

Nepean Blue Mountains - Primary Mental Health Care 2022/23 - 2026/27 Activity Summary View



MH - 1 - 2024-25 Youth Enhanced (YES) Program



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

1

Activity Title *

2024-25 Youth Enhanced (YES) Program

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

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

Other Program Key Priority Area Description

Aim of Activity *

The YES Program will continue to provide mental health services to young people presenting with severe and complex mental ill-health (non-psychotic). The YES Program aims to enhance and expand access to quality evidence based medical care, care coordination and evidence based psychological intervention for young people living with severe (non-psychotic) mental illness.

The activity will meet a local need as hospitalisation for self-harm in young people is above the NSW average, particularly in the Penrith and Lithgow LGAs. There is a need for services in primary care for young people with and /or at risk of severe non-psychotic mental illness.

Description of Activity *

This activity is funded in all four Local Government areas. In the Penrith, Blue Mountains, and Lithgow LGAs the Youth Enhanced Support Service (YESS) provides a suite of clinical services, with one entry point for young people with severe mental illness not suitable for headspace or the headspace Youth Early Psychosis program. This activity focuses on the provision of coordinated wrap around care including psychological help and social interventions, peer work, employment services, psychiatry and/or family work.

In the Lithgow LGA the Youth Plus service is a brief intervention service that offers young people aged 12-25 yrs., who are in crisis, a set of specific individual appointments. During these sessions, a clinician will talk with the young person and provide support, help navigate their way through the crisis, and link them into further services as needed. Youth Plus provides support for young people experiencing impulsive and self-destructive behaviours, changing emotions and strong, overwhelming feelings, problems with identity and sense of self, and thoughts and feelings of suicide and self-harm.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment 2021/22 - 2023/24

Priorities

| Priority | Page reference |
|--|----------------|
| Address high levels of self-harm and self-harm hospitalisations | 275 |
| Address inadequate psychiatric services across the region | 284 |
| Access to GP care - identified need to improve consumer access to GP clinical care, in particular for those who may be in mental health crisis. | 287 |
| Address high rates of mental health disorder hospitalisations | 278 |
| Address high burden of mental health disorders among children and youth / inadequate service provision in psychiatry and mental health for children and youth | 279 |
| Address high proportion of young people have contemplated suicide or developed a suicide plan, and high rate of intentional self-harm hospitalisations among young people | 272 |
| Recognise of 'at-risk' populations and communities in service planning including: <ul style="list-style-type: none"> • Young people 25-34 yrs • LGBTIQ+ communities • Unemployed males • Older males • Persons separated from their relat | 274 |



Activity Demographics

Target Population Cohort

Youth aged 12-25 years with mental health issues not suitable for headspace, primary care or the headspace Youth Early Psychosis program.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments**Coverage****Whole Region**

Yes

| SA3 Name | SA3 Code |
|----------------------------|----------|
| Blue Mountains - South | 12402 |
| Fairfield | 12702 |
| Penrith | 12403 |
| Dural - Wisemans Ferry | 11502 |
| Rouse Hill - McGraths Hill | 11504 |
| Lithgow - Mudgee | 10303 |
| Bathurst | 10301 |
| St Marys | 12405 |
| Hawkesbury | 11503 |
| Richmond - Windsor | 12404 |
| Blue Mountains | 12401 |

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

The service underwent consultation through co-design with key stakeholders and with the LHD Child and Youth Mental Health Service during the second part of 2017-18 to ensure suitable referral pathways could be developed which avoid duplication of service provision.

NBMPHN continues to consult closely with Orygen and the lead agencies, Uniting (YESS) and Marathon Health (Youth Plus), as well as other key stakeholders including headspace National, young people and their family and carers, local youth services and the Mental Health Advisory Committee in the continued co-design of these service to ensure they meet local need.

Collaboration

- Uniting (YESS) and Marathon Health (Youth Plus) - to support the youth enhanced support service delivery in their allocated region of Penrith Blue Mountains and Hawkesbury
- Marathon Health (Youth Plus) - to support the youth enhanced support service delivery in their allocated region of Lithgow
- LHD Child & Youth Mental Health Services - key contributor towards service needs and integration
- Orygen - key contributor towards overarching program model / development
- headspace National - key contributor towards overarching program model /development
- young people and their family and carers - key contributor towards program needs and enhancements
- local youth services - key contributor towards program needs and enhancements
- Mental Health Advisory Committees - key contributors towards program needs, enhancements and service delivery



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2026

Service Delivery Start Date

01 July 2019

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: Yes

Direct Engagement: No

Open Tender: No

Expression Of Interest (EOI): No

Other Approach (please provide details): No

Is this activity being co-designed?

No

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

Yes

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

No

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

No

Decommissioning

No

Decommissioning details?

Co-design or co-commissioning comments

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

Yes



MH - 2 - 2024-25 Stepped Care Approach



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

2

Activity Title *

2024-25 Stepped Care Approach

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 ***

This activity aims to utilise the stepped care approach as a central platform that will guide NBMPHN’s commissioning and coordination of primary mental health care services in the region to ensure a range of service types and choices are available for consumers. NBMPHN will make best use of what is available within the local region but also build capacity where there are gaps to enhance service provision to better match individual and population needs. An early intervention approach where people with mental health problems and mental illness have their needs addressed early will be incorporated where possible into service co-design.

Description of Activity *

Key activities that will support the development and implementation of the stepped care approach include:

1. Joint regional mental health and suicide prevention plan (incorporating the initiatives of the National Bilateral Mental Health Agreement) between NBMPHN and NBM LHD. This 5 year plan represents a commitment of governance to jointly address issues and create an environment where mental health and suicide prevention services are connected, safe and equitable. The implementation is set out over 5 years and is supported through an operational plan of action.
2. Implementation of the NBMPHN Initial Assessment and Referrals (IAR) Clinical Intake Service as the central point of triage and service allocation for PHN commissioned services. Currently this is applied to all Head to Health service referrals. The IAR Decision Support Tool that is used in all intake assessments will support referrers in aligning the right service to an individual’s needs in accordance with the Stepped care approach. A gradual induction of commissioned services through the IAR Clinical Intake Service

will support the rollout across the region, commencing with mental health nursing services for complex coordinated care and psychological therapy services.

3. Socialisation of the Stepped care approach to local referrers, specifically in the first instance with GPs, will apply the underpinning change management principles. The gradual induction of services through the IAR will assist this process as it is further socialised with commissioned service providers

4. Consultation and collaboration with key stakeholders including consumers, carers, those with lived experience and local mental health professions will continue through formal steering committees that will provide advice on service planning and monitoring throughout 2024-25 in support of the stepped care rollout.

5. A GP Psychiatry Support Line delivering psychiatry advice to GPs via telephone and other identified electronic platforms Monday to Friday will support a Step up of care and advice for mental health needs of primary care patients. This is including but not limited to; clinical and diagnostic advice, medication and prescribing, assistance in developing patient safety plans, input from a psychiatrist with a specialty interest, localised referral pathways and information.

6. Continued development and or refresh of mental health and suicide prevention HealthPathways. These pathways provide localised clinical and referral guidelines to local primary care providers to support consistent and more timely access criteria to services.

7. Refresh/redevelopment of NBMPHN Mental Health online Navigation decision support tool and website will assist consumers and carers with identification of the right level of care for individuals navigating the mental health space.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment 2021/22 - 2023/24

Priorities

| Priority | Page reference |
|--|----------------|
| Address service System Integration and interoperability | 291 |
| Reduce fragmentation through improved integration of mental health services | 285 |
| Address prevalence of diagnosed mental health disorders, including mild, moderate, and severe mental illness, and high prevalence of high or very high psychological distress among adults | 277 |



Activity Demographics

Target Population Cohort

Consumers experiencing mental illness and distress who span across the stepped care range of need. within the Nepean Blue Mountains region.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

| SA3 Name | SA3 Code |
|----------------------------|----------|
| Blue Mountains - South | 12402 |
| Fairfield | 12702 |
| Penrith | 12403 |
| Dural - Wisemans Ferry | 11502 |
| Rouse Hill - McGraths Hill | 11504 |
| Lithgow - Mudgee | 10303 |
| Bathurst | 10301 |
| St Marys | 12405 |
| Hawkesbury | 11503 |
| Richmond - Windsor | 12404 |
| Blue Mountains | 12401 |



Activity Consultation and Collaboration

Consultation

Stakeholder engagement, consultation and collaboration are an integral component in achieving a local implementation of stepped care. Engagement will ensure that stakeholders are involved across a range of mental health service developments. NBMPHN has established several committees to assist in this, including the Mental Health Professionals Advisory Committee, the Joint NBM PHN/LHD Aboriginal Advisory Committee for Drug & Alcohol and Mental Health, the Mental Health Consumer and Carer Mental Health Advisory Committee and the Regional Suicide Prevention Working Group. These committees continue to meet to support the mental health reform work and will continue to do so during 2024-2025. Further, the NBMPHN Clinical Council and GP Advisory Committee will continue to be consulted during the reporting period as appropriate. Stakeholder engagement will also continue with allied health providers, the wider GP community and other stakeholder specific to the priority areas as required.

Collaboration

NBMLHD - the operationalisation of the Joint Regional Mental Health and Suicide Prevention 5 year Plan. GPs, Allied Health, consumers and carers and other entities- to inform co-design and delivery of service developments and models of care



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2026

Service Delivery Start Date

01 July 2019

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: 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?

Yes

Decommissioning

No

Decommissioning details?

n/a

Co-design or co-commissioning comments

n/a

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

Yes



MH - 3 – 2023-24 Mental Health Services for those affected by Floods



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

3

Activity Title *

2024-25 Mental Health Services for those affected by Floods

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

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

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

This activity aims to increase NBMPHN's capacity to provide mental health services to meet the short- and medium-term needs arising from trauma and loss associated with the 2022 south east Queensland and New South Wales floods, providing psychological therapies and support in conjunction with community wellbeing and resilience grants.

Description of Activity *

The Activities that will be undertaken are:

1. Implementation of a dedicated psychological therapy stream (PTS) for those directly impacted by flood within the NBMPHN region to be provided by clinicians throughout the region with expertise in trauma informed care. It is expected that because of this activity more people with diagnosed mental illness who are identified as hard to reach/ or underserved will be able to access low or medium intensity psychological service interventions in the region.
2. Maintain, where possible, engagement of local mental health professionals to deliver services and strengthen local capacity within the NBM region.
3. Introduction of a self-referral pathway to Flood PTS services through the IAR Clinical Intake Service ensuring that the stepped care approach is applied to enable that best fit of service availability to consumer need is applied along with consumer input into decision making.
4. Headspace Lithgow will enhance existing headspace services in communities impacted by disasters and flood by implementing a

mobile outreach treatment service delivering targeted group programs in collaboration with local high schools.

5. Wellbeing and resilience grants to promote community led wellbeing and resilience activities in flood affected areas which encourage social cohesion, connectedness, and supportive relationships, as well as promote mental health healing and recovery for communities are being made available to those impacted by the floods.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment 2021/22 - 2023/24

Priorities

| Priority | Page reference |
|--|----------------|
| Skills and Training Capacity | 276 |
| Provide clinical support to people with severe and persistent mental illness | 284 |
| Strategies to increase sector coordination and linkages to enhance understanding of referral pathways and available supports. | 288 |
| Facilitate navigation of people to match needs and care requirements to appropriate service provision | 289 |
| Address social isolation and stigma | 290 |
| Support Mental Health Literacy and navigation of the local service system | 290 |
| Maintain existing and develop new local mental health pathways | 291 |
| Build the capacity and capabilities of healthcare service providers and practitioners to prepare for and respond to future disasters. | 311 |
| Collaboration with local councils | 236 |
| Facilitate service Integration | 296 |
| Broaden the scope of early intervention services to enhance access for people at risk of and with mental illness | 286 |
| Address high burden of mental health disorders among children and youth / inadequate service provision in psychiatry and mental health for children and youth | 279 |
| Address the need to improve access to primary healthcare services | 306 |
| Address prevalence of diagnosed mental health disorders, including mild, moderate, and severe mental illness, and high prevalence of high or very high psychological distress among adults | 277 |



Activity Demographics

Target Population Cohort

All community members experiencing distress and social dislocation as a result of multiple floods across the NBM region

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

| SA3 Name | SA3 Code |
|------------------------|----------|
| Penrith | 12403 |
| Dural - Wisemans Ferry | 11502 |
| Lithgow - Mudgee | 10303 |
| Hawkesbury | 11503 |
| Richmond - Windsor | 12404 |
| Blue Mountains | 12401 |



Activity Consultation and Collaboration

Consultation

Extensive consultation with more than 50 formal and informal key stakeholders providing important recovery service and support has been conducted as part of a Flood Need Assessment (2022) to identify need and gaps of the flood affected population.

Collaboration

NBMPHN continues to collaborate closely with stakeholders from the PHN's established network of relevant advisory committees as well as the Local Health District, local government, mental health service providers, and key community groups such as neighbourhood centres and recovery workers as appropriate to each particular initiative within the activity



Activity Milestone Details/Duration

Activity Start Date

29/06/2022

Activity End Date

30/06/2024

Service Delivery Start Date

30/06/2022

Service Delivery End Date

30/06/2024

Other Relevant Milestones



Activity Commissioning

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

Not Yet Known: No

Continuing Service Provider / Contract Extension: Yes

Direct Engagement: No

Open Tender: No

Expression Of Interest (EOI): No

Other Approach (please provide details): No

Is this activity being co-designed?

No

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

Yes

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

No

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

No

Decommissioning

No

Decommissioning details?

Co-design or co-commissioning comments

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

Yes



MH - 4 - 2024-25 Katoomba headspace Satellite



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

4

Activity Title *

2024-25 Katoomba headspace Satellite

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

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

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

The activity aims to ensure a safe, high-quality, commissioned service is delivered in the Katoomba Local Government Area to provide holistic care for young people aged 12 to 25 years old experiencing or at risk of mental illness. Four key streams are incorporated into the service delivery including mental health, related physical health, alcohol and other drugs and social and vocational support. In particular, the Katoomba service aims to address the needs of young people at risk of, with emerging mental illness or with a mild to moderate mental illness and/or at risk of suicide.

This activity aligns with the requirement to establish and run a satellite service in Katoomba until 30 June 2026

Description of Activity *

The headspace Katoomba satellite service provides evidence based early intervention mental health, alcohol and/or other drugs and vocational services for people 12-25 years of age. The satellite service does not currently offer in house services for physical and sexual health due to the size of the centre, however it has close linkages with local GP practices and the Women's service. The satellite service is supported by headspace Penrith who is the parent headspace service. Referrals can occur from any source, including self-referrals. The services are delivered either face to face or via telehealth, depending on the preference of the young person.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment 2021/22 - 2023/24

Priorities

| Priority | Page reference |
|--|----------------|
| Address the need for culturally appropriate Services | 302 |
| Broaden the scope of early intervention services to enhance access for people at risk of and with mental illness | 286 |
| Address high burden of mental health disorders among children and youth / inadequate service provision in psychiatry and mental health for children and youth | 279 |
| Address high proportion of young people have contemplated suicide or developed a suicide plan, and high rate of intentional self-harm hospitalisations among young people | 272 |
| Recognise of 'at-risk' populations and communities in service planning including: • Young people 25-34 yrs • LGBTIQ+ communities • Unemployed males • Older males • Persons separated from their relat | 274 |



Activity Demographics

Target Population Cohort

Youth aged 12-25 years.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

No

| SA3 Name | SA3 Code |
|------------------------|----------|
| Blue Mountains - South | 12402 |
| Blue Mountains | 12401 |



Activity Consultation and Collaboration

Consultation

NBMPHN partnered with Uniting the lead agency and headspace Penrith to establish and continue to support the Satellite Service. Prior to establishment, consultations were held with key stakeholders including LHD Child and Youth Mental Health Services, young people, local high schools, local youth services, the local youth interagency, local council and allied health providers. These key stakeholders continue to be consulted as necessary to assist the lead agency in providing a locally relevant Satellite service. Key stakeholders sit on and have representation on the consortium for headspace Katoomba which provides advice and in-kind services to the centre. Local young people are also active members of the Youth Advisory Committee and advise the headspace centre from a youth perspective, as well as assist in recruitment, community events and guiding promotional and key materials at the headspace centre. Similarly, friends and families of young people have an advisory committee that functions in the same way as the youth advisory committee.

Collaboration

NBMPHN continues close collaboration with :

- Uniting, the lead agency and headspace Penrith to support the Satellite service. development and delivery
- LHD Child & Youth Mental Health Services - advice/needs
- young consumers - advice/needs
- local high schools - advice/needs,
- local youth services - linkages/needs
- local youth interagency - integration/needs
- local allied mental health providers-integration/service developments
- headspace National.- service developments
- Youth Advisory Committee - local young people are active members of the Youth Advisory Committee and advise the headspace centre from a youth perspective, as well as assist in recruitment, community events and guide promotional and key materials at the headspace centre.
- Friends and families of young people - have an advisory committee that functions in the same way as the youth advisory committee.

Other important key stakeholders that will be collaborated with regularly, as necessary, are the LHD Child & Youth Mental Health Services, young consumers, local high schools, local youth services, the local youth interagency, allied mental health providers and headspace National.



Activity Milestone Details/Duration

Activity Start Date

19/04/2020

Activity End Date

29/06/2026

Service Delivery Start Date

1 July 2020

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: Yes

Direct Engagement: No

Open Tender: No

Expression Of Interest (EOI): No

Other Approach (please provide details): No

Is this activity being co-designed?

No

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

Yes

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

No

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

No

Decommissioning

No

Decommissioning details?

Co-design or co-commissioning comments

The headspace Satellite service was co-designed with the lead agency, local young people, local relevant youth services, high schools and local council, keeping in line with headspace National Guidelines. This was achieved through a round-table event and regular one on one or group consultations with stakeholders. No further co-designs are planned at this stage as the service has been established now, however these key stakeholders are represented on the headspace Katoomba consortium, youth advisory committee and friends and family committee and consulted as needed.

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

No



MH - 5 - 2024-25 Targeted Regional Initiates Suicide Prevention



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

5

Activity Title *

2024-25 Targeted Regional Initiates Suicide Prevention

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

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

Other Program Key Priority Area Description

Aim of Activity *

The aim of the activity is to adopt a community-led and systems-based approach to suicide prevention targeting populations identified at risk of suicide or suicidal distress in the NBM region by:

- i. improving care coordination and service pathways for people at risk of or bereaved by suicide.
- ii. commissioning and/or adapting services, activities and training packages for at-risk cohorts in the community to identify and respond early to distress.
- iii. building the capacity and capability of the local workforce to respond to suicide and distress and linking people with appropriate supports and services.
- iv. commissioning peer support and mentorship programs for people at risk or impacted by suicide.
- v. utilising data to inform evidenced based approaches

Description of Activity *

Through the appointed suicide prevention coordinator roles working with regional stakeholders and service providers, engagement, coordination and integration of early suicide intervention and prevention initiatives will progress by:

- The continuation of the Suicide Prevention Collaborative to support, enhance and integrate activities & services across the region.
- Commissioning of training providers to deliver suicide prevention upskilling and capacity building to better identify and respond to distress. for community, primary healthcare providers and local worker force who have contact with high risk people

-Through Expressions of Interest, contracting community-led suicide prevention programs to target populations identified at risk of suicide or suicidal distress. These programs will identify and support distressed or struggling peers or community members, improve the way people navigate and access services in providing care and encourage connections to life and create hope through community wellbeing, social cohesion, connectedness, and supportive friendship and relationships.

- Continue with a focus in providing culturally appropriate programs for the Aboriginal and Torres Strait Islander and culturally and linguistically diverse communities.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment 2021/22 - 2023/24

Priorities

| Priority | Page reference |
|--|----------------|
| Address high suicide rates among Aboriginal and Torres Strait Islander people / culturally safe suicide prevention for Aboriginal people | 273 |
| Skills and Training Capacity | 276 |
| Support an increase in service provision for suicide prevention, aftercare and postvention services that meet gaps in the region through community based, ambulatory care that are accessible and afford | 286 |
| Strategies to increase sector coordination and linkages to enhance understanding of referral pathways and available supports. | 288 |
| Address high rates of suicide deaths and intentional self-harm hospitalisations | 269 |
| Workforce Capacity Including Skills and Training – identified need for basic mental health training for mainstream services, including Centrelink, Housing, Police, employers, and community organisatio | 285 |
| Address high proportion of young people have contemplated suicide or developed a suicide plan, and high rate of intentional self-harm hospitalisations among young people | 272 |
| Recognise of 'at-risk' populations and communities in service planning including: • Young people 25-34 yrs • LGBTIQ+ communities • Unemployed males • Older males • Persons separated from their relat | 274 |
| Investigate suicide data risks and rates among local CALD communities | 274 |



Activity Demographics

Target Population Cohort

Populations identified at risk of suicide or suicidal distress are;

Aboriginal & Torres Strait Islander

LGBTQIA+SB

CALD and refugees

Children and young people

Individuals placed in Out of Home Care

In contact with criminal justice system

Australian Defence Force members or veterans

People experiencing socio-economic disadvantage

Older Australians

Homeless or at risk of homelessness

Residents of regional, rural and remote areas

Experiencing or at risk of abuse and violence

People with a disability

People with harmful use of alcohol or other drugs

People with lived experience of suicide

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

-The Suicide Prevention Regional Coordinator roles have conducted and will continue to conduct extensive consultation with community, service providers and people with lived experience.

-Feedback from a community survey will also inform the training needs of our region and assist us to commission a suite of appropriate training offerings.

-The Black Dog Institute Suicide Prevention Capacity building training will continue to contribute to the establishment of the NBM Suicide Prevention Collaborative.

-Consultations with the Shoalhaven Illawarra Suicide prevention Collaborative, Hunter New England and Central Coast PHN, Western NSW PHN and NSW Community Collaboratives will continue to inform the development of the NBM Suicide Prevention Collaborative.

Collaboration

Collaboration will continue through:

-Roses in the Ocean - have informed the design and offerings of training packages for community TouchPoints and to support the development of the suicide prevention peer workforce

-Blue Knot - Vicarious Trauma Training - successive natural disasters have contributed to an increase in suicide attempts and distress- therefore our local primary care workforce, Allied health professionals and other staff working in community based

support services; are at greater risk of experiencing vicarious traumas as a result of being impacted by working with people who are impacted by suicide.

- LivingWorks have been consulted about their ASIST, iASIST and SafeTALK trainings
- consumers with lived experience
- GPs, mental health clinicians
- Local councils
- NGO mental health services
- LHD mental health services



Activity Milestone Details/Duration

Activity Start Date

30/12/2022

Activity End Date

29/06/2025

Service Delivery Start Date

1 July 2023

Service Delivery End Date

30 June 2025

Other Relevant Milestones



Activity Commissioning

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

Not Yet Known: No

Continuing Service Provider / Contract Extension: Yes

Direct Engagement: Yes

Open Tender: No

Expression Of Interest (EOI): Yes

Other Approach (please provide details): No

Is this activity being co-designed?

No

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

No

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

No

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

No

Decommissioning

No

Decommissioning details?

na

Co-design or co-commissioning comments

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

No



MH - 6 - 2024-25 Hawkesbury headspace



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

6

Activity Title *

2024-25 Hawkesbury headspace

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Mental Health

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

The activity aims to ensure a safe, high-quality, commissioned service is delivered in the Hawkesbury Local Government Area to provide holistic care for young people aged 12 to 25 years old experiencing or at risk of mental illness . Four key streams are incorporated into the service delivery including mental health, related physical health, alcohol and other drugs and social and vocational support. In particular, the Hawkesbury service aims to address the needs of young people at risk of, with emerging mental illness or with a mild to moderate mental illness and/or at risk of suicide.

This activity aligns with the requirement to establish and run a headspace centre in Hawkesbury until 30 June 2026.

Description of Activity *

Consultation with the lead agency Uniting and headspace National will continue throughout the funding period.

The headspace Hawkesbury service provides evidence based early intervention mental health, alcohol and/or other drugs, physical and sexual health, and vocational services for people 12-25 years of age. Referrals can occur from any source, including self-referrals. The services are delivered either face to face or via telehealth, depending on the preference of the young person.

Needs Assessment Priorities ***Needs Assessment**

Priorities

| Priority | Page reference |
|--|----------------|
| Address the need for culturally appropriate Services | 302 |
| Broaden the scope of early intervention services to enhance access for people at risk of and with mental illness | 286 |
| Address high burden of mental health disorders among children and youth / inadequate service provision in psychiatry and mental health for children and youth | 279 |
| Address high proportion of young people have contemplated suicide or developed a suicide plan, and high rate of intentional self-harm hospitalisations among young people | 272 |
| Recognise of 'at-risk' populations and communities in service planning including: <ul style="list-style-type: none"> • Young people 25-34 yrs • LGBTIQ+ communities • Unemployed males • Older males • Persons separated from their relat | 274 |

**Activity Demographics****Target Population Cohort**

Youth aged 12-25 years.

In Scope AOD Treatment Type ***Indigenous Specific ***

No

Indigenous Specific Comments**Coverage****Whole Region**

No

| SA3 Name | SA3 Code |
|------------------------|----------|
| Dural - Wisemans Ferry | 11502 |
| Hawkesbury | 11503 |



Activity Consultation and Collaboration

Consultation

Consultation with the lead agency Uniting and headspace National will continue throughout the funding period.

Prior to establishment, consultations were held with key stakeholders including LHD Child and Youth Mental Health Services, young people, local high schools, local youth services, the local youth interagency, local council and allied health providers. Consultations were in the form of one on one interviews, face to face and online forums and groups, and online surveys over a three month period.

Key stakeholders sit on and have representation on the consortium for headspace Hawkesbury which provides advice and in-kind services to the centre. Local young people are also active members of the Youth Advisory Committee and advise the headspace centre from a youth perspective, as well as assist in recruitment, community events and guide promotional and key materials at the headspace centre. Similarly, friends and families of young people have an advisory committee that functions in the same way as the youth advisory committee.

Collaboration

NBMPHN continues close collaboration with:

- Uniting as the lead agency - headspace Hawkesbury service developments and delivery
- LHD Child & Youth Mental Health Services,
- young consumers - advice/needs
- local high schools - advice/needs,
- local youth services - linkages/needs
- local youth interagency - integration/needs
- local allied mental health providers-integration/service developments
- headspace National.- service developments
- Youth Advisory Committee - local young people are active members of the Youth Advisory Committee and advise the headspace centre from a youth perspective, as well as assist in recruitment, community events and guide promotional and key materials at the headspace centre.
- Friends and families of young people - have an advisory committee that functions in the same way as the youth advisory committee.



Activity Milestone Details/Duration

Activity Start Date

22/12/2022

Activity End Date

29/06/2026

Service Delivery Start Date

01/12/2023

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?

Yes

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

No

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

No

Decommissioning

No

Decommissioning details?

Co-design or co-commissioning comments

The headspace service was co-designed with the lead agency, local young people, local relevant youth services, high schools and local council, keeping in line with headspace National Guidelines. This was achieved through community consultations conducted over a three month period, including online survey, online and face to face forums, high school forums and group community events . Key stakeholders consulted include LHD Child & Youth Mental Health Services, young consumers, local high schools, local youth services, the local youth interagency, allied mental health providers and headspace National.

No further co-designs are planned at this stage as the service has been established now, however these key stakeholders are represented on the headspace Hawkesbury consortium, youth advisory committee and friends and family committee and consulted as needed.

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

No



MH - 7 - 2024-25 Penrith headspace



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

7

Activity Title *

2024-25 Penrith headspace

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Mental Health

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

The activity aims to ensure a safe, high-quality, commissioned service is delivered in the Penrith Local Government Area to provide holistic care for young people aged 12 to 25 years old experiencing or at risk of mental illness. Four key streams are incorporated into the service delivery including mental health, related physical health, alcohol and other drugs and social and vocational support. In particular, the Penrith service aims to address the needs of young people at risk of, with emerging mental illness or with a mild to moderate mental illness and/or at risk of suicide.

Description of Activity *

This activity aligns with the requirement to establish and run a full headspace service in Penrith. The headspace Penrith service provides evidence based early intervention mental health, alcohol and/or other drugs, physical and sexual health, and vocational services for people 12-25 years of age. Referrals can occur from any source, including self-referrals. The services are delivered either face to face or via telehealth, depending on the preference of the young person.

Needs Assessment Priorities ***Needs Assessment**

Needs Assessment 2021/22 - 2023/24

Priorities

| Priority | Page reference |
|--|----------------|
| Address the need for culturally appropriate Services | 302 |
| Broaden the scope of early intervention services to enhance access for people at risk of and with mental illness | 286 |
| Address high burden of mental health disorders among children and youth / inadequate service provision in psychiatry and mental health for children and youth | 279 |
| Address high proportion of young people have contemplated suicide or developed a suicide plan, and high rate of intentional self-harm hospitalisations among young people | 272 |
| Recognise of 'at-risk' populations and communities in service planning including: • Young people 25-34 yrs • LGBTIQ+ communities • Unemployed males • Older males • Persons separated from their relat | 274 |



Activity Demographics

Target Population Cohort

Youth aged 12-25 years.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

No

| SA3 Name | SA3 Code |
|----------|----------|
| Penrith | 12403 |
| St Marys | 12405 |



Activity Consultation and Collaboration

Consultation

Consultation with the lead agency Uniting and headspace National will continue throughout the funding period.

Key stakeholders sit on and have representation on the consortium for headspace Penrith which provides advice and in-kind services to the centre. Local young people are also active members of the Youth Advisory Committee and advise the headspace centre from a youth perspective, as well as assist in recruitment, community events and guide promotional and key materials at the headspace centre. Similarly, friends and families of young people have an advisory committee that functions in the same way as the youth advisory committee.

Collaboration

NBMPHN continues close collaboration with:

- Uniting as the lead agency - headspace Penrith service developments and delivery
- LHD Child & Youth Mental Health Services,
- young consumers - advice/needs
- local high schools - advice/needs,
- local youth services - linkages/needs
- local youth interagency - integration/needs
- local allied mental health providers-integration/service developments
- headspace National.- service developments
- Youth Advisory Committee - local young people are active members of the Youth Advisory Committee and advise the headspace centre from a youth perspective, as well as assist in recruitment, community events and guide promotional and key materials at the headspace centre.
- Friends and families of young people - have an advisory committee that functions in the same way as the youth advisory committee.



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2026

Service Delivery Start Date

01 July 2019

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

Is this activity being co-designed?

No

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

Yes

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

No

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

No

Decommissioning

No

Decommissioning details?

Co-design or co-commissioning comments

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

No



MH - 8 - 2024-25 Lithgow headspace Satellite



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

8

Activity Title *

2024-25 Lithgow headspace Satellite

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

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

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

The activity aims to ensure a safe, high-quality, commissioned service is delivered in the Lithgow Local Government Area to provide holistic care for young people aged 12 to 25 years old experiencing or at risk of mental illness. Four key streams are incorporated into the service delivery including mental health, related physical health, alcohol and other drugs and social and vocational support. In particular, the Penrith service aims to address the needs of young people at risk of, with emerging mental illness or with a mild to moderate mental illness and/or at risk of suicide.

Consultation with the lead agency Marathon Health and headspace National will continue throughout the funding period.

Description of Activity *

The headspace Lithgow satellite service provides evidence based early intervention mental health, alcohol and/or other drugs, physical and sexual health and vocational services for people 12-25 years of age. The satellite service is supported by headspace Bathurst who is the parent headspace service. Referrals can occur from any source, including self-referrals. The services are delivered either face to face or via telehealth, depending on the preference of the young person.

This activity aligns with the requirement to establish and run a satellite service in Lithgow until 30 June 2026

Needs Assessment Priorities *

Needs Assessment

Needs Assessment 2021/22 - 2023/24

Priorities

| Priority | Page reference |
|--|----------------|
| Address the need for culturally appropriate Services | 302 |
| Broaden the scope of early intervention services to enhance access for people at risk of and with mental illness | 286 |
| Address high burden of mental health disorders among children and youth / inadequate service provision in psychiatry and mental health for children and youth | 279 |
| Address high proportion of young people have contemplated suicide or developed a suicide plan, and high rate of intentional self-harm hospitalisations among young people | 272 |
| Recognise of 'at-risk' populations and communities in service planning including: • Young people 25-34 yrs • LGBTIQ+ communities • Unemployed males • Older males • Persons separated from their relat | 274 |



Activity Demographics

Target Population Cohort

Youth aged 12-25 years.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

No

| SA3 Name | SA3 Code |
|------------------|----------|
| Lithgow - Mudgee | 10303 |
| Bathurst | 10301 |



Activity Consultation and Collaboration

Consultation

Consultation with the lead agency Uniting and headspace National will continue throughout the funding period

NBMPHN partnered with Marathon Health the lead agency and headspace Bathurst to establish and continue to support the Satellite Service. Prior to establishment, consultations were held with key stakeholders including LHD Child and Youth Mental Health Services, young people, local high schools, local youth services, the local youth interagency, local council and allied health providers. These key stakeholders continue to be consulted as necessary to assist the lead agency in providing a locally relevant Satellite service. Key stakeholders sit on and have representation on the consortium for headspace Bathurst and Lithgow which provides advice and in-kind services to the centre. Local young people are also active members of the Youth Advisory Committee and advise the headspace centre from a youth perspective, as well as assist in recruitment, community events and guiding promotional and key materials at the headspace centre. Similarly, friends and families are able to have input at the centre through various formats such as surveys, feedback forms and consultations.

Collaboration

NBMPHN continues close collaboration with :

- Marathon Health, the lead agency - for headspace Satellite service developments and delivery
- headspace Bathurst - for service developments and delivery to the Satellite service.
- LHD Child & Youth Mental Health Services - advice/needs
- young consumers - advice/needs
- local high schools - advice/needs
- local youth services - linkages/needs
- local youth interagency - integration/needs
- local allied mental health providers-integration/service developments
- headspace National.- service developments
- Friends and families of young people - advice/needs



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2026

Service Delivery Start Date

01 July 2019

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: Yes

Direct Engagement: No

Open Tender: No

Expression Of Interest (EOI): No

Other Approach (please provide details): No

Is this activity being co-designed?

No

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

Yes

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

No

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

No

Decommissioning

No

Decommissioning details?

Co-design or co-commissioning comments

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

No



MH - 9 - 2024-25 Psychological Treatment Services for People with Mental Illness Living in RACFs



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

9

Activity Title *

2024-25 Psychological Treatment Services for People with Mental Illness Living in RACFs

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

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

Other Program Key Priority Area Description

Aim of Activity *

The aim of this activity is to ensure residents in RACHs have access to low-intensity psychological therapy to support people with mild to moderate mental illness. The services will also identify and refer to higher intensity services for people with complex needs including specialist dementia services and Older People’s Mental Health Services. The service will also provide capacity building for RACH staff to identify those at risk of mental illness and/suicide and appropriately refer residents. This service will improve access for residents in RACHs to psychological services, including management of those experiencing depression, anxiety and stress, leading to an increased ability to cope with life changes, and greater engagement in activities and social connections within RACHs.

Description of Activity *

Continue to commission psychological services targeting the mental health needs of people living in Residential Aged Care Homes (RACHs) across the NBM region. These services are intended to enable residents with mental illness to access needed mental health services similar to those available in the community.

Services delivered under this priority provide crucial referral pathways for GPs or the RACH’s Registered Nurse, to enable residents with mild to moderate mental illness to access evidence based short term psychological therapies. This also includes residents who are experiencing early symptoms and are assessed as ‘at risk’ of developing a diagnosable mental illness over the following 12 months.

Services are provided by both individual psychologists and organisation based psychologists, or mental health nurses who work in conjunction with the referrer, to provide evidence-based short term psychological therapies. Services are offered either in individual or group settings.

Providers commissioned also deliver an Education, Awareness and Expansion project to assist RACH's staff in identifying the mental health needs of residents and create clear pathways for referrals to the most appropriate services based on individual need. All 28 RACHs in the NBM region are participating in this program.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment 2021/22 - 2023/24

Priorities

| Priority | Page reference |
|---|----------------|
| Support Mental Health Literacy and navigation of the local service system | 290 |
| Address high rates of mental health disorder hospitalisations | 278 |



Activity Demographics

Target Population Cohort

Residents of aged care homes assessed as living with a mental illness who meet the access criteria

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

| SA3 Name | SA3 Code |
|----------------------------|----------|
| Blue Mountains - South | 12402 |
| Fairfield | 12702 |
| Penrith | 12403 |
| Dural - Wisemans Ferry | 11502 |
| Rouse Hill - McGraths Hill | 11504 |
| Lithgow - Mudgee | 10303 |
| Bathurst | 10301 |
| St Marys | 12405 |
| Hawkesbury | 11503 |
| Richmond - Windsor | 12404 |
| Blue Mountains | 12401 |



Activity Consultation and Collaboration

Consultation

Initial consultation took place through an advisory committee established to consider the staged implementation of this activity. Through this and other key stakeholder networks, further consultation will take place including GPs, residents of aged care homes, service providers and the aged care sector. NBMPHN will use the establishment phase of the pilot to further consolidate learning and shape future commissioning of services across the region. Ongoing consultation with this cohort is taking place through service delivery and evaluation activities.

Collaboration

NBMPHN will continue to collaborate with local RACHs and their staff, GPs, local service providers and aged care residents. Further work will involve the LHD and a variety of health care providers as we work towards leveraging local relationships and expertise to form standard service delivery procedures and build strong working relationships that better facilitate access and robust governance structures.



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2026

Service Delivery Start Date

01 July 2019

Service Delivery End Date

30 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): Yes
Other Approach (please provide details): No

Is this activity being co-designed?

Yes

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

Yes

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

No

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

No

Decommissioning

No

Decommissioning details?

n/a

Co-design or co-commissioning comments

n/a

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

Yes



MH - 10 - 2024-25 Low Intensity Mental Health Services



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

10

Activity Title *

2024-25 Low Intensity Mental Health Services

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Mental Health Priority Area 1: Low intensity mental health services

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

This activity is aimed at supporting people with mild to moderate mental illness, to gain access to low intensity mental health services. Low intensity services will be delivered through a range of services to meet the needs of targeted cohorts including:

1. Low Intensity Mental Health and Group Exercise Program & 'My positive mind course' through outdoor & online live offering of a physical exercise program targeting people with emerging or low to moderate mental health issues, in particular depression and anxiety, with a focus on reducing social isolation and increasing mental health literacy and self-care behaviours. Evidence supports connecting physical based lifestyle interventions with a reduced risk of developing depression, and reducing symptoms of anxiety. This program aims to demonstrate that structured exercise interventions are associated with significant benefits for people with mild to moderate forms of depression and anxiety. The evidence based model of care underpinning this activity, directly correlate with the stepped care approach. This program also aims to support linkages to connect participants to localised clinical pathways and services, including to the Digital Mental Health Gateway where appropriate. .
2. Youth development 'Street University', will aim to provide various community based early intervention mental health services and interactive spaces for young people facilitating a 'soft entry' into mental health services and support.

Description of Activity *

This activity will deliver Low Intensity Mental Health Services - through a Mental Health and Group Exercise Programs (Live Life Get Active) to apply evidence-based exercise and mental well-being group sessions, face to face and online, consisting of three distinct sessions: yoga, boxing and cross-training. The program is designed to provide positive pathways to a healthier life in an

environment that is welcoming, caring and non-judgmental, and facilitates social connection. Participants are required to access the My Positive Mind course to assist with stress management and increasing coping skills and self-efficacy. This program also engages GPs to social prescribe and make referrals directly to the program via a portal.

2. Youth Development 'Street University'-through the Noffs Foundation. The Street University model is delivered in Penrith and Katoomba locations face to face, individual and group sessions. This model uses trained directors, mentors and facilitators to deliver a multifaceted range of youth work, counselling and community development techniques in order to combine progressive approaches to social work with grassroots community participation.

Both activities meet the low intensity guidelines and outcomes measures are applied.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment 2021/22 - 2023/24

Priorities

| Priority | Page reference |
|--|----------------|
| Address poor incorporation of lifestyle interventions into routine care for people with a mental health condition within primary and tertiary care settings | 279 |
| Address high burden of mental health disorders among children and youth / inadequate service provision in psychiatry and mental health for children and youth | 279 |
| Address prevalence of diagnosed mental health disorders, including mild, moderate, and severe mental illness, and high prevalence of high or very high psychological distress among adults | 277 |



Activity Demographics

Target Population Cohort

1. People identified by GPs and other allied health professionals as being at risk of developing mental illness, and likely to benefit from greater social connectedness and/or physical lifestyle interventions as a result of participating in the program.
2. Young people aged up to 24 who are at risk of developing mental ill health
3. People with emerging mental health needs who may benefit from additional psychoeducation to assist in developing greater mental health literacy, personal resilience and social connection.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

| SA3 Name | SA3 Code |
|----------------------------|----------|
| Blue Mountains - South | 12402 |
| Fairfield | 12702 |
| Penrith | 12403 |
| Dural - Wisemans Ferry | 11502 |
| Rouse Hill - McGraths Hill | 11504 |
| Lithgow - Mudgee | 10303 |
| Bathurst | 10301 |
| St Marys | 12405 |
| Hawkesbury | 11503 |
| Richmond - Windsor | 12404 |
| Blue Mountains | 12401 |



Activity Consultation and Collaboration

Consultation

Continued targeted stakeholder consultations including with GPs, Allied Mental Health Professionals, Lived Experience representatives and the NBMLHD through the established Mental Health Professionals Advisory Committee and Mental Health Consumer and Carer Advisory Committee

Collaboration

1. The Mental Health Professionals Advisory Committee with representation from GPs, AHPs, LHD Mental Health
 2. The Mental Health Carer and Consumer Advisory Committee with representation from lived experience
- These key forums will continue to assist in supporting the planning and monitoring of local low intensity activities against needs and outcomes.



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2025

Service Delivery Start Date

01 July 2019

Service Delivery End Date

30 June 2025

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?

No

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

No

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

No

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

No

Decommissioning

No

Decommissioning details?

na

Co-design or co-commissioning comments

na

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

Yes



MH - 11 - 2024-25 Psychiatry Services



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

11

Activity Title *

2024-25 Psychiatry Services

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Mental Health

Other Program Key Priority Area Description

Aim of Activity *

The Aim of this activity is to:

1. Increase access for limited Psychiatry assessment and treatment services for people who experience financial barriers to receiving psychiatry care
2. Increase access to psychiatry services for the Aboriginal and Torres- strait Islander population
3. increase support for GPs managing people with mental health illness where initial psychiatry assessment and planned management will support a continuation of care in the primary care setting

Description of Activity *

The activity will: provide

1. Psychiatry Services, delivered through telepsychiatry to continue to provide initial assessment and brief intervention to people experiencing severe and persistent mental illness with barriers to accessing a psychiatrist (e.g. financial hardship). It also provides advice, opinion and capacity building to GPs to better support the persons care in the primary care setting and is open for all ages.
2. A dedicated psychiatry clinic supporting access for young people transitioning to adulthood with neurodivergent conditions that require diagnosis to support ongoing management by GPs in the primary care setting. This service will also support Aboriginal and Torres Strait Islander residents with priority access to care for those who experience barriers with access
3. Facilitated joined up approaches for Aboriginal and Torres Strait Islander residents to receive care within a local Aboriginal

service. This service is designed to augment the delivery of care currently provided to residents of the region through the Mental Health Nurse Incentive Program and the Psychological therapies programs.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment 2021/22 - 2023/24

Priorities

| Priority | Page reference |
|--|----------------|
| Address lack of culturally safe mental health services for Aboriginal communities | 283 |
| Address inadequate psychiatric services across the region | 284 |
| Address high rates of mental health disorder hospitalisations | 278 |
| Address high burden of mental health disorders among children and youth / inadequate service provision in psychiatry and mental health for children and youth | 279 |
| Address prevalence of diagnosed mental health disorders, including mild, moderate, and severe mental illness, and high prevalence of high or very high psychological distress among adults | 277 |



Activity Demographics

Target Population Cohort

This new service is available to people living in the Blue Mountains, Hawkesbury, Lithgow and Penrith local government areas who are experiencing mental illness and are not currently engaged with public psychiatry services and are experiencing barrier to access through financial hardship or hold a Centrelink issued healthcare, family healthcare, or pension card with a GP referral. All Aboriginal and Torres Strait Islander residents experiencing mental illness are eligible.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

Consultation has occurred through existing PHN advisory committees including the General Practice Clinical Council, the Consumer and Carer Committee and the Mental Health Services advisory committee, NBMLHD.. Due to the thin market, targeted consultations with service providers has also occurred.

Collaboration

Ongoing collaboration will continue with the Consumers, Carers, GPs and allied Health professionals LHD and service providers to monitor, evaluate and adapt the service to the needs of the region.



Activity Milestone Details/Duration

Activity Start Date

30/11/2023

Activity End Date

29/06/2025

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones



Activity Commissioning

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

Not Yet Known: No

Continuing Service Provider / Contract Extension: Yes

Direct Engagement: Yes

Open Tender: No

Expression Of Interest (EOI): Yes

Other Approach (please provide details): No

Is this activity being co-designed?

No

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

No

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

No

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

No

Decommissioning

No

Decommissioning details?

n/a

Co-design or co-commissioning comments

na

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

Yes



MH - 12 - 2024-25 Mental Health Care Services for People with Severe and Complex Mental Illness



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

12

Activity Title *

2024-25 Mental Health Care Services for People with Severe and Complex Mental Illness

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

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

Other Program Key Priority Area Description

Aim of Activity *

The Activity aims to continue to address a regional gap in the provision of clinical care for people with severe and complex mental illness managed in the primary care setting. The service will form an important part of the stepped care approach in providing nurse-led services for the management and support of this target group. Under the Mental Health Nurse Incentive Program precedent model, mental health nurses will work in collaboration with Psychiatrists and General Practitioners to provide services in the primary care setting including:

- Periodic reviews of patients' mental health support needs
- Support with patients medication management
- Providing information and support to access integrated services from general practitioners, psychiatrists and allied health workers to address patients physical and mental health needs
- Support in accessing community services
- Support to test for the NDIS where appropriate, in collaboration with NBMPHN commissioned psychosocial providers.

Description of Activity *

This Activity will deliver clinical care coordination services for people with severe and complex mental illness in the primary care setting through applying the former Mental Health Nurse Incentive Program guidelines - adapted and expanded - to deliver these service including clear discharge guidance. The Activity will also address an equitable distribution of services across the region within the capacity of a limited available workforce.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment 2021/22 - 2023/24

Priorities

| Priority | Page reference |
|--|----------------|
| Address high rates of mental health disorder hospitalisations | 278 |
| Address prevalence of diagnosed mental health disorders, including mild, moderate, and severe mental illness, and high prevalence of high or very high psychological distress among adults | 277 |



Activity Demographics

Target Population Cohort

The target population are adults over 18 yrs of age with severe and complex mental illness who are managed in the primary care setting.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

| SA3 Name | SA3 Code |
|----------------------------|----------|
| Blue Mountains - South | 12402 |
| Fairfield | 12702 |
| Penrith | 12403 |
| Dural - Wisemans Ferry | 11502 |
| Rouse Hill - McGraths Hill | 11504 |
| Lithgow - Mudgee | 10303 |
| Bathurst | 10301 |
| St Marys | 12405 |
| Hawkesbury | 11503 |
| Richmond - Windsor | 12404 |
| Blue Mountains | 12401 |



Activity Consultation and Collaboration

Consultation

Stakeholder consultations have occurred and are iterative with currently contracted credentialed mental health nurses. Further consultations have occurred through the GP Clinical Council, Mental Health Professionals Advisory Committee and the Consumer and Carer Advisory Committee, other mental health and practice nurses, LHD, and Australian College of Mental Health Nurses. These continue to be undertaken as required to support service development of the activity.

Collaboration

NBMPHN will continue to collaborate with the Allied Health Professionals working in mental health, GPs, private practice mental health nurses, LHD mental health services and consumers/carers to assist in the operation of the activity.



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2025

Service Delivery Start Date

01 July 2019

Service Delivery End Date

30 June 2025

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?

No

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

Yes

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

No

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

No

Decommissioning

No

Decommissioning details?

n/a

Co-design or co-commissioning comments

n/a

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

Yes



MH - 13 - 2024-25 Psychological Therapy Services



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

13

Activity Title *

2024-25 Psychological Therapy Services

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

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

Other Program Key Priority Area Description

Aim of Activity *

The service aims to continue addressing regional mental health needs through the provision of psychological therapies for under-serviced/hard to reach groups, including people with mild, moderate and in some cases severe mental illness and for people at risk of suicide. The service will reduce barriers for these target populations experiencing access issues to MBS based psychological interventions. Services provided under this priority area form a crucial part of the suite of mental health services delivered locally under a stepped care approach. It is expected that as a result of this activity more people with diagnosed mental illness identified as hard to reach/ or underserviced will gain access to low/medium intensity psychological therapy interventions. The service provision does not duplicate current Medicare services. Service provision will be delivered for people who are unable to otherwise afford to pay for psychological therapies. This approach will support people to access services based on their needs, at the right time and where possible in their local community. I

Description of Activity *

This activity will deliver Psychological Therapy Services (PTS) through short term, low to medium intensity interventions for people with a diagnosable mild, moderate or in some cases severe mental illness. This activity addresses targeted priority populations/underserviced/hard to reach groups and people who have attempted or are at risk of suicide or self-harm where access to other services is not available/appropriate. The services consist of a defined number of unique psychological therapy sessions with a commissioned/contracted mental health professional for each referred person, either face to face or via telehealth. The service will reduce barriers for the target populations experiencing access issues to MBS based psychological

interventions. Importantly, this activity will maintain engagement of NBM local mental health professionals workforce as a preference to deliver services and strengthen local capacity within the NBM region.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment 2021/22 - 2023/24

Priorities

| Priority | Page reference |
|--|----------------|
| Address high rates of mental health disorder hospitalisations | 278 |
| Address prevalence of diagnosed mental health disorders, including mild, moderate, and severe mental illness, and high prevalence of high or very high psychological distress among adults | 277 |



Activity Demographics

Target Population Cohort

People experiencing mild to moderate and in some cases severe levels of mental health distress and those at risk of suicide, with barriers to accessing psychological support within the region. This includes priority populations of under-serviced/hard to reach groups.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

| SA3 Name | SA3 Code |
|----------------------------|----------|
| Blue Mountains - South | 12402 |
| Fairfield | 12702 |
| Penrith | 12403 |
| Dural - Wisemans Ferry | 11502 |
| Rouse Hill - McGraths Hill | 11504 |
| Lithgow - Mudgee | 10303 |
| Bathurst | 10301 |
| St Marys | 12405 |
| Hawkesbury | 11503 |
| Richmond - Windsor | 12404 |
| Blue Mountains | 12401 |



Activity Consultation and Collaboration

Consultation

Key stakeholder consultations through the PHN's established network of relevant advisory committees, including the Mental Health Professionals and Consumer and Carer Advisory Committees, GP and Allied Health Clinical Councils and the Community Advisory Committee. Consultation will ensure this activity continues to support oversight of needs against service delivery outcomes.

Collaboration

GPs, other medical specialist advisors, allied health providers, mental health service providers currently engaged with NMBPHN and the Local Health District all have a role in supporting oversight of outcomes against need and providing advice on service development as required.



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2025

Service Delivery Start Date

01 July 2019

Service Delivery End Date

30 June 2025

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?

No

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

No

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

No

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

No

Decommissioning

No

Decommissioning details?

n/a

Co-design or co-commissioning comments

n/a

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

Yes



MH - 14 - 2024-25 Joint Regional Mental Health and Suicide Prevention Plan



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

14

Activity Title *

2024-25 Joint Regional Mental Health and Suicide Prevention Plan

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Mental Health Priority Area 5: Community based suicide prevention activities

Other Program Key Priority Area Description

Aim of Activity *

The aim of this activity is to continue to maintain and build momentum in joint regional planning and commissioning activities in partnership with the Nepean Blue Mountains Local Health District (NBMLHD).

The current joint Regional Mental Health and Suicide Prevention (JRMHSP) 5 year Strategic plan between the NBMPHN and NBMLHD (executed 2021) will continue to support this process through integrated planning and delivery of mental health and suicide prevention services within the community of the Nepean Blue Mountains region. The current plan has incorporated the recent National Mental Health Bilateral Agreement initiatives. The plan continues to identify regional gaps and needs and aims to reduce duplication, remove inefficiencies and encourage innovation and service development across the care continuum. The plan is built upon an initial foundation plan (executed 30 June 2019) articulating integration enablers to support collaborative approaches and joint governance, approved by both the PHN and LHD boards.

Description of Activity *

The JRMHSP plan 2021-26 is a living document, open to change according to local needs. It continues to represent a commitment by NBMPHN and NBMLHD to address the plan and create an environment where mental health and suicide prevention services are connected, safe and equitable across the health sectors.

The plan will continue to be activated through the governance of a Joint Steering Committee who oversee the implementation and monitor the progression.

An annual action plan (2024-25) underpins the strategic plan to support operationalisation. Key targets for 2024-25 include

addressing some of the Bilaterally funded Mental Health Initiatives including suicide prevention through the joint delivery of the Way Back Suicide Aftercare program, Child and Youth through the embedding of Headspace Hawkesbury and Adult mental health services through the embedding of Head to Health Hawkesbury.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment 2021/22 - 2023/24

Priorities

| Priority | Page reference |
|---|----------------|
| Integrated models of care across primary and acute care in conjunction with NBM Local Health District | 236 |
| Integrated models of care across primary and acute care in conjunction with NBM Local Health District | 237 |
| Support regional services planning to consider special needs groups | 295 |
| Reduce fragmentation through improved integration of mental health services | 285 |



Activity Demographics

Target Population Cohort

The target population are people across the NBM region with mental health issues spanning the whole spectrum from emerging to severe and persistent mental illness and those experiencing suicidal crisis and distress.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

Stakeholder engagement and consultation activities continue support plans for implementation of activities under the JRMHSP Plan, local governance and service developments. This will be achieved through:

- individuals and groups of people with lived experience
- community forums
- co-design activities.
- consumer feedback, both formal and informal
- committees that support operations and governance including the implementation of the Joint Regional Mental Health and Suicide Prevention Plan Steering Committee
- workshops
- surveys
- participation in sector related collaboration meetings and committees

Collaboration

Stakeholders include but are not limited to:

- consumers, carers including those with lived experience,
- mental health clinicians, including nurses, psychologists, psychiatrists, social workers
- mental health peer workers
- primary care, including GPs and allied health
- mental health community organisations and non-government organisations,
- Aboriginal and Torres Strait Islander community
- CALD community
- underserved and hard to reach groups including lesbian, gay, bisexual, transgender, intersex, or queer (LGBTIQ) communities
- and other relevant key stakeholders
- NBM LHD



Activity Milestone Details/Duration

Activity Start Date

29/06/2019

Activity End Date

30/12/2026

Service Delivery Start Date

30/06/2019

Service Delivery End Date

31/12/2026

Other Relevant Milestones

NBM Joint Regional Mental Health and Suicide Prevention plan was updated to incorporate the addition of the National Mental Health and Suicide Prevention Bilateral schedule in March 2024.



Activity Commissioning

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

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

Is this activity being co-designed?

Yes

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

Yes

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

No

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

No

Decommissioning

No

Decommissioning details?

na

Co-design or co-commissioning comments

na

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

No



MH - 15 - 2024-25 Initial Assessment and Referral Training Support Officers



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

15

Activity Title *

2024-25 Initial Assessment and Referral Training Support Officers

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 IAR Training and Support Officer (TSO) role will aim to coordinate and drive the implementation of the National IAR Guidance at the regional level. The IAR Training and Support Officer (IAR TSO) will support General Practitioners (GPs) and allied mental health clinicians in the NBMPHN to learn about, use and embed the IAR in clinical practice and support the socialisation of the stepped care model. This will contribute to achieving nationally consistent levels of care for persons presenting with similar conditions

Description of Activity *

The IAR Training and Support officer (TSO) will continue to deliver training to and build relationships with GPs and mental health clinicians in the community within the NBMPHN region against our locally set training target. GP attendance will continue to be recorded and remunerated.

The TSO will continue to support as a priority, General Practitioners (GPs) and allied mental health clinicians to use and embed the IAR into their clinical practice. whilst increasing awareness of the stepped care approach for mental health service alignment. The TSO will continue to build strong relationships with the TSO network and other key stakeholders to explore opportunities for shared learning and collaboration.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment 2021/22 - 2023/24

Priorities

| Priority | Page reference |
|--|----------------|
| Address service System Integration and interoperability | 291 |
| Reduce fragmentation through improved integration of mental health services | 285 |
| Address gaps in systems that could support improved communication, transfers of care and conjoint care between service providers across sectors including initial assessment for service matching e-refe | 285 |
| Address prevalence of diagnosed mental health disorders, including mild, moderate, and severe mental illness, and high prevalence of high or very high psychological distress among adults | 277 |



Activity Demographics

Target Population Cohort

GPs, A and clinicians in Adult Mental Health Centres, general practices, Aboriginal Medical Services, Aboriginal Community Controlled Health Services, and NBMPHN commissioned mental health services

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

Consultation at a national level by the Australian Department of Health in consultation with an Expert Advisory Group have helped to inform local implementation..

Stakeholder engagement , consultation and collaboration activities continue to be planned to support local governance and to refine the service model of care to support quality improvement initiatives. This will be achieved through

- individuals and groups of people with lived experience
- community forums
- co-design activities.
- consumer feedback, both formal and informal
- committees that support operations and governance
- workshops
- surveys
- participation in sector related collaboration meetings and committees

Collaboration

Stakeholders include but are not limited to:

- consumers, carers including those with lived experience,
- GPs
- mental health clinicians, including nurses, psychologists, psychiatrists, social workers
- mental health peer workers
- primary care, including GPs and allied health
- mental health community organisations and non-government organisations,
- Aboriginal and Torres Strait Islander community
- CALD community
- underserved and hard to reach groups including lesbian, gay, bisexual, transgender, intersex, or queer (LGBTIQ) communities
- and other relevant key stakeholders including the TSO network
- NBM LHD



Activity Milestone Details/Duration

Activity Start Date

14/06/2016

Activity End Date

29/06/2025

Service Delivery Start Date

01/07/2022

Service Delivery End Date

30/06/2025

Other Relevant Milestones

DOH TSO training package released March 2022

Current incumbent achieved accreditation to train September 2023.

Target training numbers to be achieved by 30 June 2025



Activity Commissioning

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

Not Yet Known: No

Continuing Service Provider / Contract Extension: No

Direct Engagement: No

Open Tender: No

Expression Of Interest (EOI): No

Other Approach (please provide details): Yes

Is this activity being co-designed?

No

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

No

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

No

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

Decommissioning

No

Decommissioning details?

na

Co-design or co-commissioning comments

na

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

No



MH - 16 - 2024-25 Penrith headspace Youth Early Psychosis Program (hYEPP)



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

16

Activity Title *

2024-25 Penrith headspace Youth Early Psychosis Program (hYEPP)

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

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

Other Program Key Priority Area Description

Aim of Activity *

This activity aims to address the needs of young people with and /or at risk of developing psychosis or presenting with first episode psychosis.

This activity aligns with the requirement to continue to fund the existing Youth Early Psychosis Program within the PHN region until 30 June 2025.

Description of Activity *

The headspace Youth Early Psychosis Program (hYEPP) provides youth friendly extended hours specialist treatment and care intervention for young people aged 12-25 years at risk of developing or with first episode psychosis. Families and friends are included in the treatment process. The program has two streams: hYEPP 1 for young people at ultra-high risk of developing psychosis and hYEPP 2 for young people with first episode psychosis. The program works on recovery-based principles.

The program is integrated into headspace Penrith and currently forms a spoke of the 'hub and spoke service provided by the lead agency (Uniting- previously Parramatta Mission) in three western Sydney headspace services (Parramatta spoke), (Mount Druitt hub) and (Penrith spoke). The service offers a specialist, clinical mobile assessment and treatment team (which will continue to be shared across the three sites) and a continuing care team, based at headspace Penrith to ensure young people receive planned, tailored and evidence-based treatment and mental health support within a primary care setting and/or at home or other suitable and mutually agreed places. Referrals can occur from any source, including self-referrals.

Young people qualifying for hYEPP 1 (ultra-high risk) receive treatment for up to six months. They may be referred to hYEPP 2

during that period if they meet the criteria or are referred to the standard headspace services at the end of six months or any other suitable service to support the recovery journey.

Young people qualifying for hYEPP 2 (with first episode psychosis) will receive an initial two years of specialist care which may be extended if necessary.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment 2021/22 - 2023/24

Priorities

| Priority | Page reference |
|--|----------------|
| Address the need for culturally appropriate Services | 302 |
| Address high levels of self-harm and self-harm hospitalisations | 275 |
| Address high proportion of Aboriginal people hospitalised for mental health disorders | 282 |
| Address lack of culturally safe mental health services for Aboriginal communities | 283 |
| Address high rates of mental health disorder hospitalisations | 278 |
| Address high burden of mental health disorders among children and youth / inadequate service provision in psychiatry and mental health for children and youth | 279 |
| Address the need to improve access to culturally appropriate health services | 306 |
| Recognise of 'at-risk' populations and communities in service planning including: <ul style="list-style-type: none"> • Young people 25-34 yrs • LGBTIQ+ communities • Unemployed males • Older males • Persons separated from their relat | 274 |



Activity Demographics

Target Population Cohort

Youth aged 12-25 years with and /or at risk of developing psychosis or presenting with first episode psychosis.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

No

| SA3 Name | SA3 Code |
|--------------------|----------|
| Penrith | 12403 |
| St Marys | 12405 |
| Hawkesbury | 11503 |
| Richmond - Windsor | 12404 |



Activity Consultation and Collaboration

Consultation

Consultation with the lead agency Uniting and Western Sydney PHN (as the funder of the hub and another spoke) will continue throughout the funding period. NBMPHN will continue to participate in hYEPP specific meetings organised by Orygen and joint national meetings between Orygen, the department and the various hYEPP programs.

Collaboration

NBMPHN works in close collaboration with:

- Uniting - as the lead agency to ensure continuity of service for both young people already enrolled in hYEPP and young people newly joining hYEPP through the Penrith spoke during the funding period.
- WentWest (Western Sydney PHN - as the funder of the hYEPP hub (Mt Druitt) and other spoke (Parramatta) to enable Uniting (lead agency) to deliver a coherent hYEPP hub and spoke model across the two regions.
- Orygen and headspace National - to support delivery of the program.



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2025

Service Delivery Start Date

01 July 2019

Service Delivery End Date

30 June 2025

Other Relevant Milestones

NA



Activity Commissioning

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

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

Is this activity being co-designed?

No

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

No

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

No

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

No

Decommissioning

No

Decommissioning details?

Co-design or co-commissioning comments

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

No



MH-H2H - 14 - 2024-25 Initial Assessment and Referral (IAR) Clinical Intake Service



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH-H2H

Activity Number *

14

Activity Title *

2024-25 Initial Assessment and Referral (IAR) Clinical Intake 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 ***

The aim of this activity is to support an entry point for assessment and referral with accessing mental health services within the Nepean Blue Mountains region. The NBMPHN Assessment and Referral phone service is provided through an in-house model using the IAR-DST (Initial Assessment and Referral Decision Support Tool)

In the longer term, NBMPHN's broader aim is to gradually enable the IAR Clinical Intake Service to be the point of entry to access commissioned mental health services in conjunction with the broader implementation of the stepped care model and the IAR-DST across the NBM region.

Description of Activity *

The NBMPHN Assessment and Referral phone service will continue to be delivered through an in-house model that is locally based and engages experienced mental health clinicians to lead the assessment and referral process.

The Clinical Intake Service will continue to be accessed through the Head to Health intake and referral systems 1800 number. This ensures a single point of entry. Based on geocoding, calls are routed to the NBMPHN intake team. The Initial Assessment and Referral Decision Support Tool (IAR- DST) will continue to be applied to clients on intake to support the most appropriate referral, aligned against a stepped care approach, to the right care. This includes access to the Head to Health Adult Mental Health Service in Penrith and the satellite in Hawkesbury. Based on the level of care and clinical judgement, consumers are supported to engage with the most appropriate and local service through a warm transfer to facilitate a smooth transition . As part of the transfer, all

information (with consent) is transferred securely to the ongoing provider to ensure that, wherever possible that the consumer is not required to repeat any information.

There are no restrictions on the source of referral for any consumers. Referrals may come from any source, including but not limited to:

- Self-referrals
- Carers, families, and friends (with consumer consent)
- General practitioners, psychiatrists and paediatricians
- Mental health workers
- Other health professionals
- Schools
- Community and social services
- Telephone support services such as Beyond Blue and others.

NBMPHN will continue to develop access to the IAR-DST for other relevant mental health commissioned services to support improved referral pathways

Needs Assessment Priorities *

Needs Assessment

Needs Assessment 2021/22 - 2023/24

Priorities

| Priority | Page reference |
|--|----------------|
| Address gaps in systems that could support improved communication, transfers of care and conjoint care between service providers across sectors including initial assessment for service matching e-refe | 285 |
| Address prevalence of diagnosed mental health disorders, including mild, moderate, and severe mental illness, and high prevalence of high or very high psychological distress among adults | 277 |



Activity Demographics

Target Population Cohort

Consumers experiencing mental ill health

GPs and allied health providers caring for consumers experiencing mental ill health.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

Consultation previously occurred at a national level by the Australian Department of Health in consultation with an Expert Advisory Group and continues monthly through the Head 2 Health Clinical leads program across NSW and the ACT. This assisted to inform the local model.

NBMPHN's established advisory committees including the GP Clinical Council, The Allied Health Clinical Council, The Joint PHN and LHD Community Advisory Committee, the Mental Health Professionals Advisory Committee and the Mental Health Consumer and the Carer Mental Health Advisory Committee will continue to contribute as required, towards the development and implementation of the IAR Clinical Intake Service.

NBMPHN will continue to develop relationships and joint approaches to integrated care with the LHD, through the operationalisation of the Joint Regional Mental Health and Suicide Prevention Plan (2021-2026)

NBMPHN will continue to participate monthly with the PHN network via the Communities of Practice to develop the IAR intake model; enhance uniformity and gain insights into approaches that have worked well nationally to enable localisation of strategies.

Collaboration

NBMPHN will continue to collaborate with

- NBM LHD Mental Health Services - leading acute care mental health services and a key integration partner
- NBM Primary Care - GPs - supporting development of best care models of access to services
- NBM Allied Health Professionals - supporting development of best care models of access to services
- NBM Mental Health Allied Health Professionals - supporting development of best care models of access to services
- NBM Consumers - supporting the consumer perspective in relation to service delivery
- NBM Carers - supporting the carer perspective in relation to service delivery
- NBM Mental Health NGOs - supporting features of access and co-design



Activity Milestone Details/Duration

Activity Start Date

30/06/2021

Activity End Date

29/06/2026

Service Delivery Start Date

09/09/2021

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: No

Expression Of Interest (EOI): No

Other Approach (please provide details): Yes

Is this activity being co-designed?

Yes

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

No

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

No

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

No

Decommissioning

No

Decommissioning details?

na

Co-design or co-commissioning comments

na



MH-AMHCT - 17 - 2024-25 Hawkesbury Head to Health Satellite



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH-AMHCT

Activity Number *

17

Activity Title *

2024-25 Hawkesbury Head to Health Satellite

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 Head to Health Satellite Hawkesbury will aim to:

- respond to people experiencing crisis or significant distress
- provide a central point to connect people to other services in the region through offering information and advice about mental health service navigation and referral pathways for individuals and their carers and family
- provide in-house assessment using the initial assessment and referral (IAR) decision support tool to connect people with the most appropriate services and
- provide evidence based and evidence informed immediate and short to medium term episodes of care including utilisation of digital mental health platforms.

This will be achieved by:

- operating under the defined model of care and guiding principles
- delivering high quality, safe and effective mental health care in an accessible, supportive and welcoming environment
- promoting the service broadly in the local community
- supporting initial assessment referral and service navigation using the IAR-DST
- Increasing access to local community mental health services including drop in and after hours access
- strengthening multidisciplinary and interdisciplinary approaches including between acute and community based mental health and alcohol and other drug services

- fostering collaboration and integration with services, including increased access to digital resources and therapies; and
- supporting continuity of care through primary care service including general practice

Description of Activity *

The Head to Health Satellite Hawkesbury service transitioned from the previous Head to Health Pop-Up service on 1 August 2023. The Satellite began operations from its own premises in December 2023 and will continue to embed its services into the local community through

1. Offering a highly visible and accessible "no wrong door" entry point for adults and their families to access information and services designed to empower support and improve their psychological health and well being.
2. Providing access across extended hours to on the spot advice, support and care for immediate, short term up to medium term needs delivered by a multidisciplinary team health team providing discipline specific and interdisciplinary care including a trained peer support workforce, nursing and allied health without cost or prior appointment.
3. Providing a welcoming, compassionate and safe environment that is inclusive for all people accessing services or supports that are trauma-informed, person-centred and recovery-focused.
4. Providing intervention and support that reduces the need for emergency department attendances.
5. Utilising the Head to Health Initial Assessment and Referral Decision support tool (IAR-DST) within the initial assessment.
6. Working with the referral pathway through the National Head to Health 1800 Initial Assessment and Referral Intake phone service including the integration at a local level with the NBMPHN IAR Clinical intake service
7. Applying a stepped care approach to service navigation
8. Supporting people to connect to pathways of care through integration with longer term existing community mental health services where appropriate, local PHN commissioned services, or GP's and Local Health District funded services, as required.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment 2021/22 - 2023/24

Priorities

| Priority | Page reference |
|--|----------------|
| Address high rates of mental health disorder hospitalisations | 278 |
| Broaden the scope of early intervention services to enhance access for people at risk of and with mental illness | 286 |
| Address prevalence of diagnosed mental health disorders, including mild, moderate, and severe mental illness, and high prevalence of high or very high psychological distress among adults | 277 |



Activity Demographics

Target Population Cohort

People 18 years and older experiencing psychological distress or crisis who could benefit from services suitable to those assessed at IAR levels 3&4 living, working or studying in the Hawkesbury LGA. Or, individuals seeking connection with mental health service who would benefit from warm referral and no wrong door approach.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

No

| SA3 Name | SA3 Code |
|--------------------|----------|
| Hawkesbury | 11503 |
| Richmond - Windsor | 12404 |



Activity Consultation and Collaboration

Consultation

Stakeholder engagement and consultation activities continue to be planned to support local governance and to refine the service model of care to support quality improvement initiatives. This will be achieved through

- individuals and groups of people with lived experience
- community forums
- co-design activities.
- consumer feedback, both formal and informal
- committees that support operations and governance
- workshops
- surveys
- participation in sector related collaboration meetings and committees

Collaboration

Stakeholders include but are not limited to:

- consumers, carers including those with lived experience,
- mental health clinicians, including nurses, psychologists, psychiatrists, social workers
- mental health peer workers
- primary care, including GPs and allied health
- mental health community organisations and non-government organisations,
- Aboriginal and Torres Strait Islander community
- CALD community
- underserved and hard to reach groups including lesbian, gay, bisexual, transgender, intersex, or queer (LGBTIQ) communities
- and other relevant key stakeholders
- NBM LHD



Activity Milestone Details/Duration

Activity Start Date

06/08/2021

Activity End Date

29/06/2026

Service Delivery Start Date

01/08/2023

Service Delivery End Date

30/06/2026

Other Relevant Milestones

Premises secured April 2023 however, delays in fit out and council approvals etc. saw premises utilized for public access from December 2024 onwards.



Activity Commissioning

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

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

Is this activity being co-designed?

Yes

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

No

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

No

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

No

Decommissioning

No

Decommissioning details?

na

Co-design or co-commissioning comments

na



MH-AMHCT - 18 - 2024-25 Penrith Adult Mental Health Centre



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH-AMHCT

Activity Number *

18

Activity Title *

2024-25 Penrith Adult Mental Health Centre

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 Penrith Adult Mental Health Centre will aim to:

- respond to people experiencing crisis or significant distress
- provide a central point to connect people to other services in the region through offering information and advice about mental health service navigation and referral pathways for individuals and their carers and family
- provide in-house assessment using the initial assessment and referral (IAR) decision support tool to connect people with the most appropriate services and
- provide evidence based and evidence informed immediate and short to medium term episodes of care including utilisation of digital mental health platforms

This will be achieved by:

- operating under the defined model of care and guiding principles
- delivering high quality, safe and effective mental health care in an accessible, supportive and welcoming environment
- promoting the service broadly in the local community
- supporting initial assessment referral and service navigation using the IAR-DST
- Increasing access to local community mental health services including drop in and after hours access
- strengthening multidisciplinary and interdisciplinary approaches including between acute and community based mental health and alcohol and other drug services

- fostering collaboration and integration with services, including increased access to digital resources and therapies; and
- supporting continuity of care through primary care service including general practice

Description of Activity *

The Penrith Adult Mental Health Service will:

1. Offer a highly visible and accessible "no wrong door" entry point for adults and their families to access information and services designed to empower support and improve their psychological health and well being.
2. Provide access across extended hours to on the spot advice, support and care for immediate, short term up to medium term needs delivered by a multidisciplinary team health team providing discipline specific and interdisciplinary care including a trained peer support workforce, nursing and allied health without cost or prior appointment.
3. Provide a welcoming, compassionate and safe environment that is inclusive for all people accessing services or supports that are trauma-informed, person-centred and recovery-focused.
4. Provide intervention and support that reduces the need for emergency department attendances.
5. Utilise the Head to Health Initial Assessment and Referral Decision support tool (IAR-DST) within the initial assessment.
6. Work with the referral pathway through the National Head to Health 1800 Initial Assessment and Referral Intake phone service including the integration at a local level with the NBMPHN IAR Clinical intake service
7. Apply a stepped care approach to service navigation
8. Support people to connect to pathways of care through integration with longer term existing community mental health services where appropriate, local PHN commissioned services, or GP's and Local Health District funded services, as required.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment 2021/22 - 2023/24

Priorities

| Priority | Page reference |
|--|----------------|
| Address high rates of mental health disorder hospitalisations | 278 |
| Broaden the scope of early intervention services to enhance access for people at risk of and with mental illness | 286 |
| Address prevalence of diagnosed mental health disorders, including mild, moderate, and severe mental illness, and high prevalence of high or very high psychological distress among adults | 277 |



Activity Demographics

Target Population Cohort

Adults (over 18 years) who are experiencing psychological crisis or significant distress including those at heightened risk of suicide, their families and carers. All other people who require assistance in connecting to services by providing a central point of connection and warm referral pathways. No wrong door approach, stepped model of care.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

No

| SA3 Name | SA3 Code |
|----------|----------|
| Penrith | 12403 |



Activity Consultation and Collaboration

Consultation

Stakeholder engagement and consultation activities continue to be planned to support local governance and to refine the service model of care to support quality improvement initiatives. This will be achieved through

- individuals and groups of people with lived experience
- community forums
- co-design activities.
- consumer feedback, both formal and informal
- committees that support operations and governance
- workshops
- surveys
- participation in sector related collaboration meetings and committees

Collaboration

Stakeholders include but are not limited to:

- consumers, carers including those with lived experience,
- mental health clinicians, including nurses, psychologists, psychiatrists, social workers
- mental health peer workers
- primary care, including GPs and allied health
- mental health community organisations and non-government organisations,
- Aboriginal and Torres Strait Islander community
- CALD community
- underserved and hard to reach groups including lesbian, gay, bisexual, transgender, intersex, or queer (LGBTIQ) communities
- and other relevant key stakeholders
- NBM LHD



Activity Milestone Details/Duration

Activity Start Date

31/12/2020

Activity End Date

29/06/2026

Service Delivery Start Date

December 2021

Service Delivery End Date

30 June 2026

Other Relevant Milestones

Service implementation as planned will continue through this reporting cycle by the commissioned service provider Neami National.

This will include continued integration of care with the NBM LHD Safe Haven which is collocated within the Penrith Head to Health Service. The Safe Haven is a NSW Health Towards Zero Suicide initiative that provides a calm, culturally sensitive and non-clinical alternative to hospital emergency departments, for people experiencing distress or suicidal thoughts.



Activity Commissioning

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

Not Yet Known: No

Continuing Service Provider / Contract Extension: Yes

Direct Engagement: No

Open Tender: No

Expression Of Interest (EOI): No

Other Approach (please provide details): No

Is this activity being co-designed?

No

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

Yes

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

No

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

No

Decommissioning

No

Decommissioning details?

Co-design or co-commissioning comments

Extensive co-design was undertaken with the community to design the AMHC once the preferred provider was selected to ensure the design of the Centre and work flow matched consumer needs.



CHHP - 19 - 2024-25 Headspace Wait Time Reduction and Capital Works Program



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

CHHP

Activity Number *

19

Activity Title *

2024-25 Headspace Wait Time Reduction and Capital Works Program

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

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

Other Program Key Priority Area Description

Aim of Activity *

The headspace Demand Management and Enhancement program aims to identify existing headspace services with high wait times for clinical services. This program funds the development and implementation of activities and initiatives to assist in reducing these wait times. Funding for this initiative is provided under two streams (capital works funding and wait time reduction funding) to support the long-term sustainability of the headspace program and to improve the health outcomes for young people aged 12 to 25 with, or at risk of, mental illness accessing headspace services and their families.

Description of Activity *

1. Wait Time Reduction funding (headspace Penrith Workforce Expansion, headspace Katoomba Workforce Expansion, Penrith e-Mental Health Clinic, headspace Lithgow Workforce Expansion) will assist in the provision of services and strategies which specifically focus on increasing access to headspace services and reducing wait times for young people. This will include:
- Promotion of early help seeking by people 12-25 years old;
 - Increasing the availability and facilitating access to evidence-based treatment for young people with or at risk of mental health illness;
 - Enhancing and expanding existing headspace Penrith, headspace Katoomba and headspace Lithgow services;
 - Enable better access to primary care services including allied health services for young people;
 - Providing a stepped care model for young people requiring additional support;
 - Encouraging seamless referrals between programs at the headspace Penrith Centre and headspace Katoomba Centre, including

the e-mental health clinic at headspace Penrith, allied health services, the headspace Youth Early Psychosis Program and the Youth Enhanced Support Service;

- Encouraging seamless referrals between programs at the headspace Lithgow Centre including allied health services, and the Youth Enhanced Support Service;
- Minimising existing access barriers to headspace Lithgow services by expanding referral pathways through outreach and group programs into high schools; and
- Ensuring the provision of youth friendly, timely and accessible services.

2. Capital Works funding which includes funding to make enhancements to modernise the headspace premises through capital works activities.

Capital Works headspace Katoomba:

- Refurbishment and fit out of the headspace Katoomba site to improve storage, plumbing, privacy, security, and comfort of staff and young people.
- Refurbishment and fit out of the headspace Katoomba site to provide a youth focused multi-purpose weather appropriate outdoor structure or to assist with paying for rent at external youth friendly venues to provide regular space for group and community events; and
- Ensure the provision of a youth friendly focused service.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment 2021/22 - 2023/24

Priorities

| Priority | Page reference |
|--|----------------|
| Address the need for culturally appropriate Services | 302 |
| Broaden the scope of early intervention services to enhance access for people at risk of and with mental illness | 286 |
| Address high burden of mental health disorders among children and youth / inadequate service provision in psychiatry and mental health for children and youth | 279 |
| Address high proportion of young people have contemplated suicide or developed a suicide plan, and high rate of intentional self-harm hospitalisations among young people | 272 |
| Recognise of 'at-risk' populations and communities in service planning including: <ul style="list-style-type: none"> • Young people 25-34 yrs • LGBTIQ+ communities • Unemployed males • Older males • Persons separated from their relat | 274 |



Activity Demographics

Target Population Cohort

Young people aged 12 to 15 years accessing mental health services provided through a headspace service.

In Scope AOD Treatment Type ***Indigenous Specific ***

No

Indigenous Specific Comments**Coverage****Whole Region**

No

| SA3 Name | SA3 Code |
|------------------|----------|
| Penrith | 12403 |
| Lithgow - Mudgee | 10303 |
| Blue Mountains | 12401 |

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

NBMPHN partnered with Uniting, the lead agency for headspace Penrith and headspace Katoomba, and Marathon Health for headspace Lithgow. There have been ongoing consultations as needed with key stakeholders including LHD Child and Youth Mental Health Services, young consumers, local high schools, local youth services, local council and allied health providers to better understand the profile of need of young people and tailor the various demand management projects to meet these needs.

Key stakeholders sit on and have representation on the consortium for headspace Penrith, Katoomba and Bathurst (parent centre for headspace Lithgow), which provide advice and in-kind services to the centre. Local young people are also active members of the Youth Advisory Committee and advise the headspace centres from a youth perspective, as well as assist in recruitment, community events and guiding promotional and key materials at the headspace centre. Similarly, friends and families of young people have an advisory committee that functions in the same way as the youth advisory committee at each centre.

Collaboration

NBMPHN will continue working in close collaboration with Uniting, the lead agency of headspace Penrith and headspace Katoomba, and Marathon Health, the lead agency of headspace Lithgow, to support all demand management funding projects. Other important key stakeholders such as LHD Child & Youth Mental Health Services, young people, local high schools, local youth services and allied mental health providers are key stakeholders who are represented on the headspace Penrith, Katoomba and Bathurst (parent centre for headspace Lithgow) consortiums, Youth Advisory Committees and Friends and Family committees. These key stakeholders have been and will be collaborated with as needed for all demand management funding activities.

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

29/06/2021

Activity End Date

29/06/2026

Service Delivery Start Date

1 July 2020

Service Delivery End Date

30 June 2026

Other Relevant Milestones

A varied contract has been executed with Marathon Health to provide an extension for the Lithgow Lounge activity in consultation with the DoHAC until 30 June 2024. These capital works are being finalised by the end of May 2024.



Activity Commissioning

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

Not Yet Known: No

Continuing Service Provider / Contract Extension: Yes

Direct Engagement: No

Open Tender: No

Expression Of Interest (EOI): No

Other Approach (please provide details): No

Is this activity being co-designed?

No

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

Yes

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

No

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

No

Decommissioning

No

Decommissioning details?

Co-design or co-commissioning comments



MH - 20 - 2024-25 Aboriginal Mental Health & AOD Dual Diagnosis Services



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

20

Activity Title *

2024-25 Aboriginal Mental Health & AOD Dual Diagnosis Services

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 *

This activity aims to broadly to improve access to joined up, integrated, culturally appropriate and safe mental health services that holistically meet the needs of Aboriginal and Torres Strait Islander people.

Locally, this activity will deliver mental health care through an integrated approach with drug and alcohol services to address co-morbidity of mental health needs and social supports in the NBM Aboriginal and Torres Strait Islander population. The activity will also aim to capacity build local service providers in the NBM region, through the co-location of specialist AOD and Mental Health Indigenous service providers who service the greater Western Sydney region. Services. The needs will be met through:

- An adult day rehabilitation services based in Penrith.
- The Nepean Linker Project to support with improve assessment, coordination, and continuity of care for Aboriginal people with substance use and co-occurring mental health needs across NBM region.
- Specialist Aboriginal and Torres Strait Islander early intervention and case management services across the NBM region.

Description of Activity *

This program will deliver:

- Therapeutic Crisis Intervention (TCI) case-management model
- Comprehensive clinical assessment
- Development and implementation of individual treatment plans which must be received at regular intervals and at a minimum every 3 months

- Support for clients in articulating treatment goals and provide assistance in achieving them (e.g. education, employment, health, housing, medical, parenting etc).
- Counselling and psychological therapy includes multi-systemic family therapy that is delivered as part of trauma-informed care.
- Assertively assist clients who need support to access services to reduce their substance use, avoid relapse and manage psychosocial risks and mental health issues
- Advocacy and assist for clients
- Providing mentoring for young Aboriginal people to re-engage with their community
- Working collaboratively to ensure seamless access and integration of clients to relevant services.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment 2021/22 - 2023/24

Priorities

| Priority | Page reference |
|--|----------------|
| Address the need for culturally appropriate Services | 302 |
| Increase culturally secure service provision through linking mainstream and Aboriginal community-controlled services | 301 |
| Identify local research needs that will support future service planning | 305 |
| Support Capacity building AOD services: dual diagnosis (mental health and AOD disorders). | 298 |
| Map local Aboriginal specific services | 304 |
| Address support required for complex AOD clients | 304 |



Activity Demographics

Target Population Cohort

Aboriginal and Torres Strait Islander people at risk of problematic substance use including those with suicide ideation and co-existing mental health conditions residing in NBM region, and those identified at risk and requiring case coordination following attendance at early intervention program/s and or GP/community welfare consultations

In Scope AOD Treatment Type *

Indigenous Specific *

Yes

Indigenous Specific Comments

Ongoing through established regional committees and forums.

Coverage

Whole Region

Yes

| SA3 Name | SA3 Code |
|----------------------------|----------|
| Blue Mountains - South | 12402 |
| Fairfield | 12702 |
| Penrith | 12403 |
| Dural - Wisemans Ferry | 11502 |
| Rouse Hill - McGraths Hill | 11504 |
| Lithgow - Mudgee | 10303 |
| Bathurst | 10301 |
| St Marys | 12405 |
| Hawkesbury | 11503 |
| Richmond - Windsor | 12404 |
| Blue Mountains | 12401 |



Activity Consultation and Collaboration

Consultation

Stakeholder engagement and consultation activities continue to be planned to support local governance and to refine the service model of care to support quality improvement initiatives. This will be achieved through

- individuals and groups of people with lived experience
- community forums
- co-design activities.
- consumer feedback, both formal and informal
- committees that support operations and governance
- workshops
- surveys
- participation in sector related collaboration meetings and committees

Collaboration

Stakeholders include but are not limited to:

- Aboriginal and Torres Strait Islander community
- consumers, carers including those with lived experience,
- AOD clinicians, including nurses, social workers
- AOD health peer workers
- primary care, including GPs and allied health
- AOD community organisations and non-government organisations,
- CALD community
- underserved and hard to reach groups including lesbian, gay, bisexual, transgender, intersex, or queer (LGBTIQ) communities
- and other relevant key stakeholders
- NBM LHD



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2026

Service Delivery Start Date

01 July 2019

Service Delivery End Date

30 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?

No

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

Yes

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

No

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

No

Decommissioning

No

Decommissioning details?

n/a

Co-design or co-commissioning comments

n/a

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

Yes