

# Gold Coast - NMHSPA Bilateral PHN Program 2024/25 - 2027/28 Activity Summary View



## NAB-H2H - 3 - Medicare Mental Health Centre



### Activity Metadata

#### Applicable Schedule \*

NMHSPA Bilateral PHN Program

#### Activity Prefix \*

NAB-H2H

#### Activity Number \*

3

#### Activity Title \*

Medicare Mental Health Centre

#### Existing, Modified or New Activity \*

Existing



### Activity Priorities and Description

#### Program Key Priority Area \*

Mental Health

#### Other Program Key Priority Area Description

#### Aim of Activity \*

To work with State and Commonwealth governments to implement a Medicare Mental Health Centre in the northern Gold Coast region (Ormeau region) that:

- responds to people experiencing crisis or in significant distress.
- provides a central point to connect people to other services in the region.
- provides in-house assessment to connect people to the most appropriate services.
- provides evidence-based and evidence-informed immediate and short to medium term episodes of care, including utilisation of digital mental health platforms.

#### Description of Activity \*

To establish and operate Medicare Mental Health Centre in the Ormeau region with establishment being in 2025/26, and service delivery commencing in 2026-27.

In 2023 – 2025 GCPHN will:

- Define the needs of vulnerable adults living in the northern Gold Coast region ensuring the needs of indigenous people and CALD people are well understood.
- Investigate property leasing options in the northern Gold Coast region.
- Collaborate with key regional stakeholders, and, State and Commonwealth government on property fit out and design to best meet the needs of consumers.
- Define the preferred procurement approach for commissioning of the Head to Health adult service centre
- Work with Gold Coast Hospital and Gold Coast Joint Regional Planning Groups to develop protocols to support safe and effective care integration of consumers – this will involve liaison with primary care services, hospital services, General Practitioner clinics, Aboriginal community controlled health services, non-Government organisations, community organisations and lived experience representatives.
- Develop protocols to support integration of the Head to Health intake and assessment phone service.
- Establish arrangements that enable Queensland Health and Gold Coast Hospital to have a role in the governance and commissioning of the service.

In the 2025/26 financial year GCPHN will establish a Medicare Mental Health Centre that:

- Responds to people experiencing crisis or in significant distress.
- Provides a central point to connect people to other services in the region, including through offering information and advice about mental health, service navigation and referral pathways for individuals and their carers and family.
- Provides in-house assessment using the IAR decisional support tool to connect people with the most appropriate services.
- Provides evidence-based and evidence-informed immediate and short to medium term episodes of care, including utilisation of digital mental health platforms.

Activities delivered during the 2025/26 financial year will also include selection of suitable office space, leasing, fit out and set up of premises in preparation for service delivery to commence in 2026/27. Procurement activities will also be undertaken in this period to support selection of suitable provider/s for the Medicare Mental Health Centre.

In 2026, following commencement of the Medicare Mental Health Centre, GCPHN will support the successful commissioned service provider/s to:

- 
- Implement the Medicare Mental Health Centre model.
- Implement agreed governance arrangements.
- Implement agreed regional referral and service integration protocols.
- Implement DoHAC performance reporting.

GCPHN will work in partnership with State and Commonwealth governments from 2025 to ensure appropriate governance and commissioning arrangements are established for the service and there is a shared ownership and understanding of the service from service design through to service implementation.

## **Needs Assessment Priorities \***

### **Needs Assessment**

Gold Coast PHN\_HNA 2024

### **Priorities**

| Priority   | Page reference |
|--|----------------|
| Higher rates of mental ill health and mental health related ED presentations among people experiencing homelessness.                                       | 102            |
| Large and growing Pasifika community with higher reported health needs and challenges accessing healthcare.  | 102            |
| Out-of-pocket costs and safety concerns limit access to health services for people experiencing family and domestic violence.                              | 102            |
| Insufficient service capacity to meet growing demand due to population growth, particularly in northern Gold Coast.  | 20             |
| Constrained system capacity requires investment in alternate models of care, including digital opportunities to manage and mitigate demand.                | 20             |
| High demand and limited availability of publicly funded AOD services, including after-hours options, acute detox and residential withdrawal services.      | 221            |
| Increasing acute demand requires improvement in early intervention, prevention and community support for mental health.                                    | 221            |
| Inefficient system navigation leads to delayed connection of patients with suitable mental health, AOD and suicide prevention services.                    | 221            |
| Poorer mental health outcomes and higher suicidality for LGBTIQAP+ people.   | 221            |
| Insufficient resourcing to ensure supported, psychologically safe, meaningful engagement of people with lived experience in planning and service delivery. | 221            |
| Growing demand for psychological therapies.  | 221            |
| Stigma and shame associated with mental health, suicidality and AOD issues.  | 221            |
| Growing numbers of people with socioeconomic disadvantage and associated higher need, especially in the northern Gold Coast.                               | 71             |



## Activity Demographics

### Target Population Cohort

All people aged 18 years+ in the Gold Coast region.

### In Scope AOD Treatment Type \*

### Indigenous Specific \*

No

### Indigenous Specific Comments

### Coverage

#### Whole Region

Yes



## Activity Consultation and Collaboration

### Consultation

The following outlines key consultation activities that will be undertaken to support outcomes:

- Property and Infrastructure: GCPHN will consult with the Commonwealth Department of Health and Aged Care, Queensland Health, Gold Coast Hospital, Gold Coast Council and property and infrastructure businesses to support decision making about property/infrastructure for the service.
- Service Commissioning: GCPHN will consult with Queensland Health and Gold Coast Hospital to support commissioning of the service.
- Service Delivery and Service Integration: Consultation will occur with Gold Coast Hospital and Gold Coast Joint Regional Planning Groups to develop protocols to support safe, effective and integrated services for consumers – this will involve liaison with primary care services, hospital services, General Practitioner clinics, Aboriginal Community Controlled Health Services, non-Government organisations, community organisations and lived experience representatives. Consultation will also support development of protocols for integration of the Head to Health intake and assessment phone service.
- Service Governance: GCPHN will consult with Queensland Health and Gold Coast Hospital to support effective governance of the service.

### Collaboration

The stakeholders that will be involved in establishing and implementing the Head to Health adult mental health service centre are as follows:

- Consumers
- Commonwealth Department of Health and Aged Care
- Gold Coast Joint Regional Plan Partnership Groups
- Primary Care Providers
- Gold Coast Health
- Queensland Health
- Gold Coast Health and Acute Care Team
- Aboriginal service providers
- Community and non-government organisations and social supports
- GCPHN Primary Health Care Improvement Committee, Clinical Council, Consumer Advisory Council



## Activity Milestone Details/Duration

**Activity Start Date**

30/06/2025

**Activity End Date**

29/06/2026

**Service Delivery Start Date**

01/07/2025

**Service Delivery End Date**

30/06/2026

**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:** No

**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?**

Yes

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

No

**Decommissioning**

No

**Decommissioning details?**

Not applicable.

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

Activity is being co-commissioned as part of the bilateral agreement between the Queensland and Commonwealth Governments.

Service will co-designed as part of the Request for Proposal process to procure the integrated service offering.





# NAB-H2H-Op - 6 - Operational - Medicare Mental Health Centre



## Activity Metadata

### Applicable Schedule \*

NMHSPA Bilateral PHN Program

### Activity Prefix \*

NAB-H2H-Op

### Activity Number \*

6

### Activity Title \*

Operational - Medicare Mental Health Centre

### Existing, Modified or New Activity \*

Existing



## Activity Priorities and Description

### Program Key Priority Area \*

### Other Program Key Priority Area Description

### Aim of Activity \*

### Description of Activity \*

### Needs Assessment Priorities \*

### Needs Assessment

### Priorities



## Activity Demographics

Target Population Cohort

In Scope AOD Treatment Type \*

Indigenous Specific \*

Indigenous Specific Comments

Coverage

Whole Region



## Activity Consultation and Collaboration

Consultation

Collaboration



## Activity Milestone Details/Duration

Activity Start Date

Activity End Date

Service Delivery Start Date

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: No

Direct Engagement: No

Open Tender: No

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?

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

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

Decommissioning

Decommissioning details?

Co-design or co-commissioning comments



# NAB-UAS - 1 - Universal After Care



## Activity Metadata

### Applicable Schedule \*

NMHSPA Bilateral PHN Program

### Activity Prefix \*

NAB-UAS

### Activity Number \*

1

### Activity Title \*

Universal After Care

### Existing, Modified or New Activity \*

Existing



## Activity Priorities and Description

### Program Key Priority Area \*

Mental Health Priority Area 5: Community based suicide prevention activities

### Other Program Key Priority Area Description

### Aim of Activity \*

This activity aims to:

- Increase the efficiency and effectiveness of suicide prevention services for people at risk of suicide.
- Improve access to and integration of primary mental health care and suicide prevention services to ensure people receive the right care in the right place at the right time.
- Encourage and promote a regional approach to suicide prevention including community-based activities, and liaising with Local Hospital Networks (LHNs) and other providers to ensure appropriate follow-up and support arrangements are in place at a regional level for individuals after a suicide attempt, and for other people at high risk of suicide.
- Commission suicide prevention services which are evidence based and consistent with a best practice Stepped Care approach, including incorporating a joined-up assessment process and referral pathways; make best use of the available workforce; are cost effective; and do not duplicate or supplement services that are the responsibility of Commonwealth Programs, state and territory government or other service sectors, including the disability support sector.

### Description of Activity \*

Key activities will include:

- Working with service providers to ensure services are delivered in line with funding agreements and best practice
- Collaboration with State Government and LHN in the delivery and expansion of The Way Back Support Service (TWBSS)
- Collaboration with State Government and local primary care providers including local GPs in the establishment and delivery of

the new Out of Hospital Pathway service from 1/7/24

- Review of models and co-design of enhancements to ensure any future GCPHN commissioned services for people at risk of suicide ensuring that evidence-based therapies are delivered along the stepped care continuum.

### Needs Assessment Priorities \*

#### Needs Assessment

Gold Coast PHN\_HNA 2024

#### Priorities

| Priority  | Page reference |
|---|----------------|
| Higher rates of mental ill health and mental health related ED presentations among people experiencing homelessness.  | 102            |
| Increasing acute demand requires improvement in early intervention, prevention and community support for mental health.   | 221            |
| Inefficient system navigation leads to delayed connection of patients with suitable mental health, AOD and suicide prevention services.   | 221            |
| Poorer mental health outcomes and higher suicidality for LGBTIQAP+ people.  | 221            |
| Care coordination and information sharing among mental health, AOD, and suicide prevention services are often inefficient in particular transitions from acute or inpatient care to community services. | 221            |
| Stigma and shame associated with mental health, suicidality and AOD issues.   | 221            |
| Inadequate suicide prevention services and post event services for First Nations community.   | 86             |



### Activity Demographics

#### Target Population Cohort

Individuals with suicide ideation and individuals after a suicide attempt.

#### In Scope AOD Treatment Type \*

#### Indigenous Specific \*

No

#### Indigenous Specific Comments

#### Coverage

## Whole Region

Yes



## Activity Consultation and Collaboration

### Consultation

This activity is the transition from The Way Back Service (TWBSS) program funding which commenced on 29 June 2020, to Universal After Care funding. The service will include the new Out of Hospital Pathway service from 1/7/24.

Consultation activities to support expansion of The Way Back Support Service and addition of the new Out of Hospital Pathway service have occurred with local service providers, GPs, Lived Experience representatives, Gold Coast Hospital, QLD Health TWBSS Steering Committee.

### Collaboration

The stakeholders that will be involved in implementing Universal After Care through TWBSS and the new Out of Hospital Pathway service are as follows:

- Consumers
- Suicide Prevention services, including Wesley Mission Queensland
- Primary Care Providers
- Gold Coast Health
- Queensland Health
- Gold Coast Health and Acute Care Team
- Aboriginal service providers
- Community and non-government organisations and social supports
- Queensland Primary Health Networks

Local GPs

Regional allied health clinicians

- GCPHN Primary Health Care Improvement Committee, Clinical Council, Consumer Advisory Council, Joint Regional Plan Governance, SPIG committee



## Activity Milestone Details/Duration

### Activity Start Date

30/04/2023

### Activity End Date

29/06/2026

### Service Delivery Start Date

01/05/2023

### Service Delivery End Date

30/06/2026

## Other Relevant Milestones

In 2023-26, we will undertake the following:

- Support service providers with effective implementation of the “expanded” The Way Back Support Service (2023-24)
- - Establish the new Out of Hospital Pathway service from 1/7/24
- Monitor and review of service performance.
- Regularly consult with involved agencies/providers regarding service performance and potential service improvements.
- Consider any improvements to service model and implement accordingly.
- Work collaboratively with the TWBSS service provider and QLD Health to support service governance and outcomes.
- Work with key stakeholders and funders to identify priority population groups that would benefit from access to the service and determine possible enhancements to the service model to accommodate same (2023 – 2026).
- Work with QLD Health, DoHAC and commissioned service provider on Data Sharing arrangements.
- Promote the new Out of Hospital Pathway service to local GPs and allied health clinicians.



## 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:** 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?**

Yes

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

No

**Decommissioning**

No

**Decommissioning details?**

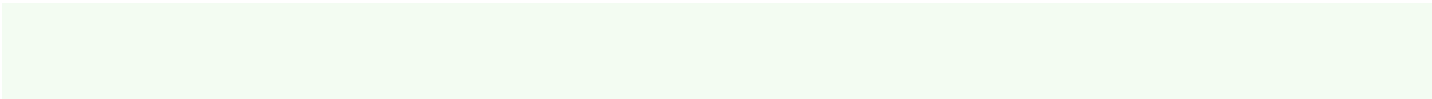
Not applicable

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

Activity is being co-commissioned as part of the bilateral agreement between the Queensland and Commonwealth Government.

TWBSS was co-designed as part of the Request for Proposal process to procure the integrated service offering. In addition, during 2022-23 the expansion of the service involved a series of co-design sessions with key stakeholders.

The new Out of Hospital Pathways service was co-designed as part of the Expression of Interest Proposal that GCPHN submitted to QLD Health for a 2 year pilot. QLD Health and DoHAC will review outcomes and performance of this new service to determine if this service will continue beyond the 2-year pilot period.





# NAB-UAS-Ops - 4 - Operational: Universal After Care



## Activity Metadata

### Applicable Schedule \*

NMHSPA Bilateral PHN Program

### Activity Prefix \*

NAB-UAS-Ops

### Activity Number \*

4

### Activity Title \*

Operational: Universal After Care

### Existing, Modified or New Activity \*

Existing



## Activity Priorities and Description

### Program Key Priority Area \*

### Other Program Key Priority Area Description

### Aim of Activity \*

### Description of Activity \*

### Needs Assessment Priorities \*

### Needs Assessment

### Priorities



## Activity Demographics

Target Population Cohort

In Scope AOD Treatment Type \*

Indigenous Specific \*

Indigenous Specific Comments

Coverage

Whole Region



## Activity Consultation and Collaboration

Consultation

Collaboration



## Activity Milestone Details/Duration

Activity Start Date

Activity End Date

Service Delivery Start Date

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: No  
Direct Engagement: No  
Open Tender: No  
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?

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

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

Decommissioning

Decommissioning details?

Co-design or co-commissioning comments



## NAB-HE - 2 - headspace Enhancement - Southport



### Activity Metadata

**Applicable Schedule \***

NMHSPA Bilateral PHN Program

**Activity Prefix \***

NAB-HE

**Activity Number \***

2

**Activity Title \***

headspace Enhancement - Southport

**Existing, Modified or New Activity \***

Existing



### Activity Priorities and Description

**Program Key Priority Area \***

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

**Other Program Key Priority Area Description****Aim of Activity \***

The aim of this project is to bolster the clinical and non-clinical service capacity of the existing Southport and Upper Coomera headspace Centres. This will increase service delivery options to young people and families accessing headspace services, increasing the number of young people that can be seen, and decreasing wait times from the point of intake to the point of engaging with a treatment service.

**Description of Activity \***

Both headspace Upper Coomera and headspace Southport have experienced a reduction in private practitioner workforce in 2021-2023, which has been compounded by the difficulty in recruitment and retention of these positions. This workforce strain continues to place further pressure on core clinical staff in the headspace service to meet demand.

The service reports there has been a noted increase with the complexity of referrals accessing services, placing further pressures on staff to manage complex presentations while young people are waiting to access services.

The investment from this funding will enable both Centres to undertake enhancement activities consistent with the parameters of the headspace Model Integrity Framework (hMIF) and the existing primary headspace model as listed below:

- Enhance capacity to meet the current and increasing needs of young people experiencing, or at risk of, mild to moderate mental illness.

- Improve access to coordinated, multi-disciplinary care for young people through the recruitment of additional clinical and non-clinical staff.
- Supplement salaries for the existing multi-disciplinary workforce and improving workforce attraction and retention.
- Increase community engagement and awareness activities, particularly with priority populations.
- Enhance the capacity of both headspace services to respond to local need in alignment with the headspace model.

**Needs Assessment Priorities:**

This activity addresses the identified needs outlined in GCPHN needs assessment by focusing on key priorities in child, youth, and family mental health by seeking to expand service capacity, especially in underserved areas such as the Gold Coast northern growth corridor and Southport, with an emphasis on family engagement and workforce challenges. Additionally, this activity recognises the importance of early intervention, promotes community engagement, and integrates Lived Experience Workers, effectively meeting the identified needs for integrated mental health services for children, youth, and families in the region.

**Needs Assessment Priorities \***

**Needs Assessment**

Gold Coast PHN\_HNA 2024

**Priorities**

| Priority  | Page reference |
|---|----------------|
| Gaps in cultural capability across service providers and clinicians, particularly relating to sensitive issues such as mental health, AOD and FDV.  | 102            |
| Insufficient service capacity to meet growing demand due to population growth, particularly in northern Gold Coast.   | 20             |
| Increasing acute demand requires improvement in early intervention, prevention and community support for mental health.   | 221            |
| Inefficient system navigation leads to delayed connection of patients with suitable mental health, AOD and suicide prevention services.   | 221            |
| Poorer mental health outcomes and higher suicidality for LGBTIQAP+ people.  | 221            |
| Care coordination and information sharing among mental health, AOD, and suicide prevention services are often inefficient in particular transitions from acute or inpatient care to community services. | 221            |
| Growing demand for psychological therapies.   | 221            |
| Stigma and shame associated with mental health, suicidality and AOD issues.   | 221            |
| Growing numbers of people with socioeconomic disadvantage and associated higher need, especially in the northern Gold Coast.  | 71             |
| Ongoing improvements are required in culturally safe service provision across the system to ensure equitable, effective access for First Nations people.  | 86             |



## Activity Demographics

### Target Population Cohort

Young people aged 12-25 years with emerging mental health needs.

### In Scope AOD Treatment Type \*

### Indigenous Specific \*

No

### Indigenous Specific Comments

### Coverage

#### Whole Region

Yes



## Activity Consultation and Collaboration

### Consultation

Both headspace service Centres - headspace Southport and headspace Upper Coomera - are supportive of this project. Consultation was undertaken with the Gold Coast headspace Youth Advisory Council (YAC), private practitioners and the General Practitioner across both sites. As an outcome of this process, priorities and recommendations have been incorporated into all aspects of the design of the enhancement proposal.

### Collaboration

1. Gold Coast Primary Health Network – Project partner delivering coordination, engagement, data and planning expertise
2. Lives Lived Well – lead agency contributing clinical, data, operational and planning expertise



## Activity Milestone Details/Duration

### Activity Start Date

30/04/2023

### Activity End Date

29/06/2026

### Service Delivery Start Date

01/09/2023

**Service Delivery End Date**

30/06/2026

**Other Relevant Milestones**

Staff recruitment by September 2023.  
Completion of enhancement activities by June 2026.

In 2023-26, we will undertake the following:

- Support effective implementation and performance monitoring of the “enhanced” headspace service
- Regularly consult with involved agencies/providers regarding service performance and potential service improvements.
- Work with key stakeholders to identify priority population groups that would benefit from access to the service and determine possible enhancements to the service model to accommodate same.



**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:** 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?**

No

**Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?**

Yes

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

No

**Decommissioning**

No

**Decommissioning details?**

Not applicable.

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

Activity is being co-commissioned as part of the bilateral agreement between the Queensland and Commonwealth Governments.



## NAB-HE - 7 - headspace Enhancement - Upper Coomera



### Activity Metadata

**Applicable Schedule \***

NMHSPA Bilateral PHN Program

**Activity Prefix \***

NAB-HE

**Activity Number \***

7

**Activity Title \***

headspace Enhancement - Upper Coomera

**Existing, Modified or New Activity \***

Existing



### Activity Priorities and Description

**Program Key Priority Area \***

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

**Other Program Key Priority Area Description****Aim of Activity \***

The aim of this project is to bolster the clinical and non-clinical service capacity of the existing Southport and Upper Coomera headspace Centres. This will increase service delivery options to young people and families accessing headspace services, increasing the number of young people that can be seen, and decreasing wait times from the point of intake to the point of engaging with a treatment service.

**Description of Activity \***

Both headspace Upper Coomera and headspace Southport have experienced a reduction in private practitioner workforce in 2021-2023, compounded by the difficulty in recruitment and retention of these positions. This workforce strain continues to place further pressure on core clinical staff to meet demand.

The service reports there has been a noted increase with the complexity of referrals accessing services, placing further pressures on staff to manage complex presentations while young people are waiting to access services.

The investment from this funding will enable both Centres to undertake enhancement activities consistent with the parameters of the headspace Model Integrity Framework (hMIF) and the existing primary headspace model as listed below:

- Enhance capacity to meet the current and increasing needs of young people experiencing, or at risk of, mild to moderate mental illness.

- Improve access to coordinated, multi-disciplinary care for young people through the recruitment of additional clinical and non-clinical staff.
- Supplement salaries for the existing multi-disciplinary workforce and improving workforce attraction and retention.
- Increase community engagement and awareness activities, particularly with priority populations.
- Enhance the capacity of both headspace services to respond to local need in alignment with the headspace model.

**Needs Assessment Priorities:**

This activity addresses the identified needs outlined in GCPHN needs assessment by focusing on key priorities in child, youth, and family mental health by seeking to expand service capacity, especially in underserved areas such as the Gold Coast northern growth corridor and Southport with an emphasis on family engagement and workforce challenges. Additionally, this activity recognises the importance of early intervention, promotes community engagement, and integrates Lived Experience Workers, effectively meeting the identified needs for integrated mental health services for children, youth, and families in the region.

**Needs Assessment Priorities \***

**Needs Assessment**

Gold Coast PHN\_HNA 2024

**Priorities**

| Priority  | Page reference |
|---|----------------|
| Gaps in cultural capability across service providers and clinicians, particularly relating to sensitive issues such as mental health, AOD and FDV.  | 102            |
| Insufficient service capacity to meet growing demand due to population growth, particularly in northern Gold Coast.   | 20             |
| Increasing acute demand requires improvement in early intervention, prevention and community support for mental health.   | 221            |
| Inefficient system navigation leads to delayed connection of patients with suitable mental health, AOD and suicide prevention services.   | 221            |
| Poorer mental health outcomes and higher suicidality for LGBTIQAP+ people.  | 221            |
| Care coordination and information sharing among mental health, AOD, and suicide prevention services are often inefficient in particular transitions from acute or inpatient care to community services. | 221            |
| Reported high prevalence of vaping, particularly among young people.  | 221            |
| Growing demand for psychological therapies.   | 221            |
| Stigma and shame associated with mental health, suicidality and AOD issues.   | 221            |
| Growing numbers of people with socioeconomic disadvantage and associated higher need, especially in the northern Gold Coast.  | 71             |
| Ongoing improvements are required in culturally safe service provision across the system to ensure equitable, effective access for First Nations people.  | 86             |



## Activity Demographics

### Target Population Cohort

Young people aged 12-25 years with emerging mental health needs.

### In Scope AOD Treatment Type \*

### Indigenous Specific \*

No

### Indigenous Specific Comments

### Coverage

#### Whole Region

Yes



## Activity Consultation and Collaboration

### Consultation

Both headspace service Centres - headspace Southport and headspace Upper Coomera - are supportive of this project. Consultation was undertaken with the Gold Coast headspace Youth Advisory Council (YAC), private practitioners and the General Practitioner across both sites. As an outcome of this process, priorities and recommendations have been incorporated into all aspects of the design of the enhancement proposal.

### Collaboration

1. Gold Coast Primary Health Network – Project partner delivering coordination, engagement, data and planning expertise
2. Lives Lived Well – lead agency contributing clinical, data, operational and planning expertise



## Activity Milestone Details/Duration

### Activity Start Date

30/04/2023

### Activity End Date

29/06/2026

### Service Delivery Start Date

01/09/2023

**Service Delivery End Date**

30/06/2026

**Other Relevant Milestones**

Staff recruitment by September 2023.  
Completion of enhancement activities by June 2026.

In 2023-26, we will undertake the following:

- Support effective implementation and performance monitoring of the “enhanced” headspace service
- Regularly consult with involved agencies/providers regarding service performance and potential service improvements.
- Work with key stakeholders to identify priority population groups that would benefit from access to the service and determine possible enhancements to the service model to accommodate same.



**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:** 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?**

No

**Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?**

Yes

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

No

**Decommissioning**

No

**Decommissioning details?**

Not applicable.

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

Activity is being co-commissioned as part of the bilateral agreement between the Queensland and Commonwealth Governments.



# NAB-HE-Ops - 5 - Operational - headspace Enhancement



## Activity Metadata

### Applicable Schedule \*

NMHSPA Bilateral PHN Program

### Activity Prefix \*

NAB-HE-Ops

### Activity Number \*

5

### Activity Title \*

Operational - headspace Enhancement

### Existing, Modified or New Activity \*

Existing



## Activity Priorities and Description

### Program Key Priority Area \*

### Other Program Key Priority Area Description

### Aim of Activity \*

### Description of Activity \*

### Needs Assessment Priorities \*

### Needs Assessment

### Priorities



## Activity Demographics

Target Population Cohort

In Scope AOD Treatment Type \*

Indigenous Specific \*

Indigenous Specific Comments

Coverage

Whole Region



## Activity Consultation and Collaboration

Consultation

Collaboration



## Activity Milestone Details/Duration

Activity Start Date

Activity End Date

Service Delivery Start Date

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: No

Direct Engagement: No

Open Tender: No

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?

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

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

Decommissioning

Decommissioning details?

Co-design or co-commissioning comments