

Northern Queensland Primary Health Network

## Activity Work Plan

# Primary Mental Health Care

2019/20 – 2023/24



*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.*



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### Disclaimer

All activities captured in this Activity Work Plan are identified in the Health Needs Assessment conducted by Northern Queensland Primary Health Network and have been approved by the Department of Health and Aged Care.

## MH-1 – Low intensity

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### Activity priorities and description

#### Program key priority area

Mental Health Priority Area 1: Low intensity mental health services.

#### Aim of activity

Deliver low intensity services, focused on access and quality mental health information and psychological support to ensure support at the earliest point possible for people with, or at risk of, mild mental illness across Northern Queensland Primary Health Network (NQPHN), with a specific focus on those unable to access regular primary mental health services due to their remote location.

#### Description of activity

NQPHN is undertaking a redesign of the stepped care model, with a specific focus on developing models to better meet the low intensity mental health needs across the NQPHN region, with specific consideration for priority groups and geographical needs. This redesign will be finalised in August 2023 and inform commissioning for the 2024-25 financial year.

NQPHN currently commissions place-based low intensity services across the NQPHN region to deliver against the below-mentioned priorities.

- **Place-based low intensity services:** NQPHN commissions a range of providers to deliver place-based low intensity services and enhance access to mental health information and support across northern Queensland.
- **Aboriginal and Torres Strait Islander communities:** NQPHN commissions Aboriginal Community Controlled Health Organisations (ACCHOs) to provide enhanced social and emotional wellbeing (SEWB) services and improve access to appropriate mental health low intensity services. The current stepped care review will provide NQPHN with further clarification on the best future low intensity service options for this client group.
- **Digital service delivery options:**
  - Enhance the utilisation of existing national digital low intensity options across the primary health sector through promotion and discussions with commissioned service providers.
  - Promote the Head to Head web portal and community education regarding low intensity options, including apps and online self-management courses, to general practitioners (GPs) and other service providers.
- **Primary health workforce upskilling:** NQPHN commissions services to identify workforce development needs and deliver training for primary health care staff and relevant stakeholders/community in northern Queensland to enhance community access to mental health information and support as early as possible.

NQPHN will ensure activity objectives are met by engaging providers on a minimum quarterly basis to monitor service deliverables, outcomes, and compliance. Meetings will include an opportunity to:

- obtain updates and discuss service performance indicators and reports
- understand service uptake, access issues, and opportunities for further service improvement.

## MH-2 – Early intervention for children and young people

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### Activity priorities and description

#### Program key priority area

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

#### Aim of activity

This activity aims to improve the quality of life of young people in the northern Queensland region by commissioning and supporting region-specific, cross-sectoral approaches to early intervention for young people with, or at risk of, mental illness, including those with severe mental illness who are being managed in primary care. Activity will include implementation of equitable and integrated approaches to primary mental health care for this population group.

#### Description of activity

NQPHN commissions service providers to deliver targeted child and youth specific services that provide early intervention, based on specific needs. Areas of specific and current investment are listed below.

Trauma-informed therapeutic services:


- NQPHN commissions Bravehearts to deliver a trauma informed service for people under 14 years of age in the Mackay region based on an identified service gap and community need.
- The service was funded as a trial, with an evaluation to consider opportunities to build sector capacity and implement similar models across the NQPHN region in the next 12 months.
- Additionally, NQPHN funds headspace centres across North Queensland to provide trauma-informed clinical services.

Enhancing referral pathways for young people in rural and remote communities:

- NQPHN commissions a service provider to deliver the Schools Up North (SUN) program in secondary schools across the Cape York and Torres Strait region. The program provides upskilling to education providers, including identification, support, and referral of young people with mental health issues.
- NQPHN commissions Youth Empowered Towards Independence (YETI) to deliver, through subcontract arrangements, mental health and alcohol and other drugs (AOD) services to young people in the Torres and Cape Hospital and Health Service (HHS) region.

Enhancing early intervention:

- NQPHN commissions ACCHOs to deliver connected maternal child health and mental health services to enhance early intervention opportunities for young First Nations people.
- NQPHN commissions services focused on increasing mental health literacy in schools.



NQPHN will ensure activity objectives are met by engaging providers on a minimum quarterly basis to monitor service deliverables, outcomes, and compliance. Meetings will include an opportunity to:

- obtain updates and discuss service performance indicators and reports
- understand service uptake, access issues, and opportunities for further service improvement.

NQPHN's review of stepped care had some, but limited, focus on services to children and young people. NQPHN will undertake a further review of investment in child and young people services across northern Queensland, specifically focused on under 12s in line with the HNA and establish an approach to future commissioning from this review.



## MH-3 – Primary Mental Health Care for hard-to-reach group

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### 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

This activity aims to improve access to primary mental health care for those with mild to moderate mental health issues located in rural and remote communities, or have difficulty accessing mainstream services for other reasons, through the planning and commissioning of a range of service types and modalities based on need.

#### Description of activity

NQPHN commissions a range of service providers to deliver mental health services, psychological therapies, and social and emotional wellbeing (SEWB) services throughout the NQPHN region to enhance access to identified hard to reach groups. This includes place-based service models codesigned with community.

Rural and remote communities:

- NQPHN commissions place-based service responses in rural communities across North Queensland to deliver proactive mental health services in place.

Residential aged care residents:

- NQPHN has commissioned Neami National to deliver psychological therapies into residential aged care facilities (RACFs) through subcontractor provision. The service was designed pre-COVID-19 and has not had the expected uptake. NQPHN will undertake a process of codesign in partnership with RACFs, people with a lived experience, and service providers to develop an enhanced model for mental health services for those in RACFs. A transition plan is being developed to ensure services are maintained whilst an alternative approach is developed and commissioned.

Aboriginal and Torres Strait Islander people:

- NQPHN commissions a number of ACCHOs to deliver SEWB programs, including programs that integrate non-clinical and clinical approaches to deliver culturally appropriate mental health services.

NQPHN will ensure activity objectives are met by engaging providers on a minimum quarterly basis to monitor service deliverables, outcomes, and compliance. Meetings will include an opportunity to:

- obtain updates and discuss service performance indicators and reports
- understand service uptake, access issues, and opportunities for further service improvement.

A review of stepped care will be undertaken to inform further enhancement of services to better meet the needs of the hard-to-reach groups.

Particular consideration may need to be given to an emerging issue related to the increasing number of refugees arriving in the Cairns and Tableland regions, which is predicted to grow over the next six months.



## MH-5 – Community-based suicide prevention activities

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### Activity priorities and description

#### Program key priority area

Mental Health Priority Area 5: Community-based suicide prevention activities.

#### Aim of activity

This activity aims to reduce suicide and self-harm within communities by developing a systems-based, community-led, and regional approach to suicide prevention. The Black Dog Institute's Lifespan Framework will guide this work. Aiming to engage whole of community approaches to enhance community wellbeing and ability to respond to social determinants of distress at the community level. The activity focuses on building partnerships with key stakeholders, including people with a lived experience of suicide, Hospital and Health Services (HHSs), service providers, and community members to codesign and implement whole of community responses for collective impact.

NQPHN will:

- support a whole of community approach to suicide prevention by commissioning agencies to lead the ongoing development and implementation of Suicide Prevention Community Action Plans (SPCAPs)
- plan and commission activities, informed by SPCAP priorities, and emerging trends
- work with key stakeholders, including people with a lived experience of suicide, ACCHOs, HHSs, and others to ensure the needs of priority groups are integrated into SPCAPs and commissioned activities.


#### Description of activity

NQPHN will utilise a systems-based approach to ensure suicide prevention strategies are localised and multi-sectoral by commissioning agencies to lead the ongoing development and implementation of Suicide Prevention Community Action Plans (SPCAPs), commissioning activities aligned with SPCAP priorities, emerging trends, and commissioning suicide prevention training. NQPHN commissions agencies to facilitate the development and implementation of SPCAPS in each of the four HHS regions in northern Queensland (Townsville, Mackay, Carins and Hinterland, and Torres and Cape).

SPCAP commissioned agencies facilitate collaborative groups made up of a diverse range of stakeholders and ensure local needs and issues are consistently reviewed and emerging concerns are flagged for collective action. Commissioned agencies undertake a backbone role to support local networks, using the Black Dog Institute's (BDIs) Lifespan Framework to guide the development and review of SPCAPs.

An open procurement process is currently underway for commissioned agencies in the Townsville and Mackay HHS regions. The current commissioned agencies in the Carins and Hinterland and Torres and Cape regions will continue in 2023-24. Both regions have active collaborative networks, and work is underway in the Torres and Cape region to develop community-specific approaches to suicide prevention, guided by local councils and ACCHOs to ensure community-led and culturally appropriate approaches are embedded and are sustainable.

NQPHN is reviewing the reporting framework for these commissioned agencies to improve alignment with the BDI's Lifespan Framework.



NQPHN will ensure activity objectives are met by engaging commissioned agencies on a minimum quarterly basis to monitor service deliverables, outcomes, and compliance. Meetings will include an opportunity to:

- obtain updates and discuss service performance indicators and reports
- understand successes, challenges, and opportunities for further improvement.

Additionally, NQPHN coordinates quarterly community of practice meetings for all SPCAP commissioned agencies. These meetings provide an opportunity to share learnings and challenges and identify trends across northern Queensland. This group also provides input into the Joint Regional Wellbeing Plan for Northern Queensland's Steering Committee which has key priority actions identified for suicide prevention.

Utilising the learnings of the National Suicide Prevention Trials, in 2023-24 NQPHN will develop, in partnership with key stakeholders, a strategic approach to suicide prevention that will include:

- Developing an enhanced understanding of measures of community wellbeing and distress that could support the early response at the community level.
- Exploring opportunities to connect and coordinate the range of grant funding available to communities to maximise community impact at a whole of government level.
- Commissioning community-based suicide prevention activities based on priorities emerging from SPCAPs, needs assessments, and Joint Regional Wellbeing Plan for Northern Queensland activity. These activities will focus on community-led, collective impact initiatives. These will be commissioned across the NQPHN region through use of resource allocation methodology to inform investment.

Finally, NQPHN commissions the delivery of suicide prevention training across northern Queensland, based on community identified need.

NQPHN will ensure activity objectives are met by engaging providers on a minimum quarterly basis to monitor service deliverables, outcomes, and compliance. Meetings will include an opportunity to:

- obtain updates and discuss service performance indicators and reports
- understand successes, challenges, and opportunities for further improvement.



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

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### Activity priorities and description

#### Program key priority area

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

#### Aim of activity

To enhance access to and better integrate Aboriginal and Torres Strait Islander mental health services at a local level, facilitating a joined-up approach with other closely connected services, including social and emotional wellbeing (SEWB), suicide prevention, and alcohol and other drugs (AOD) services.

#### Description of activity

NQPHN works in partnership with community and the Aboriginal Medical Service (AMS) and Aboriginal Community Controlled Health Organisation (ACCHO) sector to commission services to deliver culturally appropriate evidence-based mental health services to First Nations people across North Queensland.

NQPHN commissions a number of services across key areas of focus, including:

- **Place-based:** NQPHN Commissions five providers to deliver place-based mental health services for First Nations communities across North Queensland. NQPHN collaborates with local community, ACCHOs, and state health providers to take a place-based approach to delivering services that best meet the needs of these communities.
- **SEWB and innovative approaches to services:** NQPHN commissions a number of ACCHOs to deliver integrated SEWB programs, with clinical staff collaborating with non-clinical staff to deliver culturally safe and appropriate services. This has included commissioning Indigenous psychology service delivery into the Torres and Cape region.

NQPHN will ensure activity objectives are met by engaging providers on a minimum quarterly basis to monitor service deliverables, outcomes, and compliance. Meetings will include an opportunity to:

- obtain updates and discuss service performance indicators and reports
- understand service uptake, access issues, and opportunities for further service improvement.

NQPHN will engage with service providers to consider opportunities to enhance the understanding of outcomes and impacts for First Nations peoples and the services delivered using culturally valid and meaningful measurements.

Additionally, NQPHN facilitates meetings between the Torres and Cape Hospital and Health Service (HHS), mental health and alcohol and other drugs (MHAOD) representatives, commissioned service providers, and ACCHOs to enhance working relationships and optimise opportunities to share resources to deliver services to the remote communities throughout this region.

## MH-7 – Stepped care approach: severe and complex

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### Activity priorities and description

#### Program key priority area

Mental Health Priority Area 7: Stepped care approach.

#### Aim of activity

Ensuring access to the continuum of primary mental health care for those experiencing severe and complex mental health difficulties, to meet the individual needs of the person through an integrated stepped care service across North Queensland. This activity aims to provide primary health based mental health services to adults experiencing severe and complex mental illness, but who do not require tertiary mental health services, through the commissioning of services across the northern Queensland region.

#### Description of activity

NQPHN commissions service providers across northern Queensland to deliver evidence-based mental health clinical services to people experiencing severe and complex mental illness who do not require care from state based tertiary mental health services.

This is delivered through a combination of GP-based mental health nursing services and standalone mental health nursing providers delivering an outreach model.

The current funded model provides:

- clinical care coordination
- recovery planning
- physical health care needs and metabolic monitoring
- support to families and significant others
- medication monitoring.

Opportunities to improve access for individuals across rural and remote areas of northern Queensland with telehealth will continue to be explored with providers.

NQPHN will ensure activity objectives are met by engaging providers on a minimum quarterly basis to monitor service deliverables, outcomes, and compliance. Meetings will include an opportunity to:

- obtain updates and discuss service performance indicators and reports
- understand service uptake, access issues, and opportunities for further service improvement.

NQPHN will work with providers to explore opportunities to develop communities of practice for providers across northern Queensland to further enhance the delivery of these services across the region.

Following the review of mental health stepped care more broadly, including services to those experiencing severe and complex mental health needs undertaken by Pricewater Coopers International Limited (PwC), NQPHN will undertake a period of codesign to inform commissioning of services across the mental health continuum from 1 July 2024. Should there be a need to transition services, a transition approach will be developed to ensure minimal disruption in client care.



## MH-8 – Regional mental health and suicide prevention plan

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### Activity priorities and description

#### Program key priority area

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

#### Aim of activity

NQPHN and the Torres and Cape, Cairns and Hinterland, Townsville, and Mackay Hospital and Health Services (HHSs), in partnership with the Queensland Health Mental Health Branch, have developed an evidence-based foundational strategy for joint regional mental health, alcohol and other drugs (AOD), and suicide prevention titled the Joint Regional Wellbeing Plan for Northern Queensland. It will guide the strategic direction for northern Queensland, in line with the national reform agenda, and be used for equitable planning and purchasing of place-based mental health, AOD, and suicide prevention programs, services, and integrated care pathways.

#### Description of activity

The Joint Regional Wellbeing Plan for Northern Queensland is a publicly available foundational plan, developed through wide consultation, which describes the key priority areas for mental health, AOD, and suicide prevention across northern Queensland. The implementation of this plan, including the development of a comprehensive plan, is being progressed by the Joint Regional Wellbeing Steering Committee.

The committee, made up of NQPHN, Mackay, Townsville, Cairns and Hinterland, and Torres and Cape HHSs, Queensland Health MHAOD Branch representatives, and representation from peak bodies, including Queensland Mental Health Commission (QMHC) and the Queensland Alliance for Mental Health (QAMH), is establishing a number of working groups focused on a region or priority area, to progress the identified actions for implementation. The Steering Committee reports to the Better Health North Queensland (BHNQ) Alliance and provides a mechanism to maximise opportunities for codesign, co-commissioning, and innovation.

A program officer provides senior support to the functioning of the working groups, coordination of key activities, and reporting which links to the comprehensive plan. Actions to be progressed are documented in the plan.



## MH-9 – Psychological therapies for people in RACFs

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### 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

To provide psychological treatment services for people living in residential aged care facilities (RACFs) who are currently 'hard-to-reach' due to lack of services and lack of GP incentives, such as the availability of Mental Health Treatment Plans in RACF settings.

#### Description of activity

NQPHN has commissioned Neami National to deliver psychological therapies into RACFs through subcontractor provision. The service was designed pre-COVID-19 and has not had the expected uptake.

NQPHN will undertake a process of codesign in partnership with RACFs, people with a lived experience, and service providers to develop an enhanced model for mental health services for people in RACFs. This will be done in partnership with the NQPHN Older Person's Team, HHS partners, and RACFs. A transition plan is being developed to ensure services are maintained whilst an alternative approach is developed and commissioned.

NQPHN will ensure activity objectives are met by engaging providers on a minimum quarterly basis to monitor service deliverables, outcomes, and compliance. Meetings will include an opportunity to:

- obtain updates and discuss service performance indicators and reports
- understand service uptake, access issues, and opportunities for further service improvement.



## MH-10 – Flood recovery

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### Activity priorities and description

#### Program key priority area

Mental Health.

#### Aim of activity

This activity provided community and clinical support to the regions affected by the February 2019 floods. NQPHN recruited two flood recovery positions, based in Townsville, to engage with and build resilience in the community and assist with health recovery activities.

NQPHN resourced the low intensity service, NQ Connect to provide 24/7 support and referral pathways to those affected by the floods in the period February 2019 to May 2020.

#### Description of activity

##### 10.1 Community engagement and capacity building resilience.

Two flood recovery coordinator positions were created to support the engagement and resilience coordination in the community.

##### 10.2 Health Service Improvement

This activity included the following:

- expanding social services staff PHA / mental health training
- identifying primary health care staff for disaster recovery training
- expanding the HealthPathways disaster module in Townsville and Cairns.



## MH-12 – headspace

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### Activity priorities and description

#### Program key priority area

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

#### Aim of activity

The aim of this activity is to improve access to mental health services and provide early intervention strategies for young people aged 12 to 25 years of age in North Queensland, who are at risk of developing or showing early signs of mental ill health, physical ill health, and/or alcohol and other drug problems.

#### Description of activity

NQPHN commissions lead organisations to deliver headspace services across the northern Queensland region. There are headspace services located in Mackay, Townsville, and Cairns that each deliver services aligned with the headspace model of care.

Activities include:

- A wait time reduction program that provides timely access to services for young people and supports long term sustainability of the headspace program.
- Suicide prevention support that provides assessment and treatment to young people who present with a risk to self.
- Outreach services to the Cairns and areas of Tablelands, and Cassowary Coast communities.
- Indigenous engagement activities.
- Dialectical Behaviour Therapy.
- Satellite activities in Sarina and Proserpine (Whitsundays).
- A youth complex program for youth experiencing complex needs.

NQPHN is currently overseeing the transition of lead agencies for the Townsville and Mackay (and satellite) services from Northern Australia Primary Health Limited (NAPHL) to Stride and North West Regional Health (NWRH). This activity involves supporting a transition governance arrangement and transition activities. The new lead agencies commenced services in early September 2022.

NQPHN will ensure activity objectives are met by engaging providers on a minimum quarterly basis to monitor service deliverables, outcomes, and compliance. Meetings will include an opportunity to:

- obtain updates and discuss service performance indicators and reports
- understand service uptake, access issues, and opportunities for further service improvement.

Additionally, NQPHN maintains a relationship with headspace National through attendance at organised forums and relevant meetings to enable the appropriate governance of contracts.

## MH-13 – Aftercare following a suicide attempt (The Way Back Support Service)

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### Activity priorities and description

#### Program key priority area

Mental Health.

#### Aim of activity

This activity aims to deliver non-clinical support services focused on providing practical psychosocial support to people who have attempted suicide or are experiencing a suicidal crisis.

#### Description of activity

NQPHN commissions a service provider, Wellways, to deliver The Way Back Support Service in partnership with Beyond Blue and the Carins and Hinterland HHS.

The service delivers non-clinical aftercare support to those that have attempted suicide or experienced a suicidal crisis, in partnership with clinical services. A non-clinical assertive outreach approach is used to ensure that support is patient-centred, accessible, and responsive to the needs of the individual. Clinical support through Carins and Hinterland HHS's Clinical Coordinator has been a recent enhancement to the service. Eligible people are referred to The Way Back Support Service for a period of three months following presentation at a hospital emergency department or community mental health service.

The program also aims to improve the capacity and capability of the workforce to support individuals at risk of suicide to self-manage distress and stay safe. Engagement of First Nations people is a key priority, with the service having two identified positions employed. The service is collaborating with ACCHOs to consider further opportunities to improve access to the service.

NQPHN will ensure activity objectives are met by engaging providers on a minimum quarterly basis to monitor service deliverables, outcomes, and compliance. Meetings will include an opportunity to:

- obtain project updates, including service provider expansion to communities identified in the contract and scope of works (as relevant)
- understand service uptake, access issues and opportunities for further service improvement. Local governance of the trial is achieved through the Cairns Suicide Prevention Aftercare Governance Group, made up of service providers, Carins and Hinterland HHS, Beyond Blue, and NQPHN representation. The group met monthly during establishment and have moved to meeting quarterly. The group reviews performance data and considers the service changes required to meet changing needs. National evaluation is being undertaken by the Nous Group, with a Beyond Blue representative providing updates on this work.

## MH-AMHCT-15 – Adult Mental Health Centre

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### Activity priorities and description

#### Program key priority area

Adult Mental Health.

#### Aim of activity

Provide adult mental health centres and services in line with departmental guidelines to provide a central point of clinical and non-clinical support and linkage within the community and provide an alternative to attending an emergency department for people experiencing distress.

#### Description of activity

NQPHN commissions Neami National as the lead agency for the Townsville Head to Health centre in accordance with the following principles:

- Responding to people experiencing crisis or distress.
- Providing a central point to connect people to other services in the region.
- Assessing people's needs using the Initial Assessment and Referral Decision Support Tool (IAR-DST) to match them to the services they require.
- Providing evidence-based and evidence-informed immediate and short to medium episodes of care in line with a best practice stepped care approach.
- Providing a highly visible and easily accessible entry point for adults into the mental health system.
- Providing on-the-spot treatment, advice, and support from a range of mental health professionals, without prior appointments or a fee.
- Providing an alternative to presenting to an emergency department for people through offering extended opening hours.
- Complementing rather than replacing or duplicating mental health services already provided in the community.
- Collaborating across the service sector to ensure the centre and other primary health services operate in an integrated way.
- Liaising with primary care services, public and private hospitals, general practitioners, Aboriginal Community Controlled Health Organisations and non-government and community organisations, including carers and consumers (people with a lived experience) and representatives in the ongoing implementation of the service.

NQPHN will ensure activity objectives are met by engaging with Neami National on a minimum quarterly basis to monitor service deliverables, outcomes, and compliance. Meetings will include an opportunity to:

- obtain updates and discuss service performance indicators and reports
- understand service uptake, access issues, and opportunities for further service improvement.



NQPHN is a member of the Townsville Head to Health Governance Committee, further supporting the implementation of the service.

NQPHN has partnered with the Cairns and Hinterland Hospital and Health Service (CHHHS) to establish Cairns Head to Health. A joint Governance Group has been formed and a joint codesign will be undertaken to inform the localised approach for the implementation of Cairns Head to Health.



## MH-16 – Stepped care approach – low to moderate intensity

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### Activity priorities and description

#### Program key priority area

Mental Health Priority Area: Stepped care approach.

#### Aim of activity

Ensuring access to the continuum of primary mental health care for those experiencing low to moderate intensity mental health difficulties, to meet the individual needs of the person through an integrated stepped care service across North Queensland.

#### Description of activity

NQPHN commissions Neami National to provide a central intake, assessment, and referral service across northern Queensland for all components of the stepped care model.

Intake and assessment services:

- Provided through Connect to Wellbeing (Neami National), with staff located in each of the three main centres of North Queensland (Cairns, Mackay, and Townsville).
- Utilise the national approach to intake and assessment for stepped care.
- Work with tertiary mental health services, GPs, and other stakeholders to facilitate seamless referral for people across the stepped care continuum based on need.

Psychological therapies:

- Neami National is commissioned to provide brief interventions and/or manage referrals to subcontracted providers to deliver psychological therapies for people with low to moderate mental health needs.
- Neami National coordinates regional service provider meetings that oversee this program and provide opportunities for subcontractor connections.
- Neami National has utilised telehealth psychiatry services to further enhance the services availability to those experiencing moderate to severe mental health problems, and to ensure governance for extended psychological therapies requests.

Low intensity services:

- No digital low intensity services are currently funded by NQPHN. This is an item of focus for the stepped care redesign, currently being undertaken, with future commissioning to be guided by the codesign process.

NQPHN will ensure activity objectives are met by engaging providers on a minimum quarterly basis to monitor service deliverables, outcomes, and compliance. Meetings will include opportunity to:

- obtain updates and discuss service performance indicators and reports
- understand service uptake, access issues, and opportunities for further service improvement.





NQPHN undertook a review of stepped care more broadly, and is currently engaging in codesign with the community, including people with a lived experience, service providers and HHSs to redesign mental health stepped care and improve access and integration across North Queensland. Future commissioning for 2024-25 will be determined by this codesign process, with a transition period allocated, if required, in the first half of 2024.



## MH-H2H-17 – Adult Mental Health Phone Intake

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### Activity priorities and description

#### Program key priority area

Mental Health Priority Area: Stepped care approach.

#### Aim of activity

Implement the National Phone Intake Service in northern Queensland and integrate this with other relevant services to provide seamless access to mental health care.

#### Description of activity

The Head to Health phone service provides navigation to direct people to services to meet their mental health needs.

In 2021-22, NQPHN commissioned Neami National to deliver the Head to Health phone service for northern Queensland. This arrangement allows for a direct interface between the intake, assessment, triage, and referral function for mental health stepped care services, and Townsville Head to Health, both of which are also delivered by Neami National.

NQPHN will ensure activity objectives are met by engaging Neami National on a minimum quarterly basis to monitor service deliverables, outcomes, and compliance. Meetings will include an opportunity to:

- obtain updates and discuss service performance indicators and reports
- understand service uptake, access issues, and opportunities for further service improvement and enhancement.

More broadly, NQPHN has commissioned an independent review of mental health stepped care services. A significant recommendation from this review was to redesign stepped care services across the region, with a focus on improving access, transitions in care, and integration. This work is currently underway and will inform commissioning of these services from 1 July 2024 onwards. Within this redesign process, NQPHN is working with HHS partners to consider opportunities to further connect NQPHN-funded intake and assessment services with the tertiary intake system to enhance integration of the service system.



## MH-18 – Initial Assessment and Referral Training and Support Officers

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### Activity priorities and description

#### Program key priority area

Mental Health Priority Area 7: Stepped care approach.

#### Aim of activity

Support the implementation and utilisation of the Initial Assessment and Referral Decision Support Tool (IAR-DST) tool within primary care through targeted training and support for general practitioners (GPs), clinicians, and service providers. A dedicated full time equivalent (FTE) Training Support Officer will deliver this work.

#### Description of activity

The program guidance for IAR Training and Support Officers (December 2021) guides this activity.

NQPHN employed one FTE Training and Support Officer with the education to enable them to facilitate training for the Initial Assessment and Referral Decision Support Tool (IAR-DST) across the northern Queensland region.

Training is targeted at GPs, other primary care clinicians, NQPHN-commissioned mental health service providers, and ACCHOs. The Training Support Officer will work with NQPHN's Primary Care Engagement Team, GP Liaison Officers, and contract managers to identify and engage clinicians, and deliver training.

Training will be delivered in-person and online, with GPs remunerated for their participation, in line with guidance.

Training Support Officers (TSOs) engage in national network meetings with other TSOs to support the implementation of this work.

## MH-19 – Targeted regional initiatives for suicide prevention

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### Activity priorities and description

#### Program key priority area

Mental Health Priority Area 5: Community-based suicide prevention activities.

#### Aim of activity

This activity aims to reduce suicide and self-harm within communities by developing a systems-based, community-led, and regional approach to suicide prevention and supports regional initiatives, informed by the successes of the National Suicide Prevention Trial. The Black Dog Institute's Lifespan Framework will guide this work. The aim is to engage the whole of community to enhance community wellbeing and ability to respond to social determinants of distress at the community level. The activity focuses on building partnerships with key stakeholders, including people with a lived experience of suicide, Hospital and Health Services (HHSs), service providers, and community members to codesign and implement whole of community responses for collective impact.

NQPHN will:


- provide coordination and support a whole of community approach to suicide prevention by supporting Suicide Prevention Community Action Plans (SPCAPs), community of practice, and collaborating with stakeholders, which include people with a lived experience of suicide, ACCHOs, HHSs, and others to ensure the needs of priority groups are considered in commissioning
- plan and commission activities informed by SPCAP priorities and emerging trends
- coordinate the work of suicide prevention at a whole of North Queensland level through the coordinator role of the Joint Regional Wellbeing Plan for Northern Queensland Steering Committee and any relevant working groups.

#### Description of activity

Through commissioning agencies, NQPHN will use a systems-based approach to ensure suicide prevention strategies are localised and multi-sectoral to lead the ongoing development and implementation of SPCAPs, commissioning activities aligned with SPCAP priorities, emerging trends, and commissioning suicide prevention training.

NQPHN commissions agencies to facilitate the development and implementation of SPCAPs in each of the four HHS regions in North Queensland; Townsville, Mackay, Carins and Hinterland, and Torres and Cape. SPCAP commissioned agencies facilitate collaborative groups made up of a diverse range of stakeholders and ensure local needs and issues are consistently reviewed and emerging concerns flagged for collective action. Commissioned agencies undertake a backbone role to support local networks, using the Black Dog Institute's (BDIs) Lifespan Framework to guide the development and review of SPCAPs. The SPCAPs lead agencies are supported through a community of practice, facilitated by the NQPHN Suicide Prevention Regional Response Coordinator.

These meetings provide an opportunity to share learnings and challenges and identify trends across northern Queensland. This group also provides input into the Joint Regional Wellbeing Plan for Northern Queensland Steering Committee which has key priority actions identified for suicide prevention.



Utilising the learnings of the National Suicide Prevention Trials, in 2023-24 NQPHN will develop, in partnership with key stakeholders, a strategic approach to suicide prevention that will include:

- Developing an enhanced understanding of measures of community wellbeing and distress that could support the early response at the community level.
- Exploring opportunities to connect and coordinate the range of grant funding available to communities to maximise community impact at a whole of government level.
- Commissioning community-based suicide prevention activities based on priorities emerging from SPCAPs, needs assessments, and Joint Regional Wellbeing Plan activity. These activities will focus on community-led, collective impact initiatives that are commissioned across the NQPHN region using resource allocation methodology which informs investment.

Finally, NQPHN commissions the delivery of suicide prevention training across northern Queensland, based on community identified need.

NQPHN will ensure activity objectives are met by engaging providers on a minimum quarterly basis to monitor service deliverables, outcomes, and compliance. Meetings will include an opportunity to:

- obtain updates and discuss service performance indicators and reports
- understand successes, challenges, and opportunities for further improvement.



## NSPT-1 – National Suicide Prevention Trial site extension

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### Activity priorities and description

#### Program key priority area

Mental Health Priority Area 5: Community based suicide prevention activities.

#### Aim of activity

Focus on a systems-based approach in the delivery of suicide prevention services at a local level. Identify sustainability options for the period beyond 2022. Develop and implement strategies to transition clients from individual or group services to other existing or planned services. Continue to gather evidence and participate in relevant data collection and evaluation activities.

#### Description of activity

The National Suicide Prevention Trial (NSPT) in the northern Queensland region, was conducted under the banner of Operation Compass, and developed strong links within the local ex-Australian Defence Force (ADF) community, health, social service providers, and throughout wider Townsville regional communities. The trial was conducted with an explicit objective to transition into a more enduring approach following the trial period and has sought to establish awareness of suicide prevention and linkage to services.

In Townsville, the new approach is a Veteran Wellbeing Centre, known as The Oasis Townsville, which unifies key services for veterans and their families in one place, simplifying access to required services and providing support. This holistic approach responds to the wide range of determinants which influence health. The work of the Operation Compass National Suicide Prevention Trial dovetails into this approach and expands the ability to successfully address complex areas requiring integration to reduce the potential of suicide.

The Centre has established connections with distinguished military supporters, a range of credible ex-service organisations, and an empathetic community. This facility provides a suitable vehicle for successful NSPT initiatives and opportunities to expand the range of evidence-based activities which collaboratively improve the welfare of ex-ADF community. The new centre is building sustainability considerations into all aspects to secure longevity of the approach with a focus on the key principles of transition, connection, and integration.

The Oasis Townsville absorbs several activities from Operation Compass campaigns in line with government expectations and Department of Health and Aged Care funding guidelines for this specific purpose.

A Health Advisory Committee will provide clinical oversight of health components and ensure quality, safe services are delivered and maintained.

A consolidation of the lessons learnt during the trial is being developed during transition and will be made available to The Oasis Townsville. Transition is also providing the opportunity to develop a focus for health promotion which will become embedded within future activities.

The development of strategies to safely transition clients from individual services to appropriate existing or planned services and activities are a priority and will continue to be implemented to maintain service continuity and support. At risk or vulnerable individuals are the highest priority. Referral pathways and networks of associated services will be harnessed to maximise the effectiveness of transition. Monitoring and reporting will be maintained to capture intelligence on all transition activities for all existing service users.



## CHHP-1 – headspace demand management and enhancement

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### Activity priorities and description

#### Program key priority area

Mental Health.

#### Aim of activity

This activity will further improve accessibility and responsiveness of headspace services by implementing targeted initiatives based on community need and feedback. This will increase the efficiency and effectiveness of primary mental health services for young people aged between 12 and 25 years with a, or at risk of, mental illness and improve access and integration of primary health care services to ensure young people with a mental illness receive the right care, in the right place, at the right time.

#### Description of activity

NQPHN commissioned the lead agency of headspace Cairns to:

- improve demand management through employment of additional staffing that targeted intake and triage, group, and brief intervention opportunities for young people
- enhance through refurbishment the headspace Cairns centre to accommodate additional staff and improve telehealth capability.

NQPHN will ensure activity objectives are met by engaging providers on a minimum quarterly basis to monitor service deliverables, outcomes, and compliance. Meetings will include an opportunity to:

- obtain updates and discuss service performance indicators and reports
- understand service uptake, access issues, and opportunities for further service improvement
- monitor with service providers the impact on waitlists.

NQPHN will commission the lead agency of headspace Mackay to:

- project manage the relocation of the headspace Mackay centre in consultation with headspace National
- ensure community and youth engagement in the process of relocation, including consideration of ensuring cultural safety in the new centre
- relocate to a larger site, which includes refurbishment and fit-out, as required, including a GP room.

NQPHN will ensure activity objectives are met by:

- attending regular project governance meetings, with NQPHN and headspace National both in attendance
- meeting with the lead agency at least quarterly to monitor contract deliverables.

