



Working Together Differently

Brisbane South Mental Health, Suicide Prevention and Alcohol and Other Drug Foundation Plan 2020-2022

July 2020



Metro
South
Health



Baugull nyungai
Gurumba bigi
Maroomba biggee

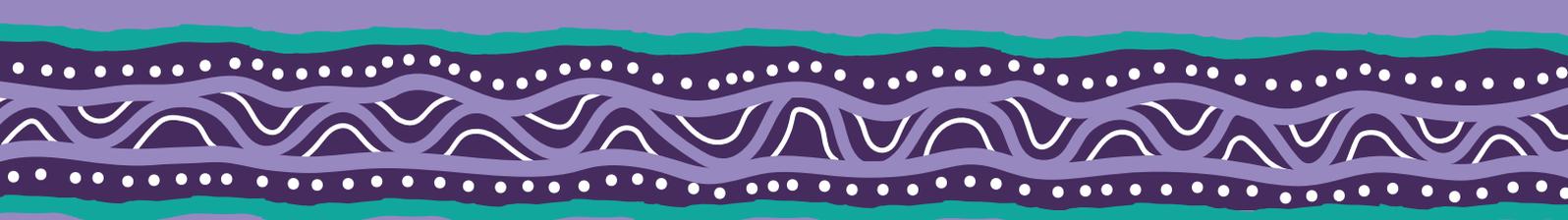
We acknowledge the Traditional Custodians of the land on which we live and work, and of the many different nations across the wider Brisbane south region.

We pay our respects to the Elders, past, present and emerging, as the holders of the memories, the traditions, the culture and the spiritual wellbeing of the Aboriginal and Torres Strait Islander peoples across the nation. We acknowledge any Sorry Business that may be affecting the communities as a whole.

In the spirit of reconciliation, partnership and mutual respect, we will continue to work together with Aboriginal and Torres Strait Islander peoples to shape a health system which responds to the needs and aspirations of the community.

Acknowledgment of lived experience

We acknowledge the lived experience of those impacted by mental health issues, substance use disorders and suicide, and the contributions made by families, friends, carers and service providers towards their recovery.



Contributions: Thank you to Johnstaff Advisory Pty Ltd and Six String Design

Cover image: Flowering Jacarandas, West End

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Our commitment to collaboration – a joint statement

To ensure we are best placed to adapt to the changing health and wellbeing needs of our communities and challenges made more complex by the COVID-19 pandemic, Brisbane South PHN and Metro South Addiction and Mental Health Services have been actively planning for better integrated mental health, suicide prevention and alcohol and other drug treatment services. Through this Foundation Plan we aim to:

- explore what can be done in the **short term** to make better use of existing resources to develop new ways of working together so that we can help improve outcomes for people in the region
- build the necessary **systems and processes** required to undertake more comprehensive Regional Planning in the long term.

This Foundation Plan prioritises four key action areas:

1. governance (including leadership and culture and quality and safety)
2. information and data
3. workforce capability
4. stakeholder engagement.

The core principle of the plan is to embed collaborative approaches at all levels. By ‘working together differently’ we seek to evolve and more clearly define the unique value that we jointly bring to the Brisbane south region.

We are committed to strengthening a culture of partnership and accountability between agencies which will see greater alignment and integration of planning, practice and services. We believe this will result in a more efficient and effective service system that enables better mental health, suicide prevention and alcohol and other drug treatment outcomes for the population of Brisbane south.

We will work together to convene, listen to and collaborate with our broader system partners and communities to strengthen our health system and leverage our respective strengths.

We are committed to ongoing work with the diverse community groups and organisations at the interface of community and health. This includes deeper and more responsive engagement with people with lived experience and their closest supporters, Aboriginal and/or Torres Strait Islander communities, multicultural and refugee communities, LGBTIQ+ communities, Pasifika and Māori communities, the disability community and other groups that make up the incredible diversity of this region.

Our agenda moving forward is an ambitious one, one that is as much about cultural and paradigmatic shifts as it is about specific projects that emerge in response to identified need. It’s also an agenda that is dependent on the remarkable teams of both organisations who are tasked with an immense responsibility and remit.

We look forward to “working together differently” with our stakeholders to improve the health and wellbeing of our community.



Mike Bosel
CEO, Brisbane South PHN



Dr Peter Bristow
CE, Metro South Health

About the plan

Brisbane South PHN (PHN) and Metro South Addiction and Mental Health Services (MSAMHS) are committed to the publication and implementation of a joint Brisbane South Mental Health, Suicide Prevention and Alcohol and Other Drug Foundation Plan 2020-2022. This plan will inform future collaboration with a commitment to develop the comprehensive Joint Regional Plan by June 2022.

At a national and state government level, addressing the impact of mental health issues, suicide, and problematic use of alcohol and other drugs on the lives of Australians, has been identified as a priority. One of the key commitments at all levels is the better integration of planning and service delivery at a regional level.

The Fifth National Mental Health and Suicide Prevention Plan 2017 - 2022 (the Fifth Plan) Priority Area 1: Achieving integrated regional planning and service delivery, describes integration as the *'flagship of actions for ensuring that consumers and carers are at the centre of the way in which services are planned and delivered.'*¹ Other key strategies and frameworks that informed the development of this plan are included in Appendix I.

Foundation Plan

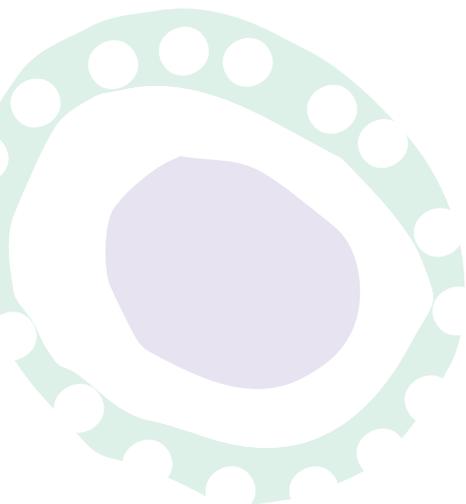
The PHN in partnership with MSAMHS have developed this Brisbane South Mental Health, Suicide Prevention and Alcohol and Other Drug Foundation Plan 2020-2022.

The Foundation Plan:

- describes the key actions and agreed priorities for new and joint services and service planning for the future
- provides the link between the work undertaken by the PHN and MSAMHS on the priority strategic domains of the Brisbane south mental health, suicide prevention and alcohol and other drug Strategy 2019-2022, and the detailed integrated service delivery plans to be delivered with the Joint Regional Plan
- embeds integration into our way of working by focusing on what can be done in the short term to make better use of existing resources to develop new ways of working together to improve outcomes and positively impact the wellbeing of the population for the Brisbane south region
- demonstrates the commitment to building the necessary capacity and resources (i.e. systems and processes) required to undertake detailed Joint Regional Planning.

The Foundation Plan fulfils the following objective of the Fifth Plan Priority Area 1 for joint regional mental health and suicide prevention planning for the Brisbane south region:

Objective 1: Joint regional plans should embed integration of mental health and suicide prevention pathways and services for people with or at risk of mental illness or suicide through a whole of system approach.²



1 Commonwealth of Australia, 2017, The Fifth National Mental Health and Suicide Prevention Plan, 2017-2022

2 Commonwealth of Australia, 2017, Joint regional planning guidance document for LHNs and PHNs

Joint Regional Plan

The PHN and MSAMHS have a shared commitment to developing a comprehensive Joint Regional Plan by June 2022.

The Joint Regional Plan will inform the coordinated commissioning of mental health, suicide prevention and alcohol and other drug treatment services and will support opportunity for coordinated regional implementation of priority areas, as identified through our regional needs assessment and in line with the Fifth Plan and other national and state policy frameworks.²

These priority areas from the Fifth Plan include better coordination of services for people with severe and complex mental illness, a systems-based approach to suicide prevention, improving Aboriginal and Torres Strait Islander mental health and suicide prevention and improving the physical health of people living with mental illness.^{2,3}

The Joint Regional Plan:

- requires detailed service mapping and rigorous systematic service and workforce planning
- accommodates new data, emerging gaps and workforce trends
- provides a comprehensive blueprint for service development.

The Joint Regional Plan will fulfil the following objective of the Fifth Plan Priority Area 1 for joint regional mental health and suicide prevention planning for the Brisbane south region:

Objective 2: Joint regional plans should drive and inform evidence-based service development to address identified gaps and deliver regional priorities.²

Working together differently

Our Foundation Plan is the framework for how the PHN and MSAMHS will work together in the short term to lay the foundations for working together differently in the future. This includes:

- responsive to the needs of the community and identified diverse population groups
- informed, understood and supported by all stakeholders including the broader community
- evidence-based approaches
- informed by agreed priorities
- supported by a skilled and enabled workforce
- open to innovation, new technology, and new models of care.

The below graphic depicts our ‘whole’ journey but clearly demonstrates three phases; ‘how we are partnering’ (page 18); the concepts of ‘working together’ now in the short term (page 20); to how we will work together ‘differently’ in the future (page 24).

Figure 1 - Working together differently



3 Commonwealth of Australia, 2017, The Fifth National Mental Health and Suicide Prevention Plan, 2017-2022

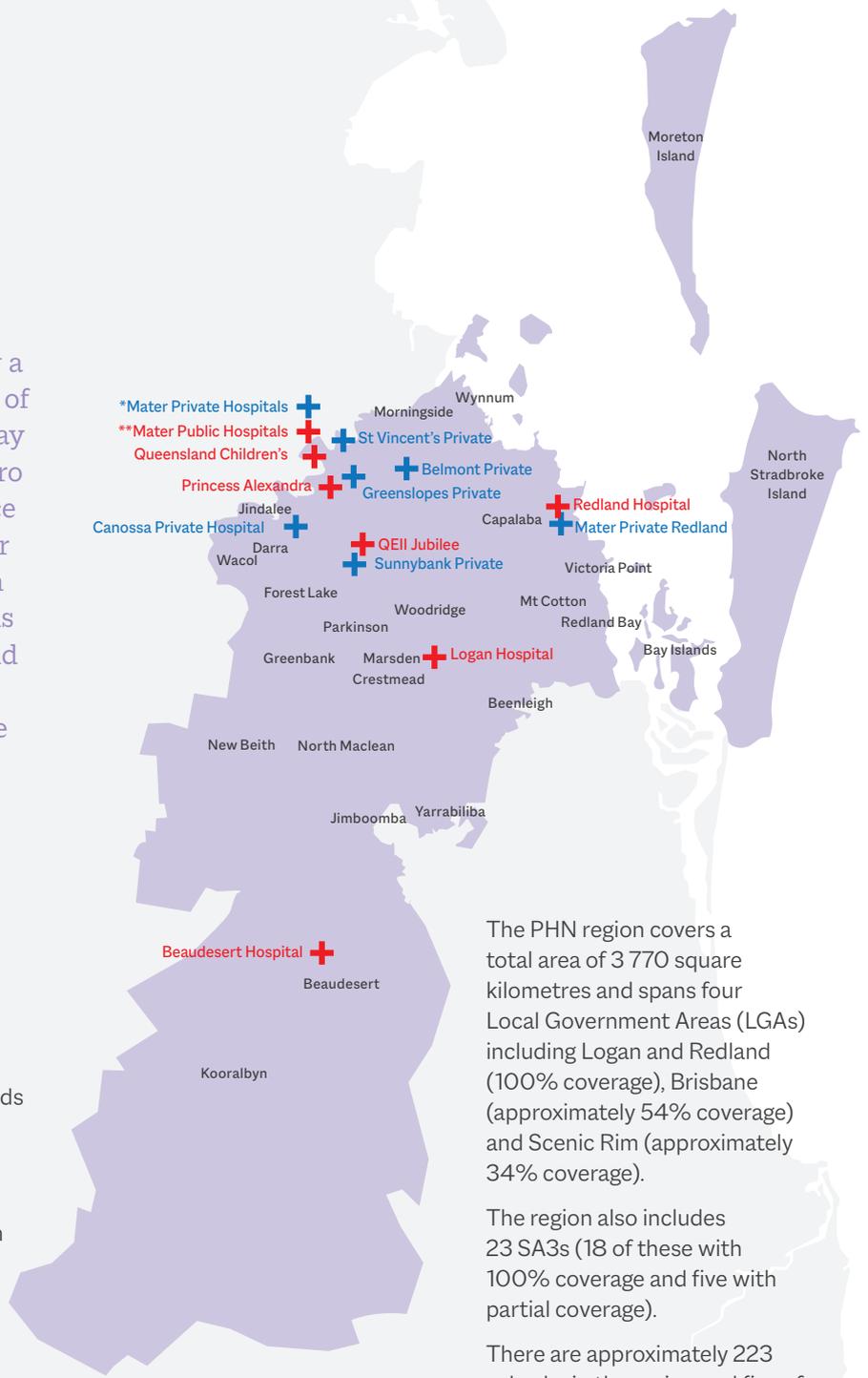
About us

Our region

The PHN region is predominately a metropolitan region with pockets of rural (Beaudesert) and remote (Bay Islands) areas. The PHN and Metro South Hospital and Health Service (Metro South Health) have similar geographical coverage which is an enabling factor for integration. It is acknowledged that Moreton Island is not covered by Metro South Health, but rather is located in the Metro North Hospital and Health Service catchment area.

The PHN region covers a large geographic area south of the Brisbane River which includes metropolitan, rural and remote island locations. The region has the largest catchment in Queensland by population size, and is home to 1.1 million people, approximately 23% of the Queensland population, from many different backgrounds and cultures.⁴

Population projections estimate that the PHN region will be home to approximately 1.4 million people by 2036. This is a growth rate of 2% per year over 25 years for the region (equivalent to the state average growth rate of 2%).



The PHN region covers a total area of 3 770 square kilometres and spans four Local Government Areas (LGAs) including Logan and Redland (100% coverage), Brisbane (approximately 54% coverage) and Scenic Rim (approximately 34% coverage).

The region also includes 23 SA3s (18 of these with 100% coverage and five with partial coverage).

There are approximately 223 suburbs in the region and five of these suburbs are shared with other PHNs.

* includes Mater Private Hospital Brisbane, Mater Children's Private Brisbane and Mater Mothers' Private Brisbane
 ** includes Mater Hospital Brisbane and Mater Mothers' Brisbane

In the Brisbane south region there are:

341
 general practices
 (as at June 2020)

8
 Aboriginal and
 Torres Strait Islander
 health services

12
 Community Health
 Centres (Metro
 South Health)

17
 Hospitals
 (8 public and
 9 private)

Brisbane South PHN

Brisbane South PHN (primary health network) is a not-for-profit organisation that works in partnership with local community organisations, health care professionals, regional hospital and health services, state and federal governments and the public, private and not-for-profit sectors to support a high-quality health system.

The key objective of the PHN is to increase the efficiency and effectiveness of health services for the community, particularly those at risk of poor health outcomes. The PHN works at a system level through improving integration and coordination of care, as well as through commissioning mental health, suicide prevention and AOD treatment services.

Figure 2 - Brisbane South PHN strategic goals⁵



Metro South Health

Metro South Health is one of 16 Hospital and Health Services in Queensland. It is the major provider of public health care, teaching, research and other services to the Brisbane south, Logan, Redland and eastern portion of the Scenic Rim Local Government Areas. It provides these services through five major hospitals – Beaudesert, Logan,

Princess Alexandra, Queen Elizabeth II Jubilee and Redland Hospitals – and a number of community health centres and oral health facilities. A full suite of specialties is delivered through 13 Hospital and Health Service-wide clinical streams and sub-streams: Addiction and Mental Health, Cancer, Children’s, Clinical Support, Emergency, Endoscopy (GI), Intensive Care, Medicine and Chronic Disease, Older Persons, Oral Health, Rehabilitation, Surgical and Women’s Services.

Metro South Health is a Planetree Affiliate Member. Planetree is a non-profit organisation that provides education and information to facilitate person-centred care in healing environments which means:

- caring for each person as an individual
- recognising their mental, social, emotional, spiritual and physical care needs.

Figure 3 - Metro South Health strategic plan⁶



Metro South Addiction and Mental Health Service (MSAMHS)

The MSAMHS provides mental health and addiction services in community-based, inpatient services and acute care and residential settings, including in the home, in General Practitioner (GP) surgeries and in emergency departments.

Services are provided for all age groups across a range of programs, from child and youth, to adult, to older persons, and specialist programs.

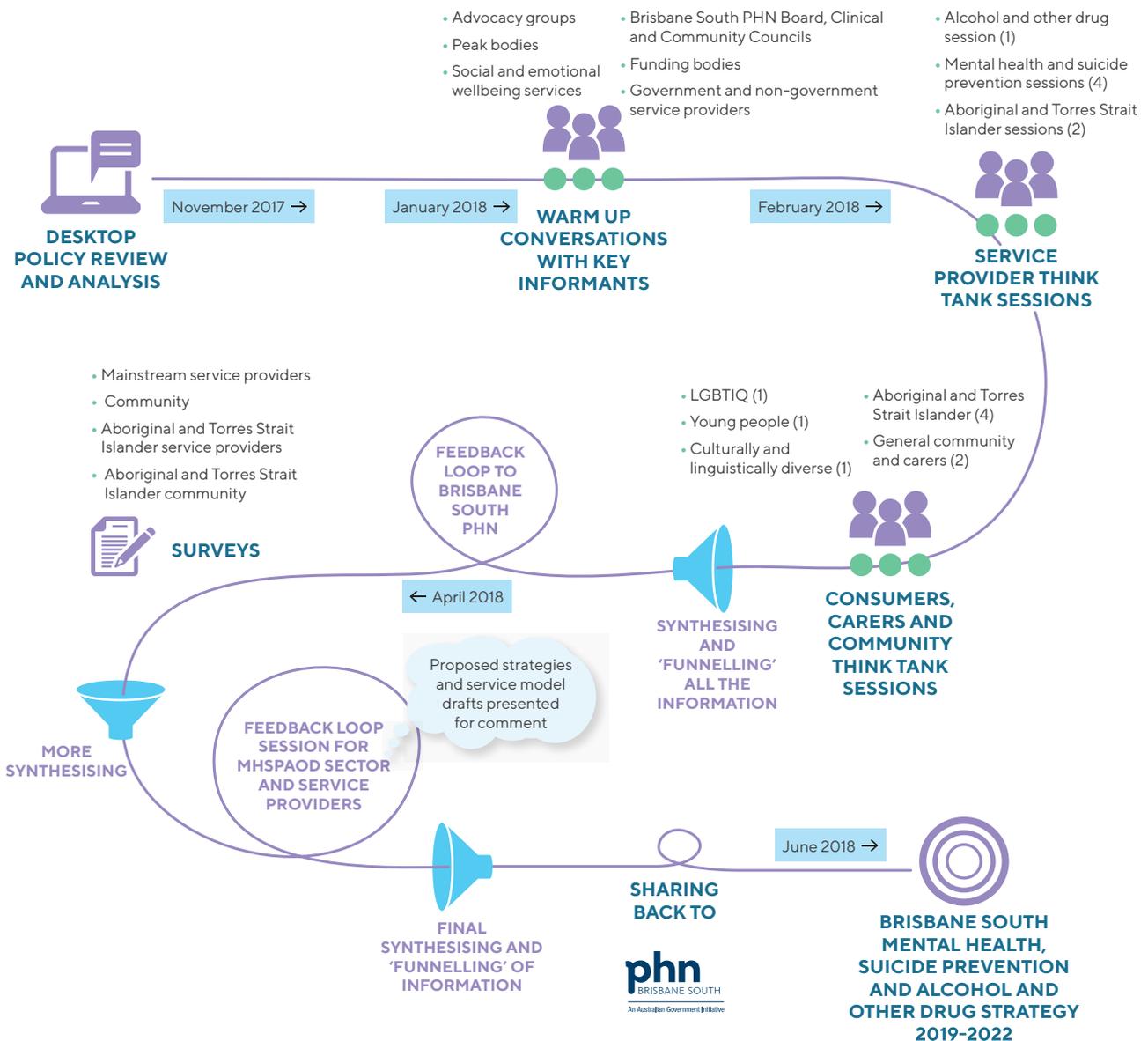
5 Brisbane South PHN Strategic Plan January 2018 and onwards
6 Metro South Health Strategic Plan 2019 - 2023, reviewed/updated 2020

Our health partners

In November 2017, the PHN led the development of the Brisbane South Mental Health, Suicide Prevention and Alcohol and Other Drug Strategy 2019-2022 (the Strategy).⁷

The approach was highly collaborative with significant input from the MSAMHS Executive leaders and clinical staff from across the region. It was also informed by extensive consultation with other public sector, private and non-government service providers, consumers and their closest supporters. The input from all stakeholders during the Strategy development, including genuine consultation with consumers and their closest supporters, has significantly informed the development of this Foundation Plan.

Figure 4 - Brisbane South Mental Health, Suicide Prevention and Alcohol and Other Drug Strategy 2019-2022 approach



The resulting Strategy articulated an agreed system wide vision for the future provision of services in Brisbane south including strategies and specific actions required to promote integrated planning and service delivery and build strong partnerships.

7 Brisbane South Mental Health Suicide Prevention and Alcohol and Other Drug Strategy 2019 - 2022

The priority strategies include:

Strategy 1:

Promote integrated planning and service delivery

Strategy 2:

Enhance community and stakeholder engagement

Strategy 3:

Build strong partnerships

Strategy 4:

Develop new models of care

Strategy 5:

Improve services for priority population groups

Strategy 6:

Improve access to services

Strategy 7:

Develop workforce capability.

The below health partners alongside a broad range of additional stakeholders, including people with lived experience and their closest supporters, will be actively engaged in the implementation of the Foundation Plan and the development of the subsequent comprehensive Joint Regional Plan.

Children's Health Queensland

Children's Health Queensland (CHQ) are key players in the delivery of services in Brisbane south and there is a strong commitment to working with Metro South Health and the PHN towards a regional planning and commissioning approach.

The Child and Youth Mental Health Service (CYMHS) at CHQ specialise in helping children and young people up to 18 years of age who are struggling with anxiety, depression, their attachment-relationships, eating disorders, school refusal, psychosis, suicidal and/or self-harming behaviours and/or trauma. CHQ provides both inpatient and community CYMHS teams for Brisbane south in the Princess Alexandra Hospital catchment area.

Mater Hospital Brisbane

The Mater Young Adult Health Centre Brisbane is a specialised service providing adolescents and young adults with high quality care, as well as uniquely tailored programs that address their emotional, social and developmental needs.

Services include an Emotional Health Unit dedicated to young adults aged 16-25 (a private inpatient unit), and the Recovery College which uses a consumer driven educational framework focused on assisting young people to recover from their mental health issues. In addition, the Young Adult Health Centre runs the Clarence Street service to support young people seeking to make positive changes to their alcohol and drug use. Clarence Street includes a residential program for young people aged 13 to 18, a day program and a community team.

Queensland Mental Health Alcohol and Other Drugs Branch

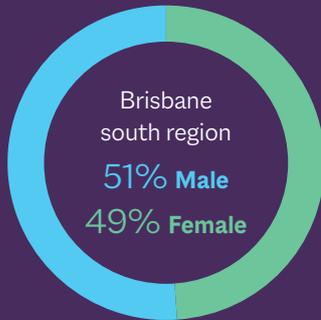
Clinical Excellence Queensland, through the Mental Health Alcohol and Other Drugs Branch (MHAODB), facilitates regional mental health and suicide prevention planning by supporting Hospital and Health Services (HHSs) to work with their respective PHNs and other stakeholders. Additionally, the MHAODB, as commissioner of mental health community support services delivered by non-government organisations (NGOs), works with HHSs and PHNs to ensure alignment of commissioning activities.

HHSs and PHNs are encouraged to use the support provided by the MHAODB to:

1. ensure alignment of joint regional plans against national and jurisdictional planning strategies and frameworks
2. ensure consistency in using the National Mental Health Service Planning Framework to inform regional planning
3. facilitate knowledge transfer between HHSs and PHNs in regional mental health and suicide prevention planning
4. support alignment and consistency in commissioning of mental health and suicide prevention services delivered by NGOs.

Our communities

Gender



Median age

Brisbane south region



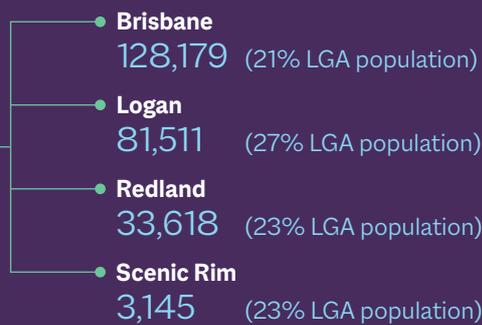
Children and youth (0-17 years)⁸

Brisbane south region

246,453

(Queensland: 1,090,180)

Source: ABS, 2016



People from culturally and linguistically diverse backgrounds



1 in 5 Brisbane south region residents were born overseas in a non-English speaking country.

Aboriginal and Torres Strait Islander peoples



23,122 (2%)

(Australia-wide: 4%) (2016 Census)

Aboriginal and Torres Strait Islander peoples (Brisbane south region)

41% children and young people (Australia-wide: 41%)

Total population (Brisbane south region)

23% children and young people (Australia-wide: 22%)



Approx.

200 Languages

The three most frequently used languages are:

1. **Mandarin** (4% of our population)
2. **Vietnamese** (2% of our population)
3. **Cantonese** (1% of our population)

People from LGBTIQ+ communities



Approx.

120,000

There are limited publicly-available statistics of LGBTIQ+ residents in our region. This figure is based on an estimation that 11% of the Australian population identify as LGBTIQ+.

Our conceptual frameworks

The Brisbane south mental health, suicide prevention and alcohol and other drug service model

The overarching Brisbane south mental health, suicide prevention and alcohol and other drug (MHSPAOD) service model, as demonstrated below, represents the framework for the way in which mental health, suicide prevention and alcohol and other drug treatment services will be developed. It is based on a philosophy that health is a state of physical, social, cultural, historical and emotional wellbeing.

The model puts the person at the centre surrounded by their natural supports and expands to include the many other steps or layers of support that a person may need. It is underpinned by a recovery-based approach that encourages people to move up and down the levels of care as their needs change.

Figure 5 - Brisbane south mental health, suicide prevention and alcohol and other drug service model



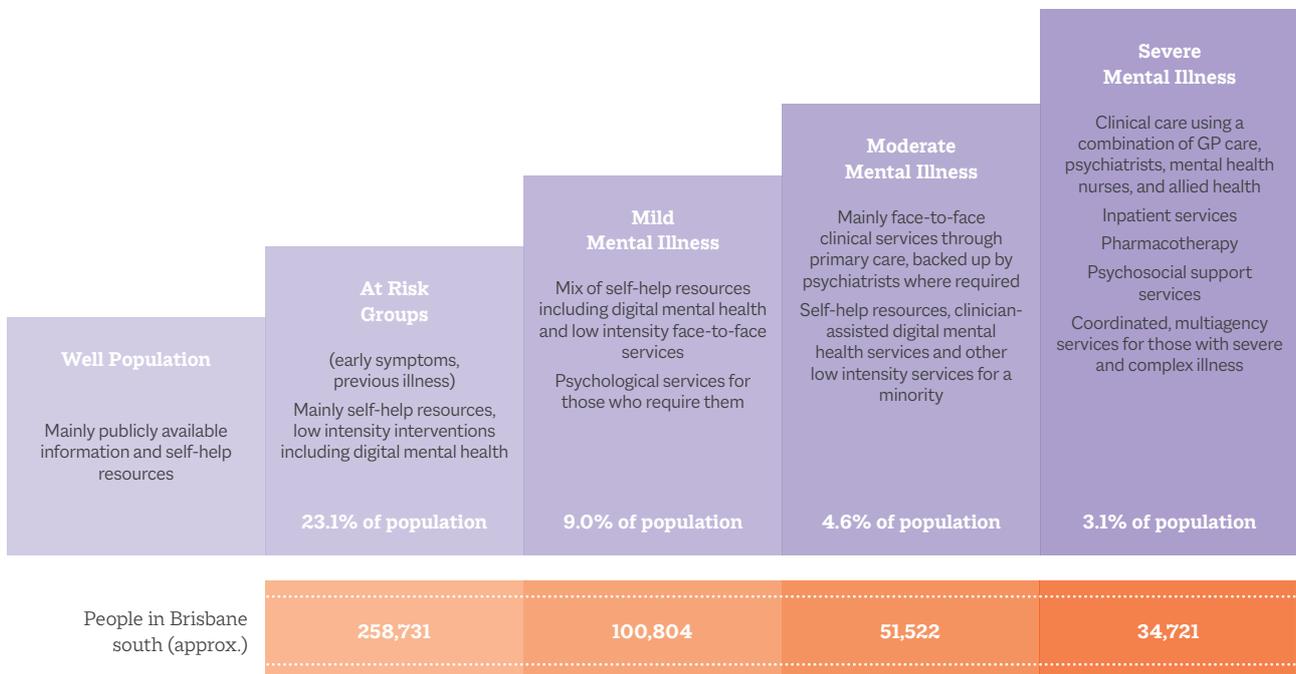
The Brisbane south mental health, suicide prevention and alcohol and other drug service model will support integrated planning and service delivery and is underpinned by the following conceptual frameworks used by both the PHN and MSAMHS.

Mental health

The Stepped care model for mental health is an evidence-based, staged system comprising a hierarchy of interventions, from the least to the most intensive, matched to a person’s needs. Within a stepped care approach, a person is supported to transition up to higher-intensity services or transition down to lower-intensity services as their needs change.⁹

Figure 6 - Stepped care model for mental health

The estimated resident population for the Brisbane south region in 2016 was 1,120,048. Based on the Stepped care model for mental health this equates to the following numbers of people across the stepped care model of need.^{9,10}

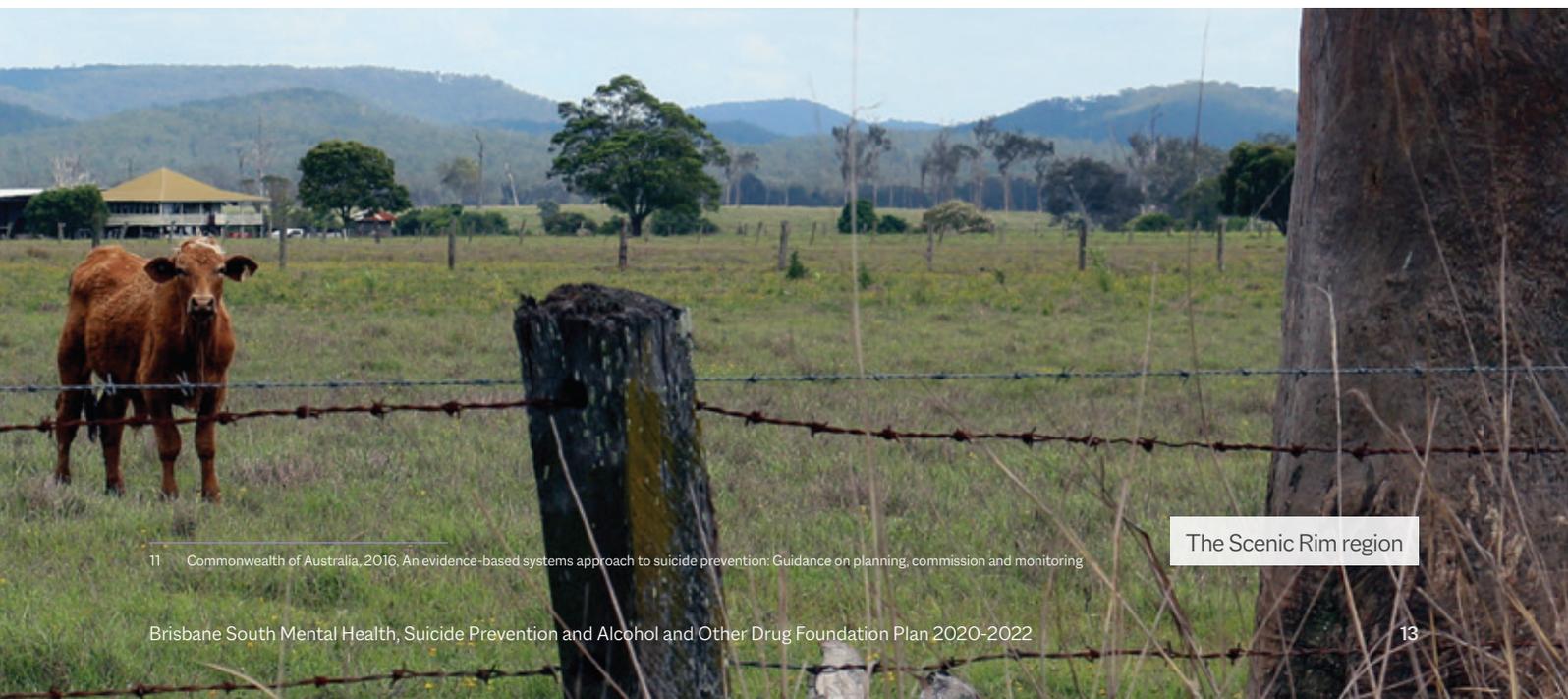
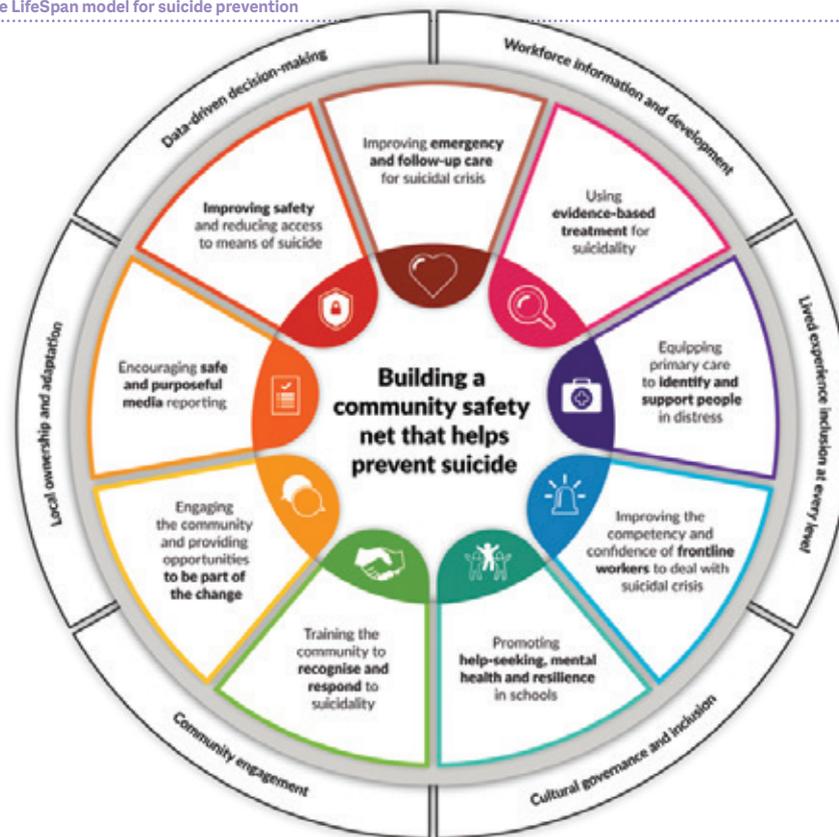


9 Commonwealth of Australia, 2017. The Fifth National Mental Health and Suicide Prevention Plan, 2017-2022. Department of Health
 10 The University of Queensland, 2016. The National Mental Health Service Planning Framework - Care Profiles - All Ages - Commissioned by the Australian Government Department of Health. The University of Queensland, Brisbane.

Suicide prevention

The Black Dog Institute LifeSpan model for suicide prevention is a systems approach to suicide prevention that includes nine evidence-based strategies that are intended to be implemented simultaneously within a localised area. It is a community wide approach with strong collaborations needed across many sectors within a community.¹¹

Figure 7 - Black Dog Institute LifeSpan model for suicide prevention



The Scenic Rim region

¹¹ Commonwealth of Australia, 2016. An evidence-based systems approach to suicide prevention: Guidance on planning, commission and monitoring



North Stradbroke Island

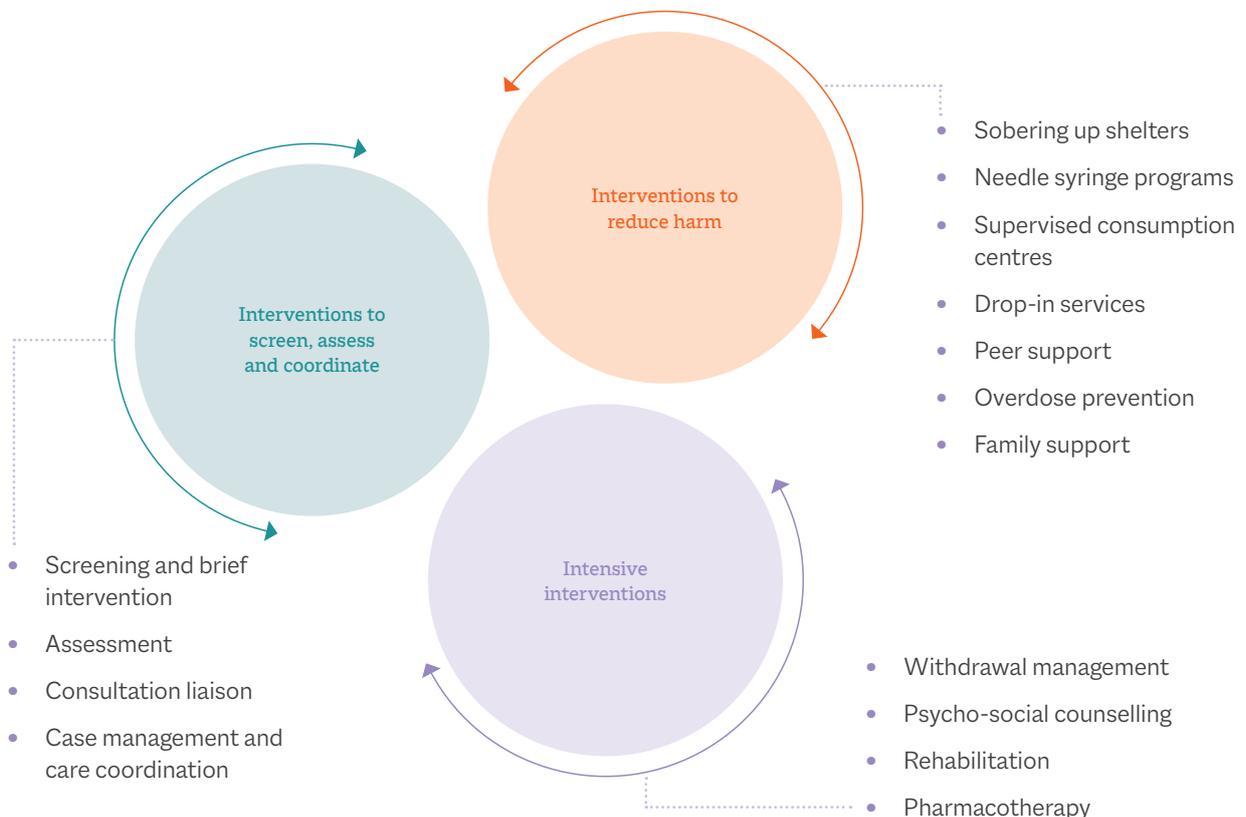
Alcohol and other drugs

The National Framework for Alcohol, Tobacco and Other Drug Treatment guides a national response, and focuses on treatment interventions, addressing how harms from alcohol, tobacco, prescribed medications or currently illicit drugs are reduced based on individual needs and goals. The Framework does not cover primary prevention, which focuses on preventing the commencement and delaying the update of alcohol and/or other drugs.¹²

The Framework aims to provide a nationally endorsed shared understanding, and common reference point for alcohol and other drug treatment funders, treatment providers and practitioners, and people who use substances and their families, friends and significant others. The Framework facilitates strategic planning for the Australian treatment service system and provides the context for national and state treatment processes, programs and policies.¹²

Note: The National Framework diagram referenced is yet to be published.

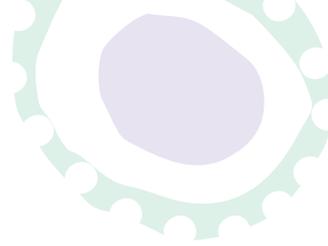
Figure 8 - National Framework for Alcohol, Tobacco and Other Drug Treatment 2019 - 2029¹²



¹² National Framework for Alcohol, Tobacco and Other Drug Treatment 2019-29, Australian Government, Department of Health (2019)



Mt Razorback, Beaudesert



Our commitment

Focus areas

The PHN and MSAMHS will continue to plan, implement and deliver core services across the Brisbane south region. There is agreement that across the mental health stepped care spectrum:

- the core focus of MSAMHS will be the moderate and high acuity / severe and complex components of the service model
- the core focus of the PHN (the NGO commissioned services) will be the mild to moderate and lower acuity end components of the service model
- the core focus of the primary care sector will be the primary prevention, mild to moderate and lower acuity components of the service model.

There are areas of service delivery overlapping each of these core focus areas, this area of overlap will be the focus of joint service delivery and planning opportunities through the life of the Foundation Plan. There will also be scope for the PHN and MSAMHS to apply some focus towards early intervention and prevention in the future.

Any other opportunities to partner across the spectrum of need and focus areas will also be considered for joint service and delivery if appropriate. These opportunities could include other partners such as housing, education, business and other social and community services, and include services outside of current core focus areas such as prevention and activities on specific social determinants of health.



Moreton Bay

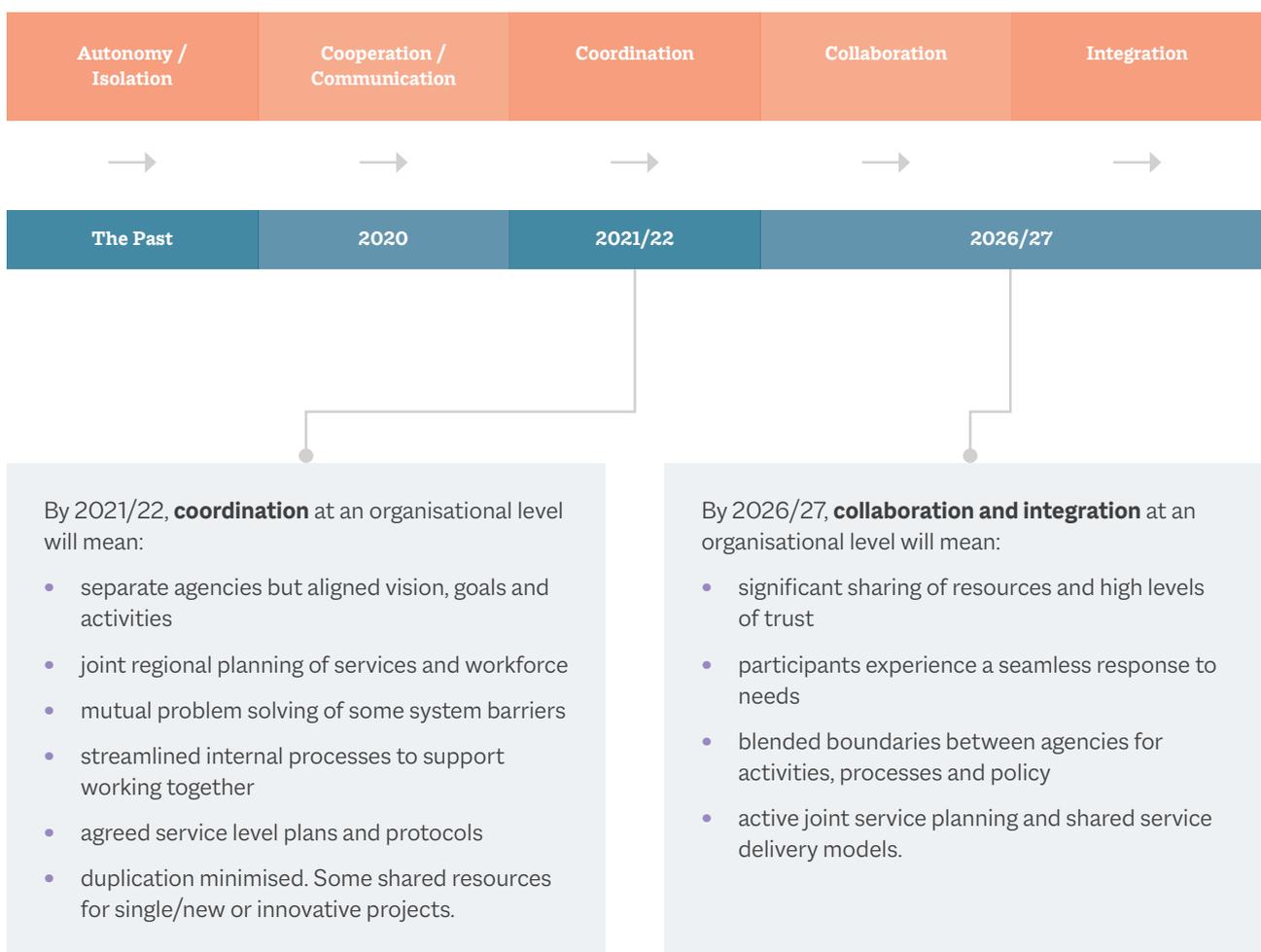
Integration

Integration requires ongoing commitment to developing strong local partnerships and supporting collaborations. The PHN and MSAMHS are committed to strengthening our partnership to ensure our capacity to undertake integrated service planning and delivery where appropriate.

Work done to date has focused on building cooperation and communication. The time is right to progress on to systematically embedding coordination, collaboration and integration. We are strongly committed to aligning our vision and priorities as well as open transparent communication at every level of both organisations. Strong organisational level policies and protocols aimed at reducing fragmentation and increasing linkages between various components of the system will be developed and implemented.

Our integration pathway and objectives are described below.

Figure 9 - The integration continuum



Our partnership journey so far

Since the release of the Strategy 2019-2022, the PHN and MSAMHS have achieved key milestones that have been necessary in developing the level of coordination and collaboration required for integrated service planning and delivery.

July - October 2019 Working together differently

Three joint workshops were delivered to strategically co-design a shared vision, targets and principles for how we plan and deliver consumer-centric addiction and mental health services within the PHN region. The workshops:

- cultivated an appetite to 'do things differently' within addiction and mental health service planning and delivery for our region
- were a means of bringing us together "in the same bus" to map out the journey ahead together
- provided dedicated time to determine priorities in working together differently - at intra organisational, interorganisational and system levels.

July 2019 - MSAMHS organisational realignment

- Re-configured organisation to be more place-based (Princess Alexandra Hospital catchment, Logan-Beaudesert, Bayside), enabling better connections with other service providers and improved responsiveness to the needs of the local populations.

September 2019 - Brisbane South PHN Commissioning Framework

- Implementation of place-based commissioning, in recognition of the distinct social and environmental characteristics and unique strengths and challenges within a community. It targets investments towards priority places, balanced with a regional approach.
- Person-centred approach ensures that people who access services are at the centre of planning and decision-making.
- Includes framework for transformational change in commissioning.

December 2019 - established Joint PHN/MSAMHS Strategic Governance Group to:

- share in leadership and accountability for achieving individual, population and system outcomes across the Brisbane south region.
- oversee development and implementation of the Foundation Plan.



Joint activities - to date

In 2019, the following key joint activities commenced in support of the ongoing development of the partnership between agencies, as well as the delivery of a range of proactive and responsive joint service delivery initiatives:

- joint Board meetings
- embedded routine meetings at management and leadership levels to embed collaboration operationally and strategically
- joint representation on committees, panels and reference groups, examples include:
 - PHN representation on the MSAMHS Serious Incident Review Committee
 - PHN representation on the MSAMHS Patient Flow Optimisation Governance Group
 - MSAMHS representation on Recruitment Panels for the PHN (and vice versa)
 - MSAMHS inclusion on PHN mental health, suicide prevention and alcohol and other drug tender evaluation panels
- joint scenario testing and response (e.g. disaster/incidents management and planning, COVID-19)
- joint engagement in presenting at public facing events (e.g. Mental Health Week, COVID-19 Community Health Provider Virtual Forum 16 April 2020)
- operational partnerships between MSAMHS and PHN Regional Support Coordinators (previously known as Area Account Managers) and PHN Education teams resulting in joint education initiatives e.g. with General Practitioners, practice nurses, general practice administration staff.

Our future

The PHN and MSAMHS partnership’s key message is “Working together differently”. The long-term aim is to develop a highly collaborative and integrated service system to meet the needs of the community of the Brisbane south region and enable better health outcomes. The process to achieve this is seen as a continuum as shown in Figure 10 below.

An immediate focus on embedding high levels of coordination is a fundamental step to achieving the long-term aim of integration. This Foundation Plan therefore focuses heavily on “Working together” at an organisational level to embed the systems and processes necessary to support better coordinated person-centred service delivery. It also embeds the key elements of an integrated approach to comprehensive joint regional planning.

The Foundation Plan will be supported by the development of a detailed implementation plan which will identify critical dependencies, responsibilities, timeframes and outputs for each action.

Partners for innovative services

The PHN and MSAMHS have commenced joint planning, development and delivery of a range of innovative service models. In addition to providing access to new evidence-based services for Brisbane south communities, these services are also being used as pilots for testing policies, procedures and protocols developed at part of the implementation of the Foundation Plan as well as to identify any additional areas of work required.

These future joint services include:

- Safe Haven
- response for under 12’s place-based approach (Logan)

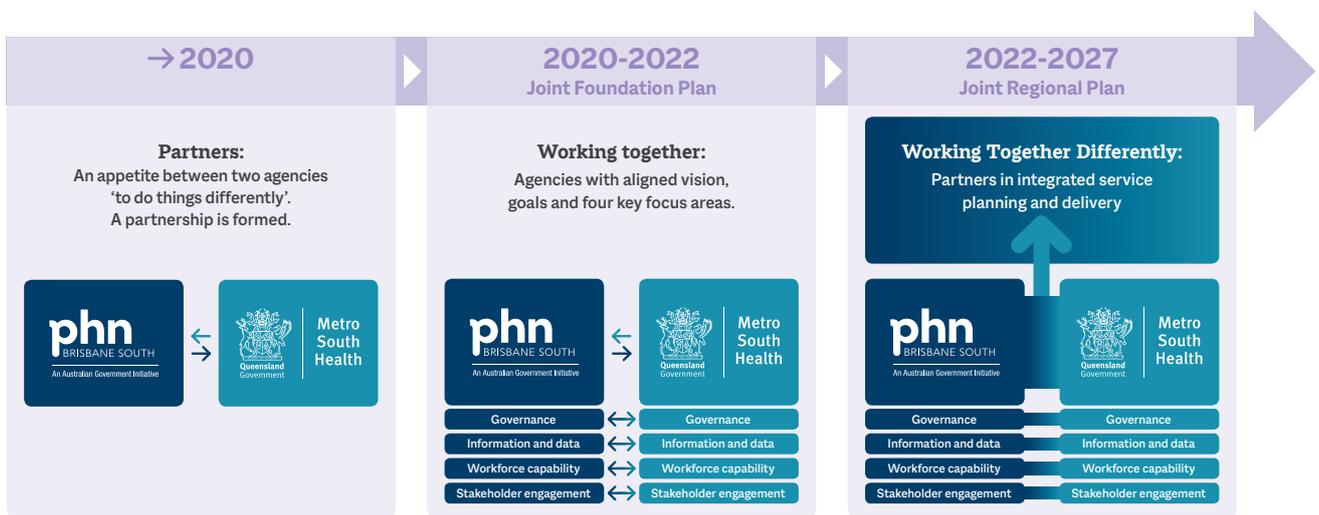
- integration services for people with co-occurring chronic physical and mental health conditions through shared care responses (Nurse Navigators)
- suicide prevention and postvention activities:
 - Zero Suicide reference group
 - shared funding arrangement to support the implementation of ‘The Way Back Service’ through a dedicated role
 - suicide prevention (Logan Emergency Department).
- joint response to addressing physical health needs for people with mental health needs (e.g. nutrition).

Other opportunities currently under consideration include:

- providing specialist outpatient clinics in general practices
- developing Community Assessment Hubs in partnership with other health and social support services such as education, housing and employment
- mental health “wellness” initiatives through partnering with private providers, local government, education sector, business sector, NGOs, sport, recreation and arts sectors.

The Foundation Plan confirms MSAMHS and the PHN’s commitment to progressing these joint service improvements and innovative service models as well as committing to a comprehensive joint regional planning process.

Figure 10- Working together differently



Working together – The Foundation Plan

The Foundation Plan describes our key priorities and actions in the short term to enable integration and support service planning now and into the future. It provides a bridge between the work already commenced, detailing the path required to develop the more comprehensive Joint Regional Plan.

The following table indicates actions that will be undertaken within the short term (within the next two years), as well as those that will be ongoing and incorporated into the Joint Regional Plan. These actions are provided under the following agreed key priority areas:



- 1. governance**
- 2. information and data**
- 3. workforce capability**
- 4. stakeholder engagement.**

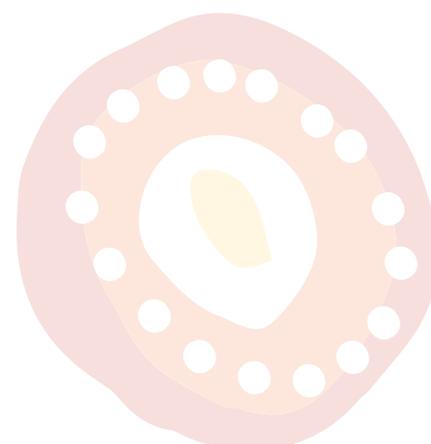


Table 1 – The Foundation Plan key priorities

Key priorities		Short term priorities	Longer term priorities
Governance			
1.0	Organisational structures and partnerships		
1.1	Formalise the structured implementation of the Joint Strategic Governance Group arrangements.	✓	
1.2	Establish a Strategic Coordination Group as a sub working group of the Joint Strategic Governance Group to support the development of the next comprehensive Joint Regional Plan. The Strategic Coordination Group to include representation from Children’s Health Queensland, Mater Hospital Brisbane, the Mental Health, Alcohol and Other Drugs Branch of Queensland Health, major peak bodies in the Brisbane south region including Aboriginal and Torres Strait health services, and people with lived experience and their closest supporters.	✓	
1.3	Develop and implement formal joint partnerships with community controlled Aboriginal and Torres Strait Islander health services as a preferred model for providing mental health and alcohol and other drug services for Aboriginal and Torres Strait Islander peoples.	✓	
1.4	Formalise arrangements for MSAMHS involvement in PHN commissioning processes.	✓	
2.0	Leadership and culture		
2.1	Develop a joint marketing and communication strategy to ensure a consistent narrative and vision for “Working together differently” and support organisational buy-in at all levels.	✓	
2.2	Identify individual clinical and service provider “leaders” and build their capability to provide transformational system leadership and culture change.	✓	✓
2.3	Identify resources to drive initiatives generated by the partnership.	✓	✓
2.4	Continue to work together to enhance financial models and commissioning processes that provide incentives for change and innovation.	✓	✓
2.5	Promote the importance of Aboriginal and Torres Strait Islander leadership and support implementation of the Gayaa Dhuwi (Proud Spirit) Declaration.	✓	✓
2.6	Joint sponsorship and presentations at relevant conferences, forums and events, for example Mental Health Week.	✓	✓
3.0	Accountability and transparency		
3.1	Clarify roles and responsibilities for clinical governance at organisational and service delivery levels.	✓	✓
3.2	Ensure joint processes are in place to locally monitor indicators of community wellbeing, service user experience satisfaction, individual and community outcomes.	✓	✓
3.3	Embed joint program evaluation and performance monitoring of all pilot projects.	✓	✓
3.4	Develop a shared tool for measurement of the extent of integration to enable ongoing self-assessment of the organisational relationship.	✓	✓
3.5	Collect evidence of the impact of the partnership at all levels to undertake formal evaluation.	✓	✓
3.6	Monitor, report and review on progress of implementation of this Foundation Plan.	✓	✓
3.7	Align shared performance indicators and reporting systems.	✓	✓

Key priorities		Short term priorities	Longer term priorities
4.0	Quality and safety		
4.1	Jointly develop written endorsed policies and procedures for agreed critical areas.	✓	✓
4.2	Formalise operational processes for critical incident review and patient flow analysis to ensure joint involvement of both the PHN and MSAMHS.	✓	✓
4.3	Align and monitor shared quality and safety KPI dashboards.	✓	✓
4.4	Ensure compliance with National Safety and Quality Digital Mental Health (NSQDMH) Standards when available.	✓	✓
Information and data			
5.0	Evidence informed planning		
5.1	Work with the Mental Health Alcohol and Other Drugs Branch Queensland Health to utilise the National Mental Health Services Planning Framework tool to map service provision, identify areas of duplication, inefficiency and service gaps and analyse regional workforce requirements.	✓	✓
5.2	Embed place-based mapping of services and referral pathways.	✓	✓
5.3	Foster and cultivate research evaluation partnerships to build an understanding of the impact of co-designed models of care on the individual, the community and the health system.	✓	✓
5.4	Joint review of population data and needs assessment with broader stakeholders to support a collective impact approach to regional mental health and wellbeing.	✓	✓
6.0	Systems and processes		
6.1	Progress the development of shared information systems and shared platforms for data reporting and digital health solutions.	✓	✓
6.2	Formalise data sharing protocols at an organisational level for service utilisation and performance data.	✓	✓
6.3	Improve the quality and accuracy of identification of diverse population groups including Aboriginal and Torres Strait Islander peoples and information systems.	✓	✓
6.4	Build on the foundation established by My Health Record, Queensland Health's Integrated Electronic Medical Record (ieMR) and the Health Provider Portal to develop effective systems and processes to support sharing of consumer clinical information between service providers and consumers.	✓	✓
Workforce capability			
7.0	Workforce planning		
7.1	Develop a joint regional workforce plan to support transforming service models	✓	✓
7.2	Develop specific joint workforce plans for:	✓	✓
7.2.1	lived experience workforce including diverse groups such as LGBTIQ+ people, Aboriginal and Torres Strait Islander peoples, people with culturally and linguistically diverse backgrounds, young people and people living with a disability	✓	✓
7.2.2	growing the professional workforce for Aboriginal and Torres Strait Islander mental health services	✓	✓

Key priorities		Short term priorities	Longer term priorities
8.0	Workforce development		
8.1	Share workforce education programs and resources to build workforce capability in:	✓	✓
8.1.1	delivery of physical health care	✓	✓
8.1.2	psychosocial therapy services	✓	✓
8.1.3	responding to someone in crisis	✓	✓
8.1.4	trauma-informed care	✓	✓
8.1.5	consumer, carer and family engagement	✓	✓
8.1.6	cultural responsiveness to LGBTIQ+ people, Aboriginal and Torres Strait Islander peoples, people with culturally and linguistically diverse backgrounds, young people and people living with a disability.	✓	✓
8.2	Support community leaders/Elders to build appropriate capacity within their communities to provide first response to the needs of people with mental health issues, substance use and suicidality.	✓	✓
Stakeholder engagement			
9.0	Stakeholder engagement and consultation		
9.1	Develop and implement a joint stakeholder engagement framework.	✓	✓
9.2	Undertake joint stakeholder satisfaction/experience surveys.	✓	✓
9.3	Develop joint place-based community representative bodies.	✓	✓
9.3.1	conduct regular joint lived experience forums/focus group/s.	✓	✓
9.4	Embed a shared co-production approach for planning and implementing all future programs and services.	✓	✓
9.5	Develop a joint program of co-production activities for diverse groups i.e. Aboriginal and Torres Strait Islander communities, LGBTIQ+ people, people from culturally and linguistically diverse backgrounds, young people and people living with a disability.	✓	✓
9.6	Promote endorsed shared digital evidence-based online resources to encourage engagement with the broader community for education and early intervention purposes such as promotion of harm reduction, suicide prevention and mental wellness maintenance.	✓	✓



Working together differently – The Joint Regional Plan

The implementation of the Foundation Plan will provide the capacity for the PHN and MSAMHS to undertake comprehensive regional planning, and embed service planning as a key part of the way we work together.

Development of the Joint Regional Plan will be an output of implementation of the Foundation Plan. The key actions, including those implemented, and ongoing, will ensure that future planning will be:

- evidence-based and informed by agreed priorities
- informed, understood and supported by all stakeholders
- responsive to the needs of the community and identified diverse populations
- supported by an informed and engaged community
- supported by a skilled and enabled workforce
- open to innovation and new models of care.

Implementation of the Foundation Plan will embed the policies, procedures and protocols needed to make these essential planning steps part of ongoing everyday business. In addition, it will enable examination of funding models and opportunities for joint commissioning, development

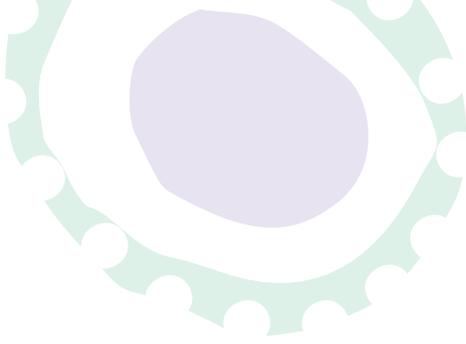


of multi-agency agreements, information sharing protocols and shared clinical governance models.

The Joint Regional Plan will inform the coordinated commissioning of services and will support opportunity for coordinated regional implementation of priority areas, as identified through our regional needs assessment and in line with the Fifth Plan and other national and state policy frameworks. It will have a strong focus on a population health approach to mental health, suicide prevention and alcohol and drugs as well as providing the roadmap to further reform in line with national, state and local priorities.

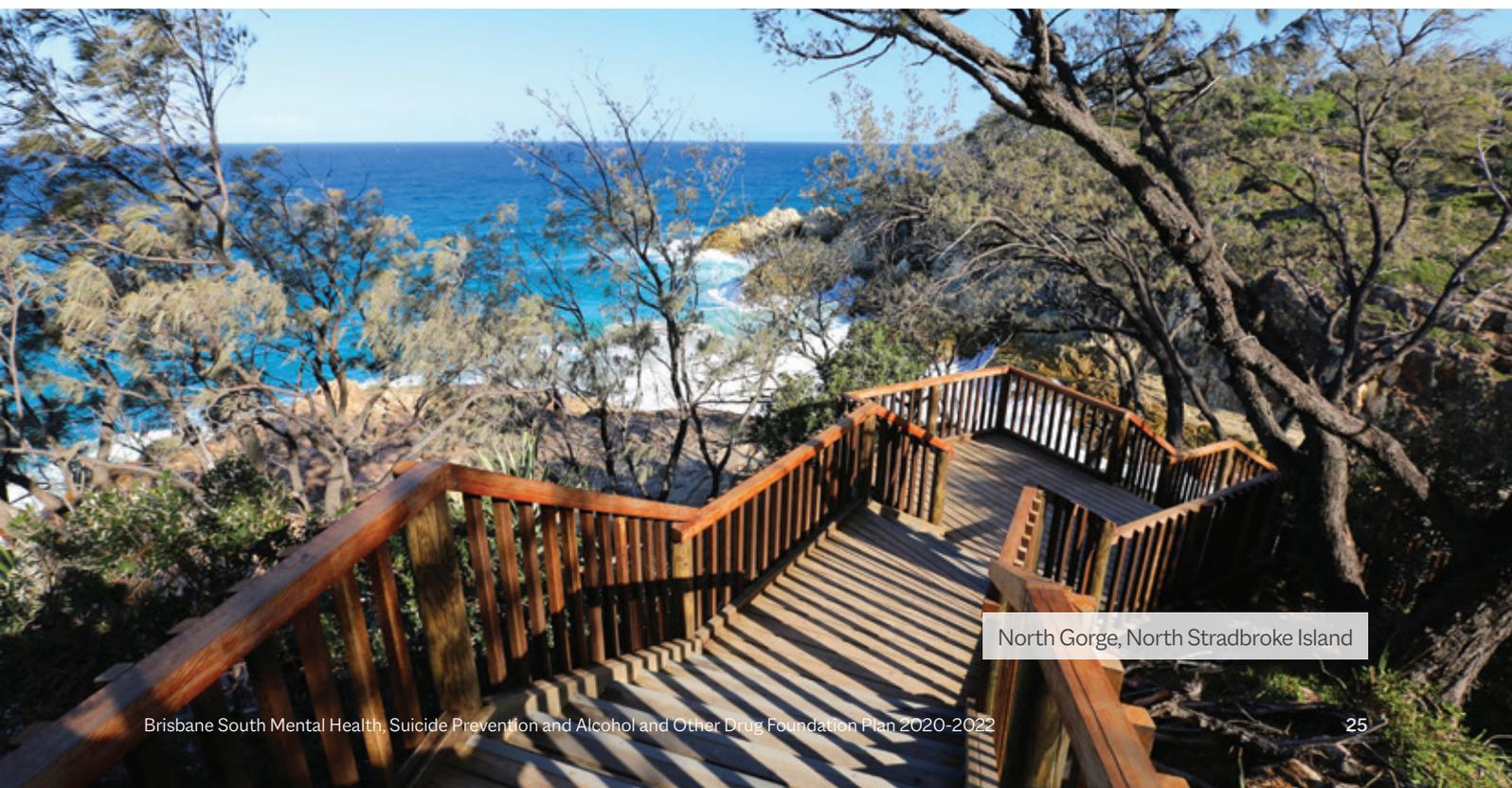


Moreton Bay island ferry



The Joint Regional Plan provides a comprehensive blueprint for service development and will require:

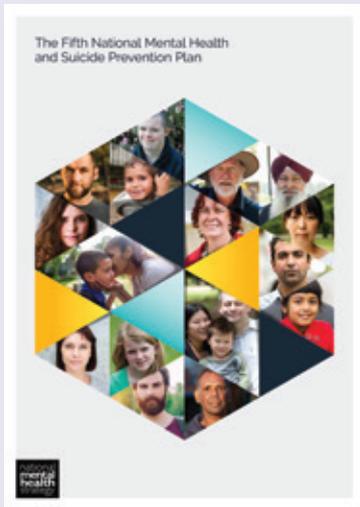
- leadership to support cultural change. This will be achieved through implementation of key actions outlined in the key priority area: **governance**
- priority setting based on information from data analysis and stakeholder input. It is recommended that the Joint Strategic Governance Group identify the priorities to be progressed in the Joint Regional Plan. The consultation forums and processes implemented as part of the Foundation Plan should be used to test the acceptability and feasibility of the directions and priorities that the Joint Strategic Governance Group have proposed. This will be achieved through implementation of key actions outlined in the key priority area: **governance and stakeholder engagement**
- data analysis including completion of detailed service and workforce mapping and analysis of service gaps and duplications. This will be achieved through implementation of key actions outlined in the key priority area: **information and data and workforce capability**
- systematic use of the National Mental Health Service Planning Framework to estimate need and expected demand for mental health care and the level and mix of mental health services and workforce required for a given population. This will be achieved through implementation of key actions outlined in the key priority area: **governance, workforce capability and information and data**
- meaningful engagement and input from all stakeholders including people with lived experience and their closest supporters, government, non-government and private service providers. It would be recommended that the PHN and MSAMHS internal resources regularly collate stakeholder feedback and provide it to the Joint Strategic Governance Group. This will be achieved through implementation of key actions outlined in the key priority area: **governance and stakeholder engagement**.



North Gorge, North Stradbroke Island

Appendix I

National and State policy frameworks



The Fifth National Mental Health and Suicide Prevention Plan 2017 – 2022 (the Fifth Plan), articulates a cross- jurisdictional framework for implementing national action.

The Fifth Plan Priority Area 1: Achieving integrated regional planning and service delivery, describes integration as the *'flagship of actions for ensuring that consumers and carers are at the centre of the way in which services are planned and delivered.'*¹⁴

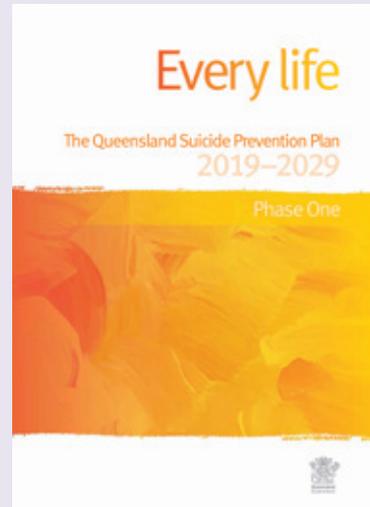
Integration starts with building relationships between organisations that have similar aims and are seeking to improve the outcomes and experiences of consumers and carers. Integration can be implemented at different levels, but integration at any level can deliver better experiences and outcomes for consumers and carers.

A number of other key documents commit governments at all levels to working together to better integrate planning and service delivery at a regional level.



Underpinning principles¹⁵

- Evidence informed responses – funding resource allocation and implementation of strategies should be informed by evidence-based practice.
- Partnerships – includes government and non-government agencies, researchers, families and communities, peer educators, drug user organisations, Aboriginal and Torres Strait Islander communities and other priority populations.
- Coordination and collaboration – coordination and collaboration at the international and national level and within jurisdictions leads to improved outcomes, innovative responses and better use of resources, and allows shared practices and learnings.
- National Direction, jurisdictional implementation – Commonwealth, state and territory governments and local governments are all responsible for regulation and the funding of programs. Jurisdictional implementation allows strategies that reflect local circumstances and address emerging issues.



Action Area 4: Working together¹⁶

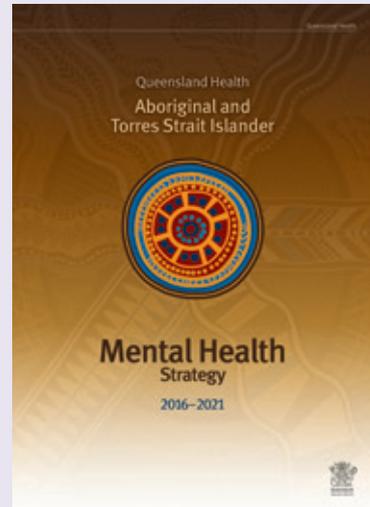
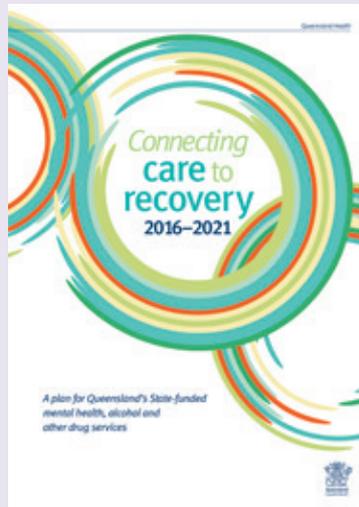
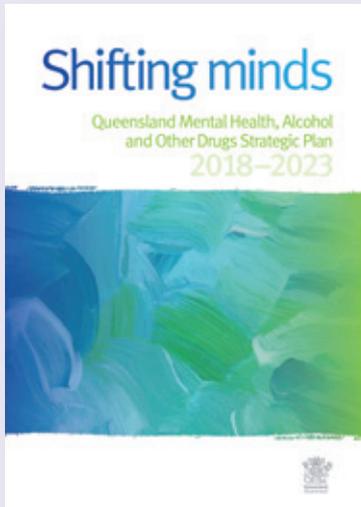
Achieve more by working together

- Every Life requires connected and informed planning, shared information, leveraging national, local and regional experience and knowledge, and growing and expanding partnerships.
- Creates opportunities to work together through shared plans, and coordinated networks and actions, towards a shared goal.

¹⁴ Commonwealth of Australia, 2017, The Fifth National Mental Health and Suicide Prevention Plan, 2017-2022

¹⁵ Commonwealth of Australia, 2017, National Drug Strategy 2017 - 2026

¹⁶ Queensland Mental Health Commission, 2019, Every Life: The Queensland Suicide Prevention Plan 2019 - 2029 (Phase 1)



Focus Area 3:

Whole-of-system improvement¹⁷

1. Drive reform through strategic leadership
2. Build on reform
3. Adopt needs-based planning
4. Renew cross-sectorial suicide prevention and AOD responses
5. Renew cross sectorial approaches to social and emotional well being

Whole-of-system outcomes

- Integrated planning, funding and commissioning are embedded practices to achieve balanced growth across the continuum of interventions.
- Shared leadership and accountability is embedded across sectors for achieving individual and population outcomes.

Priority 1: Access to appropriate services as close to home as practicable and at the optimal time¹⁸

Focus – strengthening cross sector partnerships and collaborative relationships to ensure coordinated service delivery

- Access to care and treatment supported by formalised pathways and models of care.
- New and expanded services to take place through joint needs identification and planning.
- Promotion to optimise the skills and scope of practice of the clinical and non-clinical workforce.
- Commissioning and procurement underpinned by joint planning.

RA2: Connecting healthcare: Integrating mental health and social and emotional wellbeing services¹⁹

Actions - Improving service integration

RA 2.1: Collaborate with A&TICCHSs and PHNs to improve the alignment and integration of plans for mental health services and social and emotional wellbeing programs for Aboriginal and Torres Strait Islander people. Lead area - HHSs. Funded by HHSs - core business.

¹⁷ Queensland Mental Health Commission, 2018, Shifting Minds: Queensland Mental health, Alcohol and Other Drugs Strategic Plan 2018 – 2023
¹⁸ State of Queensland (Queensland Health), 2015, Connecting Care to recovery 2016 - 2021. A plan for Queensland's State funded mental health, alcohol and other drugs services
¹⁹ State of Queensland (Queensland Health), 2016, Queensland Health Aboriginal and Torres Strait Islander Mental Health Strategy 2016-2021







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BETTER SYSTEM, BETTER HEALTH