

North Western Melbourne - Headspace Demand Management and Enhancement

2023/24 - 2027/28

Activity Summary View



CEI_Ops - 1 - Capital Enhancement and Infrastructure - Operational Stream 3_AWP 25/26



Activity Metadata

Applicable Schedule *

Headspace Demand Management and Enhancement

Activity Prefix *

CEI_Ops

Activity Number *

1

Activity Title *

Capital Enhancement and Infrastructure - Operational Stream 3_AWP 25/26

Existing, Modified or New Activity *

New Activity



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



BCC-Ops - 1 - Building Cultural Capability – Operational Stream 2_AWP 25/26



Activity Metadata

Applicable Schedule *

Headspace Demand Management and Enhancement

Activity Prefix *

BCC-Ops

Activity Number *

1

Activity Title *

Building Cultural Capability – Operational Stream 2_AWP 25/26

Existing, Modified or New Activity *

New Activity



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



WTRP-Ops - 1 - Wait Time Reduction Program – Operational Stream 1_AWP 25/26



Activity Metadata

Applicable Schedule *

Headspace Demand Management and Enhancement

Activity Prefix *

WTRP-Ops

Activity Number *

1

Activity Title *

Wait Time Reduction Program – Operational Stream 1_AWP 25/26

Existing, Modified or New Activity *

New Activity



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

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

Decommissioning

Decommissioning details?

Co-design or co-commissioning comments



CEI - 1 - Stream 3 – Capital Enhancement and Infrastructure _AWP 25/26



Activity Metadata

Applicable Schedule *

Headspace Demand Management and Enhancement

Activity Prefix *

CEI

Activity Number *

1

Activity Title *

Stream 3 – Capital Enhancement and Infrastructure _AWP 25/26

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 ***

The purpose of this activity is to enhance the quality of service, improve access to services and support headspace services by appropriately accommodating current and future staffing needs at the identified headspace sites of headspace Craigieburn, headspace Glenroy and headspace Sunshine.

Description of Activity *

Activities under the Capital Enhancement and Infrastructure stream improve the quality, capacity, accessibility or availability of services at existing headspace services. Activities will be as follows:

headspace Craigieburn:

- relocate headspace Craigieburn (hsC) with the aim to increase service delivery by 50%, or an additional 4000 occasions of service (OoS) per year with extra intake and phone support.
- undertake refurbishment and relocation activities such as:
 - research, design, co-design, and project management.
 - demolition, room construction, fixtures and fittings, signage and installations, IT installations and equipment.
 - Removalist and make good on old site.

headspace Glenrov:

- undertake refurbishment activities, with the aim of increasing service delivery, including:
 - co-design with Youth Advisory Group
 - refurbish consult rooms with new furniture and updated technology to support telehealth and in-person sessions
 - improve the group/meeting rooms with accessible, youth friendly- furniture and updated systems
 - install sensory-friendly lighting to create a more comfortable and accessible environment
 - update signage to align with headspace branding and improve wayfinding
 - replace carpets of the entire site
 - internal updates, including painting, accessible auto doors and reception desk improvements.

headspace Sunshine:

- undertake refurbishment activities, with the aim of increasing service delivery, including:
 - co-design with Youth Advisory Group
 - refurbish consult rooms with new furniture and updated technology to support telehealth and in-person sessions
 - improve the group/meeting rooms with accessible, youth friendly- furniture and updated speaker system
 - install sensory-friendly lighting to create a more comfortable and accessible environment
 - update signage to align with headspace branding and improve wayfinding
 - replace hand dryers with modern, energy-efficient units
 - provide air purifiers/portable air conditioners for consult rooms with insufficient cooling

Needs Assessment Priorities *

Needs Assessment

NWMPHN Needs Assessment 2024-2028

Priorities

Priority	Page reference
Mental health & suicide prevention-Increase access to preventive measures for drivers of psychological distress, incl financial stressors/housing instability/family/intimate partner violence(5.1.9)	188
Mental health & suicide prevention - Enhance access to early intervention and integrated care for individuals with AOD disorder and complex needs, including dual diagnoses of a mental health (5.1.10)	188
Mental health & suicide prevention - Need for lived experience workforces & leadership and voice to be embedded in all aspects of service design and delivery (5.1.19)	188
Mental health and suicide prevention - Improve awareness and access to community-based mental health and social support services to prevent ill-mental health and manage early symptoms (5.1.1)	188



Activity Demographics

Target Population Cohort

Young people aged 12 to 25

Improving and supporting Aboriginal and Torres Strait Islander health is a priority. NWMPHN has developed a Reconciliation Action Plan to support the engagement with and focus on our Aboriginal and Torres Strait Islander communities. NWMPHN also works with commissioned providers to support cultural competency in commissioned services.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

No

SA3 Name	SA3 Code
Moreland - North	21003
Essendon	20603
Brunswick - Coburg	20601
Melton - Bacchus Marsh	21304
Tullamarine - Broadmeadows	21005
Brimbank	21301



Activity Consultation and Collaboration

Consultation

North Western Melbourne Primary Health Network (NWMPHN) is committed to ensuring stakeholder engagement is embedded in our culture and core functions.

Stakeholder engagement occurs throughout all seven activities that comprise our commissioning approach:

- Assess And prioritise needs
- Review evidence to inform planning and design
- Design services to address need
- Prepare the system for delivery
- Support implementation
- Manage performance and drive continuous improvement
- Evaluate the impact

We use a range of mechanisms to engage with our communities. This includes working with our Community and Clinical Councils, Expert Advisory Groups (EAGs), Primary Care Voices and People Bank members.

The Clinical and Community Councils provide advice to the Board about the unique needs of the region, and principles and mechanisms for engaging local stakeholders. The EAGs provide subject matter expertise, insights and advice to support

operational model and service design, focusing on safety, quality, and integration. NWMPHN has EAGs for:

- General Practice
- Alcohol and Other Drugs
- Mental Health
- Aboriginal and Torres Strait Islander Health
- Older Adults

People Bank is a register of people who would like to participate in activities that help to improve the health of people in the region. Members participate in a range of different activities including workshops, governance groups, surveys, and tender evaluation panels.

We continue to also consult and seek specific advice from relevant strategic and local organisations and other stakeholders, such as peak and professional bodies, governments, the primary health care sector and local health services and hospital networks.

This activity will also include meaningful key stakeholder input in the procurement and program development process. Commissioned provider(s) will also be expected to consult with community members when designing and implementing their activities.

Additional Info for Consultation: Mental health, alcohol and other drugs and suicide prevention.

Consumers and people with lived experience are integral to the work we do and their participation in all aspects of the commissioning cycle will continue to be enabled, supported, and evolved. This is demonstrated through human-centred design in the regional plan for mental health, alcohol and other drugs and suicide prevention, where consumer perspectives and experiences are prioritised.

Collaboration

NWMPHN's approach to collaboration and engagement is underpinned by the IAP2 model. Best practice in public engagement is influenced by the Spectrum of Public Participation developed by the International Association of Public Participation. This spectrum includes five levels of participation, Inform, Consult, Involve, Collaborate and Empower.

Collaboration will be utilised wherever possible throughout the commissioning cycle as NWMPHN recognises that working in this way adds value and strengthens our reach. Mutually meaningful collaboration is pursued and maintained in a systematic way across the organisation, which facilitates timely access to existing and new collaboration approaches. This is critical to driving a team-based and integrated approach to delivering person-centred primary care.

Collaboration with key stakeholders will occur throughout the commissioning process. Consequently, the following stakeholders may be involved in prioritisation, planning and design, implementation, monitoring and evaluation of activities:

- Community participants – consumers, patients, carers, and people with lived experience, priority populations, community leaders
- Health care professionals
- NWMPHN regional and strategic partnerships and collaboratives
- Local health services and hospital networks
- Community health services
- General practice
- Residential aged care facilities
- Pharmacy
- Allied health
- Community-based organisations
- Research institutes
- Academic and training institutions
- Peak and professional bodies
- Victorian Department of Health
- Local government
- Other PHNs
- Media

- Other identified providers



Activity Milestone Details/Duration

Activity Start Date

30/07/2020

Activity End Date

30/12/2027

Service Delivery Start Date

01/06/2025

Service Delivery End Date

31/12/2027

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: Yes

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?

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?

N/A

Co-design or co-commissioning comments

NWMPHN is committed to engagement and partnership with community, consumers and their families and clinicians at all key phases of the commissioning and project lifecycles. Co-design methodologies will be employed to ensure service users and clinicians have genuine input in the design and development of interventions that may be generated.

NWMPHN's parent body, Melbourne Primary Care Network, has a Stakeholder Engagement Framework and a Community Participation Plan that outlines the role of consumers at all levels of the organisation's work. We have also developed a Clinical and Sector Participation Guide and an Aboriginal Engagement Guide.

NWMPHN has access to data and insight on community need, existing service provision and service evaluations. This information is included in the design of projects, programs, and services to ensure that they address the prioritised needs of the community, and that appropriate level of funding is available to deliver these services. We do this by:

- Exploring and identifying problems and their root causes
 - Co-designing and testing better solutions with the right people.
 - Working with our partners to implement programs and to achieve agreed outcomes.
 - Reviewing each program to assess what it achieved and what we can learn to build even better services in the future.
-



WTRP - 1 - Stream 1 Wait Time Reduction_AWP 25/26



Activity Metadata

Applicable Schedule *

Headspace Demand Management and Enhancement

Activity Prefix *

WTRP

Activity Number *

1

Activity Title *

Stream 1 Wait Time Reduction_AWP 25/26

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 purpose of this activity is to address demand and wait list management at headspace services at Collingwood and Melton.

Description of Activity *

Activities that are planned to reduce wait times are as follows:

headspace Collingwood:

- implement a Single Session Thinking (SST) Clinic with SST champion roles that enhance Learning and Development (L&D) capacity to support additional AHP student placements, with aims to increase capacity for direct service delivery and implementation of the SST clinic.
- recruit, employ and train a Senior Clinician L&D Officer and SST Champion roles to:
 - support the implementation and embedding the SST stream of service
 - build capacity (student and AHP placements)
- provide professional development per person per year

headspace Melton:

- embed the Family Assertive Support Team (FAST) Track Clinic at the front end of the service pathway including the recruitment, employment and training of:

- a senior clinician (0.6 FTE)
- a senior family peer worker (0.6 FTE)
- a youth peer worker (0.4 FTE)
- an external supervisor (1 hour a month)
- conduct community consultation and workshops

Needs Assessment Priorities *

Needs Assessment

NWMPHN Needs Assessment 2024-2028

Priorities

Priority	Page reference
Mental health & suicide prevention-Increase access to preventive measures for drivers of psychological distress, incl financial stressors/housing instability/family/intimate partner violence(5.1.9)	188
Mental health & suicide prevention - Enhance access to early intervention and integrated care for individuals with AOD disorder and complex needs, including dual diagnoses of a mental health (5.1.10)	188
Mental health & suicide prevention - Need for lived experience workforces & leadership and voice to be embedded in all aspects of service design and delivery (5.1.19)	188
Mental health and suicide prevention - Improve awareness and access to community-based mental health and social support services to prevent ill-mental health and manage early symptoms (5.1.1)	188



Activity Demographics

Target Population Cohort

Young people aged 12 to 25

Improving and supporting Aboriginal and Torres Strait Islander health is a priority. NWMPHN has developed a Reconciliation Action Plan to support the engagement with and focus on our Aboriginal and Torres Strait Islander communities. NWMPHN also works with commissioned providers to support cultural competency in commissioned services.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

No

SA3 Name	SA3 Code
Yarra	20607
Melbourne City	20604
Brunswick - Coburg	20601
Melton - Bacchus Marsh	21304
Wyndham	21305



Activity Consultation and Collaboration

Consultation

North Western Melbourne Primary Health Network (NWMPHN) is committed to ensuring stakeholder engagement is embedded in our culture and core functions.

Stakeholder engagement occurs throughout all seven activities that comprise our commissioning approach:

- Assess and prioritise needs
- Review evidence to inform planning and design
- Design services to address need
- Prepare the system for delivery
- Support implementation
- Manage performance and drive continuous improvement
- Evaluate the impact

We use a range of mechanisms to engage with our communities. This includes working with our Community and Clinical Councils, Expert Advisory Groups (EAGs), Primary Care Voices and People Bank members.

The Clinical and Community Councils provide advice to the Board about the unique needs of the region, and principles and mechanisms for engaging local stakeholders. The EAGs provide subject matter expertise, insights and advice to support operational model and service design, focusing on safety, quality, and integration. NWMPHN has EAGs for:

- General Practice
- Alcohol and Other Drugs
- Mental Health
- Aboriginal and Torres Strait Islander Health
- Older Adults

People Bank is a register of people who would like to participate in activities that help to improve the health of people in the region. Members participate in a range of different activities including workshops, governance groups, surveys, and tender evaluation panels.

We continue to also consult and seek specific advice from relevant strategic and local organisations and other stakeholders, such as peak and professional bodies, governments, the primary health care sector and local health services and hospital networks.

This activity will also include meaningful key stakeholder input in the procurement and program development process. Commissioned provider(s) will also be expected to consult with community members when designing and implementing their activities.

Consumers and people with lived experience are integral to the work we do and their participation in all aspects of the commissioning cycle will continue to be enabled, supported, and evolved. This is demonstrated through human-centred design in the regional plan for mental health, alcohol and other drugs and suicide prevention, where consumer perspectives and experiences are prioritised.

Collaboration

NWMPHN's approach to collaboration and engagement is underpinned by the IAP2 model. Best practice in public engagement is influenced by the Spectrum of Public Participation developed by the International Association of Public Participation. This spectrum includes five levels of participation, Inform, Consult, Involve, Collaborate and Empower.

Collaboration will be utilised wherever possible throughout the commissioning cycle as NWMPHN recognises that working in this way adds value and strengthens our reach. Mutually meaningful collaboration is pursued and maintained in a systematic way across the organisation, which facilitates timely access to existing and new collaboration approaches. This is critical to driving a team-based and integrated approach to delivering person-centred primary care.

Collaboration with key stakeholders will occur throughout the commissioning process. Consequently, the following stakeholders may be involved in prioritisation, planning and design, implementation, monitoring and evaluation of activities:

- Community participants – consumers, patients, carers, and people with lived experience, priority populations, community leaders
- Health care professionals
- NWMPHN regional and strategic partnerships and collaboratives
- Local health services and hospital networks
- Community health services
- General practice
- Residential aged care facilities
- Pharmacy
- Allied health
- Community-based organisations
- Research institutes
- Academic and training institutions
- Peak and professional bodies
- Victorian Department of Health
- Local government
- Other PHNs
- Media
- Other identified providers



Activity Milestone Details/Duration

Activity Start Date

30/07/2020

Activity End Date

30/12/2027

Service Delivery Start Date

01/06/2025

Service Delivery End Date

31/12/2027

Other Relevant Milestones**Activity Commissioning**

Please identify your intended procurement approach for commissioning services under this activity:

Not Yet Known: Yes**Continuing Service Provider / Contract Extension:** Yes**Direct Engagement:** Yes**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?

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?

N/A

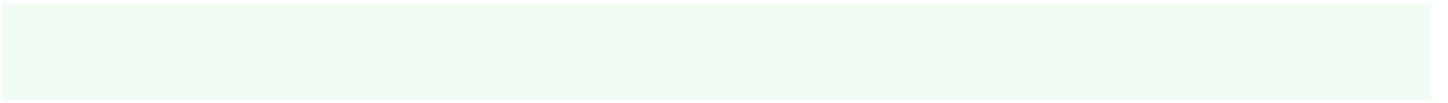
Co-design or co-commissioning comments

NWMPHN is committed to engagement and partnership with community, consumers and their families and clinicians at all key phases of the commissioning and project lifecycles. Co-design methodologies will be employed to ensure service users and clinicians have genuine input in the design and development of interventions that may be generated.

NWMPHN's parent body, Melbourne Primary Care Network, has a Stakeholder Engagement Framework and a Community Participation Plan that outlines the role of consumers at all levels of the organisation's work. We have also developed a Clinical and Sector Participation Guide and an Aboriginal Engagement Guide.

NWMPHN has access to data and insight on community need, existing service provision and service evaluations. This information is included in the design of projects, programs, and services to ensure that they address the prioritised needs of the community, and that appropriate level of funding is available to deliver these services. We do this by:

- Exploring and identifying problems and their root causes
- Co-designing and testing better solutions with the right people.
- Working with our partners to implement programs and to achieve agreed outcomes.
- Reviewing each program to assess what it achieved and what we can learn to build even better services in the future.





BCC - 1 - Stream 2 – Building Cultural Capability in headspace services _AWP 25/26



Activity Metadata

Applicable Schedule *

Headspace Demand Management and Enhancement

Activity Prefix *

BCC

Activity Number *

1

Activity Title *

Stream 2 – Building Cultural Capability in headspace services _AWP 25/26

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 ***

The purpose of this activity is to strengthen the cultural capability of headspace services at headspace Collingwood, headspace Glenroy, headspace Melton and headspace Werribee. Building cultural capability will help to improve access and provide better support for young people from priority groups including but not limited to those from First Nations, LGBTIQ+ and Culturally and Linguistically Diverse (CALD) communities.

Description of Activity *

Activities that are planned are as follows:

headspace Collingwood:

- recruit, employ and train a Culturally Capable Case Coordination (4C) role who will provide enhanced access to direct culturally capable clinical service and case co-ordination for the target populations. A case management function to support referral out and into headspace services as presentations escalate or reduce, and will also support young people to navigate complex care systems
- provide professional development per person per year (culturally specific training).

headspace Melton:

- recruit, employ and train the following roles:
 - 2 x First Nations Peer Workers at 0.4FTE each

- 1 x First Nations Social and Emotional Wellbeing Worker at 0.4FTE
- maintain and build on the First Nations Peer Support program

headspace Werribee:

- recruit, employ and train the following roles:
- 2 x First Nations Peer Workers at 0.4FTE each
- 1 x First Nations Social and Emotional Wellbeing Worker at 0.4FTE
- maintain and build on the First Nations Peer Support program

headspace Glenroy:

- recruit, employ and train a Culturally and Linguistically Diverse (CALD) Community Awareness Officer (CAO)
- implement regular feedback surveys, interviews, and focus groups with young people from CALD backgrounds.
- monitor numbers of CALD youth accessing services before and after the introduction of the CALD CAO will ensure visibility of engagement and measurement of reduced wait times.

Needs Assessment Priorities *

Needs Assessment

NWMPHN Needs Assessment 2024-2028

Priorities

Priority	Page reference
Mental health & suicide prevention-Increase access to preventive measures for drivers of psychological distress, incl financial stressors/housing instability/family/intimate partner violence(5.1.9)	188
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Activity Demographics

Target Population Cohort

Young people aged 12 to 25

Improving and supporting Aboriginal and Torres Strait Islander health is a priority. NWMPHN has developed a Reconciliation Action Plan to support the engagement with and focus on our Aboriginal and Torres Strait Islander communities.

NWMPHN also works with commissioned providers to support cultural competency in commissioned services.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

No

SA3 Name	SA3 Code
Hobsons Bay	21302
Yarra	20607
Melbourne City	20604
Moreland - North	21003
Essendon	20603
Brunswick - Coburg	20601
Melton - Bacchus Marsh	21304
Wyndham	21305



Activity Consultation and Collaboration

Consultation

North Western Melbourne Primary Health Network (NWMPHN) is committed to ensuring stakeholder engagement is embedded in our culture and core functions.

Stakeholder engagement occurs throughout all seven activities that comprise our commissioning approach:

- Assess and prioritise needs
- Review evidence to inform planning and design
- Design services to address need
- Prepare the system for delivery
- Support implementation
- Manage performance and drive continuous improvement
- Evaluate the impact

We use a range of mechanisms to engage with our communities. This includes working with our Community and Clinical Councils, Expert Advisory Groups (EAGs), Primary Care Voices and People Bank members.

The Clinical and Community Councils provide advice to the Board about the unique needs of the region, and principles and mechanisms for engaging local stakeholders. The EAGs provide subject matter expertise, insights and advice to support operational model and service design, focusing on safety, quality, and integration. NWMPHN has EAGs for:

- General Practice
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People Bank is a register of people who would like to participate in activities that help to improve the health of people in the region. Members participate in a range of different activities including workshops, governance groups, surveys, and tender evaluation panels.

We continue to also consult and seek specific advice from relevant strategic and local organisations and other stakeholders, such as peak and professional bodies, governments, the primary health care sector and local health services and hospital networks.

This activity will also include meaningful key stakeholder input in the procurement and program development process. Commissioned provider(s) will also be expected to consult with community members when designing and implementing their activities.

Consumers and people with lived experience are integral to the work we do and their participation in all aspects of the commissioning cycle will continue to be enabled, supported, and evolved. This is demonstrated through human-centred design in the regional plan for mental health, alcohol and other drugs and suicide prevention, where consumer perspectives and experiences are prioritised.

Collaboration

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Collaboration will be utilised wherever possible throughout the commissioning cycle as NWMPHN recognises that working in this way adds value and strengthens our reach. Mutually meaningful collaboration is pursued and maintained in a systematic way across the organisation, which facilitates timely access to existing and new collaboration approaches. This is critical to driving a team-based and integrated approach to delivering person-centred primary care.

Collaboration with key stakeholders will occur throughout the commissioning process. Consequently, the following stakeholders may be involved in prioritisation, planning and design, implementation, monitoring and evaluation of activities:

- Community participants – consumers, patients, carers, and people with lived experience, priority populations, community leaders
- Health care professionals
- NWMPHN regional and strategic partnerships and collaboratives
- Local health services and hospital networks
- Community health services
- General practice
- Residential aged care facilities
- Pharmacy
- Allied health
- Community-based organisations
- Research institutes
- Academic and training institutions
- Peak and professional bodies
- Victorian Department of Health
- Local government
- Other PHNs
- Media
- Other identified providers



Activity Milestone Details/Duration

Activity Start Date

30/07/2020

Activity End Date

30/12/2027

Service Delivery Start Date

01/06/2025

Service Delivery End Date

31/12/2027

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: Yes

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?

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?

N/A

Co-design or co-commissioning comments

NWMPHN is committed to engagement and partnership with community, consumers and their families and clinicians at all key

phases of the commissioning and project lifecycles. Co-design methodologies will be employed to ensure service users and clinicians have genuine input in the design and development of interventions that may be generated.

NWMPHN's parent body, Melbourne Primary Care Network, has a Stakeholder Engagement Framework and a Community Participation Plan that outlines the role of consumers at all levels of the organisation's work. We have also developed a Clinical and Sector Participation Guide and an Aboriginal Engagement Guide.

NWMPHN has access to data and insight on community need, existing service provision and service evaluations. This information is included in the design of projects, programs, and services to ensure that they address the prioritised needs of the community, and that appropriate level of funding is available to deliver these services. We do this by:

- Exploring and identifying problems and their root causes
 - Co-designing and testing better solutions with the right people.
 - Working with our partners to implement programs and to achieve agreed outcomes.
 - Reviewing each program to assess what it achieved and what we can learn to build even better services in the future.
-



WTRP - 2300 - Child & Youth Mental Health (headspace Demand Management and Enhancement Program)_AWP 24/25



Activity Metadata

Applicable Schedule *

Headspace Demand Management and Enhancement

Activity Prefix *

WTRP

Activity Number *

2300

Activity Title *

Child & Youth Mental Health (headspace Demand Management and Enhancement Program)_AWP 24/25

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 ***

This aim of this activity is to improve demand management and enhancement at headspace Werribee, headspace Collingwood, headspace Sunshine and headspace Glenroy. The aim of the Enhancement funding at headspace Werribee is to relocate headspace Werribee to a new location with the objective of enhancing the quality of experience for young people aged 12 to 25 years accessing mental health services provided through headspace Werribee.

The aim of the Demand Management funding at headspace Collingwood, headspace Sunshine and headspace Glenroy is to improve current wait time performance at these centres, through provision of Brief Intervention Clinics (BIC) and Single Session Family Therapy (SSFI).

Description of Activity *

The headspace Demand Management and Enhancement Program aims are to:

- enhance and modernise headspace premises through capital works activity including increasing building size, enhancing layout, upgrading or replacing equipment and furnishings and/or relocating services.
- Testing a range of demand management strategies at centres to understand impact over time

The approaches or mechanisms, i.e. enablers, that may be used to implement this activity include: Digitally Enhanced Care Pathways, workforce development and quality improvement, health literacy, consumer participation and organisational governance and accountability. al governance and accountability.

Needs Assessment Priorities *

Needs Assessment

NWMPHN Needs Assessment 2022-2025

Priorities

Priority	Page reference
Mental Health - demand, prevalence, complexity	183



Activity Demographics

Target Population Cohort

Young people aged 12 to 25

Improving and supporting Aboriginal and Torres Strait Islander health is a priority. NWMPHN has developed a Reconciliation Action Plan to support the engagement with and focus on our Aboriginal and Torres Strait Islander communities. NWMPHN also works with commissioned providers to support cultural competency in commissioned services.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

No

SA3 Name	SA3 Code
Keilor	21001
Yarra	20607
Melbourne City	20604
Moreland - North	21003
Essendon	20603
Brunswick - Coburg	20601
Tullamarine - Broadmeadows	21005
Wyndham	21305
Darebin - North	20902
Darebin - South	20602



Activity Consultation and Collaboration

Consultation

North Western Melbourne Primary Health Network (NWMPHN) is committed to ensuring stakeholder engagement is embedded in our culture and core functions.

Stakeholder engagement occurs throughout all six stages of our commissioning approach and project lifecycles:

- Assess and prioritise need
- Review evidence to inform planning
- Design services to address need
- Align system readiness and capability for delivery (wording to be confirmed)
- Support implementation
- Monitor performance and drive continuous quality improvement

We use a range of mechanisms to engage with our communities. This includes working with our Community and Clinical Councils, Expert Advisory Groups (EAGs) and People Bank members.

The Clinical and Community Councils provide advice to the Board about the unique needs of the region, and principles and mechanisms for engaging local stakeholders. The Expert Advisory Groups provide subject matter expertise, insights and advice to support operational model and service design, focusing on safety, quality, and integration. NWMPHN has EAGs for:

- General Practice
- Alcohol and Other Drugs
- Mental Health
- Aboriginal and Torres Strait Islander Health
- Older Adults

People Bank is a register of people who would like to participate in activities that help to improve the health of people in the region. Members participate in a range of different activities including workshops, governance groups, surveys, and tender evaluation panels.

We continue to also consult and seek specific advice from relevant strategic and local organisations and other stakeholders, such as peak and professional bodies, governments, the primary health care sector and local health services and hospital networks.

This activity will also include meaningful key stakeholder input in the procurement and program development process. Commissioned provider(s) will also be expected to consult with community members when designing and implementing their

activities.

Collaboration

NWMPHN's approach to collaboration and engagement is underpinned by the IAP2 model. Best practice in public engagement is influenced by the Spectrum of Public Participation developed by the International Association of Public Participation. This spectrum includes five levels of participation, Inform, Consult, Involve, Collaborate and Empower.

Collaboration will be utilised wherever possible throughout the commissioning cycle as NWMPHN recognises that working in this way adds value and strengthens our reach. Mutually meaningful collaboration is pursued and maintained in a systematic way across the organisation, which facilitates timely access to existing and new collaboration approaches. This is critical to driving a team-based and integrated approach to delivering person-centred primary care.

Collaboration with key stakeholders will occur throughout the commissioning process. Consequently, the following stakeholders may be involved in prioritisation, planning and design, implementation, monitoring and evaluation of activities:

- Community participants – consumers, patients, carers, other people with lived experience, priority populations, community leaders
- Health care professionals
- NWMPHN regional and strategic partnerships and collaboratives
- Local health services and hospital networks
- Community health services
- General practice
- Residential aged care facilities
- Pharmacy
- Allied health
- Community-based organisations
- Research institutes
- Academic and training institutions
- Peak and professional bodies
- Victorian Department of Health
- Local government
- Other PHNs
- Media
- Other identified providers



Activity Milestone Details/Duration

Activity Start Date

27/07/2020

Activity End Date

28/12/2024

Service Delivery Start Date

30 July 2020

Service Delivery End Date

30 September 2024

Other Relevant Milestones

N/A



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?

N/A

Co-design or co-commissioning comments

N/A