Adelaide - Primary Mental Health Care
2023/24 - 2027/28
Activity Summary View

MH - 10000 - MH10. Commission culturally appropriate services for Aboriginal and Torres Strait Islander peoples

Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

10000

Activity Title *

MH10. Commission culturally appropriate services for Aboriginal and Torres Strait Islander peoples

Existing, Modified or New Activity *

Existing

Activity Priorities and Description

Program Key Priority Area *

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

Other Program Key Priority Area Description

Aim of Activity *

The aim is to improve mental health experiences, access and outcomes for Aboriginal and Torres Strait Islander people through the provision of culturally appropriate, sensitive and safe suicide prevention and primary mental health care services through centralised referral pathways and enhanced service and clinical integration between Aboriginal and Torres Strait Islander organisations/mainstream services, including alcohol and drug and social service providers. In addition, to enhance the capacity of the primary mental health care workforce to provide culturally appropriate, sensitive and safe suicide prevention and primary mental health care services, including through supporting Aboriginal and Torres Strait Islander specific workforce engagements

Description of Activity *

Similarly to 2024-25 described below, this funding and activity will be continued as is for another year being 2025-26.

This activity aims to commission culturally appropriate, flexible, evidence based mental health services for Aboriginal and Torres Strait Islander people. Commissioned providers will ensure primary mental health services are culturally safe, sensitive and appropriate to meet the needs of people seeking treatment and/or support for their mental health conditions. The Adelaide PHN commissions services that are flexible in their delivery and tailored to the individual needs of Aboriginal and Torres Strait Islander people.
Services provided include; Psychological therapies (individual, group, family); narrative therapies; brief solution focused therapy and counselling; and clinical care coordination; clinical suicide prevention; and referral services to support seamless transition of care that is responsive to change in individual need. Service linkages, networks and formal service delivery partnerships are facilitated to support holistic, integrated treatment and management of health and related health needs across the care continuum. In addition Aboriginal people with moderate suicide risk concerns are able to access a service within a 24-72 hour timeframe which provides clinical interventions, assessment and risk management in a culturally appropriate way.
The target population include Aboriginal and Torres Strait Islander children, young people and adults, and their families/carers: (i) at risk of, or experiencing mild, moderate to severe mental health conditions and presenting in the Adelaide metropolitan region.
The activity has a key focus on improving mental health wellbeing experiences, improve care coordination and integration of mental health care services.
Adelaide PHN commissions the local Aboriginal Community Controlled Health Organisation – Nunkwuarrin Yunti, and another respected specialist provider The ACT Centre to deliver these activities.

Needs Assessment Priorities *

Needs Assessment

Adelaide PHN Needs Assessment 2024/25 - 2026/27

Priorities

Priority	Page reference
People experiencing mental health concerns and suicide distress receive timely and appropriate crisis care and treatment services delivered by a skilled workforce	135
Aboriginal and Torres Strait Islander people can access culturally safe and appropriate workforce and primary health care services	90

Activity Demographics

Target Population Cohort

Aboriginal and Torres Strait Islander people

In Scope AOD Treatment Type *

Indigenous Specific *

Yes

Indigenous Specific Comments

This activity was codesigned with and will continue to be delivered predominately by the ACCHO.

The APHN will also continue to work with SAMHRI's Aboriginal Research Unit (Wardliparingga), the LHN Aboriginal directorates,

AHCSA and Aboriginal-led education providers on the implementation of programs and initiatives for culturally appropriate best practice management. This includes incorporating the implementation of the six Aboriginal Health Actions within the National Safety Quality Health Standards (NSQHS) and how providers will align with the User Guide for Aboriginal and Torres Strait Islander Health. Specifically, the ACCHO is able to deliver APHN commissioned services alongside broader Aboriginal specific primary care services which are tailored to the needs of the community and individual.

Coverage

Whole Region

Yes

Activity Consultation and Collaboration

Consultation

In 2022-23 Adelaide PHN conducted a review of its Aboriginal and Torres Strait Islander services. The focus was on what was working well and what could be improved. Existing services were provided with questions and then met with to discuss. The Aboriginal Community Connect program was given an opportunity to respond to questions. Given the concurrent Commonwealth review into this funding stream (and others) Adelaide PHN decided to continue with both existing providers with some minor changes.

• The Adelaide PHN will continue to consult with established Aboriginal and Torres Strait Islander specific services, including AOD services, to more effectively connect individuals and families seeking assistance with treatment and support. The Adelaide PHN will continue to work with State-funded mental health and other providers to support integration of commissioned Aboriginal and Torres Strait Islander specific mental health services within the broader system. This activity interconnects with Priority Area 5 activities: Community based suicide prevention, regarding the formalised arrangement of follow-up and care for people who have self-harmed and/or attempted suicide.
• Consultation occurs specifically with Aboriginal and Torres Strait Islander communities, including through Community Advisory Council members identifying as Aboriginal or Torres Strait Islander, Aboriginal Community Controlled Health Organisations (ACCHO), specific reference groups and other key Aboriginal and Torres Strait Islander people and organisations, to support the provision of culturally, sensitive and safe services. Adelaide PHN will continue to consult with a range of Aboriginal Torres Strait Islander people and organisations to ensure a diversity of community voices heard. These consultations provide strategic input into the activity planning process, forming an important collaborative role with the Adelaide PHN.
• The Adelaide PHN continues to work with Aboriginal and Torres Strait Islander people on effective methods for ongoing engagement and communication, ensuring there are a range of ways for individuals to understand and contribute the provision of high quality, culturally responsive services.
• The Adelaide PHN consulted with community members and commissioned service providers on the development of PREMS for clients who are Aboriginal or Torres Strait Islander. Workshops were held to ensure a measure was developed that was culturally appropriate. This has been implemented and will be reviewed for quality improvement purposes.

Collaboration

• The activities will continue to be jointly implemented with commissioned providers for the provision of culturally appropriate, sensitive and safe services for Aboriginal and Torres Strait Islander people. The Adelaide PHN will continue to collaborate with Country SA PHN to ensure cross-boundary coverage for similar commissioned activities in South Australia.
• AHCSA and our ACCHO and continues to work closely with APHN and all commissioned mental health service providers to support culturally appropriate services and choice for Aboriginal and Torres Strait Islander people.

• The Adelaide PHN collaborates with providers and representative bodies for the Aboriginal and Torres Strait Islander population across the region for strategic input and guidance regarding workforce development and capacity building. Specifically, the Adelaide PHN will utilise existing advisory functions and reference groups across the region, where appropriate, in collaboration with State Government structures and ACCHOs.

• One of the commissioned agencies is partnered and co-located with an Aboriginal specific program funded through Uniting Communities. Organisations work in partnership with Adelaide PHN in collaboration with Aboriginal State peak bodies, consolidate and extend collaborative working relationships with Aboriginal Community Controlled Health Organisations, primary health and acute services, as well as primary and state-based health and support agencies.

Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2026

Service Delivery Start Date

July 2019

Service Delivery End Date

June 2026

Other Relevant Milestones

N/A

Activity Commissioning

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

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

Is this activity being co-designed?

Yes

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

Yes

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

No

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

No

Co-design or co-commissioning comments

This activity was codesigned with and will continue to be predominately delivered by the ACCHO.

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

Yes

MH - 12000 - MH12: Contribute to the implementation of the integrated suicide prevention service delivery and pat

Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

12000

Activity Title *

MH12: Contribute to the implementation of the integrated suicide prevention service delivery and pat

Existing, Modified or New Activity *

Modified

Activity Priorities and Description

Program Key Priority Area *

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

Other Program Key Priority Area Description

Aim of Activity *

This activity aims to implement activities from the Adelaide Metropolitan Mental Health and Suicide Prevention Integration Plan 2020 - 2025 in collaboration with LHNs to develop solutions to ensure a more integrated and effective person-centred care and mental health system in metropolitan Adelaide. While working toward facilitating timely follow-up care for people who have attempted suicide or at risk of suicide, and safe and quality services to reduce the risk of suicide.

Description of Activity *

The Adelaide Metropolitan Mental Health and Suicide Prevention Integration Plan (AMMHIP) 2020-2025 addresses a need for improvement in the way South Australia's mental health system is planned and integrated to more adequately meet the needs of people and their carers. The Plan has provided an opportunity to build on the sector's strengths and find opportunities to establish new connections and pathways between services to foster a more person-centred approach to care.
The AMMHIP identifies six priority areas, associated objectives and actions to be undertaken, and the roles and responsibilities of all partners to ensure the implementation of the plan within the defined timeframe.
In 2023 after three years of implementing the AMMHIP actions, it was considered timely to review the progress of the Plan in achieving shared priorities and objectives and aligning it to the National Mental Health and Suicide Prevention Agreement and Bilateral Schedule on Mental Health and Suicide Prevention (South Australia). The AMMHIP enhancements highlights a growth in the collaborative actions undertaken and expected to be undertaken between Adelaide PHN, Local Health Networks (LHNs) and stakeholders during the life of the plan.

A review of the Governance structure was also conducted in 2023 with a move to reduced Regional Planning meetings and an increased focused on Place Based collaboration and Activity Specific groups feeding into the AMMHIP Steering Committee to oversee and coordinate the implementation of the AMMHIP.
The outcome is the AMMHIP Review and Enhancements 2023 -2025 and shared commitment of agencies to achieve the objectives of the plan are outlined below:
• Improve care provided to people and their carers across LHNs and APHN commissioned service providers through the implementation of Towards Zero Suicide approach to service delivery.
• The Adelaide PHN and State to co-funded an extension of The Way Back Service Liaison Position due to the effectiveness of the role. Ongoing commitment to this being negotiated.
• Collaboration between Northern Adelaide LHN and Adelaide PHN to fund peer run alternatives to Emergency Department (ED) suicide prevention services. The Safe Haven café was opened in 2022 to provide an alternative to ED in the after-hours period and offers a non-clinical peer driven service for people experiencing distress, crisis, loneliness, personal difficulties or seeking social connection. The Adelaide PHN is continuing to work in partnership with NALHN to continue he co-commissioning of this program.
• Co-funding Alt2 Sui (Alternatives to Suicide) service pilot. The service provides a safe and friendly environment where non-clinical peer based mutual support self-help groups are operated for people at risk of and/ or experiencing suicidal distress, thoughts and actions. After 3 years this program has now ended..
• Build step-up and step-down pathways between LHN emergency departments, hospitals and community teams and APHN commissioned youth services, headspace and Youth Enhanced Services
• Coordinate treatments and supports for adults 18-65 with chronic and complex mental health conditions including physical health aligned to the Equally Well Framework- SA health to develop Equally Well Quality Standards which will inform LHN and Adelaide PHN service provision and Adelaide PHN and other stakeholders to participate in an Equally Well Community of Practice once established.
• Establishment of the Northern Adelaide Medicare Mental Health Centre in Partnership with Northern Adelaide and other key stakeholders. The Centre opened at an interim location in Mid-April 2024.Collaboration in relation to a permanent co-located site for the Medicare Mental Health Centre and State funded Crisis Stabilisation Centre scheduled to open in 2026.
• Completion of a State based Aboriginal and Torres Strait Islander Mental Health Suicide Prevention Plan through a State and Commonwealth interagency approach to guide service delivery and integration 2023 -2026.
• Ongoing collaboration in relation to establishing an Aboriginal and Torres Strait Islander Health and Wellbeing Centre jointly funded with the Commonwealth and State scheduled to open in 2025.
• State and Adelaide PHN to scope a data collection project to ensure service quality and safety is appropriately measured.
• Improve access and integration of services for older people (65 and older) experiencing mental health conditions. A State Older Mental Health Plan commenced development in 2023/2024.
Ongoing collaboration in relation to commissioning and establishing Kids Hubs scheduled to open in July 2025.

The enhanced version of this plan aligned with our bilateral initiatives and the National Agreement was resubmitted to the department in Feb 2024.

Planning has commenced on a new Joint Mental Health and Suicide Prevention Regional Plan due for delivery in February 2026. The Joint Regional Plan is part of the State and Federal Governments' shared vision to build a mental health system that supports the priority mental health and wellbeing needs of the community. The plan will be informed by feedback from people with a lived experience, service providers, and the wider community. The Joint Regional Plan will identify priority areas and opportunities to strengthen partnerships and improve mental health and social and emotional wellbeing outcomes for people of all ages in the Adelaide region.

Needs Assessment Priorities *

Needs Assessment

Adelaide PHN Needs Assessment 2024/25 - 2026/27

Priorities

Priority	Page reference
Timely, region specific, cross-sectoral mental health and suicide prevention services for people who are at risk of suicide and/ or who have recently attempted suicide	135
Children at risk of, or experiencing mild to moderate mental health conditions and their families/carers have access to appropriate primary mental health services	134
People experiencing severe mental health conditions have access to appropriate supports, services and coordinated care	134
People from underserviced and hard to reach populations experiencing mental health conditions and suicide distress have access to timely, appropriate and integrated primary mental health services	134
Aboriginal and Torres Strait Islander people can access culturally safe and appropriate workforce and primary health care services	90

Activity Demographics

Target Population Cohort

- Young people
- People experiencing chronic and complex mental health conditions
- People that have attempted or are at risk of suicide
- Aboriginal and Torres Strait Islanders
- People accessing primary mental health or tertiary mental health services

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

Activity Consultation and Collaboration

Consultation

The plan has been developed in consultation with the Adelaide metropolitan Local Health Networks, the Office of the Chief Psychiatrist, the SA Mental health Commission as well as a range of other organisations and community members including the Adelaide PHNs community advisory councils.

Implementation group for the actioning of the Regional Plan include representatives from LHNs/PHN/and lived experience/ carers.

Collaboration

The plan is a joint collaboration between key agencies including the Adelaide PHN, LHNs, SA Mental Health Commission, SA Department of Health and Wellbeing and the Office of the Chief Psychiatrist. Each organisation shares responsibility as part of the Regional Mental Health and Suicide Prevention Steering Committee for oversight and planning to implement the shared objectives of the Plan
The recent review and update of the plan is a collaboration between all key agencies

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Activity Milestone Details/Duration

Activity Start Date

30/06/2020

Activity End Date

29/06/2026

Service Delivery Start Date

July 2020

Service Delivery End Date

June 2026

Other Relevant Milestones

N/A

Activity Commissioning

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

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

Is this activity being co-designed?

Yes

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

No

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

Yes

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

No

Co-design or co-commissioning comments

The plan will be a joint collaboration between key agencies including the Adelaide PHN, LHNs, SA Mental Health Commission, SA Department of Health and Wellbeing and the Office of the Chief Psychiatrist.

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

Yes

MH - 202216 - A202216 - Initial Assessment and Referral

Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

202216

Activity Title *

A202216 - Initial Assessment and Referral

Existing, Modified or New Activity *

Existing

Activity Priorities and Description

Program Key Priority Area *

Mental Health Priority Area 7: Stepped care approach

Other Program Key Priority Area Description

Aim of Activity *

The purpose of this Activity is to support General Practitioners (GPs) and clinicians in the primary care setting, using the stepped care model to select the least intensive level of care, for a person presenting for mental health assistance by using the Initial Assessment and Referral (IAR) tool. This will contribute to achieving nationally consistent levels of care for persons presenting with similar conditions.

Description of Activity *

Previously, participated in 'train the trainer' training delivered by the National Project Manager to build capability and confidence in using the IAR, facilitating training and supporting GPs to implement the IAR.
• Deliver training to, build relationships with, and provide ongoing support to GPs and clinicians in Adult Mental Health Centres, general practices, Aboriginal Medical Services, and commissioned providers within the PHN region.
• A Psychiatrist and a Clinician continue in the Training Support Officer roles until the end of the calendar year 2025.
• Deliver training to, build relationships with, and provide ongoing support to GPs and clinicians in Kids Mental Health Centres and Residential Aged Care Facilities as the IAR is adapted for specific vulnerable cohorts and as required by the Department, as well as in Local Hospital Networks/Districts as jurisdictions in your region who adopt the IAR.
• Meet the GP training target of 1009 GPs by June 30 2025 and maintain records to support the GP attendance and remuneration.
• Maintain strong relationships across the TSO network and with other key stakeholders to explore opportunities for cross-boundary learning and collaboration.

• Meet with the Department, as required, to report on training numbers for all staff trained, share enablers and discuss any barriers.
• Working with the Department to promote integration of clinical software solutions, once developed, with clinical practices and practice managers within the PHN region.
• Collect data and report on GP and other clinician training as detailed in the Program Guidance for Primary Health Network Initial Assessment and Referral Training and Support Officers.
• Maintain a record of Frequently Asked Questions, hosted on the PHN SharePoint, and support continuous improvement to education and training.
• Deliver training and support to GPs and other professionals, including as required in Local Hospital Networks as required
• Maintain internal PHN and State based Working Groups.
• Promote IAR training video to support the IAR communication plan.
• Collaborate with the Office of Chief Psychiatry on a State-wide implementation plan and training strategy.
• Continue to offer workshops with the LHN's focusing on the primary and tertiary system integration of the IAR
• Continue to develop new and improves ways of generating interest to the program
• Continue to support National Training programs.

Needs Assessment Priorities *

Needs Assessment

Adelaide PHN Needs Assessment 2024/25 - 2026/27

Priorities

Priority	Page reference
Timely, region specific, cross-sectoral mental health and suicide prevention services for people who are at risk of suicide and/ or who have recently attempted suicide	135
People experiencing severe mental health conditions have access to appropriate supports, services and coordinated care	134

Activity Demographics

Target Population Cohort

General Practice: Adelaide PHN has been allocated 5.04% share of GP workforce as at 31 December 2019, and this equates to a target of 1,009 over the four years, to 30 June 2025.

While the primary focus of the IAR measure is to train and support GPs in the use of the IAR, Adelaide PHN's two IAR TSOs will train and support staff working in Medicare Mental Health Centres, Aboriginal Medical Services, commissioned providers and other staff in their region. TSO's have already conducted many training sessions to support LHN's.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

Activity Consultation and Collaboration

Consultation

In consultation with Clinical Councils, broader stakeholders and local GPs, Adelaide PHN has developed a plan for disseminating and implementing the National IAR Guidelines locally. This plan defines the activities that encourage local adoption and implementation - forecasting anticipated challenges and developing strategies to address these challenges.

Collaboration

The PHN will collaborate with LHNs, GPs RACGP and our Commissioned Service Providers to effectively integrate and disseminate the IAR Tool. The PHN is working closely with the OCP as they determine who they will roll out the IAR across the tertiary setting to ensure consistency in approach.

Integration within APHN has further included, but is not limited to utilisation by, Health Pathways, the Central Referral Unit, digital health and externally and systemically with utilisation by Head to Health, Service Providers, Women's and Children's Hospital and LHNs.

Activity Milestone Details/Duration

Activity Start Date

31/01/2022

Activity End Date

30/12/2025

Service Delivery Start Date

1/3/2022

Service Delivery End Date

30/6/2026

Other Relevant Milestones

Activity Commissioning

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

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

Is this activity being co-designed?

No

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

Yes

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

No

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

No

Co-design or co-commissioning comments

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

No

MH-H2H - 202218 - A202218 - Head to Health Assessment and Referral Phone Service

Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH-H2H

Activity Number *

202218

Activity Title *

A202218 - Head to Health Assessment and Referral Phone Service

Existing, Modified or New Activity *

Existing

Activity Priorities and Description

Program Key Priority Area *

Mental Health Priority Area 7: Stepped care approach

Other Program Key Priority Area Description

Aim of Activity *

Medicare Mental Health Services are designed to address fragmentation and enhance local service integration to offer a seamless care pathway for consumers to receive the right level of care at the right time to meet their mental health needs. Bringing this range of services together allows consumers to access mental health care in a way that meets their preferences. All components of Medicare Mental Health Services have a common aim – to help more Australians experiencing mental health challenges be heard, find a path forward and access services that are right for them

Description of Activity *

The Medicare Mental Health phone service (formerly Head to Health assessment and referral phone service)was established from July 2022 to promote increased access to the system, consistent initial assessment and enable warm transfer to the most appropriate mental health services.

The service was provided internally by the Adelaide PHN for the first 12 months (July 2022-July 2023). Due to the nature of Adelaide PHN current model and for simplicity of referral pathway Adelaide PHN incorporated its existing centralised referral unit into this service to avoid confusion of appropriate access points and duplication of services. The service was successfully transitioned to a Commissioned Service provider effective July 1 2023 following an open Tender process..
Services provided are:

• 1800 number being answered, 24 hour call back excluding (weekends and Public Holiday)
• After hours answering machine
• 8.30-5pm service
• Answering enquires and undertaking an IAR where required and warm referring to a service provider
• Process, reviewing and triaging IARs completed by General Practice and warm referring to a service provider
• Processing, triaging and allocating MHTP to service providers- where clinically appropriate and as capacity permits the team may also undertake IARs for people who have had a MHTP completed where step of care may be unclear or presentation complex and then warm refer them to a service provider
• Providing updates and advice to General Practice on the status of referrals
• Wait List monitoring- each person referred to a service provider who has undergone and IAR will receive appropriate follow up as per the requirements of the model for a wait list check 1 X per week for 4 weeks post referral.

Needs Assessment Priorities *

Needs Assessment

Adelaide PHN Needs Assessment 2024/25 - 2026/27

Priorities

Priority	Page reference
Increased visibility of Adelaide PHN commissioned service providers and eligibility criteria to GPs, state, community services and to underserviced groups to enhance access	135
People experiencing mental health concerns and suicide distress receive timely and appropriate crisis care and treatment services delivered by a skilled workforce	135
People at risk of, or experiencing mild to moderate mental health conditions can access primary mental health services through a range of modalities	134
People from underserviced and hard to reach populations experiencing mental health conditions and suicide distress have access to timely, appropriate and integrated primary mental health services	134

Activity Demographics

Target Population Cohort

The Medicare Mental Health phone service is available free to anyone living in the entire Adelaide PHN region with focus in areas of highest identified geographic need and the following target populations :
• people on a low income
• Culturally and Linguistically Diverse people
• Aboriginal and Torres Strait Islander peoples
• Lesbian, Gay, Bisexual, Transgender, Queer and Intersex (LGBTQI)
• older people
• socially isolated new and emerging populations
• perinatal women

• people with comorbid presentations
• individuals who are at risk of suicide or self-harm
• people with intellectual disability and co-occurring mental illness, for whom there are barriers to receiving appropriate mental health and treatment

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

Activity Consultation and Collaboration

Consultation

During the 2022-23 financial year the Adelaide PHN initiated consultation regarding the future design and implementation of the Head to Health Assessment and Referral Phone Line (Medicare Mental Health phone service). Integration with existing or planned state/territory funded intake and treatment services will be a critical component of the service, hence specific focus on working with SA Health and Country SA PHN in relation to their intentions regarding their existing intake services.

Adelaide PHN will work with their local state/territory health services to ensure clear communication channels and processes for transferring clients between services as needed. During 23/24 Adelaide PHN initiated work with the Commissioned service provider to undertake broader consultation, at a local level, with consumers, carers, Local Hospital Networks (LHNs) and other local stakeholders to co-design and shape aspects of the service model to meet the local needs of the region, within the framework presented by this model.

Collaboration

Adelaide PHN is working collaboratively with SA Health and Country SA PHN to establish the intake service in a way that is well-integrated with services and systems operating within the jurisdiction. As part of their commissioning processes, Adelaide PHN collaborated with the commissioned service provider to undertake consultation, at a local level, with consumers, carers, Local Hospital Networks (LHNs) or their equivalent and other local stakeholders to co-design and shape the service model to meet the particular needs of the area, within the framework presented by this model.
During 23/24 Adelaide PHN commenced collaboration with SA Health and Country SA PHN in relation to integration of Head to Health Phone Service and State Triage lines

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Activity Milestone Details/Duration

Activity Start Date

31/03/2022

Activity End Date

29/06/2026

Service Delivery Start Date

1 July 2022

Service Delivery End Date

30 June 2026

Other Relevant Milestones

Activity Commissioning

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

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

Is this activity being co-designed?

No

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

No

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

No

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

No

Co-design or co-commissioning comments

MH - 202301 - A202301 - Targeted Regional Initiatives to Suicide Prevention

Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

202301

Activity Title *

A202301 - Targeted Regional Initiatives to Suicide Prevention

Existing, Modified or New Activity *

Modified

Activity Priorities and Description

Program Key Priority Area *

Mental Health Priority Area 5: Community based suicide prevention activities

Other Program Key Priority Area Description

Aim of Activity *

Adelaide PHN will apply evidence-based systems approaches to suicide prevention targeting communities of high need and populations identified at risk of suicide or suicidal distress. The approach will have a particular focus on implementing strategies that promote protective factors, respond compassionately to early signs of distress, and promote, social, emotional and cultural wellbeing.
The PHNs primary objective will be to engage the community and local health and frontline workforces to improve their capacity and capability to implement evidence-based activities and initiatives to prevent suicide. Secondary to this, the PHN will collaborate with other National, State, and local community stakeholders within the Adelaide region to identify existing suicide prevention plans and activities and look to commission activities that align across systems-based approaches, particularly where gaps are identified.
Adelaide PHN was not part of the National Suicide Prevention Trial and thus stakeholder engagement and community consultation has been and continue to be a primary component of TRISP to support progress towards improving coordination and integration of existing activities and pathways, and development of effective partnerships towards systems reform.

Description of Activity *

The Regional Suicide Prevention Lead will coordinate the implementation of the following activities:
• Identification of communities of need and the at-risk populations within the Adelaide region, informed by data consultation with state and national stakeholders, including the AIHW Suicide and Self-Harm Monitoring Portal.

• Map of existing services/programs within communities against evidence-based systems frameworks to identify gaps and options to value add, strengthen and build capacity of existing activities.
• Identification and commissioning of time-limited community capacity building activities to fulfil above objectives, using evidence-based recommendations. Activities selected will align with systems-based frameworks, such as the Lifespan Model. Time-limited capacity building activities include delivery of Connecting with People training for PMHC workforce and targeted suicide prevention capacity building activities for priority populations including LGBTIQA+ people, Aboriginal and Torres Strait Islander people, and people of refugee and asylum seeker background and international students.
• Collaborate with Preventive Health SA to identify existing activity and opportunities to value-add within Adelaide where Suicide Prevention Networks are located. This will reduce duplication of activities and enhance the working relationship between the two organisations.

• Commission peer-led community based nonclinical groups that offer regular opportunities for people to talk about their life experiences in a safe and supported environment, with an aim of improving wellbeing and reducing suicidal distress. Non-clinical group activities include commissioning and establishment of The Men's Table.
• Commission Backbone organisations to support the establishment of place-based Suicide Prevention Collaboratives across the Adelaide PHN region with a focus on establishment and capacity building. The Suicide Prevention Collaboratives will aim to bring communities together to better collaborative and implement local solutions to suicide and development of local community action plans and postvention response protocols.
• Continued collaboration with Black Dog Institute to support implementation of Suicide Prevention Collaboratives and collective impact models among community.
• Participate in the Black Dog Institute Suicide Prevention Communities of Practice and regular networking with other Regional Coordinators across PHNs to share learnings and ways of working.
• Co-design and coordination of a community suicide prevention campaign aimed at building community awareness in suicide prevention and community capacity to recognise and response via promotion and uptake of an evidence-based online self-paced community suicide prevention training program.
• Identify, connect with, and recruit appropriate activities from the National Suicide Prevention Leadership and Support Program to support implementation within selected PHN communities
• Coordination of relevant Project Action Groups and Advisory Groups to assist in co-design of activities and to assist with collaboration and engagement with key agencies in the community to support successful achievement of planned activities.

Adelaide PHN will develop an appropriate performance and monitoring framework and associated data systems for community-based activity under the TRISP measure. Where appropriate, any existing services/ new services commissioned that provide services able to be captured under the PMHC MDS will be supported and required to do so.

Needs Assessment Priorities *

Needs Assessment

Adelaide PHN Needs Assessment 2024/25 - 2026/27

Priorities

Priority	Page reference
Timely, region specific, cross-sectoral mental health and suicide prevention services for people who are at risk of suicide and/ or who have recently attempted suicide	135

Activity Demographics

Target Population Cohort

People who have attempted, or are at risk of, suicide and self-harm. This includes people who are bereaved by suicide.
Individuals at high risk of suicide including those experiencing psychosocial stressors including but not limited to social isolation, financial stress, unemployment, mental health issues and chronic health issues.
Individuals who identify as male, LGBTIQA+, Aboriginal and Torres Strait Islander, and refugee, asylum seeker or international students.
Frontline health and emergency service workers, primary mental health care workforce and those caring for people experiencing suicidal ideation and self-harm.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

Activity Consultation and Collaboration

Consultation

Adelaide PHN utilises a range of different mechanisms to facilitate consultation including Community Advisory and Clinical Councils which hold membership from peak organisations in mental health, Aboriginal health, carers and consumers, and other expert advisory groups. Adelaide PHN will continue to undertake broader consultation, at a local level with the following key stakeholders:
• Office of the Chief Psychiatrist, Preventive SA and Mental Health Commission to identify duplication of activity and opportunities to partner and leverage resources
• Lived Experience Leadership Advocacy Network (LELAN) and Roses in the Ocean as peak lived experience organisations.
• Local Health Networks to identify opportunities to partner Towards Zero approaches with community suicide prevention.
• Peak bodies and organisations for priority populations including LGBTQIA+, multicultural and Aboriginal and Torres Strait Islander community groups.
• Existing service providers and local suicide prevention networks
• National organisations including Black Dog Institute and organisations under the NSPLSP activity.
• consumers, carers, other local and community stakeholders.

Collaboration

Adelaide PHN is committed to collaborating with experts in suicide prevention, relevant primary care peak bodies, primary care clinicians and those with a lived experience of suicide to develop and implement plans for community-based suicide prevention. This will take advantage of already established alliances, clinical and community councils and may also involve the development of a new suicide prevention collaboratives, alliances, action groups or advisory councils.

Activity Milestone Details/Duration

Activity Start Date

31/12/2022

Activity End Date

29/06/2026

Service Delivery Start Date

July 2023

Service Delivery End Date

June 2026

Other Relevant Milestones

Activity Commissioning

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

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

Is this activity being co-designed?

Yes

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

No

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

Yes

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

No

Co-design or co-commissioning comments

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

Yes

MH - 202309 - A202309 - PA2 - Child and youth mental health services

Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

202309

Activity Title *

A202309 - PA2 - Child and youth mental health services

Existing, Modified or New Activity *

Modified

Activity Priorities and Description

Program Key Priority Area *

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

Other Program Key Priority Area Description

Aim of Activity *

• To improve mental health and wellbeing outcomes for young people through the delivery of mental health services and supports.
• To enhance the accessibility and coordination of mental health care and services for young people by facilitating seamless transitions across primary, secondary, and tertiary care settings.
• To increase the capacity and confidence of GPs and other key providers of care and support in the community to deliver effective and appropriate mental health services for young people.
• To promote greater understanding of youth mental health and mental illness, reduce stigma, and encourage help-seeking behaviours among young people, their families, and friends.
• To ensure meaningful participation of young people in the design, delivery, and evaluation of mental health services and supports.

Description of Activity *

This activity provides access to primary mental health services for young people aged 12-25 years. The activity includes three distinct programs: headspace Centres, Youth Enhanced Service (YES) and headspace Youth Early Psychosis Program.
Adelaide PHN has extended its current headspace Centres and YES contracts for 12 months until 30 June 2026 to align with current funding timeframes with Commonwealth schedules.
Adelaide PHN currently has a schedule with the Commonwealth for headspace Youth Psychosis Program until 30 June 2025.

headspace Centres
The headspace Centres will undertake the following activities:
• Provide a primary care platform with services and supports for young people aged 12-25 across four core streams: mental health; physical health; alcohol and other drugs; and work and study.
• Provide mental health and service promotion, mental health education, youth engagement, and community development services.

There are now five headspace Centres currently operating in the Adelaide metropolitan region:
• headspace Centre Adelaide
• headspace Centre Edinburgh North
• headspace Centre Marion
• headspace Centre Onkaparinga
• headspace Centre Port Adelaide
Youth Enhanced Service
The Youth Enhanced Service will provide mental health services for young people aged 12-25 with severe and/or complex mental health conditions through dedicated multidisciplinary team.

Adelaide PHN has re-commissioned the Youth Enhanced Service (YES), based on the comprehensive program evaluation, stakeholder consultation, and model re-design process undertaken in 2022-3. The consultation process involved engagement with a range of stakeholders, including young people and their families, to ensure that the new service model is responsive to their needs.

The major changes to the service delivery model include the establishment of a single YES service operating from a centralised hub, with place-based and digital health services also available. The eligibility criteria has also been widened to include 12–25-year-olds, while symptom severity and functional impairment criteria has been refined and aligned to the IAR tool.

An open market tender was finalised, with the new service provider, Youturn, commencing service delivery in July 2023 and will continue to the end of the current schedule to 30 June 2026.

headspace Youth Early Psychosis Program
The headspace Youth Early Psychosis Program will undertake the following activities:
• Provide early intervention and recovery focused specialist treatment for young people aged 12-25 years who are at Ultra High Risk (UHR) of, or experiencing, a first episode of psychosis.
• Increase early detection and reduce the duration of untreated psychosis, leading to improved health and wellbeing outcomes for young people and their families.
• Address significant mental health service engagement issues or access barriers experienced by the young person.
• Complement services provided by the headspace Centre primary platform.

There is currently one headspace Youth Early Psychosis Program that services the Adelaide metropolitan area.
headspace Centres and headspace Youth Early Psychosis Program use hAPI to collect the minimum dataset (MDS). Youth Enhanced Services use Adelaide PHN's Power BI Dashboard to upload and review data.

Adelaide PHN is supporting the rollout of Orygen's MOST digital platform across all funded youth mental health services, including headspace Centres, Youth Enhanced Services (YES), and headspace Early Psychosis Youth Services (EPYS). This innovative platform will help meet growing demand and improve outcomes for young people accessing support.

Needs Assessment Priorities *

Needs Assessment

Adelaide PHN Needs Assessment 2024/25 - 2026/27

Priorities

Priority	Page reference
Integration between primary mental health services and alcohol and other drug treatment services to improve continuity of care and outcomes	135
Responsive and appropriate early intervention psychosocial support services that meets the needs of people with severe mental health conditions	135
People at risk of, or experiencing mild to moderate mental health conditions can access primary mental health services through a range of modalities	134
People experiencing severe mental health conditions have access to appropriate supports, services and coordinated care	134
AOD and related services are integrated, holistic and coordinated to improve continuity of care and experiences	158
Aboriginal and Torres Strait Islander people can access culturally safe and appropriate workforce and primary health care services	90

Activity Demographics

Target Population Cohort

The target population cohort for all three programs is young people aged between 12-25 years with mental health needs. headspace Centres are designed for young people with mild to moderate mental health concerns; the Youth Enhanced Service is designed for young people with severe and complex mental health needs, while the headspace Youth Early Psychosis Program is designed for young people at UHR of, or experiencing, first episode psychosis.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

Activity Consultation and Collaboration

Consultation

• Adelaide PHN works closely with its commissioned provider to obtain insight into youth-specific needs.
• Adelaide PHN consults regularly with key stakeholders such as Orygen and headspace National for:
o Model and branding requirements
o Resources and networking opportunities
• All three youth services have youth reference groups or the like to ensure youth voices contribute to and inform provision of youth-friendly services.
• Key stakeholders were consulted around the Youth Enhanced Service redesign.

Collaboration

Adelaide PHN collaborates with State-funded mental health services, including CAMHS, acute and community health mental services, and youth-specific services, to ensure seamless and appropriate support and continuity of care for young people.
A Youth Mental Health Services Community of Practice are held quarterly and are designed to collaboratively address shared services delivery issues for commissioned service providers across all youth mental health services.

Activity Milestone Details/Duration

Activity Start Date

30/06/2023

Activity End Date

29/06/2026

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones

Activity Commissioning

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

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

Is this activity being co-designed?

No

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

No

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

No

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

No

Co-design or co-commissioning comments

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

Yes

MH - 202310 - A202310 - PA5 - Community-based suicide prevention activities

Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

202310

Activity Title *

A202310 - PA5 - Community-based suicide prevention activities

Existing, Modified or New Activity *

Modified

Activity Priorities and Description

Program Key Priority Area *

Mental Health Priority Area 5: Community based suicide prevention activities

Other Program Key Priority Area Description

Aim of Activity *

Adelaide PHN will commission and deliver integrated systems-based approaches to suicide prevention that enhance cross-sector collaboration, data-informed decision-making, and community resilience. This initiative will incorporate the piloting of a Safe Haven model to provide immediate, compassionate, and non-clinical support for individuals in distress

Description of Activity *

Community-based suicide prevention services
In alignment with a systems-based approach to suicide prevention, Adelaide PHN will seek to expand access to early intervention and suicide prevention supports through:

- Training and capability building to support education for health professionals, first responders, and community gatekeepers, and contemporary evidence-based responses. These efforts focus on suicide risk assessment, safety planning, and evidence-based interventions, with a strong emphasis on continuity of care following hospital presentations for suicide attempts.
- Enhancing crisis intervention capacity across communities through the joint commissioning with Northern Adelaide LHN of a Safe Haven service providing, non-clinical spaces where individuals can access immediate support without fear of judgment or escalation.
- Exploring postvention support and resources to offer immediate and follow-up care, including access to trauma-informed grief and loss counselling, peer support groups, and culturally appropriate healing practices.

- Targeted programs and initiatives to enable support and earlier access for people at risk of suicide or self-harm.

Needs Assessment Priorities *

Needs Assessment

Adelaide PHN Needs Assessment 2024/25 - 2026/27

Priorities

Priority	Page reference
Timely, region specific, cross-sectoral mental health and suicide prevention services for people who are at risk of suicide and/ or who have recently attempted suicide	135

Activity Demographics

Target Population Cohort

People who have attempted, or are at risk of, suicide and self-harm. This includes people who may have been recently bereaved by suicide.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

Activity Consultation and Collaboration

Consultation

Adelaide PHN utilises a range of different mechanisms to facilitate consultation including Community Advisory and Clinical Councils which hold membership from peak organisations in mental health, Aboriginal health, carers and consumers, and other expert advisory groups. Adelaide PHN is undertaking broader consultation, at a local level, with consumers, carers, LHNs and other local and community stakeholders to understand services, gaps and needs, and to co-design and shape suicide prevention activities to meet local needs of the region, within the strategies presented by existing systems-based models. This will include

targeted engagement with the following stakeholders:
• Office of the Chief Psychiatrist
• Wellbeing SA
• Lived Experience Leadership Advocacy Network (LELAN)
• Local Health Networks
• Existing Service Providers
• Black Dog Institute
• Beyond Blue
• CALD Community Organisations and Migrant Advisory Groups
• Aboriginal Community Controlled Health Organizations
• Northern Adelaide Mental Health Alliance

Collaboration

Adelaide PHN will collaborate with experts in suicide prevention, relevant primary care peak bodies, primary care clinicians and those with a lived experience of suicide to develop and implement plans for community-based suicide prevention. This will take advantage of already established alliances, clinical and community councils and may also involve the development of a new suicide prevention collaboratives, alliances, or advisory councils.

Activity Milestone Details/Duration

Activity Start Date

30/06/2023

Activity End Date

29/06/2026

Service Delivery Start Date

01/07/2023

Service Delivery End Date

31/12/2026

Other Relevant Milestones

Activity Commissioning

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

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

Is this activity being co-designed?

No

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

No

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

No

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

No

Co-design or co-commissioning comments

Adelaide PHN will also be further exploring co-commissioning arrangements for any community-based suicide prevention activity to support sustainability of services and activities into the future.

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

Yes

MH - 202311 - A202311 - PA1 - Low intensity mental health services

Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

202311

Activity Title *

A202311 - PA1 - Low intensity mental health services

Existing, Modified or New Activity *

Modified

Activity Priorities and Description

Program Key Priority Area *

Mental Health Priority Area 1: Low intensity mental health services

Other Program Key Priority Area Description

Aim of Activity *

This activity aims to
• Improve access to and targeting of psychological interventions to most appropriately support people with mild mental illness through direct commissioning of range of evidence based low intensity interventions
• Improve mental health outcomes, social and emotional wellbeing and experiences of care by people accessing services
• Reduce health inequity by ensuring the most hard to reach, vulnerable and disadvantaged populations receive priority access to low intensity services

Description of Activity *

Service contracts currently due to end 2024/25 (below) will be extended for one year until to 2025/26 in recognition that the Commonwealth may further reduce Low Intensity funding
For 2023-24 to 2024-25 Adelaide PHN will commission five** services, all of which will be delivering services across the stepped care continuum including low intensity services.
The five** PMHC services are:
• Mental health service hub in the south - Neami
• Mental health service hub in the west - Sonder
• Specialist family and child focused mental health services in the north – Lives Lived Well
• Specialist mental health services for LGBTIQA+ populations for the whole Adelaide PHN region – Thorne Harbour Health

• Specialist mental health services for Culturally and Linguistically Diverse (CALD) populations for the whole Adelaide PHN region – Survivors of Torture and Trauma Assistance and Rehabilitation Services (STTARS)
** The Medicare Mental Health Service in the North by Sonder will also deliver low intensity services which is contained in a separate activity (due to Cwlth requirements)

The services are new and commenced on 1 July 2023, and were a direct result of consultation and recommissioning work described in the 2022-23 activities. Two out of the five new providers above were existing providers under the previous commissioning activities.
The five services reflect the needs and priorities of the population by positioning the two hub services in geographic locations of highest disadvantage, and by the specialist services catering to the LGBTIQA+ and CALD communities as well as children 0-11 and their families in the outer north of Adelaide.
Characteristics and types of low intensity services being offered include:
• Individual and group therapy using evidence based and highly structured interventions
• Solution focused brief interventions including single session therapy
• Supported access to online services e.g. in the Medicare Mental Health portal
• Information, service navigation and warm referrals by peer workers - a no wrong door approach
• Use of bilingual support workers at STTARS

For collecting the PMHC minimum dataset (MDS) all services will use their existing clinical software CRM. Adelaide PHN held a data workshop in early April 2023 for all services to answer questions about the PMHC MDS specification and additional data items requested by Adelaide PHN ("MDS Plus" specification). Other topics included access to the Cwlth reporting portal, explanation of PMHC performance framework indicators / targets and additional support resources offered by Adelaide PHN.

Information about services in residential aged care facilities is contained in the Activity 3 Adelaide PHN Psychological Therapies.

Needs Assessment Priorities *

Needs Assessment

Adelaide PHN Needs Assessment 2024/25 - 2026/27

Priorities

Priority	Page reference
Children at risk of, or experiencing mild to moderate mental health conditions and their families/carers have access to appropriate primary mental health services	134
LGBTIQA+ communities can access safe, inclusive and appropriate suicide prevention and primary mental health care services	134
People at risk of, or experiencing mild to moderate mental health conditions can access primary mental health services through a range of modalities	134
People from underserviced and hard to reach populations experiencing mental health conditions and suicide distress have access to timely, appropriate and integrated primary mental health services	134
Aboriginal and Torres Strait Islander people can access timely and appropriate primary health care services that support social and emotional wellbeing and spiritual healing	90

Activity Demographics

Target Population Cohort

People from underserviced and hard to reach populations experiencing mental health conditions have access to timely, appropriate, and integrated primary mental health services

LGBTIQA+ communities can access safe, inclusive and appropriate primary mental health care services

People at risk of, or experiencing mild to moderate mental health conditions can access primary mental health services through a range of modalities

People experiencing mental health conditions are supported by a workforce with the skill mix that meets a diverse range of needs

Children at risk of, or experiencing mild to moderate mental health conditions and their families/carers have access to appropriate primary mental health services

Aboriginal and Torres Strait Islander people can access timely, culturally safe and appropriate primary mental health care services

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

Activity Consultation and Collaboration

Consultation

See low intensity activity in 2022-23 for details of consultation undertaken.

Collaboration

• Adelaide PHN plans to support & collaborate with commissioned PMHC services to develop a consistent approach to the management of waiting lists and waiting times
• A program of Collaborative Practice Workshops designed to address common service delivery issues for commissioned service providers will be developed based on needs identified through working closely with commissioned services providers. Past examples of topics appear below:
o Shared Working Principles
o Suicide Prevention Services - Case Studies and Integrated Practice
o Wait List Management (including wait list tool development)

o Critical Incidents
o LGBTIQ Inclusive Practice
o Emerging Minds Tools and Resources
o Vulnerable Groups
o NDIS and your clients
Updated topics include:
• Updated Credentialing and Scope of Practice Guidance
• Updated operational guidance
• New Quarterly Performance and Risk Assessment Process

Activity Milestone Details/Duration

Activity Start Date

30/06/2023

Activity End Date

29/06/2026

Service Delivery Start Date

01/07/2023

Service Delivery End Date

30/06/2026

Other Relevant Milestones

Activity Commissioning

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

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

Is this activity being co-designed?

No

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

No

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

No

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

No

Co-design or co-commissioning comments

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

Yes

MH - 202312 - A202312 - PA3 - Psychological therapies

Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

202312

Activity Title *

A202312 - PA3 - Psychological therapies

Existing, Modified or New Activity *

Modified

Activity Priorities and Description

Program Key Priority Area *

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

Other Program Key Priority Area Description

Aim of Activity *

This activity aims to
• Address service gaps in the provision of psychological therapies for people in under-serviced and/or hard to reach populations, making optimal use of the available service infrastructure and workforce;
• Improve mental health outcomes, social and emotional wellbeing and experiences of care by people accessing services
• Reduce health inequity by ensuring the underserviced and / or hard to reach populations receive priority access to psychological therapies, including those in residential aged care facilities

Description of Activity *

Service contracts currently due to end 30/6/25 (below) will be extended for one year until to 2025/26 in recognition that the Commonwealth may further reduce Low Intensity funding which may impact on broader flexible funding pool.
Since the first AWP for this period, the open tender for the Medicare Mental Health Centre in the North has now been completed with Sonder the successful applicant commencing service delivery on 15 April 2024.
For 2023-24 to 2024-25 Adelaide PHN will commission:
• Five primary mental health care (PMHC) services, all of which will be delivering services across the stepped care continuum including psychological therapies.
• One service for multiple residential aged care facilities
• Supplementary psychological therapies for the Northern Medicare Mental Health Service to ensure additional or ongoing

support is available to those in need
The five PMHC services are:
• Mental health service hub in the south - Neami
• Mental health service hub in the west - Sonder
• Specialist family and child focused mental health services in the north – Lives Lived Well
• Specialist mental health services for LGBTIQA+ populations for the whole Adelaide PHN region – Thorne Harbour Health
• Specialist mental health services for Culturally and Linguistically Diverse (CALD) populations for the whole Adelaide PHN region – Survivors of Torture and Trauma Assistance and Rehabilitation Services (STTARS)

The service for RACFs will be delivered by Relationships Australia (SA) and at the time of writing this activity 150 RACFs out of 152 in the Adelaide PHN region had registered to receive services.
The Northern Medicare Mental Health service activity is contained in a separate activity due to Cwlth requirements.
Supplementary PMHC services (psychological therapies and clinical care coordination) providing longer term treatment options to the Northern Medicare Mental Health service, form part of this AWP. These are delivered by Sonder the operator of the Northern Medicare Mental Health Service and commenced on 15 April 2024. The five PMHC services are new and commenced on 1 July 2023 and were a direct result of consultation and recommissioning work described in the 2022-23 activities. Two out of the five new providers above were existing providers under the previous commissioning activities.
The RACF service is an existing activity that has been included here
from 23-24 and is currently contracted to 25-26. The RACF provides a range of services to people residing in residential aged care facilities including psychological therapies.
The five PMHC services reflect the needs and priorities of the population by positioning the two hub services in geographic locations of highest socioeconomic disadvantage, and by the specialist services catering to the underserviced LGBTIQA+ and CALD communities as well as children 0-11 and their families in the outer northern suburbs of Adelaide. Due to ongoing workforce challenges within these hub services Adelaide PHN will engage as required an alternative service provider with appropriate workforce and Governance to provide psychological therapies in areas of need to the specified target group- referrals are managed through the Medicare Mental Health Phone Line.
Characteristics and types of services and psychological therapies being offered include:
• Intake, assessment and triage
• Individual and group evidence based structured psychological therapies;
• Clinical suicide prevention services;
• Step up / step down functionality based on need;
• Multi-disciplinary teams
• Ongoing review / waitlist management
• Clinical oversight and supervision
• Transition, exit and follow up;
For collecting the PMHC minimum dataset (MDS) all services will use their existing clinical software / CRM. Adelaide PHN held a data workshop in early April 2023 for all services to answer questions about the PMHC MDS specification and additional data items requested by Adelaide PHN ("MDS Plus" specification). Other topics included access to the Cwlth reporting portal, explanation of PMHC performance framework indicators / targets and additional support resources offered by Adelaide PHN.

Needs Assessment Priorities *

Needs Assessment

Adelaide PHN Needs Assessment 2024/25 - 2026/27

Priorities

Priority	Page reference
Children at risk of, or experiencing mild to moderate mental health conditions and their families/carers have access to appropriate primary mental health services	134
LGBTIQA+ communities can access safe, inclusive and appropriate suicide prevention and primary mental health care services	134

People at risk of, or experiencing mild to moderate mental health conditions can access primary mental health services through a range of modalities	134
People from underserviced and hard to reach populations experiencing mental health conditions and suicide distress have access to timely, appropriate and integrated primary mental health services	134
Aboriginal and Torres Strait Islander people can access culturally safe and appropriate workforce and primary health care services	90
Aboriginal and Torres Strait Islander people can access timely and appropriate primary health care services that support social and emotional wellbeing and spiritual healing	90

Activity Demographics

Target Population Cohort

Adelaide PHN funding is intended for under-serviced, hard to reach and at risk / vulnerable populations in the areas of highest need. The following at risk / vulnerable groups have been identified as priorities and services must target and be appropriate for these:
i. People experiencing chronic and complex mental health conditions, including physical health conditions, comorbidities, and homelessness (or at risk of homelessness);
ii. People identifying as LGBTIQA+;
iii. People from culturally and linguistically diverse backgrounds;
iv. People from Aboriginal and Torres Strait Islander backgrounds;
v. Children 0-11 years and their families who need low to moderate intensity structured psychological therapies;
vi. Perinatal mothers (and partners where appropriate) with anxiety and / or depression and / or borderline personality disorder;
vii. People who are at risk of or who have experienced a suicide attempt or self harm;
viii. People living in areas of significant socioeconomic disadvantage and are not eligible or able to access services through an alternative referral pathway.
People residing in RACFs who are not appropriate for state based older persons MH services or able to access MBS Better Access

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

Activity Consultation and Collaboration

Consultation

Please refer to 2022-23 Activity MH6 – 6000 Psychological Therapies for consultation undertaken leading to recommissioned services.

Collaboration

• Adelaide PHN plans to support & collaborate with commissioned PMHC services to develop a consistent approach to the management of waiting lists and waiting times
• A program of Collaborative Practice Workshops designed to address common service delivery issues for commissioned service providers will be developed based on needs identified through working closely with commissioned services providers. Past examples of topics appear below:
o Shared Working Principles
o Suicide Prevention Services - Case Studies and Integrated Practice
o Wait List Management (including wait list tool development)
o Critical Incidents
o LGBTIQ Inclusive Practice
o Emerging Minds Tools and Resources
o Vulnerable Groups
o NDIS and your clients
Updated topics include:
• Updated Credentialing and Scope of Practice Guidance
• Updated operational guidance
• New Quarterly Performance and Risk Assessment Process

Activity Milestone Details/Duration

Activity Start Date

30/06/2023

Activity End Date

29/06/2026

Service Delivery Start Date

01/07/2023

Service Delivery End Date

30/06/2026

Other Relevant Milestones

Activity Commissioning

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

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

Is this activity being co-designed?

No

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

No

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

No

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

No

Co-design or co-commissioning comments

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

Yes

MH - 202314 - A202314 - PA4 - Mental health services for severe and complex mental illness

Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

202314

Activity Title *

A202314 - PA4 - Mental health services for severe and complex mental illness

Existing, Modified or New Activity *

Modified

Activity Priorities and Description

Program Key Priority Area *

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

Other Program Key Priority Area Description

Aim of Activity *

The aim of this activity is to
• Deliver primary mental health care services for people with severe mental illness being managed in primary care, including clinical care coordination
• Improve mental health outcomes, social and emotional wellbeing and experiences of care by people accessing services
• Reduce health inequity by ensuring the underserviced and / or hard to reach populations receive priority access to primary mental health care services

Description of Activity *

Service contracts currently due to end 30/6/25 (below) will be extended for one year until to 2025/26 to align with Low Intensity and Psychological Therapies activities .
For 2023-24 to 2024-25 Adelaide PHN will commission:
• Five primary mental health care (PMHC) services, all of which will be delivering services across the stepped care continuum including clinical care coordination and psychological therapies for people experiencing chronic and complex mental health conditions
• Supplementary clinical care coordination and psychological therapies for the Northern Head to Health Centre to ensure additional or ongoing support is available to those in need
The five PMHC services are:

• Mental health service hub in the south - Neami
• Mental health service hub in the west - Sonder
• Specialist family and child focused mental health services in the north – Lives Lived Well
• Specialist mental health services for LGBTIQA+ populations for the whole Adelaide PHN region – Thorne Harbour Health
• Specialist mental health services for Culturally and Linguistically Diverse (CALD) populations for the whole Adelaide PHN region – Survivors of Torture and Trauma Assistance and Rehabilitation Services (STTARS)
The Northern Medicare Mental Health service activity is contained in a separate activity due to Cwlth requirements.
Supplementary PMHC services (psychological therapies and clinical care coordination) providing longer term treatment options to the Northern Medicare Mental Health service, form part of this AWP. These are delivered by Sonder the operator of the Northern Medicare Mental Health Service and commenced on 15 April 2024.
The five PMHC services are new and commence on 1 July 2023 and were a direct result of consultation and recommissioning work described in the 2022-23 activities. Two out of the five new providers above were existing providers under the previous commissioning activities.
The five PMHC services reflect the needs and priorities of the population by positioning the two hub services in geographic locations of highest socioeconomic disadvantage, and by the specialist services catering to the underserviced LGBTIQA+ and CALD communities as well as children 0-11 and their families in the outer northern suburbs of Adelaide.
Characteristics and types of services offered include:
• Comprehensive mental health assessment (including risk and physical health)
• Working general practitioners and/or community based psychiatrists to provide coordinated clinical care in line with a treatment plan
• Developing and monitoring comprehensive, recovery based care plans
• Some clinical care / treatment - within the scope of practice (e.g. if a Mental Health Nurse - mental state monitoring, administering and monitoring medication, and metabolic monitoring)
• Liaising closely with family and carers as appropriate
• Ongoing reviews including coordinating multidisciplinary team meetings
• Psychoeducation (including physical health)
• Assess suitability for digital support and treatment options (e.g., Head to Health website)
• Coordinating and supporting warm referrals to other services as required
• Supports step up / step down functionality based on need
• Transition, exit and follow up

For collecting the PMHC minimum dataset (MDS) all services will use their existing clinical software / CRM. Adelaide PHN held a data workshop in early April 2023 for all services to answer questions about the PMHC MDS specification and additional data items requested by Adelaide PHN (“MDS Plus” specification). Other topics included access to the Cwlth reporting portal, explanation of PMHC performance framework indicators / targets and additional support resources offered by Adelaide PHN.

Needs Assessment Priorities *

Needs Assessment

Adelaide PHN Needs Assessment 2024/25 - 2026/27

Priorities

Priority	Page reference
Children at risk of, or experiencing mild to moderate mental health conditions and their families/carers have access to appropriate primary mental health services	134
LGBTIQA+ communities can access safe, inclusive and appropriate suicide prevention and primary mental health care services	134
People experiencing severe mental health conditions have access to appropriate supports, services and coordinated care	134

People from underserviced and hard to reach populations experiencing mental health conditions and suicide distress have access to timely, appropriate and integrated primary mental health services	134
Aboriginal and Torres Strait Island people can access trans-generational trauma and grief counselling services and narrative therapies for suicide prevention and mental health	90
Aboriginal and Torres Strait Islander people can access timely and appropriate primary health care services that support social and emotional wellbeing and spiritual healing	90

Activity Demographics

Target Population Cohort

Adelaide PHN funding is intended for under-serviced, hard to reach and at risk / vulnerable populations in the areas of highest need. The following at risk / vulnerable groups have been identified as priorities and services must target and be appropriate for these:
i. People experiencing chronic and complex mental health conditions, including physical health conditions, comorbidities, and homelessness (or at risk of homelessness);
ii. People identifying as LGBTIQA+;
iii. People from culturally and linguistically diverse backgrounds;
iv. People from Aboriginal and Torres Strait Islander backgrounds;
v. Children 0-11 years and their families who need low to moderate intensity structured psychological therapies;
vi. Perinatal mothers (and partners where appropriate) with anxiety and / or depression and / or borderline personality disorder;
vii. People who are at risk of or who have experienced a suicide attempt or self harm;
viii. People living in areas of significant socioeconomic disadvantage and are not eligible or able to access services through an alternative referral pathway.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

Activity Consultation and Collaboration

Consultation

Please refer to 2022-23 Activity MH7 – 7000 Psychological Therapies for consultation undertaken leading to recommissioned services.

Collaboration

• Adelaide PHN plans to support & collaborate with commissioned PMHC services to develop a consistent approach to the management of waiting lists and waiting times
• A program of Collaborative Practice Workshops designed to address common service delivery issues for commissioned service providers will be developed based on needs identified through working closely with commissioned services providers. Past examples of topics appear below:
o Shared Working Principles
o Suicide Prevention Services - Case Studies and Integrated Practice
o Wait List Management (including wait list tool development)
o Critical Incidents
o LGBTIQ Inclusive Practice
o Emerging Minds Tools and Resources
o Vulnerable Groups
o NDIS and your clients
Updated topics include:
• Updated Credentialing and Scope of Practice Guidance
• Updated operational guidance
• New Quarterly Performance and Risk Assessment Process

Activity Milestone Details/Duration

Activity Start Date

30/06/2023

Activity End Date

29/06/2026

Service Delivery Start Date

01/07/2023

Service Delivery End Date

30/06/2026

Other Relevant Milestones

Activity Commissioning

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

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

Is this activity being co-designed?

No

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

No

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

No

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

No

Co-design or co-commissioning comments

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

Yes

MH-Op - 1000 - MH-Op1. Mental Health Operational

Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH-Op

Activity Number *

1000

Activity Title *

MH-Op1. Mental Health Operational

Existing, Modified or New Activity *

Modified

Activity Priorities and Description

Program Key Priority Area *

Other Program Key Priority Area Description

Aim of Activity *

Description of Activity *

Needs Assessment Priorities *

Needs Assessment

Priorities

Activity Demographics

Target Population Cohort

In Scope AOD Treatment Type *

Indigenous Specific *

Indigenous Specific Comments

Coverage

Whole Region

Activity Consultation and Collaboration

Consultation

Collaboration

Activity Milestone Details/Duration

Activity Start Date

Activity End Date

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones

Activity Commissioning

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

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

Is this activity being co-designed?

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

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

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

Co-design or co-commissioning comments

MH-Op - 202325 - O202325 - Right Care Right Place Program - Eating Disorder Coordinators

Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH-Op

Activity Number *

202325

Activity Title *

O202325 - Right Care Right Place Program - Eating Disorder Coordinators

Existing, Modified or New Activity *

Modified

Activity Priorities and Description

Program Key Priority Area *

Other Program Key Priority Area Description

Aim of Activity *

Description of Activity *

Needs Assessment Priorities *

Needs Assessment

Priorities

Activity Demographics

Target Population Cohort

In Scope AOD Treatment Type *

Indigenous Specific *

Indigenous Specific Comments

Coverage

Whole Region

Activity Consultation and Collaboration

Consultation

Collaboration

Activity Milestone Details/Duration

Activity Start Date

Activity End Date

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones

Activity Commissioning

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

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

Is this activity being co-designed?

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

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

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

Co-design or co-commissioning comments