

Eastern Melbourne - NMHSPA Bilateral PHN Program

2023/24 - 2027/28

Activity Summary View



NAB-H2H - 1 - Adult Mental Health Centre and Satellite Network (Head to Health) - July 2025



Activity Metadata

Applicable Schedule *

NMHSPA Bilateral PHN Program

Activity Prefix *

NAB-H2H

Activity Number *

1

Activity Title *

Adult Mental Health Centre and Satellite Network (Head to Health) - July 2025

Existing, Modified or New Activity *

Modified



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 the activity is to provide mental health support via Head to Health mental health Hubs.

Description of Activity *

In line with the Department (DHDA) directions, the Head to Health (H2H) Mental Health Clinics Whittlesea and Yarra Junction have been supported in the transition to the Adult Locals as part of the decommissioning process.

The remaining Head to Health Mental Health Clinics (Hawthorn, Box Hill, and Heidelberg West):

- Continue to operate, including associated satellite services attached to these hubs.
- 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.
- Particularly ensuring clinics provide culturally safe mental health services to those from vulnerable populations, such as:
 - From LQBTIQA+ communities,
 - People from Culturally and Linguistically Diverse (CALD) backgrounds,
 - Asylum seeker / Humanitarian entrants,
 - People experiencing socioeconomic disadvantage,
 - Aboriginal and/or Torres Strait Islander people,
 - People with co-occurring disabilities or diagnosis,
 - From rural or remote locations (outer regional postcodes as per ABS classification).
- Providing access to multidisciplinary teams of mental health workers, including psychologists, mental health nurses, social workers, and alcohol and drug workers.
- Providing on-site and telehealth mental health support, including referrals to more intensive mental health care or social supports as needed.

Learnings:

Recent work has been undertaken with providers to further integrate H2H with the Stepped Care program in order to align KPIs, reduce administrative burden and ensure a cohesion between the two programs for more seamless, integrated mental health service delivery within the catchment.

KPI alignment has included pivoting towards collection of service hours and increasing expectations around service delivery capacity, ensuring value for money. Significant focus has been given to paired outcomes which has resulted in a marked improvement. This improvement will better support an understanding of the impact of the program (due to increased availability of data) and inform future innovation to ensure strong mental health outcomes for consumers.

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 - Build the capability and capacity of the dedicated suicide prevention lived experience workforce and deploy a suicide prevention lens in AOD and mental health care	139
MH and SP - Strengthen data collection efforts to gather specific socio-demographic data for underrepresented groups to increase understanding of mental health needs and suicide prevention activities.	139



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. EMPHN engages with the National Community of Practice group and regularly communicates with some Head to Health managers in Victoria.

EMPHN engages with the National Community of Practice group and regularly communicates with some Head to Health managers in Victoria.



Activity Milestone Details/Duration

Activity Start Date

24/11/2022

Activity End Date

29/06/2026

Service Delivery Start Date

09/2022

Service Delivery End Date

30/06/2026

Other Relevant Milestones

Department milestones:

28.05.2025 Activity Work Plan

15.11.2025 Other Report – Confirm with DOHAC Needs Assessment is current

30.04.2026 Activity Work Plan

30.09.2026 12 Month Performance Report

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

15.11.2026 Other Report – Confirm with 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: 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?

Yarra Junction decommissioned on 30 June 2024.

Co-design or co-commissioning comments

APPROVED BY DHDA



NAB-H2H-Op - 1 - Adult Mental Health Centre and Satellite Network (Head to Health) Operational (July 2025)



Activity Metadata

Applicable Schedule *

NMHSPA Bilateral PHN Program

Activity Prefix *

NAB-H2H-Op

Activity Number *

1

Activity Title *

Adult Mental Health Centre and Satellite Network (Head to Health) Operational (July 2025)

Existing, Modified or New Activity *

Modified



NAB-PRCG - 1 - PHN Regional Commissioning and Governance (July 2025)



Activity Metadata

Applicable Schedule *

NMHSPA Bilateral PHN Program

Activity Prefix *

NAB-PRCG

Activity Number *

1

Activity Title *

PHN Regional Commissioning and Governance (July 2025)

Existing, Modified or New Activity *

Modified



Activity Priorities and Description

Program Key Priority Area *

Mental Health Priority Area 8: Regional mental health and suicide prevention plan

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

The aim of this activity is to work with other PHNs, commissioning bodies and stakeholders across the state and catchment to:

- continue to maintain and build momentum in joint regional planning and commissioning activities as specified in the Primary Mental Health Care (PMHC) Schedule.
- develop and/or strengthen, and implement, a joint regional mental health and suicide prevention plan.
- participate in regional commissioning and governance arrangements for initiatives under the bilateral schedule in line with the regional planning and commissioning framework at Annex C of the bilateral schedule.
- reduce fragmentation through improved integration between Commonwealth and State-funded services.
- address gaps in the system by ensuring community-based mh and sp services, and in particular ambulatory services, are effective, accessible, and affordable.
- Prioritise further investment in prevention, early intervention, and effective management of severe and enduring MH conditions.
- increase the efficiency and effectiveness of primary MH and SP services for people with or at risk of mental illness and /or suicide.
- improve access to and integration of primary MH care and SP services to ensure people with mental illness receive the right care in the right place at the right time.

Description of Activity *

This activity includes:

1. Work with Interim Regional Boards (where relevant) to support the development, implementation and monitoring of a mental health and wellbeing and capital plan for your region. These regional plans were expected to be developed and shared with PHNs by the end of 2023.

- As at July 2024, EMPHN had been engaged by the North East Metro Interim Regional Body to provide feedback on the regional scan. A capital plan had not yet been established. To date the North East IRB has sought minimal contact directly with EMPHNs dedicated Regional Planners.

- In the absence of a joint regional plan under Victoria's bilateral agreement with the Commonwealth, EMPHN is continuing to implement actions identified in EMPHN's Regional Integrated Mental Health Alcohol and other Drug and Suicide Prevention plan 2019-2024.

- Participate in regional commissioning and governance arrangements for initiatives under the Victorian Bilateral Agreement, including participation in communities of practice, working groups and/or other relevant governance mechanisms.

- PHNs had very limited participation or engagement with the Agreement's national governance forums and varying levels of participation in jurisdictional governance. This has hampered our ability to access timely and relevant information to inform our key role in regional planning, commissioning, and implementation. It has also meant that PHN local intelligence is not always drawn upon in co-design of actions at a jurisdictional or regional level.

- The Victorian Suicide Prevention and Response Office (SPaRO) and the VTPHNA TRISP Coordinators meet on a quarterly basis. This has provided a forum to share updates and clarify existing work, however, has not transpired to specific initiatives nor governance arrangements.

- EMPHN have commenced attendance at the HOPE (Victorian universal aftercare program) Forums with opportunities being developed to engage regional HOPE services in the catchment.

- Respond to priorities outlined in the inaugural statewide mental health and wellbeing service and capital plan that was expected to be developed by the Victorian Government by December 2022. The Victorian statewide capital plan was released September 2024, however, did not include service level planning. At this stage EMPHN have not been invited to respond.

2. As a priority, EMPHN will consider opportunities for data sharing and identifying opportunities for system design responses to integration between Commonwealth and state-funded services.

- Data sharing has not eventuated. The NEM (North East Metro) IRB for the Eastern region has not as yet sought a PHN representative to participate in committee activity. A number of attempts were made to engage key representatives from the IRB with the intent to share data and knowledge of the local region however this has not been actioned as yet. As a result EMPHN has not had input into early planning initiatives led by the IRB. Specifically the collection use and integration of health needs assessments that EMPHN undertakes have not been included in the IRBs regional scan final report.

3. Conducting an integrated and aligned approach through collaboration with stakeholders to support the planning and commissioning of programs.

- Eastern Mental Health Service Coordination Alliance (EMHSCA) and North Eastern Mental Health Service Coordination Alliance (NEMHSCA) are two existing and well established regional mental health, AOD and suicide prevention networks. EMPHN provides funding for backbone support of both networks and are members, collaborating on activities undertaken by the networks. This is seen as an interim measure until the Regional Interim Bodies are established with EMPHN to form part of the governance structure, as outlined in the Bi-lateral agreement between Victoria and the Commonwealth.

- Collaboration and partnership with LHNs. EMPHN has considerable engagement with LHN's across the catchment through the various established networks. EMPHN are also collaborating with LHNs in mental health and suicide preventative work. EMPHN and one local LHN are currently partnering to proactively address heightened vulnerability in one LGA.

4. Conducting joint capability building activities such as workforce training, secondary consultation, and communities of practice.

EMPHN is a participating member of a range of other networks including the Eastern Melbourne Region (EMR) Suicide Response and Recovery Committee and the Eastern Region Coordinators (ERC) group. EMPHN are also collaborating in a number of sub groups focused on capability building in areas such as workforce development, data and lived experience. Regional coordinators continue to build capacity and capability across the service system, identifying gaps and seeking to reduce fragmentation and duplication of services to increase the effectiveness and efficiency of service provision across the EMPHN region.

A key initiative, The Regional Outcome Review Initiative (RORI), 'Enhancing Care Together' is a project which promotes

collaborative joint incident reviews amongst mental health, alcohol and other drugs (AOD) and suicide prevention services, so that learnings are shared, and harm is reduced. RORI resulted from a key cross sector need identified in EMPHN's Regional Plan. Five local hospitals and eight community health services along with people with Lived Experience and Eastern Melbourne Primary Health Network have united in this process of improvement, reform, and cultural change in our regions health system, in collaboration with mental health, AOD and suicide prevention services in the eastern and north-eastern region of metro Melbourne. RORI commenced in November 2022. Drawing on principles from the Royal Commission into Victoria's Mental Health System and Safer Care Victoria, the shared principles ensure RORI provides safe learning environments, is connected and collaborative, and organised for safety and quality. Participating organisations have piloted two key actions that have led to improvements in quality, safety, and clinical governance in integrated care. These are Joint Reviews and Collective Learning Forums. With EMPHN's support, the initiative will be presented at the upcoming Suicide Prevention Australia (SPA) conference. The initiative also recently won the Victorian SPA award for Innovative Practice and Research.

5. Participating in regional commissioning and governance arrangements.

EMPHN has been engaging in ongoing discussions with PHNs with shared borders that commission similar activities with the same providers on opportunities to co-commission.

Needs Assessment Priorities *

Needs Assessment

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

Priorities

Priority	Page reference
AOD - Improve integrated care at the community level to reduce the risk of co-occurring mental health and AOD issues.	137
Aged Care - Improve data quality and collection processes to address gaps in knowledge relating to demographic diversity, intersectional data, program effectiveness, and lead indicators.	136
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
MH and SP - Strengthen data collection efforts to gather specific socio-demographic data for underrepresented groups to increase understanding of mental health needs and suicide prevention activities.	139
PHC - Improve collaborative partnerships and shared models of care between primary, community and acute care.	140



Activity Demographics

Target Population Cohort

Primary mental health and suicide prevention services for people with or at risk of mental illness and /or suicide.

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.

EMPHN's regional planners are members of numerous networks with the aim to understand gaps, support needs analyses, service system integration and the reduction of duplication of services in order to reduce system complexity. These networks include:

- Eastern Regional Coordinators (ERC) Group
- Eastern Homelessness Network
- Statewide Childrens Resource Program
- The Regional Outcome Review Initiative (RORI)
- Eastern Melbourne Region (EMR) Suicide Response and Recovery Committee
- Mental Health Service Coordination Alliance (MHSCA) Governance Committee

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.

EMPHN is directly engaged in collaboration with numerous networks, primary mental health, community-based mental health and suicide prevention services for the purpose of influencing strategies, plans and policy. Similarly, ongoing collaboration is occurring with new and existing service system components to maximise local stakeholder input and involvement in regional systems

reform. Liaison is continuing for example with local councils, education providers, postvention services as well as more recently established services being established as actions of the Mental Health Royal Commission.



Activity Milestone Details/Duration

Activity Start Date

24/11/2022

Activity End Date

29/06/2026

Service Delivery Start Date

25/11/2022

Service Delivery End Date

30/06/2026

Other Relevant Milestones

Department milestones:

28.05.2025 Activity Work Plan

15.11.2025 Other Report – Confirm with DOHAC Needs Assessment is current

30.04.2026 Activity Work Plan

30.09.2026 12 Month Performance Report

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



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



NAB-HE - 1 - Headspace Enhancement - Greensborough Centre (July 2025)



Activity Metadata

Applicable Schedule *

NMHSPA Bilateral PHN Program

Activity Prefix *

NAB-HE

Activity Number *

1

Activity Title *

Headspace Enhancement - Greensborough Centre (July 2025)

Existing, Modified or New Activity *

Modified



Activity Priorities and Description

Program Key Priority Area *

Mental Health

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

The enhancement of headspace services is intended to increase access to coordinated, multidisciplinary care for cohorts of young people, as well as to improve workforce attraction and retention. Additional, and ongoing, funding will be provided to headspace services to bolster the existing service delivery grant funding.

Description of Activity *

headspace is the Government's flagship program for provision of services to young people aged 12-25 experiencing, or at risk, of mental illness. The headspace model provides holistic care in four core streams – mental health; related physical health; alcohol and other drug use; and social and vocational support. The enhancement of headspace services is intended to increase access to coordinated, multidisciplinary care for cohorts of young people, as well as to improve workforce attraction and retention. Additional, and ongoing, funding will be provided to headspace services to bolster the existing service delivery grant funding.

Distribution for FY26 funding is currently being contracted as per the deed allocation, despite Greensborough centre reaching the funding floor. This centre, and its satellite, is accessed by the Whittlesea LGA which was identified as a corridor of increasing need for youth mental health services in EMPHNS most recent Health Needs Assessment. While this centre is currently not reaching its unit cost KPI, EMPHN is ensuring that this service is supported to grow in order to support the increasing demand for the region. EMPHN consulted headspace national when distributing enhancement funding for FY26 contracts.

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 - Build the capability and capacity of the dedicated suicide prevention lived experience workforce and deploy a suicide prevention lens in AOD and mental health care	139



Activity Demographics

Target Population Cohort

Young people aged 12-25 experiencing, or at risk, of mental 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.

EMPHN actively consults with the consortia for each headspace centre on a quarterly basis. This involves attending consortia meetings, which include LGA funded youth mental health providers.

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.

EMPHN collaborates with headspace National on a regular basis to share information regarding health needs assessments, service evaluations and funding plans. EMPHN leads a bi-monthly Victorian PHN Community of Practice (CoP) to share learnings and facilitate greater consistency across PHNs.



Activity Milestone Details/Duration

Activity Start Date

30/04/2023

Activity End Date

29/06/2026

Service Delivery Start Date

01/07/2025

Service Delivery End Date

30/06/2026

Other Relevant Milestones

Department milestones:

28.05.2025 Activity Work Plan

15.11.2025 Other Report – Confirm with DOHAC Needs Assessment is current

30.04.2026 Activity Work Plan

30.09.2026 12 Month Performance Report

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



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



NAB-HE - 2 - Headspace Enhancement - Plenty Valley (Whittlesea), Greensborough Satellite Centre (July 2025)



Activity Metadata

Applicable Schedule *

NMHSPA Bilateral PHN Program

Activity Prefix *

NAB-HE

Activity Number *

2

Activity Title *

Headspace Enhancement - Plenty Valley (Whittlesea), Greensborough Satellite Centre (July 2025)

Existing, Modified or New Activity *

Modified



Activity Priorities and Description

Program Key Priority Area *

Mental Health

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

The enhancement of headspace services is intended to increase access to coordinated, multidisciplinary care for cohorts of young people, as well as to improve workforce attraction and retention. Additional, and ongoing, funding will be provided to headspace services to bolster the existing service delivery grant funding.

Description of Activity *

Enhancement funding has been utilised to extend opening hours and increase FTE of direct service delivery staff to assist in meeting demand of a high growth corridor in the urban fringe. This region is a demonstrably high demand area and currently supported by headspace Greensborough and headspace Craigieburn due to service limitations found in headspace Plenty Valley (as a result of lower funding). As such, enhancement funding will be utilised to better enable the satellite to meet the higher demand in the area. This satellite is accessed by the Whittlesea LGA which was identified as a corridor of increasing need for youth mental health services in EMPHNs most recent Health Needs Assessment.

As a satellite centre, the current enhancement and core funding does not reach the funding floor. Distribution for FY26 funding is currently being contracted as per the deed allocation.

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 - Build the capability and capacity of the dedicated suicide prevention lived experience workforce and deploy a suicide prevention lens in AOD and mental health care	139



Activity Demographics

Target Population Cohort

Young people aged 12-25 experiencing, or at risk, of mental 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.

EMPHN actively consults with the consortia for each headspace centre on a quarterly basis. This involves attending consortia meetings, which include LGA funded youth mental health providers.

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.

EMPHN collaborates with headspace National on a regular basis to share information regarding health needs assessments, service evaluations and funding plans. EMPHN leads a bi-monthly Victorian PHN Community of Practice (CoP) to share learnings and facilitate greater consistency across PHNs.



Activity Milestone Details/Duration

Activity Start Date

30/04/2023

Activity End Date

29/06/2026

Service Delivery Start Date

01/07/2024

Service Delivery End Date

30/06/2026

Other Relevant Milestones

Department milestones:

28.05.2025 Activity Work Plan

15.11.2025 Other Report – Confirm with DOHAC Needs Assessment is current

30.04.2026 Activity Work Plan

30.09.2026 12 Month Performance Report

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



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



NAB-HE - 3 - Headspace Enhancement - Hawthorn Centre (July 2025)



Activity Metadata

Applicable Schedule *

NMHSPA Bilateral PHN Program

Activity Prefix *

NAB-HE

Activity Number *

3

Activity Title *

Headspace Enhancement - Hawthorn Centre (July 2025)

Existing, Modified or New Activity *

Modified



Activity Priorities and Description

Program Key Priority Area *

Mental Health

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

The enhancement of headspace services is intended to increase access to coordinated, multidisciplinary care for cohorts of young people, as well as to improve workforce attraction and retention. Additional, and ongoing, funding will be provided to headspace services to bolster the existing service delivery grant funding.

Description of Activity *

headspace Hawthorn are using the enhancement funds to employ an intake coordinator to reduce wait times, improve processes and enhance the relationship with tertiary services. They have also recruited additional clinical staff to help meet demand (and reduce wait time). They have agreed to provide an additional 100 occasions of service per month as a result of this additional budget.

Distribution for FY26 funding is currently being contracted as per the deed allocation. Hawthorn headspace centre has reached the funding floor, however it remains the highest performing centre for unit cost in the EMPHN catchment and can demonstrate continued demand for service. EMPHN has not redistributed the allocated enhancement funding to other centres as Hawthorn continues to demonstrate good value for money with evidenced existing demand.

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 - Build the capability and capacity of the dedicated suicide prevention lived experience workforce and deploy a suicide prevention lens in AOD and mental health care	139



Activity Demographics

Target Population Cohort

Young people aged 12-25 experiencing, or at risk, of mental illness.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

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Collaboration

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EMPHN collaborates with headspace National on a regular basis to share information regarding health needs assessments, service evaluations and funding plans. EMPHN leads a bi-monthly Victorian PHN Community of Practice (CoP) to share learnings and facilitate greater consistency across PHNs.



Activity Milestone Details/Duration

Activity Start Date

30/04/2023

Activity End Date

29/06/2026

Service Delivery Start Date

14/11/2023

Service Delivery End Date

30/06/2026

Other Relevant Milestones

Department milestones:

28.05.2025 Activity Work Plan

15.11.2025 Other Report – Confirm with DOHAC Needs Assessment is current

30.04.2026 Activity Work Plan

30.09.2026 12 Month Performance Report

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



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



NAB-HE - 4 - Headspace Enhancement - Lilydale, Knox Satellite Centre (July 2025)



Activity Metadata

Applicable Schedule *

NMHSPA Bilateral PHN Program

Activity Prefix *

NAB-HE

Activity Number *

4

Activity Title *

Headspace Enhancement - Lilydale, Knox Satellite Centre (July 2025)

Existing, Modified or New Activity *

Modified



Activity Priorities and Description

Program Key Priority Area *

Mental Health

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

The enhancement of headspace services is intended to increase access to coordinated, multidisciplinary care for cohorts of young people, as well as to improve workforce attraction and retention. Additional, and ongoing, funding will be provided to headspace services to bolster the existing service delivery grant funding.

Description of Activity *

headspace Lilydale are utilising the funds to support additional clinical staff to meet significant and complex demand. Specifically, they have recruited an additional 1.1 FTE of intake and brief intervention workers and an additional 0.8 FTE for a psychologist. Increased throughput targets and decreased wait time targets have been set in accordance (with progress toward these already evident). Further DBT intervention for complex clients with borderline personality disorder as also been supported with these funds.

DBT services delivered at headspace Knox/Lilydale have been funded using underspend funds following an approved Request for Proposal process, rather than Enhancement funds. The other listed components of enhancement fund use remain correct. DBT was approved to continue a pre-existing headspace Knox/Lilydale program (whose funding had ceased) that supports a localised approach to addressing mental ill-health and addresses a direct, and identified service gap for young people in the region. headspace National have been aware of the long term delivery of this program but it did not form part of the consultation process regarding Enhancement funds on this occasion as it was funded through a separate, additional source.

Demand at Lilydale has been particularly high in this area due to geographical region, complexity of presentation and the closures of other services. EMPHN has advocated for the enhancement of funding for Lilydale. This satellite is accessed by the Yarra Ranges LGA which was identified as a corridor of increasing need for youth mental health services in EMPHNs most recent Health Needs Assessment. Since the closure of the Yarra Ranges headspace centre, this region is only serviced via the Lilydale satellite. The Knox headspace centre, with Lilydale as its satellite, has evidenced good value for money with their unit cost per occasion of service. Therefore, ongoing enhancement funding, as per the deed, has been allocated to Lilydale despite the satellite reaching the funding floor.

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 - Build the capability and capacity of the dedicated suicide prevention lived experience workforce and deploy a suicide prevention lens in AOD and mental health care	139



Activity Demographics

Target Population Cohort

Young people aged 12-25 experiencing, or at risk, of mental 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.

EMPHN actively consults with the consortia for each headspace centre on a quarterly basis. This involves attending consortia meetings, which include LGA funded youth mental health providers.

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.

EMPHN collaborates with headspace National on a regular basis to share information regarding health needs assessments, service evaluations and funding plans. EMPHN leads a bi-monthly Victorian PHN Community of Practice (CoP) to share learnings and facilitate greater consistency across PHNs.



Activity Milestone Details/Duration

Activity Start Date

30/04/2023

Activity End Date

29/06/2026

Service Delivery Start Date

15/11/2023

Service Delivery End Date

30/06/2026

Other Relevant Milestones

Department milestones:

28.05.2025 Activity Work Plan

15.11.2025 Other Report – Confirm with DOHAC Needs Assessment is current

30.04.2026 Activity Work Plan

30.09.2026 12 Month Performance Report

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



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



NAB-HE - 5 - Headspace Enhancement - Box Hill Centre (July 2025)



Activity Metadata

Applicable Schedule *

NMHSPA Bilateral PHN Program

Activity Prefix *

NAB-HE

Activity Number *

5

Activity Title *

Headspace Enhancement - Box Hill Centre (July 2025)

Existing, Modified or New Activity *

Modified



Activity Priorities and Description

Program Key Priority Area *

Mental Health

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

The enhancement of headspace services is intended to increase access to coordinated, multidisciplinary care for cohorts of young people, as well as to improve workforce attraction and retention. Additional, and ongoing, funding will be provided to headspace services to bolster the existing service delivery grant funding.

Description of Activity *

headspace Box Hill, as a newly established service anticipating enhancement funding, submitted an initial budget proposal inclusive of enhancement funds. It was identified that these were required to offer sufficient services given the high cost of rent in central Box Hill. Their enhanced budget specifically comprised a larger premises, additional co-design consultation, more outreach specific costings and extra FTE for a nurse.

Funding for the new Box Hill Center is as per the deed and enhancement funding is allocated as per details in the NABS. There has been no reallocation of funds as it is a new center. As an emerging centre, Box Hill headspace continues to slowly increase its performance. It currently does not represent good value for money in its unit cost. However, this continues to improve quarter on quarter. Headspace National have been consulted on several occasions and have recommended continued provision of enhancement funding to Box Hill headspace to support embedding the service.

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 - Build the capability and capacity of the dedicated suicide prevention lived experience workforce and deploy a suicide prevention lens in AOD and mental health care	139



Activity Demographics

Target Population Cohort

Young people aged 12-25 experiencing, or at risk, of mental 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.

EMPHN actively consults with the consortia for each headspace centre on a quarterly basis. This involves attending consortia meetings, which include LGA funded youth mental health providers.

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.

EMPHN collaborates with headspace National on a regular basis to share information regarding health needs assessments, service evaluations and funding plans. EMPHN leads a bi-monthly Victorian PHN Community of Practice (CoP) to share learnings and facilitate greater consistency across PHNs.



Activity Milestone Details/Duration

Activity Start Date

30/04/2023

Activity End Date

29/06/2026

Service Delivery Start Date

15/11/2023

Service Delivery End Date

30/06/2026

Other Relevant Milestones

Department milestones:

28.05.2025 Activity Work Plan

15.11.2025 Other Report – Confirm with DOHAC Needs Assessment is current

30.04.2026 Activity Work Plan

30.09.2026 12 Month Performance Report

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



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



NAB-HE-Ops - 1 - Headspace Enhancement - PHN Operational Funding (July 2025)



Activity Metadata

Applicable Schedule *

NMHSPA Bilateral PHN Program

Activity Prefix *

NAB-HE-Ops

Activity Number *

1

Activity Title *

Headspace Enhancement - PHN Operational Funding (July 2025)

Existing, Modified or New Activity *

Modified