

South Eastern Melbourne - Commonwealth Psychosocial Support 2024/25 - 2027/28 Activity Summary View



PAE - 1 - PAE-1 2025 CPS Access Enablers



Activity Metadata

Applicable Schedule *

Commonwealth Psychosocial Support

Activity Prefix *

PAE

Activity Number *

1

Activity Title *

PAE-1 2025 CPS Access Enablers

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 *

Support people with severe mental ill-health to strengthen their capacity to live an independent and productive life by actively engaging with Commonwealth Psychosocial Support (CPS) services.

Description of Activity *

SEMPHN is funding and supporting Access Enabler service providers to deliver specific supports intended to improve service navigation and integration of psychosocial services for qualifying individuals. This is achieved through:

- referral assistance
- liaising with Local Area Coordinators (LACs) in facilitating NDIS testing and assisting in providing relevant documentation to

support NDIS applications

- care coordination through multi-agency collaboration and planning
- providing information for decision making across a range of service domains
- housing support.

Access Enabler service providers accept referrals from a variety of sources with the provider expected to coordinate with a range of service providers in the SEMPHN catchment. This includes establishing pathways with non-mental health community services that may also refer consumers to the program. Services are expected to be embedded within or linked to clinical services to support an integrated care approach to meeting the needs of people with mental ill-health, and form part of a multi-agency care plan.

The care coordination and service navigation provided by Care Coordinators assists with achieving consistency of care across treatment support and assistance from a number of services. Services can include clinical mental health services, recovery support, primary health care, housing and accommodation, employment, Centrelink, education and training, childcare and family support, Home and Community Care and other in-home services. A Care Coordinator's role includes:

- arranging and attending case conferences
- building relationships with organisations delivering services to cohorts such as LGBTQI+, CALD, First Nations, and Youth in the region
- building relationships with specialist services related to physical health, chronic disease, alcohol, and other drugs, eating disorders, and hoarding to name a few
- working with other services and networks to support a consumer's needs
- collaborating with others in the consumer's life such as family, carers, mainstream support, and other service providers chosen by the consumer to deliver parts of their plan
- ensuring all supports providing services to the consumer have a shared understanding of the supports being provided.

Where required, service providers support a consumer to access stable, safe, and appropriate housing by linking into the existing network of Homeless and Housing Services and Networks.

Access Enablers also support NDIS testing or retesting of the eligibility of consumers who appear to meet NDIS eligibility guidelines or need ongoing high levels of services. This support includes liaising with LACs and pro-actively assisting consumers with collecting the evidence they need to submit an access request, as well as follow up applications, if required. At a minimum, 30 per cent of consumers participate in this process with service providers making linkages, building relationships, and putting in place referral pathways (e.g. with the NDIS) to support this work.

The assessments undertaken by Access Enablers are consumer led, strengths-based and focused on recovery action planning. Service Providers utilise the Kessler Psychological Distress Scale (K-10 or K-5 for Aboriginal and Torres Strait Islander people) and the Recovery and Assessment Scale—Domains and Stages (RAS-DS) in developing individualised support plans. Support plans include:

- the consumer's strengths and existing supports
- the consumer's recovery goals and support needs
- the activities to be undertaken that will assist the consumer to achieve their recovery goals and meet their support needs
- any other services the consumer may need to be referred to
- a care/crisis plan in the event the consumer becomes unwell or crisis occurs, noting a family member or carer may play a critical role in supporting a consumer in such events. This care plan should also include information such as treating GP and/or other services to better facilitate whole of person care.

SEMPHN monitors service implementation by the commissioned provider to ensure a skilled, non-clinical mental health workforce is sustained to deliver targeted service elements.

SEMPHN will report on the following key areas of service delivery to determine Access Enablers efficacy:

- Group based psychosocial intervention programs in place-based services
- NDIS Testing Support (either through testing or retesting) 77% of consumers in the program
- Service Navigation
- Capacity and Strength Based Assessment
- Housing Support

Regional loading does not apply to any CPS services delivered in the SEMPHN region.

SEMPHN Strategy 2023-2028: Path to Impact
Pillar 1: Population health and service demand
Pillar 2: Consumer-focused healthcare
Pillar 3: Vibrant primary health services

Needs Assessment Priorities *

Needs Assessment

South Eastern Melbourne PHN Needs Assessment 2025-2028

Priorities

Priority	Page reference
Increase support for young people requiring low intensity and mild-to-moderate MH support	194
Improve MH services for people with severe and complex MH needs	195
Improve knowledge and capacity of service providers and consumers to engage with and navigate the service system	196
Ensure provision of psychosocial support services to people accessing SEMPHN-commissioned MH services	198
Improve coordination/ integration of psychosocial support services	198
Undertake service mapping of psychosocial support services	198



Activity Demographics

Target Population Cohort

CPS is designed for people with complex mental ill-health, often episodic, who:

- have needs that can be met through short-term, low intensity support to live independently in the community
- are not restricted in their ability to participate in the community fully and actively in a residential setting
- are not receiving similar supports through a state or tertiary government program (NDIS), where there is the potential for duplication of program activities.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

Consultation occurred when developing the Psychosocial Support Service (PSS) in 2018. This consultation was used to build the foundation for Commonwealth Psychosocial Support (CPS) services. Key stakeholders were engaged to provide feedback and unforeseen outcomes of the PSS model that were used to shape the model design for CPS.

Collaboration

Central to SEMPHN's commissioning principles is the concept of co-design. The various stakeholder, consumer and carer consultations SEMPHN has already undertaken and will undertake in the future will continue to inform and refine our services.

The establishment of communities of practice that includes low intensity, API and MHICC providers, promotes collaboration, the exchange of ideas, sharing and exploring new approaches while working within the same operational approach and outcomes in delivering mental health services within the SEMPHN catchment.



Activity Milestone Details/Duration

Activity Start Date

29/12/2021

Activity End Date

29/06/2027

Service Delivery Start Date

January 2022

Service Delivery End Date

30 June 2027

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: Yes

Open Tender: No

Expression Of Interest (EOI): No

Other Approach (please provide details): No

Is this activity being co-designed?

No

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

No

Decommissioning details?

Co-design or co-commissioning comments

Discussions with providers who deliver the Mental Health and Wellbeing Hubs commenced and SEMPHN is key in bringing these services together with the CPS commissioned provider.



PSD - 1 - PSD1 2025 Implementation and Service Delivery of CPS Services



Activity Metadata

Applicable Schedule *

Commonwealth Psychosocial Support

Activity Prefix *

PSD

Activity Number *

1

Activity Title *

PSD1 2025 Implementation and Service Delivery of CPS Services

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 *

Support people with severe mental ill-health to strengthen their capacity to live an independent and productive life by actively engaging with Commonwealth Psychosocial Support (CPS) services.

Description of Activity *

CPS services are delivered via commissioned service providers offering services and supports which aim to equip eligible patients with severe mental ill-health with practical strategies to live a more independent, safe and productive life. This is delivered through a range of non-clinical community-based supports building a patient's capacity to achieve their recovery goals in the community, rather than accessing ongoing clinical support.

Eligible consumers are those affected by mental ill-health, including disorders such as mood (affective), anxiety, personality, psychotic, eating, substance use and trauma related. A clinical diagnosis is not required however the following eligibility criteria must be met:

- a person's needs can be appropriately met through short-term, low intensity support to live independently in the community, as determined through a capacity and strengths-based assessment tool, such as the Kessler Psychological Distress Scale (K-10 or K-5 for Aboriginal and Torres Strait Islander people) and the Recovery and Assessment Scale—Domains and Stages (RAS-DS)
- people are not restricted in their ability to fully and actively participate in the community based on their residential setting
- people are not receiving similar psychosocial support through a state or territory government program or the NDIS

- people are aged 16 years or over, although exceptions can be made subject to SEMPHN’s approval.

The CPS model provides short-, medium- and long-term psychosocial supports under a recovery-orientated framework through a range of services to help people manage daily activities, rebuild, and maintain connections, build social skills and participate in education and employment. Assertive Outreach and Specialist Psychosocial supports are used for hard-to-reach communities who may have intensive and complex needs. This outreach is usually one-on-one support of a non-clinical nature and aimed at consumer directed assistance with daily living activities and health maintenance, delivered across the SEMPHN catchment.

The CPS service model is designed to deliver a range of key service elements such as:

- Psychosocial support interventions
- Group based psychosocial intervention programs
- Assertive Outreach and Specialist Psychosocial Interventions for hard-to-reach communities
- Care coordination, service navigation, Housing and NDIS Testing Support
- Flexible Funding Brokerage

CPS services are delivered by various specialised providers including, but not limited to, lived and living experience wellbeing mentor workers.

The services and mentors aim to develop a person’s ability to build stability in one or more of the following areas:

- social skills, friendships and family connections
- day-to-day living skills
- financial management and budgeting
- finding and maintaining a home
- vocational skills and goals
- maintaining physical wellbeing, including exercise
- managing substance use issues
- building broader life skills, including confidence and resilience; and
- building capacity to live independently in the community.

SEMPHN has commissioned this funding to be implemented in a flexible carefully planned way which complements State funded psychosocial supports and does not duplicate support available from existing programs, including those provided by the NDIS.

Regional loading does not apply to CPS services delivered in the SEMPHN catchment.

SEMPHN Strategy 2023-2028: Path to Impact
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