

Our activity work plan for 2025-26 - National mental health and suicide prevention bilateral program

Updated 2025

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Universal aftercare services

Aim of activity

The aim of this activity is to support the continuation of existing aftercare services in Tasmania for individuals following a suicide attempt or suicidal crisis. This includes expanding referral pathways into aftercare to increase access for individuals who may have experienced a suicide attempt or suicidal crisis without attending a hospital.

This activity is one of several relating to the commissioning of mental health services by Primary Health Tasmania that fit within a continuum of care from early intervention to complex and severe in the primary health care setting.

Description of activity

Primary Health Tasmania continues to work collaboratively with the Department of Health, Tasmania to implement improvements to the model for universal aftercare in Tasmania that includes expanded referral pathways for individuals who may have experienced a suicide attempt or suicidal crisis without attending hospital.

The activities outlined below are planned to be implemented during 2025-26.

- Through project governance arrangements with the Department of Health, Tasmania and other stakeholders, develop a revised universal aftercare service model, inclusive of referral pathways.
- Commission universal aftercare services based on the developed universal aftercare service model for Tasmania.
- In partnership with the existing provider, deliver the revised service model, taking a phased approach.
- Collaborate with the Department of Health, Tasmania, identified providers of expanded referral pathways, and stakeholders to support the integration changes required to embed the revised service model.
- Continue to support commissioned service provider through regular meetings and supporting the collection and reporting of the national Primary Mental Health Care Minimum Dataset (PMHC-MDS).
- Review and update the universal aftercare Tasmanian HealthPathways as required.

headspace enhancement

Aim of activity

The aim of this activity is to improve access to coordinated, multi-disciplinary care for young people, as well as to improve workforce attraction and retention within the Tasmanian headspace service network.

This activity is one of several relating to the commissioning of mental health services for youth and young adults by Primary Health Tasmania that fit within a continuum of care from early intervention to complex and severe in the primary health care setting.

Description of activity

Enhancing the headspace service network recognises the increasing complexity of young people presenting to headspace services, in addition to workforce and funding pressures that have constrained service capacity in recent years. The implementation of activities will continue to align with the headspace Model Integrity Framework (hMIF) and headspace Centre Service Model.

The activities outlined below are planned to be implemented during 2025-26.

- Continue to provide enhancement funding to the existing headspace centres (Launceston, Hobart, Devonport (including Burnie satellite), Hobart's eastern shore) with a focus on workforce attraction and retention, such as recruitment of additional clinical and non-clinical staff, recruitment of identified position reflective of community demographics, supplement salaries for the existing multidisciplinary workforce.
- Complete the headspace outreach plan for the Burnie satellite in consultation with headspace National to enable provision of outreach services to rural communities.
- Continue to work with the lead agencies in consultation with headspace National to review and analyse the local needs of each headspace service and the appropriate allocation of enhancement funding.
- Continue to support commissioned service provider through regular meetings and supporting the collection and reporting of service activity and outcomes through hAPI, quarterly reports and data uploaded to the PMHC-MDS by headspace National.

Adult mental health centre - Launceston

Aim of activity

The aim of this activity is to:

- provide a highly visible and accessible entry point to mental health services for people experiencing psychological distress
- provide assessment and immediate, short to medium term care through a multidisciplinary team without an appointment or paying a fee.

The Launceston Medicare Mental Health Centre (formally known as Head to Health) provides a central point to connect people to other services in the region, including through offering information and advice about mental health and AOD use, service navigation and warm referral pathways for individuals, and their carers and family.

Description of activity

The activities outlined below are planned to be implemented during 2025-26.

- Continue to fund lead agency to deliver the Launceston Medicare Mental Health Centre services
- Maintain regular provider contact through regular meetings, supporting the collection and reporting of the PMHC-MDS, and ongoing support/training on the use of the Initial Assessment and Referral Decision Support Tool (IAR DST)
- Continue consortia group facilitated by lead agency
- Review service model and outcomes

- Review and update the Medicare Mental Health Centre Tasmanian HealthPathways as required.

Adult mental health centres and satellites

Aim of activity

The aim of this activity is to:

- provide a highly visible and accessible entry point to mental health services for people experiencing psychological distress
- provide assessment and immediate, short and or medium term care through a multidisciplinary team without needing referral, prior appointments or out of pocket cost.

The expansion of the Medicare Mental Health Centres (formally known as Head to Health) network with the establishment of three additional satellite services provides a state-wide network of facilities through which other commissioned services will be delivered.

Description of activity

Primary Health Tasmania will work with the Department of Health, Tasmania to establish three Medicare Mental Health Centre satellite services across Tasmania, one each in Devonport, Burnie and outer Hobart suburb.

The activities outlined below are planned to be implemented during 2025-26.

Phase 1: Establishment

- Develop service specification and undertake procurement process.
- Complete lead agency tender and appoint lead agency/ies.
- Identify suitable premises by lead agency.
- Service development informed by the 'Our Philosophy of Care' service model framework.
- Lead agency to commence recruitment of staff and development of appropriate clinical governance and safety and quality documentation.
- Lead agency to commence additional telehealth services for communities where Medicare Mental Health Centres satellites will open, using the existing national Head to Health phone line to triage and direct inbound calls, consistent with the Initial Assessment and Referral Model and the Central Intake and Referral Service.
- Lead agency to review local service mapping and develop local referral pathways.
- Lead agency to convene regular project establishment meetings with Primary Health Tasmania during establishment phase.
- Support lead agency in adopting and implementing the Initial Assessment and Referral model
- Review and update the Medicare Mental Health Centres Tasmanian HealthPathways as required.

Phase 2: Embedding

- Lead agency to open doors to deliver elements of core in-house services.

- Lead agency to finalise basic suite of information, services and referral pathways and formalise partnerships with relevant in-reach services.
- Lead agency to form an ongoing consortia to support refinement and ongoing implementation.

Phase 3: Full implementation

- Introduction of full suite of in-reach services with additional partnerships established to support in reach services or more specialised support to address local need within the capacity of the satellite service model and funding.
- Maintain regular provider contact and support.
- Ongoing support to providers in the collection and reporting of data, including compliance in reporting to the national Primary Mental Health Care Minimum Dataset (PMHC-MDS).
- Ongoing support/training on the use of the IAR DST.
- Continue consortia group facilitated by lead agency.