



## **Activity Work Plan 2019-2021:**

- **National Psychosocial Support Measure (NPSM) Funding**
- **National Psychosocial Support Transition (NPST) Funding**
- **Continuity of Support (COS) Funding**
- **Interface Funding**

This Activity Work Plan template has the following parts:

1. The National Psychosocial Support Activity Work Plan for the financial years 2019-20 and 2020-2021. Please complete the table of planned activities funded under the following:
  - Psychosocial Support Schedule, Item B.3 – National Psychosocial Support Measure (NPSM)
  - National Psychosocial Support Transition Funding (NPST)
  - Continuity of Support (COS) Funding
  - Interface Funding
2. The Indicative Budget for the financial years 2019-20 and 2020-21. Please attach an excel spreadsheet using the template provided to submit indicative budgets for:
  - Psychosocial Support Schedule, Item B.3 – National Psychosocial Support Measure (NPSM)
  - National Psychosocial Support Transition Funding (NPST)
  - Continuity of Support (COS) Funding
  - Interface Funding

***Adelaide PHN***

*This Activity Work Plan 2019-2021 has been endorsed by the CEO.*

*Resubmitted 29 July 2019 to report on extension of funding.*

## Contents

NPS1. Commissioning of non-clinical mental health services and contracting of appropriate organisation/s with psychosocial supports– Transition Activity. ....	4
NPS2. Responsive and appropriate psychosocial support services for people with severe and complex mental health conditions. ....	8
NPS3. Provision of information, education and capacity building activities regarding psychosocial supports. ....	12
NPS4. Capacity Building for the Health Workforce.....	16
NPS5. Data Information Management System .....	19
NPS6. Coordination and integration between psychosocial services, primary mental health care services, and mainstream services .....	23
NPS7. Commissioning of appropriate organisations to ensure seamless transition from Commonwealth Community Mental Health Services to the NDIS or Continuity of Support (COS) program .....	26
NPS8. Provision of information, education and capacity building activities regarding the NDIS and psychosocial supports.....	31
NPS9. Upskilling the Health Workforce in the requirements of NDIA’s access and eligibility and individual support planning process, and alternative pathways for those found ineligible. ....	35
NPS10. Responsive and appropriate psychosocial support services for people with severe and complex mental health conditions who have been found ineligible for the NDIS .....	40
NPS11. Provision of information, education and capacity building activities around alternative pathways for people who are ineligible for the NDIS.....	45
NPS12. Coordination and integration between psychosocial services, primary and acute mental health services, the aged care sector, specialist disability services and mainstream services .....	49
NPS13. Identify targeted projects for hard to reach populations to test their eligibility for the NDIS or to gain access to alternative psychosocial supports.....	53
NPS14. Co-design supports and services to be delivered under the COS program.....	57

## Overview

This National Psychosocial Support Activity Work Plan covers the period from 1 July 2019 to 30 June 2021. To assist with PHN planning, each activity nominated in this work plan can be proposed for a period of up to 24 months. Regardless of the proposed duration for each activity, the Department of Health will require PHNs to submit updates to the Activity Work Plan on an annual basis.

As required by the Department of Health, PHNs undertake a Needs Assessment to understand and develop locally identified needs and priorities for clients requiring Psychosocial Support Services. Table 1 lists the Adelaide PHN 2019-22 Needs Assessment priorities for Psychosocial Support Services.

**Table 1**

<b>Adelaide PHN Needs Assessment 2019-22 Priorities for Psychosocial Support Services (note: priorities will have reference title: NPS, e.g. NPS1.)</b>
<i>1. Responsive and appropriate psychosocial support services that meets the needs of people with severe and complex mental health conditions.</i>
<i>2. Increase awareness and promotion of psychosocial support services for people with severe and complex mental health conditions and their carers.</i>
<i>3. Increase the health workforce capacity to provide appropriate care to people with severe and complex mental health conditions.</i>

The Adelaide PHN has separated activities in this template according to the different funding streams: (1a) National Psychosocial Support Measure (NPSM), (2a) National Psychosocial Support Transition (NPST) Funding, and (3a) Continuity of Support (COS) Funding and (3b) Interface Funding.

# 1. (a) Planned activities for 2019-20 to 2020-21

## – National Psychosocial Support Measure (NPSM)

NPS1. Commissioning of non-clinical mental health services and contracting of appropriate organisation/s with psychosocial supports– Transition Activity.

<b>Proposed Activities – NPS 1 (NPSM)</b>	
<b>ACTIVITY TITLE</b>	<i>NPS1 – Commissioning of non-clinical mental health services and contracting of appropriate organisation/s with psychosocial supports– Transition Activity.</i>
<b>Existing, Modified, or New Activity</b>	<p>Modified Activity<sup>[001]</sup></p> <p>Previously referenced as NPS2.1 Commissioning of non-clinical mental health services and contracting of appropriate organisation/s with psychosocial supports in accordance with the NPS Guidance material.</p>
<b>Aim of Activity</b>	<p>The aim of this activity is to ensure a smooth transition for any NPS participant current as at 1/7/2019 who will transfer to a new commissioned provider. In order to ensure efficiency of administration and maximisation of service delivery, the two providers commissioned to deliver services between January 2019 and 30 June 2019 will be reduced to one from 1 July 2019. As such there will be a period of transition for some participants.</p> <p>This aim will specifically address priorities NPS1 and NPS2 as identified in the Needs Assessment Priorities table (Table 1) on page 2 of this document.</p>
<b>Description of Activity</b>	<p>Adelaide PHN will ensure the provider who is not commissioned to provide services post 30 June 2019, has appropriate transition plans in place for each participant to ensure continuity of care and services. These plans will also detail transition out/ service exit arrangements for those participants who choose not to continue with psychosocial supports.</p> <p>During the transition process, Adelaide PHN will ensure commissioned service providers maintain levels of clinical governance and workforce credentialing standards appropriate for psychosocial support services.</p> <p>To ensure that participants are supported to maintain their health and wellbeing during the transition, Adelaide PHN will work with the commissioned services to establish and enhance referral pathways and ‘joined-up’ processes between commissioned psychosocial support services and other appropriate community and clinical mental health services, along the primary mental health stepped-care continuum.</p> <p>Possible outcomes:</p> <ul style="list-style-type: none"> <li>- Individuals will be linked to ongoing community-based services, including the provision of psychosocial supports to link to/ and or integrate with clinical services where appropriate, according their individual support needs, in the timeframes indicated in their individual support plan.</li> </ul>

	<ul style="list-style-type: none"> <li>- Service numbers and details of each service type will be recorded according to the Primary Mental Health Care MDS. As per Primary Mental Health guidelines, each person will have a K10+ completed at the beginning and end of service indicating their wellbeing.</li> <li>- Individuals will be supported to apply for the NDIS as indicated in their individual support plan</li> </ul>
Target population cohort	People with severe and complex mental health conditions, living in the Adelaide metropolitan region, who are not eligible for assistance through the NDIS, and who are not receiving psychosocial services through the Continuity of Support program.
Indigenous specific	<p>Is this activity targeted to, or predominantly supporting, Aboriginal and Torres Strait Islander people?</p> <p>No</p> <p>If yes, briefly describe how this activity will engage with the Indigenous sector.</p>
Coverage	Entire Adelaide PHN region with prioritisation of participants with the highest identified need.
Consultation	<p>The Adelaide PHN continues to consult widely with stakeholders, peak representative bodies, professional and community organisations, providers (commissioned service providers, prospective service providers and general), membership groups, consumers and carers regarding primary mental health, alcohol and other drug, and psychosocial support services. This consultation occurs via a range of formal and informal methods including Adelaide PHN membership activities with Community Advisory Councils, Clinical Councils and the Health Priority Network, and Adelaide PHN representation on established provider forums and working groups. All outcomes from our consultation activities inform Adelaide PHN's strategic mental health planning, service design, commissioning and continuous improvement. Our commissioning framework enables elements of formal and informal co-design with stakeholders, ensuring the community voice is incorporated.</p> <p>While the psychosocial support services are not specifically targeted towards Aboriginal and Torres Strait Islander people it is important that our commissioned services meet their specific cultural and service design needs. As such, Adelaide PHN engages with local communities through the Aboriginal Community Advisory Council to ensure services are culturally sensitive, safe and appropriate. These consultations provide strategic input to the activity planning process, forming an important collaborative role with the Adelaide PHN.</p> <p>Key stakeholders in the transition process will be the commissioned services and participants and their carers accessing psychosocial services. Adelaide PHN will ensure commissioned providers have detailed transition plans for people who will require their services to be delivered by a new provider post June 30<sup>th</sup> 2019.</p>
Collaboration	The Adelaide PHN collaborates with Country SA PHN to ensure that the psychosocial support measure outcomes and services have consistent cross-boundary coverage e.g. maintain consistent eligibility criteria. This includes mutual sharing of information and resources with Country SA PHN so that GPs,

	<p>NGOs and other referrers who operate across boundaries have information relating to both sectors.</p> <p>The Adelaide PHN will collaborate with commissioned services, relevant peak bodies, stakeholders and State and Commonwealth agencies for this activity. This will include State Community Mental Health services and other relevant Local Health Network services. Established referral pathways with these stakeholders will ensure quality supports for people who are gradually reducing mental health supports as part of their recovery journey.</p> <p>The Adelaide PHN will work with commissioned services to target General Practice, Allied Health Professionals and other potential referrers, to ensure that they are aware of the transition activity and altered referral pathways post-July 1<sup>st</sup> 2019.</p> <p>The Adelaide PHN is partnering with GlobalHealth (software developer) to develop tools to collect and measure reported outcome and experiences of people, Primary Mental Health Care MDS data collection and parallel support tools/resources relevant to the NPS Measure.</p>
Activity milestone details/ Duration	<p>Provide the anticipated activity start and completion dates <b>(including the planning and procurement cycle)</b>:</p> <p>Activity start date: 1/07/2019 Activity end date: 30/09/2019</p> <p><b>If applicable</b>, provide anticipated service delivery start and completion dates <b>(excluding the planning and procurement cycle)</b>:</p> <p>Service delivery start date: July 2019 Service delivery end date: September 2019</p> <p>Any other relevant milestones?</p>
Commissioning method and approach to market	<p>1. Please identify your intended procurement approach for commissioning services under this activity:</p> <p><input type="checkbox"/> Not yet known  <input type="checkbox"/> Continuing service provider / contract extension  <input type="checkbox"/> Direct engagement. If selecting this option, provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date.  <input type="checkbox"/> Open tender  <input type="checkbox"/> Expression of Interest (EOI)  <input checked="" type="checkbox"/> Other approach (please provide details) – <b><i>This activity is funded from the 18/19 underspend for NPSM and will ensure that the existing clients who were supported by a non-continuing provider will be able to have their supports moved to the new provider in an efficient and supportive manner during the first three months of the 19/20 financial year.</i></b></p> <p>2a. Is this activity being co-designed? No</p> <p>2b. Is this activity this result of a previous co-design process? Yes</p>

	<p>3a. Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? No</p> <p>3b. Has this activity previously been co-commissioned or joint-commissioned? No</p>
Decommissioning	<p>1a. Does this activity include any decommissioning of services? Yes</p> <p>1b. If yes, provide a description of the proposed decommissioning process and any potential implications. As part of the Community Consultations conducted in October 2018, one of the challenges faced by local service providers when delivering psychosocial support services was being able to refer people to appropriate services where their own do not meet consumer need. Part of the frustration for the providers was not knowing which services were available in which location, how to refer to these, and if the service had capacity.</p> <p>Both Neami and Life Without Barriers were involved in the co-design process for the NPS Measure. The issue with disjointed services as described above was discussed as well as the long-term sustainability of the NPS Measure. This included input on the desired service delivery model for the NPS measure post July 1<sup>st</sup>, 2019. It was agreed by all parties involved in the co-design process that it was a) important to ensure maximum choice and control for participants, and b) ensure sustainable and consistent models of service delivery, referral pathways and information sharing across the metropolitan region. Preliminary discussions include the use of a sub-contractor/ consortium model which allows choice and control for the participants by having a selection of specialist psychosocial providers but has a lead agency who works directly with Adelaide PHN to ensure the quality and consistent service delivery. All involved agreed that to ensure sustainability of the program, a single lead provider across the metropolitan region would be the preferred option.</p> <p>A direct approach was proposed due to the track-record and strong performance of the providers within the psychosocial space. Both providers were the lead agencies for the provision of the Partners in Recovery (PIR) program within the Adelaide PHN region (which will expire on 30 June 2019). They have an emphasis on capacity building and connectedness, that is building the skills and ability of individuals to assist them to manage their mental illness, improve their relationships with family and others and increase social and economic participation.</p>

NPS2. Responsive and appropriate psychosocial support services for people with severe and complex mental health conditions.

<b>Proposed Activities – NPS 2 (NPSM)</b>	
<b>ACTIVITY TITLE</b>	<i>NPS2- Commissioning of responsive and appropriate psychosocial support services for people with severe and complex mental health conditions.</i>
<b>Existing, Modified, or New Activity</b>	New Activity <sup>[OBJ]</sup>
<b>Aim of Activity</b>	<p>The aim if this activity is to ensure that the services delivered under the NPS measure reflect community need and are delivered in an efficient and quality manner. This will be achieved by combining service delivery data with feedback received as part of the annual needs assessment, advice from members, consumers and the community to identify potential service gaps.</p> <p>This aim will specifically address priorities NPS1 and NPS2 as identified in the needs assessment priorities table on page 2 of this document.</p>
<b>Description of Activity</b>	<p>The NPS measure is based around non-clinical supports which focus on capacity building from an early intervention perspective. As such the activities provided as part of the psychosocial support measure will vary depending on the community and individual need. This activity is in response to feedback received during consultation activities in October 2018. This community feedback indicated that participants of psychosocial support services wanted to be able to access services which were tailored to their specific needs. This included support to access to more intensive services when they were required and being able to access appropriate services according to their individual needs.</p> <p>Information will be sought from our collaborative partners (please see description below) regarding their experience of service gaps and possible solutions to these. Responses to this information may include targeted service types designed to meet specific needs e.g. LGBTIQ+, Culturally and Linguistically Diverse communities, or the Aboriginal and Torres Strait Islander Community.</p> <p>Within this activity Adelaide PHN will leverage Information and Communication Technology (ICT) resources including the MasterCare database to provide commissioned providers with quality and timely information on service gaps and areas where limited services are being provided. This will include the monitoring of waiting lists and the interrogation of referral pathways.</p> <p>If gaps are identified by the above methods, Adelaide PHN will work closely with commissioned services to revise service delivery as identified by key stakeholders from throughout the community, membership and external service providers.</p> <p>Possible outcomes:</p> <ul style="list-style-type: none"> <li>- Individuals will be linked to ongoing community-based services, including clinical services where appropriate, according their individual support needs, in the timeframes indicated in their individual support plan.</li> </ul>

	<ul style="list-style-type: none"> <li>- Service numbers and details of each service type will be recorded according to the Primary Mental Health Care MDS. As per Primary Mental Health Care Minimum Data set requirements, each person will complete a K10+ at the beginning and end of service</li> <li>- Individuals will be supported to apply for the NDIS as indicated in their individual support plan</li> </ul>
Target population cohort	People with severe and complex mental health conditions, living in the Adelaide metropolitan region, who are not eligible for assistance through the NDIS, and who are not receiving psychosocial services through the Continuity of Support program or the NSPM Extended Transition.
Indigenous specific	<p>Is this activity targeted to, or predominantly supporting, Aboriginal and Torres Strait Islander people?</p> <p>No</p> <p>If yes, briefly describe how this activity will engage with the Indigenous sector.</p>
Coverage	Entire Adelaide PHN region with prioritisation of people experiencing the highest identified need.
Consultation	<p>The Adelaide PHN continues to consult widely with stakeholders, representative bodies, professional and community organisations, providers (commissioned service providers, prospective service providers and general), membership groups, consumers and carers regarding primary mental health, alcohol and other drugs, and psychosocial support services. This consultation occurs via a range of formal and informal methods including Adelaide PHN membership activities with Community Advisory Councils, Clinical Councils and the Health Priority Network, and Adelaide PHN representation on established provider forums and working groups. All outcomes from our consultation activities inform Adelaide PHN's strategic mental health planning, service design, commissioning and continuous improvement. Our commissioning framework enables elements of formal and informal co-design with stakeholders, ensuring the community voice is incorporated.</p> <p>While psychosocial support services are not specifically targeted towards Aboriginal and Torres Strait Islander people it is important that commissioned services meet their specific cultural and service design needs. As such, Adelaide PHN will engage with local communities through the Aboriginal Community Advisory Council, the metropolitan ACCHO, and other specific reference groups, to ensure services are culturally sensitive, safe and appropriate. These consultations provide strategic input to the activity planning process, forming an important collaborative role with the Adelaide PHN.</p> <p>Regular information sharing meetings will be maintained with State Mental Health services, NDIS Partners in the Community (Local Area Coordinators) and relevant peak bodies such as the Mental Health Coalition of SA, Carers SA and National Disability Services to ensure any information they are gathering as part of their advocacy activities are included in any commissioning activities.</p>

	<p>The Adelaide PHN will continue to play a role in the South Australian NDIS Transition Taskforce and its subcommittees, as facilitated by the Office of the Chief Psychiatrist. This taskforce has a membership including NGOs actively working in the psychosocial support sector, peak and representative bodies, the NDIA, Local Health Networks and consumer and carer representatives.</p>
<p>Collaboration</p>	<p>The Adelaide PHN collaborates with Country SA PHN to ensure that the psychosocial support measure outcomes and services have consistent cross-boundary coverage e.g. maintain consistent eligibility criteria. This includes mutual sharing of information and resources with Country SA PHN so that GPs, NGOs and other referrers who operate across boundaries have access to both metropolitan and rural information.</p> <p>Collaboration with commissioned services, relevant peak bodies, stakeholders and State and Commonwealth agencies will occur for this activity. This will include State Community Mental Health services and other relevant Local Health Network services. Established referral pathways with these stakeholders will ensure quality supports for people who are gradually reducing mental health supports as part of their recovery journey.</p> <p>The Adelaide PHN will work with commissioned services and Adelaide PHN Practice Facilitators to target General Practice, Allied Health Professionals and other potential referrers, to ensure that they are aware of the eligibility criteria and services available for people with severe and complex mental health conditions. Collaboration with these groups will ensure that people are referred to the right services at the right time in their recovery journey.</p> <p>The Adelaide PHN is partnering with GlobalHealth (software developer) to collect and measure of Person/ participant Reported Outcome/Experience Measures (PREMS/PROMS), Primary Mental Health Care MDS data collection and parallel support tools/resources.</p>
<p>Activity milestone details/ Duration</p>	<p>Provide the anticipated activity start and completion dates <b>(including the planning and procurement cycle)</b>:  Activity start date: 1/07/2019  Activity end date: 30/6/2021</p> <p><b>If applicable</b>, provide anticipated service delivery start and completion dates <b>(excluding the planning and procurement cycle)</b>:  Service delivery start date: July 2019  Service delivery end date: June 2021.</p> <p>Any other relevant milestones?</p>
<p>Commissioning method and approach to market</p>	<p>1. Please identify your intended procurement approach for commissioning services under this activity:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Not yet known</li> <li><input type="checkbox"/> Continuing service provider / contract extension</li> <li><input checked="" type="checkbox"/> Direct engagement. If selecting this option, provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date. – <b><i>Direct engagement will be used in this instance to minimise the transition difficulties faced by participants. The two providers were initially chosen due to their experience, sector coverage and delivery of</i></b></li> </ul>

	<p><b><i>similar programs. Please see the detailed description of the process in NPS1 above.</i></b></p> <p><input type="checkbox"/> Open tender</p> <p><input type="checkbox"/> Expression of Interest (EOI)</p> <p><input type="checkbox"/> Other approach (please provide details)</p> <p>2a. Is this activity being co-designed? No</p> <p>2b. Is this activity this result of a previous co-design process? Yes</p> <p>3a. Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? No</p> <p>3b. Has this activity previously been co-commissioned or joint-commissioned? No</p>
Decommissioning	<p>1a. Does this activity include any decommissioning of services? No</p> <p>1b. If yes, provide a description of the proposed decommissioning process and any potential implications.</p>

NPS3. Provision of information, education and capacity building activities regarding psychosocial supports.

<b>Proposed Activities – NPS3 (NPSM)</b>	
ACTIVITY TITLE	<i>NPS3: Provision of information, education and capacity building activities regarding psychosocial supports.</i>
Existing, Modified, or New Activity	Indicate if this is an existing activity, modified activity, or a new activity.  New Activity
Aim of Activity	Adelaide PHN will work in partnership with commissioned services and other key stakeholders to actively promote the use of psychosocial supports to potential referrers, potential participants and their families and carers across the Adelaide Metropolitan region.  This aim will specifically address priorities NPS1, NPS2 and NPS3 as identified in the needs assessment priorities table on page 2 of this document.
Description of Activity	Various sources of information including hard copy collateral, website resources and links, attendance at network meetings and expos and face-to-face information sessions will be developed and utilised to support referrers, including General Practice, to determine if a person would be suitable for psychosocial supports and how psychosocial supports can be used to complement clinical services. The Adelaide PHN will a) broadly promote established services through promotional material, links to General Practice and commissioned providers, b) target promotion of established services to populations and/or areas of need.  This activity aims to promote the availability and where appropriate, utilisation of established Commonwealth funded online (e.g. Head to Health) and telephone based mental health intervention services (e.g. The Lived Experience Telephone Support Services). These may be used to complement participants of the NPS Measure by providing access to information, advice and self-help resources.  As the NPS measure is a new initiative, information provision and resource distribution will occur with a wide range of stakeholders. Information about the NPS measure including eligibility and referral information will be developed and distributed through the membership and stakeholder groups as detailed in the consultation section below.
Target population cohort	People with severe and complex mental health conditions, living in the Adelaide metropolitan region, who are not eligible for assistance through the NDIS, and who are not receiving psychosocial services through the Continuity of Support program.
Indigenous specific	Is this activity targeted to, or predominantly supporting, Aboriginal and Torres Strait Islander people?  No  If yes, briefly describe how this activity will engage with the Indigenous sector.

Coverage	Entire Adelaide PHN region with prioritisation in areas of highest identified need.
Consultation	<p>The Adelaide PHN continues to consult widely with stakeholders, representative bodies, professional and community organisations, providers (commissioned service providers, prospective service providers and general), membership groups, consumers and carers regarding primary mental health and alcohol and other drug services and needs. This consultation occurs through a range of formal and informal methods including Adelaide PHN membership activities with, Community Advisory Councils, Clinical Councils and the Health Priority Network and, as appropriate Adelaide PHN representation on established provider forums and working groups. All outcomes from our consultations inform Adelaide PHN's strategic mental health planning, service design, commissioning and continuous improvement.</p> <p>Our commissioning framework enables elements of formal and informal co-design with stakeholders, ensuring the community voice is incorporated. Consultation will occur with Aboriginal and Torres Strait Islander communities, including through the Aboriginal Community Advisory Council, ACCHO, and specific reference groups, to support culturally sensitive, safe and appropriate services for Aboriginal and Torres Strait Islander people. These consultations will provide strategic input in to the activity planning process, forming an important collaborative role with the Adelaide PHN.</p> <p>Regular information sharing meetings will be maintained with State Mental Health services, NDIS Partners in the Community (Local Area Coordinators) and relevant peak bodies such as the Mental Health Coalition of SA and National Disability Services to ensure any information they are gathering as part of their activities are included in any commissioning activities.</p> <p>The Adelaide PHN will continue to play a lead role in the South Australian NDIS Transition Taskforce facilitated by the Office of the Chief Psychiatrist. This taskforce has a membership including NGO's actively working in the psychosocial support sector, peak bodies such as Carers SA, Mental Health Coalition of SA, the NDIA, Local Health Network's and consumer and carer representatives.</p> <p>Local Government is a key stakeholder for this activity. They provide a range of community-based activities, support groups and programs which are targeted towards people who are potential participants of the psychosocial support program. Capacity building and information sharing will occur with staff involved in these programs to ensure referral pathways between programs.</p>
Collaboration	<p>The Adelaide PHN will continue to collaborate with Country SA PHN to ensure that the psychosocial support measure outcomes and services have consistent cross-boundary coverage e.g. maintain consistent eligibility criteria. This includes mutual sharing of information and resources with Country SA PHN so that GPs, NGOs and other referrers who operate across boundaries have information and entry pathways relating to both regions.</p> <p>The Adelaide PHN will collaborate with commissioned services, relevant peak bodies, stakeholders and State and Commonwealth agencies for this activity.</p>

	<p>This will include State Community Mental Health services and other relevant Local Health Network services. Established referral pathways with these stakeholders will ensure quality supports for people who are gradually reducing mental health supports as part of their recovery journey.</p> <p>The Adelaide PHN will work with commissioned services and Adelaide PHN Practice Facilitators to target General Practice, Allied Health Professionals and other potential referrers, to ensure that they are aware of the eligibility criteria and services available for people with severe and complex mental health conditions. Collaboration with these groups will ensure that people are referred to the right services at the right time in their recovery journey.</p>
<p>Activity milestone details/ Duration</p>	<p>Provide the anticipated activity start and completion dates <b>(including the planning and procurement cycle)</b>:</p> <p>Activity start date: 1/07/2019 Activity end date: 30/06/2021</p> <p><b>If applicable</b>, provide anticipated service delivery start and completion dates <b>(excluding the planning and procurement cycle)</b>:</p> <p>Service delivery start date: July 2019 Service delivery end date: June 2021</p> <p>Any other relevant milestones?</p>
<p>Commissioning method and approach to market</p>	<p>1. Please identify your intended procurement approach for commissioning services under this activity:</p> <p><input checked="" type="checkbox"/> Not yet known  <input type="checkbox"/> Continuing service provider / contract extension  <input type="checkbox"/> Direct engagement. If selecting this option, provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date.  <input type="checkbox"/> Open tender  <input type="checkbox"/> Expression of Interest (EOI)  <input type="checkbox"/> Other approach (please provide details)</p> <p>2a. Is this activity being co-designed? No</p> <p>2b. Is this activity this result of a previous co-design process? Yes</p> <p>3a. Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? No</p> <p>3b. Has this activity previously been co-commissioned or joint-commissioned? No</p>
<p>Decommissioning</p>	<p>1a. Does this activity include any decommissioning of services? No</p>

	1b. If yes, provide a description of the proposed decommissioning process and any potential implications.
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## NPS4. Capacity Building for the Health Workforce

<b>Proposed Activities – NPS4 (NPSM)</b>	
ACTIVITY TITLE	<i>NPS4 – Capacity Building for the Health Workforce</i>
Existing, Modified, or New Activity	<p>Indicate if this is an existing activity, modified activity, or a new activity.</p> <p>New Activity</p>
Aim of Activity	<p>The aim if this activity is to ensure capacity building and upskilling activities are accessible to the health workforce (including psychosocial support and peer workers) in order to ensure psychosocial services are quality, person centred, best practice informed and meet the needs of people with severe and complex mental health conditions.</p> <p>This aim will specifically address priorities NPS3 as identified in the needs assessment priorities table on page 2 of this document.</p>
Description of Activity	<p>Workers providing direct psychosocial support to people with severe and complex mental health conditions are required to have minimum levels of skills and knowledge to deliver quality services. These minimum expectations are detailed in the relevant Operational Guidelines and the Service and Clinical Governance Framework.</p> <p>Due to the individual nature of services as detailed in NPS2, additional skill sets may be required for frontline workers. Adelaide PHN will work with Commissioned Service providers to identify any additional skills required by these workers. These may include but are not limited to:</p> <ul style="list-style-type: none"> <li>• Mental Health First Aid</li> <li>• Cultural Awareness and Cultural Competency Training</li> <li>• Suicide Prevention (including safety planning)</li> <li>• Crisis Counselling (including but not limited to “People in Crisis” training)</li> <li>• Document keeping</li> <li>• Mandatory reporting requirements</li> <li>• Escalation and de-escalation pathways</li> </ul> <p>Peer workers are an integral part of service delivery for the NPS measure. Due to the health and wellbeing risks associated with using their own individual recovery journey as part of their day-to-day work, attention is required to ensure that they are provided with appropriate levels of support and capacity building. Activity within this aim may include but is not limited to:</p> <ul style="list-style-type: none"> <li>• Incorporation of recommendations as proposed as part of the Peer workforce guidelines, which will be developed by the Mental Health Commission as part of the Fifth National Mental Health and Suicide Prevention Plan by 2021.</li> <li>• Engagement with the Mental Health Coalition of South Australia’s Lived Experience Workforce Project.</li> </ul> <p>Regular engagement with GPs, Allied Health professionals and practice managers and nurses through commissioned training opportunities and various media engagement such as Primary Links, related to best practice in the use of integrated clinical and non-clinical care, understanding how</p>

	<p>psychosocial supports can be used alongside the stepped-care model and information for referral to improve primary health treatment and referral pathways.</p>
Target population cohort	<p>People with severe and complex mental health conditions, living in the Adelaide metropolitan region, who are not eligible for assistance through the NDIS, and who are not receiving psychosocial services through the Continuity of Support program.</p>
Indigenous specific	<p>Is this activity targeted to, or predominantly supporting, Aboriginal and Torres Strait Islander people?</p> <p>No</p> <p>If yes, briefly describe how this activity will engage with the Indigenous sector.</p>
Coverage	<p>Entire Adelaide PHN region with prioritisation of people residing in areas of highest identified need, or who are unable to access other psychosocial support services.</p>
Consultation	<p>The Adelaide PHN continues to consult widely with stakeholders, representative bodies, professional and community organisations, providers (commissioned service providers, prospective service providers and general), membership groups, consumers and carers regarding primary mental health and alcohol and other drug services and needs. This consultation occurs through a range of formal and informal methods including Adelaide PHN membership activities with, Community Advisory Councils, Clinical Councils and the Health Priority Network and, as appropriate Adelaide PHN representation on established provider forums and working groups. All outcomes from our consultations inform Adelaide PHN's strategic mental health planning, service design, commissioning and continuous improvement.</p> <p>Our commissioning framework enables elements of formal and informal co-design with stakeholders, ensuring the community voice is incorporated. Consultations will occur with Aboriginal and Torres Strait Islander communities, including the Aboriginal Community Advisory Council, ACCHO, and specific reference groups, to support culturally sensitive, safe and appropriate services for Aboriginal and Torres Strait Islander people. These consultations will provide strategic input in to the activity planning process, forming an important collaborative role with the Adelaide PHN.</p> <p>Adelaide PHN will maintain our relationship with the Mental Health Coalition of South Australia regarding the Lived Experience Workforce Project.</p>
Collaboration	<p>The Adelaide PHN collaborates with Country SA PHN to ensure cross-boundary coverage, and where appropriate consistency, for similar commissioned activities in South Australia.</p> <p>The Adelaide PHN will collaborate with commissioned service providers, relevant peak bodies, stakeholders and State and Commonwealth agencies for this activity.</p> <p>The Adelaide PHN will collaborate with commissioned service providers to target General Practice and other referrers, to primary mental health services</p>

	<p>for this activity. The Adelaide PHN will collaborate with organisations specialised in the delivery of training in General Practice and low-intensity interventions.</p>
<p>Activity milestone details/ Duration</p>	<p>Provide the anticipated activity start and completion dates <b>(including the planning and procurement cycle)</b>:  Activity start date: 1/07/2019  Activity end date: 30/06/2021</p> <p><b>If applicable</b>, provide anticipated service delivery start and completion dates <b>(excluding the planning and procurement cycle)</b>:  Service delivery start date: July 2019  Service delivery end date: June 2021</p> <p>Any other relevant milestones?</p>
<p>Commissioning method and approach to market</p>	<p>1. Please identify your intended procurement approach for commissioning services under this activity:</p> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Not yet known</li> <li><input type="checkbox"/> Continuing service provider / contract extension</li> <li><input type="checkbox"/> Direct engagement. If selecting this option, provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date.</li> <li><input type="checkbox"/> Open tender</li> <li><input type="checkbox"/> Expression of Interest (EOI)</li> <li><input type="checkbox"/> Other approach (please provide details)</li> </ul> <p>2a. Is this activity being co-designed? No</p> <p>2b. Is this activity this result of a previous co-design process? Yes</p> <p>3a. Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? No</p> <p>3b. Has this activity previously been co-commissioned or joint-commissioned? No</p>
<p>Decommissioning</p>	<p>1a. Does this activity include any decommissioning of services? No</p> <p>1b. If yes, provide a description of the proposed decommissioning process and any potential implications.</p>

## NPS5. Data Information Management System

<b>Proposed Activities - NPS5 (NPSM)</b>	
<b>ACTIVITY TITLE</b>	<i>NPS5 – Data Information Management System</i>
<b>Existing, Modified, or New Activity</b>	Indicate if this is an existing activity, modified activity, or a new activity.  New Activity
<b>Aim of Activity</b>	The activity will ensure commissioned services are reporting activity, outcomes and relevant service-related measurements in a consistent and comparable way.  This aim will specifically address priorities NPS1 and NPS2 as identified in the needs assessment priorities table on page 2 of this document.
<b>Description of Activity</b>	<p>The Adelaide PHN will support commissioned providers with appropriate Information and Communications Technology (ICT) systems to ensure data is reported and recorded in a consistent and comparable way. The use of a common ICT system across commissioned service providers will ensure commissioned services are appropriately monitored and service delivery arrangements are adjusted to reflect changes in population needs.</p> <p>Commissioned services will be provided with:</p> <ul style="list-style-type: none"> <li>• Access to the Client Information Management System (MasterCare) as a shared clinical management platform (EMR) across commissioned services. MasterCare supports the clinical management of clients and is configured to collect the necessary data and information required by commissioned services, facilitating the seamless integration of client related information within teams and between service sectors, particularly in regard to referrals and warm hand-overs. The aim of MasterCare is to improve the experience of people accessing primary health care services by minimising the need to duplicate processes across services. This will be a significant advantage for people who move between Psychosocial, AOD and Primary Mental Health services, and will support the coordination and shared clinical management of these people where appropriate.</li> <li>• Customised support, education and training in the application of MasterCare for the NPS Measure.</li> <li>• Access to the on-line shared information platform, <i>Confluence</i>. The current iteration of the platform contains program information, operational guidelines, service and ‘warm’ referral information, provider profiles, MasterCare work instructions, training materials and webinars, Minimum Data Set information and non-Adelaide PHN commissioned services/resources. Confluence provides a single access point for all non-sensitive information to support the implementation of programs funded by the Adelaide PHN, ensuring version control over Adelaide PHN created documents relevant to service delivery.</li> <li>• Datasheets for the development and monitoring of specific data information management elements specific to the Commonwealth community mental health programs to the NDIS.</li> </ul>

	<ul style="list-style-type: none"> <li>Datasheets for the development and implementation of appropriate data information and recording processes to track activity of service delivery to people who are ineligible for the NDIS.</li> </ul>
Target population cohort	People with severe and complex mental health conditions with an associated psychosocial disability, living in the Adelaide metropolitan region, who are accessing the NPSM, NPSM extended transition or COS programs.
Indigenous specific	<p>Is this activity targeted to, or predominantly supporting, Aboriginal and Torres Strait Islander people?</p> <p>No</p> <p>If yes, briefly describe how this activity will engage with the Indigenous sector.</p>
Coverage	Entire Adelaide PHN region with prioritisation of participants of highest identified need.
Consultation	<p>The Adelaide PHN continues to consult widely with stakeholders, representative bodies, professional and community organisations, providers (commissioned service providers, prospective service providers and general), membership groups, consumers and carers regarding primary mental health and alcohol and other drug services and needs. This consultation occurs through a range of formal and informal methods including Adelaide PHN membership activities with, Community Advisory Councils, Clinical Councils and the Health Priority Network and, as appropriate Adelaide PHN representation on established provider forums and working groups. All outcomes from our consultations inform Adelaide PHN's strategic mental health planning, service design, commissioning and continuous improvement.</p> <p>Our commissioning framework enables elements of formal and informal co-design with stakeholders, ensuring the community voice is incorporated. Consultation will occur with Aboriginal and Torres Strait Islander communities, including the Aboriginal Community Advisory Council, ACCHO, and specific reference groups, to support culturally appropriate services for Aboriginal and Torres Strait Islander people. These consultations will provide strategic input in to the activity planning process, forming an important collaborative role with the Adelaide PHN.</p>
Collaboration	<p>The Adelaide PHN collaborates with Country SA PHN to ensure that the psychosocial support measure outcomes and services have consistent cross-boundary coverage e.g. maintain consistent eligibility criteria. This includes mutual sharing of service information, referral processes and resources with Country SA PHN so that GPs, NGOs and other referrers who operate across boundaries have information relating to both regions.</p> <p>The Adelaide PHN will collaborate with commissioned services, relevant peak bodies, stakeholders and State and Commonwealth agencies for this activity. This will include State Community Mental Health services and other relevant Local Health Network services. Established referral pathways with these stakeholders will ensure quality supports for people who are gradually reducing mental health supports as part of their recovery journey.</p>

	<p>The Adelaide PHN will work with commissioned services and Adelaide PHN Practice Facilitators to target General Practice, Allied Health Professionals and other potential referrers, to ensure that they are aware of the eligibility criteria and services available for people with severe and complex mental health conditions. Collaboration with these groups will ensure that people are referred to the right services at the right time in their recovery journey.</p> <p>The Adelaide PHN is partnering with GlobalHealth (software developer) to collect and measure of Person/ participant Reported Outcome/Experience Measures (PREMS/PROMS), Primary Mental Health Care MDS data collection specific to the NPS Measure and parallel support tools/resources</p>
<p>Activity milestone details/ Duration</p>	<p>Provide the anticipated activity start and completion dates <b>(including the planning and procurement cycle)</b>:</p> <p>Activity start date: 1/07/2019 Activity end date: 30/06/2021</p> <p><b>If applicable</b>, provide anticipated service delivery start and completion dates <b>(excluding the planning and procurement cycle)</b>:</p> <p>Service delivery start date: July 2019 Service delivery end date: June 2021</p> <p>Any other relevant milestones?</p>
<p>Commissioning method and approach to market</p>	<p>1. Please identify your intended procurement approach for commissioning services under this activity:</p> <p><input checked="" type="checkbox"/> Not yet known  <input type="checkbox"/> Continuing service provider / contract extension  <input type="checkbox"/> Direct engagement. If selecting this option, provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date.  <input type="checkbox"/> Open tender  <input type="checkbox"/> Expression of Interest (EOI)  <input type="checkbox"/> Other approach (please provide details)</p> <p>2a. Is this activity being co-designed? No</p> <p>2b. Is this activity this result of a previous co-design process? Yes</p> <p>3a. Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? No</p> <p>3b. Has this activity previously been co-commissioned or joint-commissioned? No</p>
<p>Decommissioning</p>	<p>1a. Does this activity include any decommissioning of services? No</p>

	1b. If yes, provide a description of the proposed decommissioning process and any potential implications.
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NPS6. Coordination and integration between psychosocial services, primary mental health care services, and mainstream services

<b>Proposed Activities – NPS6 (NPSM)</b>	
ACTIVITY TITLE	<i>NPS6. Coordination and integration between psychosocial services, primary mental health care services, and mainstream services</i>
Existing, Modified, or New Activity	Indicate if this is an existing activity, modified activity, or a new activity.  New Activity
Aim of Activity	<p>This activity aims to ensure that psychosocial support services are designed and implemented to improve coordination, referral and integration between psychosocial services, broader health and mental health services including State Mental Health, and various associated mainstream services including but not limited to community housing and tenancy support, homelessness, corrections and health literacy.</p> <p>This aim will specifically address priorities NPS1 and NPS2 as identified in the needs assessment priorities table on page 2 of this document.</p>
Description of Activity	<p>Services delivered under the NPS measure aim to build ability and skills to assist people to manage their mental health condition, improve their relationships with family and others, and increase social and economic participation. To achieve this, there needs to be integration between the clinical mental health sector, psychosocial and community supports. Common types of activity delivered through psychosocial supports include building capacity and stability in maintaining relationships, developing strategies to manage tenancies and daily activities of keeping a home, financial management and budgeting; maintaining physical wellbeing, including exercise; and managing drug and alcohol addictions, including tobacco. This requires a high degree of integration with the broader services sector. Adelaide PHN will work in partnership with commissioned services providers and our membership to ensure that links are established and maintained with relevant services.</p> <p>To achieve the aims of this activity, the Adelaide PHN will establish pathways to, and processes for, referral between psychosocial supports, low intensity mental health services and other primary and state based mental health services. The Adelaide PHN will work with commissioned services to ensure clinical and non-clinical services are ‘joined-up’ and operating within a stepped-care continuum. This will include working with LHNs to ensure psychosocial supports complement State Mental Health supports.</p> <p>Adelaide PHN will work closely with commissioned services to maintain and enhance links with primary mental health care services (both those commissioned by Adelaide PHN and general clinical supports) to support an integrated team approach to meeting the needs of people with severe and complex mental health condition, and form part of a multi-agency care plan which integrates both clinical and non-clinical supports.</p>
Target population cohort	People with severe and complex mental health conditions, living in the Adelaide metropolitan region, who are not eligible for assistance through the

	NDIS, and who are not receiving psychosocial services through the NPSM Extended Transition or Continuity of Support programs.
Indigenous specific	<p>Is this activity targeted to, or predominantly supporting, Aboriginal and Torres Strait Islander people?</p> <p>No</p> <p>If yes, briefly describe how this activity will engage with the Indigenous sector.</p>
Coverage	Entire Adelaide PHN region with focus in areas of highest identified need.
Consultation	<p>The Adelaide PHN continues to consult widely with stakeholders, representative bodies, professional and community organisations, providers (commissioned service providers, prospective service providers and general), membership groups, consumers and carers regarding primary mental health and alcohol and other drug services and needs. This consultation occurs through a range of formal and informal methods including Adelaide PHN membership activities with, Community Advisory Councils, Clinical Councils and the Health Priority Network and, as appropriate Adelaide PHN representation on established provider forums and working groups. All outcomes from our consultations inform Adelaide PHN's strategic mental health planning, service design, commissioning and continuous improvement.</p> <p>Our commissioning framework enables elements of formal and informal co-design with stakeholders, ensuring the community voice is incorporated. Consultations will occur specifically with Aboriginal and Torres Strait Islander communities, including the Aboriginal Community Advisory Council, ACCHO, and specific reference groups, to support culturally sensitive, safe and appropriate services for Aboriginal and Torres Strait Islander people. These consultations will provide strategic input in to the activity planning process, forming an important collaborative role with the Adelaide PHN.</p>
Collaboration	<p>The Adelaide PHN collaborates with Country SA PHN to ensure that the psychosocial support measure outcomes and services have consistent cross-boundary coverage e.g. maintain consistent eligibility criteria. This includes mutual sharing of information, referral pathways and resources with Country SA PHN so that GPs, NGOs and other referrers who operate across boundaries have pertinent information.</p> <p>The Adelaide PHN will collaborate with commissioned services, relevant peak bodies, stakeholders and State and Commonwealth agencies for this activity. This will include State Community Mental Health services and other relevant Local Health Network services. Established referral pathways with these stakeholders will ensure quality supports for people who are gradually reducing mental health supports as part of their recovery journey.</p> <p>The Adelaide PHN will work with commissioned services and Adelaide PHN Practice Facilitators to target General Practice, Allied Health Professionals and other potential referrers, to ensure that they are aware of the eligibility criteria and services available for people with severe and complex mental health conditions. Collaboration with these groups will ensure that people are referred to the right services at the right time in their recovery journey.</p>

	<p>The Adelaide PHN is partnering with GlobalHealth (software developer) to collect and measure of Person/ participant Reported Outcome/Experience Measures (PREMS/PROMS), Primary Mental Health Care MDS data collection and parallel support tools/resources</p>
<p>Activity milestone details/ Duration</p>	<p>Provide the anticipated activity start and completion dates <b>(including</b> the planning and procurement cycle):  Activity start date: 1/07/2019  Activity end date: 30/06/2021</p> <p><b>If applicable</b>, provide anticipated service delivery start and completion dates <b>(excluding</b> the planning and procurement cycle):  Service delivery start date: July 2019  Service delivery end date: June 2021</p> <p>Any other relevant milestones?</p>
<p>Commissioning method and approach to market</p>	<p>1. Please identify your intended procurement approach for commissioning services under this activity:</p> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Not yet known</li> <li><input type="checkbox"/> Continuing service provider / contract extension</li> <li><input type="checkbox"/> Direct engagement. If selecting this option, provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date.</li> <li><input type="checkbox"/> Open tender</li> <li><input type="checkbox"/> Expression of Interest (EOI)</li> <li><input type="checkbox"/> Other approach (please provide details)</li> </ul> <p>2a. Is this activity being co-designed? No</p> <p>2b. Is this activity this result of a previous co-design process? Yes</p> <p>3a. Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? No</p> <p>3b. Has this activity previously been co-commissioned or joint-commissioned? No</p>
<p>Decommissioning</p>	<p>1a. Does this activity include any decommissioning of services? No</p> <p>1b. If yes, provide a description of the proposed decommissioning process and any potential implications.</p>

## 2. (a) Planned activities for 2019-20

### – National Psychosocial Support Transition (NPST) – Transition Funding

NPS7. Commissioning of appropriate organisations to ensure seamless transition from Commonwealth Community Mental Health Services to the NDIS or Continuity of Support (COS) program

<b>Proposed Activities – NPS7 (NPST – Transition Funding)</b>	
ACTIVITY TITLE	NPS7. Commissioning of appropriate organisations to ensure seamless transition from Commonwealth Community Mental Health Services to the NDIS or Continuity of Support (COS) program for people with severe and complex mental health conditions.
Existing, Modified, or New Activity	Indicate if this is an existing activity, modified activity, or a new activity.  New Activity
Aim of Activity	<p>The aim of this activity is to ensure that quality psychosocial support services and assistance to transition to either an NDIS provider or a COS provider are delivered by commissioned service providers to participants of Commonwealth community mental health programs active as at 30<sup>th</sup> June 2019 i.e. PIR, PHaMS and D2DL.</p> <p>These services will be required to ensure that:</p> <p>A) Participants receive appropriate levels of psychosocial support during the transition period to maintain their health and wellbeing; and</p> <p>B) participants complete and submit their NDIA Access and Request form; or</p> <p>C) participants appeal or resubmit their NDIA Access and Request form if their circumstances change, or they are unhappy with their access decision.</p> <p>This aim specifically addresses priorities NPS1 and NPS2 as identified in the needs assessment priorities table on page 2 of this document.</p>
Description of Activity	<p>The NPSM Extended Transition program is based around flexible, non-clinical psychosocial supports which focus on capacity building from an early intervention perspective alongside supporting people to apply for the NDIS. As such the activities provided as part of this measure will vary depending on the community and individual need.</p> <p>Commonwealth community mental health providers who were engaged by the Commonwealth during 18/19 to deliver PHaMS, PIR or D2DL will be commissioned to:</p> <ul style="list-style-type: none"> <li>• Provide support and assistance to participants to complete their NDIS Access Request Forms</li> <li>• Provide support and assistance to gather evidence to support the NDIS Access Request Forms including the completion of Functional Capacity Assessment forms such as LSP-16 and WHODAS</li> <li>• Continue psychosocial supports as directed in the person’s individual recovery support plan to ensure they maintain their health and wellbeing through the NDIS application process</li> </ul>

	<p>Information will be sought from these providers regarding their experience of service and knowledge gaps regarding transition to the NDIS and possible solutions to these. Responses to this information may include targeted service types designed to meet specific needs e.g. LGBTIQ+, Culturally and Linguistically Diverse communities, or the Aboriginal and Torres Strait Islander Community.</p> <p>Within this activity Adelaide PHN will leverage Information and Communication Technology (ICT) resources including the use of the Mastercare CRM to provide commissioned providers with quality and timely information on service gaps and areas where delays in transition are being experienced or common issues. This will include the monitoring of waiting lists and the interrogation of referral pathways.</p> <p>If gaps are identified by the above methods, Adelaide PHN will work closely with commissioned services to revise service delivery and share resources and knowledge around transition, access and eligibility, and planning as identified by key stakeholders from throughout the community, membership and external service providers.</p> <p>Possible outcomes:</p> <ul style="list-style-type: none"> <li>- Individuals will be linked to ongoing community based services, including clinical services where appropriate, according to their individual support needs, in the timeframes indicated in the individual support plan.</li> <li>- Service numbers and details of each service type will be recorded according to the Primary Mental Health Care MDS. As per Primary Mental Health MDS, each person will complete a K10+ at the beginning, review points and end of service.</li> <li>- Service providers will record their clients and NDIS outcomes in the Flinders University TRIS system.</li> <li>- Individuals will be supported to apply for the NDIS as indicated in their individual support plan. 100% of willing clients will have transitioned to NDIS or to Continuity of Supports by June 30th 2020.</li> </ul>
Target population cohort	<p>People with severe and complex mental health conditions, living in the Adelaide metropolitan region, who are have:</p> <ul style="list-style-type: none"> <li>A) not yet completed their access and eligibility testing not eligible for assistance through the NDIA; or,</li> <li>B) who have not yet received an eligibility outcome from the NDIA; or</li> <li>C) who have not yet completed their individual support planning process.</li> </ul>
Indigenous specific	<p>Is this activity targeted to, or predominantly supporting, Aboriginal and Torres Strait Islander people?</p> <p>No</p> <p>If yes, briefly describe how this activity will engage with the Indigenous sector.</p>
Coverage	<p>Entire Adelaide PHN region with focus in areas or with population groups exhibiting the highest identified need.</p>

<p>Consultation</p>	<p>Our commissioning framework enables elements of formal and informal co-design with stakeholders, ensuring the community voice is incorporated. Consultations will occur specifically with Aboriginal and Torres Strait Islander communities, including the through the Aboriginal Community Advisory Council, ACCHO, and specific reference groups, to support culturally sensitive, safe and appropriate services for Aboriginal and Torres Strait Islander people. This is particularly important during the NDIS application process as many people from Aboriginal and Torres Strait Islander backgrounds have not engaged with the NDIS.</p> <p>The Commonwealth Community Mental Health Service providers have been and will continue to be consulted regarding the design of the Extended Transition and Continuity of Supports program as per Activity NPS 14 below.</p> <p>In addition to the above consultations, the Adelaide PHN continues to engage widely with stakeholders, representative bodies, professional and community organisations, providers (commissioned service providers, prospective service providers and general), membership groups, consumers and carers regarding primary mental health and alcohol and other drug services and needs. This consultation occurs through a range of formal and informal methods including Adelaide PHN membership activities with, Community Advisory Councils, Clinical Councils and the Health Priority Network and, as appropriate Adelaide PHN representation on established provider forums and working groups. All outcomes from our consultations inform Adelaide PHN's strategic mental health planning, service design, commissioning and continuous improvement.</p> <p>As a key part of this activity is around gaining access to the NDIS for those who are eligible or being supported through the Continuity of Supports (COS) program if not NDIS eligible, formal pathways for consultation and collaboration will be developed with the Local Area Coordinators and the NDIA where applicable.</p>
<p>Collaboration</p>	<p>The Adelaide PHN collaborates with Country SA PHN to ensure that the psychosocial support measure outcomes and services have consistent cross-boundary coverage e.g. maintain consistent eligibility criteria. This includes mutual sharing of information, referral pathways and resources with Country SA PHN so that GPs, NGOs and other referrers who operate across boundaries have pertinent information. This is particularly important in the Extended transition activities as several of the commissioned providers operate services with cross-boundary management structures.</p> <p>The Adelaide PHN will collaborate with commissioned services, relevant peak bodies, stakeholders and State and Commonwealth agencies for this activity. This will include State Community Mental Health services and other relevant Local Health Network services including acute mental health services. Established referral pathways with these stakeholders will ensure quality supports for people who are gradually reducing mental health supports as part of their recovery journey, or who require supports following discharge from hospital.</p> <p>The Adelaide PHN will work with commissioned services and Adelaide PHN Practice Facilitators to target General Practice, Allied Health Professionals</p>

	<p>and other potential referrers, to ensure that they are aware of the eligibility criteria and services available for people with severe and complex mental health conditions. Collaboration with these groups will ensure that people are referred to the right services at the right time in their recovery journey.</p> <p>The Adelaide PHN is partnering with GlobalHealth (software developer) to collect and measure of Person/ participant Reported Outcome/Experience Measures (PREMS/PROMS), Primary Mental Health Care MDS data collection and parallel support tools/resources</p>
Activity milestone details/ Duration	<p>Provide the anticipated activity start and completion dates <b>(including</b> the planning and procurement cycle):</p> <p>Activity start date: 1/07/2019 Activity end date: 30/06/2020</p> <p><b>If applicable</b>, provide anticipated service delivery start and completion dates <b>(excluding</b> the planning and procurement cycle):</p> <p>Service delivery start date: July 2019 Service delivery end date: June 2020</p> <p>Any other relevant milestones?</p>
Commissioning method and approach to market	<p>1. Please identify your intended procurement approach for commissioning services under this activity:</p> <p><input type="checkbox"/> Not yet known  <input type="checkbox"/> Continuing service provider / contract extension  <input checked="" type="checkbox"/> Direct engagement. If selecting this option, provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date. – <i>Current organisations who were engaged by the Department of Health to deliver either PIR, PHaMS or D2DL will be engaged by Adelaide PHN for the period of the NPSM Extended Transition program. This strategy is based on a Market Sounding process with existing providers, feedback received as part of the Co-design process for the NPSM and advice from the Commonwealth.</i>  <input type="checkbox"/> Open tender  <input type="checkbox"/> Expression of Interest (EOI)  <input type="checkbox"/> Other approach (please provide details)</p> <p>2a. Is this activity being co-designed? Yes <i>Activities delivered under the Extended Transition program will be co-designed with existing providers. While there will be elements of the extended transition program which are aligned to the Commonwealth Community Mental Health Programs, elements will need to change due to the transition activities.</i></p> <p>2b. Is this activity this result of a previous co-design process? No</p> <p>3a. Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? No</p> <p>3b. Has this activity previously been co-commissioned or joint-commissioned?</p>

	No
Decommissioning	1a. Does this activity include any decommissioning of services? No 1b. If yes, provide a description of the proposed decommissioning process and any potential implications.

NPS8. Provision of information, education and capacity building activities regarding the NDIS and psychosocial supports

<b>Proposed Activities – NPS8 (NPST – Transition Funding)</b>	
ACTIVITY TITLE	NPS8. Provision of information, education and capacity building activities regarding the NDIS and psychosocial supports.
Existing, Modified, or New Activity	Indicate if this is an existing activity, modified activity, or a new activity.  New Activity
Aim of Activity	This activity will provide information, education and capacity building activities to staff and participants of the former Commonwealth Community Mental Health programs about the NDIS, its purpose and how it can support people with psychosocial disability.  This aim will specifically address priorities NPS2 and NPS3 as identified in the needs assessment priorities table on page 2 of this document.
Description of Activity	To achieve the aims of this activity, the Adelaide PHN will work with commissioned service providers and other key stakeholders to determine the needs of the community and their workforce around information and education.  Various sources of information including hard copy collateral, website resources and links, attendance at network meetings and expos and face-to-face information sessions will be developed and utilised to support referrers, including General Practice, to determine if a person would be suitable for psychosocial supports under the NDIS. The Adelaide PHN will a) broadly promote established services through promotional material, links to General Practice and commissioned providers, b) target promotion of established services to populations and/or areas of need.  This activity will promote the availability and where appropriate, utilisation of established Commonwealth funded online (e.g. <i>The Flinders University Transition Support Project</i> and <i>Reimagine Today</i> ) and telephone based mental health intervention services (e.g. The Lived Experience Telephone Support Services). These may be used to complement capacity building activities to participants of the NPS Measure by providing access to relevant information, advice and self-help resources.  Adelaide PHN will work closely with commissioned services to maintain and enhance knowledge of primary mental health care services (both those commissioned by Adelaide PHN and general clinical supports) to support an integrated team approach to meeting the needs of people with severe and complex mental health condition.
Target population cohort	People with severe and complex mental health conditions, living in the Adelaide metropolitan region, who are have: A) not yet completed their access and eligibility testing not eligible for assistance through the NDIA; or, B) who have not yet received an eligibility outcome from the NDIA; or C) who have not yet completed their individual support planning process.

Indigenous specific	<p>Is this activity targeted to, or predominantly supporting, Aboriginal and Torres Strait Islander people?</p> <p>No</p> <p>If yes, briefly describe how this activity will engage with the Indigenous sector.</p>
Coverage	Entire Adelaide PHN region with focus in areas or with population groups exhibiting the highest identified need.
Consultation	<p>The Adelaide PHN continues to consult widely with stakeholders, representative bodies, professional and community organisations, providers (commissioned service providers, prospective service providers and general), membership groups, consumers and carers regarding primary mental health and alcohol and other drug services and needs. This consultation occurs through a range of formal and informal methods including Adelaide PHN membership activities with, Community Advisory Councils, Clinical Councils and the Health Priority Network and, as appropriate Adelaide PHN representation on established provider forums and working groups. All outcomes from our consultations inform Adelaide PHN's strategic mental health planning, service design, commissioning and continuous improvement.</p> <p>Our commissioning framework enables elements of formal and informal co-design with stakeholders, ensuring the community voice is incorporated. Consultation will occur with Aboriginal and Torres Strait Islander communities, including the Aboriginal Community Advisory Council, ACCHO, and specific reference groups, to support culturally sensitive, safe and appropriate services for Aboriginal and Torres Strait Islander people. These consultations provide strategic input in to the activity planning process, forming an important collaborative role with the Adelaide PHN.</p> <p>As a key part of this activity is around gaining access to the NDIS for those who are eligible or transitioning to the Continuity of Supports (COS) program if not NDIS eligible, formal pathways for consultation and collaboration will be developed with the Local Area Coordinators and the NDIA where applicable. Participants and staff will be encouraged to engage with their relevant Local Area Coordinator for specific knowledge around the NDIS.</p>
Collaboration	<p>The Adelaide PHN collaborates with Country SA PHN to ensure that the psychosocial support measure outcomes and services have consistent cross-boundary coverage e.g. maintain consistent eligibility criteria. This includes mutual sharing of information, referral pathways and resources with Country SA PHN so that GPs, NGOs and other referrers who operate across boundaries have pertinent information.</p> <p>The Adelaide PHN will collaborate with commissioned services, relevant peak bodies, stakeholders and State and Commonwealth agencies for this activity. This will include State Community Mental Health services and other relevant Local Health Network services. Established referral pathways with these stakeholders will ensure quality supports for people who are gradually reducing mental health supports as part of their recovery journey.</p>

	<p>The Adelaide PHN will work with commissioned services and Adelaide PHN Practice Facilitators to target General Practice, Allied Health Professionals and other potential referrers, to ensure that they are aware of the eligibility criteria and services available for people with severe and complex mental health conditions. Collaboration with these groups will ensure that people are referred to the right services at the right time in their recovery journey.</p> <p>The Adelaide PHN is partnering with GlobalHealth (software developer) to collect and measure of Person/ participant Reported Outcome/Experience Measures (PREMS/PROMS), Primary Mental Health Care MDS data collection and parallel support tools/resources.</p> <p>Adelaide PHN will investigate options for collaborations with existing providers of GP, Allied Health and Nurse education to ensure these professionals have the skills needed to support people with psychosocial support needs complete their access and request forms.</p>
Activity milestone details/ Duration	<p>Provide the anticipated activity start and completion dates (<b>including</b> the planning and procurement cycle):</p> <p>Activity start date: 1/07/2019 Activity end date: 30/06/2020</p> <p><b>If applicable</b>, provide anticipated service delivery start and completion dates (<b>excluding</b> the planning and procurement cycle):</p> <p>Service delivery start date: July 2019 Service delivery end date: June 2020</p> <p>Any other relevant milestones?</p>
Commissioning method and approach to market	<p>1. Please identify your intended procurement approach for commissioning services under this activity:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Not yet known</li> <li><input type="checkbox"/> Continuing service provider / contract extension</li> <li><input checked="" type="checkbox"/> Direct engagement. If selecting this option, provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date. - <i>Current organisations who were engaged by the Department of Health to deliver either PIR, PHaMS or D2DL will be engaged by Adelaide PHN for the period of the NPSM Extended Transition program. This strategy is based on a Market Sounding process with existing providers, feedback received as part of the Co-design process for the NPSM and advice from the Commonwealth</i></li> <li><input type="checkbox"/> Open tender</li> <li><input type="checkbox"/> Expression of Interest (EOI)</li> <li><input type="checkbox"/> Other approach (please provide details)</li> </ul> <p>2a. Is this activity being co-designed? Yes <i>Activities delivered under the Extended Transition program will be co-designed with existing providers. While there will be elements of the extended transition program which are aligned to the Commonwealth Community Mental Health Programs, elements will need to change due to the transition activities.</i></p> <p>2b. Is this activity this result of a previous co-design process?</p>

	<p>No</p> <p>3a. Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements?</p> <p>No</p> <p>3b. Has this activity previously been co-commissioned or joint-commissioned?</p> <p>No</p>
Decommissioning	<p>1a. Does this activity include any decommissioning of services?</p> <p>No</p> <p>1b. If yes, provide a description of the proposed decommissioning process and any potential implications.</p>

### 3. (a) Planned activities for 2019-20

#### – Continuity of Support (COS) Funding

NPS9. Upskilling the Health Workforce in the requirements of NDIA’s access and eligibility and individual support planning process, and alternative pathways for those found ineligible.

<b>Proposed Activities – NPS9 (NPS Extended Funding)</b>	
ACTIVITY TITLE	NPS9. Upskilling the health workforce in the requirements of NDIA’s access and eligibility and individual support planning process, and alternative pathways for those found ineligible.
Existing, Modified, or New Activity	Indicate if this is an existing activity, modified activity, or a new activity.  New Activity
Aim of Activity	The aim of this activity is to ensure capacity building and upskilling activities about the NDIS, the access and eligibility process and planning for psychosocial supports in NDIS plans are accessible to the health workforce (including psychosocial support and peer workers). It will also upskill the workforce in alternative supports available if the person is found ineligible.  This aim will specifically address priorities NPS3 as identified in the needs assessment priorities table on page 2 of this document.
Description of Activity	Supporting people to complete the access and eligibility process and then if successful, the planning process is an additional skill sets for frontline workers. Adelaide PHN will work with Commissioned Service providers to identify any additional skills required by these workers. These may include but are not limited to: <ul style="list-style-type: none"> <li>• Mental Health First Aid</li> <li>• Cultural Awareness and Cultural Competency Training</li> <li>• Introduction to NDIS (or similar) as provided by the NDIA</li> <li>• The application of active engagement strategies</li> <li>• Sourcing alternative supports</li> </ul> <p>Commissioned service providers will be encouraged to send their staff, both frontline, assessment and supervisory, to appropriate training on the completion of the LSP-16 (Abbreviated Life Skills Profile), the HONOS (Health of the Nation Outcome Scale) and the WHODAS (World Health Organisation Disability Assessment Schedule). The application of these outcome measures require staff to be trained by Australian Mental Health Outcomes and Classification Network (AMHOCN). This will allow suitably qualified staff to assist with details of the impact of a person’s psychosocial disability on their functional assessment for the access and eligibility form.</p> <p>Peer workers are an integral part of service delivery for the NPSM Extended Transition. Due to the health and wellbeing risks associated with using their own individual recovery journey as part of their day-to-day work, attention is required to ensure that they are provided with appropriate levels of support and capacity building. Activity within this aim may include but is not limited to:</p>

	<ul style="list-style-type: none"> <li>• Incorporation of recommendations as proposed as part of the Peer workforce guidelines, which will be developed by the Mental Health Commission as part of the Fifth National Mental Health and Suicide Prevention Plan by 2021.</li> <li>• Engagement with the Mental Health Coalition of South Australia’s Lived Experience Workforce Project.</li> <li>• Promotion of, and commitment to the benefits of peer workers into the psychosocial workforce</li> </ul> <p>Regular engagement with GPs, Allied Health professionals and practice managers and nurses through commissioned training opportunities and various media engagement such as Primary Links, related to best practice in the use of integrated clinical and non-clinical care, understanding how psychosocial supports can be used alongside the stepped-care model and information for referral to improve primary health treatment and referral pathways.</p> <p>Adelaide PHN will investigate options for collaborations with existing providers of GP, Allied Health and Nurse education to ensure these professionals have the skills needed to support people with psychosocial support needs complete their access and request forms.</p> <p>This activity will consult with Adelaide PHN staff and stakeholders working in <i>Mental Health Services in Residential Aged Care Facilities</i> to ensure a consistent message for staff members supporting current NPSM Extended Transition and Continuity of Supports participants who are over 65 years of age. Together we will develop a toolkit to provide information to staff working in psychosocial supports and aged care to best support older people with severe and/or chronic mental health conditions accessing aged care including residential aged care facilities.</p> <p>Outcomes for this activity will be:</p> <ul style="list-style-type: none"> <li>- The health workforce delivering psychosocial support services can support a person to complete an NDIS Access and Eligibility form and submit this to the NDIA.</li> <li>- GP’s operating in the region are able to complete the form to a high degree of quality incorporating information provided by the GP, allied health professionals, the person and their supports as advised by the person and their supports.</li> </ul>
Target population cohort	<p>People with severe and complex mental health conditions, living in the Adelaide metropolitan region, who are have:</p> <ul style="list-style-type: none"> <li>A) not yet completed their access and eligibility testing not eligible for assistance through the NDIA; or,</li> <li>B) who have not yet received an eligibility outcome from the NDIA; or</li> <li>C) who have not yet completed their individual support planning process; or</li> <li>D) who have been found ineligible for the NDIS</li> </ul>
Indigenous specific	<p>Is this activity targeted to, or predominantly supporting, Aboriginal and Torres Strait Islander people?</p> <p>No</p>

	<p>If yes, briefly describe how this activity will engage with the Indigenous sector.</p>
Coverage	<p>Entire Adelaide PHN region with focus in areas or with population groups exhibiting the highest identified need.</p>
Consultation	<p>The Adelaide PHN continues to consult widely with stakeholders, representative bodies, professional and community organisations, providers (commissioned service providers, prospective service providers and general), membership groups, consumers and carers regarding primary mental health and alcohol and other drug services and needs. This consultation occurs through a range of formal and informal methods including Adelaide PHN membership activities with, Community Advisory Councils, Clinical Councils and the Health Priority Network and, as appropriate Adelaide PHN representation on established provider forums and working groups. All outcomes from our consultations inform Adelaide PHN's strategic mental health planning, service design, commissioning and continuous improvement.</p> <p>Our commissioning framework enables elements of formal and informal co-design with stakeholders, ensuring the community voice is incorporated. Consultation will occur with Aboriginal and Torres Strait Islander communities, including the Aboriginal Community Advisory Council, ACCHO, and specific reference groups, to support culturally sensitive, safe and appropriate services for Aboriginal and Torres Strait Islander people. These consultations provide strategic input in to the activity planning process, forming an important collaborative role with the Adelaide PHN.</p> <p>As a key part of this activity is around gaining access to the NDIS for those who are eligible or transitioning to the Continuity of Supports (COS) program if not NDIS eligible, formal pathways for consultation and collaboration will be developed with the Local Area Coordinators and the NDIA where applicable. Participants and staff will be encouraged to engage with their relevant Local Area Coordinator for specific knowledge around the NDIS.</p> <p>Consultations will also occur with the agencies responsible for the Commonwealth funded online (e.g. <i>The Flinders University Transition Support Project</i> and <i>Reimagine Today</i>) and telephone based mental health intervention services (e.g. The Lived Experience Telephone Support Services).</p>
Collaboration	<p>The Adelaide PHN collaborates with Country SA PHN to ensure that the psychosocial support measure outcomes and services have consistent cross-boundary coverage e.g. maintain consistent eligibility criteria. This includes mutual sharing of information, referral pathways and resources with Country SA PHN so that GPs, NGOs and other referrers who operate across boundaries have pertinent information.</p> <p>The Adelaide PHN will collaborate with commissioned services, relevant peak bodies, stakeholders and State and Commonwealth agencies for this activity. This will include State Community Mental Health services and other relevant Local Health Network services. Established referral pathways with these stakeholders will ensure quality supports for people who are gradually reducing mental health supports as part of their recovery journey.</p>

	<p>The Adelaide PHN will work with commissioned services and Adelaide PHN Practice Facilitators to target General Practice, Allied Health Professionals and other potential referrers, to ensure that they are aware of the eligibility criteria and services available for people with severe and complex mental health conditions. Collaboration with these groups will ensure that people are referred to the right services at the right time in their recovery journey.</p> <p>The Adelaide PHN is partnering with GlobalHealth (software developer) to collect and measure of Person/ participant Reported Outcome/Experience Measures (PREMS/PROMS), Primary Mental Health Care MDS data collection and parallel support tools/resources.</p> <p>Adelaide PHN will investigate options for collaborations with existing providers of GP, Allied Health and Nurse education to ensure these professionals have the skills needed to support people with psychosocial support needs complete their access and request forms.</p>
<p>Activity milestone details/ Duration</p>	<p>Provide the anticipated activity start and completion dates <b>(including</b> the planning and procurement cycle):  Activity start date: 1/07/2019  Activity end date: 30/06/2020</p> <p><b>If applicable</b>, provide anticipated service delivery start and completion dates <b>(excluding</b> the planning and procurement cycle):  Service delivery start date: July 2019  Service delivery end date: June 2020</p> <p>Any other relevant milestones?</p>
<p>Commissioning method and approach to market</p>	<p>1. Please identify your intended procurement approach for commissioning services under this activity:</p> <ul style="list-style-type: none"> <li><input type="checkbox"/> Not yet known</li> <li><input type="checkbox"/> Continuing service provider / contract extension</li> <li><input checked="" type="checkbox"/> Direct engagement. If selecting this option, provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date - <i>Current organisations who were engaged by the Department of Health to deliver either PIR, PHaMS or D2DL will be engaged by Adelaide PHN for the period of the NPSM Extended Transition program. This strategy is based on a Market Sounding process with existing providers, feedback received as part of the Co-design process for the NPSM and advice from the Commonwealth</i></li> <li><input type="checkbox"/> Open tender</li> <li><input type="checkbox"/> Expression of Interest (EOI)</li> <li><input type="checkbox"/> Other approach (please provide details)</li> </ul> <p>2a. Is this activity being co-designed?  Yes  <i>Activities delivered under the Extended Transition program will be co-designed with existing providers. While there will be elements of the extended transition program which are aligned to the Commonwealth Community Mental Health Programs, elements will need to change due to the transition</i></p>

	<p><i>activities. For the purposes of upskilling of the Health Workforce it will be especially important that co-design occurs. The options for capacity building and upskilling will need to be quite broad to meet the needs of the commissioned service providers, their participants and other key stakeholders.</i></p> <p>2b. Is this activity this result of a previous co-design process? No</p> <p>3a. Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? No</p> <p>3b. Has this activity previously been co-commissioned or joint-commissioned? No</p>
Decommissioning	<p>1a. Does this activity include any decommissioning of services? No</p> <p>1b. If yes, provide a description of the proposed decommissioning process and any potential implications.</p>

NPS10. Responsive and appropriate psychosocial support services for people with severe and complex mental health conditions who have been found ineligible for the NDIS

<b>Proposed Activities – NPS10 (COS Funding)</b>	
ACTIVITY TITLE	NPS10 Commissioning of Responsive and appropriate psychosocial support services for people with severe and complex mental health conditions who have been found ineligible for the NDIS
Existing, Modified, or New Activity	Indicate if this is an existing activity, modified activity, or a new activity.  New Activity
Aim of Activity	<p>The aim of this activity is to ensure that quality psychosocial support services are delivered to participants of Commonwealth community mental health programs i.e. PIR, PHaMS and D2DL who have been found ineligible for the NDIS.</p> <p>The commissioned service providers will be required to ensure that:</p> <p>A) Participants receive an appropriate level of psychosocial support to maintain their wellbeing as before the transition; and</p> <p>B) Participants are assisted to appeal or resubmit their NDIA Access and Request form if their circumstances change, or they are unhappy with their access decision.</p> <p>This aim specifically addresses priorities NPS1 and NPS2 as identified in the needs assessment priorities table on page 2 of this document.</p>
Description of Activity	<p>The Continuity of Supports program is based around non-clinical psychosocial supports which focus on capacity building from an early intervention perspective. Funded services will provide group psychosocial support activities and targeted individual support at times of increased need. The supports will be delivered by existing Commonwealth Community Mental Health service providers.</p> <p>Adelaide PHN will source information on the current cohort of people accessing Commonwealth Community Mental Health programs. Responses to this information may include additional targeted service types designed to meet specific needs e.g. LGBTIQ+, Culturally and Linguistically Diverse communities, or the Aboriginal and Torres Strait Islander Community. Targeted programs will be developed as described in Activity 14 below.</p> <p>Providers will be commissioned to:</p> <ul style="list-style-type: none"> <li>• continue to provide continuity of support program activities i.e. psychosocial supports to participants ineligible for the NDIS during the 19/20 financial year.</li> <li>• Develop linkages and formal referral pathways with specialist Aged Care providers for the Continuity of Support participants who are over 65 years of age</li> <li>• Contribute to the co-design of the program going forward. The framework will include the development of group-based activities and pathways, indicators and requirements that a person may require some individual supports.</li> </ul>

	<p>To ensure services are targeted towards participants with the highest need, a prioritisation checklist will be developed. This will detail pathways and access to group activities and will include indicators that a person may require some additional individual targeted supports. It will also indicate when a change of circumstance indicates that people may wish to reapply for the NDIS or MyAgedCare.</p> <p>Within this activity Adelaide PHN will leverage Information and Communication Technology (ICT) resources including the MasterCare database to provide commissioned providers with quality and timely information on service gaps and areas where delays in transition are being experienced or common issues. This will include the monitoring of waiting lists and the interrogation of referral pathways.</p> <p>If gaps are identified utilising the above methods, Adelaide PHN will work closely with commissioned services to revise service delivery and share resources and knowledge around transition, access and eligibility, and planning as identified by key stakeholders from throughout the community, membership and external service providers.</p>
Target population cohort	<p>People with severe and complex mental health conditions, living in the Adelaide metropolitan region, who are not eligible for assistance through the NDIS and who were active participants of a Commonwealth Community Mental Health program i.e. PIR, PHaMS or D2DL as at 30 June 2019. This includes people who were ineligible for the NDIS due to their age.</p>
Indigenous specific	<p>Is this activity targeted to, or predominantly supporting, Aboriginal and Torres Strait Islander people?</p> <p>No</p> <p>If yes, briefly describe how this activity will engage with the Indigenous sector.</p>
Coverage	<p>Entire Adelaide PHN region with focus in areas of, or populations with, the highest identified need.</p>
Consultation	<p>The Adelaide PHN continues to consult widely with stakeholders, representative bodies, professional and community organisations, providers (commissioned service providers, prospective service providers and general), membership groups, consumers and carers regarding primary mental health and alcohol and other drug services and needs. This consultation occurs through a range of formal and informal methods including Adelaide PHN membership activities with, Community Advisory Councils, Clinical Councils and the Health Priority Network and, as appropriate Adelaide PHN representation on established provider forums and working groups. All outcomes from our consultations inform Adelaide PHN's strategic mental health planning, service design, commissioning and continuous improvement.</p> <p>Our commissioning framework enables elements of formal and informal co-design with stakeholders, ensuring the community voice is incorporated. Consultation will occur with Aboriginal and Torres Strait Islander communities, including the Aboriginal Community Advisory Council, ACCHO,</p>

	<p>and specific reference groups, to support culturally sensitive, safe and appropriate services for Aboriginal and Torres Strait Islander people. These consultations provide strategic input in to the activity planning process, forming an important collaborative role with the Adelaide PHN.</p> <p>As a key part of this activity is around gaining access to the NDIS for those who are eligible or transitioning to the Continuity of Supports (COS) program if not NDIS eligible, formal pathways for consultation and collaboration will be developed with the Local Area Coordinators and the NDIA where applicable. Participants and staff will be encouraged to engage with their relevant Local Area Coordinator for specific knowledge around the NDIS.</p> <p>Some of the Continuity of Support participants will be ineligible for the NDIS due to their age. Consultation regarding specific supports designed for older people with Mental Health conditions will occur with My Aged Care, Mental Health Services for Older People, Local Government and specialist Aged Care providers.</p>
Collaboration	<p>The Adelaide PHN collaborates with Country SA PHN to ensure that the psychosocial support measure outcomes and services have consistent cross-boundary coverage e.g. maintain consistent eligibility criteria. This includes mutual sharing of information, referral pathways and resources with Country SA PHN so that GPs, NGOs and other referrers who operate across boundaries have pertinent information. Several existing providers deliver cross boundary supports, so it is particularly important for participants of these programs that there is a level of consistency.</p> <p>The Adelaide PHN will collaborate with commissioned services, relevant peak bodies, stakeholders and State and Commonwealth agencies for this activity. This will include State Community Mental Health services and other relevant Local Health Network services. Established referral pathways with these stakeholders will ensure quality supports for people who are gradually reducing mental health supports as part of their recovery journey.</p> <p>The Adelaide PHN will work with commissioned services and Adelaide PHN Practice Facilitators to target General Practice, Allied Health Professionals and other potential referrers, to ensure that they are aware of the eligibility criteria and services available for people with severe and complex mental health conditions. Collaboration with these groups will ensure that people are referred to the right services at the right time in their recovery journey.</p> <p>The Adelaide PHN is partnering with GlobalHealth (software developer) to collect and measure of Person/ participant Reported Outcome/Experience Measures (PREMS/PROMS), Primary Mental Health Care MDS data collection and parallel support tools/resources.</p> <p>Adelaide PHN will investigate options for collaborations with existing providers of GP, Allied Health and Nurse education to ensure these professionals have the skills needed to support people with psychosocial support needs complete their NDIS access and request forms.</p>
Activity milestone details/ Duration	<p>Provide the anticipated activity start and completion dates (<b>including</b> the planning and procurement cycle):</p> <p>Activity start date: 1/07/2019</p>

	<p>Activity end date: 30/06/2020</p> <p><b>If applicable</b>, provide anticipated service delivery start and completion dates <b>(excluding</b> the planning and procurement cycle):  Service delivery start date: July 2019  Service delivery end date: June 2020</p> <p>Any other relevant milestones?</p>
<p>Commissioning method and approach to market</p>	<p>1. Please identify your intended procurement approach for commissioning services under this activity:</p> <p><input type="checkbox"/> Not yet known  <input type="checkbox"/> Continuing service provider / contract extension  <input checked="" type="checkbox"/> Direct engagement. If selecting this option, provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date.</p> <p><i>Current organisations who were engaged by the Department of Health to deliver either PIR, PHaMS or D2DL will be engaged by Adelaide PHN for the period of the NPSM Extended Transition program. This strategy is based on a Market Sounding process with existing providers, feedback received as part of the Co-design process for the NPSM and advice from the Commonwealth. These providers have been contacted and offered Letters of Intent and Commitment including their expected levels of funding. Additional providers may be commissioned to provide GP education if required.</i></p> <p><i>The Continuity of Support Program will be co-designed with providers and clients during the next 12 months.</i></p> <p><input type="checkbox"/> Open tender  <input type="checkbox"/> Expression of Interest (EOI)  <input type="checkbox"/> Other approach (please provide details)</p> <p>2a. Is this activity being co-designed?  Yes  <i>Activities delivered under the Continuity of Supports program will be co-designed with existing providers. Each commissioned organisation has individual expertise in certain subjects eg Support of Aboriginal or Torres Strait Islander people or Homelessness and this expertise will be harnessed to upskill otherstaff. While there will be elements of the extended transition program which are aligned to the Commonwealth Community Mental Health Programs, elements will need to change due to the transition activities.</i></p> <p>2b. Is this activity this result of a previous co-design process?  No</p> <p>3a. Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements?  No</p> <p>3b. Has this activity previously been co-commissioned or joint-commissioned?  No</p>

Decommissioning	<p>1a. Does this activity include any decommissioning of services? No</p> <p>1b. If yes, provide a description of the proposed decommissioning process and any potential implications.</p>

NPS11. Provision of information, education and capacity building activities around alternative pathways for people who are ineligible for the NDIS.

<b>Proposed Activities – NPS11 (COS Funding)</b>	
ACTIVITY TITLE	NPS11. Provision of information, education and capacity building activities around alternative pathways for people who are ineligible for the NDIS.
Existing, Modified, or New Activity	Indicate if this is an existing activity, modified activity, or a new activity.  New Activity
Aim of Activity	<p>The aim of this activity is to ensure that staff and participants accessing Continuity of Supports programs are:</p> <ol style="list-style-type: none"> <li>2. aware of the options regarding psychosocial and other supports, and</li> <li>3. assisted to accessing alternative supports.</li> </ol> <p>This aim will specifically address priorities NPS2 and NPS3 as identified in the needs assessment priorities table on page 2 of this document.</p>
Description of Activity	<p>Services delivered under the Continuity of Supports program aim to build the ability and skills to assist people to manage their mental health condition, improve their relationships with family and others, and increase social and economic participation. These programs will be primarily group based but will include provision for targeted individual support at times of increased need.</p> <p>To achieve the aims of this activity, the Adelaide PHN will work with commissioned service providers, participants and their informal supports and other key stakeholders to determine the needs of the community around information and education about the NDIS and alternative pathways.</p> <p>Various sources of information including hard copy collateral, website resources (including the Adelaide PHN website) and links, attendance at network meetings and expos and face-to-face information sessions will be developed and utilised to support referrers, including General Practice, to determine if a person would be suitable for psychosocial supports under the NDIS. The Adelaide PHN will a) broadly promote established services through promotional material, links to General Practice and commissioned providers, b) target promotion of established services to populations and/or areas of need.</p> <p>A number of the participants of Commonwealth Community Mental Health programs were ineligible for NDIS as they were over the age of 65. As such there is a need for the upskilling of current frontline staff in the processes of ageing, the Aged Care Sector, entry requirements for home care packages and Residential Aged Care facilities, types of supports available to older participants. There may be some additional needs for staff working in aged care to be upskilled around the psychosocial needs of older people with severe and chronic mental health conditions. Adelaide PHN will work with the existing staff to ensure they have access to information and upskilling on the Aged Care Sector.</p>

Target population cohort	People with severe and complex mental health conditions, living in the Adelaide metropolitan region, who are not eligible for assistance through the NDIS and who were active participants of a Commonwealth Community Mental Health program i.e. PIR, PHaMS or D2DL as at 30 June 2019. This includes people who were ineligible for the NDIS due to their age.
Indigenous specific	<p>Is this activity targeted to, or predominantly supporting, Aboriginal and Torres Strait Islander people?</p> <p>No</p> <p>If yes, briefly describe how this activity will engage with the Indigenous sector.</p>
Coverage	Entire Adelaide PHN region with focus in areas of, or populations with, the highest identified need.
Consultation	<p>The Adelaide PHN continues to consult widely with stakeholders, representative bodies, professional and community organisations, providers (commissioned service providers, prospective service providers and general), membership groups, consumers and carers regarding primary mental health and alcohol and other drug services and needs. This consultation occurs through a range of formal and informal methods including Adelaide PHN membership activities with, Community Advisory Councils, Clinical Councils and the Health Priority Network and, as appropriate Adelaide PHN representation on established provider forums and working groups. All outcomes from our consultations inform Adelaide PHN's strategic mental health planning, service design, commissioning and continuous improvement.</p> <p>Our commissioning framework enables elements of formal and informal co-design with stakeholders, ensuring the community voice is incorporated. Consultation will occur with Aboriginal and Torres Strait Islander communities, including the Aboriginal Community Advisory Council, ACCHO, and specific reference groups, to support culturally sensitive, safe and appropriate services for Aboriginal and Torres Strait Islander people. These consultations provide strategic input in to the activity planning process, forming an important collaborative role with the Adelaide PHN.</p> <p>As a key part of this activity is around gaining access to the NDIS for those who are eligible or transitioning to the Continuity of Supports (COS) program if not NDIS eligible, formal pathways for consultation and collaboration will be developed with the Local Area Coordinators and the NDIA where applicable. Participants and staff will be encouraged to engage with their relevant Local Area Coordinator for specific knowledge around the NDIS.</p> <p>For the cohort of Continuity of Supports participants who are over 65 years of age, consultations will occur with the residential Aged Care Facilities involved in the <i>Mental Health Services in Residential Aged Care Facilities</i> Program, providers of services targeted at older people in the community such as Over 50's Community Centres and LGA or NGO run social groups.</p>
Collaboration	The Adelaide PHN collaborates with Country SA PHN to ensure that the psychosocial support measure outcomes and services have consistent cross-boundary coverage e.g. maintain consistent eligibility criteria. This includes mutual sharing of information, referral pathways and resources with Country

	<p>SA PHN so that GPs, NGOs and other referrers who operate across boundaries have pertinent information.</p> <p>The Adelaide PHN will collaborate with commissioned services, relevant peak bodies, stakeholders and State and Commonwealth agencies for this activity. This will include State Community Mental Health services and other relevant Local Health Network services. Established referral pathways with these stakeholders will ensure quality supports for people who are gradually reducing mental health supports as part of their recovery journey.</p> <p>The Adelaide PHN will work with commissioned services and Adelaide PHN Practice Facilitators to target General Practice, Allied Health Professionals and other potential referrers, to ensure that they are aware of the eligibility criteria and services available for people with severe and complex mental health conditions. Collaboration with these groups will ensure that people are referred to the right services at the right time in their recovery journey.</p> <p>The Adelaide PHN is partnering with GlobalHealth (software developer) to collect and measure of Person/ participant Reported Outcome/Experience Measures (PREMS/PROMS), Primary Mental Health Care MDS data collection and parallel support tools/resources.</p> <p>The agencies responsible for Local Area Coordination are partly responsible for upskilling the community in matters around the NDIS. As such collaborative opportunities will be investigated with these agencies and the NDIA where applicable.</p>
<p>Activity milestone details/ Duration</p>	<p>Provide the anticipated activity start and completion dates (<b>including</b> the planning and procurement cycle):</p> <p>Activity start date: 1/07/2019 Activity end date: 30/06/2020</p> <p><b>If applicable</b>, provide anticipated service delivery start and completion dates (<b>excluding</b> the planning and procurement cycle):</p> <p>Service delivery start date: July 2019 Service delivery end date: June 2020</p> <p>Any other relevant milestones?</p>
<p>Commissioning method and approach to market</p>	<p>1. Please identify your intended procurement approach for commissioning services under this activity:</p> <p><input type="checkbox"/> Not yet known <input type="checkbox"/> Continuing service provider / contract extension <input checked="" type="checkbox"/> Direct engagement. If selecting this option, provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date.</p> <p><i>Current organisations who were engaged by the Department of Health to deliver either PIR, PHaMS or D2DL will be engaged by Adelaide PHN for the 19/20 financial year. This strategy is based on a Market Sounding process with existing providers, feedback received as part of the Co-design process for the NPSM and advice from the Commonwealth. During the financial year the framework for the continuity of supports program will be determined and the future direction including commissioning activities will be finalised.</i></p>

	<p> <input type="checkbox"/> Open tender  <input type="checkbox"/> Expression of Interest (EOI)  <input type="checkbox"/> Other approach (please provide details) </p> <p>2a. Is this activity being co-designed?  Yes  <i>Activities delivered under the Continuity of Supports program will be co-designed with existing providers. While there will be elements of the extended transition program which are aligned to the Commonwealth Community Mental Health Programs, elements will need to change due to the transition activities.</i> </p> <p>2b. Is this activity this result of a previous co-design process?  No </p> <p>3a. Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements?  No </p> <p>3b. Has this activity previously been co-commissioned or joint-commissioned?  No </p>
Decommissioning	<p>1a. Does this activity include any decommissioning of services?  No </p> <p>1b. If yes, provide a description of the proposed decommissioning process and any potential implications.</p>

### 3. (b) Planned activities for 2019-20

#### – Interface Funding

NPS12. Coordination and integration between psychosocial services, primary and acute mental health services, the aged care sector, specialist disability services and mainstream services

<b>Proposed Activities – NPS12 (Interface Funding)</b>	
ACTIVITY TITLE	NPS12. Coordination and integration of service delivery between psychosocial supports, primary and acute mental health services, the aged care sector, specialist disability and mainstream services
Existing, Modified, or New Activity	Indicate if this is an existing activity, modified activity, or a new activity.  New Activity
Aim of Activity	<p>This activity aims to ensure that people accessing NPSM, NPSM Extended Transition or Continuity of Supports are able to access pathways to other appropriate supports as needed.</p> <p>It will also ensure that these referrals are conducted in a consistent manner, and sustainable across the operating time of the programs.</p> <p>This aim will specifically address priorities NPS1, NPS2 and NPS3 as identified in the needs assessment priorities table on page 2 of this document.</p>
Description of Activity	<p>For people to achieve their recovery goals and remain living well in the community, there needs to be an increased level of formalised integration between the clinical mental health sector, psychosocial, and community based and mainstream supports.</p> <p>Through formalised partnerships the Adelaide PHN and Commissioned Service Providers will be able to achieve a level of sustainability and consistency through referrals and collaborations with key stakeholders. Common types of activity delivered through group and individual psychosocial supports include building capacity and stability in maintaining relationships, developing strategies to manage tenancies and daily activities of keeping a home, financial management and budgeting; maintaining physical wellbeing, including exercise; and managing drug and alcohol addictions.</p> <p>To achieve the aims of this activity, the Adelaide PHN will establish pathways to, and processes for, referral between psychosocial supports, low intensity mental health services and other primary and state based mental health services. The Adelaide PHN will work with commissioned services to ensure clinical and non-clinical services are ‘joined-up’ and operating within a stepped-care continuum. This will include working with LHNs to ensure psychosocial supports complement State Mental Health supports. This may include but not be limited to:</p> <ul style="list-style-type: none"> <li>• Formal referral pathways for LHN’s to refer state-funded mental health clients as part of gradual lessening of supports</li> </ul>

	<ul style="list-style-type: none"> <li>• Warm handover process for participants transitioning from NPSM Extended Transition activities to NDIS or My Aged Care providers</li> <li>• Formal MOU with NGO's providing financial counselling for participants who need assistance with budgeting and managing their debts.</li> <li>• Formal MOU with the Department of Corrections regarding psychosocial supports during court preparations and proceedings</li> <li>• Formalisation of referral pathways for clinicians to enable people within the community to access PHN funded psychosocial supports, including upskilling on what psychosocial supports can be used for</li> </ul> <p>Adelaide PHN will work closely with commissioned services to maintain and enhance links with primary mental health care services (both those commissioned by Adelaide PHN and general clinical supports) to support an integrated team approach to meeting the needs of people with severe and complex mental health condition, and form part of a multi-agency care plan which integrates both clinical and non-clinical supports.</p>
Target population cohort	People with severe and complex mental health conditions with an associated psychosocial disability, living in the Adelaide metropolitan region, who are accessing the NPSM, NPSM extended transition or COS programs.
Indigenous specific	<p>Is this activity targeted to, or predominantly supporting, Aboriginal and Torres Strait Islander people?</p> <p>No</p> <p>If yes, briefly describe how this activity will engage with the Indigenous sector.</p>
Coverage	Entire Adelaide PHN region with focus in areas of, or populations with, the highest identified need.
Consultation	<p>The Adelaide PHN continues to consult widely with stakeholders, representative bodies, professional and community organisations, providers (commissioned service providers, prospective service providers and general), membership groups, consumers and carers regarding primary mental health and alcohol and other drug services and needs. This consultation occurs through a range of formal and informal methods including Adelaide PHN membership activities with, Community Advisory Councils, Clinical Councils and the Health Priority Network and, as appropriate Adelaide PHN representation on established provider forums and working groups. All outcomes from our consultations inform Adelaide PHN's strategic mental health planning, service design, commissioning and continuous improvement.</p> <p>Our commissioning framework enables elements of formal and informal co-design with stakeholders, ensuring the community voice is incorporated. Consultation will occur with Aboriginal and Torres Strait Islander communities, including the Aboriginal Community Advisory Council, ACCHO, and specific reference groups, to support culturally sensitive, safe and appropriate services for Aboriginal and Torres Strait Islander people. These consultations provide strategic input in to the activity planning process, forming an important collaborative role with the Adelaide PHN.</p> <p>A key part of this activity is linking participants to the NDIS, My Aged Care and other services. Formal pathways for consultation and collaboration will</p>

	<p>be developed with the Local Area Coordinators, Aged Care assessors, My Aged Care and the NDIA where applicable.</p> <p>Adelaide PHN will also consult with the successful NDIA Information Linkages and Capacity Building Grant recipients to ensure the toolkits and other resources being developed can be linked and utilised by the Commissioned Service providers. These will include but not be limited to the resources being developed around CALD communities and Aboriginal and Torres Strait Islander Communities.</p>
Collaboration	<p>The Adelaide PHN collaborates with Country SA PHN to ensure that the psychosocial services have consistent cross-boundary coverage e.g. maintain consistent eligibility criteria. This includes mutual sharing of information, referral pathways and resources with Country SA PHN so that GPs, NGOs and other referrers who operate across boundaries have pertinent information.</p> <p>The Adelaide PHN will collaborate with commissioned services, relevant peak bodies, stakeholders and State and Commonwealth agencies for this activity. This will include State Community Mental Health services and other relevant Local Health Network services. Established referral pathways with these stakeholders will ensure quality supports for people who are gradually reducing mental health supports as part of their recovery journey.</p> <p>The Adelaide PHN will work with commissioned services and Adelaide PHN Practice Facilitators to target General Practice, Allied Health Professionals and other potential referrers, to ensure that they are aware of the eligibility criteria and services available for people with severe and complex mental health conditions. Collaboration with these groups will ensure that people are referred to the right services at the right time in their recovery journey.</p> <p>The Adelaide PHN is partnering with GlobalHealth (software developer) to collect and measure of Person/ participant Reported Outcome/Experience Measures (PREMS/PROMS), Primary Mental Health Care MDS data collection and parallel support tools/resources</p>
Activity milestone details/ Duration	<p>Provide the anticipated activity start and completion dates (<b>including</b> the planning and procurement cycle):</p> <p>Activity start date: 1/07/2019 Activity end date: 30/06/2020</p> <p><b>If applicable</b>, provide anticipated service delivery start and completion dates (<b>excluding</b> the planning and procurement cycle):</p> <p>Service delivery start date: July 2019 Service delivery end date: June 2020</p> <p>Any other relevant milestones?</p>
Commissioning method and approach to market	<p>1. Please identify your intended procurement approach for commissioning services under this activity:</p> <p><input checked="" type="checkbox"/> Not yet known  <input type="checkbox"/> Continuing service provider / contract extension  <input type="checkbox"/> Direct engagement. If selecting this option, provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date.  <input type="checkbox"/> Open tender  <input type="checkbox"/> Expression of Interest (EOI)  <input type="checkbox"/> Other approach (please provide details)</p>

	<p>2a. Is this activity being co-designed? No</p> <p>2b. Is this activity this result of a previous co-design process? Yes</p> <p>3a. Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? No</p> <p>3b. Has this activity previously been co-commissioned or joint-commissioned? No</p>
Decommissioning	<p>1a. Does this activity include any decommissioning of services? No</p> <p>1b. If yes, provide a description of the proposed decommissioning process and any potential implications.</p>

NPS13. Identify targeted projects for hard to reach populations to test their eligibility for the NDIS or to gain access to alternative psychosocial supports

<b>Proposed Activities – NPS13 (Interface Funding)</b>	
<b>ACTIVITY TITLE</b>	NPS13. Identify targeted projects for hard to reach populations to test their eligibility for the NDIS or to gain access to alternative psychosocial supports
<b>Existing, Modified, or New Activity</b>	<p>Indicate if this is an existing activity, modified activity, or a new activity.</p> <p>New Activity</p>
<b>Aim of Activity</b>	<p>The aim of this activity is to ensure that people from hard-to-reach, or particularly vulnerable populations experiencing severe or chronic mental health conditions and an associated psychosocial disability are supported to apply for the NDIS or to connect with an alternative psychosocial support service.</p> <p>This aim will specifically address priority NPS1, NPS2 and NPS3 as identified in the needs assessment priorities table on page 2 of this document.</p>
<b>Description of Activity</b>	<p>Anecdotal evidence collected from the NDIS, providers, consumer forums and general capacity building activities indicates that there are some population groups who are finding access to the NDIS or psychosocial supports difficult. These include:</p> <ul style="list-style-type: none"> <li>• People experiencing homelessness</li> <li>• People from Aboriginal and Torres Strait Islander backgrounds</li> <li>• People from CALD backgrounds</li> <li>• People identifying as LGBTIQ+</li> <li>• People who have limited informal supports</li> <li>• People with cognitive disabilities as well as a psychosocial disability</li> </ul> <p>This activity will scope out potential projects and supports that could be available to these population groups to ensure they are aware and supported to apply for the NDIS or other ongoing supports.</p> <p>Initially, Adelaide PHN will conduct market sounding, and interrogate the Adelaide PHN needs assessment to detail the programs already available across the sector. This will highlight areas and population groups that are at risk of falling through the gaps or who are not engaging with programs.</p> <p>Projects will then be co-designed with key stakeholders from the identified population groups. Potential activities as part of this activity may include but are not limited to:</p> <ul style="list-style-type: none"> <li>• Projects targeted to the Aboriginal and Torres Strait Islander Community to increase their knowledge of and engagement with the NDIS other psychosocial supports</li> <li>• Projects targeted to the homelessness sector which will work alongside existing homelessness services and facilitate the submission of access and eligibility forms for potentially eligible people</li> <li>• Engagement with people with disabilities who identify as LGBTIQ+ to identify barriers to in their access to psychosocial services and the NDIS.</li> </ul>

	<ul style="list-style-type: none"> <li>Upskilling of CALD specific clinical care coordinators and case managers in their support of people to source information for the access request process</li> </ul>
Target population cohort	People with severe and complex mental health conditions with an associated psychosocial disability, living in the Adelaide metropolitan region, who are accessing the NPSM, NPSM extended transition or COS programs.
Indigenous specific	<p>Is this activity targeted to, or predominantly supporting, Aboriginal and Torres Strait Islander people?</p> <p>Yes</p> <p>If yes, briefly describe how this activity will engage with the Indigenous sector.</p> <p>Aboriginal and Torres Strait Islander people have already been identified in NDIS literature as a population who are finding it difficult to engage with the NDIS. As such Adelaide PHN will conduct consultations specifically with Aboriginal and Torres Strait Islander communities and Aboriginal led organisations who are operating in the region. This will include the Adelaide PHN convened Aboriginal Community Advisory Council, regional ACCHO (Nunkuwarrin Yunti), Aboriginal programs and providers and other relevant reference groups. Support and advice from these organisations will be sought in the development, expansion or implementation of culturally sensitive, safe and appropriate services for Aboriginal and Torres Strait Islander people.</p> <p>These consultations will also provide strategic input in to the activity planning process, forming an important collaborative role with the Adelaide PHN. Known programs which focus on Aboriginal and Torres Strait Islander people such as BaptistCare’s Able and Deadly program or Sonder’s ITC program will be consulted for their knowledge and experience of providing services to the Aboriginal community.</p>
Coverage	Entire Adelaide PHN region with focus in areas on people with severe and chronic mental health conditions with an associated psychosocial disability who identify as belonging to a hard to reach population.
Consultation	<p>The Adelaide PHN continues to consult widely with stakeholders, representative bodies, professional and community organisations, providers (commissioned service providers, prospective service providers and general), membership groups, consumers and carers regarding primary mental health and alcohol and other drug services and needs. This consultation occurs through a range of formal and informal methods including Adelaide PHN membership activities with, Community Advisory Councils, Clinical Councils and the Health Priority Network and, as appropriate Adelaide PHN representation on established provider forums and working groups. All outcomes from our consultations inform Adelaide PHN’s strategic mental health planning, service design, commissioning and continuous improvement.</p> <p>Our commissioning framework enables elements of formal and informal co-design with stakeholders, ensuring the community voice is incorporated. Consultation will occur with Aboriginal and Torres Strait Islander communities, including the Adelaide PHN convened Aboriginal Community Advisory Council, the metropolitan Adelaide ACCHO (Nunkuwarrin Yunti), and</p>

	<p>specific reference groups, to support culturally sensitive, safe and appropriate services for Aboriginal and Torres Strait Islander people. These consultations provide strategic input in to the activity planning process, forming an important collaborative role with the Adelaide PHN.</p> <p>Adelaide PHN will also consult with the successful NDIA Information Linkages and Capacity Building Grant recipients to ensure the toolkits and other resources being developed can be linked and utilised by the Commissioned Service providers. These will include but not be limited to the resources being developed around CALD communities and Aboriginal and Torres Strait Islander Communities.</p>
Collaboration	<p>The Adelaide PHN collaborates with Country SA PHN to ensure that the psychosocial support measure outcomes and services have consistent cross-boundary coverage e.g. maintain consistent eligibility criteria. This includes mutual sharing of information, referral pathways and resources with Country SA PHN so that GPs, NGOs and other referrers who operate across boundaries have pertinent information.</p> <p>The Adelaide PHN will collaborate with commissioned services, relevant peak bodies, stakeholders and State and Commonwealth agencies for this activity. This will include State Community Mental Health services and other relevant Local Health Network services. Established referral pathways with these stakeholders will ensure quality supports for people who are gradually reducing mental health supports as part of their recovery journey.</p> <p>The Adelaide PHN will work with commissioned services and Adelaide PHN Practice Facilitators to target General Practice, Allied Health Professionals and other potential referrers, to ensure that they are aware of the eligibility criteria and services available for people with severe and complex mental health conditions. Collaboration with these groups will ensure that people are referred to the right services at the right time in their recovery journey.</p> <p>The Adelaide PHN is partnering with GlobalHealth (software developer) to collect and measure of Person/ participant Reported Outcome/Experience Measures (PREMS/PROMS), Primary Mental Health Care MDS data collection and parallel support tools/resources</p>
Activity milestone details/ Duration	<p>Provide the anticipated activity start and completion dates (<b>including</b> the planning and procurement cycle):</p> <p>Activity start date: 1/07/2019 Activity end date: 31/12/2020</p> <p><b>If applicable</b>, provide anticipated service delivery start and completion dates (<b>excluding</b> the planning and procurement cycle):</p> <p>Service delivery start date: July 2019 Service delivery end date: December 2020</p> <p>Any other relevant milestones?</p>
Commissioning method and approach to market	<p>1. Please identify your intended procurement approach for commissioning services under this activity:</p> <p><input checked="" type="checkbox"/> Not yet known <input type="checkbox"/> Continuing service provider / contract extension</p>

	<p><input type="checkbox"/> Direct engagement. If selecting this option, provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date.</p> <p><input type="checkbox"/> Open tender</p> <p><input type="checkbox"/> Expression of Interest (EOI)</p> <p><input type="checkbox"/> Other approach (please provide details)</p> <p>2a. Is this activity being co-designed? Yes</p> <p>2b. Is this activity this result of a previous co-design process? No</p> <p>3a. Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? No</p> <p>3b. Has this activity previously been co-commissioned or joint-commissioned? No</p>
Decommissioning	<p>1a. Does this activity include any decommissioning of services? No</p> <p>1b. If yes, provide a description of the proposed decommissioning process and any potential implications.</p>

## NPS14. Co-design supports and services to be delivered under the COS program

Proposed Activities – NPS14 (Interface Funding)	
ACTIVITY TITLE	NPS14. Co-design supports and services to be delivered under the COS program
Existing, Modified, or New Activity	Indicate if this is an existing activity, modified activity, or a new activity.  New Activity
Aim of Activity	<p>The aim of this activity is to engage current providers of the Commonwealth Community Mental Health Programs, consumers and other key stakeholders in the co-design of the Continuity of Support programs for the financial year 20/21 and beyond. This will include the development of the framework for the eventual integration of services delivered as part of the Continuity of Supports Program and National Psychosocial Supports Measure.</p> <p>This aim will specifically address priorities NPS1, NPS2 and NPS3 as identified in the needs assessment priorities table on page 2 of this document.</p>
Description of Activity	<p>During the 19-20 financial year, the Continuity of Supports program will deliver a variety of services to ensure that previous participants of PIR, PHaMS and D2DL receive appropriate services to maintain their wellbeing. These programs will be strengths based and recovery focused. People who have been found ineligible will also be supported to reapply for the NDIS if their circumstances change.</p> <p>From the 20-21 financial year, the activities delivered under the Continuity of Supports Scheme will have a focus on group psychosocial support activities to achieve similar outcomes the previous year. Provisions for additional targeted individual support at times of increased need will be included in the framework. Details of the program and how it will be integrated with the National Psychosocial Support Measure will be co-designed with current providers, consumers, key stakeholders and other interested people including Peak Industry bodies.</p> <p>To achieve the aims the Adelaide PHN will conduct:</p> <ul style="list-style-type: none"> <li>• Consumer co-design sessions (both existing participants and their families and carers)</li> <li>• Provider co-design sessions (current and potential commissioned providers)</li> <li>• Online feedback for people who cannot attend the sessions and want to be involved in the sessions.</li> </ul> <p>The co-design sessions will focus on the framework as well as the service delivery aspects of both the Continuity of Supports and National Psychosocial Supports Measure. The expected qualifications, type and experience levels as well as capacity building needs of the workforce will also be workshopped.</p> <p>Following the forums, a steering committee will be formed from interested people and key stakeholders to focus on the service design.</p>

Target population cohort	People with severe and chronic mental health conditions with an associated psychosocial disability, living in the Adelaide metropolitan region.
Indigenous specific	<p>Is this activity targeted to, or predominantly supporting, Aboriginal and Torres Strait Islander people?</p> <p>No</p> <p>If yes, briefly describe how this activity will engage with the Indigenous sector.</p>
Coverage	Entire Adelaide PHN region with focus in areas of, or populations with, the highest identified need.
Consultation	<p>The Adelaide PHN continues to consult widely with stakeholders, representative bodies, professional and community organisations, providers (commissioned service providers, prospective service providers and general), membership groups, consumers and carers regarding primary mental health and alcohol and other drug services and needs. For the purpose of this activity the consultation will be targeted to the co-design of the Continuity of Supports program. Consultations will occur primarily through formal methods and will include engagement with Community Advisory Councils, Clinical Councils and the Health Priority Network and, as appropriate Adelaide PHN representation on established provider forums and working groups.</p> <p>Our commissioning framework enables elements of formal and informal co-design with stakeholders, ensuring the community voice is incorporated. Consultation will occur with Aboriginal and Torres Strait Islander communities, including the Aboriginal Community Advisory Council, ACCHO, and specific reference groups, to support culturally sensitive, safe and appropriate services for Aboriginal and Torres Strait Islander people. Service design consideration will be included to reflect the specific needs of Aboriginal people and their communities when accessing services, as well as the intake and assessment process.</p> <p>Information and evidence regarding the engagement of hard to reach populations as described in NPS13 above, will be considered in the co-design of this activity.</p> <p>Adelaide PHN will also consult with the successful NDIA Information Linkages and Capacity Building Grant recipients to ensure the toolkits and other resources being developed can be linked and utilised by the Commissioned Service providers. These will include but not be limited to the resources being developed around CALD communities and Aboriginal and Torres Strait Islander Communities.</p>
Collaboration	The Adelaide PHN collaborates with Country SA PHN to ensure that the psychosocial supports and services have consistent cross-boundary coverage e.g. maintain consistent eligibility criteria. This includes mutual sharing of information, referral pathways and resources with Country SA PHN so that GPs, NGOs and other referrers who operate across boundaries have the necessary information.

	<p>The Adelaide PHN will collaborate with commissioned services, relevant peak bodies, stakeholders and State and Commonwealth agencies for this activity. This will include State Community Mental Health services and other relevant Local Health Network services. Established referral pathways with these stakeholders will ensure quality supports for people who are gradually reducing mental health supports as part of their recovery journey.</p> <p>The Adelaide PHN will work with commissioned services and Adelaide PHN Practice Facilitators to target General Practice, Allied Health Professionals and other potential referrers, to ensure that they are aware of the eligibility criteria and services available for people with severe and complex mental health conditions. Collaboration with these groups will ensure that people are referred to the right services at the right time in their recovery journey.</p> <p>The Adelaide PHN is partnering with GlobalHealth (software developer) to collect and measure of Person/ participant Reported Outcome/Experience Measures (PREMS/PROMS), Primary Mental Health Care MDS data collection and parallel support tools/resources</p>
Activity milestone details/ Duration	<p>Provide the anticipated activity start and completion dates <b>(including</b> the planning and procurement cycle):  Activity start date: 1/07/2019  Activity end date: 30/06/2020</p> <p><b>If applicable</b>, provide anticipated service delivery start and completion dates <b>(excluding</b> the planning and procurement cycle):  Service delivery start date: July 2019  Service delivery end date: June 2020</p> <p>Any other relevant milestones?</p>
Commissioning method and approach to market	<p>1. Please identify your intended procurement approach for commissioning services under this activity:</p> <ul style="list-style-type: none"> <li><input checked="" type="checkbox"/> Not yet known</li> <li><input type="checkbox"/> Continuing service provider / contract extension</li> <li><input type="checkbox"/> Direct engagement. If selecting this option, provide justification for direct engagement, and if applicable, the length of time the commissioned provider has provided this service, and their performance to date.</li> <li><input type="checkbox"/> Open tender</li> <li><input type="checkbox"/> Expression of Interest (EOI)</li> <li><input type="checkbox"/> Other approach (please provide details)</li> </ul> <p>2a. Is this activity being co-designed? Yes</p> <p>2b. Is this activity this result of a previous co-design process? Yes</p> <p>3a. Do you plan to implement this activity using co-commissioning or joint-commissioning arrangements? No</p> <p>3b. Has this activity previously been co-commissioned or joint-commissioned?</p>

	No
Decommissioning	1a. Does this activity include any decommissioning of services? No 1b. If yes, provide a description of the proposed decommissioning process and any potential implications.