North Western Melbourne - Commonwealth Psychosocial Support 2022/23 - 2026/27 Activity Summary View



PSD - 1 - Delivery of Commonwealth Psychosocial Support Program (CPS) AWP 24/25



Activity Metadata

Applicable Schedule *

Commonwealth Psychosocial Support

Activity Prefix *

PSD

Activity Number *

1

Activity Title *

Delivery of Commonwealth Psychosocial Support Program (CPS) AWP 24/25

Existing, Modified or New Activity *

Modified



Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Other Program Key Priority Area Description

Psychosocial Support

Aim of Activity *

This activity will commission capable service providers to support people with mental illness resulting in reduced psychosocial functional capacity, who are not more appropriately supported through the National Disability Insurance Scheme (NDIS), or other supports.

The activity aims to provide shorter term, lower intensity support that builds and strengthens psychosocial functional capacity to address individual needs enabling service users to live independently in community and participate in meaningful activities, social connections and achieve personal goals.

Description of Activity *

The Commonwealth Psychosocial Support program (CPS) will be delivered across two sub-regions in the NWMPHN catchment: northern and western.

The CPS program offers a range of non-clinical supports that are tailored to consumer's individual needs and goals, while focusing on building their personal capacity and capabilities through tailored supports including:

- · Individual one on one supports,
- · Outreach support,
- · Group based activities and programs that may be delivered in centre or in community- based settings
- · Peer led supports and activities
- · Access and support to suitable and relevant resources and information using a range of platforms including in person and virtually
- · Information, referral and supported linkages to other relevant and appropriate services and supports within the community.

On entry to the CPS program, consumers are assessed against program suitability criteria and needs determined though validated tools to inform suitability, level of support requirements and to ensure services and supports are tailored to best met needs. A Goal Plan is also developed with the consumer and is reviewed every six months or as circumstances change.

Informed by the assessment process, tiered support packages are offered to diverse populations (including Aboriginal and Torres Strait Islander communities) across a number of programs.

Consumers are able to move between levels of support according to their needs and progress with recovery journey.

Outcomes are monitored through the use of assessment tools, reviews of goal plans and completion. All consumers are offered the opportunity to complete the YES PHN Survey to provide feedback of their experience of care and to inform improvement opportunities.

Needs Assessment Priorities *

Needs Assessment

NWMPHN Needs Assessment 2022-2025

Priorities

Priority	Page reference
Chronic conditions - range, higher rates, lower uptake of management plans	186
Comorbid conditions - complexity and demand	184
Mental Health - demand, prevalence, complexity	183



Activity Demographics

Target Population Cohort

People aged over 16 with severe mental illness who are not eligible to receive services under the NDIS and are not receiving psychosocial services through other programs or service arrangements.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

NA

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

North Western Melbourne Primary Health Network (NWMPHN) is committed to ensuring stakeholder engagement is embedded in our culture and core functions.

Stakeholder engagement occurs throughout all seven activities that comprise our commissioning approach:

- Assess and prioritise needs
- Review evidence to inform planning and design
- · Design services to address need
- Prepare the system for delivery
- Support implementation
- Manage performance and drive continuous improvement
- Evaluate the impact

We use a range of mechanisms to engage with our communities. This includes working with our Community and Clinical Councils, Expert Advisory Groups (EAGs) and People Bank members.

The Clinical and Community Councils provide advice to the Board about the unique needs of the region, and principles and mechanisms for engaging local stakeholders. The EAGs provide subject matter expertise, insights and advice to support operational model and service design, focusing on safety, quality, and integration. NWMPHN has EAGs for:

- General Practice
- Alcohol and Other Drugs
- Mental Health
- Aboriginal and Torres Strait Islander Health
- Older Adults

People Bank is a register of people who would like to participate in activities that help to improve the health of people in the region. Members participate in a range of different activities including workshops, governance groups, surveys, and tender evaluation panels.

We continue to also consult and seek specific advice from relevant strategic and local organisations and other stakeholders, such as peak and professional bodies, governments, the primary health care sector and local health services and hospital networks.

This activity will also include meaningful key stakeholder input in the procurement and program development process. Commissioned provider(s) will also be expected to consult with community members when designing and implementing their activities. Consumers and people with lived experience are integral to the work we do and their participation in all aspects of the commissioning cycle will continue to be enabled, supported, and evolved. This is demonstrated through human-centred design in the regional plan for mental health, alcohol and other drugs and suicide prevention, where consumer perspectives and experiences are prioritised.

Collaboration

NWMPHN's approach to collaboration and engagement is underpinned by the IAP2 model. Best practice in public engagement is influenced by the Spectrum of Public Participation developed by the International Association of Public Participation. This spectrum includes five levels of participation, Inform, Consult, Involve, Collaborate and Empower.

Collaboration will be utilised wherever possible throughout the commissioning cycle as NWMPHN recognises that working in this way adds value and strengthens our reach. Mutually meaningful collaboration is pursued and maintained in a systematic way across the organisation, which facilitates timely access to existing and new collaboration approaches. This is critical to driving a team-based and integrated approach to delivering person-centred primary care.

Collaboration with key stakeholders will occur throughout the commissioning process. Consequently, the following stakeholders may be involved in prioritisation, planning and design, implementation, monitoring and evaluation of activities:

- Community participants consumers, patients, carers, and people with lived experience, priority populations, community leaders
- Health care professionals
- NWMPHN regional and strategic partnerships and collaboratives
- Local health services and hospital networks
- Community health services
- General practice
- Residential aged care facilities
- Pharmacy
- · Allied health
- Community-based organisations
- Research institutes
- Academic and training institutions
- Peak and professional bodies
- Victorian Department of Health
- Local government
- Other PHNs
- Media
- Other identified providers



Activity Milestone Details/Duration

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Activ	vitv	Start	Date

28/03/2019

Activity End Date

28/06/2025

Service Delivery Start Date

17 April 2019

Service Delivery End Date

30/06/2025

Other Relevant Milestones

None



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

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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?

No

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

No

Decommissioning

No

Decommissioning details?

N/A

Co-design or co-commissioning comments



PAE - 2 - Commonwealth Psychosocial Support – PAE – Service Navigation AWP 24/25



Activity Metadata

Applicable Schedule *

Commonwealth Psychosocial Support

Activity Prefix *

PAE

Activity Number *

2

Activity Title *

Commonwealth Psychosocial Support – PAE – Service Navigation AWP 24/25

Existing, Modified or New Activity *

Modified



Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Other Program Key Priority Area Description

Psychosocial Support

Aim of Activity *

This activity aims to improve integration and coordination between local health services, promote multidisciplinary care and support the health system to be more accessible to people with severe mental illness and associated reduction in functional capacity.

Description of Activity *

Building sector awareness and implementing service navigation to assist consumers, their families and carers to access the supports required to promote mental and physical health will be a key focus.

At the commissioned services level, service navigation activity will include providers working:

- With consumers, families and carers to provide information, resources and referral to better understand and access relevant services and supports available across the regions
- With consumers to increase their understanding of choices in accessing a broader range of health and community services to achieve their recovery goals
- To support consumers access and engage with specialised support services they need, e.g. housing support services
- To establish and/ or strengthen coordinated local referral pathways
- Implement a standardised intake and assessment process that supports identification of other health and/or service needs

consumers may have.

The PHN will plan and provide leadership to enable system level effort in support commissioned service providers and also work across the sector to strengthen engagement and drive a broad range of collaborative activities including:

- Inform and promote referral pathways for clinicians, and health service providers in the region to enable people who might be suited to PHN funded psychosocial services to access supports.
- Establish a stakeholder network to include representatives from the NDIA/LAC, primary health service providers, clinical mental health services, alcohol and other drug
 - services, housing providers, consumers/carers and PHN commissioned providers. This network will collaborate to understand service gaps, service duplication, emergent issues and opportunities to strengthen referral pathways and access to appropriate supports.
- Strengthen navigation support available through the PHN access and referral function to support a more holistic response to people in finding the psychosocial and/ or mental health, AOD services that best meet their presenting needs
- Targeted projects to scope areas in which service providers may require extra support
 to assist priority populations (and people at risk of missing out) to test NDIS eligibility,
 as well as promoting activities and processes that are working well
- Providing information, referral pathways and advice to all stakeholders on the psychosocial supports and programs available
- Build the capacity of providers of staged care mental health services to interface more effectively with the NDIS in the best interest of their shared consumers.
- Build the capacity of primary health care providers (GPs) to more effectively engage and interface with the NDIS in the best interest of consumers.
- Trial and support the implementation of appropriate tools and resources across CPS providers which enable assessment of need and matching to the appropriate care and supports

The design, implementation and continuing management of this activity will seek to avoid duplication and complement state funded psychosocial activities. The alignment with and integration to staged mental health and AOD services and other necessary supports will also continue to be developed.

Needs Assessment Priorities*

Needs Assessment

NWMPHN Needs Assessment 2022-2025

Priorities

Priority	Page reference
Chronic conditions - range, higher rates, lower uptake of management plans	186
Comorbid conditions - complexity and demand	184
Mental Health - demand, prevalence, complexity	183



Activity Demographics

Target Population Cohort

Participants of PHN commissioned services and people with severe mental illness and associated psychosocial functional impairment

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Hobsons Bay	21302
Keilor	21001
Sunbury	21004
Darebin - South	20602
Darebin - North	20902
Macedon Ranges	21002
Maribyrnong	21303
Brunswick - Coburg	20601
Essendon	20603
Wyndham	21305
Tullamarine - Broadmeadows	21005
Moreland - North	21003
Melton - Bacchus Marsh	21304
Melbourne City	20604
Brimbank	21301
Yarra	20607



Activity Consultation and Collaboration

Consultation

North Western Melbourne Primary Health Network (NWMPHN) is committed to ensuring stakeholder engagement is embedded in our culture and core functions.

Stakeholder engagement occurs throughout all seven activities that comprise our commissioning approach:

- Assess and prioritise needs
- Review evidence to inform planning and design
- Design services to address need
- Prepare the system for delivery
- Support implementation

- Manage performance and drive continuous improvement
- Evaluate the impact

We use a range of mechanisms to engage with our communities. This includes working with our Community and Clinical Councils, Expert Advisory Groups (EAGs) and People Bank members.

The Clinical and Community Councils provide advice to the Board about the unique needs of the region, and principles and mechanisms for engaging local stakeholders. The EAGs provide subject matter expertise, insights and advice to support operational model and service design, focusing on safety, quality, and integration. NWMPHN has EAGs for:

- General Practice
- Alcohol and Other Drugs
- Mental Health
- Aboriginal and Torres Strait Islander Health
- Older Adults

People Bank is a register of people who would like to participate in activities that help to improve the health of people in the region. Members participate in a range of different activities including workshops, governance groups, surveys, and tender evaluation panels.

We continue to also consult and seek specific advice from relevant strategic and local organisations and other stakeholders, such as peak and professional bodies, governments, the primary health care sector and local health services and hospital networks.

This activity will also include meaningful key stakeholder input in the procurement and program development process. Commissioned provider(s) will also be expected to consult with community members when designing and implementing their activities.

Consumers and people with lived experience are integral to the work we do and their participation in all aspects of the commissioning cycle will continue to be enabled, supported, and evolved. This is demonstrated through human-centred design in the regional plan for mental health, alcohol and other drugs and suicide prevention, where consumer perspectives and experiences are prioritised.

Collaboration

NWMPHN's approach to collaboration and engagement is underpinned by the IAP2 model. Best practice in public engagement is influenced by the Spectrum of Public Participation developed by the International Association of Public Participation. This spectrum includes five levels of participation, Inform, Consult, Involve, Collaborate and Empower.

Collaboration will be utilised wherever possible throughout the commissioning cycle as NWMPHN recognises that working in this way adds value and strengthens our reach. Mutually meaningful collaboration is pursued and maintained in a systematic way across the organisation, which facilitates timely access to existing and new collaboration approaches. This is critical to driving a team-based and integrated approach to delivering person-centred primary care.

Collaboration with key stakeholders will occur throughout the commissioning process. Consequently, the following stakeholders may be involved in prioritisation, planning and design, implementation, monitoring and evaluation of activities:

- Community participants consumers, patients, carers, and people with lived experience, priority populations, community leaders
- Health care professionals
- NWMPHN regional and strategic partnerships and collaboratives
- Local health services and hospital networks
- Community health services
- General practice
- Residential aged care facilities
- Pharmacy
- Allied health
- Community-based organisations
- Research institutes
- Academic and training institutions

- Peak and professional bodies
- Victorian Department of Health
- Local government
- Other PHNs
- Media
- Other identified providers



Activity Milestone Details/Duration

Activity Start Date

26/06/2019

Activity End Date

28/06/2025

Service Delivery Start Date

1/07/2019

Service Delivery End Date

30/06/2025

Other Relevant Milestones

N/A



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?

No

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

No

Decommissioning

No
Decommissioning details?
N/A

Co-design or co-commissioning comments
N/A



PAE - 3 - Commonwealth Psychosocial Support – PAE - NDIS testing and re-testing AWP 24/25



Activity Metadata

Applicable Schedule *

Commonwealth Psychosocial Support

Activity Prefix *

PAE

Activity Number *

3

Activity Title *

Commonwealth Psychosocial Support – PAE - NDIS testing and re-testing AWP 24/25

Existing, Modified or New Activity *

Modified



Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Other Program Key Priority Area Description

Psychosocial Support

Aim of Activity *

The aim of this activity is to provide consumers of the Commonwealth psychosocial Support program (CPS) with specific support associated with applying for the NDIS and/ or re-testing eligibility where circumstances have changed or a review of decision is needed.

Description of Activity *

This activity will focus on PHN commissioned CPS providers assisting consumers with accessing and testing eligibility for the NDIS, including re-testing where consumers are unhappy with their access decision or circumstances have changed.

The activity will also build understanding of the barriers to NDIS assessment and, through this insight, work to develop strategies to facilitate and strengthen access and integration including through development of referral pathways and promotion of good practice.

The NDIS testing and re-testing supports to be provided will include:

- Assisting consumers in evidence gathering to establish functional impairment as a result of their psychosocial disability.
- Development and submission of an Access Request Form (ARF)
- Pre-planning/planning support and advocacy
- Continual support and services until a NDIS outcome decision is received, and the NDIS plan activated.

Needs Assessment Priorities*

Needs Assessment

NWMPHN Needs Assessment 2022-2025

Priorities

Priority	Page reference
Chronic conditions - range, higher rates, lower uptake of management plans	186
Comorbid conditions - complexity and demand	184
Mental Health - demand, prevalence, complexity	183



Activity Demographics

Target Population Cohort

People with severe mental illness and associated psychosocial functional impairment

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Hobsons Bay	21302
Keilor	21001
Sunbury	21004
Darebin - South	20602
Darebin - North	20902
Macedon Ranges	21002
Maribyrnong	21303
Brunswick - Coburg	20601
Essendon	20603
Wyndham	21305
Tullamarine - Broadmeadows	21005
Moreland - North	21003
Melton - Bacchus Marsh	21304
Melbourne City	20604
Brimbank	21301
Yarra	20607



Activity Consultation and Collaboration

Consultation

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Stakeholder engagement occurs throughout all seven activities that comprise our commissioning approach:

- Assess and prioritise needs
- Review evidence to inform planning and design
- Design services to address need
- Prepare the system for delivery
- Support implementation
- Manage performance and drive continuous improvement
- Evaluate the impact

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- Older Adults

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This activity will also include meaningful key stakeholder input in the procurement and program development process. Commissioned provider(s) will also be expected to consult with community members when designing and implementing their activities.

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Collaboration

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Collaboration with key stakeholders will occur throughout the commissioning process. Consequently, the following stakeholders may be involved in prioritisation, planning and design, implementation, monitoring and evaluation of activities:

- Community participants consumers, patients, carers, and people with lived experience, priority populations, community leaders
- Health care professionals
- NWMPHN regional and strategic partnerships and collaboratives
- Local health services and hospital networks
- Community health services
- General practice
- Residential aged care facilities
- Pharmacy
- · Allied health
- Community-based organisations
- Research institutes
- Academic and training institutions
- Peak and professional bodies
- Victorian Department of Health
- Local government
- Other PHNs
- Media
- Other identified providers



Activity Milestone Details/Duration

Activity Start Date

28/11/2019 **Activity End Date** 28/06/2025 **Service Delivery Start Date** 01/12/2019 **Service Delivery End Date** 30/06/2025 **Other Relevant Milestones** N/A **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? No Has this activity previously been co-commissioned or joint-commissioned? No Decommissioning No **Decommissioning details?** N/A **Co-design or co-commissioning comments**



PAE - 4 - Psychosocial Access Enablers – capacity and strengths-based assessments_AWP 24/25



Activity Metadata

Applicable Schedule *

Commonwealth Psychosocial Support

Activity Prefix *

PAE

Activity Number *

4

Activity Title *

Psychosocial Access Enablers - capacity and strengths-based assessments_AWP 24/25

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Other Program Key Priority Area Description

Psychosocial Support

Aim of Activity *

The aim of this activity is to ensure people accessing PHN commissioned psychosocial services receive need- appropriate supports and experience a recovery-focussed, person-centred approach.

Description of Activity *

The activity will include continued implementation and application of the Recovery Assessment Scale- Domains & stages (RAS-DS) tool by commissioned CPS services.

Application of the tool will be supported by staff in commissioned organisations completing the online training package to support use of the tool.

Activity Demographics

Target Population Cohort

Consumers who have been deemed eligible for CPS supports and services.

Indigenous Specific Comments

Improving and supporting Aboriginal and Torres Strait Islander health is a priority. NWMPHN has developed a Reconciliation Action Plan to support the engagement with and focus on our Aboriginal and Torres Strait Islander communities. We work with

commissioned providers to support cultural competency in commissioned services.

Needs Assessment Priorities *

Needs Assessment

NWMPHN Needs Assessment 2022-2025

Priorities

Priority	Page reference
Preventative health checks - lower rates of screening	185
Chronic conditions - range, higher rates, lower uptake of management plans	186
Comorbid conditions - complexity and demand	184
Alcohol and Other Drug Services - demand, prevalence and complexity	184
Mental Health - demand, prevalence, complexity	183



Activity Demographics

Target Population Cohort

People with severe mental illness and associated psychosocial functional impairment

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Hobsons Bay	21302
Keilor	21001
Sunbury	21004
Darebin - South	20602
Darebin - North	20902
Macedon Ranges	21002
Maribyrnong	21303
Brunswick - Coburg	20601
Essendon	20603
Wyndham	21305
Tullamarine - Broadmeadows	21005
Moreland - North	21003
Melton - Bacchus Marsh	21304
Melbourne City	20604
Brimbank	21301
Yarra	20607



Activity Consultation and Collaboration

Consultation

North Western Melbourne Primary Health Network (NWMPHN) is committed to ensuring stakeholder engagement is embedded in our culture and core functions.

Stakeholder engagement occurs throughout all six stages of our commissioning approach and project lifecycles:

- Assess and prioritise need
- Review evidence to inform planning
- Design services to address need
- Align system readiness and capability for delivery (wording to be confirmed)
- Support implementation
- Monitor performance and drive continuous quality improvement

We use a range of mechanisms to engage with our communities. This includes working with our Community and Clinical Councils, Expert Advisory Groups (EAGs) and People Bank members.

The Clinical and Community Councils provide advice to the Board about the unique needs of the region, and principles and mechanisms for engaging local stakeholders. The Expert Advisory Groups provide subject matter expertise, insights and advice to support operational model and service design, focusing on safety, quality, and integration. NWMPHN has EAGs for:

- General Practice
- Alcohol and Other Drugs
- Mental Health
- Aboriginal and Torres Strait Islander Health
- Older Adults

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region. Members participate in a range of different activities including workshops, governance groups, surveys, and tender evaluation panels.

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This activity will also include meaningful key stakeholder input in the procurement and program development process. Commissioned provider(s) will also be expected to consult with community members when designing and implementing their activities.

Consumers and people with lived experience are integral to the work we do and their participation in all aspects of the commissioning cycle will continue to be enabled, supported, and evolved. This is demonstrated through human-centred design in the regional plan for mental health, alcohol and other drugs and suicide prevention, where consumer perspectives and experiences are prioritised.

Collaboration

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Collaboration with key stakeholders will occur throughout the commissioning process. Consequently, the following stakeholders may be involved in prioritisation, planning and design, implementation, monitoring and evaluation of activities:

- Community participants consumers, patients, carers, other people with lived experience, priority populations, community leaders
- Health care professionals
- NWMPHN regional and strategic partnerships and collaboratives
- Local health services and hospital networks
- Community health services
- General practice
- Residential aged care facilities
- Pharmacy
- Allied health
- Community-based organisations
- Research institutes
- Academic and training institutions
- Peak and professional bodies
- Victorian Department of Health
- Local government
- Other PHNs
- Media
- Other identified providers



Activity Milestone Details/Duration

Activity Start Date

30/12/2021

Activity End Date

29/06/2025

Service Delivery Start Date

01/01/2022

Service Delivery End Date

30/06/2025

Other Relevant Milestones

N/A



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?

No

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

No

Decommissioning

No

Decommissioning details?

N/A

Co-design or co-commissioning comments



Applicable Schedule *

CPS-Op - 1000 - CPSM Operational AWP 24/25



Activity Metadata

Commonwealth Psychosocial Support
Activity Prefix *
CPS-Op
Activity Number *
1000
Activity Title *
CPSM Operational AWP 24/25
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



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



PAE - 5000 - Psychosocial Access Enablers — Operational AWP 24/25



Activity Metadata

Applicable Schedule *

Commonwealth Psychosocial Support

Activity Prefix *

PAE

Activity Number *

5000

Activity Title *

Psychosocial Access Enablers - Operational AWP 24/25

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Other Program Key Priority Area Description

Psychosocial Support

Aim of Activity *

To enable the effective commissioning of psychosocial supports and services in the NWMPHN catchment.

Description of Activity *

This activity will support the effective commissioning, performance monitoring and evaluation of psychosocial support activities. Support to commissioned providers and other stakeholders will also be provided to realise the objective of the activity with the northwestern Melbourne region and health system settings.

Needs Assessment Priorities *

Needs Assessment

NWMPHN Needs Assessment 2022-2025

Priorities

Priority	Page reference
Preventative health checks - lower rates of screening	185
Chronic conditions - range, higher rates, lower uptake of management plans	186
Comorbid conditions - complexity and demand	184
Mental Health - demand, prevalence, complexity	183



Activity Demographics

Target Population Cohort

Participants of PHN commissioned services and people with severe mental illness and associated psychosocial functional impairment

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

Collaboration



Activity Milestone Details/Duration

Activity Start Date

25/06/2019 **Activity End Date** 28/06/2025 **Service Delivery Start Date** 1/7/2019 **Service Delivery End Date** 30/6/2025 **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? 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? No Has this activity previously been co-commissioned or joint-commissioned? No Decommissioning No **Decommissioning details? Co-design or co-commissioning comments**