be further supported by CSAPHN joint regional planning activity across jurisdictions.



Activity Milestone Details/Duration

Activity Start Date

31/12/2021

Activity End Date

30/06/2025

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?

No

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

No

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

No

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

No

Decommissioning

No

Decommissioning details?

Co-design or co-commissioning comments

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

No

Funding From Other Sources - Financial Details

Funding From Other Sources - Organisational Details



MH - 1100 - Continuation of Integrated low intensity activity within psychological therapies



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

Existing, Modified or New Activity *

Modified



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 in the 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 Country SA PHN region.

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

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

Description of Activity *

a. 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 2022-2025 (Nov 2023) V3

Priorities

| Priority | Page reference |
|-------------------------------------|----------------|
| Access to low intensity MH services | 66 |



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.

Country SA PHN's consumer focus is translated through the experience and outcomes of consumers who live, work and play in communities across country South Australia. The consumer focus supports a holistic approach to services 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. Supporting all members of our community 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



Activity Consultation and Collaboration

Consultation

Country SA PHN has ongoing commitments to consultation through our established Primary Health Community Advisory 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 and 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.

Country SA PHN continues to work collaboratively with six regional LHN's and conduct service mapping of core and commissioned services across both sectors utilising 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.

Country SA PHN is committed to working with lived experience representatives of mental ill-health and/or suicide, their families and carers, to embed lived experience knowledge as central to the design, planning, delivery and evaluation of services. Lived Experience Representatives are formally engaged to support the implementation of the Bilateral Schedule on Mental Health and Suicide Prevention: South Australia, and our broader mental health program activity.

Collaboration

1.1 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

1.2 Using the IAR levels of care approach Country SA PHN 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
- Aboriginal health services
- Local hospital networks



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

30/06/2026

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones



Activity Commissioning

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

Not Yet Known: No

Continuing Service Provider / Contract Extension: Yes

Direct Engagement: No

Open Tender: No

Expression Of Interest (EOI): No

Other Approach (please provide details): No

Is this activity being co-designed?

No

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

Yes

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

No

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

No

Decommissioning

No

Decommissioning details?

Co-design or co-commissioning comments

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

Yes



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



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

2100

Activity Title *

Continuation of funding to current regional headspace Centres

Existing, Modified or New Activity *

Modified



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 2022-2025 (Nov 2023) V3

Priorities

| Priority | Page reference |
|---|----------------|
| Access to specialist MH services for young people | 66 |
| Access to specialist services to support developmental health and wellbeing of children and youth | 71 |



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)

Country SA PHN's consumer focus is translated through the experience and outcomes of consumers who live, work and play in communities across country South Australia. The consumer focus supports a holistic approach to services 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. Supporting all members of our community, across all age groups, cultural values, family groupings, ability or disability, advantage or disadvantage, sexual orientation.

Country SA PHN is committed to working with lived experience representatives of mental ill health and/or suicide, their families and carers to enable lived experience knowledge as central to the design, planning, delivery and evaluation of services. Lived Experience Representatives are formally engaged to support the implementation of the Bilateral Schedule on Mental Health and Suicide Prevention South Australia and our broader mental health program activity.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

No

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



Activity Consultation and Collaboration

Consultation

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

Collaboration

Country SA PHN collaborates with headspace National Office as required. Country SA PHN 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

30/06/2026

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones



Activity Commissioning

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

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

Is this activity being co-designed?

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

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

Work towards remodelling of existing providers within a new service model against Performance Based Commissioning (PBC) model and principles.

Future commissioning Strategy to be informed by Performance Based Commissioning (PBC) for 2023/24 - 2025/26 AWP to be updated at next opportunity reflective of any changes to market approach and service provider landscape

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



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

Existing, Modified or New Activity *

Modified



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 young 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.

The primary goals of Youth Triple C is to:

improve access to adequate level of primary mental health care intervention to maximise recovery and prevent escalation; and provide wrap-around coordinated care for young people with complex needs.

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.

In order achieve the primary goals of the Youth Triple C program, providers must perform the following objectives of the program:

Provide clinical mental health services to support the needs of young people with, or at risk of severe and complex mental illness

who are best managed in primary health care
 Improve care by providing service coordination, regular follow up and review, access to support and compliance with treatment plans
 Promote the use of a single multiagency care plan to help link providers across multiple services involved in an individual's care
 Ensure that referral pathways are in place to enable and support clients to seamlessly transition between services as their needs change
 Contribute to addressing the physical health inequities of individuals with severe mental illness within the region
 Support GPs in their key role in assessment and support engagement between GPs and Psychiatrists where required
 Support step up/step down and post discharge activities with state funded Local Hospital Network (LHN) mental health services
 Coordinate support between GPs, state funded LHN and national NDIS assessment and referral to help match young people to the service pathway which best meets their needs
 Support clients to effectively manage their symptoms and avoid unnecessary hospitalisation
 Enable improved access and coordination across alcohol and other drug and mental health services where appropriate, for clients with comorbidities
 A priority for Youth Triple C providers is planning for improving the physical health and wellbeing of young people living with mental illness. This should include:

Promotion of the importance of early intervention and prevention activity to reduce the impact of mental illness on physical health (e.g. addressing lifestyle issues early in disease)
 Expectations of routine screening for physical health and regular medication review
 Promoting pathways to services for physical health needs, particularly through GPs.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment 2022-2025 (Nov 2023) V3

Priorities

| Priority | Page reference |
|---|----------------|
| Access to specialist MH services for young people | 66 |
| Access to specialist services to support developmental health and wellbeing of children and youth | 71 |



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.

Country SA PHN's consumer focus is translated through the experience and outcomes of consumers who live, work and play in communities across country South Australia. The consumer focus supports a holistic approach to services 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. Supporting all members of our community 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 |
|----------------------------|----------|
| Mid North | 40503 |
| Outback - North and East | 40602 |
| Fleurieu - Kangaroo Island | 40701 |
| Limestone Coast | 40702 |



Activity Consultation and Collaboration

Consultation

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

Collaboration with existing and new providers of the program will continue, these are:

Country and Outback Health

iREACH

FocusOne Health

Uniting Communities

Barossa Hills Fleurieu Local Health Network

Country SA PHN has undertaken a wide range of stakeholder consultation and engagement activities to support the provision of mental health services for people with severe and complex mental illness in the Country SA across jurisdictions.

Country SA PHN's consumer focus is translated through the experience and outcomes of consumers who live, work and play in communities across country South Australia. The consumer focus supports a holistic approach to services 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. Supporting all members of our community; across all age groups, cultural values, family groupings, ability or disability, advantage or disadvantage, and sexual orientation.

Country SA PHN is committed to working with young people via the headspace youth advisory platform, ensuring those with a lived experience of mental ill-health and/or suicide, their families and carers, are able to provide their knowledge as central to the design, planning, delivery and evaluation of services.

Collaboration

Using the IAR levels of care approach Country SA PHN 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
- Aboriginal health services

Country SA PHN is committed to working with lived experience representatives of mental ill-health and/or suicide, their families and carers, to embed lived experience knowledge as central to the design, planning, delivery and evaluation of services. Lived Experience Representatives are formally engaged to support the implementation of the Bilateral Schedule on Mental Health and Suicide Prevention: South Australia, and our broader mental health program activity

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

30/06/2026

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones



Activity Commissioning

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

Not Yet Known: No

Continuing Service Provider / Contract Extension: Yes

Direct Engagement: No

Open Tender: No

Expression Of Interest (EOI): No

Other Approach (please provide details): No

Is this activity being co-designed?

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?

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

Decommissioning

Decommissioning details?

Co-design or co-commissioning comments

Work towards remodelling of existing providers within a new service model against Performance Based Commissioning (PBC) model and principles.

Future commissioning Strategy to be informed by Performance Based Commissioning (PBC) for 2023/24 - 2025/26 AWP to be updated at next opportunity reflective of any changes to market approach and service provider landscape.

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

Yes



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



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

Existing, Modified or New Activity *

Modified



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 (updated Mount Barker and Port Lincoln to transition to full centres in next 12-18 months.
- 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 2022-2025 (Nov 2023) V3

Priorities

| Priority | Page reference |
|---|----------------|
| Access to specialist MH services for young people | 66 |



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 the experience and outcomes of consumers who live, work and play in communities across country South Australia. The consumer focus supports a holistic approach to services 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. Supporting all members of our community 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 |
|-------------------------------|----------|
| Fleurieu - Kangaroo Island | 40701 |
| Eyre Peninsula and South West | 40601 |
| Adelaide Hills | 40102 |



Activity Consultation and Collaboration

Consultation

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

Country SA PHN is committed to working with lived experience representatives of mental ill-health and/or suicide, their families and carers, to embed lived experience knowledge as central to the design, planning, delivery and evaluation of services. Lived Experience Representatives are formally engaged to support the implementation of the Bilateral Schedule on Mental Health and Suicide Prevention: South Australia, and our broader mental health program activity.

Collaboration

Country SA PHN will collaborate with headspace National Office and Royal Flying Doctor Service as required. Country SA PHN 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

30/06/2025

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

Direct negotiation with current commissioned provider.

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

Yes



MH - 2700 - Expansion of regional headspace centres via upgrade of Port Lincoln Satellite to a full Centre



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

2700

Activity Title *

Expansion of regional headspace centres via upgrade of Port Lincoln Satellite to a full Centre

Existing, Modified or New Activity *

Modified



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 Eyre Peninsula in line with headspace new service implementation guidelines.

Description of Activity *

Young people within Port Lincoln region will have enhanced access to headspace services with the upgrade to a full Centre.

Initial uplift within existing site to occur before December 2022 to meet 'full site' expectations with further activity to occur sourcing a new location for build or renovation longer term.

Needs Assessment Priorities ***Needs Assessment**

Needs Assessment 2022-2025 (Nov 2023) V3

Priorities

| Priority | Page reference |
|--|----------------|
| Access to mental health services in rural and remote areas | 66 |
| Access to specialist MH services for young people | 66 |



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 requiring complex care in high need locations, such as rural South Australia. Country SA PHN's consumer focus is translated through the experience and outcomes of consumers who live, work and play in communities across country South Australia. The consumer focus supports a holistic approach to services 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. Supporting all members of our community across all age groups, cultural values, family groupings, ability or disability, advantage or disadvantage, sexual orientation.

Country SA PHN is committed to working with lived experience representatives of mental ill-health and/or suicide, their families and carers, to embed lived experience knowledge as central to the design, planning, delivery and evaluation of services. Lived Experience Representatives are formally engaged to support the implementation of the Bilateral Schedule on Mental Health and Suicide Prevention: South Australia, and our broader mental health program activity.

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 |



Activity Consultation and Collaboration

Consultation

HeadSpace Port Lincoln satellite site is regularly visited, consulted and supported by Country SA PHN. Ongoing monitoring and performance discussions are undertaken to ensure that the services remain effective and efficient, whilst meeting the need of the local area.

Collaboration

CCountry SA PHN will collaborate with headspace National and the lead agency in the establishment and implementation of this enhanced service, to ensure services meet the requirements of the headspace Trademark Licence Deed.

This Satellite is part of the Country SA PHN headspace network, along with 7 other headspace sites in the Country SA PHN region, the PHN facilitates 6 weekly community of practice and operations meetings.

By proxy of the consortia model, centres have a collaboration relationship with primary care, mental health, alcohol and drug and vocational services, this is further supported by Country SA PHN joint regional planning across these sectors.



Activity Milestone Details/Duration

Activity Start Date

01/07/2021

Activity End Date

30/06/2024

Service Delivery Start Date

30/12/2022

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

Work towards remodelling of existing providers within a new service model against Performance Based Commissioning (PBC) model and principles.

Future commissioning Strategy to be informed by Performance Based Commissioning (PBC) for 2023/24 - 2024/25 AWP to be updated at next opportunity reflective of any changes to market approach and service provider landscape.

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

Yes



MH - 2800 - Flying headspace



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

2800

Activity Title *

Flying headspace

Existing, Modified or New Activity *

Modified



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 ***

Sustainable continuation and expansion of the Flying headspace model beyond initial CHHP funding, to support young people aged 12 to 25 years and their families who require mental health services in locations where access to services is limited.

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
- Commission a range of outreach mental health services and supports, including assessment, intervention, referral, community engagement, community awareness, to remote South Australian communities, in line with the headspace model;
- Continue working with the Royal Flying Doctor Service to deliver this Activity in collaboration with headspace Port Augusta;
- Expand the existing Flying headspace initiative to service an additional 2 remote communities (resulting in 6 communities to be serviced) in South Australia;
- Deliver these services in partnership with community-based service providers, where possible, or coordinate telehealth arrangements to ensure patients receive culturally safe and ongoing support, where required;
- Focus on vulnerable youth population groups, including Aboriginal and Torres Strait Islander youth; and
- Consider and plan for the potential continuation and ongoing sustainability of this Activity after the conclusion of the funding

period, using other funding available, such as Flexible funding, if in line with community need.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment 2022-2025 (Nov 2023) V3

Priorities

| Priority | Page reference |
|--|----------------|
| Access to mental health services in rural and remote areas | 66 |
| Access to specialist MH services for young people | 66 |



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 |
|--------------------------|----------|
| 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.

Placed based consultation in remote service locations with community, elders and ACCHO's by the commissioned service provider regarding any service expansion or enhancement to service delivery.

Collaboration

Country SA PHN will collaborate with headspace National Office as required. Country SA PHN will continue to have a relationship with the lead agency responsible for this bespoke and remote service which is delivered in collaboration with transport partner Royal Flying Doctor Service. By proxy of the consortia model, centres have a collaboration relationship with primary care, mental health, alcohol and drug and vocational services in their service delivery locations.



Activity Milestone Details/Duration

Activity Start Date

01/07/2022

Activity End Date

30/06/2026

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones



Activity Commissioning

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

Not Yet Known: No

Continuing Service Provider / Contract Extension: Yes

Direct Engagement: No

Open Tender: No

Expression Of Interest (EOI): No

Other Approach (please provide details): No

Is this activity being co-designed?

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



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



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)

Existing, Modified or New Activity *

Modified



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 AWP.

3.2 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 – this activity has ceased

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

Needs Assessment Priorities *

Needs Assessment

Needs Assessment 2022-2025 (Nov 2023) V3

Priorities

| Priority | Page reference |
|--|----------------|
| Access to mental health services in rural and remote areas | 66 |
| Access to specialist MH services | 68 |



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 underserved 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 mild to severe mental illness living in the Adelaide Hills, Fleurieu Peninsula and Kangaroo Island regions. Activity has ceased.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

No

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



Activity Consultation and Collaboration

Consultation

Country SA PHN has ongoing commitments to consultation through our established Primary Health Network Community Advisory 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.

Country SA PHN continues to work collaboratively with six regional LHN's and conduct service mapping of core and commissioned services across both sectors utilising the IAR levels of care. Two service mapping roundtables were held in 2023 with BHFLHN and YNLHN to identify:

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

Collaboration

Using the IAR levels of care approach Country SA PHN 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

30/06/2026

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones



Activity Commissioning

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

Not Yet Known: No

Continuing Service Provider / Contract Extension: Yes

Direct Engagement: No

Open Tender: No

Expression Of Interest (EOI): No

Other Approach (please provide details): No

Is this activity being co-designed?

No

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

Yes

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

No

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

No

Decommissioning

No

Decommissioning details?

Co-design or co-commissioning comments

Commission Method:

3.1 - Contract and maintain service delivery with current PTS providers

3.2 – Direct approach to suitable provider

Work towards remodelling of existing providers within a new service model against Performance Based Commissioning (PBC) model and principles.

Future commissioning Strategy to be informed by Performance Based Commissioning (PBC) for 2023/24 - 2025/26 AWP to be updated at next opportunity reflective of any changes to market approach and service provider landscape.

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

Yes



MH - 3120 - Continuation of commissioned activity for Services for older people in RACFs



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

3120

Activity Title *

Continuation of commissioned activity for Services for older people in RACFs

Existing, Modified or New Activity *

Modified



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 ***

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.

Description of Activity *

Continued delivery of PTS in RACFs across: Barossa & Gawler, Lower Fleurieu, Adelaide Hills, Upper Yorke Peninsula and Lower South East regions during 2023 - 2026 activity period.

Needs Assessment Priorities ***Needs Assessment**

Needs Assessment 2022-2025 (Nov 2023) V3

Priorities

| Priority | Page reference |
|--|----------------|
| Access to mental health services in rural and remote areas | 66 |
| Access to specialist MH services | 68 |



Activity Demographics

Target Population Cohort

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.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

No

| SA3 Name | SA3 Code |
|-------------------|----------|
| Murray and Mallee | 40703 |
| Barossa | 40501 |
| Limestone Coast | 40702 |
| Adelaide Hills | 40102 |



Activity Consultation and Collaboration

Consultation

Country SA PHN has ongoing commitments to consultation through our established Primary Health Network Community Advisory 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
- 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.

Country SA PHN continues to work collaboratively with six regional LHN's and conduct service mapping of core and commissioned services across both sectors utilising the IAR levels of care. Two service mapping roundtables were held in 2023 with BHFLHN and YNLHN to identify:

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

Collaboration

Using the IAR levels of care approach Country SA PHN 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

30/06/2026

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones



Activity Commissioning

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

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

Is this activity being co-designed?

No

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

Yes

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

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 - 4100 - Continuation of commissioned activity for Triple C



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

4100

Activity Title *

Continuation of commissioned activity for Triple C

Existing, Modified or New Activity *

Modified



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 *

Country SA PHN will 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 with an aim of:

- improve access to adequate level of primary mental health care intervention to maximise recovery and prevent escalation; and
- provide wrap-around coordinated care for people with complex needs.

Description of Activity *

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

In order achieve the primary goals of the Triple C program, providers must perform the following objectives of the program:

- Provide clinical mental health services to support the needs of people with severe and complex mental illness who are best managed in primary health care
- Improve care by providing service coordination, regular follow up and review, access to support and compliance with treatment

plans

- Promote the use of a single multiagency care plan to help link providers across multiple services involved in an individual's care
 - Ensure that referral pathways are in place to enable and support clients to seamlessly transition between services as their needs change
 - Contribute to addressing the physical health inequities of individuals with severe mental illness within the region
 - Support GPs in their key role in assessment and support engagement between GPs and Psychiatrists where required
 - Support step up/step down and post discharge activities with state funded Local Hospital Network (LHN) mental health services
 - Coordinate support between GPs, state funded LHN and national NDIS assessment and referral to help match people to the service pathway which best meets their needs
 - Support clients to effectively manage their symptoms and avoid unnecessary hospitalisation
- Support general practitioners and their patients with severe mental illness who can most appropriately be managed in primary care settings (i.e., individuals who do not require more specialised and intensive service delivery within the state and territory managed specialised mental health system).

Needs Assessment Priorities *

Needs Assessment

Needs Assessment 2022-2025 (Nov 2023) V3

Priorities

| Priority | Page reference |
|---|----------------|
| Whole of person care for people with complex mental illness and psychosocial disability | 69 |
| Access to specialist MH services for young people | 66 |



Activity Demographics

Target Population Cohort

People 18-65 years with severe and complex mental illness who can most appropriately be managed in primary care settings and are residing in the following LGA regions:

Barossa

Berri

Barmera

Clare and Gilbert Valleys

Copper Coast

Lower Eyre

Mount Barker

Mount Gambier

Naracoorte

Lucindale

Port Lincoln

Outback Areas

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 |
| Barossa | 40501 |
| Outback - North and East | 40602 |
| Limestone Coast | 40702 |
| Eyre Peninsula and South West | 40601 |
| Adelaide Hills | 40102 |



Activity Consultation and Collaboration

Consultation

Collaboration with existing and new providers of the program will continue, these are:

- Sonder Care
- Murray Mallee GP Network
- FocusOne Health
- Neami

Country SA PHN has undertaken a wide range of stakeholder consultation and engagement activities to support the provision of mental health services for people with severe and complex mental illness in the Country SA across jurisdictions.

Country SA PHN's consumer focus is translated through the experience and outcomes of consumers who live, work and play in communities across country South Australia. The consumer focus supports a holistic approach to services 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. Supporting all members of our community; across all age groups, cultural values, family groupings, ability or disability, advantage or disadvantage, and sexual orientation.

Country SA PHN is committed to working with lived experience representatives of mental ill-health and/or suicide, their families and carers, to embed lived experience knowledge as central to the design, planning, delivery and evaluation of services. Lived Experience Representatives are formally engaged to support the implementation of the Bilateral Schedule on Mental Health and Suicide Prevention: South Australia, and our broader mental health program activity.

Collaboration

Country SA PHN maintains a strong relationship with 6 regional LHN's and the local mental health teams within. Established goals between the PHN and LHN's to collaboratively work together regarding co commissioning opportunities, stepped carer ideology and workforce retention.

Continued engagement with key primary care services, public and private hospitals, General Practitioner clinics, Aboriginal Community Controlled Health Services and non-Government and community organisations including consumer and carer

representative groups or lived experience representatives.

Key Stakeholders, include but not limited to:

6 X Regional LHN's
Mental Health Coalition of SA
10 x ACCHO's
SA Dept for Health and Wellbeing
Office of the Chief Psychiatrist



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

30/06/2026

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones



Activity Commissioning

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

Not Yet Known: No

Continuing Service Provider / Contract Extension: No

Direct Engagement: 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?

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



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

Existing, Modified or New Activity *

Modified



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 community-based suicide prevention activities inclusive of 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 escalation 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 2022-2025 (Nov 2023) V3

Priorities

| Priority | Page reference |
|--|----------------|
| Access to culturally appropriate health services | 62 |
| Access to mental health services in rural and remote areas | 66 |



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

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, whom will advise the provider.

Activity 5.2: No

Coverage

Whole Region

No

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



Activity Consultation and Collaboration

Consultation

Country SA PHN has engaged with over 500 individuals face to face from regional and rural communities, undertook the largest placed based regional consultation across 2019 - 2022 gathering information to support implementation of a systems approach to suicide in regional SA. Additionally, Country SA PHN lead and or funded 78 community events and approx. 4563 people attended evidenced based training and capacity building opportunities. We continue to build on these regional consultations, which continues to inform Country SA PHN's suicide prevention initiatives.

Country SA PHN continues to engage in ongoing consultations and collaborative practice workshops with Adelaide PHN, Country Health SA, SA Health, ACCHO's, SA Suicide Prevention Networks, SA Department of Health and Wellbeing and SA Healths Preventative SA, The Office of the Chief Psychiatrist and Suicide Prevention Australia.

Country SA PHN collaborates with regional Suicide Prevention Networks and supports the work of the Networks strategic planning activity where appropriate.

Country SA PHN has ongoing commitments to consultation through our established Primary Health Network Community Advisory 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
- 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 client centred, cost-effective, locally relevant and aligned to local care experiences and expectations. The Suicide Prevention Regional Response Coordinator has engaged with a number of these committees during 2023/24.

In addition, CSAPHN's Suicide Prevention Regional Response Coordinator:

- is a key contact for the National Aboriginal Community Controlled Health Organisation's Culture Care Connect Program
- continues to engage with the Suicide Prevention Networks and community of practice events, and participates in the suicide prevention capacity building program, which provides expert research, evidence, and implementation support to communities across Australia.

continues to engage with Local Government to support the operationalisation of their Public Health Plans that relate to Mental Health and- Suicide Prevention and State Government Agencies in the development of their Suicide Prevention Plans prescribed by the Suicide Prevention Act 2021.

- continues to engage with non-government organisations that support groups identified at greater risk of suicide and/or provide

services that support psychosocial risk factors that are evidenced in the ABS Cause of Death Data release.

Collaboration

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

Using the IAR levels of care approach Country SA PHN has directed all providers of suicide prevention 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.

Country SA PHN 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 Council on Suicide Prevention, SA Government, as prescribed in the SA Suicide Prevention Act 2021

Maintain ongoing formal communication and collaboration with the Office of the Chief Psychiatrist, SA Health and Preventative Health SA to support the operationalisation of the Suicide Prevention Act 2021.

Country SA PHN commissioning activity will support the integrity and priority areas of the South Australian Suicide Prevention Plan 2023 – 2026, Local Regional Public Health Plans that relate to Suicide Prevention and State Government Agency Suicide Prevention Plans developed as prescribed in the Suicide Prevention Act 2021.



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

30/06/2026

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones



Activity Commissioning

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

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

Is this activity being co-designed?

No

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

Yes

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

No

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

No

Decommissioning

No

Decommissioning details?

Co-design or co-commissioning comments

Work towards remodelling of existing providers within a new service model against Performance Based Commissioning (PBC) model and principles.

Future commissioning Strategy to be informed by Performance Based Commissioning (PBC) for 2023/24 - 2025/26

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

Yes



MH - 5200 - Targeted Regional Initiatives for Suicide Prevention



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

5200

Activity Title *

Targeted Regional Initiatives for Suicide Prevention

Existing, Modified or New Activity *

Modified



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 *

Commission Targeted Regional Initiatives for Suicide Prevention adopting a community-led and systems-based approach to suicide prevention targeting populations identified at risk of suicide or suicidal distress.

Description of Activity *

Commission and/or adapt services, activities and education/training packages to build capacity and reduce stigma for at-risk cohorts in the community to identify and respond early to suicide distress inclusive of:

- Offering support via multiple channels including online, telephone, videoconference and face to face to meet community needs.
- Peer support and mentorship programs for people at risk or impacted by suicide.
- Improve care coordination and service pathways for people at risk of and/or bereaved by suicide.
- Engaging a full-time equivalent Suicide Prevention Regional Response Coordinator who will take primary responsibility for engagement, coordination and integration of early intervention and suicide prevention activities across regional stakeholders and service providers.

Targeted Regional Initiatives for Suicide Prevention would be projected to commence 2023/24 and extending into 2024/25 with activity funds that remain unexpended as part of a financial year operations 2022-23

Needs Assessment Priorities *

Needs Assessment

Needs Assessment 2022-2025 (Nov 2023) V3

Priorities

| Priority | Page reference |
|---|----------------|
| Access to suicide prevention and services | 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.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

Country SA PHN has engaged with over 500 individuals face to face from regional and rural communities, undertook the largest placed based regional consultation across 2019 - 2022 gathering information to support implementation of a systems approach to suicide in regional SA. Additionally, Country SA PHN lead and or funded 78 community events and approx. 4563 people attended evidenced based training and capacity building opportunities. We continue to build on these regional consultations, which continues to inform Country SA PHN's suicide prevention initiatives.

Country SA PHN continues to engage in ongoing consultations and collaborative practice workshops with Adelaide PHN, Country Health SA, SA Health, ACCHO's, SA Suicide Prevention Networks, SA Department of Health and Wellbeing and SA Healths Preventative SA, The Office of the Chief Psychiatrist and Suicide Prevention Australia.

Country SA PHN collaborates with regional Suicide Prevention Networks and supports the work of the Networks strategic planning activity where appropriate.

Country SA PHN has ongoing commitments to consultation through our established Primary Health Network Community Advisory 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
- 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 client centred, cost-effective, locally relevant and aligned to local care experiences and expectations. The Suicide Prevention Regional Response Coordinator has engaged with a number of these committees during 2023/24.

In addition, CSAPHN'S Suicide Prevention Regional Response Coordinator:

- is a key contact for the National Aboriginal Community Controlled Health Organisation's Culture Care Connect Program.
- continues to engage with the Suicide Prevention Networks and community of practice events, and participates in the suicide prevention capacity building program, which provides expert research, evidence, and implementation support to communities across Australia.
- continues to engage with Local Government to support the operationalisation of their Public Health Plans that relate to Mental Health and Suicide Prevention and State Government Agencies in the development of their Suicide Prevention Plans prescribed by the Suicide Prevention Act 2021.
- continues to engage with non-government organisations that support groups identified at greater risk of suicide and/or provide services that support psychosocial risk factors that are evidenced in the ABS Cause of Death Data release.

Collaboration

Using the IAR levels of care approach Country SA PHN has directed all providers of suicide prevention 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.

Country SA PHN 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
- Council on Suicide Prevention, SA Government, as prescribed under the SA Suicide Prevention Act 2021

Maintain ongoing formal communication and collaboration with the Office of the Chief Psychiatrist, SA Health and Preventative Health SA to support the operationalisation of the Suicide Prevention Act 2021.

Country SA PHN commissioning activity will support the integrity and priority areas of the South Australian Suicide Prevention Plan 2023 – 2026, Local Regional Public Health Plans that relate to Suicide Prevention and State Government Agency Suicide Prevention Plans developed as prescribed in the Suicide Prevention Act 2021.



Activity Milestone Details/Duration

Activity Start Date

01/07/2022

Activity End Date

30/06/2025

Service Delivery Start Date

1/07/2023

Service Delivery End Date

30/06/2025

Other Relevant Milestones



Activity Commissioning

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

Not Yet Known: 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?

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



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

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 2022-2025 (Nov 2023) V3

Priorities

| Priority | Page reference |
|--|----------------|
| Access to culturally appropriate health services | 62 |
| Access to mental health services in rural and remote areas | 66 |



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 Eyre

Mount Gambier

Outback Areas

Port Augusta

Streaky Bay

Whyalla

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 |
| Outback - North and East | 40602 |



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

30/06/2024

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

Work towards remodelling of existing providers within a new service model against Performance Based Commissioning (PBC) model and principles.

Future commissioning Strategy to be informed by Performance Based Commissioning (PBC) for 2023/24 - 2024/25 AWP to be updated at next opportunity reflective of any changes to market approach and service provider landscape.

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

Yes



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 *

Modified



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 Limestone Coast, Eyre Peninsula and South West, Outback - North and East, Murray Mallee, Fleurieu Peninsula and Adelaide Hills 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 Mount Gambier, Whyalla, Port Lincoln, Port Augusta, Berri, Murray Bridge, Victor Harbor and Mount Barker will have increased access and decreased wait times within the headspace Centres

Needs Assessment Priorities *

Needs Assessment

Needs Assessment 2022-2025 (Nov 2023) V3

Priorities

| Priority | Page reference |
|---|----------------|
| Access to specialist MH services for young people | 66 |



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 |
| Outback - North and East | 40602 |
| Fleurieu - Kangaroo Island | 40701 |
| Limestone Coast | 40702 |
| Eyre Peninsula and South West | 40601 |
| Adelaide Hills | 40102 |



Activity Consultation and Collaboration

Consultation

N/A

Collaboration

N/A

Activity Milestone Details/Duration

Activity Start Date

30/06/2020

Activity End Date

30/06/2025

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

