

North Coast - Primary Mental Health Care 2023-24 - 2027-28 Activity Summary View



MH-CTP - 1 - North Coast Creative Therapies Pilot



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH-CTP

Activity Number *

1

Activity Title *

North Coast Creative Therapies Pilot

Existing, Modified or New Activity *

New Activity



Activity Priorities and Description

Program Key Priority Area *

Mental Health

Aim of Activity *

The aim of this activity is to improve access to creative arts and music therapy for people with moderate to severe mental health challenges. It will explore the potential impact of these therapies and generate early evidence—both qualitative and quantitative—on their demand and effectiveness in the Australian context.

Description of Activity *

Healthy North Coast (HNC) will deliver the Creative Therapies Pilot across the North Coast region, with the aim of providing participants with a therapeutic option to facilitate emotional expression and develop regulation skills in a non-judgemental and safe environment, enhancing clinical and functional improvement outcomes.

The North Coast Creative Therapies Program will have two distinct service models, targeting interventions to specific cohorts, to support broader evaluation efficacy testing, and to inform future funding direction.

The two distinct models are:

1. Long term engagement with psychological therapies, with no significant improvement
2. Aboriginal-led model for people experiencing low social and emotional wellbeing.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment 2024-25 - 2026-27

Priorities

Priority	Page reference
Improve mental health outcomes for consumers in the 'missing middle', who require higher level of care than available in primary mental health care services, but lower than tertiary level care	143
Improve access to primary mental healthcare services	143
Enhance access to mental health services and reduce wait times, particularly for psychological therapies, to alleviate mental health issues	142



Activity Demographics

Target Population Cohort

People in long term engagement with psychological therapies, with no significant improvement.
Aboriginal and Torres Strait Islander people experiencing low social and emotional wellbeing.

Indigenous Specific *

Yes

Indigenous Specific Comments

Service model two is directly delivering services through ANZACATA or AMTA accredited creative therapies providers to Aboriginal and/or Torres Strait Islander people engaged in SEWB programs at the 6 Aboriginal Community Controlled Health Organisations across our region. The pilot is co-design with our ACCHO partners, to ensure the service is tailored to local needs.

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

HNC will consult with AMTA and ANZACATA providers across the region, ensuring service model sits within preferred mode of delivery and aligns with centralised Medicare Mental Health Phone Service referral pathways.

Collaboration

Internal stakeholders, which includes program managers, mental health professionals, and other staff responsible for service delivery. This will ensure that everyone involved in the program is aligned.
HNC will working collaboratively with our leadership team and the Department to ensure adequate support and resources are provided.
External stakeholders will include people with lived experience, primary care providers, our partners (LHDs and ACCHOs) and NGOs who deliver a range of mental health, suicide prevention, psychosocial supports and drug and alcohol treatment services to the community, and in particular to the target population of people living with moderate to severe mental ill-health.



Activity Milestone Details/Duration

Activity Start Date

01/07/2025

Activity End Date

30/06/2027

Service Delivery Start Date

01/09/2025

Service Delivery End Date

30/06/2027



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



MH-H2H - 1 - Head to Health Intake and Assessment Phone Service



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH-H2H

Activity Number *

1

Activity Title *

Head to Health Intake and Assessment Phone Service

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Mental Health Priority Area 7: Stepped care approach

Aim of Activity *

Establish and operate an intake and assessment phone service as an entry point for accessing mental health services in our region. Healthy North Coast will act as the commissioning lead agency for the Intake and Assessment phone service and will work collaboratively with 8 other NSW based PHNs to deliver the service, in accordance with the service model and guidance documents provided by the Department.

Description of Activity *

Healthy North Coast will act as the lead site to commission a provider to deliver the Head to Health IA Hub via a centralised telephony hub, known as the Future State model, on behalf of eight NSW PHNs and the IA Hub will remain the single point of contact for consumers moving through the service. In accordance with the Head to Health IAR national service Model, the H2H IAR process is intended to complement, not replace or duplicate, other intake systems already provided in the community, and the Provider will adopt the following approach:

- a. Person-centred care based on need.
- b. Acting locally – a regional approach to service planning and integration.
- c. Delivering services within a stepped care approach to better target services to meet needs.
- d. Effective early intervention across the lifespan and across the care continuum – shifting the balance to provide the right care when it is needed.
- e. Strengthening state and national collaboration – facilitating systemic change at all levels and promoting the partnerships needed to secure enduring reforms.

The Provider will deliver the H2H IAR in accordance with the National PHN Guidance Initial Assessment and Referral for Mental Healthcare version 1.05 (2021); the NSW Intake Assessment and Referral Model of Care; the National Standards for Mental Health Services 2010; the National Practice Standards for the Mental Health Workforce 2013; and the National Framework for Recovery Oriented Mental Health Services 2013.

The intake and assessment phone service provides a central point to connect people to other services in the following PHN regions:

- North Coast
- Central Eastern Sydney
- Coordinare
- Hunter New England Central Coast
- Murrumbidgee
- South Western Sydney
- Western NSW
- Went West
- North Sydney

As per the Head to Health IAR Future State Model, Healthy North Coast will establish a Referral Spoke Service within the North Coast region to integrate with the centralised Head to Health IA Hub service and offer seamless localised care pathways for consumers. The Referral Spoke service will maintain up to date information on local services, eligibility, wait times, level of care information and service requirements, to support connection to the right care by the right team and at the right time.

The Referral Spoke Model will:

- be adapted to localised need and community based.
- Staff will be based in the region, with a Clinical Lead and Referral Coordinator employed by Healthy North Coast to build service directory information and deeply understand existing region-based challenges and the service landscape to support the provision of effective referrals.
- Maintain recovery-oriented practice by providing IA hubs with comprehensive information and advice on care pathways to enable consumers to have choice about their care and make informed decisions on the best pathways for care.
- Engagement in collaborative continuous improvement with the IA hub.
- The Referral Spoke will align with the principles of the Gayaa Dhuwi (proud spirit) declaration.
- The Referral Spoke and IA Hub will adhere to appropriate clinical governance, safety and quality frameworks and provide appropriate ongoing support, supervision, and training for all staff.

New Activity

Healthy North Coast and Country to Coast QLD are delivering the Head to Health IAR National Communications Activities, by working collaboratively with the Department, the PHN network, to further increase the Australian community's awareness, use and adoption of Head to Health services.

Communication activities are aimed at building awareness of Head to Health services, with a particular focus on the following population groups:

- GPs, community-based clinicians and health professions
- Peak bodies – Lifeline, Beyond Blue etc.
- State and Territory based health services
- Adults Australians aged over 25 years, with moderate to severe mental health concerns
- Populations located within the catchment region of established or establishing Head to Health centres/satellites
- priority populations including:
 - o Aboriginal and Torres Strait Islander people
 - o Culturally and Linguistically Diverse (CALD) people
 - o family, carers and partners of adults with a mental health concern

Activities will include:

- working with the department to develop and finalise targeted Factsheets.
- delivering a national media buy (social media, radio, physical advertisement etc – as agreed with the department)
- developing materials for PHNs (this may include updating the departments current stakeholder kits, community resource e-kits and social media materials and other resources).

Needs Assessment Priorities *

Needs Assessment

Needs Assessment 2024-25 - 2026-27

Priorities

Priority	Page reference
Improve timely access for people experiencing mental illness and psychological distress to consistent, quality community-based mental health support that is tailored to their needs	148
Deliver mental health services by the appropriate modality of care and mode of contact to meet the needs of the client	148
Improve health literacy and wayfinding to facilitate access to the right services at the right time and engagement in preventative health behaviours	146
Improve access to primary mental healthcare services	143
Enhance the understanding of telehealth services for people in the North Coast	142



Activity Demographics

Target Population Cohort

Whole population

Indigenous Specific *

No

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

Healthy North Coast works collaboratively with key stakeholders from planning to implementation and monitoring of commissioned activity.

Collaboration

Healthy North Coast will work collaboratively with the commissioned service provider, Northern NSW and Mid North Coast Local Health Districts and the 8 other NSW regions delivering services under this funding.



Activity Milestone Details/Duration

Activity Start Date

01/07/2022

Activity End Date

30/06/2026

Service Delivery Start Date

1/07/2022

Service Delivery End Date

30/06/2026



Activity Commissioning

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

Not Yet Known: Yes

Continuing Service Provider / Contract Extension: Yes

Direct Engagement: Yes

Open Tender: 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?

Yes

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

Yes

Decommissioning

No

Co-design or co-commissioning comments

The Future State model was collaboratively designed by NSW PHNs in 2022.

Healthy North Coast is working directly with the commissioned provider to ensure services meet the needs of all invested parties and care is received that is of high quality and aligned to service model specifications included in the Commonwealth Head to

Health Service Model guidance documents.

Consumers provide feedback through consumer experience surveys.



MH - 1 - Low Intensity Mental Health Services



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

1

Activity Title *

Low Intensity Mental Health Services

Existing, Modified or New Activity *

Modified



Activity Priorities and Description

Program Key Priority Area *

Mental Health Priority Area 1: Low intensity mental health services

Aim of Activity *

The Activity aims to enable people (aged 16 years and over) experiencing low levels of anxiety and or depression to access counselling and support appropriate to their level of need.

Description of Activity *

The Primary Mental Health Program will be delivered as a multidisciplinary, person centred, no-wrong-door hub & spoke model of care. The service will provide mental health and community health services to the Healthy North Coast Limited (HNCL) region addressing the social and cultural determinants of health along the stepped model of care.

The service will ensure a streamlined approach to phone and internet-based enquiries, ensuring support to link to the IAR service (and other Intake and access teams e.g. tertiary mental health, headspace) therefore facilitating region-wide coordination of need. The Initial Assessment and identification of need will be guided by the Intake Assessment and Referral Decision Support Tool which all staff conducting assessments will be trained in providing. Where possible, the flow from needs and goals identification to assessment will be an on-the-spot warm transition, either to hub partners, or to in-house Primary Mental Health Program partners, using a standardised cross-program assessment. Where on-the-spot assessment is not able to commence in an integrated continuous fashion, the client will leave the hub with their assessment session booked at the indicated service and a warm referral completed.

The Primary Mental Health Program will adopt a cross-program goal setting process that recognises and empowers individuals as experts in their own experience. This is a process through which staff and clients work together, to collaboratively set goals, establish priorities and develop strategies to achieve positive and meaningful outcomes for clients.

Low Intensity Mental Health Service

Description of Service

Low Intensity mental health services aim to increase overall community access to evidence based psychological intervention for people with, or at risk of, mild mental illness who do not require the traditional services provided through existing primary mental health care intervention pathways.

The purpose of this activity is to increase access to low intensity psychological interventions for people in North Coast communities to support their positive mental health where a low intensity service is deemed to be appropriate for their level of need.

Model of Care

Clients will be supported to reach their recovery goals and successfully maintain or achieve their independence from continued support services.

The Provider will deliver the following evidence based interventions:

- Psychoeducation
- Cognitive Behavioural Therapy
- Relaxation Strategies
- Skills Training
- Interpersonal Therapy
- Narrative Therapy

Needs Assessment Priorities *

Needs Assessment

Needs Assessment 2024-25 - 2026-27

Priorities

Priority	Page reference
Improve timely access for people experiencing mental illness and psychological distress to consistent, quality community-based mental health support that is tailored to their needs	148
Deliver mental health services by the appropriate modality of care and mode of contact to meet the needs of the client	148
Explore opportunities to support people experiencing anxiety	149



Activity Demographics

Target Population Cohort

People (aged 16 years and over) experiencing low levels of anxiety and or depression.

Indigenous Specific *

No

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

The approach to service models and subsequent commissioning activity was led by the outcomes of the ideas and insights of stakeholders, including people with lived experience and service providers across the region.

Collaboration

The commissioned services will continue to collaborate with a wide range of health and social service providers to improve the care and coordination of services to meet client needs.



Activity Milestone Details/Duration

Activity Start Date

01/01/2019

Activity End Date

30/06/2026

Service Delivery Start Date

July 2019

Service Delivery End Date

30/06/2026



Activity Commissioning

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

Not Yet Known: Yes

Continuing Service Provider / Contract Extension: No

Direct Engagement: No

Open Tender: Yes

Expression Of Interest (EOI): No

Other Approach (please provide details): No

Is this activity being co-designed?

Yes

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

Yes

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

Yes

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

No

Decommissioning

Yes

Decommissioning details?

Services will end in line with the implementation of the National Early Intervention Service. HNC is working collaboratively with the provider to transition services through the Medicare Mental Health service, which is fully centralised in the North Coast region.

Co-design or co-commissioning comments

Through a series of participatory designed workshops, Healthy North Coast listened to the needs of our community and considered alternative ways of addressing low intensity mental health needs.

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

Yes



MH - 2 - Child and Young People's Mental Health



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

2

Activity Title *

Child and Young People's Mental Health

Existing, Modified or New Activity *

Modified



Activity Priorities and Description

Program Key Priority Area *

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

Aim of Activity *

The Activity aims to increase access to the age-appropriate psychological services for young people (aged 25 years and under), living in underserved areas and from at risk groups, experiencing moderate levels of mental health issues.

Description of Activity *

The services commissioned under this Activity are designed to help young people address the mental health and emotional well-being issues impacting on their immediate and longer-term health, education and/or employment outcomes.

Services:

- are delivered in primary care settings within a stepped care framework that supports young people to access higher and or lower levels of psychological support as their needs change;
- feature service integration, co-location and active referral pathways to the range of physical health and social services needed to make a difference to the lives of young people;
- delivered in both individual and group sessions as appropriate; and
- use a holistic approach that acknowledges the role of home, school and or work environments in achieving and maintaining mental health and emotional resilience in young people.

Existing Activity

2.1 Monitor and evaluate contracts for delivery of the Lismore, Tweed, Grafton, Coffs Harbour, Kempsey and Port Macquarie headspace centres

2.2 Work with Lismore, Tweed, Coffs Harbour, Kempsey and Port Macquarie headspace centres for the provision of expansion models of coordinated youth mental health to smaller towns on the North Coast

2.3 Develop and implement solutions and/or services to improve outcomes for children (0-11) and young people (12-25) with (or at risk of) severe mental illness.

Modified Activity as at 30 June 2023 for Youth Severe and Complex

The Primary Mental Health Program will be delivered as a multidisciplinary, person centred, no-wrong-door hub & spoke model of care. The service will provide mental health and community health services to the Healthy North Coast Limited (HNCL) region addressing the social and cultural determinants of health along the stepped model of care.

The service will ensure a streamlined approach to phone and internet-based enquiries, ensuring warm linkages to the IAR service (and other Intake and access teams e.g. tertiary mental health, headspace) therefore facilitating region-wide coordination of need. The Initial Assessment and identification of need will be guided by the Intake Assessment and Referral Decision Support Tool which all staff conducting assessments will be trained in providing. Where possible, the flow from needs and goals identification to assessment will be an on-the-spot warm transition, either to hub partners, or to in-house Primary Mental Health Program partners, using a standardised cross-program assessment. Where on-the-spot assessment is not able to commence in an integrated continuous fashion, the client will leave the hub with their assessment session booked at the indicated service and a warm referral completed.

The Primary Mental Health Program will adopt a cross-program goal setting process that recognises and empowers individuals as experts in their own experience. This is a process through which staff and clients work together, to collaboratively set goals, establish priorities and develop strategies to achieve positive and meaningful outcomes for clients.

Young Person Program

Provision of case management, care coordination, psychological therapy and group work to young people and their natural supports and a flexible and goal-directed service, with a focus on understanding and improving young people's physical and mental health as well as their functional recovery.

The Provider will deliver therapeutic interventions and programs that adopt techniques for emotional regulation, impulse control and education on interpersonal relationships. Evidence-based interventions such as Dialectical Behavioural Therapy (DBT), Cognitive Behavioural Therapy (CBT) and Resilience and Emotional Intelligence Skills Training will be provided individually and in a group setting.

Model of Care

The service will target 12–18-year-olds experiencing severe mental health challenges who require a step up from headspace services but are not acute enough for tertiary care.

All services are to offer face-to-face, video and phone supported services with the capacity for clients to have a choice on the preferred modality where possible.

The service model will incorporate clinical care coordination from Peer Workers as well as access to mental health clinicians, case managers and psychiatry (via in-reach or telehealth).

12.3.2 Referrals and Eligibility

Young people aged 12-18 years who are triaged as experiencing severe and complex mental health issues. Young people can also receive care and support through this program if they are experiencing the challenges of alcohol and other drugs misuse.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment 2024-25 – 2026-27

Priorities

Priority	Page reference
Deliver mental health services by the appropriate modality of care and mode of contact to meet the needs of the client	148
Reduce the rate of major depression and anxiety disorders for people aged 12-17 in the North Coast, particularly in Tweed Valley, Kempsey-	149

Nambucca, Richmond Valley-Hinterland and Clarence Valley SA3s	
Improve mental health outcomes for consumers in the 'missing middle', who require higher level of care than available in primary mental health care services, but lower than tertiary level care	143



Activity Demographics

Target Population Cohort

Children (aged 4-11 years) and young people (aged 12-25 years)

Indigenous Specific *

No

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

The approach to service models and subsequent commissioning activity was led by the outcomes of the ideas and insights of stakeholders, including people with lived experience and service providers across the region.

Collaboration

The commissioned services will continue to collaborate with a wide range of health and social service providers to improve the care and coordination of services to meet client needs.



Activity Milestone Details/Duration

Activity Start Date

01/07/2019

Activity End Date

30/06/2028

Service Delivery Start Date

July 2019

Service Delivery End Date

June 2028



Activity Commissioning

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

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

Is this activity being co-designed?

Yes

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

No

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

No

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

No

Decommissioning

No

Co-design or co-commissioning comments

Through a series of participatory designed workshops, Healthy North Coast listened to the needs of our community and considered alternative ways of addressing mental health needs across the stepped care continuum.

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

Yes



MH - 3 - Psychological therapies for under-serviced groups



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

3

Activity Title *

Psychological therapies for under-serviced groups

Existing, Modified or New Activity *

Modified



Activity Priorities and Description

Program Key Priority Area *

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

Aim of Activity *

The Activity aims to increase timely access to evidence-based psychological therapies for members of the target populations who have been assessed as having mild to moderate levels of mental illness.

Description of Activity *Modified Activity

The Primary Mental Health Program will be delivered as a multidisciplinary, person centred, no-wrong-door hub & spoke model of care. The service will provide mental health and community health services to the Healthy North Coast Limited (HNCL) region addressing the social and cultural determinants of health along the stepped model of care.

The service will ensure a streamlined approach to phone and internet-based enquiries, ensuring warm linkages to the IAR service (and other Intake and access teams e.g. tertiary mental health, headspace) therefore facilitating region-wide coordination of need. The Initial Assessment and identification of need will be guided by the Intake Assessment and Referral Decision Support Tool which all staff conducting assessments will be trained in providing. Where possible, the flow from needs and goals identification to assessment will be an on-the-spot warm transition, either to hub partners, or to in-house Primary Mental Health Program partners, using a standardised cross-program assessment. Where on-the-spot assessment is not able to commence in an integrated continuous fashion, the client will leave the hub with their assessment session booked at the indicated service and a warm referral completed.

The Primary Mental Health Program will adopt a cross-program goal setting process that recognises and empowers individuals as experts in their own experience. This is a process through which staff and clients work together, to collaboratively set goals, establish priorities and develop strategies to achieve positive and meaningful outcomes for clients.

Healthy Minds Program is:

The Provider will deliver the Healthy Minds Program, to enable access to non-crisis, short-term psychological therapies for people experiencing mild to moderate mental illness or suicidal ideation residing in the North Coast. The program is delivered in accordance with the Primary Health Network Guidelines for Primary Mental Health Care Psychological Therapies provided by mental health professionals to underserved groups. The program is delivered as part of the Stepped Model of Care and offers targeted psychological therapy sessions.

The Provider will contract the existing Healthy Minds workforce.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment 2024-25 – 2026-27

Priorities

Priority	Page reference
Support PHN commissioned mental health services in the North Coast, particularly those in Port Macquarie-Hastings, Lismore and Byron LGAs	144
Improve access to primary mental health care services to reduce mental health-related presentations to EDs and hospitalisations, particularly in Kempsey-Nambucca SA3	143
Reduce psychological distress for people in the North Coast to improve mental health wellbeing	143
Enhance access to mental health services and reduce wait times, particularly for psychological therapies, to alleviate mental health issues	142



Activity Demographics

Target Population Cohort

- People experiencing, or at risk, of homelessness;
- People from culturally and linguistically diverse (CALD) backgrounds;
- Aboriginal and Torres Strait Islander peoples;
- Children up to the age of 12 years;
- People at risk of suicide or who have attempted suicide;
- Perinatal peri-natal parents (from 20 week pre-birth to 1 year post birth);
- People in drought impacted areas;
- People in bushfire impacted areas;
- People in flood impacted areas;
- People who identify as Lesbian, Gay, Bisexual, Transgender, Intersex or Queer; and
- People with, or at risk of, mental illness living in Residential Aged Care Facilities.

Indigenous Specific *

No

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

The ongoing development and implementation of psychological services under this Activity are informed through active engagement of consumers, carers, primary allied mental health providers, Aboriginal Medical Services, CALD community leaders, Paediatricians, local Clinical Councils, and senior management of residential aged care facilities.

Collaboration

Referring Agencies all centralised via the Medicare Mental Health phone service, include:

- General Practitioners
- Paediatricians
- Representatives of the Department of Education
- headspace Centres Aboriginal Controlled Community Health Organisations
- Residential Aged Care Providers – referring residents with, or at risk, of moderate mental illness
- Emergency Departments and Community Mental Health providers
- Acute Inpatient Mental Health Services
- Older Persons Mental Health Services



Activity Milestone Details/Duration

Activity Start Date

01/07/2019

Activity End Date

30/06/2027

Service Delivery Start Date

July 2019

Service Delivery End Date

30/06/2027



Activity Commissioning

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

Not Yet Known: No

Continuing Service Provider / Contract Extension: No

Direct Engagement: No

Open Tender: Yes

Expression Of Interest (EOI): No

Other Approach (please provide details): No

Is this activity being co-designed?

Yes

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

Yes

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

No

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

No

Decommissioning

No

Co-design or co-commissioning comments

Through a series of participatory designed workshops, Healthy North Coast listened to the needs of our community and considered alternative ways of addressing mental health needs across the stepped care continuum.

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

Yes



MH - 4 - Primary 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 *

4

Activity Title *

Primary mental health care services for people with severe and complex mental illness

Existing, Modified or New Activity *

Modified



Activity Priorities and Description

Program Key Priority Area *

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

Aim of Activity *

The Activity aims to provide clinical and non-clinical care coordination and advocacy for people diagnosed with severe and complex mental illness.

Description of Activity *

The Primary Mental Health Program will be delivered as a multidisciplinary, person centred, no-wrong-door hub & spoke model of care. The service will provide mental health and community health services to the Healthy North Coast Limited (HNCL) region addressing the social and cultural determinants of health along the stepped model of care.

The service will ensure a streamlined approach to phone and internet-based enquiries, ensuring warm linkages to the IAR service (and other Intake and access teams e.g., tertiary mental health, headspace) therefore facilitating region-wide coordination of need. The Initial Assessment and identification of need will be guided by the Intake Assessment and Referral Decision Support Tool which all staff conducting assessments will be trained in providing. Where possible, the flow from needs and goals identification to assessment will be an on-the-spot warm transition, either to hub partners, or to in-house Primary Mental Health Program partners, using a standardised cross-program assessment. Where on-the-spot assessment is not able to commence in an integrated continuous fashion, the client will leave the hub with their assessment session booked at the indicated service and a warm referral completed.

The Primary Mental Health Program will adopt a cross-program goal setting process that recognises and empowers individuals as experts in their own experience. This is a process through which staff and clients work together, to collaboratively set goals, establish priorities and develop strategies to achieve positive and meaningful outcomes for clients.

[Mental Health Nurse Program](#)

The Provider will deliver the Mental Health Nurse Program, which provides person-centred clinical and non-clinical mental health services and advocacy for people living within the North Coast community who have severe and complex mental health challenges and are under the care of community-based GPs and psychiatrists. The Mental Health Nurse Program will be delivered by Credentialed Mental Health Nurses.

Services may include the provision of clinical care coordination; the review and monitoring of mental and physical health conditions; the monitoring of medications, and ongoing liaison with other specialist health services such as drug and alcohol services.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment 2024-25 – 2026-27

Priorities

Priority	Page reference
Improve timely access for people experiencing mental illness and psychological distress to consistent, quality community-based mental health support that is tailored to their needs	148
Improve mental health outcomes for consumers in the 'missing middle', who require higher level of care than available in primary mental health care services, but lower than tertiary level care	143
Improve access to primary mental healthcare services	143
Enhance access to mental health services and reduce wait times, particularly for psychological therapies, to alleviate mental health issues	142



Activity Demographics

Target Population Cohort

- People with persistent mental health conditions
- People with episodic illness whose illness may impact upon, and be impacted by, complex social or physical health factors.

Indigenous Specific *

No

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

The approach to service models and subsequent commissioning activity was led by the outcomes of the ideas and insights of stakeholders, including people with lived experience and service providers across the region.

Collaboration

The commissioned services will continue to collaborate with a wide range of health and social service providers to improve the care and coordination of services to meet client needs.

Referring partners will include:

- Head to Health IAR
- GPs and psychiatrists
- Acute mental health service providers
- Community-based mental health providers



Activity Milestone Details/Duration

Activity Start Date

01/07/2019

Activity End Date

31/03/2027

Service Delivery Start Date

July 2019

Service Delivery End Date

30/06/2027



Activity Commissioning

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

Not Yet Known: Yes

Continuing Service Provider / Contract Extension: No

Direct Engagement: No

Open Tender: No

Expression Of Interest (EOI): No

Other Approach (please provide details): No

Is this activity being co-designed?

Yes

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

No

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

Yes

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

Yes

Decommissioning

No

Co-design or co-commissioning comments

Through a series of participatory designed workshops, Healthy North Coast listened to the needs of our community and considered alternative ways of addressing mental health needs across the stepped care continuum.

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

Yes



MH - 5 - Implement community-based suicide prevention plans



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

5

Activity Title *

Implement community-based suicide prevention plans

Existing, Modified or New Activity *

Modified



Activity Priorities and Description

Program Key Priority Area *

Mental Health Priority Area 5: Community based suicide prevention activities

Aim of Activity *

The Activity aims to support communities, identified as having high prevalence of suicide, to mobilise and coordinate community drive system changes to reduce the rate of suicide and self-harm among vulnerable and at-risk community members.

Description of Activity *

The Primary Mental Health Program is being delivered as a multidisciplinary, person centred, no-wrong-door hub & spoke model of care. The service provides mental health and community health services to the Healthy North Coast Limited (HNCL) region addressing the social and cultural determinants of health along the stepped model of care.

The service will ensure a streamlined approach to phone and internet-based enquiries, ensuring warm linkages to the IAR service (and other Intake and access teams e.g. tertiary mental health, headspace) therefore facilitating region-wide coordination of need. The Initial Assessment and identification of need will be guided by the Intake Assessment and Referral Decision Support Tool which all staff conducting assessments will be trained in providing. Where possible, the flow from needs and goals identification to assessment will be an on-the-spot warm transition, either to hub partners, or to in-house Primary Mental Health Program partners, using a standardised cross-program assessment. Where on-the-spot assessment is not able to commence in an integrated continuous fashion, the client will leave the hub with their assessment session booked at the indicated service and a warm referral completed.

The Primary Mental Health Program will adopt a cross-program goal setting process that recognises and empowers individuals as experts in their own experience. This is a process through which staff and clients work together, to collaboratively set goals, establish priorities and develop strategies to achieve positive and meaningful outcomes for clients.

[The Way Back Support Service](#)

The provider is delivering an assertive aftercare program to people who have attempted suicide or experienced a suicidal crisis. A support coordinator provides a tailored program for up to three months after discharge from hospital. The program is built on personal connection and integration with community services and support coordinators utilise evidence-based tools such as outcome assessment, safety planning and support planning to keep people safe in the community.

Suicide Prevention Program

The provider will deliver a suicide prevention service targeted at men aged 35-65 years of age, a priority at-risk population group in the North Coast region.

The service will ensure clients are supported through evidence-based interventions and connection to supports and other services that focus on addressing challenges across the social determinants of health. The Suicide Prevention Program will work within a hub & spoke model of care, to enhance regional equity and service integration.

Participants engaged in the Suicide Prevention Program will be supported to find solutions to presenting needs and build strategies to help manage future challenges and increase the prevalence of protective factors, reducing suicidal risk.

Men aged 35-65 years of age will be supported through a range of activities and interventions, including CBT and DBT therapies. Clients will be supported in suicide prevention areas such as safety planning, emotional regulation and behaviour management.

Targeted Regional Suicide Prevention

Healthy North Coast will build on action plans developed under the North Coast National Suicide Prevention Trial allowing broader access to evidence-based programs and activities that support suicide prevention across the North Coast region.

Healthy North Coast will employ a Suicide Prevention Coordinator to embed a multi-level, cross sector, whole of community approach to suicide prevention across the North Coast region, by engaging with a range of stakeholders to consider prevention, intervention and postvention needs for inclusion in a regional suicide prevention action plan.

The Regional Suicide Prevention Coordinator is working across the Healthy North Coast region, with the responsibility of:

- Facilitating meetings with the Suicide Prevention Collaborative and key stakeholders
- Developing a North Coast targeted regional suicide prevention action plan
- Managing the suicide aftercare service portfolio (The Way Back) aligned to the key objective in the bilateral agreement.
- Supporting Joint Regional Planning for mental health, suicide prevention in partnership with our two Local Health Districts
- Implementing a region wide campaign to improve help-seeking behaviours, targeting increasing protective factors, relevant to the current stressors our community are experiencing. For our region this includes financial distress, housing and food security and relationship breakdowns - family or partner.
- Driving implementation of the activities included in the developed action plan.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment 2024-25 – 2026-27

Priorities

Priority	Page reference
Reduce prevalence of suicide attempt for youth in the North Coast, particularly in Kempsey-Nambucca SA3	143
Reduce psychological distress for people in the North Coast to improve mental health wellbeing	143
Enhance access to mental health services and reduce wait times, particularly for psychological therapies, to alleviate mental health issues	142



Target Population Cohort

- Whole population in communities with high rates of suicide deaths,
- People impacted by suicide,
- People from groups known to be at higher risk of suicide such as Aboriginal people, young people, men 35-65 years of age, LGBTQI community members, CALD community members, First Responders and Veterans.

Local Government Areas of Tweed; Byron; Lismore; Clarence Valley for The Way Back and North Coast for Suicide Prevention Program.

Indigenous Specific *

No

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Kempsey - Nambucca	10802
Tweed Valley	11203
Clarence Valley	10401
Coffs Harbour	10402
Richmond Valley - Hinterland	11202



Activity Consultation and Collaboration

Consultation

The approach to service models and subsequent commissioning activity was led by the outcomes of the ideas and insights of stakeholders, including people with lived experience and service providers across the region.

Collaboration

The commissioned services will continue to collaborate with a wide range of health and social service providers to improve the care and coordination of services to meet client needs. Key to the provision of suicide prevention and intervention programs is strong relationships with our partner Local Health Districts and community-based services that engage with at-risk population groups.



Activity Milestone Details/Duration

Activity Start Date

01/07/2019

Activity End Date

30/06/2026

Service Delivery Start Date

July 2019

Service Delivery End Date

30 June 2026



Activity Commissioning

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

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

Is this activity being co-designed?

Yes

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

Yes

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

No

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

No

Decommissioning

No

Co-design or co-commissioning comments

Through a series of participatory designed workshops, Healthy North Coast listened to the needs of our community and considered alternative ways of addressing mental health needs across the stepped care continuum. The North Coast region has a Targeted Regional Initiatives for Suicide Prevention Action Plan for 2024-2026, which guides commissioning investment across the region and prioritises activities that are aligned to the priority populations for our region.

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

Yes



MH - 6 - Aboriginal and Torres Strait Islander mental health services



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

6

Activity Title *

Aboriginal and Torres Strait Islander mental health services

Existing, Modified or New Activity *

Modified



Activity Priorities and Description

Program Key Priority Area *

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

Aim of Activity *

The Activity aims to increase the delivery and integration of holistic, trauma informed strategies that work to reduce the impact of social and emotional factors contributing to mental illness and substance misuse among Aboriginal people.

The Activity will work across mental health and suicide prevention services to enable the early identification and culturally safe treatment for Aboriginal people with physical and mental health issues who have co-occurring substance misuse issues.

Build capacity within the mental health system to deliver culturally safe, evidence based mental health services for Aboriginal and Torres Strait Islander people, thereby improving access, and complementing/linking to existing services including drug and alcohol services, social and emotional wellbeing services and mainstream services;

Support social and emotional wellbeing (SEWB) for Aboriginal people with a particular focus on programs that work within an Aboriginal cultural framework, including holistic service delivery.

Description of Activity *

HNC established Aboriginal health Partnership agreement in May 2023. This partnership approach involves an agreement between HNC and 6 ACCHS and seeks to progress the National Aboriginal and Torres Strait Islander Health Plan 2021-2031. There are four areas of reform which are related to this agreement:

1. Formal partnerships and shared decision making
2. Building the community-controlled sector
3. Transforming government organisations

4. Shared access to data and information at a regional level.

In consultation with Aboriginal community leaders, key partners and stakeholders, co-design and commission a model and services focused on social and emotional wellbeing factors.

Social Emotional Wellbeing Project

6.1.1 Following on from stakeholder consultation, build capacity within the mental health system to deliver culturally appropriate, evidence based mental health services for Aboriginal and Torres Strait Islander people, thereby improving access, and complementing/linking to existing services including drug and alcohol services, social and emotional wellbeing services and mainstream services;

6.1.2 Approaches to support SEWB for Aboriginal people with a particular focus on programs that work within an Aboriginal cultural framework, including holistic service delivery.

Develop suitable Aboriginal mental health (MH), alcohol and other drugs (AOD) and cultural assessment tools. These tools include dedicated assessment tools for Aboriginal social emotional and wellbeing (SEWB) programs. Localised customisation of the program to meet the needs of both the HNCL and the local AMSs has the potential to improve the patient experience, with less shame and stigma when seeking help with Mental health issues and illnesses, cultural safety on both and mainstream primary health care services as well as enabling services to collect and analyse valuable data to improve service provision and outcomes. Having access to culturally safe assessment tools means that existing programs such as the HNCL Aboriginal SEWB contracts with AMS's can demonstrate understanding and provide accurate clinical assessments.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment 2024-25 – 2026-27

Priorities

Priority	Page reference
Improve cultural sensitivity and gender- and age-appropriateness in mental health services	150
Reduce psychological distress for people in the North Coast to improve mental health wellbeing	143
Explore opportunities to improve mental health and reduce alcohol and other drugs use in Aboriginal communities	141
Improve cultural competency and appropriateness of workforce in mainstream services for Aboriginal communities	141
Enhance access to mental health services and reduce wait times, particularly for psychological therapies, to alleviate mental health issues	142



Activity Demographics

Target Population Cohort

Aboriginal community members across the lifespan

Indigenous Specific *

Yes

Indigenous Specific Comments

Direct approach to Aboriginal Elders, Aboriginal Medical Services and Aboriginal community leaders.

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

Aboriginal Elders, Aboriginal Medical Services and Aboriginal community leaders will be actively consulted and involved in the co-design of services to meet the needs of their community members.

Collaboration

Comprehensive consultation and co-design processes with key partners and stakeholders will take place.



Activity Milestone Details/Duration

Activity Start Date

01/07/2019

Activity End Date

30/06/2026

Service Delivery Start Date

July 2019

Service Delivery End Date

30 June 2026



Activity Commissioning

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

Not Yet Known: Yes

Continuing Service Provider / Contract Extension: No

Direct Engagement: No

Open Tender: No

Expression Of Interest (EOI): No

Other Approach (please provide details): No

Is this activity being co-designed?

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

Co-design or co-commissioning comments

The Healthy North Coast Aboriginal Health Partnership includes Bulgarr Ngaru Medical Aboriginal Corporation, Rekindling the Spirit, Bullinah Aboriginal Health Service, Galambila Aboriginal Health Service, Durri Aboriginal Corporation Medical Service and Werin Aboriginal Medical Service.

The Partnership recognises that Aboriginal community and organisations are the experts in Aboriginal health.

The commissioning and co-design approach of the Healthy North Coast Aboriginal Health Partnership is grounded in collaboration, cultural responsiveness, and shared decision-making. It ensures Aboriginal communities and Aboriginal Community Controlled Health Organisations (ACCHOs) are central to every stage of the commissioning cycle, from needs assessment and planning to service design, procurement, and evaluation. Health priorities are identified through culturally safe consultations and community-driven data, with services designed to reflect Aboriginal values, lived experiences, and social determinants of health.

In practice, this approach involves co-designing services with ACCHOs and community members to ensure cultural safety and relevance, particularly in programs where Aboriginal people are a priority group. The procurement process favours Aboriginal organisations and includes capacity-building support. Evaluation is continuous and community-informed, using both qualitative and quantitative methods to assess impact and guide improvements. Overall, the approach empowers Aboriginal communities to lead decisions that affect their health and wellbeing, ensuring services are tailored, respectful, and effective.

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

Yes



MH - 8 - Initial Assessment and Referral (IAR) - Training & Support Officers - Operational



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

8

Activity Title *

Initial Assessment and Referral (IAR) - Training & Support Officers - Operational

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Mental Health Priority Area 7: Stepped care approach

Aim of Activity *

The aim of the IAR TSO role is to embed the IAR in primary care settings and support general practitioners and health professionals in the network to learn about, use and embed the IAR Decision Support Tool (DST) in clinical practice.

Healthy North Coast aims to build capacity and knowledge of up to 500 GPs in the use of the DST and IAR in the North Coast Region.

Description of Activity *

Using project management methodology and quality improvement principles, Healthy North Coast is delivering the following:
Employment of a TSO to undertake train the trainer training

A localised implementation plan, which includes:

- Detail around distribution of IAR and DST materials
- GP and Aboriginal Medical Service engagement plan
- Delivery of IAR DST Training to GPs, health professionals and commissioned service providers, with a target of up to 500 GPs by the end of the program.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment 2024-25 – 2026-27

Priorities

Priority	Page reference
Improve access to primary mental healthcare services	143
Improve provider and workforce understanding of the pathways for integrating, connecting and providing best practice care for the prevention and management of chronic and complex disease	142
Improve clinician understanding of health needs for specific population groups, such as LGBTQ+ health, neurodiversity, women and children	142



Activity Demographics

Target Population Cohort

GPs and health professionals

Indigenous Specific *

No

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

Healthy North Coast have consulted with relevant local stakeholders including Local Health Districts, general practitioners, commissioned providers and partner PHNs to support the roll out of this national initiative.

Collaboration

Strong collaboration is the foundation on which all initiatives implemented under the Activity are based. This ensures local relevance, local ownership and adoption. Healthy North Coast considers the following partners as key:

- Aboriginal Medical and Health Services
- General practitioners
- Local Health Districts
- Commissioned service providers



Activity Milestone Details/Duration

Activity Start Date

30/06/2022

Activity End Date

30/06/2026

Service Delivery Start Date

01/09/2022

Service Delivery End Date

30/06/2026



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

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

No



MH - 8 - Initial Assessment and Referral (IAR) - GP Payments



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

8

Activity Title *

Initial Assessment and Referral (IAR) - GP Payments

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Mental Health Priority Area 7: Stepped care approach

Aim of Activity *

General Practitioner payments to engage GPs in the IAR training and use of associated tools to support referrals.

Description of Activity *

Healthy North Coast will utilise funding for direct payments to General Practitioners, Aboriginal Community Controlled Health Services and clinicians providing care through adult mental health centre across the North Coast region, to participate in the Intake, Assessment and Referral Training.

Healthy North Coast will offer remuneration for attendance at the initial 2-hour IAR DST training session GPs attend.

GP practices will be notified about the training through a variety of means, including:

- TSO and Project Lead attendance at other HNC GP education sessions, to provide share information about training opportunities
- Engagement with GP practices through the HNC Primary Health Coordinators and Primary Care Impact initiative
- Updates and promotions through fortnightly HNC Practitioner Newsletter
- Updates in HealthPathways

Needs Assessment Priorities *

Needs Assessment

Needs Assessment 2024-25 – 2026-27

Priorities

Priority	Page reference
Improve clinician understanding of health needs for specific population groups, such as LGBTQ+ health, neurodiversity, women and children	142



Activity Demographics

Target Population Cohort

General practitioners and health professionals

Indigenous Specific *

No

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

Healthy North Coast will engage with clinical councils for the implementation of this activity.

Collaboration

Healthy North Coast will build on existing relationships across the region and provide ongoing support to GPs, Aboriginal Community Controlled Health Organisation and other health professionals throughout this activity.



Activity Milestone Details/Duration

Activity Start Date

01/07/2022

Activity End Date

30/06/2026

Service Delivery Start Date

01/09/2022

Service Delivery End Date

30/06/2026



Activity Commissioning

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

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

Is this activity being co-designed?

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

Co-design or co-commissioning comments

Healthy North Coast will engage with the clinical councils across the North Coast region to seek guidance on implementation of this activity and to seek strategies to maximise uptake of the IAR training package.

The co-design approach is underpinned by four principles which actively support and benefit stakeholders for whom the intervention/service/solution has a material impact on:

- All stakeholders are involved as active participants throughout the design process from problem setting to problem solving.
- All stakeholders contribute as design partners, participating in idea generation as well as providing opinions and feedback on existing design concepts.
- Proposed interventions are understood and continually evaluated on whether they are relevant, meaningful, and engaging to all stakeholders who stand to benefit from them, as well as taking into consideration potential for harm and their anticipated impact on mental health and wellbeing outcomes.
- Users of the service/intervention/solution are put in the centre of all design decisions.

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

No



MH - 13 - Psychological Services in Aged Care Facilities



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

13

Activity Title *

Psychological Services in Aged Care Facilities

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-served and / or hard to reach groups

Aim of Activity *

Deliver psychological therapies to people with mental illness living in Residential Aged Care Homes (RACHs) across the North Coast region.

Description of Activity *

The Psychological Therapies in RACHs program aims to improve the mental health and wellbeing of people living in RACHs.

Referrals are made via RACH staff and GPs, along with requests for support via family, friends and/or carers.

The program is delivered by two providers, aligned with the Local Health District footprints.

Mid North Coast is delivered through EACH and Northern NSW delivered by Change Futures.

Service models include:

- Comprehensive assessment
- Individual counselling – using evidence-based interventions such as CBT, ACT
- Group Counselling – as a step-down approach from individual counselling supports
- Psychoeducation
- Referral.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment 2024-25 – 2026-27

Priorities

Priority	Page reference
Increase support for older people to manage their mental health, including people living in residential aged care homes	149
Enhance access to mental health services and reduce wait times, particularly for psychological therapies, to alleviate mental health issues	142



Activity Demographics

Target Population Cohort

People living in Residential Aged Care Facilities across the North Coast Region.

Indigenous Specific *

No

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

The approach to service models and subsequent commissioning activity was led by the outcomes of the ideas and insights of stakeholders, including people with lived experience, RACFs and service providers across the region.

Collaboration

The commissioned services will continue to collaborate with a wide range of health and social service providers to improve the care and coordination of services to meet client needs. Key to the provision of suicide prevention and intervention programs is strong relationships with our partner Local Health Districts, GPs and Aged Care Services such as ACAT teams.



Activity Milestone Details/Duration

Activity Start Date

19/07/2022

Activity End Date

30/06/2026

Service Delivery Start Date

19/07/2022

Service Delivery End Date

30/06/2026



Activity Commissioning

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

Not Yet Known: No

Continuing Service Provider / Contract Extension: Yes

Direct Engagement: No

Open Tender: No

Expression Of Interest (EOI): No

Other Approach (please provide details): No

Is this activity being co-designed?

Yes

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

Yes

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

No

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

No

Decommissioning

No

Co-design or co-commissioning comments

Through a series of participatory designed workshops, Healthy North Coast listened to the needs of our community and considered alternative ways of addressing mental health needs for older persons, across the stepped care continuum.

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

Yes



MH - 14 - Targeted Regional Initiatives for Suicide Prevention



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

14

Activity Title *

Targeted Regional Initiatives for Suicide Prevention

Existing, Modified or New Activity *

Modified



Activity Priorities and Description

Program Key Priority Area *

Mental Health Priority Area 5: Community based suicide prevention activities

Aim of Activity *

Provision of community-led and systems -based suicide prevention activities for people at risk of suicide or in suicidal distress

Description of Activity *

Healthy North Coast has established a TRISP Steering Committee, with key stakeholders across the region to support the following activities:

- Building capacity and capabilities of the local workforce to support people in suicidal distress and suicide loss, including linkages with services and supports relevant to needs.
- Commission services or activities that support people at risk of suicide build help-seeking behaviours.
- Commission peer support and mentorship programs for people at risk of suicide

Needs Assessment Priorities *

Needs Assessment

Needs Assessment 2024-25 – 2026-27

Priorities

Priority	Page reference
Collaborate with local agencies, communities and services to improve inclusive access to health and wellbeing services and activities in the North Coast	152
Improve access to primary mental health care services to reduce mental health-related presentations to EDs and hospitalisations, particularly in Kempsey-Nambucca SA3	143
Improve access to primary mental healthcare services	143



Activity Demographics

Target Population Cohort

Young people aged 15-24 years; men aged 35-65 years of age

Indigenous Specific *

No

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

Healthy North Coast works collaboratively with key stakeholders from planning to implementation and monitoring of commissioned activity

Collaboration

Key stakeholders to support the regional targeted approaches include:

Mid North Coast Local Health District and Northern NSW Local Health District, through joint regional planning and co-design of local solutions.

To ensure activities are locally relevant and meet the needs of the community, collaboration will include people with lived experience of suicide and suicidal distress and community-based organisations such as; Social Futures, New Horizons, Lifeline (Direct, North Coast and Mid North Coast), EACH, Mission Australia, Wellways, Lives Lived Well. This will build on existing networks and relationships established through the North Coast National Suicide Prevention Trial, led by five community-based organisations Lifeline Direct, The Family Centre, Our Healthy Clarence, Macleay Valley Workplace and Learning Centre and Bellingen Neighbourhood Centre.

Healthy North Coast will work in partnership with local Aboriginal Community Controlled Health Organisations (ACCHOs) from design through to implementation of the activities under this program.

Healthy North Coast will work closely with the two ACCHO sites delivering the Culture Care Connect Program, to ensure responses are joined up and integrated.



Activity Milestone Details/Duration

Activity Start Date

01/02/2023

Activity End Date

30/06/2026



Activity Commissioning

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

Not Yet Known: No

Continuing Service Provider / Contract Extension: Yes

Direct Engagement: No

Open Tender: No

Expression Of Interest (EOI): No

Other Approach (please provide details): No

Is this activity being co-designed?

Yes

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

Yes

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

No

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

No

Decommissioning

No

Co-design or co-commissioning comments

The co-design approach is underpinned by four principles which actively support and benefit stakeholders for whom the intervention/service/solution has a material impact on:

- All stakeholders are involved as active participants throughout the design process from problem setting to problem solving.
- All stakeholders contribute as design partners, participating in idea generation as well as providing opinions and feedback on existing design concepts.
- Proposed interventions are understood and continually evaluated on whether they are relevant, meaningful, and engaging to all stakeholders who stand to benefit from them, as well as taking into consideration potential for harm and their anticipated impact on mental health and wellbeing outcomes.
- Users of the service/intervention/solution are put in the centre of all design decisions

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

Yes



MH-AMHCT - 1 - H2H Adult Mental Health Services



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH-AMHCT

Activity Number *

1

Activity Title *

H2H Adult Mental Health Services

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Aim of Activity *

Head to Health adult mental health centres and satellites provide a safe and welcoming space for adults who may be in distress or crisis or need help to find the right services and support for their individual needs.

The Head to Health Centres and Satellites offer the following core service elements:

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

Description of Activity *

Healthy North Coast will work collaboratively with Northern NSW and Mid North Coast Local Health Districts to support collaborative and integrated service models, to support the seamless transfer of care between primary and tertiary based services. Key to the implementation of the programs is the link with key services and stakeholders, to embed the services within existing service systems and referral processes.

The Head to Health Intake, Assessment and Referral Service will be integrated with the Hub services, ensuring quality referral and warm transfer management for consumers accessing the Head to Health Program.

The Head to Health Centre and Satellite will focus on:

- Responding to people experiencing crisis and distress

- Providing a central location to connect people to services and access support
- Provision of biopsychosocial assessment
- Evidence-based immediate, short to medium episodes of care
- Links to other services and support

Head to Health Satellite – Coffs Harbour:

Establish a community-based Head to Health Satellite adult mental health service in Coffs Harbour. The satellite will be a multidisciplinary collaborative mental health service that is embedded in the primary care system in Coffs Harbour and aligned to the Head to Health Service Model specifications. The service will be walk in, offering holistic support, with linkages to social and community-based supports and services that address co-existing health conditions and address social determinants of health.

Head to Health Centre - Lismore:

Head to Health Lismore is an established service, providing accessible, trauma-informed and recovery-focused mental health services to the Lismore Local Government area and surrounding communities. Head to Health Hubs are designed to provide a welcoming, low stigma, soft entry point for engagement, assessment and treatment for people who may be experiencing distress or crisis

The Head to Health Lismore Centre has a range of multidisciplinary clinical, peer support and administrative staff and provide a combination of co-located, telehealth and limited outreach service offerings, operating 10:00 am to 8:00 pm Monday to Friday and 12:00 pm to 8:00 pm on Saturday and 12:00pm to 4:00 pm on Sunday.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment 2024-25 – 2026-27

Priorities

Priority	Page reference
Support PHN commissioned mental health services in the North Coast, particularly those in Port Macquarie-Hastings, Lismore and Byron LGAs	144
Improve access to primary mental healthcare services	143
Reduce psychological distress for people in the North Coast to improve mental health wellbeing	143



Activity Demographics

Target Population Cohort

Whole of population, men aged 35-65 years of age, Aboriginal and Torres Strait Islander people.

Indigenous Specific *

No

Coverage

Whole Region

No

SA3 Name	SA3 Code
Coffs Harbour	10402
Richmond Valley - Hinterland	11202



Activity Consultation and Collaboration

Consultation

Ongoing consultation and active engagement across all levels of the selected community are central features of all initiatives implemented under the Activity. Regular engagement with Northern NSW and Mid North Coast Local Health District, to ensure activities and investment is directed at the at-risk groups in the community.

Collaboration

Strong collaboration is the foundation on which all initiatives implemented under the Activity are based. This ensures local relevance, local ownership and therefore sustainability of strategies designed to change systems and community relationships. Key stakeholders include:

- Northern NSW and Mid North Coast Local Health Districts
- Community-based organisations
- GPs
- People with lived experience



Activity Milestone Details/Duration

Activity Start Date

01/08/2022

Activity End Date

30/06/2027

Service Delivery Start Date

01/08/2022

Service Delivery End Date

30/06/2027



Activity Commissioning

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

Not Yet Known: No

Continuing Service Provider / Contract Extension: No

Direct Engagement: No

Open Tender: Yes

Expression Of Interest (EOI): No

Other Approach (please provide details): No

Is this activity being co-designed?

Yes

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

Yes

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

No

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

No

Decommissioning

No

Co-design or co-commissioning comments

All stakeholders contribute as design partners, participating in idea generation as well as providing opinions and feedback on existing design concepts.

- Proposed interventions are understood and continually evaluated on whether they are relevant, meaningful, and engaging to all stakeholders who stand to benefit from them, as well as taking into consideration potential for harm and their anticipated impact on mental health and wellbeing outcomes.
- Users of the service/intervention/solution are put in the centre of all design decision.