



Australian Government

Department of Health



An Australian Government Initiative

Primary Health Networks
– *National Psychosocial Support measure*
2018-2019 Activity Work Plan

Country WA PHN

Introduction

Overview

The key objectives of Primary Health Networks (PHN) are:

- increasing the efficiency and effectiveness of medical services for patients, particularly those at risk of poor health outcomes;
- improving coordination of care to ensure patients receive the right care in the right place at the right time.

The purpose of the **National Psychosocial Support (NPS) measure** is to provide psychosocial support services to assist people with severe mental illness resulting in reduced psychosocial functional capacity who are not more appropriately supported through the National Disability Insurance Scheme (NDIS). These services, in partnership with families and carers (as appropriate), will provide a range of non-clinical community-based support to these individuals to achieve their recovery goals. The NPS measure is being implemented through purpose specific funding to [Primary Health Networks \(PHNs\)](#) to commission these new services.

The objectives of the measure are to:

- support people with severe mental illness and associated psychosocial functional impairment who are not more appropriately supported through the NDIS;
- improve access to psychosocial support services, mental health outcomes and equity in service availability for the target cohort (only relevant to PHNs based in Queensland);
- reduce the avoidable need for more intense and acute health services and enhance appropriate/optimal use of the health system.

These objectives will be achieved through:

- providing for a regional approach that would target psychosocial support services to individual needs, creating flexible, efficient service delivery. Service types may include individual and group support and rehabilitation and peer work.
- improving service coordination for individuals with severe mental illness and associated psychosocial functional impairment, while taking into account supports available across levels of governments, the community and relevant sectors.
- being consistent with the priorities and objectives of the Fifth National Mental Health and Suicide Prevention Plan.
- being focused on psychosocial support services with the aim of contributing to improvements over time in:
 - identification of, and provision of services and outcomes for, people with a severe mental illness and associated psychosocial functional impairment, including those with complex needs, who are not more appropriately funded through the NDIS;
 - more seamless, high quality and earlier psychosocial supports;
 - the efficiency and effectiveness of psychosocial support services across care settings.

As part of this measure, the Commonwealth has bilateral agreements with each jurisdiction regarding their continuing or enhanced investment in psychosocial services. The PHN commissioned services will need to be implemented in a flexible way to complement the State and Territory funded psychosocial support. Further, PHNs will need to consider the services that are currently provided locally by Local Health Networks, ensuring that the PHN commissioned services complement or enhance these existing services and consider how these services can meet the need of their region.

PHNs are required to outline planned activities, milestones and outcomes to provide the Australian Government with visibility as to the activities expected to be undertaken by PHNs. The Activity Work Plan must:

- detail the establishment and implementation phases of the NPS measure in your region.
- demonstrate to the Australian Government what the PHN is going to achieve and how the PHN plans to achieve this.
- be developed in consultation with State/Territory agencies, Non-Government Organisations, Local Health Networks, the Mental Health Commission, mental health consumers and carers and other stakeholders, as appropriate.

Planned activities funded under the Activity – *National Psychosocial Support measure*

Proposed Activities	
Proposed Activities	Description
Activity Title	1: Developing and implementing a Planning and Procurement Framework for the National Psychosocial Support (NPS) Measure
Description of Activity	<p>Aim</p> <ul style="list-style-type: none"> Procure services to support people with a severe mental illness and associated psychosocial functional impairment who are not more appropriately supported through the National Disability Scheme (NDIS). Reduce the avoidable need for more intense and acute health services and enhance appropriate/optimal use of the mental health system for people with severe mental health. <p>Establishing NPS Planning and Procurement Framework: From July to December 2018</p> <ul style="list-style-type: none"> Undertake a detailed needs assessment to identify the potential NPS Measure cohort magnitude within Country Western Australia (WA) PHN Ascertain the psychosocial support needs of this cohort Undertake service mapping to identify psychosocial services and supports currently available. Undertake a level of key stakeholder consultation to support the needs assessment in accordance with the Communication and Stakeholder Engagement Plan. Develop a detailed commissioning intentions document that describes the type of psychosocial supports to be commissioned, the outcomes and outputs for the services, entry criteria and referral pathways, reporting and data management arrangements. Instigate an appropriate procurement process to commission providers to deliver psychosocial support services.

	<ul style="list-style-type: none"> • Under the direction of the Project Control Group, the Procurement Working Group – will consider commissioning options which may include in some areas sole provider procurement and in others, consortia or a public expression of interest. <p>Implementation of Planning and Procurement Framework: From January to June 2019</p> <ul style="list-style-type: none"> • Commission and support providers to implement entry criteria and referral pathways and to develop reporting and data management processes. • The PHN will work closely with WA Country Health Service and the Mental Health Commission to ensure that eligible people supported through the state specialised mental health system receive psychosocial supports through either the NPS Measure and/or state funded psychosocial supports as outlined in the National Psychosocial Support Measure Bilateral Agreement between the Australian Government and the WA Government. • The PHN will also work with relevant peak bodies and consumer and carer networks to ensure the commissioned activities respond to their identified needs.
Measuring Outcomes/Data Collection and Storage	<p>Outcome</p> <ul style="list-style-type: none"> • NPS measure services are commissioned, that meet the identified needs of the target group. <p>Measuring Outcomes- Planning and Procurement Framework:</p> <ul style="list-style-type: none"> • Needs assessment and service mapping completed. • Commissioning Intentions document developed • The % of funds commissioned within the negotiated timeframe for WA. • contracts executed by due date. <p>Measuring Outcomes – Implementation of the Planning and Procurement Framework</p> <p>Once services are contracted the PHN will begin to focus on managing the performance of contracted providers including reviewing/monitoring and evaluating services taking into account the requirements of the Commonwealth’s Performance and Quality Framework to determine:</p>

	<ul style="list-style-type: none"> • How well targeted and efficient services are - using a diverse range of data collection methods (i.e. provider reports, referral agency feedback, participant opinion) for each of the commissioned services will provide the PHN with the information to: <ul style="list-style-type: none"> ○ Assess improvements to individual circumstances. ○ Help shape future service provision and/or seek alternative commissioning activity. ○ Determine the degree to which those in receipt of services reflect targeted populations • How effective services and systems are in relation to: <ul style="list-style-type: none"> ○ Client experience ○ Client impact ○ Service/system integration ○ Service sustainability including provider experience/governance. <p>The PHN will evaluate the performance of services and determine whether and to what extent a reshaping of the structure of supply is required using Outcome Maps, provider and client reported outcomes and other relevant data.</p> <p>Data Collection Storage:</p> <ul style="list-style-type: none"> • Client data will be entered into the PMHC MDS. • WAPHA's contracts management system will hold all relevant contract information.
Consultation/Collaboration/Communication	<p>Governance and Oversight of the NPS Measure</p> <ul style="list-style-type: none"> • The establishment of the NPS Measure in Western Australia will be overseen by a PHN Project Control Group and supported by a PHN Reference Group. • The Project Control group will oversee the direction and operation of the project. • The Project Control Group includes a senior member of the WA Mental Health Commission to ensure strong linkages to WA State commissioning as required under the bi-lateral between the State and Commonwealth Governments. • A project team will have a dedicated Project Manager and will report to the Project Control group. • The group will have two working groups one for Planning and one for Procurement. <p>Consultation</p>

	<p>An external reference group will provide the primary vehicle for consultation with key stakeholders and will include:</p> <ul style="list-style-type: none"> • Health Service Providers (HSP), including WA County Health Services • WA Association for Mental Health (WAAMH); • National Disability Insurance Agency (NDIA) and • representatives from consumer and carer networks including Consumers of Mental Health WA, and Carers WA. <p>The reference group will provide high level advice in the development of the NPS Measure, access to relevant networks to support the needs assessment and will support a consistent communication message.</p> <p>Across regional areas consultations will be undertaken with stakeholders at the local level including but not limited to:</p> <ul style="list-style-type: none"> • NGOs • WACHS • District Health Advisory Councils • Aboriginal Health Planning Forums and their Mental Health sub-committees • Carers and Consumers • GPs • WAPHA online engagement platform - Primary Health Exchange - will also be used to engage with communities. <p>Collaboration</p> <ul style="list-style-type: none"> • Country WA PHN will collaborate with the WA Mental Health Commission and the WA Country Health Service to ensure that the services funded through the NPS Measure complement the psychosocial support services available through the state government as outlined in the Bilateral Agreement and to facilitate the establishment of appropriate information sharing and reporting protocols to support reporting on the effectiveness and impact of the NPS Measure. <p>Communication</p>
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	<ul style="list-style-type: none"> The Project Control Group has developed and will implement a Communication and Stakeholder Engagement Plan. The plan will articulate key messages regarding the NPS measure, identify key stakeholder groups and outline how information will be distributed and stakeholders engaged for the establishment and implementation phase of the project.
Timeline	<p>Establishment Phase</p> <ul style="list-style-type: none"> Includes needs assessment and service mapping and development of commissioning framework: June 2018 to January 2019 <p>Implementation Phase</p> <ul style="list-style-type: none"> Includes commissioning of services to be in place and available from January 2019 <p>Final Report</p> <ul style="list-style-type: none"> September 2021
Risk Management	<p>Risks</p> <p>The Project control group will identify risks and develop risk mitigation strategies through its working groups.</p> <ul style="list-style-type: none"> A major risk will be underestimating the size of the population of the NPS Measure: <ul style="list-style-type: none"> Identifying the number of people with severe mental illness and associated psychosocial functional impairment who are not more appropriately supported through the NDIS will help to identify the target group for the NPS measure. The timeline for implementing the project is short. <p>Mitigation Strategy</p> <ul style="list-style-type: none"> Negotiate new time frames with the Commonwealth Community consultation to assist with identifying areas of highest need.

Proposed Activities	
Proposed Activities	Description

Activity Title	2. Establish PHN Fund Holding Role for PIR
Description of Activity	<p>Aim</p> <ul style="list-style-type: none"> Contract and manage the grant and contract administration processes for the Partners in Recovery (PIR) Lead Agency in PIR South West WA and Goldfields/Midwest. <p>Contract Negotiation</p> <ul style="list-style-type: none"> Country WA PHN Project Officers are members of the PIR consortia by 1st December 2018 Meet with and prepare a contract with 360 Health + Community and Chorus for the existing funding amount as per WAPHA contracting format. The contract will be in accordance with the Psychosocial Support schedule and the existing PIR Guidance. The contract will take into account the PIR activity plan including related reporting requirements. Data collection and storage will be identified as per the Commonwealth's and WAPHA's requirements and included in the contract.
Measuring Outcomes/Data Collection and Storage	<p>Outcomes</p> <ul style="list-style-type: none"> Contract established. Relationship with NDIA established <p>Data Collection</p> <ul style="list-style-type: none"> Agency provides 6 month and 12 month reports in keeping with Commonwealth and WAPHA reporting requirements. <p>Storage: as per current WAPHA systems and processes.</p>
Consultation/Collaboration/Communication	<p>Governance is outlined in Activity 1.</p> <p>Country WA PHN will collaborate with the PIR lead agencies (360 Health + Community and Chorus) and the consortia members to facilitate the contracting of PIR services.</p>
Timeline	The contract will be executed with 360 Health + Community and Chorus from 1 December 2018.
Risk Management	Key Risks

	<ol style="list-style-type: none"> 1. Sub-contract finalisation not completed by due date. 2. Lead agencies not prepared to continue with service provision. <p>Mitigation strategies</p> <ul style="list-style-type: none"> • Close project management through the Project Plan and PCG. • Transition officers closely monitoring the contract development and execution. • Support provided to lead agencies to continue programs.
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Proposed Activities	
Proposed Activities	Description
Activity Title	3: Transition eligible clients to NDIS and remaining clients to the Continuity of Support Arrangement
Description of Activity	<p>Aim</p> <ul style="list-style-type: none"> • Maintain service continuity for all clients of Partners in Recovery (PIR) • Assist in the transition of eligible clients to NDIS from PIR <p>Establishing Relationship with PIR: June to November 2018</p> <ul style="list-style-type: none"> • Become a member of the two WA Country PIR Consortia. • Work with the consortia members to gain an understanding of the NDIS transition process and the needs of clients who will require Continuity of Support. • Engage with the NDIA. <p>Transition of NDIS clients: December 2018 to June 2019</p> <ul style="list-style-type: none"> • Where possible support the transition of eligible clients and funding from the PIR to the NDIS by supporting the lead agency in implementing their transition activity (as identified in their Partners in Recovery Initiative 2018-19 Annual Activity Work Plan). <p>Identification and Support of Continuity of Support clients: December 2018 to June 2019</p> <ul style="list-style-type: none"> • Work with the PIR to undertake an assessment of PIR clients that will need continuity of support

	<ul style="list-style-type: none"> Through the Project Control Group and Reference Group work to identify procurement approaches appropriate to the seven Country WA Regions. Country WA RCCCs and Country Community Advisory Committees will also inform local procurement methods.
Measuring Outcomes/Data Collection and Storage	<p>Outcomes</p> <ul style="list-style-type: none"> Clients eligible for the NDIS are identified. Clients requiring continuity of support and their service needs identified. Clients supported to transition to NDIS or Continuity of Support <p>As outlined above once services are contracted the PHN will begin to focus on managing the performance of contracted providers including reviewing/monitoring and evaluating services taking into account the requirements of the Commonwealth's Performance and Quality Framework to determine:</p> <ul style="list-style-type: none"> How well targeted and efficient services are, and How effective services and systems are in relation to: <ul style="list-style-type: none"> Client experience Client psycho social outcomes Service/system integration Service sustainability including provider experience/governance. <p>The Needs Assessment may help to identify long term expected outcomes and possible performance measures. This will inform the Outcome Maps which will be negotiated with service providers. These maps will include a suite of required and optional indicators across the four outcome domains of client experience, clinical outcomes, service/system integration and service sustainability.</p> <p>The PHN will evaluate the performance of services and determine whether and to what extent a reshaping of the structure of supply is required using the Outcome Maps, provider and client reported outcomes and other relevant data.</p> <p>Data Collection Storage</p>

	<ul style="list-style-type: none"> Client data will be entered into the PMHC MDS as appropriate domains are added to the Data Set. WAPHA's contracts management system will hold all relevant contract information.
Consultation/Collaboration/Communication	<p>Governance and Oversight</p> <ul style="list-style-type: none"> The transition of PIR clients in Western Australia will be overseen by a Project Control Group <p>Collaboration</p> <p>In addition to the information provided in Activity 1:</p> <ul style="list-style-type: none"> Country WA PHN will also collaborate with the PIR consortia and the NDIA to support the transition of existing PIR clients to the NDIS where eligible, or to the Continuity of Support (CoS) program <p>Consultation</p> <ul style="list-style-type: none"> Attend Co-Design workshop in November 2018- as suggested by Department of Health <p>Communication</p> <ul style="list-style-type: none"> As per Activity 1
Timeline	<p>Establishment</p> <ul style="list-style-type: none"> Establishing Relationship with PIR: January 2018- June 2019 Identification/transition of NDIS clients: November 2018 to June 2019 Identification/Support of Continuity of Support clients: November 2018 to June 2019. <p>Implementation</p> <ul style="list-style-type: none"> PIR providers prepared for transition of clients to Continuity of Supports. <p>Final Report</p> <ul style="list-style-type: none"> September 2019
Risk Management	<p>Risks</p> <p>A comprehensive Risk Management Plan will inform the project. Identified risks include:</p>

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| | <ul style="list-style-type: none">• Additional arrangements will be required in the Midwest and Great Southern where NDIS roll out is not scheduled to occur until the 1 July 2019• Timelines for implementing the project are short• The PIR program will cease on the 30 June 2019, one day before the rollout of NDIS in many WA areas |
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Mitigation Strategy

- Work closely with the NDIA, PIR Lead agencies.
- Negotiate new time frames with Commonwealth.