

ANSWERS TO ESTIMATES QUESTIONS ON NOTICE

HEALTH AND AGEING PORTFOLIO

Budget Estimates 2011-2012, 30/31 May 2011

Question: E11 - 235

OUTCOME 11: Mental Health

Topic: NEW HEADSPACE SITES

Written Question on Notice

Senator Fierravanti-Wells asked:

Was this the same criteria that was used to determine the location of the original 30 sites?
If so, please outline this criteria.

Answer:

No. Locations of the original 30 headspace sites were not predetermined as this was the start of the rollout of the headspace model in Australia. Instead, headspace conducted an expression of interest process, against the following set criteria, to select lead agencies to run the first 30 sites:

- the ability to meet mandatory requirements;
- readiness to establish a service;
- ability to deliver key elements of the headspace model; and
- organisational structure.

These criteria were explained in more detail in the Youth Services Development Fund, Request for Submissions: Information and Guidelines, September 2007 issued by headspace. The relevant excerpt of this is at Attachment A.

The process for selecting successful applicants involved an initial assessment of all applications to ascertain their eligibility against the assessment criteria. A list of preferred applicants was compiled by headspace to ensure the identification of areas of need. This was done in consultation with state and territory governments.

A final determination of lead agencies to run the original 30 sites was made by headspace with consideration given to the further objective of achieving a geographical spread with examples of metropolitan, regional, rural, remote and indigenous service platforms across all states and territories.

Attachment A: Excerpt of Youth Services Development Fund, Request for Submissions: Information and Guidelines, September 2007, issued by headspace.

Submissions are invited from consortia for funding from the Youth Services Development Fund (YSDF) to establish a Community of Youth Services (CYS). Submissions will be assessed according to the following criteria:

- 4.1 Mandatory requirements
- 4.2 Readiness to establish a CYS
- 4.3 Key elements for a CYS model
- 4.4 Structure

These are outlined in greater detail below.

Submissions must meet criteria 4.1 in order to be further considered against criteria 4.2 – 4.4. It should also be noted that selection of successful applicants will be based on those that best meet the selection criteria. Applicants might also be asked to provide additional detail on their model of service delivery and/or business plan and/or be required to provide a presentation on their application to the headspace Grants Committee.

The process for selecting successful applications involves an initial assessment of all applications to ascertain their eligibility against the assessment criteria. The headspace Grants Committee will develop a list of preferred applicants. This will be done in consultation with State and Territory Government Departments in terms of identifying areas of need and of applicant's knowledge, experience and capacity. The preferred applicants will then be visited by staff from headspace national office for a more detailed assessment process. Information from these assessments will then be provided to the Grants Committee for them to make a final determination. Final decisions will be made by the Grants Committee.

A further consideration for funding allocations is that headspace intends to support the establishment of examples of metropolitan, regional, rural, remote and indigenous service platforms within the group of CYSs that are funded over time. Therefore, headspace will make a final determination according to geographical spread of CYSs across all States and Territories.

It should be noted that the receipt of a submission from an organisation or consortium by headspace does not in any way bind headspace to provide funding at the end of the funding allocation process.

Please note that the term "Lead Agency" is used in the following sections to denote the lead agency for a consortium that has submitted an application to receive funds from the Youth Services Development Fund in Round Two.

4.1 Mandatory requirements

In implementing a CYS, the Lead Agency must be able to commit to:

the participation of the following as a minimum within their service reform approach:

- a. Young people and families/carers;
- b. Mental health service providers;
- c. Drug & alcohol service providers;
- d. General Practitioners and/or local Divisions of General Practice; and,
- e. Providers of education, training and employment assistance.

the development of:

- a multi-disciplinary approach in the services available;
- service integration through common management, improved coordination, co-location and other strategies;
- a common approach to assessment of the needs of young people with mental health and related issues;
- engagement of organisations that can assist with social recovery and connections to education,
- training and employment opportunities for young people; and,
- young people/consumer & carer participation mechanisms;

and the utilisation of:

- evidence-based interventions as informed by the headspace Centre of Excellence;
- a data collection tool for entering specified data; and,
- assessment tools and a common client management system;

as well as:

- actively? participating in the Collaborative Learning Network;
- developing local Community Awareness Campaigns and participating in the Service Provider Education and Training Program;
- providing? value for money; and,
- branding the platform (CYS) with the headspace name and acknowledging the provision of funding by headspace: the National Youth Mental Health Foundation, according to the specifications in the Standard Funding Agreement.

4.2 Readiness to establish a CYS

Each Submission will be assessed for the applicant's demonstration of their capacity to quickly establish and operate an effective Community of Youth Services against the following criteria:

a. the extent to which the consortium has the relevant knowledge and experience to provide the required services as evidenced by appropriate personnel, and previous performance on comparable projects that demonstrate the applicant's dependability and quality of work.

b. evidence of existing engagement, liaison, and partnership work with a range of stakeholders, including, in particular, young people and service providers of relevance to this initiative; and experience with the integration and coordination of different service types for young people through co-location/outreach and other strategies.

c. the existence of an established and accessible site for the provision of a specialist youth-specific service, or alternative as appropriate to the proposed model.

4.3 Key elements for a CYS model

Each proposed CYS model will be assessed against the extent to which it demonstrates:

a. The development of a youth-specific service response which, in most cases, will involve utilisation of resources from existing services to create a new youth service network and platform(s) which will address identified unmet needs in the local community;

b. Strategies for the provision of accessible, youth-friendly services, which take into account cost, privacy, appointment scheduling and physical environment, as well as the attitudes and behaviours of all staff. This implies, wherever possible, a focal physical location or platform which will promote access and engagement. Ideally, it will contribute to increased staff morale through team building as well as developing research and evaluation capacity and establishing a community platform for awareness building and local continuing professional

education. The capacity to provide outreach services should also be a consideration;

c. Increasing the capacity of service delivery, where practicable, through the engagement of private practitioners, including GPs and allied health providers that are eligible to claim for services provided under MBS. It might also include additional state funds available for service delivery through the headspace platform;

d. Integration of services. This may involve adjustment of age ranges for service access, the introduction of shared care support systems, and co-location of primary care, drug and alcohol, specialist mental health, vocational assistance and other service providers, centralised clinical management structures and/or other system changes that support integrated and coordinated care;

e. Strategies for establishing the early identification, engagement, assessment and treatment of young people aged 12-25, and support to their families/carers. This would typically involve community awareness strategies, service provider education and training, a common intake and assessment process, and work with schools and other first-to-know agencies to increase their capacity for early identification and referral. Consideration must also be given to addressing the needs of particular population groups relevant to the region, e.g. Indigenous young people, young people from culturally and linguistically diverse backgrounds;

f. Comprehensive assessment and short-to-medium term multidisciplinary intervention with a view to progressively linking the young person into appropriate longer-term care arrangements (if necessary) in a planned and coordinated manner;

g. Coordinated Care, which might include centralised case management, multi-disciplinary case discussions, group supervision, and the use of a common client management tool;

h. Strategies for promoting social recovery, in addition to symptomatic recovery. This might include engaging providers that can assist with identifying and accessing education, training and employment opportunities, establishment of accommodation options and identification of other opportunities for connection with their community;

i. Provision of support and training opportunities for the specialist mental health and drug & alcohol workforce, General Practitioners and other primary care workers, school counsellors, youth workers and others;

j. Involvement of young people and their families/carers in the development of service models and their ongoing review;

k. Sustainability of the model as evidenced by a clear plan for ensuring the CYS is sustainable beyond June 2009 when headspace funding ceases;

l. Rigorous financial management practices that will ensure the funding provided by headspace will be spent appropriately and acquitted correctly; and,

m. A budget that demonstrates value for money.

4.4 Structure

Each submission will be assessed against the extent to which it demonstrates that:

a. An effective model for governance of the project, which will ensure the integration and coordination of a service coalition through a lead agency or a new entity which will act as a lead agency;

b. The organisation's track record in implementing and managing initiatives of a comparable size;

c. The lead agency has a strong track record in managing finances and resources and can meet accountability requirements;

d. There is a binding agreement (i.e. Memorandum of Understanding) that demonstrates a strong service coalition between the local services involved in the model. Note that the mandatory services to be involved in the model are specified in Section 4.1. Other services that might be engaged include:

- Local government, community health, non government youth organisations; and,
- individuals and groups including: local employers, local health service providers; police; juvenile justice; emergency services; youth centres; local schools; and service and sporting clubs.