



# Perth North PHN Activity Work Plan

## Community Health & Hospitals Program

**Summary View**  
**2022/2023 – 2025/26**

**Presented to the Australian Government Department of Health  
and Aged Care**

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# CHHP 1000 – Primary Healthcare Hubs - Wanneroo

## Funding Schedule

Primary Mental Health Care

### Activity Title

Primary Healthcare Hubs - Wanneroo

### Activity Number

1000

### Activity Status

Modified

### PHN Program Key Priority Area

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

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## Aim of Activity

To establish Local Primary Healthcare Hubs in the Wanneroo Local Government Area (LGA), to enhance primary care capacity to respond to mental health and drug and alcohol issues; and strengthen service capacity in the community to link with acute services to facilitate timely discharge and continuity of care.

This activity will also aim to alleviate the inequitable impact of treatment burden on a patient living with complex health needs, reduce service fragmentation, enhance care navigation, and decrease referral failure rates and treatment dropouts.

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## Description of Activity

To develop and implement primary healthcare hubs offering both treatment and treatment support services for those who are at risk of or living with mental health and/or alcohol and other drug problems and who have few personal resources.

Rather than simply increasing specialist provision, the establishment of the local Primary Healthcare Hubs will enable the strengthening and expansion of the generalist base by providing horizontal integration to support general practice and allied health services. This will reduce system fragmentation as the general practitioner and a nurse generalist are the primary patient contact, able to access specialist support as needed. Moreover, generalists are far better able to adapt their practice to the changing and multimorbid needs of the target group their community.

The service is established and includes:

- A small, self-managed team of nurse generalists supporting general practitioners and their patients, particularly those who have poor informal resources to engage with and maintain treatment. Essential to the team’s functioning, they connect with non-government organisations and other providers in the local community, such as alcohol and other drug services, who can be brought in, as necessary.
- Enhanced treatment support within the formal system for those who lack the personal resources necessary to equitably engage with care effectively.
- Engagement activities for general practitioners, practice managers and nursing staff including professional development and networking opportunities.

Perth North PHN will ensure that effective monitoring and evaluation systems and processes based on analysis of Primary Mental Health Care-Minimum Data Set (PMHC-MDS) data in relation to the proportion of the regional population receiving commissioned services for people with severe and complex mental illness including care packages, clinical outcomes of these services, average cost of the low intensity interventions peer service contact and episode of care, completion rates for the clinical outcome measures reported in the PMHC- MDS. The approach taken by the PHN to capture this data includes formally training new commissioned service providers in the collection and submission of data to the PMHC-MDS, in accordance with the PMHC-MDS Specifications and Data Definitions and directing the service providers to the suite of support resources available.

PHN recognises the impact COVID-19 had on the community, primary health care and commissioned service activity. With services having returned, monitoring and service impact assessment will continue, to ensure the PHN continues to meet the aims of the activity and the needs of the priority target groups.

## Perth North PHN Needs Assessment

<b>Priorities</b>	<b>Page reference</b>
Increase access to early screening and treatment for harmful alcohol use	27
Promote integration and coordinated care pathways for clients with mental health condition and harmful alcohol and other drug use.	27
Support primary health care providers to manage chronic disease populations and build capacity for patient self-management	11

Increase access to low cost- local mental health services in outer-suburbs and areas with limited-service availability but high demand.	18
Support Aboriginal people to navigate the primary care system and access appropriate services.	34

### Target Population Cohort

This activity is targeted to individuals:

- Aged 18 years or over.
- Experiencing multi-morbidity together with mental health and/or alcohol and other drug problems as determined by their referring general practitioner.
- Experiencing barriers to engaging effectively with health care, as determined by their referring general practitioner.

### Coverage

Local government area of Wanneroo within Perth North PHN

### Consultation

Engagement will continue to occur with general practices within the region to increase awareness of, and referrals into the service.

### Activity Duration

#### Activity Start Date

1 January 2020

#### Activity End Date

31 December 2025

### Activity Planned Expenditure

Funding Stream	FY 22 23	FY 23 24	FY 24 25
CHHP – Primary Healthcare Hubs	\$2,886,480.00	\$1,250,000.00	\$209,200.00

# CHHP 2000 – headspace Demand Management and Enhancement Program

## Funding Schedule

Primary Mental Health Care

## Activity Title

headspace Demand Management & Enhancement Program

## Activity Number

2000

## Activity Status

Modified

## PHN Program Key Priority Area

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

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## Aim of Activity

To increase the efficiency and effectiveness of primary mental health services for young people aged 12 to 25 with, or at risk of, mental illness by:

- Improving data collection and reporting on headspace wait times.
  - Improving access to and integration of primary mental health care services, to ensure young people with mental illness receive the right care in the right place at the right time by reducing wait times for clinical services at designated headspace centres for young people with the highest need.
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## Description of Activity

This activity is part of the headspace Wait Time Reduction Program which:

- Identifies existing headspace services experiencing high wait times for clinical services and develops and implements activities and initiatives to assist in reducing these wait times.
- Supports the long-term sustainability of the headspace program by improving access to services, appropriately managing demand, and improving the health outcomes of young people aged 12 to 25 with, or at risk of, mental illness, and their families.
- Increases access to clinical support through a dedicated online support service for young people in areas experiencing increased demand (provided by headspace National).
- Improves data collection and reporting on headspace wait times to support

planning, research, and analysis of headspace service demand.

The following activities will occur:

- i. headspace Mandurah
  - Recruit a Community Engagement Officer to promote and support the brief intervention program.
  - Recruit a Program Lead to be trained in intervention and coordinate its delivery within the centre.
  - Provide a stipend for a PHD student to undertake evaluation of the intervention program.
- ii. headspace Rockingham
  - Recruit a Community Engagement Officer to promote and support the brief intervention program.
  - Recruit a Program Lead to be trained in intervention and coordinate its delivery within the centre.
  - Provide a stipend for a PHD student to undertake evaluation of the intervention program.

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## Perth North PHN Needs Assessment

### Priorities

### Page reference

Ensure integrated and stepped care services are available for people experiencing mental health issues, including younger people.	18
Increase access to low cost- local mental health services in outer-suburbs and areas with limited-service availability but high demand.	18
Improve access to early intervention suicide prevention services.	18

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### Target Population Cohort

This activity is targeted to individuals:

- Young people aged 12 –25

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### Coverage

Local government areas of Mandurah and Rockingham within Perth North PHN

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**Activity Duration**

**Activity Start Date**

1 July 2021

**Activity End Date**

30 June 2025

**Activity Planned Expenditure**

<b>Funding Stream</b>	<b>FY 22 23</b>	<b>FY 23 24</b>	<b>FY 24 25</b>
CHHP – headspace Wait Time Reduction Program	\$487,050.13	\$558,057.99	\$560,057.00



# CHHP 3000 – Choices Expansion

## Funding Schedule

Primary Mental Health Care

### Activity Title

Choices Expansion

### Activity Number

3000

### Activity Status

Modified

### PHN Program Key Priority Area

Mental Health Priority Area 7: Stepped care approach

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## Aim of Activity

To improve the health and wellbeing of people at risk of poor health outcomes and difficulty accessing appropriate services who have frequent contact with hospital emergency departments by linking these individuals, who would previously be discharged to their own recognisance, with place-based community service providers. A key aspect of the service is the utilisation of peer workers and connecting service users to general practice.

The Choices mental health program is for people with moderate and, in some cases, severe mental illness and is targeted at those who lack the resources (material and non-material) to manage “acute” personal difficulties and, as a result, enter the healthcare system as “crisis” or “social care” presentations, characterised by:

- insufficient informal personal supports to manage crises
- mild, moderate and, in some cases, severe mental illness
- significant associated functional impairment (days out of role)
- Alcohol and other Drug comorbidity/intoxication
- are unable to equitably access MBS (Medicare Benefit Schedule) treatments due to a constellation of overlapping factors, including:
  - job insecurity
  - material disadvantage
  - social isolation
  - poor health literacy
  - other social, economic, cultural, and personal reasons
- poorly developed self-regulation and problem-solving skills

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## Description of Activity

Choices is a non-clinical service designed to in-reach into the emergency departments to assist individuals with poor personal and social supports who are frequent attenders' at metropolitan hospital emergency departments.

A unique aspect of the service is the use of peer workers to engage with people in settings that are often confronting for them. Peers provide brief interventions and immediate support and can assist clients with personalised support including, engaging with mental health, alcohol and other drug services and treatment support services, utilising a range of strategies such as low intensity psychological interventions, stress management, shared problem solving, goal setting and motivational interviewing.

The Choices Expansion (funded under a Community Health & Hospitals Program (CHHP) grant) involved two separate but connected service developments. Firstly, the provision of the Choices service at additional metropolitan hospital emergency departments.

Secondly, the commissioning of a single mobile clinical team to provide enhanced clinical support (called "Extra Choices") for Choices clients with higher acuity and co-occurring mental health and alcohol and drug (AOD) use within emergency department where Choices operates.

The Perth North and South PHNs commissioned the additional non-clinical emergency department in-reach service provision, and the WA Mental Health Commission were responsible for commissioning the mobile team (as per the conjoint submission requirements of the CHHP grants).

Since these services were established, the environment in which Choices Expansion operates has continued to evolve. As originally planned clients are drawn from a clinical population characterised by co-occurring alcohol and other drug and mental disorders set against a background of generalised instrumental, psychosocial, and personal dysfunction ("comorbidity-plus"). They include a significant proportion of Aboriginal and Torres Strait Islander people (~30% of the Choices cohort). However, the proportion of referrals who are at risk of harm to self – suicide, suicide attempts, and self-neglect - has increased steadily. The future development of the Choices service will need to be set against the new operational context which includes the conjoint development of targeted community-based suicide prevention and aftercare services, including embedded peer-supports and other opportunities that may arise from the National Mental Health and Suicide Prevention Agreement and the WA Bilateral Schedule.

WAPHA has recently developed an LGBTIQ+ Equity and Inclusion Framework committed to the development of a Cultural and Competency Framework and an Aboriginal Cultural Capability Framework, which encompass cultural awareness, cultural competency and cultural safety. A third Framework, focusing on multicultural competency, is in development, and will be launched in mid-2023. These Frameworks will facilitate opportunities to improve the cultural competence and clinical safety of services through continuous quality improvement and support programs. The Frameworks will assist the PHN to reflect on current practice, identify areas that will improve cultural safety for communities, and develop cultural competence in internal staff and external stakeholders including commissioned services, resulting in better health and wellbeing outcomes for Aboriginal, CALD and LGBTIQ+ communities.

Data will be collected and reported for this activity. The Perth North PHN will ensure that effective monitoring and evaluation systems and processes use analysis of Primary Mental Health Care – Minimum Data Set (PMHC-MDS) data in relation to the proportion of people who have frequent contact with hospital emergency departments and who are linked to appropriate place based services.

The PHN recognises the impact COVID-19 had on the community, primary health care and commissioned service activity. With services having returned, monitoring and service impact assessment will continue, to ensure the PHN continues to meet the aims of the activity and the needs of the priority target groups.

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## **Perth North PHN Needs Assessment**

<b>Priorities</b>	<b>Page reference</b>
Reduce non-urgent emergency department attendances and improve access to alternative services.	12
Support primary health care providers to manage chronic disease populations and build capacity for patient self-management	11
Improve coordinated and integrated care for people experiencing complex and severe mental health who can be managed in within primary care settings.	18

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## **Target population Cohort**

Individuals with poor personal and social supports who are 'frequent attenders' at metropolitan hospital emergency departments judged to be at-risk to get off the 'crisis' cycle.

## Coverage

Swan, Joondalup, and Perth City local government areas within Perth North PHN

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## Activity Duration

### Activity Start Date

1 January 2020

### Activity End Date

30 June 2024

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## Activity Planned Expenditure

Funding Stream	FY 22 23	FY 23 24	FY 24 25
CHHP - Expansion of Choices Service	\$1,291,348.00	\$491,348.00	\$0.00

END

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