

Western Sydney - Primary Mental Health Care 2024/25 - 2027/28 Activity Summary View



MH-H2H - 2 – Medicare Mental Health Assessment and Referral Phone Service



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH-H2H

Activity Number *

2

Activity Title *

Head to Health Intake and 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 *

The Head to Health IAR Phone Service operates a central point of contact (the IAR line – 1800 595 212) to assist with mental health service navigation and direction of clients to their local Medicare Mental Health Centre (MMHC) or other relevant community mental health service

Description of Activity *

WSPHN, aligned with the other NSW PHN's operating Head to Health/MMHC sites, are contributing to the ongoing development and operation of the Medicare Mental Health Phone Service – operated through Neami National (commissioned by Healthy North Coast PHN)

Needs Assessment Priorities *

Needs Assessment

Western Sydney Primary Health Network (WSPHN) 2025-2028

Priorities

Priority	Page reference
Identified Priorities	Pages 105 -109



Activity Demographics

Target Population Cohort

Whole Western Sydney Population or Individuals residing in WSPHN region

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

WSPHN consulted within the region to determine the most practical, cost effective, and consistent approach to managing the IAR Phone Service. With extensive consultation with other NSW PHN's and Victoria (the inaugural 'Head to Help' state), a mutual agreement on one PHN managing the IAR for NSW was the decision.

Collaboration

To ensure consistency and maintenance of a sustainable system (given the expansion of the phone service to a national level), WSPHN collaborated with all other NSW PHN's and continue to be part of the 8 PHN shared phone service.



Activity Milestone Details/Duration

Activity Start Date

01/07/2022

Activity End Date

30/06/2026

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones



Activity Commissioning

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

Not Yet Known: No

Continuing Service Provider / Contract Extension: No

Direct Engagement: No

Open Tender: No

Expression Of Interest (EOI): No

Other Approach (please provide details): Yes

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?

Co-design or co-commissioning comments

WSPHN engaged in a co-design of the centralised Head to Health Phone System alongside Victoria (as the Head to Help leads) and other NSW PHN's. WSPHN supported and assisted with the collation of the service directory to ensure there was ample information on Western Sydney health services and PHN commissioned services, and maintains the directory with updated information every quarter. Co-design continues to ensure the phonenumber and other aligned services evolve to meet the needs of the population.



MH - 1 - Low intensity mental health services



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

1

Activity Title *

Low intensity mental health services

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Mental Health Priority Area 1: Low intensity mental health services

Other Program Key Priority Area Description

Aim of Activity *

Increase access of low-intensity mental health services for individuals dealing with mild mental health conditions.

Description of Activity *

Continue to commission low intensity services in WSPHN region for individuals dealing with mild mental health conditions.

1. Commission services which broadly address the link between mental health and a range of other societal factors, including early childhood development, impact of trauma and disadvantage, support for children and their families, and physical health and negative behaviors with food and lifestyle which impact mental health
2. Offers support services that address a range of needs, including emotional distress, mental health concerns, and social isolation. By focusing on areas of disadvantage, these services aim to achieve positive outcomes and enhance social and emotional well-being.
3. Offers support services to First Nations people with mental health concerns, chronic health navigation, and challenges such substance abuse, financial hardship, family violence, sexual abuse, crises, and self-harm.
4. Support the delivery of counselling and case management across youth, child, and adult cohorts with targeted community engagement in Hills LGA through informed strategic research.

The expected outcomes from this activity are:

Improved mental health outcomes for people with or at risk of developing mild mental illness

Improved early development, reduced trauma impact, better family support, and enhanced physical health, leading to better mental well-being.

Engage teams in developing policy that will support the delivery of better mental health services outcomes.

Needs Assessment Priorities *

Needs Assessment

Western Sydney Primary Health Network (WSPHN) 2025-2028

Priorities

Priority	Page reference
Identified Priorities	Pages 105 -109



Activity Demographics

Target Population Cohort

All activities listed above will be publicly available to residents of Western Sydney and aim to increase early access to support and low intensity mental health intervention. Additionally, any clients experiencing low levels of mental health distress and who present to GP practices, mental health services providers, community groups or organisations, and schools will also be directed to these services.

All low intensity commissioned activities are designed to be accessible remotely via a phone or device, or in person.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Auburn	12501
Dural - Wisemans Ferry	11502
Merrylands - Guildford	12503
Baulkham Hills	11501
Rouse Hill - McGraths Hill	11504
Ryde - Hunters Hill	12602
Carlingford	12502
Pennant Hills - Epping	12601
Mount Druitt	11603
Blacktown	11601
Blacktown - North	11602
Parramatta	12504



Activity Consultation and Collaboration

Consultation

WSPHN is working with key representatives including, GPs, LHD, non-government organisations (NGO), community managed organisations (CMO) and mental health professionals who are consulted in developing strategic directions on commissioning and delivery of services across the priority areas in Western Sydney.

In developing the low-intensity mental health services, consultation occurred with a number of GPs and GP associations and mental health providers who indicated that low-intensity services should support people at either pre-treatment or post-treatment phase and be accessible remotely and after-hours.

Additionally, the recommendation was the low-intensity services should be able to support the client to seamlessly engage with higher intensity services.

As a result, each of the services has a common referral pathway and network that allows WSPHN to align services should the consumer, referring GP and mental health service provider require ongoing, additional or complementary services with various levels of intervention and access.

Collaboration

Commissioned services are empowered to work with one another to better coordinate service integration, which enables patients to transition seamlessly between stages of care as required.

Several workshops and consultation were conducted to bring together providers and facilitate the operational alignment of care, as the consumer navigates the various services.



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

30/06/2027

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones



Activity Commissioning

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

Not Yet Known: No

Continuing Service Provider / Contract Extension: 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

No

Decommissioning details?

Not applicable

Co-design or co-commissioning comments

The Education and Training programs have previously been co-designed, and continues to be adapted to meet the changing needs of the Western Sydney community. Consumers with lived experience have input to the design and content of courses and other training opportunities.

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

Yes



MH - 3 - Primary Mental Health Care (PMHC)



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

3

Activity Title *

Primary Mental Health Care (PMHC)

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 ***

The PMHC program aims to provide psychological and psychiatric services for the most vulnerable and financially disadvantaged members of the area covered by WSPHN, delivered by appropriately trained and qualified mental health professionals

Services include psychological therapy sessions for people who are unable to otherwise afford to pay for therapy, and a separate suicide prevention stream is designated to help people who have been identified as experiencing moderate to severe suicidal thoughts, self-harm or ideation regardless of their financial status.

Western Sydney Primary Health Network (WSPHN) aims to sustain and ensure the mental health services delivered in Western Sydney are addressing community need by improving referral pathways, care coordination, workforce capacity and robustly reviewing consumer outcomes. WSPHN will collaborate with Western Sydney service providers who specialise in supporting the mental health needs of vulnerable community groups such as people who identify as LGBTIQ+, CALD communities, displaced families, clozapine management and people experiencing mental health concerns who are ineligible for mainstream services.

Primary mental health care services should be well-integrated into the service landscape to ensure people accessing psychological or psychiatric interventions are receiving holistic, person-centred solutions, with the ultimate goal of stepping down care so that the individual can stay well in community.

This service will continue to review consumer outcomes through working collaboratively with health professionals and services to improve the visibility, accessibility and value of the program for the communities it serves.

Description of Activity *

This activity will provide psychological and psychiatric support, and reduce barriers to service access by engaging local mental health professionals to provide services to vulnerable people within western Sydney. The regional needs assessment identifies groups experiencing vulnerability in western Sydney including perinatal women, children, young people with moderate to severe levels of psychological distress, people who identify as LGBTIQ, older people and diverse cultural and language groups. Specialised skills to work with these priority groups forms the basis of the recruitment and selection of mental health professionals in western Sydney with current providers offering psychological supports across these groups including services in 27 different languages.

1. Primary Mental Health Care Services (PMHC) delivered by accredited and qualified primary mental health professionals – to provide (activity-based) psychological and psychiatric services to vulnerable people. Ensure activity is linked in with planning phases of joint regional plan, undertaken within a stepped care model and considers the capacity and development of the workforce. WSPHN will continue to work with the community and practices to promote the program.
 2. Improve internal processes, reporting and data mechanisms to ensure that the program is meeting the needs of community and we are able to improve on our mental health indicators.
 3. WSPHN will continue its collaboration with the WSLHD, primary care and local partners to implement local strategies, and the Mental Health and Suicide Prevention Regional Plan, to engage and address the needs of priority populations and health professionals who support them.
 - 4 Continue to support the transition to secure messaging and a national e-referral to improve consumer confidentiality, support integration with other services and achieve a more balanced distribution of resources. A project team will lead the project to ensure the integrated system is implemented.
 5. Commission services to ensure access to innovative service delivery, considering opportunities for providing integrated services in a way that complements the MBS
 6. Further integration and development for GPs to manage the care of mental health consumers - to support capacity building among GPs in the region on managing clients with complex mental health concerns and assisting with navigation to other support services (step up, or step down) as required.
 7. Implementation of new processes to improve reporting performance and to raise confidence levels of reporting accuracy on MDS reporting providers. The Health Intelligence Unit and Quality team will support the data cleansing and ensuring quality data is captured to inform future commissioning.
 8. Ensure quality and fair value by ensuring that the service is making efficient use of resources to support equitable access, by working with local services, including the Medicare Mental Health centres and the Referral Spoke via In-Service presentations and consultation.
 9. This approach will support people to access services based on their needs, at the right time. This activity will:
 - Provide clear and accessible pathways to care for people with mental health concerns at all levels of intensity/acuity.
 - Incorporate strategic and operational design of Stepped Care service delivery.
 - Incorporate and monitor a stepped care approach as part of commissioning mental health models of service.
 - Provide referrers and service providers understanding on how to navigate, refer to and provide services using a stepped care approach.
- Obtain accurate data for reporting and inform future commissioning
- Identify current and future workforce and service gaps/deficits, oversupply, and/or distribution.
 - Implement a range of strategies to support local GPs and our referral partners to identify target groups and specific vulnerable groups experiencing mental health conditions that would benefit from our program to:-
 - a) Improve referral processes
 - b) Increase workforce capacity and capability
 - c) Improve access to services.

Needs Assessment Priorities *

Needs Assessment

Western Sydney Primary Health Network (WSPHN) 2025-2028

Priorities

Priority	Page reference
Identified Priorities	Pages 105 -109



Activity Demographics

Target Population Cohort

This activity is for western Sydney residents experiencing mental health distress or moderate suicidality where barriers exist to accessing psychological support through Better Access. This includes people who experience financial hardship or are part of a priority group identified through our Regional Needs Assessment.

In Scope AOD Treatment Type *

Indigenous Specific *

Yes

Indigenous Specific Comments

Facilitates culturally appropriate Mental Health supports for Aboriginal and Torres Strait Islander people experiencing a mental health issue

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Auburn	12501
Dural - Wisemans Ferry	11502
Merrylands - Guildford	12503
Baulkham Hills	11501
Rouse Hill - McGraths Hill	11504
Ryde - Hunters Hill	12602
Carlingford	12502
Pennant Hills - Epping	12601
Mount Druitt	11603
Blacktown	11601
Blacktown - North	11602
Parramatta	12504



Activity Consultation and Collaboration

Consultation

WSPHN works with key representatives from the LHD, GPs, mental health service providers, and consumer and carer representatives.

WSPHN consults with internal strategy and impact team to review the program quality, effectiveness and efficiency.

Additionally, WSPHN conducts quarterly Professional Development events and reviews CPD processes to improve provider knowledge, capacity and to ensure we maintain high levels of best practice.

Collaboration

All referring agents, including GPs, schools, allied health providers, specialists and mental health providers currently engaged with WSPHN. This includes the Local Health District and a number of key non-government organisations.



Activity Milestone Details/Duration

Activity Start Date

30/06/2019

Activity End Date

30/06/2028

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones



Activity Commissioning

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

Not Yet Known: No

Continuing Service Provider / Contract Extension: Yes

Direct Engagement: No

Open Tender: No

Expression Of Interest (EOI): Yes

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?

Not applicable

Co-design or co-commissioning comments

Not Applicable

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

Yes



MH - 4 - Initial intake & Assessment



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

4

Activity Title *

Initial intake & Assessment

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Other Program Key Priority Area Description

Mental Health

Aim of Activity *

Within a stepped care approach (a key indicator for PHNs), a person presenting with the local health system should be matched to the most appropriate intensity level for their care needs. A subsequent indicator is the ongoing measurement of outcome and experience, to allow real-time adjustment of their treatment intensity – stepping up or stepping down, as required.

To achieve consistency within this, and enable seamless entry into different commissioned services based on need, a consistent approach to the intake and assessment process is required – such as the Initial Assessment and Referral Diagnostic Support Tool (IAR-DST). The implementation of this tool across mental health programs has been designed to determine the most suitable and appropriate treatment options consistently across a range of programs.

Description of Activity *

The GP Training schedule for Western Sydney PHN will be utilised to train and support GPs in the use of the IAR, through recruitment of 2 x part time Training and Support Officers (TSO). The funding will enable the TSOs to receive training to thoroughly understand the IAR and train the target of 680 GPs plus other commissioned service providers (particularly support staff within Head to Health centres and Aboriginal Medical services) to utilise the IAR-DST in diagnosing the appropriate level of care required to address the identified needs. There's a need to continue training GPs for the new rebranded Head to Health to Medicare Mental Health Centres.

The TSOs will provide training on the IAR-DST throughout the health sector in Western Sydney, so that GP's and other allied health

professionals are able to better identify mental health concerns within their clients, use the IAR-DST to navigate the best level of care for a client, and support their referral into appropriate services. Through the national CoP and other local collaborations, the learnings from Western Sydney will be shared and good practices from elsewhere will be implemented.

Needs Assessment Priorities *

Needs Assessment

Needs Assessment Western Sydney PHN 2022/23 - 2024/25

Priorities

Priority	Page reference
Mental health	72



Activity Demographics

Target Population Cohort

GP's and allied health professionals will be the key cohort who will be trained on utilising the IAR-DST

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

General Practice, Medicare Mental Health Service, Headspace

Collaboration

General Practice, Medicare Mental Health Service, Headspace, National PHN CoP



Activity Milestone Details/Duration

Activity Start Date

09/12/2021

Activity End Date

30/06/2025

Service Delivery Start Date

01/02/2022

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: Yes

Direct Engagement: Yes

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?

Yes

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

Yes

Decommissioning

No

Decommissioning details?

Co-design or co-commissioning comments

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

No

Funding From Other Sources - Financial Details

Funding From Other Sources - Organisational Details



MH - 4 - Severe and Complex Mental Illness



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

4

Activity Title *

Severe and Complex Mental Illness

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 ***

To improve clinical outcomes for individuals with severe mental illness and complex needs.

1. Provide specialist mental health care to families in the perinatal and infancy stages dealing with a significant mental health disorder.
2. Provide services to people discharged from hospital following a mental health admission who require ongoing primary care support in the community.
3. Enhance the mental health knowledge, skills and capacity of GPs, including through the integration of psychiatric services into the primary care model to support general practice in their provision of more complex mental health care.
4. Deliver psychoeducation, counselling, navigation support and lifestyle/wellbeing group interventions for cultural groups in the Western Sydney region identified as requiring targeted support.
5. Focus on strengthening and coordinating referral pathways and connections between culturally and linguistically diverse community groups, general practitioners, allied health providers, government agencies, health services and other community services.

6. Provide a physical safe space for people in distress to go and receive support to manage their mental health crisis, through promotion of their wellbeing, the provision of clinical and non-clinical support to manage their distress, both current and in the future, and through offering an alternative to emergency department presentations. The service will also provide support navigation, assist with referral pathways, and offer multi-modal and multidisciplinary mental health support.
7. Provide a wraparound treatment and case coordination service for individuals facing severe mental illness and co-occurring conditions, including substance abuse, intellectual disabilities, and physical health challenges in a residential and therapeutic setting for patients.
8. Address the specific needs of LGBTIQ+ clients with refugee, migrant and asylum seeker backgrounds through building strengths and resilience, and promoting self-help and support.
9. To increase the availability of drug and alcohol treatment services for individuals with co-occurring severe and complex mental illness in the community. This activity will incorporate priority group funding for access for families, people in transition from prison and also other priority population areas such as those from CALD background, LGBTIQ communities, homeless people, young people and/or Aboriginal and Torres Strait Islander people.
10. To support the delivery of culturally appropriate primary health care to ensure the mental health needs of CALD communities are met.
11. In collaboration with WSLHD, the WSPHN developed a regional plan in line with the Fifth National Mental Health Plan. The plan is guided by the stepped care model and the ecological framework which will be supported by a robust and consistent data collection process. WSPHN project team will lead the implementation of the regional plan. WSPHN has engaged a Project Manager to drive the Mental Health Regional Plan. WSPHN has engaged a Project Team to drive the Mental Health Regional Plan and identify mental health programs that tackles some of the gaps in Western Sydney.
12. To enable access to hard-to-reach services for vulnerable population groups with persistent mental health conditions WSPHN will engage a team to support the delivery of the program. The aim is to not only support the community to access these programs, but also to capacity build the sector through access to psychiatry advice, education sessions, etc.

Description of Activity *

1. Comprehensive specialist mental health care for families with a significant mental health disorder occurring in the perinatal and infancy stages, through the provision of psychiatric assessment, individual, couple and parent-infant psychotherapy, group work, linkages to home supports, pharmacotherapy management, onward referrals to relevant programs, DBT, counselling, and consultation and liaison with midwifery, obstetrics, paediatric and GP professionals.
2. Supports people leaving hospital who require assistance to transition to ongoing primary mental health care support in the community. Peer workers regularly meet with consumers and their carers and family members (with agreement) during discharge planning to identify and support the consumer to access community and outreach services. This is currently occurring in partnership with Cumberland and Blacktown hospitals, but will expand to include hospitals across the Western Sydney region. The service also facilitates social activities and workshops at hospitals to increase consumer engagement.
3. An integrated care model whereby a Psychiatrist is employed to deliver services to patients experiencing severe and complex mental health conditions in a primary care setting. The Psychiatrist is appointed to participating General Practices and/or Patient-Centred Medical Homes to deliver and provide capacity building services and network by case consultation with the General Practitioners as well as practice nurses and practice staff.
4. Psycho-education and lifestyle/wellbeing group interventions for prominent cultural groups in the Western Sydney region and its community members. Examples of activities to be provided include:
 - Peer Leader Training and Support
 - Culturally-adapted Accidental Counsellor training
 - Residential program/camp with particular focus on intensive training for peer leaders

- Delivery of psycho-education and lifestyle/wellbeing group interventions for each cultural group and its community members
- Group interventions

5. Engaging with hospitals and community mental health teams in the Western Sydney region -the project will focus on strengthening coordination and referral pathways for people from culturally and linguistically diverse backgrounds with general practitioners, allied health providers, government agencies, health and welfare services.

6. A physical and sensory, supportive safe space which allows people experiencing psychological distress to access timely and responsive support from trained non-clinical mental health professionals within their community, outside a clinical setting. The program promotes the wellbeing of people through assistance and support with managing their distress, both current and in the future, and fosters identification of alternatives to emergency department presentations. It will build an understanding of the Safe Space/Haven/Alternative to ED model and develop a new way of approaching the issue of crisis response options for people experiencing psychological distress and suicidality, catering to the special needs of the Western Sydney region. It will encourage focus on improved follow-up for people who have attempted suicide or are at high risk of suicide. It will avoid the significantly elevated costs associated with emergency department presentation for some people experiencing psychological distress and suicidality.

7. Provide a wraparound treatment and case coordination service in a residential and therapeutic setting for patients with drug and alcohol dependence and co-occurring severe and complex mental illness.

8. Deliver psychoeducation and lifestyle/wellbeing group interventions for vulnerable community members, or those requiring high intensity mental health support. The groups will enable participants to better identify signs of distress in themselves and develop appropriate coping strategies; develop mutually supportive relationships amongst the group members thus breaking social isolation and ensuring sustainable social support; reduce stigma associated with seeking mental health assistance; and increase knowledge and access to a variety of mental health services.

9. Services will provide functional recovery capacity, attitude and behavior change skills for participants to achieve long term behavior change with regard to drug or alcohol dependence and mental health rehabilitation. Services can be residential, day programs, or community outreach and are provided by a mixture of professional and peer workers. These projects will combine mental health and AOD treatment and rehabilitation elements and short-term capacity building.

10. Opportunity for an integrated mental health model of care within a neighbourhood health setting.

11. WSPHN will continue to expand its Refugee health focus whilst ensuring culturally appropriate and safe environments within western Sydney. Due to the complex nature of this activity, WSPHN will work to improve access to culturally appropriate, integrated primary care services for refugees by:

1. Working collaboratively with local migrant and settlement support services
2. Provide cultural input into the work of primary health providers including strengthening links with CALD communities
3. Increase the capacity of refugee-friendly primary care providers to work together to provide integrated care
4. Engage teams in assist in the delivery of education activities for primary care providers which includes psychologist and general practice
5. Provide cultural and linguistic input into health promotional initiatives
6. Improve equity of access and health literacy to meet the needs of the culturally diverse population.
7. Participate in the western Sydney Refugee Health Coalition to identify emerging issues and co-design possible solutions
8. This service will continue to improve patient outcomes through working collaboratively with WSLHD and health professionals and services to integrate and facilitate a seamless patient experience.
9. Operate a mental health and psychiatry advice and support line for General Practitioners to guide their practice in managing patients with severe, complex and persistent mental health concerns.

Needs Assessment Priorities *

Needs Assessment

Western Sydney Primary Health Network (WSPHN) 2025-2028

Priorities

Priority	Page reference
Identified Priorities	Pages 105 -109



Activity Demographics

Target Population Cohort

People in the Western Sydney PHN region who are experiencing severe and complex mental health conditions who can be supported at a primary care level, or who are transitioning from hospital-based intervention to a community provider.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Auburn	12501
Dural - Wisemans Ferry	11502
Merrylands - Guildford	12503
Baulkham Hills	11501
Rouse Hill - McGraths Hill	11504
Ryde - Hunters Hill	12602
Carlingford	12502
Pennant Hills - Epping	12601
Mount Druitt	11603
Blacktown	11601
Blacktown - North	11602
Parramatta	12504



Activity Consultation and Collaboration

Consultation

Consultation was made with several GPs, GP associations, community service providers, mental health providers, current clients, people with lived experience, and a range of clinicians who indicated:

- What gaps there currently are for clients within the mental health and psychosocial support systems
- What supports are currently available – successful programs, wait lists, concerns, etc.
- When supports should be available – weekends, after hours, etc.
- Services which would benefit from expansion or greater client capacity

Collaboration

Extensive collaboration has occurred to ensure integrated service provision for people experiencing severe and complex mental illness. This includes consumers, Peer workers, general practices, LHD Acute mental health services, emergency departments, key CMOs such as Flourish, One Door, STARTTS, Community Restorative Centre (CRC), SVDP, , We Help Ourselves (WHO), Sydney Children's Hospital Network (SCHN), mental health nurses and culturally-specific organisations. and also bringing new commissioned providers working outside western Sydney through well designed procurement process.



Activity Milestone Details/Duration

Activity Start Date

01/07/2019

Activity End Date

30/06/2027

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones



Activity Commissioning

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

Not Yet Known: No

Continuing Service Provider / Contract Extension: 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?

No

Decommissioning

No

Decommissioning details?

Not applicable

Co-design or co-commissioning comments

All programs are designed with a focus on the client journey and have input from key stakeholders, including clients with lived experience and the WSPHN Consumer Council.

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

Yes



MH - 5 - Community based suicide prevention activities



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

5

Activity Title *

Community based suicide prevention activities

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 commission community-based suicide prevention services as follows:

1. PMHC Suicide Prevention Service (SPS) aims to address issues of people who are at heightened risk of self-harm and suicidal ideation.
2. Provide culturally sensitive and safe counselling services and mental health supports to people who identify as Aboriginal and Torres Strait Islander, people within other cultural groups within Western Sydney, and people within vulnerable community groups – such as people who identify as LGBTIQ+, people from CALD backgrounds, etc as per priority areas identified in Needs Assessment
3. Established a team which is working on improving data quality and performance of service providers as well as training and development opportunities
4. To ensure the Western Sydney community has access to sufficient, holistic suicide aftercare and transition support to prevent the risk of re-occurrence of suicidal ideation or attempt.

5. To ensure that the service system is connected and collaborating across the streams of early intervention, aftercare and postvention with a team that supports system integration

Description of Activity *

1. PMHC Suicide Prevention Service (SPS) has expanded and is now commissioning a significant number of mental health professionals who can provide an appointment within 72 hours to referrals for people identified with an elevated risk of suicide. Given the nature of this issue, we do not limit this service to low income earners. Instead, this service is there to support anyone in the western Sydney PHN region who needs support in relation to self-harm and suicide and clients who may have accessed other suicide prevention services commissioned by WSPHN providing they present with a level of suicidality that will benefit from short-term therapeutic interventions.
2. Provide culturally sensitive and safe counselling and high-risk mental health support services to people who identify as Aboriginal and Torres Strait Islander, people within other cultural groups within Western Sydney, and people within vulnerable community groups – such as people who identify as LGBTIQ+, people from CALD backgrounds, etc.
3. Extension of existing community-based suicide-prevention programs and activities to ensure we are strengthening approaches across early intervention, aftercare and postvention supports.
 5. Strengthening systems based approaches to suicide prevention by commissioning community-based activities outside of the health sector, to align with the growing evidence base on the efficacy of addressing social determinants of health as a precursor to suicidal experiences.
 6. Implementing a system that is well developed in capturing data that will inform future commissioning and monitoring of providers performance

Needs Assessment Priorities *

Needs Assessment

Western Sydney Primary Health Network (WSPHN) 2025-2028

Priorities

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Activity Demographics

Target Population Cohort

Most activities will be publicly available to residents of Western Sydney and aim to increase early access to support. Additionally, any clients experiencing mental health distress and who present to GP practices, mental health services providers, community groups or organisations, and schools will also be directed to these services.

The programs implemented under this activity also help to respond to emerging trends in AIHW Suicide and Self-harm data, namely the growing number of people who experience suicidality but have no contact with the health system in the years prior to their deaths.

In Scope AOD Treatment Type *

Indigenous Specific *

Yes

Indigenous Specific Comments

Counselling for Aboriginal and Torres Strait Islander people.

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Auburn	12501
Dural - Wisemans Ferry	11502
Merrylands - Guildford	12503
Baulkham Hills	11501
Rouse Hill - McGraths Hill	11504
Ryde - Hunters Hill	12602
Carlingford	12502
Pennant Hills - Epping	12601
Mount Druitt	11603
Blacktown	11601
Blacktown - North	11602
Parramatta	12504



Activity Consultation and Collaboration

Consultation

WSPHN has consulted in a structured manner key representatives from different organisations across Western Sydney, GPs, LHD, non-government organisations (NGO), community managed organisations (CMO) and mental health professionals who are consulted in developing strategies on commissioning and delivery of services across the priority areas in western Sydney.

WSPHN, in its establishment of a Western Sydney Suicide Alliance, regularly consults with our Network to facilitate more agile, region-focused responses to suicide which is made up of growing membership from community, people with lived and living experience, LHD, StandBy, Lifeline, headspace, frontline workers i.e. police/ambulance and non-health representatives who interact with suicide prevention co-horts i.e. Department of education and independent schools, Department of Communities and Justice, Transport NSW and other key stakeholders.

Collaboration

Commissioned services are empowered to work with one another to better coordinate service integration, which enables consumers to transition seamlessly between stages of care as required.

Initiatives work closely with all referring agents (GPs, schools, allied health providers and specialists) and mental health providers currently engaged with WSPHN. This includes the LHD and a number of key NGOs.

WSPHN is developing more accountability for collaboration across its joint regional planning processes and through the embedding of a systems-based approach that is fit for purpose in Western Sydney.



Activity Milestone Details/Duration

Activity Start Date

01/07/2019

Activity End Date

30/06/2027

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones



Activity Commissioning

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

Not Yet Known: No

Continuing Service Provider / Contract Extension: Yes

Direct Engagement: No

Open Tender: No

Expression Of Interest (EOI): Yes

Other Approach (please provide details): Yes – commissioning approach that considers all Suicide Prevention funding schedules and activity to ensure procurement is connected and integrated in order to facilitate a more responsive service system.

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?

Not applicable

Co-design or co-commissioning comments

Not Applicable

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

Yes



MH - 5 - Community based SP activities- Indigenous



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

5

Activity Title *

Community based SP activities- Indigenous

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Mental Health

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

To commission community-based suicide prevention services as follows:

1. PMHC Suicide Prevention Service (SPS) aims to address issues of people who are at heightened risk of self-harm and suicidal ideation.
2. Provide culturally sensitive and safe counselling services to Aboriginal and Torres Strait Islander people.

Description of Activity *

1. PMHC Suicide Prevention Service (SPS) has expanded and is now commissioning a significant number of mental health professionals who can provide an appointment within 72 hours to referrals for people identified with an elevated risk of suicide. Over 30% of current PMHC providers are registered to provide this category of support. Given the nature of this issue, we do not limit this service to low-income earners. Instead, this service is there to support anyone in the western Sydney PHN region who needs support in relation to self-harm and suicide and clients who may have accessed other suicide prevention services commissioned by WSPHN.

2. Provision of culturally sensitive and safe counselling services to Aboriginal and Torres Strait Islander people.

Needs Assessment Priorities *

Needs Assessment

Western Sydney Primary Health Network (WSPHN) 2025-2028

Priorities

Priority	Page reference
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Activity Demographics

Target Population Cohort

All activities listed above will be publicly available to residents of Western Sydney and aim to increase early access to support. Additionally, any clients experiencing mental health distress and who present to GP practices, mental health services providers, community groups or organisations, and schools will also be directed to these services. MH 5.1 will specifically target people at risk of suicide and/ or people with elevated risk factors requiring face to face services.

In Scope AOD Treatment Type *

Indigenous Specific *

Yes

Indigenous Specific Comments

2. counselling for Aboriginal and Torres Strait Islander people.

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Auburn	12501
Dural - Wisemans Ferry	11502
Merrylands - Guildford	12503
Baulkham Hills	11501
Rouse Hill - McGraths Hill	11504
Ryde - Hunters Hill	12602
Carlingford	12502
Pennant Hills - Epping	12601
Mount Druitt	11603
Blacktown	11601
Blacktown - North	11602
Parramatta	12504



Activity Consultation and Collaboration

Consultation

WSPHN has consulted in a structured manner at key decision points with key representatives include, GPs, LHD, NGOs (like headspace), ACCHOS, CMOs, Baabayn and mental health professionals who are consulted in developing strategic directions on commissioning and delivery of services across the priority areas in Western Sydney.

Collaboration

Initiatives work closely with all referring agents (GPs, schools, allied health providers and specialists) and mental health providers currently engaged with WSPHN. This includes the LHD and a number of key NGOs.



Activity Milestone Details/Duration

Activity Start Date

01/07/2019

Activity End Date

30/06/2027

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones



Activity Commissioning

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

Not Yet Known: No
Continuing Service Provider / Contract Extension: 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?

Not applicable

Co-design or co-commissioning comments

Not Applicable

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

No



MH - 6 - Aboriginal and Torres Strait Islander Mental Health Services



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

6

Activity Title *

Aboriginal and Torres Strait Islander Mental Health Services

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 ***

Continue to commission services focused on Aboriginal and Torres Strait mental health and well-being services to support mental health clients:

1. Mental Health and Wellbeing programs focused on prevention and early intervention
2. Mental health programs focused on supporting vulnerable people in the community, including Aboriginal men and women at risk of suicide in Mount Druitt.
3. To provide culturally appropriate mental health support to Aboriginal and Torres Strait Islander people across the Western Sydney region at no cost to the client;
4. To support Aboriginal and Torres Strait Islander clients and their families with co-morbid mental health and AOD issues by expanding the availability of rehabilitation options.

Description of Activity *

1. To support mental health service providers (i.e. Psychologists, social workers, mental health nurses and OTs) to deliver services and liaise between providers to alleviate some of the complexities community members often face when transitioning between

services.

2. Provision of support and guidance to members of the community who present in crisis, particularly in relation to legal aid, family counselling, emergency accommodation and connecting with health services in the region. This service focuses on supporting Aboriginal men and women at risk of suicide in Mount Druitt.
3. Provision of mental health intervention and therapeutic counselling services to Aboriginal people in a way that is culturally sensitive and safe.
4. The service will support clients with co-morbidity issues as well as their families, through their treatment and wellness journey, utilising both internal services and referral pathways/linkages (such as legal, employment, medical, child and family care and housing).

Needs Assessment Priorities *

Needs Assessment

Western Sydney Primary Health Network (WSPHN) 2025-2028

Priorities

Priority	Page reference
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Activity Demographics

Target Population Cohort

Aboriginal and Torres Strait Islander individuals and families requiring access to mental health services and a support network in western Sydney.

Mental health professional, carers, consumers and support staff, both Aboriginal and non-Aboriginal.

In Scope AOD Treatment Type *

Indigenous Specific *

Yes

Indigenous Specific Comments

ACCHOS, CMOs, Aboriginal commissioned service providers and mental health professionals are consulted in developing strategic directions to provide advice and guidance on commissioning and delivery of services across the priority areas in western Sydney.

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Auburn	12501
Dural - Wisemans Ferry	11502
Merrylands - Guildford	12503
Baulkham Hills	11501
Rouse Hill - McGraths Hill	11504
Ryde - Hunters Hill	12602
Carlingford	12502
Pennant Hills - Epping	12601
Mount Druitt	11603
Blacktown	11601
Blacktown - North	11602
Parramatta	12504



Activity Consultation and Collaboration

Consultation

WSPHN has consulted in a structured manner at key decision points with key representatives include, GPs, LHD, NGOs , ACCHOS, CMOs, Aboriginal commissioned service providers and mental health professionals who are consulted in developing strategic directions on commissioning and delivery of services across the priority areas in Western Sydney.

Collaboration

Initiatives work closely with all referring agents (GPs, schools, allied health providers and specialists) and mental health providers currently engaged with WSPHN. This includes the LHD and a number of key NGOs.



Activity Milestone Details/Duration

Activity Start Date

01/07/2019

Activity End Date

30/06/2026

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones



Activity Commissioning

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

Not Yet Known: No

Continuing Service Provider / Contract Extension: 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?

Not applicable

Co-design or co-commissioning comments

Not Applicable

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

Yes



MH - 7 - Older Persons Mental Health Service



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

7

Activity Title *

Older Persons Mental Health Service

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Mental Health

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

The Older Person Mental Health programs aim to improve the mental health and reduce social isolation and loneliness of older persons living in the community and within Western Sydney Residential Aged Care Homes (RACHs).

Description of Activity *

The OPMH program employs a multidisciplinary workforce to offer individual in the community and group interventions to reduce environmental and adaptation impacts upon an RACH residents mental health, provide mental health support, encourage socialising, offer group supports for residents to engage with each other and reduce loneliness, and offer training and support to RACH staff and residents on using technology to maintain relationships, maintain mental capacity, and enhance social skills. Implementing a system that is well developed in capturing data that will inform future commissioning and monitoring of providers performance. [Established a team which is working on improving data quality and performance of service providers as well as training and development opportunities.](#)

Needs Assessment Priorities ***Needs Assessment**

Western Sydney Primary Health Network (WSPHN) 2025-2028

Priorities

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Activity Demographics

Target Population Cohort

Older persons living within Western Sydney

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Auburn	12501
Dural - Wisemans Ferry	11502
Merrylands - Guildford	12503
Baulkham Hills	11501
Rouse Hill - McGraths Hill	11504
Ryde - Hunters Hill	12602
Carlingford	12502
Pennant Hills - Epping	12601
Mount Druitt	11603
Blacktown	11601
Blacktown - North	11602
Parramatta	12504



Activity Consultation and Collaboration

Consultation

In developing older persons mental health services, consultation occurred with a number of GPs, RACHs, Psychologists, Social Workers MoH Older Person branch and mental health providers who indicated that services should support people in being assessed, diagnosed, informed, and supported through their mental health intervention.

Each of the services has a common referral pathway and network that allows WSPHN to align services should the consumer, referring GP and mental health service provider require ongoing, additional or complimentary services with various levels of intervention and access.

Collaboration

Commissioned services are empowered to work with one another to better coordinate service integration, which enables patients to transition seamlessly between stages of care as required, including older persons in RACHs.



Activity Milestone Details/Duration

Activity Start Date

01/07/2019

Activity End Date

30/06/2027

Service Delivery Start Date

Service Delivery End Date

Other Relevant Milestones



Activity Commissioning

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

Not Yet Known: No

Continuing Service Provider / Contract Extension: No

Direct Engagement: No

Open Tender: Yes

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?

Not applicable

Co-design or co-commissioning comments

WSPHN is co-designing this programs with key stakeholders in Western Sydney and consumers

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

Yes



MH - 2000 - Child and Youth Mental Health Services



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH

Activity Number *

2000

Activity Title *

Child and Youth Mental Health Services

Existing, Modified or New Activity *

Modified



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 ***

1. To reduce the impact of disease in young people aged 12-25 years caused by mental health disorders and related substance use. This will be evident through improvements in the mental health, social wellbeing and economic participation of young people in this target group.
2. The aim of Early Psychosis (EPYS) is to provide early intervention services to young people with emerging serious mental illness, and their families, that are youth-friendly, accessible, consistent and seamless, and that provide ongoing care and support.
3. To assist young people aged 12-25 who have or are at risk of, developing severe mental illness and can be supported in the primary care setting, including through the Youth Enhanced Support Service (YESS) and headspace program.
4. To provide psychological therapy and mental health clinical and non-clinical support to young people aged 12-25 who have suicidal symptoms.
5. To deliver assertive, specialist mental health services and tertiary consultation to children and young people and youth mental health program designed to cover the gaps identified in EPYS and headspace.
6. To assist with initial assessments, provide short-term management of an acute crisis, prevent/avoid hospital admission if

possible, facilitate referrals to appropriate mental health treatment services, reduce the number of young people presenting repeatedly to ED, and shorten the length of stays in the ED

7. Provide MH wellbeing education and support programs through schools, ECEC's and community-based organisations that focus on children, young people and their families.

Description of Activity *

2. EPYS located in Mt Druitt and Parramatta, is a continuing care team of multi-disciplinary professionals who provide recovery orientated, early intervention services to young people aged 12-25 who are experiencing a first episode of psychosis or at ultra-high risk of experiencing psychosis. The service model is based on the Early Psychosis Prevention and Intervention Centre (EPPIC) from Orygen Youth Health in Victoria. And as such, the commissioned service provision is based on assertive outreach, family work, functional recovery and partnerships with other community organisations to enhance care.

EPYS Parramatta is a 'Spoke' of the Mt Druitt EPYS 'Hub' and the services work closely to ensure continuity of service. The Hub provides extensive psychiatric and specialist services such as functional recovery groups and family therapy.

3. Youth Severe Mental Health service is commissioned to assist young people aged 12-25 years residing in Western Sydney who has or is at risk of, developing severe mental illness and can be supported in the primary care setting.

It comprises three clinical arms:

- Enhanced Access - a hub and spoke model to enhance access across the region and to leverage off existing links of community partners.
- Assertive Case Management including wrap-around services and evidence-based treatment and recovery approaches in line with the Clinical Staging Model and Stepped Care.
- Mental Health Education and Support to GPs and school counsellors to build the capacity of GPs to manage young people. Young people will be serviced in their preferred locations, utilising flexible service options including drop-in services, individual and group-based sessions, face to face and online support.

* Established a team which is working on improving data quality and performance of service providers as well as training and development opportunities

4. Suicide prevention – psychological therapies aim to provide psychological services for the most vulnerable and financially disadvantaged members of the WSPHN area. Services include psychological therapy sessions for people who are unable to otherwise afford to pay for therapy, and a separate suicide prevention stream is designated to help people who have been identified as acutely at risk of suicide regardless of their financial status.

5. The project will work in a crisis management model, practising trauma-informed care and using recovery principles. The team will work in partnership with young people and their carers to assist with managing the acute crisis that is resulting in the young person's presentation/s to ED. The approach will be holistic, assessing all aspects of a young persons' functioning, identifying their needs across mental health, physical health, drug and alcohol and psychosocial domains .

6. Provision of early intervention services to vulnerable children, young people, and their families through schools, ECEC's and community based organisations. Activities will focus on education and support sessions that build resilience and MH wellbeing

7. WSPHN established Project Team to lead the co-design and delivery of EPYS ensuring the program is delivering first class support for young people in western Sydney experiencing a first episode of psychosis. The team also focuses on providing quality data, value for money for the program.

Needs Assessment Priorities *

Needs Assessment

Western Sydney Primary Health Network (WSPHN) 2025-2028

Priorities

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Identified Priorities	Pages 105 -109



Activity Demographics

Target Population Cohort

Children and youth aged between 12 – 25 years, who may be experiencing mild to moderate mental health condition and/or drug and alcohol misuse, who may be experiencing a severe mental health condition either as a first episode of psychosis (FEP) or ultra-high risk of psychosis (UHR), who are at risk of or experiencing severe mental health illness including psychosis, major depression, severe anxiety, eating disorders and personality disorders, who have suicidal symptoms, who are experiencing an acute crisis, who present to ED with acute mental health concerns, or young people and their families who are vulnerable and at risk of experiencing severe and acute mental health concerns.

In Scope AOD Treatment Type *

Indigenous Specific *

No

Indigenous Specific Comments

Coverage

Whole Region

Yes

SA3 Name	SA3 Code
Auburn	12501
Dural - Wisemans Ferry	11502
Merrylands - Guildford	12503
Baulkham Hills	11501
Rouse Hill - McGraths Hill	11504
Ryde - Hunters Hill	12602
Carlingford	12502
Pennant Hills - Epping	12601
Mount Druitt	11603
Blacktown	11601
Blacktown - North	11602
Parramatta	12504



Activity Consultation and Collaboration

Consultation

3. WSPHN consult with Uniting (NSW.ACT) as a lead agency, along with key representatives from the LHD, GPs, mental health service providers, and consumer and carer representatives.

4. Consultation with Orygen, consumers, carers, WSLHD as well as the service provider and the consortium members who will be part of the service delivery.

5. WSPHN consult with key representatives from the LHD, GPs, mental health service providers, and consumer and carer representatives.

Collaboration

Commissioned providers, WSLHD, GPs, SCHN, Consumers and carer representative



Activity Milestone Details/Duration

Activity Start Date

01/07/2016

Activity 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): Yes

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?

Not applicable

Co-design or co-commissioning comments

All programs were co-designed and prior to recommissioning, codesign principles will be applied.

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

Yes



MH-AMHCT - 1 - Medicare Mental Health Centres and Satellites



Activity Metadata

Applicable Schedule *

Primary Mental Health Care

Activity Prefix *

MH-AMHCT

Activity Number *

1

Activity Title *

Medicare Mental Health Centres

Existing, Modified or New Activity *

Existing



Activity Priorities and Description

Program Key Priority Area *

Other (please provide details)

Other Program Key Priority Area Description

Mental Health Priority Area 7: Stepped care approach

Aim of Activity *

Medicare Mental Health Centres (MMHC) will be a permanent mental health hub within Western Sydney to implement recovery-oriented, person-centred mental health interventions with clearly defined assessment and diagnostic tools that relate to the person's acuity and functional impairment, and which recognises the importance of non-health supports such as housing, justice, employment, and education, and emphasises cost-effective, community-based care.

- Provide a central point to connect people to other services in the region, including through offering information and advice about mental health issues and alcohol and other drug (AOD) use, service navigation and warm referral pathways for individuals, their carers, and family.
- Respond to people experiencing a crisis or in significant distress, including people at heightened risk of suicide; provide support that may reduce the need for emergency department attendance.
- Provide in-house assessment, including information and support to access services.
- Provide evidence-based and evidence-informed immediate intervention, and short to medium term episodes of care, including utilisation of digital mental health platforms to support people with moderate to high levels of mental health needs, whose needs are not met through other services.

Description of Activity *

The MMHC, to be located in Parramatta (Parramatta LGA) employs multidisciplinary teams of clinicians, service navigators and peer workers to support the community through a multi-modal approach to care. The MMHC will offer face to face or telehealth support for clients, either referred through the Initial Assessment and Referral national line or via walk-in directly to the centres. A project team continues to work with commissioned provider to co-design the program in the first and second year of the launch.

In addition to Parramatta, WSPHN has established MMHC in Blacktown. The Blacktown satellite will work in partnership with the Parramatta MMHC, WSLHD, and WSPHN to strengthen clinical governance, improve system integration, and expand the geographic reach of community based mental health services. Guided by the MMH model, Blacktown MMHC focus on crisis response, service navigation, in-house assessment, and delivery of short to medium-term, evidence-based care - including digital supports - for individuals with moderate to high mental health needs. WSPHN has established a Project Team to lead the co-design and implementation of Blacktown Satellite following the successful procurement of the program. The team also focuses on providing quality data, value for money evaluation, reporting while working with SME and ensuring coverage across western Sydney.

- Offer a highly visible and accessible ‘no wrong door’ entry point for adults and their families to access information and services which are designed to empower, support, and improve their psychological and physical health, and social and emotional wellbeing.
- Established a team which is working on improving data quality and performance of service providers as well as training and development opportunities
- Provide a welcoming, compassionate, culturally appropriate, and safe environment that is inclusive for all people accessing services or supports that are trauma-informed, person-centred, and recovery-focused
- Support people to connect to pathways of care through integration with longer term existing community mental health services where these are accessible and appropriate, local Primary Health Network commissioned services, GPs, and state and territory funded services, as required.

Needs Assessment Priorities *

Needs Assessment

Western Sydney Primary Health Network (WSPHN) 2025-2028

Priorities

Priority	Page reference
Identified Priorities	Pages 105 -109



Activity Demographics

Target Population Cohort

People with moderate to high levels of mental health needs

In Scope AOD Treatment Type *

Yes

Indigenous Specific *

No

Indigenous Specific Comments

No

Coverage

Whole Region

Yes



Activity Consultation and Collaboration

Consultation

. WSPHN consult with commissioned providers, along with key representatives from the LHD, GPs, and consumer and carer representatives

Collaboration

. Commissioned providers, WSLHD, GPs, SCHN, Consumers and carer representative



Activity Milestone Details/Duration

Activity Start Date

07/06/2022

Activity 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?

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?

Yes

Decommissioning

No

Decommissioning details?

n/a

Co-design or co-commissioning comments

WSPHN is actively engaging and consult with consumers, general practitioners, other community providers and relevant key stakeholders. This co-design will be led by the commissioned providers and close consultation with WSPHN, WSLHD.