

Western NSW - Primary Mental Health Care

2023/24 - 2027/28

Activity Summary View



MH-H2H - 1 - Head to Health - Intake & Assessment Phone Service



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH-H2H

Activity Number *

1

Activity Title *

Head to Health - Intake & Assessment Phone Service

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Mental Health Priority Area 7: Stepped care approach

Other Program Key Priority Area Description

Aim of Activity *

WNSW PHN will refine its Intake and Assessment phone service to offer a centralised point of access for people seeking mental health supports across the WNSW PHN region.

Description of Activity *

WNSW PHN commissions Amplar Health to deliver both the Hub and Spoke components of the Head to Health Initial Assessment and Referral (IAR) model under a statewide telephony framework.

Amplar Health operates the centralised telephony Hub on behalf of all NSW PHNs, via a lead contract with HNC PHN. This Hub functions as the single statewide point of intake for mental health-related calls to the national 1800 number, providing consumers

with timely, evidence-informed initial assessments, risk identification, and navigation support.

In addition, Amplar Health delivers the Western NSW region's Referral Spoke on behalf of WNSW PHN. The Referral Spoke ensures regionally responsive follow-up, warm transfers, and effective connections to local mental health and wellbeing services—including community, primary, and tertiary supports—based on consumer needs and IA outcomes.

Key features of the service include:

A dedicated 1.0 FTE Referral Coordinator based in or connected to the Western NSW region, supported with clinical supervision and ongoing training.

Follow-up of priority clients, including suicide risk and IAR Level 5 presentations, within two business days of referral.

Maintenance of local service mapping and awareness of wait times to support accurate referrals and inform future service planning.

Monthly reporting to WNSW PHN on consumer volumes and system activity.

This model enhances mental health service navigation and coordination across NSW, with strong local integration, rapid response for high-risk clients, and a consistent, person-centred experience for consumers accessing care.

Needs Assessment Priorities *

Needs Assessment

WNSW PHN - Health Needs Assessment - 2024/25 to 2026/27

Priorities

Priority	Page reference
Older adults in rural and remote areas need to receive timely diagnosis and access essential care from specialists such as geriatricians and mental health professionals.	253
Positive experiences for First Nations people in the region including reduction in racism, having concerns taken seriously and not being dismissed, are critical to improve trust in health services	196
Older people in rural regions require greater access to social and healthcare interventions to reduce chronic isolation and loneliness and slow the decline in their mental and physical health	252
People who experience mild to moderate mental health conditions require greater support to manage their health in the community to reduce their reliance on ED for care	193
Telehealth and virtual care services require more Aboriginal Health workers to accompany patients in appointments to make patients feel more comfortable attending appointments, feel culturally safe.	193
A reduction in suicide rates is needed in WNSW PHN to reduce the disparity between WNSW PHN and other regions nationally	201



Activity Demographics

Target Population Cohort

People who identify with themselves or a loved one having Mental Health, Social Emotional Wellbeing and Alcohol and other drug needs.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

WNSW PHN will work with the current service provider, and also HNC PHN to design the initial assessment component.

WNSW PHN will consult with people in the community with lived experience of mental ill health, current service providers, the LHD, the relevant clinical and community councils, alongside AMS and any other relevant stakeholders.

Collaboration

Western NSW LHD, Far Western LHD, current service providers and the WNSW community.



Activity Milestone Details/Duration

Activity Start Date

30/06/2024

Activity End Date

29/06/2025

Service Delivery Start Date

01/07/2024

Service Delivery End Date

30/06/2025

Other Relevant Milestones

WNSW and Far Western NSW Head to Health Centre and Satellite being procured and commenced services.

**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?

na

Co-design or co-commissioning comments

na



MH - 1000 - Initial Assessment and Referral



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

1000

Activity Title *

Initial Assessment and Referral

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Mental Health Priority Area 7: Stepped care approach

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

This activity will upskill General Practitioners and other primary care clinicians across WNSWPHN region in the use of the Initial Assessment and Referral (IAR) Decision Support Tool (DST)

Description of Activity *

This will be facilitated through the training and education of General Practitioners and other primary care clinicians, including Commissioned MH providers across the region through the employment of IAR Training and Support Officer. To further support the IAR Tool implementation, WNSW PHN will draw on stakeholder networks to disseminate information about the National IAR Guidelines and promote adoption of Guidelines. TSO will work closely with MH Program manager and Digital Health Manager to continue to embed IAR-DST into workflows of Mental Health practitioners and GPs in WNSW PHN region.

Needs Assessment Priorities ***Needs Assessment**

WNSW PHN - Health Needs Assessment - 2024/25 to 2026/27

Priorities

Priority	Page reference
Greater health literacy of people with chronic diseases their family or caregivers is required to improve understanding medical information, treatment regimens, and the importance of self-management.	123



Activity Demographics

Target Population Cohort

General Practitioners and other primary care clinicians.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

Consultation will be undertaken as required with Clinical Councils, GP Advisors and Mental Health Stakeholders

Collaboration

WNSW PHN will collaborate with key stakeholders and keep them informed of progress of training delivery.



Activity Milestone Details/Duration

Activity Start Date

31/12/2021

Activity End Date

29/06/2025

Service Delivery Start Date

01/01/2022

Service Delivery End Date

30/06/2025

Other Relevant Milestones



Activity Commissioning

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

Not Yet Known: No

Continuing Service Provider / Contract Extension: No

Direct Engagement: No

Open Tender: No

Expression Of Interest (EOI): No

Other Approach (please provide details): Yes

Is this activity being co-designed?

No

Is this activity the result of a previous co-design process?

No

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

No

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

No

Decommissioning

No

Decommissioning details?

na

Co-design or co-commissioning comments

na

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

No



MH - 2100 - MH2.1 Headspace Services



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

2100

Activity Title *

MH2.1 Headspace Services

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 ***

Increase access to a range of appropriate youth mental health services, alcohol and other drugs and physical support and awareness for youths through accessible and flexible headspace centres

Description of Activity *

headspace will provide free mental health, alcohol and other drugs, health prevention and education to youths aged between 12-25 years old.

Core headspace activity will focus on early identification and prevention of mental health issues with the aim of reducing the need for mainstream mental health, alcohol and other drug services. WNSW PHN will maintain centres at Bathurst, Orange, Dubbo, Broken Hill & Cowra (Satellite).

headspace will adapt to become more flexible, with longer opening hours, to ensure that school aged children can access these services without affecting their study. WNSW PHN will work with the centres to improve sector integration and incorporate headspace services into a stepped care model of youth mental health services for the region.

Based on the evaluation done on headspace centres nationally, indicated the importance of maintaining good physical health. Consideration will be given to WNSW PHN headspace centres to allow GP telehealth options due to workforce issues.

Needs Assessment Priorities *

Needs Assessment

WNSW PHN - Health Needs Assessment - 2024/25 to 2026/27

Priorities

Priority	Page reference
First Nations people require greater support to access appropriate psychiatric services in the community to meet the needs of complex mental health and wellbeing	191
Targeted programs in schools are required to support children and young people who are exposed to suicide to reduce trauma and grief from the high rates of suicide in small communities	232
People who experience mild to moderate mental health conditions require greater support to manage their health in the community to reduce their reliance on ED for care	193
A reduction in suicide rates is needed in WNSW PHN to reduce the disparity between WNSW PHN and other regions nationally	201



Activity Demographics

Target Population Cohort

Young people aged 12-25 in those centres and surrounding communities

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

No

SA3 Name	SA3 Code
Lachlan Valley	10302
Bathurst	10301
Orange	10304
Broken Hill and Far West	10502
Dubbo	10503



Activity Consultation and Collaboration

Consultation

Consultation will continue with a range of youth focused services to ensure that headspace services are integrated with other youth services in the community. WNSW PHN will ensure that the community are engaged and are included in the consultation around any changes to the headspace services, to ensure they are more accessible and attractive to that age ranges, to promote health seeking behaviours.

Collaboration

Key stakeholders will be LHDs and NGO provided clinical services, including GPs, Child and Adolescent Mental Health Services (CAMHS), Like Minds and community mental health. This collaboration will focus on improving services for early identification, prevention and management of mental health issues in children and youths, ensuring correct referral pathways and integrated service delivery.



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2028

Service Delivery Start Date

01/07/2019

Service Delivery End Date

30/06/2028

Other Relevant Milestones



Activity Commissioning

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

Not Yet Known: No

Continuing Service Provider / Contract Extension: Yes

Direct Engagement: No

Open Tender: No

Expression Of Interest (EOI): No

Other Approach (please provide details): No

Is this activity being co-designed?

No

Is this activity the result of a previous co-design process?

No

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

No

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

No

Decommissioning

No

Decommissioning details?

N/A

Co-design or co-commissioning comments

N/A

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

Yes



MH - 2200 - MH2.3 Improved Access to Culturally Safe and Accessible Mental Health Services



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

2200

Activity Title *

MH2.3 Improved Access to Culturally Safe and Accessible Mental Health Services

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 activity aims to support the provision of culturally safe, accessible, co-designed mental health outreach services for young people living in small remote communities in Western NSW.

Description of Activity *

WNSW PHN is implementing a new model of outreach-based youth mental health service delivery through the headspace Outreach Program, now fully operational. The program addresses access gaps in mental health services for young people aged 12–25 living in 10 small rural and remote towns (each with fewer than 5,000 people and high Aboriginal populations), where service availability has historically been limited.

This service is commissioned through headspace Dubbo and delivered in a clustered model, with 10 Aboriginal Youth Wellbeing Workers recruited from and operating within local communities (e.g., local health centres or ACCHOs). The service provides culturally safe, trauma-informed, and youth-specific care that aligns with the Stepped Care model at Levels 2 and 3, focusing on early intervention, psychosocial supports, mental health literacy, and system navigation.

The service offers a mix of face-to-face and virtual clinical supports, health promotion, care coordination, and supported referrals. It is delivered in alignment with six guiding principles: accessible, holistic, trauma-informed, self-determined, youth-specific, and integrated.

Formal partnerships with ACCHOs, general practices, LHD services, schools, and other providers are established to ensure effective referral pathways, system integration, and continuity of care. Local Youth Advisory Groups and a First Nations Cultural Mentor ensure community co-design, governance, and continuous feedback.

There will be a model review after 6 months of service and an external evaluation of the service after one year of operation.

This activity contributes to improving access, cultural safety, and early intervention for rural Aboriginal youth, while embedding sustainable, community-led approaches into the mental health system.

Needs Assessment Priorities *

Needs Assessment

WNSW PHN - Health Needs Assessment - 2024/25 to 2026/27

Priorities

Priority	Page reference
First Nations people require greater support to access appropriate psychiatric services in the community to meet the needs of complex mental health and wellbeing	191
Targeted programs in schools are required to support children and young people who are exposed to suicide to reduce trauma and grief from the high rates of suicide in small communities	232
People who experience mild to moderate mental health conditions require greater support to manage their health in the community to reduce their reliance on ED for care	193
A reduction in suicide rates is needed in WNSW PHN to reduce the disparity between WNSW PHN and other regions nationally	201



Activity Demographics

Target Population Cohort

The service will target 12-25 living in 10 small rural and remotes communities with population of less than 5000 people. The service is also Aboriginal led and will target First Nations, however it is open to anyone under the headspace model.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

WNSW PHN will continue to consult and engage with local service providers that focus on youth mental health and social and emotional wellbeing.

Collaboration

The PHN will continue to collaborate with service providers, local AMS', ACHHO's, headspace national, and the LHD



Activity Milestone Details/Duration

Activity Start Date

30/06/2022

Activity End Date

29/06/2028

Service Delivery Start Date

01/07/2022

Service Delivery End Date

30/06/2028

Other Relevant Milestones



Activity Commissioning

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

Not Yet Known: No

Continuing Service Provider / Contract Extension: Yes

Direct Engagement: No

Open Tender: No

Expression Of Interest (EOI): No

Other Approach (please provide details): No

Is this activity being co-designed?

Yes

Is this activity the result of a previous co-design process?

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?

Yes

Decommissioning

No

Decommissioning details?

na

Co-design or co-commissioning comments

The service will be co-designed be WNSW PHN in partnership with, headspace Dubbo, headspace National, Aboriginal Community Controlled Health Organisations, Western NSW Local Health District NSW Department of Education Primary Health Care service providers (ACCHOS and Government services), Youth Reference Group members and other key local stakeholders.

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

No



MH - 2200 - MH2.2 Rural Youth Mental Health Strategy



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

2200

Activity Title *

MH2.2 Rural Youth Mental Health Strategy

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 service is aimed at young people with, or at risk of mental illness (including severe mental illness) and offers therapeutic services, group work and case management services. This service is designed for young people between 12-25 in rural areas.

Description of Activity *

WNSW PHN will continue to commission the following activities:

1. Rural Youth Mental Health Service (RYMHS).

RYMHS will combine clinical services, assertive outreach/engagement and case management. RYMHS will target young people aged 12-25, who are not currently accessing services or experience service access barriers. RYMHS will target the following geographic LGA, including opportunities for expansion:

- Parkes LGA,
- Forbes LGA,
- Lachlan LGA,
- Bogan LGA,
- Narromine LGA,
- Gilgandra LGA,

- Warrumbungle Shire LGA,
- Coonamble LGA,
- Cobar LGA,
- Cowra LGA,
- Walgett LGA
- Mid-Western Regional Council LGA.

2. Social, Emotional and Wellbeing interventions for Children, Young People, families and carers. Services will be delivered in a culturally safe way to increase accessibility for Aboriginal and Torres Strait Islander People. The service will have 3 components:

- Actively supports the social and emotional wellbeing of students, teachers, family and carers in a preventative and inclusive way;
- Provide training and consultancy to schools across the region. This is a region wide activity.
- Provide education and information sessions to schools and parents. This is a region wide activity.

Needs Assessment Priorities *

Needs Assessment

WNSW PHN - Health Needs Assessment - 2024/25 to 2026/27

Priorities

Priority	Page reference
First Nations people require greater support to access appropriate psychiatric services in the community to meet the needs of complex mental health and wellbeing	191
Targeted programs in schools are required to support children and young people who are exposed to suicide to reduce trauma and grief from the high rates of suicide in small communities	232
People who experience mild to moderate mental health conditions require greater support to manage their health in the community to reduce their reliance on ED for care	193
A reduction in suicide rates is needed in WNSW PHN to reduce the disparity between WNSW PHN and other regions nationally	201



Activity Demographics

Target Population Cohort

Children and young people (12 to 25) in remote and hard to reach localities.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

WNSW PHN will continue to consult and engage with local service providers that focus on youth mental health and social and emotional well being.

Collaboration

Component 1: The model is built around the need for the service to be fully integrated with existing services and supports (e.g., LHDs, headspace centres, psychological services, TAFE, schools) and is underpinned by a focus on strategies that embed integration.

Component 2: Service providers will be expected to collaborate closely with local schools to provide education, information and support. WNSW PHN expects these collaborative activities to enhance the capability of mainstream providers in the education system



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2027

Service Delivery Start Date

01/07/2019

Service Delivery End Date

30/06/2027

Other Relevant Milestones

NA



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?

Yes

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

Yes

Decommissioning

No

Decommissioning details?

N/A

Co-design or co-commissioning comments

N/A

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

Yes



MH - 3100 - MH3.1 Psychological therapy services for under-serviced groups



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

3100

Activity Title *

MH3.1 Psychological therapy services for under-serviced groups

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

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

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

To address service gaps in the provision of psychological therapies for people in rural and remote areas and other under-serviced and/or hard to reach populations, making optimal use of the available service infrastructure, e-health and workforce. Priority groups include but are not limited to Aboriginal and Torres Strait Islander people, homeless people, LGBTQIA+ community, perinatal clients, children under 12 years and those in out of home care, youth aged 12-24 years, CALD clients (including refugees), Veterans and first responders.

Description of Activity *

This activity will result in the provision of evidence based, short term psychological interventions to people with a diagnosable mild, moderate, or in some cases severe mental illness, or to people who have attempted, or are at risk of, suicide or self-harm where access to other services is not appropriate.

This funding period will also scope the development of improved services for CALD, veterans, LGBTQIA+, and perinatal clients, and scoping the requirements for improved psychological services to people with complex mental illness such as those with personality disorders and others that have psychological needs that are not able to be met through current psychological therapies service models.

Education for clinicians, non-clinicians and peer workers will also be rolled out, such as working with those who have emerging or

diagnosed personality disorder, support for those with PTSD and effective management of complex mental health issues, including risk management and writing complex care plans.

The service will be responsive to the unique challenges and needs of the rural and remote communities within the WNSW PHN region and allow for flexible models of service delivery include but not limited to telephone or video consultation. Services will be delivered in a culturally safe way to increase accessibility for Aboriginal and Torres Strait Islander People.

The activity will include monitoring and evaluation of the service delivery.

Needs Assessment Priorities *

Needs Assessment

WNSW PHN - Health Needs Assessment - 2024/25 to 2026/27

Priorities

Priority	Page reference
First Nations people require greater support to access appropriate psychiatric services in the community to meet the needs of complex mental health and wellbeing	191
Targeted programs in schools are required to support children and young people who are exposed to suicide to reduce trauma and grief from the high rates of suicide in small communities	232
People who experience mild to moderate mental health conditions require greater support to manage their health in the community to reduce their reliance on ED for care	193
A reduction in suicide rates is needed in WNSW PHN to reduce the disparity between WNSW PHN and other regions nationally	201



Activity Demographics

Target Population Cohort

People in rural and remote communities who require access to psychological and other allied health supports to manage their mental health.

Children aged 0-11 and their families/carers

Youth aged 12-24 years and their families/carers

Adults aged 25-64 years

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

Consultation will occur through WNSW PHN Community, Clinical and Aboriginal Health Councils, funded service providers and local general practices.

Consultation will continue throughout the delivery and evaluation of this activity to drive continuous quality improvement.

Collaboration

Western NSW and Far West Local Health Districts, and other rural and remote service organisations will be involved in supporting this activity.



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2027

Service Delivery Start Date

01/07/2019

Service Delivery End Date

30/06/2027

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: 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?

na

Co-design or co-commissioning comments

na

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

Yes



MH - 3200 - MH3.2 Psychological therapy services for Residential Aged Care



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

3200

Activity Title *

MH3.2 Psychological therapy services for Residential Aged Care

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

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

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

Increase access to appropriate psychological therapies for people living in Residential Aged Care Facilities

Description of Activity *

This activity is the result of findings from workshops, interviews and surveys undertaken to co-design a Regional Service Delivery Model for Psychological Services in Residential Aged Care Homes (RACHs) in the Western NSW region. To enable access across the vast geography of the WNSW PHN region, this activity will provide online and face-to-face mental health services to all RACH's across the whole PHN region ensuring a highly accessible, convenient, and cost-effective solution to service provision, although face to face services may be delivered if required. This initiative will build upon the success of the Telehealth Health in Residential Aged Care (TRAC) program that WNSW PHN has been successfully implementing over recent years.

Services provided to the RACH's by the commissioned provider will include:

- Provide an easy-to-use platform for booking and delivering psychology sessions.
- Enable RACH residents to gain access to up to 10 psychology sessions per episode.
- Mental health professionals will be available for telehealth appointments with residents both inside and outside of regular working hours.
- The telehealth provider will ensure that there is seamless correspondence between the residents GP and the mental health professional removing some of the administrative burden to RACH staff.

- Appointments with a mental health clinician will be flexible to suit the routine, lifestyle and needs of the resident.
 - FIFO and visit identified RACHs each quarter
 - Deliver education sessions to both RACH staff and residents
 - Session summaries will be provided to residents to be utilised by the resident and/or RACH staff to apply the mental health clinician’s advice between sessions.
- Given the important of an appropriate implementation process, RACH readiness will be supported directly by WNSW PHN.

Needs Assessment Priorities *

Needs Assessment

WNSW PHN - Health Needs Assessment - 2024/25 to 2026/27

Priorities

Priority	Page reference
Older adults in rural and remote areas need to receive timely diagnosis and access essential care from specialists such as geriatricians and mental health professionals.	253
Older people in rural regions require greater access to social and healthcare interventions to reduce chronic isolation and loneliness and slow the decline in their mental and physical health	252
People who experience mild to moderate mental health conditions require greater support to manage their health in the community to reduce their reliance on ED for care	193
A reduction in suicide rates is needed in WNSW PHN to reduce the disparity between WNSW PHN and other regions nationally	201



Activity Demographics

Target Population Cohort

Residents of Residential Aged Care Facilities diagnosed with or at high risk of experience mild to moderate Mental Illness requiring psychological therapies.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

This activity is the result of findings from workshops, interviews and surveys undertaken to co-design a Regional Service Delivery Model for Psychological Services in Residential Aged Care Homes (RACHs) in the Western NSW region.

Collaboration

Collaboration with RACH's and other stakeholders will occur throughout the implementation of the activity.



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2027

Service Delivery Start Date

01/03/2021

Service Delivery End Date

30/06/2027

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: No

Open Tender: No

Expression Of Interest (EOI): No

Other Approach (please provide details): No

Is this activity being co-designed?

Yes

Is this activity the result of a previous co-design process?

Yes

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

No

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

No

Decommissioning

Yes

Decommissioning details?

na

Co-design or co-commissioning comments

na

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

Yes



MH - 4100 - MH4.1 MHNIP Services



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

4100

Activity Title *

MH4.1 MHNIP Services

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Mental Health Priority Area 4: Mental health services for people with severe and complex mental illness including care packages

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

Improved access to appropriate services for severe and complex mental illness, with increased access to the right care, at the right time in the right place with the provision of mental health nursing services, including the use of nurse practitioners and allied health.

Description of Activity *

To provide timely access to MHNIP services across our region, with the aim of improving access to appropriate services for severe and complex mental illness, including those who live in rural and remote communities, with the aim of Improved patient experience allowing increased access to right care, at the right time in the right place with the provision of mental health nursing service

This will be achieved through three delivery models:

1. A placed-based model where MHNIP services are provided in collaboration with general practices, service providers and the Local Health Districts across the WNSW catchment area by credentialed mental health nurses, nurse practitioners and allied health professionals.
2. A rural and remote approach based on the WNSW PHN hub model, with service coverage being provided within a two-hour radius from, Dubbo, Cobar, Broken Hill, Bourke and Walgett, by credential mental health nurses, nurse practitioners and allied

health professionals.

These services will be provided in a culturally safe way to increase accessibility for Aboriginal and Torres Strait Islander People. Consultations may be completed online, over the phone or face to face.

The services that will be predominantly covered for both youth and adults who suffer from severe and enduring mental illness will be;

- clinical care coordination
- recovery planning
- physical health care needs and metabolic monitoring
- support to families and significant others
- medication monitoring

Services will be provided for two years which will allow scope for development of pathways to ongoing supports where required after this period.

Needs Assessment Priorities *

Needs Assessment

WNSW PHN - Health Needs Assessment - 2024/25 to 2026/27

Priorities

Priority	Page reference
A reduction in suicide rates is needed in WNSW PHN to reduce the disparity between WNSW PHN and other regions nationally	201



Activity Demographics

Target Population Cohort

People with severe and complex mental illness

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

- WNSW PHN Community, Clinical and Aboriginal Health Councils to assess uptake and accessibility of the services
- Consultation with the LHDs to ensure we are understanding and meeting the needs of the severe and complex clientele within our regions
- Consultations have been conducted with several credentialed mental health nurses, across NSW.
- Ongoing consultation through the development of the service to utilise specialised mental health nurse practitioners, and appropriately skilled and credentialed allied health workers will also be undertaken in 2025-2026
- Once WNSW have their MMHC centres set up, consultation with the service providers of head to health and headspace and non-government organisations providing services to both adult and youth cohorts will be consulted to increase the scope and functioning of the MHNIP programme in WNSW.

Collaboration

- Delivery and future development of this program will be done in collaboration with current service providers, clinicians, and consumers in the region.

Collaboration

- Delivery and future development of this program will be done in collaboration with current service providers, clinicians, and consumers in the region.



Activity Milestone Details/Duration

Activity Start Date

30/06/2024

Activity End Date

29/06/2027

Service Delivery Start Date

01/07/2019

Service Delivery End Date

30/06/2027

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: No

Open Tender: No

Expression Of Interest (EOI): No

Other Approach (please provide details): No

Is this activity being co-designed?

Yes

Is this activity the result of a previous co-design process?

Yes

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

No

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

No

Decommissioning

No

Decommissioning details?

na

Co-design or co-commissioning comments

na

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

Yes



MH - 5100 - MH5.1 Suicide Prevention Capacity Building & Targeted Support



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

5100

Activity Title *

MH5.1 Suicide Prevention Capacity Building & Targeted Support

Existing, Modified or New Activity *

Modified



Activity Priorities and Description

Program Key Priority Area *

Mental Health Priority Area 5: Community based suicide prevention activities

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

This activity aims to build the capacity of communities throughout the Western NSW PHN to respond safely to suicide. We will

- Provide tailored education and training to community to reduce stigma, increase awareness, and increase education on early warning signs of suicide distress.
- Deliver targeted education initiatives for priority populations across Western NSW PHN, focusing on reducing high suicide rates among our priority populations e.g. First Nations people, men, and youth.
- Facilitate and attend Suicide Prevention Forums which focus on increasing awareness of local services, educate attendees on best practice in suicide prevention, and strengthen collaboration between community members, service providers, and stakeholders to improve support systems and reduce suicide risk.

Description of Activity *

The main components of the activity include:

Education and Training/Capacity Building

- Education and Training Grants: We will be offering grants for local and national training providers to apply for, aimed at delivering programs that support skill development across our five community hubs.
- Train-the-Trainer Opportunities: Community members will have access to training in Aboriginal Mental Health First Aid and

Mental Health First Aid. This initiative is designed to build local capacity by equipping individuals with the skills and knowledge to run their own education on responding safely and effectively within their communities.

- Localised training opportunities: Have training and education made available that represents and supports our community e.g. training in First Nations Suicide Prevention, Trauma and Culturally Informed education, specific training for youth in schools, sporting clubs, workplaces etc., LGBTQIA+SB training, and lived experience upskilling and training.

Community Events and Awareness

We will attend and facilitate a range of events and forums across our region with the aim to:

- Increase community education and awareness around mental health, wellbeing, and available support services, empowering individuals with knowledge.
- Promote best practices by showcasing effective, culturally safe approaches to community support, service delivery, and healing.
- Build community capacity and skills through engagement, knowledge sharing, and hands-on activities that support local growth and resilience.
- Highlight and support emerging leaders and local services that are making a positive impact, helping to strengthen the network of support across the region.
- Encourage help-seeking behaviours by normalising conversations around mental health and making support more accessible and visible.
- Reduce stigma associated with mental health through open dialogue, lived experience storytelling, and inclusive community participation.

Placed Based Interventions

This activity aims to support the regional implementation of evidence-based suicide prevention strategies under the TRISP framework. We will:

- Provide dedicated support at a LGA and community level to support sustainability of suicide prevention efforts.
- Provide initiatives that are based on identified need and feedback to priority populations and regional communities.
- Work collaboratively across the region and in communities to bring key stakeholders, mental health organisations, groups and community members to address the suicide rate at a community and regional level.
- Employ Suicide Prevention Regional Response Coordinator positions to support identified communities with high rates of suicide respond safely to suicide events as well as establish and monitor local suicide prevention collaboratives.
- Support the coordination and implementation of systems-based suicide prevention initiatives in alignment with the Black Dog Institute’s LifeSpan model and National Suicide Prevention Strategy.
- Provide place-based, data-driven education and training across our region to build local capacity, reduce stigma, and promote early intervention for individuals experiencing suicidal distress.
- Strengthen cross-sector collaboration through active engagement with local working groups, service providers, and community stakeholders to ensure sustainable and integrated approaches to suicide prevention.
- Monitor and evaluate TRISP activities to inform continuous improvement, share learnings, and guide future planning across the Western NSW PHN region.

Needs Assessment Priorities *

Needs Assessment

WNSW PHN - Health Needs Assessment - 2024/25 to 2026/27

Priorities

Priority	Page reference
Services for First Nations people and communities need to be human-centred and trauma informed in order to deliver sustainable improvements for patients, families and communities	191
Strength based language needs to be used to discuss First Nations people and communities in the region to reduce barriers and improve	261

perception of Aboriginal people's ability to manage their health	
First Nation communities require greater support to improve mental health and wellbeing and reduce suicide rates, reduce alcohol use and reduce grief/loss cycles	191
A reduction in suicide rates is needed in WNSW PHN to reduce the disparity between WNSW PHN and other regions nationally	201



Activity Demographics

Target Population Cohort

WNSW PHN is implementing a systems-based, regional approach to suicide prevention, guided by the Lifespan model. This approach focuses on community-based initiatives and workforce development to build local capacity in suicide prevention across the region.

Our efforts will prioritise:

- Individuals at high risk of suicide, including those who have previously attempted suicide and those from priority populations e.g. First Nations, men, youth, older persons, LGBTQIA+SB community, etc.
- Local communities and primary care providers, who will receive targeted education and training to increase awareness, improve responses to suicide risk, reduce stigma related to mental illness and suicide, and lead from a strengths based approach to reduce rates of suicide in their communities.
- Identified high-risk groups, based on demographic data and regional needs assessments. These groups may include but are not limited to: First Nations people, particularly men, rural and remote populations, men in mid-life, young people, LGBTIQ+ individuals, and those experiencing socioeconomic disadvantage. These priorities will adapt over time in response to updated local needs and place-based planning.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

Consumers, local service providers, WNSW PHN Community, Clinical and Aboriginal Health Councils
All relevant stakeholders within WNSW district, including service providers and acute care services (Local Health District) have been consulted, with support through a lens of lived experience.

Collaboration

Collaboration with stakeholders will occur through:

- Clear communication, liaising with vulnerable populations and ensuring flexibility to meet the diverse needs of our communities
- The identification and development of the LGA based suicide prevention plans and placed based care
- The development and monitoring of clear referral pathways, with a health needs assessment completed in each of the defined areas within WNSW catchment.
- The establishment, training and support of networks of people with lived experience.
- The local suicide prevention response group, will maintain data and monitor needs of communities, providing insight and advice to service providers around the need of Gatekeeper training, and aftercare to high-risk communities and those who has suffered a loss.
- Psychological therapies providers – providing data of number of trained providers and those willing to train to receive referrals in this area.
- Local networks and community services – overview of effectiveness of existing serviced and identification of gaps.
- LHD and local mental health services – data provided and analysed re; local needs and issues presenting to emergency departments for self-harm and suicide attempts.



Activity Milestone Details/Duration

Activity Start Date

29/06/2024

Activity End Date

29/06/2027

Service Delivery Start Date

01/07/2024

Service Delivery End Date

30/06/2027

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: No

Open Tender: Yes

Expression Of Interest (EOI): Yes

Other Approach (please provide details): Yes

Is this activity being co-designed?

No

Is this activity the result of a previous co-design process?

No

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

No

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

Yes

Decommissioning

Yes

Decommissioning details?

na

Co-design or co-commissioning comments

N/A

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

No



MH - 5200 - MH5.2 First Nations Suicide Prevention



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

5200

Activity Title *

MH5.2 First Nations Suicide Prevention

Existing, Modified or New Activity *

Modified



Activity Priorities and Description

Program Key Priority Area *

Mental Health Priority Area 5: Community based suicide prevention activities

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

This activity will focus on building the capacity of Indigenous communities to lead suicide prevention efforts, ensuring all strategies are developed in partnership with Aboriginal organisations, Elders, and people with lived experience. The aim is to reduce suicide rates through culturally responsive, trauma-informed, and strengths-based approaches that reflect the unique needs, values, and priorities of each community.

Description of Activity *

This activity will have the following core components.

Suicide Prevention Collaborative/Response Group Lead

WNSWPHN will commission a local Aboriginal Community Controlled Organisations or other trusted First Nations-led services to employ a First Nations Suicide Prevention/Collaboration Lead. These positions will be responsible for leading the establishment, coordination, and ongoing development of local Indigenous Suicide Prevention Collaborative Groups within their respective communities.

First Nations Community Engagement and Awareness Activities

We will participate in and support a range of culturally appropriate community events, gatherings, and forums across the Western NSW region in collaboration with local Aboriginal organisations and leaders. These activities aim to:

- Strengthen community awareness and understanding of social and emotional wellbeing, suicide prevention, and available support services through culturally relevant education and dialogue.
- Promote culturally safe and community-led approaches to healing, resilience, and mental health support by sharing best practice models and local success stories.
- Support community capacity building through meaningful engagement, knowledge exchange, and skills development aligned with cultural strengths and local needs.
- Recognise and elevate emerging Aboriginal leaders and grassroots initiatives, helping to foster a stronger network of culturally connected supports.
- Encourage culturally safe help-seeking behaviours by creating trusted spaces where mental health and wellbeing can be discussed openly and without shame.
- Reduce stigma around mental health and suicide through storytelling, community-led conversations, and the inclusion of lived experience voices in a respectful and empowering way.

Needs Assessment Priorities *

Needs Assessment

WNSW PHN - Health Needs Assessment - 2024/25 to 2026/27

Priorities

Priority	Page reference
Services for First Nations people and communities need to be human-centred and trauma informed in order to deliver sustainable improvements for patients, families and communities	191
Strength based language needs to be used to discuss First Nations people and communities in the region to reduce barriers and improve perception of Aboriginal people's ability to manage their health	261
Positive experiences for First Nations people in the region including reduction in racism, having concerns taken seriously and not being dismissed, are critical to improve trust in health services	196
First Nation communities require greater support to improve mental health and wellbeing and reduce suicide rates, reduce alcohol use and reduce grief/loss cycles	191
A reduction in suicide rates is needed in WNSW PHN to reduce the disparity between WNSW PHN and other regions nationally	201
A reduction in mortality rates and increase in the median age of death, particularly for males and LGAs with smaller, rural and remote communities is needed to increase life span and reduce grief/loss	66
Care coordination, shared care, information sharing and integration of services needs to occur to allow patients to move between services, particularly to meet the needs of First Nations People	265



Activity Demographics

Target Population Cohort

Aboriginal and Torres Strait Islander community members throughout our region with a focus on youth and men

In Scope AOD Treatment Type *

Indigenous Specific *

Yes

Indigenous Specific Comments

WNSW PHN is committed to working in genuine partnership with Aboriginal and Torres Strait Islander peoples to design and deliver culturally safe, community-led suicide prevention initiatives. Our approach is grounded in respectful collaboration with local Aboriginal governance structures and leaders to ensure that all activities reflect the priorities, strengths, and cultural values of First Nations communities across the region.

We will work closely with the Murdi Paaki Regional Assembly, Three Rivers Regional Assembly, the WNSW PHN Aboriginal Advisory Council, Aboriginal Community Controlled Health Organisations (ACCHOs), and local Elders and community leaders to guide the planning, implementation, and evaluation of suicide prevention efforts.

These partnerships will:

- Ensure Aboriginal voices and cultural perspectives are central to all aspects of our work.
- Promote self-determination by supporting community-led responses to social and emotional wellbeing.
- Strengthen culturally responsive service design and delivery.
- Foster trust, accountability, and long-term relationships that contribute to sustainable change.

Coverage

Whole Region

No

SA3 Name	SA3 Code
Lower Murray	10902
Lachlan Valley	10302
Broken Hill and Far West	10502
Bourke - Cobar - Coonamble	10501



Activity Consultation and Collaboration

Consultation

Consultation will continue to occur with Aboriginal Local Community Working Parties in each area; Consumers; Community; Aboriginal Regional Assemblies; service providers working in the sector

Collaboration

Our approach will involve working closely with a broad range of partners to create integrated, place-based solutions that are responsive to the unique needs of each community.

We will collaborate with:

- Aboriginal Community Controlled Health Organisations (ACCHOs) and Aboriginal governance bodies such as the Murdi Paaki

Regional Assembly and Three Rivers Regional Assembly, ensuring that First Nations perspectives are embedded in all suicide prevention activities.

- Local service providers, including mental health services, GPs, and hospitals, to ensure a seamless continuum of care and support for individuals at risk of suicide or following a suicide attempt.
- Community leaders and Elders across regional, rural, and remote communities to provide guidance, ensure cultural appropriateness, and promote community-driven solutions to mental health and suicide prevention.
- Local government bodies and regional councils to strengthen support networks, raise awareness, and advocate for sustainable mental health initiatives within communities.
- Non-government organisations (NGOs) that specialise in mental health, youth services, crisis support, and family services, ensuring services are accessible, culturally appropriate, and inclusive.
- Educational institutions such as schools, TAFEs, and universities to deliver early intervention programs, build resilience in young people, and increase mental health literacy.



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2027

Service Delivery Start Date

01/07/2019

Service Delivery End Date

01/07/2027

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: No

Direct Engagement: No

Open Tender: No

Expression Of Interest (EOI): No

Other Approach (please provide details): Yes

Is this activity being co-designed?

No

Is this activity the result of a previous co-design process?

No

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

No

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

Yes

Decommissioning

No

Decommissioning details?

na

Co-design or co-commissioning comments

na

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

No



MH - 5300 - MH5.3 Post suicide attempt follow-up and support (Wayback Support Service)



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

5300

Activity Title *

MH5.3 Post suicide attempt follow-up and support (Wayback Support Service)

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Mental Health Priority Area 5: Community based suicide prevention activities

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

To establish and implement a Wayback Support Service across the Far West Local Health District in WNSW PHN region.

Description of Activity *

The Way Back Support Service Far West NSW, a trauma-informed, non-clinical, psychosocial service response to support people following a suicide attempt or experiencing suicidal crisis. The program aims to reduce the risk of further suicidal behaviour for individuals who have experienced a suicidal crisis or who have attempted suicide.

The objectives of the Way Back Support Service are to:

- Improve access to high-quality aftercare to support at risk individuals to stay safe;
- Build capacity of individuals to self-manage distress and improve mental wellbeing;
- Improve links with clinical and community-based services to meet individual needs;
- Increase social connectedness and links to supportive networks (carers and peers); and
- Improve the capacity and capability of the Way Back workforce to support at risk individuals.

Needs Assessment Priorities *

Needs Assessment

WNSW PHN - Health Needs Assessment - 2024/25 to 2026/27

Priorities

Priority	Page reference
First Nation communities require greater support to improve mental health and wellbeing and reduce suicide rates, reduce alcohol use and reduce grief/loss cycles	191



Activity Demographics

Target Population Cohort

People who have experienced a suicidal crisis and/or attempted suicide and their immediate friends and family

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

No

SA3 Name	SA3 Code
Broken Hill and Far West	10502



Activity Consultation and Collaboration

Consultation

Consultations with community sector stakeholders will occur in partnership with the commissioned service provider.

Collaboration

We will collaborate with Beyond Blue, the Far West Local Health District, the contracted provider and other stakeholders as necessary to ensure the best levels of service delivery and engagement throughout the life of the initiative.



Activity Milestone Details/Duration

Activity Start Date

30/04/2020

Activity End Date

29/06/2025

Service Delivery Start Date

01/07/2021

Service Delivery End Date

30/06/2025

Other Relevant Milestones**Activity Commissioning**

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

Not Yet Known: No

Continuing Service Provider / Contract Extension: Yes

Direct Engagement: No

Open Tender: No

Expression Of Interest (EOI): No

Other Approach (please provide details): No

Is this activity being co-designed?

Yes

Is this activity the result of a previous co-design process?

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?

Given the activity funding is due to cease on 30 June 2025, and unless future funding is confirmed in The Wayback Support Stream WNSW PHN will commence the decommissioning process. This will be informed by advice from the DHDA with planning for decommissioning to be undertaken in partnership with the relevant commissioned service providers in order to facilitate minimal impact to community. Noting that there may be another similar Activity arriving in due course this is considered the best course of action at this point. A new schedule will mean a new procurement process will need to be undertaken.

Co-design or co-commissioning comments

Co-design within the context of negotiable aspects of beyond blue's licence agreement/service model.

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

Yes



MH - 6100 - MH6.1 Implement Social Emotional Wellbeing (SEWB) services to support Aboriginal communities



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

6100

Activity Title *

MH6.1 Implement Social Emotional Wellbeing (SEWB) services to support Aboriginal communities

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

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

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

This program aims to provide access to Social and Emotional Wellbeing (SEWB) services for Aboriginal people living in the WNSW PHN region, this includes the development and support of the local SEWB workforce.

Description of Activity *

This activity funds ACCHOs across the WNSW PHN region to provide comprehensive, evidence-based Social and Emotional Wellbeing (SEWB) services. The SEWB workforce will engage in a variety of activities as nominated by each contracted ACCHO. Access to SEWB services will be available to all Aboriginal people across the region.

This activity includes the following elements:

- The ongoing development and implementation of this initiative will be facilitated through an Aboriginal identified internal PHN SEWB Enhancement Program Officer position.
- Social and Emotional Wellbeing Workers (or other suitably qualified positions as nominated by individual ACCHOs).
- A review of all SEWB services across the WNSW PHN footprint, to inform future planning and development priorities.
- Implementation of workforce development activities in response to findings from the regional review, this may include but is not limited to:
 - SEWB Worker training (minimum Certificate IV training)

- Workforce support – Supervision, mentoring and participation in relevant communities of practice.
- Establishment of Western NSW SEWB Network and annual forum
- Undertake and Aboriginal led evaluation of the SEWB activities.

Needs Assessment Priorities *

Needs Assessment

WNSW PHN - Health Needs Assessment - 2024/25 to 2026/27

Priorities

Priority	Page reference
Services for First Nations people and communities need to be human-centred and trauma informed in order to deliver sustainable improvements for patients, families and communities	191
Positive experiences for First Nations people in the region including reduction in racism, having concerns taken seriously and not being dismissed, are critical to improve trust in health services	196
First Nation communities require greater support to improve mental health and wellbeing and reduce suicide rates, reduce alcohol use and reduce grief/loss cycles	191
Targeted programs in schools are required to support children and young people who are exposed to suicide to reduce trauma and grief from the high rates of suicide in small communities	232
Older people in rural regions require greater access to social and healthcare interventions to reduce chronic isolation and loneliness and slow the decline in their mental and physical health	252
People who experience mild to moderate mental health conditions require greater support to manage their health in the community to reduce their reliance on ED for care	193
A reduction in suicide rates is needed in WNSW PHN to reduce the disparity between WNSW PHN and other regions nationally	201
Services for First Nations people and communities require codesign with land councils, AMS's and other local entities for place-based models which results in services to meet the unique needs	272
Care coordination, shared care, information sharing and integration of services needs to occur to allow patients to move between services, particularly to meet the needs of First Nations People	265



Activity Demographics

Target Population Cohort

Aboriginal people across the WNSW PHN region

In Scope AOD Treatment Type *

Indigenous Specific *

Yes

Indigenous Specific Comments

These services are provided by the ACCHO sector with appropriate Aboriginal input in design and delivery.

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

WNSW PHN Aboriginal Health Council, ACCHOs, Regional Assemblies, commissioned service providers.

Collaboration

The initial design and implementation was informed by a collaborative approach between the following stakeholders;

- ACCHOs
- WNSW PHN Aboriginal Health Council
- Department of Prime Minister and Cabinet (now known as NIAA)
- Local Health Districts

Future collaborations will include the above mentioned stakeholders, Aboriginal Regional Assemblies, and community.



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

29/06/2026

Service Delivery Start Date

01/07/2019

Service Delivery End Date

30/06/2026

Other Relevant Milestones



Activity Commissioning

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

Not Yet Known: No

Continuing Service Provider / Contract Extension: Yes

Direct Engagement: No

Open Tender: No

Expression Of Interest (EOI): No

Other Approach (please provide details): No

Is this activity being co-designed?

No

Is this activity the result of a previous co-design process?

Yes

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

No

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

Yes

Decommissioning

Yes

Decommissioning details?

Given the activity funding is due to cease on 30 June 2026, and unless future funding is confirmed, WNSW PHN will commence the decommissioning process in January 2026. This will be informed by advice from the DHDA with planning for decommissioning to be undertaken in partnership with the relevant commissioned service providers in order to facilitate minimal impact to service provision.

Co-design or co-commissioning comments

na

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

No



MH - 8100 - MH8.1 Regional Mental Health and Suicide Prevention Planning



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

8100

Activity Title *

MH8.1 Regional Mental Health and Suicide Prevention Planning

Existing, Modified or New Activity *

Existing



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 ***

Joint planning and delivery of a Regional Mental Health and Suicide Prevention plan.

Description of Activity *

WNSW PHN has led the development of a Foundational Regional Mental Health and Suicide Prevention Plan in partnership with Western NSW and Far West Local Health Districts. The plan:

- Has been developed in partnership with consumers and key stakeholders;
- Is centred around a Stepped Care Framework;
- Is aligned to the 5th National Mental Health and Suicide Prevention Plan; and bi-lateral agreement and the National Suicide prevention framework.

Research to inform planning

- Is underpinned by evidence-based planning tools.

In collaboration with key stakeholder, WNSW PHN is currently implementing the foundational plan.

Regional Mental Health and Suicide Prevention Planning is happening in two key stages:

Stage 1: Foundational Plan

The Foundational Plan defines role and responsibilities across the PHN and LHDs, identify key priorities and commit resources to the development of a comprehensive plan. It will provide directions to ensure that all relevant stakeholders are involved in the process. This element has been completed

Stage 2: Comprehensive Plan

The comprehensive plan is the service delivery plan. The plan will build upon and be informed by some of the work undertaken in Activities MH5 (5.1) and MH5 (5.2). It will outline the delivery of integrated, evidence based mental health and suicide prevention activities for the region and commits both the PHN and LHDs to delivering those services. It is based on a shared understanding of the sector, consumer and carer needs, workforce dynamics and the region itself as laid out in the new Bi-lateral agreement and will be completed by March, 2024.

The main aims of WNSW Suicide Prevention planning are:

- Reduce stigma and beliefs within the community around suicide and the prevention of people seeking help for suicidal ideation
- Focusing on place-based suicide prevention approaches in priority communities of need in the Far West (particularly younger adult men aged 25-44)
- Review and implement innovative ways to Increase primary care and community workforce knowledge and skills in recognising and supporting suicidal individuals in rural and remote communities.
- Conduct and implement capacity building exercises, using innovative place based models in rural and remote areas for community-based suicide prevention services.
- Reduce the number of suicides within the district through implementation of the recommendations outlined in the National Mental Health and Suicide Prevention Agreement, and the Bi-lateral agreement
- Host a Suicide Prevention Forum for Key stakeholders and the Community members of WNSW, which will act as a co-design workshop around what WNSW priorities should be over the next few years in relation to suicide prevention

Needs Assessment Priorities *

Needs Assessment

WNSW PHN - Health Needs Assessment - 2024/25 to 2026/27

Priorities

Priority	Page reference
Smaller towns require greater support for stability of the GP workforce given that GPs often provide multidisciplinary care, including chronic disease management and mental health support	260
First Nations people require greater support to access appropriate psychiatric services in the community to meet the needs of complex mental health and wellbeing	191
First Nation communities require greater support to improve mental health and wellbeing and reduce suicide rates, reduce alcohol use and reduce grief/loss cycles	191
A reduction in suicide rates is needed in WNSW PHN to reduce the disparity between WNSW PHN and other regions nationally	201



Activity Demographics

Target Population Cohort

The development of the plan will ensure the delivery of appropriate evidence-based services to all consumers of mental health services across the PHN region.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

Consultations will continue to occur with Western NSW and Far West Local Health District, consumers, local service providers and Government agencies that provide related services across the PHN region.

Extensive consultation will be undertaken with the Suicide Prevention networks that have been established as part of Activity MH5 (5.2).

Collaboration

Western NSW and Far West NSW LHDs



Activity Milestone Details/Duration

Activity Start Date

30/06/2018

Activity End Date

29/06/2027

Service Delivery Start Date

01/07/2019

Service Delivery End Date

30/06/2027

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: No

Direct Engagement: Yes

Open Tender: No

Expression Of Interest (EOI): No

Other Approach (please provide details): Yes

Is this activity being co-designed?

Yes

Is this activity the result of a previous co-design process?

Yes

Do you plan to implement this Activity using co-commissioning or joint-commissioning arrangements?

Yes

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

No

Decommissioning

No

Decommissioning details?

na

Co-design or co-commissioning comments

na

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

No

