

Mental Health and Alcohol and Other Drugs Capital Renewal Fund

2026-27 Grant Guidelines

To receive this publication in an accessible format, email the [Mental Health and Alcohol and Other Drugs Capital Renewal Fund](mailto:mentalhealthprograms.vhba@vida.vic.gov.au) at mentalhealthprograms.vhba@vida.vic.gov.au

Authorised and published by the Victorian Government, 1 Treasury Place, Melbourne.

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Available on the [Victorian Health Building Authority website](https://www.vhba.vic.gov.au) at <<https://www.vhba.vic.gov.au>>

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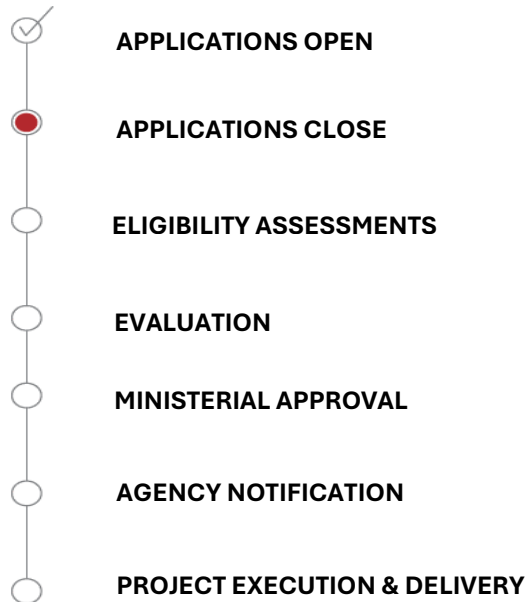
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1 Application link

The link to the Mental Health and Alcohol and Other Drugs Capital Renewal Fund application can be found on [SmartyGrants](https://dhhs.smartygrants.com.au/MHAODCRF26-27) <<https://dhhs.smartygrants.com.au/MHAODCRF26-27>>

2 Timeline



3 Introduction

In 2016 the Victorian Government established the Mental Health and Alcohol and Other Drugs Facilities Renewal Fund as part of its commitment to improve quality and safety of care for both public mental health and alcohol and other drugs service facilities.

The Mental Health and Wellbeing Act 2022 reflects and drives modern approaches to recovery-based treatment and care for people experiencing mental illness. People with mental illness will now have better treatment experiences because of more active involvement in decision-making related to their care.

Ensuring the safety and dignity of consumers, families, carers and workers in Victoria’s mental health system is central to the work of the *Royal Commission into Victoria’s Mental Health System*. The Victorian Government recognises there is a critical requirement to better address the needs of people with mental health problems.

The Victorian Government recognises that problematic alcohol and other drug use and dependence is a public and mental health issue. To reduce preventable harms from problematic alcohol and other drug use and to contribute to improving the health and wellbeing of Victorians, the government funds a range of alcohol and other drug services and initiatives.

The majority of funding goes to community sector organisations providing dedicated alcohol and other drug programs and services ranging from general drug harm information to withdrawal, rehabilitation and counselling.

Treatment is just one part of their recovery journey. Services intervene at a number of different stages from prevention to tertiary treatment and support for building resilience and recovery.

4 Program objectives

The key objectives of the Mental Health and Alcohol and Other Drugs Capital Renewal Fund are to support:

- provision of a safe environment for consumers and staff.
- mitigating the risk of accessibility issues and serious incidents impacting staff and consumers
- improvement of consumer and staff amenities
- replacing end-of-life and near-end-of-life building engineering services
- improving staff areas, systems, and technology to improve staffing conditions, reduce administrative burden, and increase time spent treating consumers.
- address damaged and severely deteriorated building fabric allowing for better service delivery and consequential consumer outcomes
- the effectiveness and efficiency of mental health and alcohol and other drug services including improvements to support consumer flow
- enhanced access to culturally safe mental health, social and emotional wellbeing, and AoD services for priority populations including Aboriginal and Torres Strait Islander peoples
- delivery of mental health and alcohol and other drugs system priorities.

The capital funding will result in improving consumer, carer, and staff safety through capital investment that provides a safe, therapeutic and least restrictive environment in existing mental health and AOD facilities.

5 Program design

The fund is designed to assist public Victorian mental health clinical services, mental health community support services, Aboriginal Community Controlled Organisations (ACCOs) and AOD services to complete minor construction, remodelling, and refurbishment capital works across the following key areas:



Health and safety risk mitigation works in existing facilities that best mitigate the risk of serious incidents occurring and balance the need to provide safety with service provision in a therapeutic and least restrictive environment.



Compliance: ensuring all facilities are compliant with Disability, Building Regulatory Compliance (BRD), Essential Safety Measures (ESM), and Occupational Health and Safety (OH&S).



Quality: improve treatment service quality and efficiency of facilities.

Projects must be completed within 18 months of notification of funding approval.

6 Asset management requirements

The Fund aligns with the Department of Treasury and Finance's and VHBA's *Asset Management Accountability Framework* and asset management policy, ensuring assets are appropriately managed and consistently applied over an asset's whole lifecycle to realise the full value from assets in supporting service delivery objectives.

The principles and practices are available at:

- [Asset Management Accountability Framework](https://www.dtf.vic.gov.au/infrastructure-investment/asset-management-accountability-framework) <<https://www.dtf.vic.gov.au/infrastructure-investment/asset-management-accountability-framework>>
- [VHBA Asset Management Policy](https://www.vhba.vic.gov.au/resources/asset-management) <<https://www.vhba.vic.gov.au/resources/asset-management>>, and summarised below:
 - The government's asset management policy intends to achieve service delivery objectives, and it creates an obligation for both the department and VIDA Health (from a system perspective) and health services (from a local perspective).
 - Asset management is a whole-of-asset-lifecycle obligation requiring an understanding of need, capacity, condition, opportunity, and risk to drive value-for-money service outcomes.
 - Appropriate local and central governance arrangements oversee asset planning, and investment prioritisation of in-scope items based on risk and, in the case of health services, oversee the replacement process.
 - Accurate and timely reporting of expenditures enables analysis of future investment needs, reporting to the government on expenditures consistent with the defined purpose of the funding provision, and provides a robust information base for program audit.
 - Health services and agencies asset replacement determination needs to be based on departmental frameworks and guidelines for prioritisation, risk management, and service planning, as well as the service's role within the health system.

7 General eligibility criteria

Funding is available to all Victorian public mental health clinical services, state funded mental health community support services, ACCOs, Mental Health and Wellbeing Locals, and state-funded alcohol and other drug services, including providers of residential and non-residential services.

The list of eligible agencies is in Appendix 2.

8 For eligible agencies

Submissions are limited to one per health service for minor refurbishment, repairs, replacement, reconfiguration and upgrade projects. Project value must fall between a minimum of \$10,000 (excluding GST) and a maximum of \$1,000,000 (excluding GST).

A minimum of \$1.0 million from the 2026–27 MHAODCRF funding pool will be reserved for eligible applications from ACCOs delivering mental health and/or alcohol and other drug services. This allocation may be increased where ACCO applications are highly ranked through the merit-based assessment process. The reservation does not guarantee funding, and all applications must satisfy the eligibility requirements and will be assessed on merit.

The following are examples of items which may be included in funding applications:

- Construction - minor infrastructure including, remodelling and refurbishment projects to address safety and access issues

- Non-construction - equipment (standalone furniture designed for mental health and AOD settings, fittings, medical equipment, engineering infrastructure and plant), where integral to an approved capital project or specifically designed for mental health or AOD settings.
- Standard Compliance: Projects and initiatives to ensure compliance with relevant industry standards and regulations

Priority will be given to applications that address the following initiatives:

- increase and/or improve access to safe bed-based care
- increase and/or improve access to mental health and AOD services
- improve consumer, carer, and staff safety through capital investments that provide safe, therapeutic and least restrictive environment into existing facilities, including addressing known WorkSafe notifications
- improve amenities to enhance recovery, rehabilitation, and therapeutic opportunities
- minimise the use of restrictive practices or clinically inappropriate environments and improve treatment service equality and efficiency of outcomes
- upgrade essential infrastructure such as plant equipment and address at-risk asset failure
- enhanced access to culturally safe mental health, social and emotional wellbeing, and AOD services for priority populations including Aboriginal and Torres Strait Islander peoples
- Consideration will also be given to whether the proposal will contribute to or duplicate any proposed future infrastructure upgrades

8.1 Consumer and healthcare worker safety

- Funding to prevent and control high-priority hazards and risks in the workplace and remediate these risks with minor capital works such as egress doors, room configuration/equipment (CCTV, duress alarms), appropriate signage and wayfinding that enhance the security and welfare of people in workplaces.

8.2 Construction works

- Remodelling and refurbishment projects to address aged building fabric, compliance, and demand issues; and meet universal design standards
- Need for buildings to be fit for purpose
- Need for minor refurbishment/repairs / replacement / reconfiguration and upgrades of ageing facilities that reflect infrastructure risk mitigation strategies
 - kitchen upgrades or equipment
 - assets located underground and reticulation services
 - waiting room configurations (infection control and prevention)
 - tearoom configurations (infection control and prevention)
 - accessible paths and ramps, Changing Places toilets

9 Ineligible and excluded items

- Operational funding
- Fixtures, fittings, and furniture not associated with a refurbishment project.
- Routine replacement of furniture and fittings that are worn is the responsibility of agencies to manage as part of their existing maintenance and replacement program

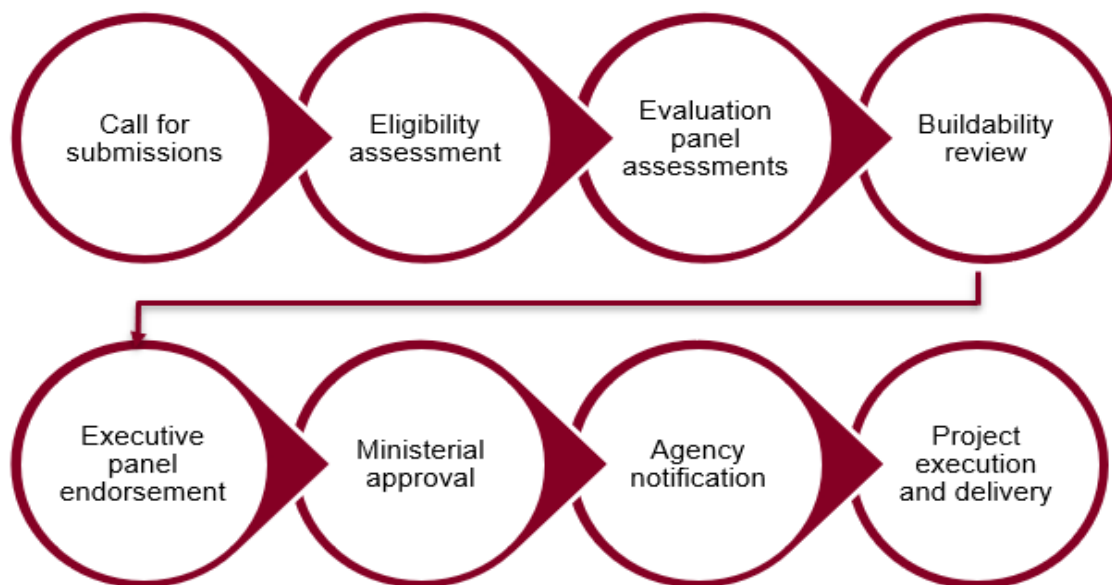
- Motor vehicles
- Planning funding for future redevelopment/growth projects
- Projects that are additional stages of previously funded projects will be de-prioritised

10 Submission process

The submission process is as follows:

1. Call for submissions
2. Eligibility assessment
3. Evaluation panel assessments
4. Buildability review
5. Executive panel endorsement
6. Ministerial approval
7. Agency notification
8. Project execution and delivery.

Figure 1: Eight step submission process



11 Submission requirements

VIDA Health is using a web-based online application process.

The application should address the selection criteria and include a full description of the key deliverables, funding sought, likely benefits, and how key risks including potential bed closures or service disruption will be managed. The following supporting documentation is required:

- quotes for supply/installation including a provision to 'make good'
- A cost plan (including associated decanting costs, enabling infrastructure works, site/infrastructure costs, demolition, fees, and contingency allocation)

- Information on scope, governance, timelines, deliverables, risk management (including bed closures) and benefits including lifecycle costings and payback periods (if applicable - where additional revenue and or cost savings are anticipated from the solution proposed, you must complete the *Asset Lifecycle costing spreadsheet*. Cost savings or additional revenue generated will be considered favourably)
- independent reports highlighting risk and / or compliance issues including proposed solutions

The online portal, SmartyGrants, will be the means of submission. The web address to seek information about [SmartyGrants](http://www.smartygrants.com.au) is <www.smartygrants.com.au>. You will be required to create a password-protected log-in to access the application form. The portal access to submit the application is located at <https://dhhs.smartygrants.com.au/MHAODCRF2026-27>

All applications must be:

- from an eligible agency
- endorsed by the Chief Executive Officer of the agency
- submitted via the online portal SmartyGrants application form and include relevant supporting documentation (e.g. business case, design drawings, photos, cost plans, quotations, and other supporting information)
- received no later than the SmartyGrants closing date and time: 5:00 pm on Friday, 29 January 2027. Unless exceptional circumstances apply, applications received after the specified time and date are deemed ineligible for consideration.

11.1 Consultation and advice

Applicants are encouraged to seek assistance when preparing applications by emailing the [Mental Health and Alcohol and Other Drugs Capital Renewal Fund](mailto:mentalhealthprograms.vhba@vida.vic.gov.au) <mentalhealthprograms.vhba@vida.vic.gov.au>, or via the website at [Mental Health and Alcohol and Other Drugs Capital Renewal Fund Webpage](https://www.vhba.vic.gov.au/mental-health/mental-health-and-aod-capital-renewal-fund) <https://www.vhba.vic.gov.au/mental-health/mental-health-and-aod-capital-renewal-fund>

SmartyGrants technical assistance regarding completion of the online form can be obtained through the [Help Guide for Applicants](https://applicanthelp.smartygrants.com.au/help-guide-for-applicants/) <https://applicanthelp.smartygrants.com.au/help-guide-for-applicants/> or by contacting [SmartyGrants via email](mailto:service@smartygrants.com.au) <service@smartygrants.com.au> or calling (03) 9320 6888.

11.1.1 Design guides and technical references

See [Appendix 1 - Construction Projects in Victoria](#) - references and links for VIDA Health design and technical guidelines and an overview of the requirements for government-funded projects in Victoria.

12 Assessment criteria

Applications will be assessed in a panel arrangement using a defined set of assessment criteria. Submissions should reflect agreed policy objectives and demonstrate how the proposed works will meet the objectives of better health for people in Victoria.

Project readiness and past delivery performance are key determinants and may influence the overall success of the application to receive funding.

Applications should demonstrate:

- how the proposed changes will improve mental health and alcohol and other drug treatment services for Victorian people

- alignment with and supporting government legislation, commitments, policies, recommendations, and findings will also be viewed favourably, including (but not limited to):
 - Interim and Final Reports of the Royal Commission into Victoria’s Mental Health System.
 - Mental Health and Wellbeing Act 2022 (Vic)
 - The Framework for Recovery-oriented Practice
 - Promoting Sexual Safety, Responding to Sexual Activity, and Managing Allegations of Sexual Assault in Adult Acute Inpatient Units
 - Statewide Mental Health and Wellbeing Service and Capital Plan
 - Victoria’s Ice Action Plan
 - The National Drug Strategy
 - Victorian Charter of Human Rights and Responsibilities Act 2006 (Vic)
 - Community Visitors Annual Reports
 - Aboriginal Health and Wellbeing Partnership Agreement and Action Plan 2026-28
 - Aboriginal and Torres Strait Islander Cultural Safety Framework – Department of Health
 - Balit Murrup: Aboriginal and social emotional wellbeing framework 2017-27
 - Health 2040. A discussion paper on the future of healthcare in Victoria
 - Victorian Suicide Prevention Framework 2016-25
 - Analysis and evidence for the request e.g. building reports, incident data trends, master and service plans supporting the issue.
- how projects address one or more of the following:
 - service access and capacity (for example, opening of beds, improved service options, reduced service fragmentation improved consumer flow)
 - demand pressure
 - models of care (for example, contemporary models of care/improved services closer to home, holistic ACCO models of care)
 - service efficiency of targeted services
 - efficiency (for example, new infrastructure, equipment, and technology)
 - health care improvement to your health service.
 - enhanced access to culturally safe mental health, social and emotional wellbeing, and AOD services for priority populations including Aboriginal and Torres Strait Islander people
 - contribution to future infrastructure upgrades.
- anticipated key milestones dates in accordance with the payment schedule milestones
- how capital work risks have been identified and mitigation strategies to address these, in particular whether the proposed capital works will result in bed closures or service disruption and if so, how it will be managed.
- evidence to support the problem/issue / risk or opportunity:
- incident data
- reports from the Office of the Chief Psychiatrist
- independent reports from specialists detailing current risks and or issues and how the project will address these
- evidence of how the proposed changes will improve the asset’s environmental sustainability and indoor environmental quality, including completion of the checklist in *Environmental sustainability requirements and checklist*. Describe the benefits your project is expected to achieve supported by metrics/data to measure current performance and targeted outcomes, with timelines based on the successful delivery of the project
- shovel-ready status and their ability to be completed within 18 months of notification of success.

The following criteria will be applied to assess the application and will be considered with the evidence provided. Applications that address multiple criteria are at a distinct advantage. It is expected that all design solutions will be consistent with VIDA Health's design guidelines and Health Technical Advice.

VIDA Health reserves the right to amend the assessment criteria as required to reflect strategic or operational priorities and will notify health services of any significant changes.

Table 1: Assessment criteria

Criteria	Descriptor	Weighting
1. Project readiness	Organisational readiness to implement the project, including key milestones and the expected timeframe for completion. Relevant supporting documentation as outlined in the submission requirements section of this document must be provided. All project dependencies must be listed including their potential impact on the project cost, schedule, scope, and benefits.	Projects will be assessed as ready, partially ready, or not ready
2. Governance	The degree to which health service/agency governance structures and processes are in place to oversee the proposed project development, implementation, monitoring & reporting. This relates to the governance framework supporting transparency, probity, and accountability relating to the delivery of this proposal.	Project governance will be assessed as strong, good, or inadequate
3. Strategic alignment	Alignment with government commitments and policies including the Interim and Final Reports of the <i>Royal Commission into Victoria's Mental Health System</i>. Alignment with health service: • strategic plan • statement of priorities • service plan and master plan (where relevant). AOD Alignment: Alignment with provider's service agreement and the AOD program guidelines.	20%
4. Healthcare quality and safety improvement	Addresses one or more of the following: • regulatory compliance • standards compliance • patient and staff amenities • safety, quality • risk.	50%
5. Service capacity efficiency and demand pressure	Addresses one or more of the following: • service access and capacity (for example, bed access, improved service options, reduced service fragmentation, improved consumer flow) • demand pressure • models of care (for example, contemporary models of care/improved services closer to home)	30%

	• service efficiency of targeted services • efficiency (for example, new infrastructure, equipment and technology) • health care improvement to your health service. • enhanced access to culturally safe mental health, social and emotional wellbeing, and AOD services for priority populations including Aboriginal and Torres Strait Islander peoples • contribution to future infrastructure upgrades	
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13 Conditions of funding

1. The funds that will be provided are based on the approved project scope as identified within the funding approval letter and funding agreement/deed.
2. Funds are provided only for the approved project and scope including generic type, functionality, and number of items in the approved allocation, and must not be used for any other purpose.
3. Any changes to scope, cost, or timeframes will require departmental approval. Any increased costs associated with the project will be the responsibility of the health service/health agency.
4. If only specific elements of an application have been approved (partial funding), the health service /health agency must ensure that funds are used only for the approved elements.
5. Where projects are funded from multiple sources, and the additional source of funding is no longer available, the Victorian Government is not obliged to provide any additional funding, and VIDA Health may recommend to the Minister that funds are recalled and reallocated.
6. Funding provided for any nominated assets must be expended by a health service/health agency in accordance with the grant agreement letter.
7. Applicants should demonstrate that project viability is not dependent on continuing or recurrent State Government funding.
8. Capital works and equipment acquisitions shall not require any growth in recurrent funding from the Department.
9. The agency must agree to hosting events related to funding. Milestone celebrations will be offered to the Ministers and senior officials. The Department reserves the right to promote projects and their milestones on social media and websites.
10. Funding is not available for projects previously funded or already approved for funding from another source. Funding will not be provided for additional stages or cost overruns of projects.
11. Final payment will be made by the milestones and payment criteria relevant to the project approval as defined in the grant submission and grant agreement letter.
12. All projects must be completed within 18 months.
13. The timing of any planned bed closures (mental health and AOD) as a result of the capital work will need specific approval from the Department.

13.1 Asset management

14. On completion of the project, health services are required to update asset registers aligned with the department AIMS, maintenance, and asset management plans and provide details of the testing and commissioning plans (including for decommissioning and disposing of the item/infrastructure

replaced). Similarly, 'new' acquisitions (outside of the initiative and irrespective of the funding source) are to be included on the asset register and incorporated into future asset management planning.

15. Health services reporting on asset replacement under the initiative are required to demonstrate financial and asset accountability and reporting and investment against asset management plans for engineering infrastructure and medical equipment replacement under these programs.
16. Medical equipment items proposed must be approved by the Therapeutic Goods Administration (including any hybrid technologies) and replacement engineering infrastructure and medical equipment are to comply with Australian Standards, regulations, and guidelines.

13.2 Governance

17. Capital delivery under this initiative requires works program management, governance, and internal controls by health services to be consistent with capital project management policies and tailored to the scope and size of the capital expenditure program. Governance processes need to be in place to ensure procurement of the approved asset is consistent with the scope agreed upon and approved by VIDA Health and communicated during the procurement phase so that the purchase remains in-scope and procured within the financial year.
18. Assets put forward for funding must have satisfied health service/ agency governance requirements including that: projects have been appropriately scoped by the program requirements; projects have the required internal personnel available to deliver the approved asset; and project governance and reporting is in place for these projects.
19. The project(s) will be directly managed by the health service/agency organisation in a manner that reflects departmental guidelines relating to probity, financial reporting, and project completion information.

13.3 Payments and reporting milestones

20. All agencies will initially be informed of the outcome of their submission by email. Successful applicants will receive a letter that confirms the scope of funded works, terms of payments, and delivery timeframe. This letter will have an attachment that must be signed by the CEO and returned to VIDA Health, before any payments are made.
21. Once the signed letter has been received, VIDA Health will make project payments in accordance with the following framework.

Milestone payments and reporting are:

- **Milestone 1:** 20% allocation upon returning signed Letter of Acceptance
- **Milestone 2:** Completion of procurement of the scoped works
- **Milestone 3:** 60% allocation upon executed contract/laying of purchase order and estimated date of delivery and confirmation of scope. VIDA Health will pay 60% of the actual project sum, provided that the project sum is not greater than the total funding allocation
- **Milestone 4:** notification of installation / commissioning completion
- **Milestone 5:** up to 20% of the project sum upon confirmation of project completion, provided that the project sum is not greater than the total funding allocation. The final report needs to be attached to the final application for payment.

The completed and signed claim form will need to be submitted to VIDA Health with supporting invoices and purchase orders.

22. Funding may be recalled by VIDA Health if projects do not proceed or are not completed on time.

13.4 Reporting

23. A monthly progress report on the project will be submitted to VIDA Health, along with updates at agreed project milestones and upon completion.
24. Agencies are required to liaise with their project manager on tender specifications and project deliverables.
25. Upon project completion, a final project acquittal must be submitted to VIDA Health. The required acquittal template will be provided during the delivery phase.
26. VIDA Health must be notified if there is to be a prolonged delay in the procurement of assets, installation, or minor capital works.

13.5 Procurement

27. Any proposed changes in scope must be agreed in writing prior to purchase commitment and may be subject to funding reallocation and the need to re-apply in future rounds.
28. Health services must comply with government policies and guidelines in their procurement activities including the [Social Procurement Framework](https://www.buyingfor.vic.gov.au/social-procurement-victorian-government-approach) <<https://www.buyingfor.vic.gov.au/social-procurement-victorian-government-approach>> (where applicable).
29. VIDA Health requires health services to work collaboratively with Health Share Victoria to maximise value-for-money procurement of medical equipment or plant items and deliver the most efficient purchasing arrangements, including bulk purchasing to achieve economies of scale. For further information refer to the procurement and purchasing requirements on the [Health Share Victoria website](https://healthsharevic.org.au) <<https://healthsharevic.org.au>>
30. Health services should include the use of Working for Victoria in any procurement tenders. More information is available at [Jobs Victoria](https://jobs.vic.gov.au) <<https://jobs.vic.gov.au>>

13.6 Disposal

31. Medical equipment/plant/engineering infrastructure replaced must be decommissioned and disposed of in accordance with appropriate and required standards. For further details on decommissioning and disposal refer to the [Medical Equipment Asset Management Framework](https://www.health.vic.gov.au/publications/medical-equipment-asset-management-framework) <<https://www.health.vic.gov.au/publications/medical-equipment-asset-management-framework>>
32. The finance register, asset register, equipment and engineering registers, and asset management plans will be updated by the agency for both the disposal of the replaced asset and the acquisition of the replacement asset including the date of disposal.

14 Appendix 1 - Construction projects in Victoria - references and links

The following sites provide an overview of the requirements for government-funded projects in Victoria.

14.1 Department of Health website

[Australasian Health Facility Guidelines](https://healthfacilityguidelines.com.au) <<https://healthfacilityguidelines.com.au>>

[Fire Risk Management](https://providers.dhhs.vic.gov.au/fire-risk-management-procedures-and-guidelines) <<https://providers.dhhs.vic.gov.au/fire-risk-management-procedures-and-guidelines>>

[Behavioural assessment room in hospital emergency departments](https://www.health.vic.gov.au/publications/guidelines-for-behavioural-assessment-rooms-in-emergency-departments)
<<https://www.health.vic.gov.au/publications/guidelines-for-behavioural-assessment-rooms-in-emergency-departments>>

[Royal Commission into Victoria's Mental Health System](http://rcvmhs.archive.royalcommission.vic.gov.au)
<<http://rcvmhs.archive.royalcommission.vic.gov.au>>

[Alcohol and Other Drugs Program Guidelines](https://www2.health.vic.gov.au/alcohol-and-drugs/aod-service-standards-guidelines/aod-program-guidelines) <<https://www2.health.vic.gov.au/alcohol-and-drugs/aod-service-standards-guidelines/aod-program-guidelines>>

14.2 Victorian Health Building Authority website

[Design guidelines](https://www.vhba.vic.gov.au/resources/design-guidelines) <<https://www.vhba.vic.gov.au/resources/design-guidelines>>

[Universal design](https://www.vhba.vic.gov.au/resources/universal-design) <<https://www.vhba.vic.gov.au/resources/universal-design>>

[Technical Guidelines](https://www.vhba.vic.gov.au/resources/technical-guidelines) <<https://www.vhba.vic.gov.au/resources/technical-guidelines>>

[Mental Health Prevention and Recovery – Health facility briefing and planning](https://www.vhba.vic.gov.au/mental-health-prevention-and-recovery-care-unit-part-b-health-facility-briefing-and-planning)
<<https://www.vhba.vic.gov.au/mental-health-prevention-and-recovery-care-unit-part-b-health-facility-briefing-and-planning>>

[Mental Health tribunal room – Standard component](https://www.vhba.vic.gov.au/sites/default/files/2019-10/Mental-Health-Tribunal-Hearing-Room-Standard-Component-with-elevations-rom-data-sheet-VHHSBA-180904.pdf)
<<https://www.vhba.vic.gov.au/sites/default/files/2019-10/Mental-Health-Tribunal-Hearing-Room-Standard-Component-with-elevations-rom-data-sheet-VHHSBA-180904.pdf>>

[Alcohol and Other drug – Health facility briefing and planning](https://www.vhba.vic.gov.au/sites/default/files/2019-10/VHHSBA-Alcohol-and-Other-Drug-Part-B-Health-facility-briefing-and-planning_0.pdf)
<https://www.vhba.vic.gov.au/sites/default/files/2019-10/VHHSBA-Alcohol-and-Other-Drug-Part-B-Health-facility-briefing-and-planning_0.pdf>

[New planning guidelines for alcohol and other drug residential rehabilitation facilities](https://www.vhba.vic.gov.au/news/new-planning-guideline-alcohol-and-other-drug-residential-rehabilitation-facilities)
<<https://www.vhba.vic.gov.au/news/new-planning-guideline-alcohol-and-other-drug-residential-rehabilitation-facilities>>

[Guidelines for sustainability in capital works](https://www.vhba.vic.gov.au/resources/environmental-sustainability) <<https://www.vhba.vic.gov.au/resources/environmental-sustainability>>

14.3 Department of Treasury and Finance website

[Delivery of Government Funded projects in Victoria](https://www.dtf.vic.gov.au/public-construction-requirements-and-resources) <<https://www.dtf.vic.gov.au/public-construction-requirements-and-resources>>

[Ministerial Directions and Instructions – Public Construction Procurement](https://www.dtf.vic.gov.au/public-construction-policy-and-resources/ministerial-directions-and-instructions-public-construction-procurement)

<<https://www.dtf.vic.gov.au/public-construction-policy-and-resources/ministerial-directions-and-instructions-public-construction-procurement>>

[Practitioners Toolkit](https://www.dtf.vic.gov.au/public-construction-policy-and-resources/practitioners-toolkit) <<https://www.dtf.vic.gov.au/public-construction-policy-and-resources/practitioners-toolkit>>

[Construction Supplier Register](https://www.dtf.vic.gov.au/infrastructure-investment/construction-supplier-register) <<https://www.dtf.vic.gov.au/infrastructure-investment/construction-supplier-register>>

[Full Business Case Template](#) <Business case | [dtf.vic.gov.au](https://www.dtf.vic.gov.au) >

14.4 Union consultation

For construction projects comprising expansion and/or reconfiguration the Health Agency/Operator will be required to provide a written attestation at completion of the design development phase/gate that the relevant union has been consulted on the design.

14.5 Local Jobs First website

[Victorian Industry Participation Policy](https://localjobsfirst.vic.gov.au/about/local-jobs-first) <<https://localjobsfirst.vic.gov.au/about/local-jobs-first>>

[Major Projects Skills Guarantee](https://localjobsfirst.vic.gov.au/agency-guidance/major-project-skills-guarantee) <<https://localjobsfirst.vic.gov.au/agency-guidance/major-project-skills-guarantee>>

14.6 Jobs Victoria website

Jobs Victoria <<https://jobs.vic.gov.au/>>

14.7 Commonwealth policies and procedures

[Building and Construction Industry \(Improving Productivity\) Act 2016](https://www.legislation.gov.au/Details/C2017C00042)

<<https://www.legislation.gov.au/Details/C2017C00042>>

[Code for the Tendering and Performance of Building Work 2016](https://www.legislation.gov.au/Details/F2017C00125)

<<https://www.legislation.gov.au/Details/F2017C00125>>

[Australian Government Building and Construction Workplace Health and Safety Accreditation Scheme](https://ablis.business.gov.au/service/ag/australian-government-building-and-construction-workplace-health-and-safety-accreditation-scheme/301)

<<https://ablis.business.gov.au/service/ag/australian-government-building-and-construction-workplace-health-and-safety-accreditation-scheme/301>>

National Construction Code <<https://ncc.abcb.gov.au/>>

15 Appendix 2: List of eligible services

The following services and agencies are eligible to apply to the Mental Health and Alcohol and Other Drugs Capital Renewal Fund:

15.1 Mental health

15.1.1 Metropolitan health services

Alfred Health
Austin Health
Eastern Health
Melbourne Health
Mercy Health
Monash Health
Northern Hospital
Peninsula Health
The Royal Children's Hospital
St Vincent's Health
Western Health
Victorian Institute of Forensic Mental Health (Forensicare)
Parkville Youth Mental Health and Wellbeing Service

15.1.2 Regional services

Albury Wodonga Health
Barwon Health
Bendigo Health
Goulburn Valley Health
Grampians Health Services
Latrobe Regional Hospital
Mildura Base Hospital
South West Healthcare

15.1.3 Metropolitan community

ERMHA
Mentis Assist
Star Health BHN
Uniting Vic Tas

15.1.4 Regional community

Mallee Family Care

15.1.5 Adult residential

McAuley Community Services for Women

Sacred Heart Mission

15.1.6 Youth and adult residential rehabilitation

Aboriginal Community Elders Services Incorporated

Access Health and Community Limited

Access Services for Koories Ltd.

Action On Disability Within Ethnic Communities Incorporated

Anglicare Victoria

Arbias Limited

Asylum Seeker Resource Centre Incorporated

Australian Community Support Organisation Ltd.

BALLARAT AND DISTRICT ABORIGINAL CO-OPERATIVE LIMITED

BALLARAT COMMUNITY HEALTH LIMITED

Banyule Community Health Limited

Bendigo and District Aboriginal Co-operative Ltd

BHN Better Health Network Ltd

Brophy Family & Youth Services Inc.

Budja Budja Aboriginal Co-Operative Limited

Cabrini Outreach Limited

Carers Victoria Limited

CatholicCare Victoria Limited

Cohealth Limited

DANDENONG & DISTRICT ABORIGINES CO-OPERATIVE LIMITED

Dhauwurd-Wurrung Elderly & Community Health Service Inc.

DPV HEALTH LTD

Drummond Street Services Incorporated

EACH LIMITED

Eating Disorders Foundation Of Victoria Incorporated

Flat Out Incorporated

First Peoples' Health and Wellbeing
Gateway Health Limited
GIPPSLAND AND EAST GIPPSLAND ABORIGINAL CO-OPERATIVE LIMITED
Gippsland Lakes Complete Health Limited
GOOLUM - GOOLUM ABORIGINAL CO-OPERATIVE LIMITED
Grampians Community Health Limited
GROW
Gunditjmara Aboriginal Co-operative Limited
Jesuit Social Services Limited
Karingal St Laurence Limited
Kinglake Ranges Neighbourhood House Incorporated
Kirrae Health Service Inc.
Lakes Entrance Aboriginal Health Association
Lake Tyers Health & Children's Services Association Inc.
Latrobe Community Health Service Limited
MacKillop Family Services Limited
Mallee District Aboriginal Services Limited
Mental Health Foundation Australia
Merri Community Health Services Limited
Mind Australia Limited
Minus18 Foundation Ltd
Moogji Aboriginal Council East Gippsland Incorporated
Mungabareena Aboriginal Corporation
Murray Valley Aboriginal Co-operative Limited
Nas Recovery Centre Ltd
Neami Limited
Ngwala Willumbong Aboriginal Corporation
Njernda Aboriginal Corporation
OBSESSIVE COMPULSIVE & ANXIETY DISORDERS FOUNDATION OF VICTORIA INC.
Oonah Health and Community Services Aboriginal Corporation
Orygen Limited
Out Doors Incorporated
Panda - Perinatal Anxiety and Depression Australia Incorporated
Ramahyuck District Aboriginal Corporation
Rumbalara Aboriginal Co-operative Limited

Sacred Heart Mission Incorporated
 Satellite Foundation
 St. Mary's House of Welcome
 Sunbury Community Health Centre Limited
 Switchboard (Victoria) Incorporated
 Tandem Incorporated
 The Compassionate Friends - Victoria Incorporated
 The Reach Foundation
 THE VICTORIAN ABORIGINAL HEALTH SERVICE CO-OPERATIVE LIMITED
 The Victorian Foundation for Survivors of Torture Incorporated
 Thorne Harbour Health Ltd
 Uniting (Victoria and Tasmania) Limited
 Victorian Aboriginal Child and Community Agency Co-operative Limited
 VICTORIAN ABORIGINAL COMMUNITY CONTROLLED HEALTH ORGANISATION INC.
 Victorian Mental Illness Awareness Council Incorporated
 Villa Maria Catholic Homes Limited
 Wathaurong Aboriginal Co-Operative Limited
 Wellways Australia Limited
 Winda-Mara Aboriginal Corporation
 Youth Affairs Council of Victoria Incorporated

15.2 Alcohol and other drugs services

Aboriginal and Torres Strait Islander Corporation Family Violence Prevention and Legal Service (Vic)	Bendigo and District Aboriginal Cooperative
Access Health and Community	Barwon Child, Youth and Family
Access Services for Koories	Bendigo Health
Albury Wodonga Health	Bass Coast Health
Alfred Health	BHN Better Health Network Ltd
Anglicare Victoria	Bendigo Community Health Services
Austin Health	Budja Budja Aboriginal Co-Operative Limited
Bairnsdale Regional Health Services	Berry Street Victoria Incorporated
Australian Community Support Organisation	Central Gippsland Health
Ballarat Community Health	Colac Area Health
Barwon Health	Boorndawan Willumb Aboriginal Healing Service
Ballarat and District Division Aboriginal Co-operative	Dardi Munwurro Pty Ltd
	Caraniche Pty Ltd

DPV Health	Northern District Community Health
CoHealth	Murray Valley Aboriginal Co-operative Limited
Echuca Regional Health	Odyssey Victora
First Step	Ngwala Willumbong Co-operative Ltd
Dandenong & District Aborigines Co-Operative Limited	Peninsula Health
Gateway Health Limited	Njernda Aboriginal Co-operative
Dhauwurd-Wurrung Elderly & Community Health	Ramahyuck District Aboriginal Corporation
Gippsland Lakes Complete Health Limited	North Richmond Community Health Centre
EACH Social and Community Services	Salvation Army
Goolum Goolum Aboriginal Co-operative	Northern Health
Eastern Health	South East Melbourne Primary Health Network
Grampians Community Health	Oonah Health and Community Services Aboriginal Corporation
Fitzroy Legal Service Incorporated	St. Vincent's Hospital Limited
Harm Reduction Victoria	Primary Care Connect
Gippsland and East Gippsland Aboriginal Co-op	Sunbury Cobaw Community Health
Kirrae Health Service	Rumbalara Aboriginal Cooperative
Gippsland Southern Health Service	Taskforce Community Agency (part of Windana)
Launch Housing Limited	Self Help Addiction Resource Centre (SHARC)
Goulburn Valley Health	The Mirabel Foundation
Latrobe Regional Health	South West Healthcare
Gunditjmara Aboriginal Cooperative	The Royal Melbourne Hospital
Meli	St. Mary's House of Welcome
IPC Health	Turning Point Alcohol & Drug Centre (Eastern Health)
Mildura Base Public Hospital	Sunraysia Community Health Service
Lake Tyers Health & Childrens Services Association Inc	Victorian Aboriginal Community Controlled Health Organisation Inc
Moogji Aboriginal Council East Gippsland Incorporated	The City of Greater Dandenong (Council)
Latrobe Community Health Service	Thorne Harbour Health Ltd
Mungabareena Aboriginal Cooperation	The Royal Children's Hospital
Mallee District Aboriginal Services	Wathaurong Aboriginal Cooperative Ltd.
Nexus Primary Health (formerly Mitchell CHS)	The Royal Women's Hospital
Mercy Health	Western Region Alcohol & Drug Centre (WRAD)
Nillumbik Community Health Service Ltd	Uniting Victoria and Tasmania Ltd
Mirabel Foundation Inc	Grampians Health
North East Health Wangaratta	
Monash Health	

Victorian Aboriginal Health Service Cooperative Ltd
Windana Drug and Alcohol Recovery Inc.
Vincentcare STAR Program
Youth Projects Inc
Western Health

Western Victoria Primary Health Network
Winda-Mara Aboriginal Cooperative
Your Community Health (formerly Darebin Community Health)
Youth Support and Advocacy Service (YSAS)