

# Eastern Melbourne - Headspace Demand Management and Enhancement

## 2024/25 - 2027/28

### Activity Summary View



#### WTRP-Ops - 1 - headsphere Demand Management and Enhancement Program - Wait Time Reduction Operational (June 2025)



##### Activity Metadata

**Applicable Schedule \***

Headspace Demand Management and Enhancement

**Activity Prefix \***

WTRP-Ops

**Activity Number \***

1

**Activity Title \***

headspace Demand Management and Enhancement Program - Wait Time Reduction Operational (June 2025)

**Existing, Modified or New Activity \***

New Activity



# CEI\_Ops - 1 - Headspace Demand Management and Enhancement - Capital Enhancement and Infrastructure Ops (June 2025)



## Activity Metadata

**Applicable Schedule \***

Headspace Demand Management and Enhancement

**Activity Prefix \***

CEI\_Ops

**Activity Number \***

1

**Activity Title \***

Headspace Demand Management and Enhancement - Capital Enhancement and Infrastructure Ops (June 2025)

**Existing, Modified or New Activity \***

New Activity



# BCC-Ops - 1 - headspace Demand Management and Enhancement Program – Building Cultural Capability Ops (June 2025)



## Activity Metadata

**Applicable Schedule \***

Headspace Demand Management and Enhancement

**Activity Prefix \***

BCC-Ops

**Activity Number \***

1

**Activity Title \***

headspace Demand Management and Enhancement Program – Building Cultural Capability Ops (June 2025)

**Existing, Modified or New Activity \***

New Activity



# WTRP - 1 - headspace Demand Management and Enhancement Program - Wait Time Reduction (June 2025)



## Activity Metadata

**Applicable Schedule \***

headspace Demand Management and Enhancement

**Activity Prefix \***

WTRP

**Activity Number \***

1

**Activity Title \***

headspace Demand Management and Enhancement Program - Wait Time Reduction (June 2025)

**Existing, Modified or New Activity \***

New Activity



## 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 \***

To address demand and wait list management at headspace services identified as highest need.

**Description of Activity \***

Hawthorn headspace:

In response to the findings of the Hawthorn centre service model review and consultation with stakeholders and the YAG, Hawthorn would introduce the Treat First Model.

The “Treat First” model offers a streamlined, accessible approach to mental health services for young people, aligning with recommendations from the Royal Commission into Victoria’s Mental Health System.

Key aspects include:

- a welcoming, inclusive process with lived experience roles to foster connection and engagement, without requiring intake and assessment before support
- access to an experienced mental health clinician within two weeks of first contact, accommodating more complex cases
- embed the IAR-DST tool to improve integration and referrals
- combining assessment and treatment from the first contact, eliminating separate steps

Key outcomes are that all young people can access treatment via a Treat First single session within two weeks of referral, rather than waiting up to five months for a treatment session. Those who need further assessment/treatment will have an IAR-DST and assessment completed, with no need for a separate 'assessment' appointments.

Based on Hawthorns model review and existing IAR-DST data, they anticipate:

- 20% of young people will not require further support/assessment after the Treat First session and follow up appointment
- 19% of young people will have lower intensity needs (IAR-DST Level 2) and can be seen by a peer support worker or attend a group program instead of being placed on a psychology waitlist.

Young people needing ongoing support beyond the 'Treat First' session will be reviewed at the multidisciplinary allocation meeting to ensure appropriate referrals and integrated support.

To assess the success of our model we will monitor:

- Average and median time young people wait for treatment
- Number of young people completing an IAR-DST and recommended Level of Care
- Percentage of young people allocated to low-intensity treatment options

Implementation of the Treat First model fully includes recruiting and on-boarding peer support workers, training all practitioners in the IAR-DST and Treat First approach, and upskilled in working in a multidisciplinary 'stepped care model'.

## Needs Assessment Priorities \*

### Needs Assessment

EMPHN's Needs Assessment 2024/25 - 2026/27

### Priorities

Priority	Page reference
MH and SP - Increase community-based and lived experience workforce capacity and availability to provide equitable early assessment and ongoing management of mental health	139
MH and SP - Access to community-based specialist mental health care for at-risk cohorts to provide early intervention and management and reduce need for hospital care for high-prevalence episodes.	139



## Activity Demographics

### Target Population Cohort

Young people aged 12 to 25 with, or at risk of, mental illness access headspace services, and their families.

### 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.

### 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.



## Activity Milestone Details/Duration

### Activity Start Date

29/06/2020

### Activity End Date

30/12/2027

### Service Delivery Start Date

30/06/2020

### Service Delivery End Date

30/12/2027

### Other Relevant Milestones

Department milestones:

28.05.2025 Activity Work Plan

30.09.2025 12 Month Performance Report

30.09.2025 Financial Acquittal Report - Audited Income and Expenditure Statement and Declaration

15.11.2025 Other Report – Confirm if DOHAC Needs Assessment is current

30.04.2026 Activity Work Plan

30.09.2026 12 Month Performance Report

30.09.2026 Financial Acquittal Report - Audited Income and Expenditure Statement and Declaration

15.11.2026 Other Report – Confirm if DOHAC Needs Assessment is current



## 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**



# BCC - 1 - headspace Demand Management and Enhancement Program - Building Cultural Capability (June 2025)



## Activity Metadata

**Applicable Schedule \***

headspace Demand Management and Enhancement

**Activity Prefix \***

BCC

**Activity Number \***

1

**Activity Title \***

headspace Demand Management and Enhancement Program - Building Cultural Capability (June 2025)

**Existing, Modified or New Activity \***

New Activity



## 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 \***

To address demand and wait list management at headspace services identified as highest need.

**Description of Activity \***

headspace Syndal:

To increase service accessibility and inclusivity for CALD communities within the Syndal catchment, this project proposes employing a 1.0 EFT clinician who will serve as a dedicated cultural liaison. This clinician, fluent in at least two languages (preferably Mandarin) will bridge language and cultural barriers, providing tailored intake services both in-centre and community outreach.

The clinician will conduct psychoeducation webinars/seminars for parents and students to build mental health literacy which aim to reduce stigma and normalise mental health support within CALD communities. This outreach will collaborate with international student coordinators to ensure international students—often isolated from mental health resources and burdened with stigma and visa concerns—have clear, accessible pathways to support.

An essential component of this initiative is partnering with Shapes and Sounds, an organisation specialising in mental health

support for the Asian community. This funding will enable Shapes and Sounds to provide monthly consultations/professional development sessions for the hSyndal team ensuring clinicians have support and guidance to deepen their understanding of specific challenges Asian young people face.

This project aligns with the objectives of the grant by making headspace services more inclusive and accessible for CALD young people. By establishing a clinician role focused on CALD engagement, hSyndal will offer earlier intervention and reduce barriers that prevent young people from accessing services. Inclusivity and accessibility improvements will be measured through:

- Attendance tracking at community events
- Ongoing feedback from international student coordinators and CALD community partners
- Ensuring an increasing number of CALD young people are accessing services at hSyndal over the course of the next three years. We aim to increase CALD attendance by 15%/year.

A review of current service pathways reveals limited capacity among clinical leads to effectively support international students and CALD populations due to competing priorities. The addition of this culturally focused clinician will address this capacity gap by providing targeted support for outreach and intake.

#### Headspace Knox:

To recruit to peer support workers from CALD backgrounds which will enable a targeted approach of community engagement. In addition to engaging in activities with individual young people, we would also utilise these staff members to help build relationships with CALD communities, to support referral pathways, and to assist with accessing training opportunities for staff to be upskilled in working with clients from cultures and languages different from their own.

These activities will contribute to the objectives because the targeted community engagement and awareness activities aim to encourage early help seeking, reduce stigma, and increase mental health literacy. Additionally, the training opportunities for clinicians will improve their ability to provide culturally informed care by increasing their skill capacity for the future. The relationship building activities will support referral pathways through formal partnerships with local organisations. The proposed timeline is for 1.75 years, with a proposed FTE of 1.4 for the two years. This would enable 2 x .6 FTE peer support workers to provide direct service and community engagement.

Our lead agency, EACH, has recently commenced a CALD innovation project to help increase the mental health literacy of young people and their families in the city of Knox. The program provides youth mental first aid training to young people and parents from Chinese, Indian and Sri Lankan backgrounds, and by providing a Tuning into Teens group program to these parents. Although the CALD innovation project is intended to fill a gap to increase literacy and decrease stigma, if the two projects operate concurrently, EACH would leverage synergy across the projects, and enable deeper, systemic change to occur in these CALD communities.

### **Needs Assessment Priorities \***

#### **Needs Assessment**

EMPHN's Needs Assessment 2024/25 - 2026/27

#### **Priorities**

<b>Priority</b>	<b>Page reference</b>
MH and SP - Access to community-based specialist mental health care for at-risk cohorts to provide early intervention and management and reduce need for hospital care for high-prevalence episodes.	139
AOD - Improve awareness, access to culturally appropriate community-based MH, social support services to prevent mental ill health and AOD use, manage early symptoms in multicultural and First Nations	137



## Activity Demographics

### Target Population Cohort

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### In Scope AOD Treatment Type \*

### Indigenous Specific \*

No

### Indigenous Specific Comments

### Coverage

#### Whole Region

Yes



## Activity Consultation and Collaboration

### Consultation

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15.11.2026 Other Report – Confirm if DOHAC Needs Assessment is current

30.04.2027 Activity Work Plan

30.09.2027 Final 12 Month Performance Report

30.09.2027 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**

APPROVED BY DHDA



# CEI - 1 - Headspace Demand Management and Enhancement - Capital Enhancement and Infrastructure (June 2025)



## Activity Metadata

**Applicable Schedule \***

Headspace Demand Management and Enhancement

**Activity Prefix \***

CEI

**Activity Number \***

1

**Activity Title \***

Headspace Demand Management and Enhancement - Capital Enhancement and Infrastructure (June 2025)

**Existing, Modified or New Activity \***

New Activity



## 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 \***

To address demand and wait list management at headspace services identified as highest need.

**Description of Activity \***

Hawthorn headspace:

Enhancing the IT infrastructure of headspace Hawthorn will greatly contribute to the longevity and sustainability of the service, noting that current infrastructure is already impacting service provision and staff productivity. Improving the infrastructure through upgrading systems as described below will contribute to improved workflows and the ability for staff to spend more time in client-related activities (rather than spending time waiting for older IT systems to work). Consultation has occurred with staff members about how IT systems may be upgraded and the impact this is likely to have on their day-to-day work, with significant support across all teams for this proposal.

This project can be implemented quickly following approval of the budget – we anticipate completion within three months from project commencement (to allow time for ordering and installation of the computer hardware). Via this funding, Hawthorn will procure and install 26 docking stations and 16 laptops.

**Needs Assessment Priorities \***

## Needs Assessment

EMPHN's Needs Assessment 2024/25 - 2026/27

### Priorities

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### Activity Demographics

#### Target Population Cohort

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#### In Scope AOD Treatment Type \*

#### Indigenous Specific \*

No

#### Indigenous Specific Comments

#### Coverage

##### Whole Region

Yes



### Activity Consultation and Collaboration

#### Consultation

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**Expression Of Interest (EOI):** No

**Other Approach (please provide details):** No

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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

No

Decommissioning details?

Co-design or co-commissioning comments