# Central Queensland, Wide Bay, Sunshine Coast - Commonwealth Psychosocial Support 2022/23 - 2026/27 Activity Summary View



# PAE - 160202 - CPS access enablers



### **Activity Metadata**

Applicable Schedule \*

Commonwealth Psychosocial Support

Activity Prefix \*

PAE

**Activity Number \*** 

160202

Activity Title \*

CPS access enablers

Existing, Modified or New Activity \*

Modified



## **Activity Priorities and Description**

Program Key Priority Area \*

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

**Other Program Key Priority Area Description** 

Aim of Activity \*

The aim of this activity is to ensure that consumers are linked into service supports in the region that match their service need, including support to link with available and suitable mental services and NDIS services in the region if/as eligible.

**Description of Activity \*** 

CCQ is undertaking a reform of its MAHDOSP service suite, including the Commonwealth Psychosocial Access Enablers. These activities will be seated in a broader framework of community based and recovery-oriented psychosocial services. Consultation for the reform demonstrated that there is a need for greater clarification around the role and scope of CPS programs, particularly in rural and remote communities. CCQ's investment in Access Enablers will boost quality service navigation and coordination for vulnerable community members.

- Service navigation
- Reform consultations demonstrated that service users who require CPS programs, particularly those in regional and rural settings, have had difficulty transitioning into other programs, through low awareness of what is available and or earnest service gaps. This activity aims to support sustainable and appropriate care levels for people with severe and complex mental illnesses.
- NDIS testing support
- As a means of enabling sustainable support for consumers with enduring psychosocial disability, stemming from mental illness, this activity intends to support the transition of consumers from the time-limited construct of community-based psychosocial programs to the NDIS. This is done through support with assessments and testing to determine eligibility and requirement.
- Capacity and strengths-based assessments
- The CPS program is inherently strengths-based and recovery oriented. As such, providers under the reform will develop their assessments and formulations through a capacity and strengths-based lens. The specific tools used to inform these assessments will be determined at the completion of the open tender process to identify the reform providers, however there will be assured alignment to evidence-based practices the CPSP's guidelines.
- Regional loading
- The CCQ region is defined by its sparse geography and size. Throughout the MAHODSP Reform consultation, a consistent topic was the difficulty of retaining rural and regional staff, and the financial impost of travelling to these communities. CCQ has embedded in the Reform service specifications for providers to apply regional loading as part of their service model. In its current iteration, the CPSP does not have regional loading, with local providers delivering the service.
- PHN operational
- CCQ will maintain existing commissioned service providers for Q1 of the 24-25 FY, while a transition process is undertaken to establish the reform providers and new models of care. Additionally, CCQ is running a concurrent open market tender to identify a strong research and evaluation partner to look at the life cycle of the reform initiative, with a remit to evaluate and provide recommendations on the efficacy and effectiveness of all reform activities, including the CPSAE. This will consider the impact on individual consumers as it relates to CPS Access Enablers, and more broadly against the intended macro-outcomes expected through the reform.

#### **Needs Assessment Priorities\***

#### **Needs Assessment**

2021-24 Health Needs Assessment

#### **Priorities**

Priority	Page reference
Mental Health	74



## **Activity Demographics**

#### **Target Population Cohort**

Adult mental health

In Scope AOD Treatment Type \*

Indigenous Specific \*

No

#### **Indigenous Specific Comments**

## Coverage

**Whole Region** 

Yes



# **Activity Consultation and Collaboration**

#### Consultation

In 2024 the PHN will undertake region wide consultation.

#### Collaboration

General practice
Allied health professionals
Hospital and Health Service
Primary health care providers
NGOs
Peak bodies
NDIS
Consumers and carers



# **Activity Milestone Details/Duration**

#### **Activity Start Date**

31/05/2019

**Activity End Date** 

29/12/2025

**Service Delivery Start Date** 

01/06/2019

**Service Delivery End Date** 

**Other Relevant Milestones** 



**Activity Commissioning** 

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

Not Yet Known: No

**Continuing Service Provider / Contract Extension:** Yes

**Direct Engagement:** No **Open Tender:** Yes

Expression Of Interest (EOI): No

Other Approach (please provide details): No

Is this activity being co-designed?

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

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

Yes

## **Decommissioning details?**

Decommissioning Partial. As a result of the reform open tender, existing providers will enter a transition period during Q1 of 24-25FY.

Co-design or co-commissioning comments



## **Activity Planned Expenditure**

## **Planned Expenditure**

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27
Psychosocial Access Enablers	\$0.00	\$3,837,150.00	\$1,498,241.00	\$0.00	\$0.00

#### **Totals**

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27	Total
Psychosocial Access Enablers	\$0.00	\$3,837,150.00	\$1,498,241.00	\$0.00	\$0.00	\$5,335,391.00
Total	\$0.00	\$3,837,150.00	\$1,498,241.00	\$0.00	\$0.00	\$5,335,391.00

# Funding From Other Sources - Financial Details

**Funding From Other Sources - Organisational Details** 



# **Summary of activity changes for Department**

## **Activity Status**

Ready for Submission



# PAE - 160205 - CPS Psychosocial Access Enablers - Interest



## **Activity Metadata**

#### Applicable Schedule \*

Commonwealth Psychosocial Support

**Activity Prefix \*** 

PAE

**Activity Number \*** 

160205

**Activity Title \*** 

CPS Psychosocial Access Enablers - Interest

Existing, Modified or New Activity \*

Existing



## **Activity Priorities and Description**

## Program Key Priority Area \*

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

#### Other Program Key Priority Area Description

#### Aim of Activity \*

The aim of this activity is to ensure that consumers are linked into service supports in the region that match their service need, including support to link with available and suitable mental services and NDIS services in the region if/as eligible.

#### Description of Activity \*

CCQ is undertaking a reform of its MAHDOSP service suite, including the Commonwealth Psychosocial Access Enablers. These activities will be seated in a broader framework of community based and recovery-oriented psychosocial services. Consultation for the reform demonstrated that there is a need for greater clarification around the role and scope of CPS programs, particularly in rural and remote communities. CCQ's investment in Access Enablers will boost quality service navigation and coordination for vulnerable community members.

- Service navigation
- Reform consultations demonstrated that service users who require CPS programs, particularly those in regional and rural settings, have had difficulty transitioning into other programs, through low awareness of what is available and or earnest service gaps. This activity aims to support sustainable and appropriate care levels for people with severe and complex mental illnesses.
- NDIS testing support
- As a means of enabling sustainable support for consumers with enduring psychosocial disability, stemming from mental illness,

this activity intends to support the transition of consumers from the time-limited construct of community-based psychosocial programs to the NDIS. This is done through support with assessments and testing to determine eligibility and requirement.

- Capacity and strengths-based assessments
- The CPS program is inherently strengths-based and recovery oriented. As such, providers under the reform will develop their assessments and formulations through a capacity and strengths-based lens. The specific tools used to inform these assessments will be determined at the completion of the open tender process to identify the reform providers, however there will be assured alignment to evidence-based practices the CPSP's guidelines.
- Regional loading
- The CCQ region is defined by its sparse geography and size. Throughout the MAHODSP Reform consultation, a consistent topic was the difficulty of retaining rural and regional staff, and the financial impost of travelling to these communities. CCQ has embedded in the Reform service specifications for providers to apply regional loading as part of their service model. In its current iteration, the CPSP does not have regional loading, with local providers delivering the service.
- PHN operational
- CCQ will maintain existing commissioned service providers for Q1 of the 24-25 FY, while a transition process is undertaken to establish the reform providers and new models of care. Additionally, CCQ is running a concurrent open market tender to identify a strong research and evaluation partner to look at the life cycle of the reform initiative, with a remit to evaluate and provide recommendations on the efficacy and effectiveness of all reform activities, including the CPSAE. This will consider the impact on individual consumers as it relates to CPS Access Enablers, and more broadly against the intended macro-outcomes expected through the reform.

#### Needs Assessment Priorities \*

#### **Needs Assessment**

2021-24 Health Needs Assessment

#### **Priorities**

Priority	Page reference
Mental Health	74



## **Activity Demographics**

#### **Target Population Cohort**

Adult mental health

In Scope AOD Treatment Type \*

Indigenous Specific \*

No

**Indigenous Specific Comments** 

#### Coverage

Whole Region

Yes



# **Activity Consultation and Collaboration**

#### Consultation

In 2024 the PHN will undertake region wide consultation.

#### Collaboration

General practice Allied health professionals Hospital and Health Service Primary health care providers NGOs Peak bodies

Consumers and carers



NDIS

# **Activity Milestone Details/Duration**

#### **Activity Start Date**

31/05/2019

**Activity End Date** 

29/12/2025

**Service Delivery Start Date** 

01/06/2019

**Service Delivery End Date** 

**Other Relevant Milestones** 



# **Activity Commissioning**

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

Not Yet Known: No

Continuing Service Provider / Contract Extension: Yes

**Direct Engagement:** No **Open Tender:** Yes

Expression Of Interest (EOI): No

Other Approach (please provide details): No

## Is this activity being co-designed?

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

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** 

Yes

## **Decommissioning details?**

Decommissioning Partial. As a result of the reform open tender, existing providers will enter a transition period during Q1 of 24-25FY.

**Co-design or co-commissioning comments** 



# **Activity Planned Expenditure**

#### **Planned Expenditure**

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27
Psychosocial Access Enablers	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Interest - Commonwealth Psychosocial Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

#### **Totals**

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27	Total
Psychosocial Access Enablers	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Interest - Commonwealth Psychosocial Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

**Funding From Other Sources - Financial Details** 

Funding From Other Sources - Organisational Details



# **Summary of activity changes for Department**

## **Activity Status**

Ready for Submission



# PSD - 160201 - CPS Service Delivery



## **Activity Metadata**

#### Applicable Schedule \*

Commonwealth Psychosocial Support

**Activity Prefix \*** 

PSD

**Activity Number \*** 

160201

Activity Title \*

**CPS Service Delivery** 

Existing, Modified or New Activity \*

Modified



## **Activity Priorities and Description**

#### Program Key Priority Area \*

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

#### Other Program Key Priority Area Description

#### Aim of Activity \*

Address the gap for individuals with a severe mental illness and an associated level of reduced psychosocial functional activity that the NDIS is not designed to support regarding their needs and development of their psychosocial capacity.

Enable individuals with a severe mental illness to live more independently and achieve their recovery goals.

## **Description of Activity \***

This activity focusses on the delivery of outcomes focussed and measured individual and group capacity building services for people with severe mental illness, aimed at preventing avoidable presentations to acute health services through optimal use of the primary health system. Service delivery will continue to be a combination of tailored individual capacity building activities, provided in the community, and centre-based group capacity activities.

CCQ is undertaking an open market tender to reform its MHAODSP services in the 24-25 FY, which includes the reimagining of CPS service delivery. Instead of being implemented by a myriad of place-based services, with bespoke administrative and governance capabilities, the intent of the reform is to maintain locally delivered CPS programs but unified under a consistent governance structure for the region. The need for more consistent service governance was identified through robust community consultation undertaken in the 23-24FY. Noting the CCQ region is diverse in need and geography, awarded providers under the reform will be required to co-design service models with local communities in the 24-25 FY.

CCQ will maintain existing commissioned service providers for Q1 of the 24-25 FY, while a transition process is undertaken to establish the reform providers and new models of care. Additionally, CCQ is running a concurrent open market tender to identify a strong research and evaluation partner to look at the life cycle of the reform initiative, with a remit to evaluate and provide recommendations on the efficacy and effectiveness of all reform activities, including the CPSP. This will consider the impact on individual consumers as it relates to CPS service delivery, and more broadly against the intended macro-outcomes expected through the reform. The exact measures and approaches to this evaluation will not be known until the contract is awarded, however.

The specific models, locations, and tools used to support community members accessing CPS Programs will be determined in the evaluation and award of the current open market tender process. The earlier consultations, however, demonstrated that delivery of the CPS Program would require a clear approach to the pathways into and out of this stream of care. Particularly in rural and regional communities, where alternative programs may be difficult to access or not exist at all.

#### **Needs Assessment Priorities \***

#### **Needs Assessment**

2021-24 Health Needs Assessment

#### **Priorities**

Priority	Page reference
Mental Health	74
System Integration and Collaboration	149



## **Activity Demographics**

#### **Target Population Cohort**

People with severe mental illness who are not receiving assistance through the NDIS.

In Scope AOD Treatment Type \*

Indigenous Specific \*

No

**Indigenous Specific Comments** 

#### Coverage

Whole Region

Yes



## **Activity Consultation and Collaboration**

#### Consultation

In 2024 the PHN will undertake region wide consultation.

#### Collaboration

General practice

Allied health professionals

Hospital and Health Service

Primary health care providers

NGOs

Peak bodies

**NDIS** 

Consumers and carers



# **Activity Milestone Details/Duration**

#### **Activity Start Date**

31/05/2019

#### **Activity End Date**

29/12/2025

#### **Service Delivery Start Date**

01/07/2019

## **Service Delivery End Date**

#### **Other Relevant Milestones**



# **Activity Commissioning**

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

Not Yet Known: No

**Continuing Service Provider / Contract Extension:** Yes

**Direct Engagement:** No **Open Tender:** 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?

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

No

Decommissioning

Yes

**Decommissioning details?** 

Decommissioning Partial. As a result of the reform open tender, existing providers will enter a transition period during Q1 of 24-25FY.

Co-design or co-commissioning comments



# **Activity Planned Expenditure**

## **Planned Expenditure**

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27
Psychosocial Service Delivery	\$0.00	\$4,032,222.00	\$3,656,951.00	\$0.00	\$0.00

#### **Totals**

Funding Stream	FY 22 23	FY 23 24	FY 24 25	FY 25 26	FY 26 27	Total
Psychosocial Service Delivery	\$0.00	\$4,032,222.00	\$3,656,951.00	\$0.00	\$0.00	\$7,689,173.00
Total	\$0.00	\$4,032,222.00	\$3,656,951.00	\$0.00	\$0.00	\$7,689,173.00

**Funding From Other Sources - Financial Details** 

**Funding From Other Sources - Organisational Details** 



# **Summary of activity changes for Department**

## **Activity Status**

Ready for Submission