



March 2024

# Cairns Head to Health: Consultation and codesign summary report



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From July to December 2023, Northern Queensland Primary Health Network (NQPHN) and Cairns and Hinterland Hospital and Health Service (CHHHS) undertook significant consultation and codesign to inform the implementation of Cairns Head to Health. NQPHN and CHHHS thank the more than 240 stakeholders who participated and shared their expertise and insights to help shape these new services.

This report provides an overview of the key findings and insights gained from consultation and codesign, along with plans for a procurement process in early 2024 to identify a lead agency for Cairns Head to Health.



*NQPHN acknowledges the Aboriginal and Torres Strait Islander peoples as Australia's First Nation Peoples and the Traditional Custodians of this land. We respect their continued connection to land and sea, country, kin, and community. We also pay our respect to their Elders past, present, and emerging as the custodians of knowledge and lore.*

## Background

Cairns Head to Health has been funded by the Commonwealth and Queensland Governments through the National Mental Health and Suicide Prevention Agreement and Bi-Lateral PHN Program. This service is being commissioned by NQPHN in partnership with CHHHS.

Cairns Head to Health will deliver a new approach to supporting individuals with their mental health, social, and emotional wellbeing needs. As one lived experience representative put it, through 'wobbly life moments.' The center will offer a welcoming, low-stigma, and soft entry point for individuals experiencing distress, crisis, or other mental health challenges. Support will be immediate, with no need for a referral or appointment

### Head to Health – Core service elements

Underpinning Head to Health [are four core service elements](#)

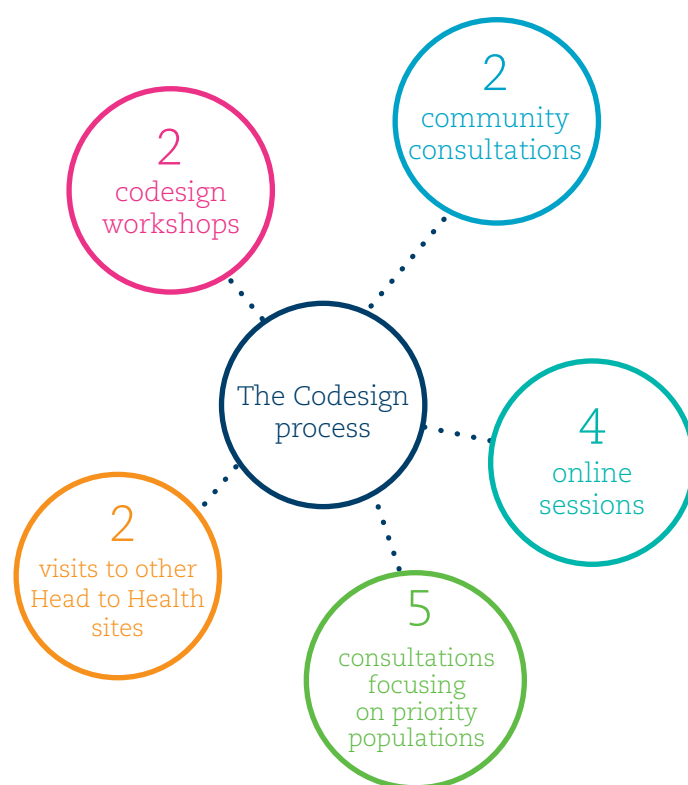
1. Responding to people experiencing a crisis or in significant distress.
2. Providing a central point to connect people to other services in the region.
3. Providing in-house assessment, including information and support to access other services.
4. Providing evidence-based and evidence-informed immediate, and short to medium term care.

You can find more information about Head to Health [here](#).

## The codesign process

In February 2023, NQPHN and CHHHS established the Cairns Head to Health Implementation Group with senior leaders from both organisations. From July to December 2023, this group led an extensive process to ensure that Cairns Head to Health is designed to deliver outcomes that matter to the community.

The process involved working with a diverse range of service providers and health professionals, community groups, people with lived or living experience of mental ill-health, carers, family and kin, and anyone whose primary relationship with the person concerned is a personal, supporting, and caring one.



### Codesign workshops

In September 2023, more than 70 people attended a full-day codesign workshop, which followed the [Double Diamond](#) approach to human centred design.

Attendees worked through four phases of design:

- » **Discover:** Understanding the challenges and the community needs
- » **Define:** Understanding key themes
- » **Develop:** For Cairns Head to Health, what is possible?
- » **Deliver phase:** Testing solutions.

A summary report from this workshop can be found [here](#).

In November 2023, more than 70 stakeholders again joined us for a second codesign workshop, which explored three service elements that had been identified as non-negotiable for Cairns Head to Health:

- » How can we establish an environment that ensures the safety of both those accessing and those working at Cairns Head to Health?
- » What does outreach with a purpose look like? How do we ensure outreach is built in from the start?
- » What partnerships are non-negotiable?





## Community consultation sessions

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In October 2023, two community consultation sessions were held, inviting people with lived experience to assist us with gaining a deeper understanding of:

- » Who will have access to Cairns Head to Health, and what are the circumstances or events that might lead them to seek support?
- » How will people be aware of Cairns Head to Health? What kind of promotion needs to take place?
- » What should Cairns Head to Health look and feel like?
- » What services and supports should Cairns Head to Health offer?
- » If someone comes to Cairns Head to Health, but they need to be in hospital, how should that be handled?

## Priority populations

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Between September 2023 and January 2024, a range of stakeholders were engaged to provide specific input on how Cairns Head to Health can provide a welcoming and safe space and meet the needs of priority populations, including:

- » First Nations peoples
- » Culturally and linguistically diverse communities
- » LGBTQIA+
- » Young people
- » Men
- » People who are homeless or vulnerably housed
- » Families who have had contact with the child protection system
- » People who have had contact with the criminal justice system
- » Domestic and family violence.

## Cairns Head to Health Lived Experience Advisory Group (LEAG)

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In September 2023, an expression of interest was released for Cairns community members to join the LEAG. After receiving a large number of responses, a review process was conducted and [Roses in the Ocean](#) were engaged to undertake readiness calls with 12 people. In October 2023, the LEAG was established with 11 members representing a diverse range of perspectives.

The LEAG meets monthly and provides advice on all aspects of the design and establishment of Cairns Head to Health, from a lived experience perspective. Once Cairns Head to Health is operational, we anticipate members of the LEAG will have a role in ongoing governance of the service.

## Head to Health site visits

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In July and October 2023, the Cairns Head to Health Implementation Group visited two established Head to Health sites and gained important insights into their operational successes and challenges, as outlined below.

- » The importance of close, robust, and effective partnerships with state-based mental health services that enable the development of truly seamless pathways of care.
- » The opportunities that can arise from physical design features of the centre including people entering an open space that is free of a reception area, meeting a support worker first rather than an administrator, the inclusion of a sensory room and rooms and equipment for accessing other services via telehealth, and having a separate and private entrance for people arriving or departing via ambulance.
- » The dedicated thinking required to ensure the service is culturally safe for First Nations people, including having identified, cultural support for workers, and partnerships with Aboriginal and Torres Strait Islander organisations.
- » The opportunity to partner with specialist organisations through co-location or funding positions in other organisations to work at Head to Health (eg. housing, First Nations, drug and alcohol, and multicultural services).
- » The opportunity to employ a wide range of peer workers that reflect the diversity of the community, have a 'peer first, peer last approach' and ensure peer workers have access to external supervision.
- » The opportunity to deliver group support that meets community needs, such as Dialectical Behaviour Therapy (DBT) and Acceptance and Commitment Therapy (ACT).
- » The opportunity for genuinely improved access to support that arises from operating 365 days a year and extended hours between 10am and 10pm.
- » The challenges of operating and staffing a service 365 days a year and extended hours, particularly as they relate to staff training, support, and building team culture.



## What did we learn?

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From this extensive consultation and codesign we have developed a deeper understanding of the community vision for Cairns Head to Health, with key learnings outlined below.

### Who will Cairns Head to Health support?

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- » People who are experiencing overwhelming situational distress.
- » People who are navigating difficult life circumstances that can contribute to mental health struggles.
- » People who experience recurring mental health challenges that periodically lead them to attend an emergency department or have an inpatient hospital stay.

### How should Cairns Head to Health look and feel?

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- » A warm and welcoming environment with carpet, soft and comfortable furniture, calm colours, and local art that reflects the diversity of the Cairns community.
- » Entry should be through an open space with no reception desk or barriers.
- » 'Non-clinical' in feel and designed with a trauma informed lens.
- » Inclusive of quiet spaces that allow people to regulate, a room large enough for group programs, and private rooms and equipment so people can access online and telehealth supports.
- » Accessible for people with disabilities, including those in wheelchairs, hard of hearing and visually impaired people..
- » An outdoor area with plants and fresh air is highly desirable, and could be used for therapy session, or just as a place to connect, particularly for First Nations people.
- » Whilst not a usual feature of a health service, some community members feel there should be consideration for a smoking area.

### Where should Cairns Head to Health be located?

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- » The location must consider accessibility for those people most likely to need access Cairns Head to Health.
- » Whilst the exact physical location will be influenced by many factors including cost and availability, it is essential that the location is accessible by public transport and has ample free parking.

- » It is highly desirable the location is near existing infrastructure that is frequently visited by people, such as a shopping centre.
- » Of note, outreach is an essential element for Cairns Head to Health, see the 'outreach with a purpose' section below.

### What should the workforce look like?

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- » The workforce requires peer workers who have their own lived experiences, that reflect the diversity of the Cairns community.
- » Multidisciplinary clinical support (eg. psychologists, social workers, mental health nurses, counsellors, doctors).
- » Identified First Nations staff are required.

### What skills and support does the workforce need?

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- » Overall, staff require a variety of skills and life experiences.
- » Specific skills are needed to ensure care is trauma informed.
- » Specific skills are also required to ensure safe care for the groups outlined below. It is acknowledged that providing safe care relies on a commitment to ongoing training, learning, and capacity building, rather than relying solely on one-off workshops or online learning. Some groups reference the concept of 'cultural fitness'
  - o First Nations peoples
  - o people who identify with the full range of the LGBTIQ+ community
  - o culturally and linguistically diverse peoples
  - o people who have experienced domestic and family violence
  - o men and women who have experienced childhood sexual abuse
  - o people with a disability including deaf people and those with vision impairment
  - o people with problematic alcohol and drug use.

- » In some cases, individuals being supported by Cairns Head to Health may experience thoughts of suicide, with some having an existing plan and the means to end their own lives. Ensuring transparency and consistency in how suicide is discussed and responded to will help reduce the tension experienced by those seeking support.

- » People attending Cairns Head to Health may be experiencing distressing life events and a range of emotions. Staff will need skills to de-escalate these situations and support people in a respectful and calm way.

## Other service design considerations

### Guiding principles for the delivery of mental health services in northern Queensland

Throughout 2023, NQPHN undertook a significant process to redesign investment in mental health stepped care services across the greater Cairns, Townsville, and Mackay regions, including rural areas. Underpinning the future stepped care service model are five principles that emerged through codesign and received strong endorsement from the sector and people with a lived experience.

Cairns Head to Health is an integral part of the future mental health stepped care model of care, and accordingly, these principles will also apply to the way this service will operate.



### Outreach with a purpose

Outreach is considered an essential element of Head to Health, and the importance of outreach for Cairns has been reinforced throughout the codesign process.

In fact, in the first codesign workshop, attendees were invited to physically create their ideal Head to Health, and most groups had a Head to Health on wheels!

Through ongoing exploration, the theme of 'outreach with a purpose' emerged, which is inclusive of two separate and complimentary models, outlined below.

- » **Outreach to deliver a service:** For example, Head to Health worker/s attending another service or location that is considered a safe place by people who are experiencing vulnerability.
- » **Outreach to create awareness:** For example, Head to Health worker/s attending other services or locations people already visit, for a soft introduction to Cairns Head to Health.

It is a strong recommendation that the lead agency for Cairns Head to Health will have, or develop, an understanding of the type, location, and regularity of other supports and services available, to then identify gaps which could be met by Cairns Head to Health. A range of flexible outreach service delivery models may then be considered, outlined below.

- » **Individual outreach:** Head to Health worker/s travelling to a specific service or location to support identified groups or communities.
- » **Cluster:** Head to Health worker/s travelling to multiple communities within a geographic cluster.
- » **Telehealth:** Service provision provided through telecommunication technologies to exchange health information and provide support across geographic, time, social and cultural barriers.

To ensure effective outreach, Cairns Head to Health outreach staff, both clinical and non-clinical, will need to work with local services and networks to embed their service delivery in existing structures. Issues relating to the coordination and continuity of care, sequencing of visits, managing the impact on the community, and costs related to travel must be considered when planning outreach.







## Essential partnerships

Building partnerships is crucial for Cairns Head to Health's success in delivering integrated mental health care that meets the diverse needs of the Cairns community, with key points outlined below.

### Essential partnerships

**Partnerships that address the breadth of a person's needs:** Effective partnerships are needed between mental health services, government agencies, non-government organisations, community groups, and primary care providers to address all aspects of individuals' well-being, including their "wobbly life moments."

**Co-location and collaboration:** Many Head to Health models work alongside existing local services like Aboriginal and Torres Strait Islander organisations, drug and alcohol supports, domestic violence services and shelters, and homelessness services. Cairns Head to Health should follow suit for better reach and resource sharing.

**Strategic partnerships:** Organisations interested in applying to be the lead agency for Cairns Head to Health should actively build partnerships within the region.

**Connecting with diverse communities:** Cairns Head to Health needs to engage with various segments of the community, and should deliver support in a range of ways, including both individual and group supports.

**Avoiding service duplication:** Existing successful group therapy initiatives in Cairns should be identified and, where possible, collaborations should be explored to avoid duplication of services.

**Capacity building partnerships:** Existing service providers that offer training and capacity building for organisations working with clients are valuable partners. These partnerships will assist Cairns Head to Health reach individuals with unmet needs.

Cairns Head to Health should also develop strong relationships, linkages and referral pathways with local partners including:

- » GPs and other health services
- » Youth and family support services
- » Domestic violence services
- » Services Australia
- » State government departments (eg. Child Safety, Justice)
- » Family Court and Legal Aid services
- » Queensland Ambulance Service
- » Queensland Police Service
- » First Nation communities
- » LGBTQIA+ communities
- » Refugee and culturally and linguistically diverse communities
- » Religious institutions.

## Cairns Head to Health and stepped care

Once Cairns Head to Health is established in the region it will play a vital role in supporting people experiencing distress and a range of mental health challenges. Cairns Head to Health will also be an integral part of the mental health stepped care service system, operating as a front door and access point for people to access the range of mental health stepped care supports, and providing drop in support for anyone already engaged with services who need more immediate help.

## Care pathways

Cairns Head to Health will support people with varying types of mental illnesses and mental health challenges. Ensuring all people interacting with Cairns Head to Health are met with dignity requires special consideration relating to referrals and transition pathways in and out of Cairns Head to Health.

### Accessing Cairns Head to Health

Cairns Head to Health will address a number of gaps in current service provision for the Cairns region. It will provide an alternative for people who have traditionally presented to the Cairns Hospital seeking support for their mental health and wobbly life moments. Community members will be able to arrive at Cairns Head to Health and access immediate support, without the need for a referral or booked appointment.

Where it is the case that a service provider, healthcare professional, community group and anyone else, wishes to refer a person to Head to Health, the establishment of trusted information sharing procedures will be important. The lead agency for Cairns Head to Health is expected to develop and implement these procedures with a range of important stakeholders including, but not limited to, GPs, the Head to Health Phone Service, CHHHS Mental Health Services, and a range of government and non-government organisations.

### Transitioning within Cairns Head to Health

Cairns Head to Health will be established to provide many different services to those accessing it. Codesign sessions identified the preference for a 'peer first and peer last' approach, where a peer worker is connected with a person from their first contact with the service, and stays connected throughout their journey. Where a person goes on to access clinical supports within Cairns Head to Health, it is a strong preference that the person being supported remains informed, has agency over the situation, and has the option to be supported by a peer worker or any accompanying support person throughout.

### Referrals to other services or supports

When internal services aren't suitable for the person's needs, referrals to external providers may be necessary. For Cairns Head to Health to make a difference for the Cairns community, seamless referrals and smooth transitions are crucial, especially those experiencing high levels of distress and needing long-term care.

Warm transfers, where with consent, Head to Health actively shares client information with the new service provider are vital to ensuring continuity and consistency

of care. It is also important that Head to Health provides ongoing support where a person is waiting to access another service.

### Transitioning to hospital-based services

Cairns Head to Health will support some people whose immediate needs will be best served through CHHHS Mental Health Services and the codesign process identified the following important points:

- » This process should be openly discussed with the person in a way that gives them a sense of control, and of feeling supported.
- » A key worker, ideally, a peer worker, will provide a warm introduction to the CHHHS Mental Health Service, and have the option to potentially attend hospital with the person.
- » Wherever possible, the transfer to hospital is smooth and fast tracked through effective information sharing.

### Moving on from Cairns Head to Health

During the codesign we heard the importance of having a smooth transition on leaving Cairns Head to Health, regardless of the next destination, with key points outlined below.



#### Informed consent

People feel well informed when transitioning to an external service provider or another health service, and they are aware of what will happen next.



#### Follow up

Check-ins are conducted to ensure that the person has accessed the next intended service or support.



#### Coming back

People understand they can return to Cairns Head to Health at any time, ideally seeing the same worker.

## Maintaining a compassionate workforce

Operating a service that is open every day of the year, providing extended hours of operation, is a great prospect for the community. We have heard from existing Head to Health locations that this provides challenges for the workforce around team bonding and capacity building. Consideration and planning needs to be taken for these and other areas that relate to retaining a motivated and compassionate workforce.

## Consideration for those who live outside of the Cairns area

There is no geographical boundary imposed on who can access Cairns Head the Health and thus there is a need to consider people who may access the service who reside in other parts of Queensland or Australia. There is a specific need to consider people who reside in rural and remote parts of northern Queensland, including the Cape York and Torres Strait regions.

It is expected that Cairns Head to Health will support smooth transitions and connections for people back to these communities, including links to ongoing services where needed.

## Considerations for children and young people

While Cairns Head to Health focuses primarily on individuals aged 16 years and older, we recognise the importance of addressing the broader mental health needs of the region, including children and young people.

Our extensive consultations revealed the vital role of parents, caregivers, and other support networks in nurturing young people's well-being. To ensure Cairns Head to Health effectively addresses the needs of our community, we will require the lead agency to:

- » **Forge strong connections** with existing service networks dedicated to supporting people under 16 years
- » **Develop clear pathways** for people seeking help at Cairns Head to Health to connect with these valuable services.

## Next steps



### March 2024

Cairns Head to Health information session

1. Thursday 21 March  
10am - 11.30am

[Register Here](#)

Click the [link to register](#) or scan QR code below



### April 2024

The launch of an open and competitive tender process to identify a lead agency for Cairns Head to Health is anticipated for Tuesday 2 April. Service providers and agencies can apply as an individual entity, or as part of a partnership or as a consortium approach.

The tender process will be managed through NQPHN's eTenderBox Portal ([register here](#)). Stakeholders will also be notified through NQPHN publication channels.



## About Northern Queensland Primary Health Network

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NQPHN is one of 31 PHNs established nationally by the Commonwealth Department of Health and Aged Care to provide local communities with better access to improved primary healthcare services. The NQPHN region is home to approximately 700,000 people, and extends from St Lawrence in the south coast, up to the Torres Strait in the north, and west to Croydon and Kowanyama.

Our vision is for northern Queenslanders to live happier, healthier, longer lives. We aim to improve health outcomes for all residents by supporting, investing in, and working collaboratively with other health organisations and the community to deliver better primary care. You can find more information about NQPHN [here](#).

Improved access and coordination of mental health services is one of five priority areas highlighted in NQPHN's Strategic Plan (2021 – 2026).

As part of a commitment to deliver on actions within the Fifth National Mental Health and Suicide Prevention Plan, NQPHN worked in partnership with the Torres and Cape, Cairns and Hinterland, Townsville, and Mackay Hospital and Health Services (HHSs) partners to develop the foundational Joint Regional Wellbeing Plan.

## About Cairns and Hinterland Hospital and Health Service

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The Cairns and Hinterland Hospital and Health Service (CHHHS) includes 9 hospitals, 11 primary health sites and 9 community health centres, as well as mental health facilities and specialist services.

The Cairns Hospital is the primary referral hospital for Far North Queensland with a catchment population of about 289,823 from as far north as Cape York Peninsula and Torres Strait Islands, west to Croydon and south to Tully. The Health Service provides a wide range of primary care, acute and specialist services.

Our Health Service is 95 per cent self-sufficient, meaning only five per cent of patients need to be referred to Townsville or Brisbane for highly specialised acute services.

Our vision is excellent and sustainable healthcare for all in Far North Queensland.

At CHHHS, we recognise that in order to deliver sustainable and excellent healthcare, we need a strong focus on our communities and partnerships to achieve our key objectives related to our priorities of:

- » Our care
- » Our people
- » First Peoples health
- » Our sustainability

As part of the extensive consultation to inform the recent Local Area Needs Assessment, one of the top identified needs was access to mental health services. The Health Service works collaboratively to deliver an extensive range of mental health services across Far North Queensland.



