

Eastern Melbourne - Primary Mental Health Care 2023/24 - 2027/28 Activity Summary View



MH-H2H - 1 - Head to Health: Intake and Assessment Phone Service (June 2024)



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH-H2H

Activity Number *

1

Activity Title *

Head to Health: Intake and Assessment Phone Service (June 2024)

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Mental Health Priority Area 7: Stepped care approach

Other Program Key Priority Area Description

Aim of Activity *

- Improved health outcomes and experience for consumers and their families seeking to access mental health support
- Improvement in the health care system: Improved system efficiency, through improved access, integrated and collaborative care, and seeking to improved consumer experience.
- Improved referral pathways and consumer journeys, and through the use of the Intake Assessment & Referral – Decision & Support tool (IAR-DST) as an evidenced based, standardised too.

Description of Activity *

The 'HeadtoHelp' Service was launched in Victoria in September 2020 at a time when Victoria was particularly impacted by the COVID-19 pandemic. In readiness for a national roll out- the Service was rebranded as Head to Health.

The Head to Health phone service, is free to all Victorians – and operates via a centralised free call 1800 number – the person is prompted to enter their state, and postcode, and they are then routed to their local PHN intake service.

EMPHN opted to keep this service in-house whilst establishing

The service provides:

A telephone service to assist in the support, navigation and understanding of the service system for consumers, carers, General Practitioners and other referrers in the community.

Centralised point of intake to EMPHN's commissioned MH & AOD services

The service is staffed with mental health clinicians and practitioners who are knowledgeable about the broader service system accessible within the catchment, and can support to navigate consumers to appropriate pathways based on their specific needs.

The service is enabled by establishing referral pathways with partner agencies to ensure a streamlined process for consumers being navigated to alternate services.

The introduction of the Head to Health service has allowed the PHN's to deliver on the Commonwealth's aim of the utilisation of the Initial Assessment and Referral- Decision Support Tool (IAR-DST) which will highlights presenting need, the level of people would be best suited to based on their need, acuity, risk and preferences.

Needs Assessment Priorities *

Needs Assessment

EMPHN Health Needs Assessment 2021

Priorities

Priority	Page reference
Health outcomes for people who identify as Aboriginal and Torres Strait Islander peoples	p81
Increase uptake of digital health	p83
Addressing increasing prevalence of use of Alcohol and other drugs	p83
Declining workforce and increased pressures on workforce due to pandemic	p84
Addressing Mental Health and Suicide prevention challenges	p84



Activity Demographics

Target Population Cohort

People of all ages who reside, work or study in the Catchment, who require support to access services for their mental health, or other community services that impact on improved mental health, such as housing or financial support.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

has adopted the International Association for Public Participation (IAP2) framework to inform how consumers, clinicians, service providers, peak bodies and other interested parties can work together to inform PHN activities, including (but not limited to) commissioned services and other support activities. IAP2 methods legitimise differing levels of participation dependent on the goals, timeframes, resources and levels of concern in the decision to be made. At EMPHN consultation is the minimum threshold for engagement. This will occur via relevant committees, such as the Clinical Council and Consumer Advisory Committee, and through other groups and mechanisms as appropriate.

Collaboration

As noted, EMPHN has adopted the IAP2 framework to inform stakeholder participation. Wherever possible, EMPHN will attempt to work with consumers, clinicians and other stakeholders throughout more elaborate participation levels, such as involvement, collaboration and empowerment. EMPHN has mapped a range of workflows and processes that support bringing stakeholders into the processes of needs assessments, topic prioritisation, design, and evaluation planning. EMPHN consider that the shared construction and interpretation of complex health problems with stakeholders creates stronger and more effective interventions. Culturally informed consultation will be engaged to ensure that collaboration is culturally safe and trauma informed.



Activity Milestone Details/Duration

Activity Start Date

30/07/2020

Activity End Date

29/06/2026

Service Delivery Start Date

09/2020

Service Delivery End Date

30/06/2026

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): Yes

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



Activity Planned Expenditure

Planned Expenditure

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
H2H Intake	\$1,087,407.00	\$1,167,659.00	\$1,194,102.00	\$0.00	\$0.00

and Assessment Phone Service					
------------------------------------	--	--	--	--	--

Totals

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
H2H Intake and Assessment Phone Service	\$1,087,407.00	\$1,167,659.00	\$1,194,102.00	\$0.00	\$0.00	\$3,449,168.00
Total	\$1,087,407.00	\$1,167,659.00	\$1,194,102.00	\$0.00	\$0.00	\$3,449,168.00

Funding From Other Sources - Financial Details

Funding From Other Sources - Organisational Details



Summary of activity changes for Department

Activity Status

Ready for Submission

Approved by [Signature]



MH - 1 - Headspace (June 2024)



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

1

Activity Title *

Headspace (June 2024)

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Mental Health Priority Area 2: Child and youth mental health services

Other Program Key Priority Area Description

Aim of Activity *

The aim of this activity is to provide early identification and intervention and holistic care for young people aged 12 to 25 years, including improving care pathways and service integration for young people and their families.

Description of Activity *

1. Provision of brief intervention, holistic support to young people across the region out of service centres in Greensborough, Knox, Hawthorn, and Syndal, with satellites in Plenty Valley and Lilydale. In addition, outreach and collaborative arrangements (with local services) are provided to other and harder to reach areas of the catchment.
2. Therapeutic support is offered through a range of tailored service offerings including single session, family therapy, group work, peer work and up to 20 individual sessions of psychological intervention. Face to face and online/telehealth options are available.
3. Service delivery occurs within an integrated, care team approach with co-located allied health, secondary and tertiary services, stepped care and youth hubs.
4. Commissioning and implementation of a new headspace centre in Box Hill will also occur in 22-23, with the intention for service delivery (as above) to commence in July 2023.
5. headspace specific PMHC data is reported directly through to DOHAC.

Needs Assessment Priorities *

Needs Assessment

EMPHN Health Needs Assessment 2021

Priorities

Priority	Page reference
Health outcomes for people who identify as Aboriginal and Torres Strait Islander peoples	p81
Large and growing CALD population	p86
Pandemic Response	p86
Increase uptake of digital health	p83
Declining workforce and increased pressures on workforce due to pandemic	p84
Addressing Mental Health and Suicide prevention challenges	p84



Activity Demographics

Target Population Cohort

Young people aged 12-25 experiencing sub-clinical forms of serious mental illness, or who experience symptoms which place them at risk of developing such an illness, requiring early intervention, short-medium term support.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

has adopted the International Association for Public Participation (IAP2) framework to inform how consumers, clinicians, service providers, peak bodies and other interested parties can work together to inform PHN activities, including (but not limited to) commissioned services and other support activities. IAP2 methods legitimise differing levels of participation dependent on the goals, timeframes, resources and levels of concern in the decision to be made. At EMPHN consultation is the minimum threshold

for engagement. This will occur via relevant committees, such as the Clinical Council and Consumer Advisory Committee, and through other groups and mechanisms as appropriate.

Collaboration

As noted, EMPHN has adopted the IAP2 framework to inform stakeholder participation. Wherever possible, EMPHN will attempt to work with consumers, clinicians and other stakeholders throughout more elaborate participation levels, such as involvement, collaboration and empowerment. EMPHN has mapped a range of workflows and processes that support bringing stakeholders into the processes of needs assessments, topic prioritisation, design, and evaluation planning. EMPHN consider that the shared construction and interpretation of complex health problems with stakeholders creates stronger and more effective interventions. Culturally informed consultation will be engaged to ensure that collaboration is culturally safe and trauma informed.



Activity Milestone Details/Duration

Activity Start Date

13/06/2016

Activity End Date

29/06/2026

Service Delivery Start Date

01/07/2016

Service Delivery End Date

30/06/2026

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: 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?

Co-design or co-commissioning comments

Is this activity in scope for data collection under the Mental Health National Minimum Dataset?

No



Activity Planned Expenditure

Planned Expenditure

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$8,029,812.51	\$6,229,725.00	\$6,335,666.00	\$0.00	\$0.00

Totals

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$8,029,812.51	\$6,229,725.00	\$6,335,666.00	\$0.00	\$0.00	\$20,595,203.51
Total	\$8,029,812.51	\$6,229,725.00	\$6,335,666.00	\$0.00	\$0.00	\$20,595,203.51

Funding From Other Sources - Financial Details

Funding From Other Sources - Organisational Details



Summary of activity changes for Department

Activity Status

Ready for Submission



MH - 2 - Youth Severe/ Youth Enhanced Services (YES) Program (June 2024)



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

2

Activity Title *

Youth Severe/ Youth Enhanced Services (YES) Program (June 2024)

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Mental Health Priority Area 2: Child and youth mental health services

Other Program Key Priority Area Description**Aim of Activity ***

- Provide evidence-informed and tailored mental health services for children and young people
- Improve care pathways and service integration for young people and their families
- Align existing child and youth services to the mental health stepped care model, ensuring a continuum of service delivery options for this population cohort
- Improve physical health needs by connecting consumers with their General Practitioner and other professionals as part of their care team to address and monitor physical health and wellbeing
- Undertake planning and collaborate with local youth service providers and other stakeholders
- Identify service gaps and barriers to access, targeting underserved areas of the catchment and hard to reach target groups and support service responses and solutions to address these identified needs

Description of Activity *

EMPHN will:

- Execute the continuation of current commissioned Youth Enhanced services (2017/18 to 2023/24).
- Continue to work with local service providers, including GP's and local youth services to improve access to service.
- Execute the continuation of Youth Enhanced services during 2023-2024, following the completion of a tender process to contract providers to deliver this program during this period.

Needs Assessment Priorities *

Needs Assessment

EMPHN Health Needs Assessment 2022

Priorities

Priority	Page reference
Health outcomes for people who identify as Aboriginal and Torres Strait Islander peoples	p81
Declining workforce and increased pressures on workforce due to pandemic	p84
Addressing Mental Health and Suicide prevention challenges	p84



Activity Demographics

Target Population Cohort

Young people aged 12-25 who are experiencing sub-clinical forms of serious mental illness, or who are experiencing symptoms which place them at ultra-high risk of developing such an illness.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

EMPHN has adopted the International Association for Public Participation (IAP2) framework to inform how consumers, clinicians, service providers, peak bodies and other interested parties can work together to inform PHN activities, including (but not limited to) commissioned services and other support activities. IAP2 methods legitimise differing levels of participation dependent on the goals, timeframes, resources and levels of concern in the decision to be made. At EMPHN consultation is the minimum threshold for engagement. This will occur via relevant committees, such as the Clinical Council and Consumer Advisory Committee, and through other groups and mechanisms as appropriate.

Collaboration

As noted, EMPHN has adopted the IAP2 framework to inform stakeholder participation. Wherever possible, EMPHN will attempt to work with consumers, clinicians and other stakeholders throughout more elaborate participation levels, such as involvement, collaboration and empowerment. EMPHN has mapped a range of workflows and processes that support bringing stakeholders into the processes of needs assessments, topic prioritisation, design, and evaluation planning. EMPHN consider that the shared construction and interpretation of complex health problems with stakeholders creates stronger and more effective interventions. Culturally informed consultation will be engaged to ensure that collaboration is culturally safe and trauma informed.



Activity Milestone Details/Duration

Activity Start Date

14/06/2016

Activity End Date

29/06/2026

Service Delivery Start Date

06/2017

Service Delivery End Date

30/06/2026

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): Yes

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?**Co-design or co-commissioning comments****Activity Planned Expenditure****Planned Expenditure**

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$3,719,125.18	\$2,434,476.00	\$2,475,862.00	\$0.00	\$0.00

Totals

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$3,719,125.18	\$2,434,476.00	\$2,475,862.00	\$0.00	\$0.00	\$8,629,463.18

Total	\$3,719,125.18	\$2,434,476.00	\$2,475,862.00	\$0.00	\$0.00	\$8,629,463.18
-------	----------------	----------------	----------------	--------	--------	----------------

Funding From Other Sources - Financial Details

[Redacted]

Funding From Other Sources - Organisational Details

[Redacted]



Summary of activity changes for Department

Activity Status

Ready for Submission

Approved by DETAC



MH - 3 - Suicide Prevention (June 2024)



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

3

Activity Title *

Suicide Prevention (June 2024)

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Mental Health Priority Area 5: Community based suicide prevention activities

Other Program Key Priority Area Description**Aim of Activity ***

A coordinated region wide approach to suicide prevention by increasing capacity of communities, health workers and health service partners in identification of suicide risk and access to appropriate support services.

Description of Activity *

- Community activities that focus on wellbeing, resilience, skills development, and help-seeking.
- Media communications to promote help-seeking and reduce stigma related to mental health and suicide.
- Delivering community capacity building and training.
- Development of processes with hospitals and other health services or community groups to help people get the support they need Workforce training, to skill a range of workers in identifying and managing suicide risk.
- Evaluation of the program to help inform next steps for future design.

Needs Assessment Priorities ***Needs Assessment**

EMPHN Health Needs Assessment 2021

Priorities

Priority	Page reference
Addressing needs of Ageing Population	p82
Health outcomes for people who identify as Aboriginal and Torres Strait Islander peoples	p81
Responding to Chronic and Complex Delayed Care	p85
Large and growing CALD population	p86
Addressing increasing prevalence of use of Alcohol and other drugs	p83
Addressing Mental Health and Suicide prevention challenges	p84



Activity Demographics

Target Population Cohort

Whole of population. A focus on promotion and support for hard-to-reach populations and those experiencing complex needs.

In Scope AOD Treatment Type *

Indigenous Specific *

Yes

Indigenous Specific Comments

Working collaboratively with other Victorian PHNs and the local community to deliver a culturally sensitive approach on Aboriginal and Torres Strait Islander suicide prevention response and capacity building training program.

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

EMPHN has adopted the International Association for Public Participation (IAP2) framework to inform how consumers, clinicians, service providers, peak bodies and other interested parties can work together to inform PHN activities, including (but not limited to) commissioned services and other support activities. IAP2 methods legitimise differing levels of participation dependent on the goals, timeframes, resources and levels of concern in the decision to be made. At EMPHN consultation is the minimum threshold for engagement. This will occur via relevant committees, such as the Clinical Council and Consumer Advisory Committee, and through other groups and mechanisms as appropriate.

Collaboration

As noted, EMPHN has adopted the IAP2 framework to inform stakeholder participation. Wherever possible, EMPHN will attempt to work with consumers, clinicians and other stakeholders throughout more elaborate participation levels, such as involvement, collaboration and empowerment. EMPHN has mapped a range of workflows and processes that support bringing stakeholders into the processes of needs assessments, topic prioritisation, design, and evaluation planning. EMPHN consider that the shared construction and interpretation of complex health problems with stakeholders creates stronger and more effective interventions. Culturally informed consultation will be engaged to ensure that collaboration is culturally safe and trauma informed.



Activity Milestone Details/Duration

Activity Start Date

31/07/2018

Activity End Date

29/06/2025

Service Delivery Start Date

01/08/2018

Service Delivery End Date

30/06/2025

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: Yes

Direct Engagement: No

Open Tender: No

Expression Of Interest (EOI): No

Other Approach (please provide details): No

Is this activity being co-designed?

Yes

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?

Yes

Decommissioning

Yes

Decommissioning details?

EMPHN will be reviewing the gaps in market for suicide prevention and postvention services within the catchment. Funding for these gaps will be for targeted populations based on evidence-based initiatives through the National Bilateral Agreement.

Co-design or co-commissioning comments

Is this activity in scope for data collection under the Mental Health National Minimum Dataset?

No



Activity Planned Expenditure

Planned Expenditure

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$1,312,793.75	\$681,372.00	\$692,955.00	\$0.00	\$0.00

Totals

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$1,312,793.75	\$681,372.00	\$692,955.00	\$0.00	\$0.00	\$2,687,120.75

Total	\$1,312,793.75	\$681,372.00	\$692,955.00	\$0.00	\$0.00	\$2,687,120.75
-------	----------------	--------------	--------------	--------	--------	----------------

Funding From Other Sources - Financial Details

[Redacted]

Funding From Other Sources - Organisational Details

[Redacted]



Summary of activity changes for Department

Activity Status

Ready for Submission

Approved by DETAAC



MH - 4 - Indigenous Mental Health (June 2024)



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

4

Activity Title *

Indigenous Mental Health (June 2024)

Existing, Modified or New Activity *

Modified



Activity Priorities and Description

Program Key Priority Area *

Mental Health Priority Area 6: Aboriginal and Torres Strait Islander mental health services

Other Program Key Priority Area Description**Aim of Activity ***

Delivery of integrated Aboriginal social and emotional health and wellbeing services, in partnership with Aboriginal communities.

Description of Activity *

Includes activities such as:

1. Delivery of a commissioned 'wrap around' services that provide culturally responsive integrated mental health, AOD and other wellbeing supports within a holistic model of care. These services accept consumers and then work with them to understand their mental health and other needs, linking with ITC services to provide physical health and other assessments, AOD supports where required, and connection to other cultural services (e.g. gathering spaces, support groups and others).
2. 'Wrap around' services also enable social prescribing and connection with other services as needed by consumers, including linkage to other parts of the system, including justice, education, housing and others.
3. These programs provide support for Aboriginal and/or Torres Strait Islander people via community controlled and mainstream services.
4. Service providers are encouraged and supported by the PHN to build their capability and linkages to health and other services.

Equally, non-Aboriginal focused mainstream services are made aware of the availability of 'wrap around' services for referral where appropriate.

5. As part of the above, the EMPHN Referral, Access and Navigation Team will be continued.

This activity links with Integrated Team Care and Alcohol and Other Drug (AOD) activities to ensure that funded services are able to deliver cohesively to objectives across physical and mental health and substance use.

Where applicable (e.g. provision of stepped care), activities are in scope for PMHC-MDS collection.

Needs Assessment Priorities *

Needs Assessment

EMPHN Health Needs Assessment 2021

Priorities

Priority	Page reference
Health outcomes for people who identify as Aboriginal and Torres Strait Islander peoples	p81
Addressing increasing prevalence of use of Alcohol and other drugs	p83
Addressing Mental Health and Suicide prevention challenges	p84



Activity Demographics

Target Population Cohort

Aboriginal and Torres Strait Islander

In Scope AOD Treatment Type *

Indigenous Specific *

Yes

Indigenous Specific Comments

The programs at Bubup Wilam and Oonah have been developed out of community driven initiatives developed by community controlled organisations. These programs engage directly with the Aboriginal Communities in their regions with outreach and in-reach models of support and receive referrals directly from the community. The program at Banyule Community Health is integrated into an Aboriginal specific team within their organisation, and engage directly with Aboriginal Communities. Relationships are built through participation in community activities, collaborating with other Aboriginal programs and networking across the region.

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

EMPHN has adopted the International Association for Public Participation (IAP2) framework to inform how consumers, clinicians, service providers, peak bodies and other interested parties can work together to inform PHN activities, including (but not limited to) commissioned services and other support activities. IAP2 methods legitimise differing levels of participation dependent on the goals, timeframes, resources and levels of concern in the decision to be made. At EMPHN consultation is the minimum threshold for engagement. This will occur via relevant committees, such as the Clinical Council and Consumer Advisory Committee, and through other groups and mechanisms as appropriate.

Collaboration

As noted, EMPHN has adopted the IAP2 framework to inform stakeholder participation. Wherever possible, EMPHN will attempt to work with consumers, clinicians and other stakeholders throughout more elaborate participation levels, such as involvement, collaboration and empowerment. EMPHN has mapped a range of workflows and processes that support bringing stakeholders into the processes of needs assessments, topic prioritisation, design, and evaluation planning. EMPHN consider that the shared construction and interpretation of complex health problems with stakeholders creates stronger and more effective interventions. Culturally informed consultation will be engaged to ensure that collaboration is culturally safe and trauma informed.



Activity Milestone Details/Duration

Activity Start Date

31/05/2017

Activity End Date

29/06/2024

Service Delivery Start Date

13/05/2017

Service Delivery End Date

30/06/2024

Other Relevant Milestones

- 30.09.22 - Performance Report
- 30.09.22 - Financial Acquittal Report
- 15.11.22 - Confirmation of current Needs Assessment
- 28.02.23 - Interim 2022-23 Six Month Report
- 30.04.23 - Activity Work Plan and Budget
- 30.09.23 - Performance Report
- 30.09.23 - Financial Acquittal Report
- 15.11.23 - Confirmation of current Needs Assessment
- 30.04.24 - Activity Work Plan and Budget
- 30.09.24 - Performance Report
- 30.09.24 - Financial Acquittal Report
- 30.04.25 - Activity Work Plan and Budget
- 30.09.25 - Final Performance Report
- 30.09.25 - Final Financial Acquittal Report



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

Is this activity in scope for data collection under the Mental Health National Minimum Dataset?

No



Activity Planned Expenditure

Planned Expenditure

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$341,090.00	\$0.00	\$0.00	\$0.00	\$0.00

Totals

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$341,090.00	\$0.00	\$0.00	\$0.00	\$0.00	\$341,090.00
Total	\$341,090.00	\$0.00	\$0.00	\$0.00	\$0.00	\$341,090.00

Funding From Other Sources - Financial Details

Funding From Other Sources - Organisational Details



Summary of activity changes for Department

Activity Status

Ready for Submission

Subject	Description	Commented By	Date Created
Activity Update	Minor changes to Activity Description.	Anisha Balakrishnan	25/06/2024
Modified Updates	1. Activity Description updated to address page 29-30 of the AWP Guide. 2. PMHC MDS answer as 'yes' as per page 20 of PMHC DOV12.	Anisha Balakrishnan	25/06/2024

Approved by DOHAAC



MH - 5 - Mental Health Stepped Care Approach (June 2024)



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

5

Activity Title *

Mental Health Stepped Care Approach (June 2024)

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Mental Health Priority Area 7: Stepped care approach

Other Program Key Priority Area Description

Aim of Activity *

The aim of this activity is to provide a continuum of services to improve mental health outcomes and experience for consumers and their families by:

- Providing, evidence-informed, integrated and collaborative care
- Improving mental health care system integration, referral pathways and consumer journeys
- Providing evidence-informed services delivered with cost effective use of resources
- Improving practitioner experience

Description of Activity *

5.1. Mental Health Stepped Care

EMPHN commissions a Mental Health Stepped Care Model (MHSCM) which is delivered across the whole of the EMPHN catchment. Mental health Stepped Care provides evidence-based interventions across the continuum of care needs for under-served populations. This incorporates low-, moderate- and high- levels of care that are matched to people's needs. The MHSCM emphasises collaborative, recovery focused care, working with the consumer and those who care for them, their general practitioner, care team and specialist mental health service providers when appropriate. The model addresses care needs holistically, and includes the person's mental and physical health, education and employment, alcohol and other drug concerns, family and social functioning, and suicide and self-harm care and support needs.

The major features of the MHSCM are:

- a. Integrated person centred care on basis of need
- b. Utilisation of a range of intervention and treatment modalities including eHealth; low intensity psychological interventions; group therapy; moderate intensity psychological interventions; care coordination/clinical care coordination; and dual diagnosis support
- c. Screening for physical health needs and connecting consumers with their General Practitioner and other professionals as part of their care team to address and monitor physical health and wellbeing
- d. Multi-disciplinary mental health team containing a combination of clinical and non-clinical staff, including peer support workers
- e. Defined care pathways and linkages to other social care support as required

New contracts to implement EMPHN's revised MHSCM commenced in January 2023, based on redesign and quality improvement activities undertaken. The redesign and new contracts have responded to:

- An evaluation of the model completed in December 2020
- Interdependencies with the State and Commonwealth reforms
- The continued impact of the COVID-19 pandemic

The implementation of the EMPHN's new MHSCM will be monitored throughout 2023-24 using a range of strategies, including formal contract management meetings, a qualitative audit, and a 6-month evaluation.

5.2. Psychiatric Advice and Consultation Service (PACs)

PACs was a secondary consultation service that supported the stepped care model in the previous model of care and is no longer part of the redesigned stepped care model.

5.3. Implementation of System Integration and Capacity Building Strategy

EMPHN commissions collaboration and alliance activities through two networks within the catchment is currently under review. The networks are funded to strengthen local relationships and establish ways of working that foster partnerships and integration of services.

5.4. Priority populations

EMPHN supports services to provide specialist care to under-served populations. This includes additional funding for Residential aged care, Culturally safe Aboriginal and Torres Strait Islander services.

Needs Assessment Priorities *

Needs Assessment

EMPHN Health Needs Assessment 2021

Priorities

Priority	Page reference
Addressing needs of Ageing Population	p82
Health outcomes for people who identify as Aboriginal and Torres Strait Islander peoples	p81
Responding to Chronic and Complex Delayed Care	p85
Large and growing CALD population	p86
Increase uptake of digital health	p83
Addressing increasing prevalence of use of Alcohol and other drugs	p83
Declining workforce and increased pressures on workforce due to pandemic	p84
Addressing Mental Health and Suicide prevention	p84

challenges	
------------	--



Activity Demographics

Target Population Cohort

Whole of population. A focus on promotion and support for hard-to-reach populations and those experiencing complex needs.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

EMPHN has adopted the International Association for Public Participation (IAP2) framework to inform how consumers, clinicians, service providers, peak bodies and other interested parties can work together to inform PHN activities, including (but not limited to) commissioned services and other support activities. IAP2 methods legitimise differing levels of participation dependent on the goals, timeframes, resources and levels of concern in the decision to be made. At EMPHN consultation is the minimum threshold for engagement. This will occur via relevant committees, such as the Clinical Council and Consumer Advisory Committee, and through other groups and mechanisms as appropriate.

Collaboration

As noted, EMPHN has adopted the IAP2 framework to inform stakeholder participation. Wherever possible, EMPHN will attempt to work with consumers, clinicians and other stakeholders throughout more elaborate participation levels, such as involvement.

collaboration and empowerment. EMPHN has mapped a range of workflows and processes that support bringing stakeholders into the processes of needs assessments, topic prioritisation, design, and evaluation planning. EMPHN consider that the shared construction and interpretation of complex health problems with stakeholders creates stronger and more effective interventions. Culturally informed consultation will be engaged to ensure that collaboration is culturally safe and trauma informed.



Activity Milestone Details/Duration

Activity Start Date

29/12/2017

Activity End Date

29/06/2026

Service Delivery Start Date

30/12/2017

Service Delivery End Date

30/06/2026

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: 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?

Co-design or co-commissioning comments

Is this activity in scope for data collection under the Mental Health National Minimum Dataset?

No



Activity Planned Expenditure

Planned Expenditure

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$9,460,516.09	\$7,219,052.00	\$7,341,776.00	\$0.00	\$0.00

Totals

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$9,460,516.09	\$7,219,052.00	\$7,341,776.00	\$0.00	\$0.00	\$24,021,344.09
Total	\$9,460,516.09	\$7,219,052.00	\$7,341,776.00	\$0.00	\$0.00	\$24,021,344.09

Funding From Other Sources - Financial Details



Funding From Other Sources - Organisational Details



Summary of activity changes for Department

Activity Status

Ready for Submission



Approved by DOHAC



MH - 6 - Residential Aged Care: Healthy Ageing (June 2024)



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

6

Activity Title *

Residential Aged Care: Healthy Ageing (June 2024)

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Mental Health Priority Area 3: Psychological therapies for rural and remote, under-serviced and / or hard to reach groups

Other Program Key Priority Area Description**Aim of Activity ***

The Healthy Ageing Service Response provides access to mental health services for individuals aged over 65 who have (or at risk of developing) mild to moderate mental health issues. The service delivers primary consultations or brief interventions for older people residing in the community and RACFs and addresses the mental health needs of the client, as well as broader health and social needs. The service is delivered as part of a coordinated care team approach with General Practitioners (GPs), general practice staff and/or RACFs staff. GPs, general practice staff and RACFs staff have access to telephone/telehealth-based advice and referral and navigation support, and capacity building activities, such as education and training, to enable them to better support the older people they work with. The service also offers a secondary consultation service which is available to GPs and RACFs across the catchment.

Description of Activity *

Continuation of Healthy Ageing Service Response – Continuation of Older Persons Community and Residential Aged Care Service (RACFs) and Capacity Building Strategy. Comprehensive co-design and the learnings from previous pilots/trials have informed a catchment-wide model providing support to GPs and RACFs staff and older adults living in the community and in RACFs.

This program is currently being externally evaluated. As part of the evaluation EMPHN will undertake comprehensive consultation with both the service users, clinicians and RACFs participating. Evaluation framework will focus on whether the Healthy Ageing Service Response has met its objectives, whether any improvements can be made to the program and determine the benefits of

the program to both the community and RACFs.

The evaluation will also determine whether it has:

- Reached its intended consumers (general practice staff, RACF staff, patients)
- Been adopted by general practices and RACFs
- Been implemented as planned

The result from the evaluation will also form the continuous improvement and potential redesign of the program pending funding confirmation.

Needs Assessment Priorities *

Needs Assessment

EMPHN Health Needs Assessment 2022

Priorities

Priority	Page reference
Addressing needs of Ageing Population	p82
Pandemic Response	p86
Addressing Mental Health and Suicide prevention challenges	p84



Activity Demographics

Target Population Cohort

Older people residing in the community and RACFs

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

EMPHN has adopted the International Association for Public Participation (IAP2) framework to inform how consumers, clinicians, service providers, peak bodies and other interested parties can work together to inform PHN activities, including (but not limited to) commissioned services and other support activities. IAP2 methods legitimise differing levels of participation dependent on the goals, timeframes, resources and levels of concern in the decision to be made. At EMPHN consultation is the minimum threshold for engagement. This will occur via relevant committees, such as the Clinical Council and Consumer Advisory Committee, and through other groups and mechanisms as appropriate.

Collaboration

As noted, EMPHN has adopted the IAP2 framework to inform stakeholder participation. Wherever possible, EMPHN will attempt to work with consumers, clinicians and other stakeholders throughout more elaborate participation levels, such as involvement, collaboration and empowerment. EMPHN has mapped a range of workflows and processes that support bringing stakeholders into the processes of needs assessments, topic prioritisation, design, and evaluation planning. EMPHN consider that the shared construction and interpretation of complex health problems with stakeholders creates stronger and more effective interventions. Culturally informed consultation will be engaged to ensure that collaboration is culturally safe and trauma informed.



Activity Milestone Details/Duration

Activity Start Date

29/06/2020

Activity End Date

29/06/2026

Service Delivery Start Date

07/09/2020

Service Delivery End Date

30/06/2026

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: 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?

Co-design or co-commissioning comments



Activity Planned Expenditure

Planned Expenditure

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$4,649,934.00	\$1,793,419.00	\$1,822,114.00	\$0.00	\$0.00

Totals

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$4,649,934.00	\$1,793,419.00	\$1,822,114.00	\$0.00	\$0.00	\$8,265,467.00
Total	\$4,649,934.00	\$1,793,419.00	\$1,822,114.00	\$0.00	\$0.00	\$8,265,467.00

Funding From Other Sources - Financial Details

Funding From Other Sources - Organisational Details



Summary of activity changes for Department

Activity Status

Ready for Submission



MH - 7 - Initial Assessment and Referral – Training Support Officer (IAR-TSO) - June 2024



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

7

Activity Title *

Initial Assessment and Referral – Training Support Officer (IAR-TSO) - June 2024

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Mental Health Priority Area 7: Stepped care approach

Other Program Key Priority Area Description

Aim of Activity *

Within a stepped care model a person presenting to the health system will be matched to the least intensive level of care that most suits their current treatment need. The aim of this activity is to equip General Practitioners and other primary care providers with the knowledge and skills to be able to assess a consumer’s needs using a standardised tool to determine the most appropriate level of care for their needs.

This approach is intended to:

- enable consumers to access the right level of care, matched to their needs
- prevent over servicing, and
- reduce the pressure on the existing mental health system

Description of Activity *

Funding to recruit an Initial Assessment and Referral - Training and Support officer (IAR-TSO).

The training and support officer will attend training with the National Project Manager (NPM) to build capability and confidence in

using the IAR in primary care settings in the catchment. They will facilitate training and support general practitioners to implement the IAR. The TSO will be connected to a network of peers across the country to share, learnings and problem solve any challenges.

The IAR-TSO will:

Provide training to general practitioners and other clinicians in Adult Mental Health Centres, General Practices, and Aboriginal Medical Services, and commissioned providers, and in the future Child Head to Health Centres, Residential Aged Care Facilities and Local Hospital Networks.

Offer training and ongoing support via multiple channels including online, telephone, videoconference and on-site as required to meet practitioner needs.

Work toward training the target number of general practitioners allocated by the Department for the PHN.

Maintain record of GP's and other providers trained in the IR, and working toward a Commonwealth set target of a % of GP's within the EMPHN catchment.

Needs Assessment Priorities *

Needs Assessment

EMPHN Health Needs Assessment 2021

Priorities

Priority	Page reference
Addressing needs of Ageing Population	p82
Health outcomes for people who identify as Aboriginal and Torres Strait Islander peoples	p81
Increase uptake of digital health	p83
Addressing increasing prevalence of use of Alcohol and other drugs	p83
Declining workforce and increased pressures on workforce due to pandemic	p84
Addressing Mental Health and Suicide prevention challenges	p84



Activity Demographics

Target Population Cohort

GP's within the EMPHN catchment

GP practice staff and other clinicians working within the EMPHN sector

Head to Health Centre staff

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

has adopted the International Association for Public Participation (IAP2) framework to inform how consumers, clinicians, service providers, peak bodies and other interested parties can work together to inform PHN activities, including (but not limited to) commissioned services and other support activities. IAP2 methods legitimise differing levels of participation dependent on the goals, timeframes, resources and levels of concern in the decision to be made. At EMPHN consultation is the minimum threshold for engagement. This will occur via relevant committees, such as the Clinical Council and Consumer Advisory Committee, and through other groups and mechanisms as appropriate.

Collaboration

As noted, EMPHN has adopted the IAP2 framework to inform stakeholder participation. Wherever possible, EMPHN will attempt to work with consumers, clinicians and other stakeholders throughout more elaborate participation levels, such as involvement, collaboration and empowerment. EMPHN has mapped a range of workflows and processes that support bringing stakeholders into the processes of needs assessments, topic prioritisation, design, and evaluation planning. EMPHN consider that the shared construction and interpretation of complex health problems with stakeholders creates stronger and more effective interventions. Culturally informed consultation will be engaged to ensure that collaboration is culturally safe and trauma informed.



Activity Milestone Details/Duration

Activity Start Date

30/03/2022

Activity End Date

29/06/2025

Service Delivery Start Date

01/06/2022

Service Delivery End Date

30/06/2025

Other Relevant Milestones

Milestones build into the project in line with department set targets for % of GP's trained within 2 year period.

There was an initial delay in the project due to needing to establish where this project sat within the organisation, competing demands, and staff turn over – however this should not impact the overall success of the project



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



Activity Planned Expenditure

Planned Expenditure

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$561,354.01	\$119,300.00	\$0.00	\$0.00	\$0.00

Totals

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$561,354.01	\$119,300.00	\$0.00	\$0.00	\$0.00	\$680,654.01
Total	\$561,354.01	\$119,300.00	\$0.00	\$0.00	\$0.00	\$680,654.01

Funding From Other Sources - Financial Details

Funding From Other Sources - Organisational Details



Summary of activity changes for Department

Activity Status

Ready for Submission



MH - 10 - Targeted Regional Initiatives to Suicide Prevention (TRISP) - June 2024



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

10

Activity Title *

Targeted Regional Initiatives to Suicide Prevention (TRISP) - June 2024

Existing, Modified or New Activity *

Modified



Activity Priorities and Description

Program Key Priority Area *

Mental Health Priority Area 5: Community based suicide prevention activities

Other Program Key Priority Area Description

Aim of Activity *

To adopt a community-led and systems-based approach to suicide prevention targeting populations identified at risk of suicide or suicidal distress.

Description of Activity *

- i. improve care coordination and service pathways for people at risk of or bereaved by suicide.
- ii. commission and/or adapt services, activities and training packages for at-risk cohorts in the community to identify and respond early to distress.
- iii. in partnership with community leaders and people with lived experience, commission services that offer support via multiple channels including online, telephone, videoconference and face to face to meet community needs.
- iv. build the capacity and capability of the local workforce to respond to suicide and distress and link people with appropriate supports and services.
- v. commission peer support and mentorship programs for people at risk or impacted by suicide.
- vi. submit data on activities to the Primary Mental Health Care Minimum Data Set.
- vii. undertake data analytics and research using data in the Suicide and Self Harm

Monitoring System and make the analysis available for use by planners and service providers.

EMPHN will engage a full-time equivalent Suicide Prevention Regional Response Coordinator who will take primary responsibility for engagement, coordination and integration of early intervention and suicide prevention activities across regional stakeholders and service providers.

PMHC MDS data collection has been confirmed by DOHAC. The Bereavement Support Services provider's contract will be adjusted to reflect PMHC MDS collection with the new contract renewal in September '24.

Needs Assessment Priorities *

Needs Assessment

EMPHN Health Needs Assessment 2022

Priorities

Priority	Page reference
Addressing Mental Health and Suicide prevention challenges	p84



Activity Demographics

Target Population Cohort

Coordinators are currently identifying and understanding the needs in the community to confirm the target population cohort. Initial engagement with the community and sector indicates that older men and young children have been highlighted as at-risk cohorts.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

EMPHN has adopted the International Association for Public Participation (IAP2) framework to inform how consumers, clinicians, service providers, peak bodies and other interested parties can work together to inform PHN activities, including (but not limited to) commissioned services and other support activities. IAP2 methods legitimise differing levels of participation dependent on the goals, timeframes, resources and levels of concern in the decision to be made. At EMPHN consultation is the minimum threshold for engagement. This will occur via relevant committees, such as the Clinical Council and Consumer Advisory Committee, and through other groups and mechanisms as appropriate.

Collaboration

As noted, EMPHN has adopted the IAP2 framework to inform stakeholder participation. Wherever possible, EMPHN will attempt to work with consumers, clinicians and other stakeholders throughout more elaborate participation levels, such as involvement, collaboration and empowerment. EMPHN has mapped a range of workflows and processes that support bringing stakeholders into the processes of needs assessments, topic prioritisation, design, and evaluation planning. EMPHN consider that the shared construction and interpretation of complex health problems with stakeholders creates stronger and more effective interventions. Culturally informed consultation will be engaged to ensure that collaboration is culturally safe and trauma informed.



Activity Milestone Details/Duration

Activity Start Date

Activity End Date

29/06/2025

Service Delivery Start Date

09/09/2023

Service Delivery End Date

30/06/2025

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: Yes

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?

Yes

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

No

Decommissioning

No

Decommissioning details?

Co-design or co-commissioning comments

EMPHN will be partnering with neighbouring PHNs as well as the community to co-design and co-commission TRISP.

Is this activity in scope for data collection under the Mental Health National Minimum Dataset?

Yes



Activity Planned Expenditure

Planned Expenditure

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$493,776.00	\$0.00	\$0.00	\$0.00	\$0.00

Totals

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$493,776.00	\$0.00	\$0.00	\$0.00	\$0.00	\$493,776.00
Total	\$493,776.00	\$0.00	\$0.00	\$0.00	\$0.00	\$493,776.00

Funding From Other Sources - Financial Details

Funding From Other Sources - Organisational Details



Summary of activity changes for Department

Activity Status

Ready for Submission

Subject	Description	Commented By	Date Created
Modified Updates	1. Activity Description updated to address page 29-30 of the AWP Guide. 2. PMHC MDS answer as 'yes'.	Anisha Balakrishnan	25/06/2024



MH - 11 - Mental Health Supports for Australians Impacted by the Flooding Events (June 2024)



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

11

Activity Title *

Mental Health Supports for Australians Impacted by the Flooding Events (June 2024)

Existing, Modified or New Activity *

Modified



Activity Priorities and Description

Program Key Priority Area *

Mental Health Priority Area 1: Low intensity mental health services

Other Program Key Priority Area Description**Aim of Activity ***

To provide immediate mental health supports arising from trauma and loss associated with the October 2022 floods in Victoria, Tasmania and New South Wales.

Description of Activity *

No PMHC MDS required for this project as all grants are community capacity / capability enhancement funds. No direct service provided with these grants.

1. Wellbeing and Resilience Grants will commission small community grants to fund activities that help build resilience, social connectedness and deal with loss and anxiety as a result of the floods.

Wellbeing and Resilience Grants provide local and grass roots community agencies with funds that address resilience, social connectedness and deal with loss and anxiety resulting from floods. This approach recognizes that those who seek to support a community are often affected themselves, rely on volunteer workforce and establishes a feedback mechanism of identified needs prior to funding.

31 applications were received with 13 successful grants awarded, addressing one or more of the following needs: reduce impacts

of natural disasters on mental health; address climate change anxiety; build resilience within the community to natural disasters; support social connectedness for communities.

The grants were delivered variously through community events, information sessions, training (capacity building and intensive), wellbeing workshops (capacity building and intensive), and group work. Grants covered a range of demographics from primary aged children, adolescents, working adults and retirees.

2. Mental Health Emergency Response Coordinators will coordinate access to the mental health services across the region, administer the Wellbeing and Resilience Grants and improve integrated support with state and local governments services to reduce burden on those in need of assistance.

The Mental Health Emergency Response Coordinator (MHERC) has developed strong linkages between the local council (Yarra Ranges), the PHN and local services. Demonstrated through attending local wellbeing network and area mental health steering group, linking local providers with regional mental health and suicide prevention initiatives and bringing national initiatives to the local community.

The MHERC facilitated a coordination event for the grant recipients, holding a connection evening to bring recipients together, creating opportunity for networking, recognising collective impact, identifying future points of intersection and collaboration, and receive mental health training workshop.

All these activities above are for the October 2022 floods package only. (only funding EMPHN received).

Needs Assessment Priorities *

Needs Assessment

EMPHN Health Needs Assessment 2022

Priorities

Priority	Page reference
Addressing Mental Health and Suicide prevention challenges	p84



Activity Demographics

Target Population Cohort

Australians affected by the Victorian floods in the Yarra Ranges and Murrindindi. Based on initial engagement with the affected areas, men have been identified as a specific cohort.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

No

SA3 Name	SA3 Code
Yarra Ranges	21105



Activity Consultation and Collaboration

Consultation

EMPHN has adopted the International Association for Public Participation (IAP2) framework to inform how consumers, clinicians, service providers, peak bodies and other interested parties can work together to inform PHN activities, including (but not limited to) commissioned services and other support activities. IAP2 methods legitimise differing levels of participation dependent on the goals, timeframes, resources and levels of concern in the decision to be made. At EMPHN consultation is the minimum threshold for engagement. This will occur via relevant committees, such as the Clinical Council and Consumer Advisory Committee, and through other groups and mechanisms as appropriate.

Collaboration

As noted, EMPHN has adopted the IAP2 framework to inform stakeholder participation. Wherever possible, EMPHN will attempt to work with consumers, clinicians and other stakeholders throughout more elaborate participation levels, such as involvement, collaboration and empowerment. EMPHN has mapped a range of workflows and processes that support bringing stakeholders into the processes of needs assessments, topic prioritisation, design, and evaluation planning. EMPHN consider that the shared construction and interpretation of complex health problems with stakeholders creates stronger and more effective interventions. Culturally informed consultation will be engaged to ensure that collaboration is culturally safe and trauma informed.



Activity Milestone Details/Duration

Activity Start Date

Activity End Date

29/06/2024

Service Delivery Start Date

11/12/2023

Service Delivery End Date

30/06/2024

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): Yes

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

Yes

Decommissioning details?

Funding ceased 30th June 2024.

Co-design or co-commissioning comments

Is this activity in scope for data collection under the Mental Health National Minimum Dataset?

No



Activity Planned Expenditure

Planned Expenditure

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

and Referral					
Mental Health Flexible	\$195,215.00	\$0.00	\$0.00	\$0.00	\$0.00

Totals

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Indigenous Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
headspace	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Way Back Support	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Initial Assessment and Referral	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Flexible	\$195,215.00	\$0.00	\$0.00	\$0.00	\$0.00	\$195,215.00
Total	\$195,215.00	\$0.00	\$0.00	\$0.00	\$0.00	\$195,215.00

Funding From Other Sources - Financial Details

Funding From Other Sources - Organisational Details



Summary of activity changes for Department

Activity Status

Ready for Submission

Subject	Description	Commented By	Date Created
Modified Updates	Activity Description amended to address Page 29-30 of AWP Guide.	Anisha Balakrishnan	25/06/2024



MH-Op - 1 - Mental Health Operations (June 2024)



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH-Op

Activity Number *

1

Activity Title *

Mental Health Operations (June 2024)

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



Activity Demographics

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



Activity Planned Expenditure

Planned Expenditure

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28
Interest - Mental Health	\$789,687.04	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health	\$2,844,670.34	\$1,811,937.00	\$1,842,990.00	\$0.00	\$0.00

Operational					
-------------	--	--	--	--	--

Totals

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
Interest - Mental Health	\$789,687.04	\$0.00	\$0.00	\$0.00	\$0.00	\$789,687.04
Mental Health Operational	\$2,844,670.34	\$1,811,937.00	\$1,842,990.00	\$0.00	\$0.00	\$6,499,597.34
Total	\$3,634,357.38	\$1,811,937.00	\$1,842,990.00	\$0.00	\$0.00	\$7,289,284.38

Funding From Other Sources - Financial Details

Funding From Other Sources - Organisational Details



Summary of activity changes for Department

Activity Status

Ready for Submission

Approved by PHM



MH-Op - 2 - Indigenous Mental Health Operations (June 2024)



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH-Op

Activity Number *

2

Activity Title *

Indigenous Mental Health Operations (June 2024)

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



Activity Demographics

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



Activity Planned Expenditure

Planned Expenditure

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Operational					
-------------	--	--	--	--	--

Totals

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Mental Health Operational	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
Total	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Funding From Other Sources - Financial Details

Funding From Other Sources - Organisational Details



Summary of activity changes for Department

Activity Status

Ready for Submission

Approved by PHM



MH-CV19 - 1 - DECOMMISSIONED - COVID-19 Emergency Funding (June 2024)



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH-CV19

Activity Number *

1

Activity Title *

DECOMMISSIONED - COVID-19 Emergency Funding (June 2024)

Existing, Modified or New Activity *

Modified



Activity Priorities and Description

Program Key Priority Area *

Mental Health Priority Area 1: Low intensity mental health services

Other Program Key Priority Area Description**Aim of Activity ***

This activity aims to improve: health outcomes and experience for those seeking to access mental health support; system efficiencies and the patient journey, through improved access, integrated and collaborative care.

Description of Activity *

This activity includes:

Continued delivery of a number of mental health support hubs within the EMPHN catchment.

Facilitation of timely and targeted mental health support to the community, particularly those with impacts associated with the COVID-19 pandemic.

Provision of mental health clinicians and practitioners who are knowledgeable about the broader service system accessible within the catchment, and can support to navigate consumers to appropriate pathways based on their specific needs

Utilisation of the Initial Assessment and Referral- Decision Support Tool (IAR-DST) which highlights presenting need, the level of people would be best suited to based on their need, acuity, risk and preferences.

Provision of child and youth mental surge workforce in headspace services.

Provision of secondary consultation to headspace practitioners and therapeutic intervention and support to young people with escalated acuity and complexity.

Needs Assessment Priorities *

Needs Assessment

EMPHN Health Needs Assessment 2021

Priorities

Priority	Page reference
Health outcomes for people who identify as Aboriginal and Torres Strait Islander peoples	p81
Pandemic Response	p86
Addressing increasing prevalence of use of Alcohol and other drugs	p83
Declining workforce and increased pressures on workforce due to pandemic	p84
Addressing Mental Health and Suicide prevention challenges	p84



Activity Demographics

Target Population Cohort

Adults & young people

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

EMPHN has adopted the International Association for Public Participation (IAP2) framework to inform how consumers, clinicians, service providers, peak bodies and other interested parties can work together to inform PHN activities, including (but not limited to) commissioned services and other support activities. IAP2 methods legitimise differing levels of participation dependent on the goals, timeframes, resources and levels of concern in the decision to be made. At EMPHN consultation is the minimum threshold for engagement. This will occur via relevant committees, such as the Clinical Council and Consumer Advisory Committee, and through other groups and mechanisms as appropriate.

Collaboration

As noted, EMPHN has adopted the IAP2 framework to inform stakeholder participation. Wherever possible, EMPHN will attempt to work with consumers, clinicians and other stakeholders throughout more elaborate participation levels, such as involvement, collaboration and empowerment. EMPHN has mapped a range of workflows and processes that support bringing stakeholders into the processes of needs assessments, topic prioritisation, design, and evaluation planning. EMPHN consider that the shared construction and interpretation of complex health problems with stakeholders creates stronger and more effective interventions. Culturally informed consultation will be engaged to ensure that collaboration is culturally safe and trauma informed.



Activity Milestone Details/Duration

Activity Start Date

19/09/2020

Activity End Date

29/06/2023

Service Delivery Start Date

09/2020

Service Delivery End Date

30/06/2023

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: 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

Yes

Decommissioning details?

This activity ends June 2023 and residual activity has been transitioned to ongoing activities including H2H hubs and Youth Severe

Co-design or co-commissioning comments

Empty text box for comments.



Activity Planned Expenditure

Planned Expenditure

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
COVID-19	\$78,966.66	\$0.00	\$0.00	\$0.00	\$0.00

Totals

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
COVID-19	\$78,966.66	\$0.00	\$0.00	\$0.00	\$0.00	\$78,966.66
Total	\$78,966.66	\$0.00	\$0.00	\$0.00	\$0.00	\$78,966.66

Funding From Other Sources - Financial Details

Empty text box for financial details.

Funding From Other Sources - Organisational Details

Empty text box for organisational details.



Summary of activity changes for Department

Activity Status

Ready for Submission

Subject	Description	Commented By	Date Created
Approved Carryover Funding	In the email thread between PHN Financials and EMPHN on Thursday, 22nd June 2023 (3:38pm), carryover request was approved for COVID-19 Emergency Funding where the funding stream changed to "PMHC - COVID-19" to match the total funds available (carryover request was for "PMHC-H2H Adult Mental Health Services").	Anisha Balakrishnan	25/06/2024

Approved by DOHA



MH-AMHCT - 1 - H2H Adult Mental Health Services (June 2024)



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH-AMHCT

Activity Number *

1

Activity Title *

H2H Adult Mental Health Services (June 2024)

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Other Program Key Priority Area Description**Aim of Activity ***

Continue to support vulnerable people, including older Australians, Indigenous Australians, and those that are socially isolated or financially impacted by the COVID-19 pandemic to access mental health services and supports, via Head to Health mental health Hubs.

These Hubs provide on-site and telehealth mental health support, including referral on to more intensive mental health care or social supports as needed.

Head to Health Hubs also support General Practitioners by providing access to multidisciplinary teams of mental health workers, including psychologists, mental health nurses, social workers, and alcohol and drug workers.

Description of Activity *

Continue to deliver a number of Mental Health support Hubs within the EMPHN catchment, in order to facilitate the provision of timely and targeted mental health support to community members experiencing mental health difficulties associated with the impact of the COVID-19 pandemic. These Hubs contain teams of multidisciplinary clinicians / practitioners, that provide treatment and support according to demonstrated need.

Needs Assessment Priorities *

Needs Assessment

EMPHN Health Needs Assessment 2021

Priorities

Priority	Page reference
Health outcomes for people who identify as Aboriginal and Torres Strait Islander peoples	p81
Pandemic Response	p86
Addressing increasing prevalence of use of Alcohol and other drugs	p83
Declining workforce and increased pressures on workforce due to pandemic	p84
Addressing Mental Health and Suicide prevention challenges	p84



Activity Demographics

Target Population Cohort

People of all ages who reside, work or study in the Catchment, who require support to manage their mental health. Support is prioritised for those who are:

Identified as requiring Level 3 and Level 4 supports according to the Initial Assessment and Referral (IAR) tool .

Unable to afford or access similar services in the community .

Residing in rural areas and / or belong to other underserved and/or hard to reach populations.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

has adopted the International Association for Public Participation (IAP2) framework to inform how consumers, clinicians, service providers, peak bodies and other interested parties can work together to inform PHN activities, including (but not limited to) commissioned services and other support activities. IAP2 methods legitimise differing levels of participation dependent on the goals, timeframes, resources and levels of concern in the decision to be made. At EMPHN consultation is the minimum threshold for engagement. This will occur via relevant committees, such as the Clinical Council and Consumer Advisory Committee, and through other groups and mechanisms as appropriate.

Collaboration

As noted, EMPHN has adopted the IAP2 framework to inform stakeholder participation. Wherever possible, EMPHN will attempt to work with consumers, clinicians and other stakeholders throughout more elaborate participation levels, such as involvement, collaboration and empowerment. EMPHN has mapped a range of workflows and processes that support bringing stakeholders into the processes of needs assessments, topic prioritisation, design, and evaluation planning. EMPHN consider that the shared construction and interpretation of complex health problems with stakeholders creates stronger and more effective interventions. Culturally informed consultation will be engaged to ensure that collaboration is culturally safe and trauma informed.



Activity Milestone Details/Duration

Activity Start Date

28/09/2020

Activity End Date

29/06/2023

Service Delivery Start Date

29/09/2020

Service Delivery End Date

30/06/2024

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: 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?

Co-design or co-commissioning comments



Activity Planned Expenditure

Planned Expenditure

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28
H2H Adult Mental Health Services	\$132,994.00	\$0.00	\$0.00	\$0.00	\$0.00

Totals

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
H2H Adult Mental Health Services	\$132,994.00	\$0.00	\$0.00	\$0.00	\$0.00	\$132,994.00
Total	\$132,994.00	\$0.00	\$0.00	\$0.00	\$0.00	\$132,994.00

Funding From Other Sources - Financial Details

Funding From Other Sources - Organisational Details



Summary of activity changes for Department

Activity Status

Ready for Submission

Subject	Description	Commented By	Date Created
Approved Carryover Funding	In the email thread between PHN Financials and EMPHN on Thursday, 22nd June 2023 (3:38pm), carryover request was approved for PMHC - H2H Adult Mental Health Services total approved carryover was \$511,003.00. Amount reduced by \$158,047.68 to \$911,413.61 to match total funds available in PMHC. \$400,410.61 carried over in other funding streams (refer below).	Anisha Balakrishnan	25/06/2024



CHHP - 1 - DECOMMISSIONED - Headspace Wait Time Reduction Program (June 2024)



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

CHHP

Activity Number *

1

Activity Title *

DECOMMISSIONED - Headspace Wait Time Reduction Program (June 2024)

Existing, Modified or New Activity *

Modified



Activity Priorities and Description

Program Key Priority Area *

Mental Health Priority Area 2: Child and youth mental health services

Other Program Key Priority Area Description

Aim of Activity *

An initiative to improve access to headspace services for young people by reducing wait times.

Description of Activity *

- Reduce risk for young people by supporting faster access to key services, including mental health
- Create online platforms and alternative engagement methodologies to support young people accessing support.

Needs Assessment Priorities *

Needs Assessment

EMPHN Health Needs Assessment 2021

Priorities

Priority	Page reference
Increase uptake of digital health	p83
Addressing Mental Health and Suicide prevention challenges	p84



Activity Demographics

Target Population Cohort

12- 25 years of age

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

EMPHN has adopted the International Association for Public Participation (IAP2) framework to inform how consumers, clinicians, service providers, peak bodies and other interested parties can work together to inform PHN activities, including (but not limited to) commissioned services and other support activities. IAP2 methods legitimise differing levels of participation dependent on the goals, timeframes, resources and levels of concern in the decision to be made. At EMPHN consultation is the minimum threshold for engagement. This will occur via relevant committees, such as the Clinical Council and Consumer Advisory Committee, and through other groups and mechanisms as appropriate.

Collaboration

As noted, EMPHN has adopted the IAP2 framework to inform stakeholder participation. Wherever possible, EMPHN will attempt to work with consumers, clinicians and other stakeholders throughout more elaborate participation levels, such as involvement, collaboration and empowerment. EMPHN has mapped a range of workflows and processes that support bringing stakeholders into the processes of needs assessments, topic prioritisation, design, and evaluation planning. EMPHN consider that the shared construction and interpretation of complex health problems with stakeholders creates stronger and more effective interventions. Culturally informed consultation will be engaged to ensure that collaboration is culturally safe and trauma informed.



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2022

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: 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

Yes

Decommissioning details?

This activity will now end due to funding having ceased. The implication of this activity has already seen an increase over services that utilise this funding. This is further compounded by the fact these services did not receive demand management funding.

Co-design or co-commissioning comments



Activity Planned Expenditure

Planned Expenditure

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
CHHP - Integrated Youth Hub Lilydale	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
CHHP – headspace Wait Time Reduction Program	\$66,375.26	\$0.00	\$0.00	\$0.00	\$0.00

Totals

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
CHHP - Integrated Youth Hub Lilydale	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
CHHP – headspace Wait Time Reduction Program	\$66,375.26	\$0.00	\$0.00	\$0.00	\$0.00	\$66,375.26
Total	\$66,375.26	\$0.00	\$0.00	\$0.00	\$0.00	\$66,375.26

Funding From Other Sources - Financial Details

Funding From Other Sources - Organisational Details



Summary of activity changes for Department

Activity Status

Ready for Submission



CHHP-Op - 1 - DECOMMISSIONED - Headspace Wait Time Reduction Program Operational (June 2024)



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

CHHP-Op

Activity Number *

1

Activity Title *

DECOMMISSIONED - Headspace Wait Time Reduction Program Operational (June 2024)

Existing, Modified or New Activity *

Modified



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



Activity Demographics

Target Population Cohort

[Redacted]

In Scope AOD Treatment Type *

[Redacted]

Indigenous Specific *

[Redacted]

Indigenous Specific Comments

[Redacted]

Coverage

Whole Region

[Redacted]



Activity Consultation and Collaboration

Consultation

[Redacted]

Collaboration

[Redacted]



Activity Milestone Details/Duration

Activity Start Date

[Redacted]

Activity End Date

[Redacted]

Service Delivery Start Date

[Redacted]

Service Delivery End Date

[Redacted]

Other Relevant Milestones

[Redacted]



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



Activity Planned Expenditure

Planned Expenditure

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
CHHP - Integrated	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00

Youth Hub Lilydale - Operational					
CHHP - headspace Wait Time Reduction Operational	\$4,236.72	\$0.00	\$0.00	\$0.00	\$0.00

Totals

Funding Stream	FY 23 24	FY 24 25	FY 25 26	FY 26 27	FY 27 28	Total
Interest - Mental Health	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
CHHP - Integrated Youth Hub Lilydale - Operational	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00	\$0.00
CHHP - headspace Wait Time Reduction Operational	\$4,236.72	\$0.00	\$0.00	\$0.00	\$0.00	\$4,236.72
Total	\$4,236.72	\$0.00	\$0.00	\$0.00	\$0.00	\$4,236.72

Funding From Other Sources - Financial Details

Funding From Other Sources - Organisational Details



Summary of activity changes for Department

Activity Status

Ready for Submission