

Snapshot of the NGO Mental Health Sector Investment Plan

Overview

The final ACT NGO [Mental Health Sector Investment Plan](#) provides a clearer framework for the Commissioning process and desired outcomes. It introduces improved models and measurable indicators and offers providers greater clarity and support in articulating impact and remaining competitive in tenders. The majority of our recommendations have been incorporated, reflecting improved transparency and alignment with sector needs.

Alongside the release of the Sector Investment Plan, the Government has also released the [Mental Health Commissioning Framework](#). This provides additional detail including information on the commissioning structure and details on the outcomes of each domain and the alignment with other Framework Domains (including ACT Wellbeing Framework and ACT Aboriginal and Torres Strait Islander Agreement 2019–2028).

What's new:

Map of service providers outside of the commissioning process:

In the Final SIP, Appendix 2 maps existing services (not included in commissioning) across the different funding streams to indicate gaps in service need. The map indicates where the programs sit on a spectrum of support needs which helps to identify where future investment might be prioritised in each funding stream. The new approach provides a broader view of what services already exist in the ecosystem including those outside of the Commissioning process, guiding applicants on what services **not** to tender for - and minimising service duplication.

New programs identified in service maps but not included in commissioning:

Roses in the Ocean, Althea Wellness Centre, and Chat to PAT were not mentioned in the Draft SIP but are now confirmed as not affected by the Commissioning process and included in the service maps in Appendix 2.

Changes to funding level:

Withdrawn from Commissioning: Coronial Counselling and A Gender Agenda, who previously received funding under the Commissioning allocation, will no longer be included in the Commissioning process due to their close alignment with areas outside the mental health sector, specifically in LGBTQIA+ policy and justice services. This is to enable the continuation of their current services while a review of their future operations is undertaken.

This has reduced the overall funding pool available for the procurement process from \$14.49 million to \$13.8 million.

This was disappointing to see and whilst we support the need for Coronial Counselling and A Gender Agenda we also support the need for adequate supports for a range of adults and older people as well as children, youth and families. Now that the SIP has been completed, advocacy for continued investment to meet the unmet psychosocial needs continues and we made comment on this in our statement as part of the Minister's press release announcing the final Strategic Investment Plan.

Changes to funding allocation:

Breakdown of the Funding Redistribution					
Funding Streams	2024-25 Distribution	Draft SIP Distribution	Final SIP Distribution	Change in Investment from Draft SIP	Change in Investment from 2024-25
Stream 1: Child, Youth and Families	\$2.9m (20%)	\$3.48m (24%)	\$2.7m (19.2%)	-\$0.78m	-\$0.2m
Stream 2: Adults and Older People	\$5.2m (35.9%)	\$3.19m (22%)	\$3.5m (25.2%)	+\$0.31m	-\$1.7m
Stream 3: Residential Community Supports	\$6.2m (42.7%)	\$6.23m (43%)	\$6.2m (45.1%)	-\$0.03m	0m
Stream 4: Aboriginal and Torres Strait Islander Social and Emotional Wellbeing	\$0m (0%)	\$1.16m (8%)	\$1.1m (7.7%)	-\$0.06m	+1.1m
Stream 5: Individual Advocacy	\$0.2m (1.4%)	\$0.14m (1%)	\$0.2m (1.5%)	+\$0.06m	0m
Sector Development Fund	\$0m (0%)	\$0.29m (2%)	\$0.2m (1.4%)	-\$0.09m	+\$0.2m
TOTAL	\$14.5m	\$14.49m	\$13.9m	-\$0.6m	-\$0.6m

- Overall funding available for commissioning has been reduced by \$0.6 million from \$14.49 million to \$13.9 million. This reduction is attributed to the exclusion of Coronial Counselling and A Gender Agenda from the Commissioning allocation. This reduction has changed the percentage proportion allocations across the streams.
- The reduction in allocation to the Child, Youth, and Family Stream reflects feedback on the significant recent investment in child and youth mental health at federal and territory levels.
- The reduction in funding levels for the Child, Youth and Family Stream resulted in an increase in funding to the Adults and Older People stream. This stream was also reduced to account for the funding allocation to Coronial Counselling and A Gender Agenda.
- The percentage allocations have changed with the overall reduction in the total pool of funds available.

- Overall the adults and older people stream has a reduction in funding from current allocations of \$1.7m which comprises funding to the Aboriginal and Torres Strait Islander stream, sector development fund investment and changed arrangements for the two services identified above.
- Reduction in the child, youth and families includes contribution to the sector development fund and the Aboriginal and Torres Strait Islander service.

Changes to stream titles:

The title change from “Adults, Older People, and Complex & Ongoing” to the “Adults and Older People” Stream recognises that complex needs occur across the lifespan.

Decision on the tranches of funding:

The draft SIP provided options for the timing and batching of procurement process. The final SIP incorporates feedback and provides the following timeframes and groupings:

Funding Stream	Timing	Method	Contract Length
Residential Community supports – Tranche 1	New service contracts to commence by 1 July 2026	Direct Grant Approach	3 years
Individual Advocacy – Tranche 1	New service contracts to commence by 1 July 2026	Direct Grant Approach	5 years
Child, Youth and Family – Tranche 2	New service contracts to commence by 1 July 2027	Open Grant process	5 years (with option for 2 year extension)
Aboriginal and Torres-Strait Islander Social and Emotional Wellbeing – Tranche 3	New service contracts to commence by 1 July 2027	Select Grant approach	5 years (with option for 2 year extension)
Adult and Older people – Tranche 3	New service contracts to commence by 1 July 2027	Open Grant Process	5 years (with option for 2 year extension)

A decision was made to separate the child, youth and family process from the adult and older people processes to allow for exploration of collaborative opportunities with CYFSP commissioning.

Key Improvements in the Final SIP:

- The Mental Health Commissioning Framework and its architecture provide greater clarity on the desired outcomes of the NGO Mental Health Commissioning process and align with broader Mental Health Frameworks.
 - a. Outcomes are clearly grouped into Domains:
 - i. Personal Domain: Clearly articulates outcomes for consumers and carers - Providers expected to demonstrate capability in **1 or more** outcomes in this domain.
 - ii. Service Domain: Clearly articulates outcomes for service delivery - Providers expected to demonstrate capability in **all outcomes** in this domain.
 - iii. System Domain: recognises individual providers cannot be responsible for system redesign and allows providers to focus tendering on being responsible for meeting service outcomes, while contributing to system design with support of ACT Government and peaks.
 - b. Outcome statements:
 - i. have been redefined to focus on service accessibility that will positively impact the experience of consumers and carers, shifting conversation away from the view of a consumer “deficit” in individual help-seeking.
 - ii. have been put in context of Indicators and Measures to ensure that they are measurable and have a direct correlational or causational link.
 - c. Clear examples of program logics have been provided to help providers understand how to demonstrate the measurement and observation of their chosen outcomes. Additional training will be offered to upskill providers in developing program logics, enabling them to confidently showcase their intended impact and strengthen their position during the tendering process.

The new SIP includes a supplementary document outlining greater details on the outcome framework. For more information, we encourage providers to refer to the [Mental Health Commissioning Framework](#).

- Introduction of the Dual Continuum Model of Mental Health which recognises that mental health can vary over time, and that presence or absence of a diagnosis does not solely determine a person’s wellbeing. It reflects the wider population range that NGO services can aim to support.
- Introduction of the Triangle of Care Model which frames the aspiration of the ACT mental health system to include the consumer’s carers and support network in an ongoing and supported manner.
- Pillars have changed to become the Support Needs Spectrum. Tendering has now been redirected to focus away from pillars to outcomes which will make tendering process clearer for providers.
- A separate grant tranche for the Child, Youth and Families stream has been selected to explore collaborative opportunities with CYFSP Commissioning.

Tips and Further Information

The Mental Health commissioning cycle will primarily use grants to fund NGOs. However, stakeholders should still register on [Tenders ACT](#) to access other potential funding opportunities from different commissioning cycles.

It is advised to set up notification profiles with at least the codes for Healthcare Services (85000000) and Organisation and Clubs (94000000). Setting up a personalised notification profile ensures you receive alerts when relevant procurement documents are released.

MHCC Position

We welcome the improved clarity, inclusion of measurable outcomes, and adoption of models that reflect consumer and carer needs. These changes position providers to better demonstrate impact and contribute to a more integrated mental health system.

We are disappointed with the overall reduction in funding available for open grants processes and the limited number of services that will be available as a result.