

Mental Health and Suicide Prevention Framework

MENTAL HEALTH AND SUICIDE PREVENTION POLICY STATEMENT

Wentworth Healthcare is committed to improving the mental health and wellbeing for the people in our community.

Mental health can be described as a state of being both socially and emotionally well, with innate abilities to realise and cope with the normal stressors of life, work productively, and contribute to the community in which you work, learn and live. Wentworth Healthcare recognises that mental illness can significantly interfere with a person’s cognitive, emotional, or social ability and that there are complex social determinants that may also impact mental and social wellbeing.

Wentworth Healthcare’s strategic vision, mission and values are central in driving the delivery of safe, high quality, comprehensive, coordinated, consumer focused and compassionate mental health and suicide prevention care in our region. Mental health care that will be delivered with a person-centred approach, that supports people to experience a seamless journey in receiving the right care at the right time and in the right place.

Based on the company’s Risk Appetite Statement, Wentworth Healthcare has assessed the delivery of mental health services as a ‘Controlled’ risk in respect to the Regulatory area, and ‘Cautious’ in respect to Governance. This means there is a zero to low tolerance for the poor delivery of mental health services and the associated risks.

Wentworth Healthcare Board, Executive, Managers, Staff and Commissioned Service

Providers are required to have an understanding of the Wentworth Healthcare Mental Health Framework and to demonstrate accountability for the delivery of safe, high-quality care against legislative and regulatory requirements, within their mental health service delivery domain.

In delivering direct mental health services, and as commissioners of mental health services, Wentworth Healthcare has an obligation to prevent care, or an absence of care, which could be reasonably foreseen to cause injury or harm to consumers. Anticipating risk will be supported through ensuring consumers are engaged in all we do; facilitating coordinated services within and across the sectors in taking care to prevent consumers coming to harm and through articulating the requirements and monitoring the quality of mental health care processes and outcomes.

Wentworth Healthcare’s Mental Health Framework will guide our work within primary mental health care in the region to ensure the lived experience of consumers is included at every level with services codesigned and adapted to suit our regional needs. Cultural governance and inclusion will be integrated, and decisions will be driven by data and evidence informed practice.

MENTAL HEALTH: Vision, Purpose and Scope

VISION	Wentworth Healthcare is committed to improving the mental health of the region by ensuring safe, high quality and effective primary mental health care, for all consumers and service providers who engage in the delivery and of our mental health programs and services.
PURPOSE	The Mental Health Framework will ensure an understanding and accountability for primary mental health is available for all programs and services delivered and or commissioned through Wentworth Healthcare.
SCOPE	The Framework applies to Wentworth Healthcare delivered mental health services, commissioned mental health services and the mental health initiatives and programs that support and develop primary mental healthcare in our region.

GUIDING PRINCIPLES

Wentworth Healthcare has a role with primary mental health care as a direct provider of services, as a commissioner of services and as an influencer of primary care, to prevent risk of mental health services causing injury or harm to consumers.

As a leader of primary health in the region, Wentworth Healthcare has established a 'just' culture, working in partnership with consumers and service providers to ensure safe and quality driven mental health care is underpinned by guiding principles that incorporate:

- **Person centredness**, respectful of, and responsive to, the preferences, needs and values of the individual person.
- Acknowledging that **connection with others** contributes significantly towards mental and physical wellbeing and includes **strong ties with family, friends, and the community**.
- Developing and influencing the **delivery of high-quality mental health care**, including capacity building and the interface between primary care and other service sectors that supports a seamless patient journey.
- **Integrating mental health** care to reduce fragmentation, duplication, gaps and inefficiencies by working with partners and consumers through a **whole of system approach** with planning, design and evaluation of services and to deliver against regional priorities that focus on early intervention and effective management of enduring conditions in the community setting.
- **The social determinants of health** to support a wholistic approach to mental health and suicide prevention where appropriate, including recognition of income and social protection, education, employment and job security, working life conditions, food security, housing, early childhood development, social inclusion, structural conflict and access to affordable health services of decent quality.
- **The voices of people with lived experience** of mental health issues inclusive of carers, families and kinship groups are recognised as critical and central to mental health services and support.
- **Co-design** with consumers, carers, families and healthcare leadership & workers to develop, improve and implement services.
- **Hope filled and recovery focused** services and supports that host a positive culture of healing and recovery-orientation in their practice.
- **Culturally legitimate, accountable, and reflective of the diversity of the region**, enshrined at the heart of governance and in recognition that cultural groups will have unique systems of laws, traditions, rules, and codes of conduct.
- Association between **mental health and physical health** acknowledges that people living with mental illness are more likely to develop comorbid physical illness and the importance in recognising the relationship between mental health and physical health conditions.

ROLES AND RESPONSIBILITIES

The Wentworth Healthcare Board has ultimate responsibility for mental health and suicide prevention services delivered and/or commissioned under the auspices of Wentworth Healthcare.

The Board of Directors has both the accountability and obligation for ensuring that the direct and commissioned mental health and suicide prevention services meet best practice and that the concept of vicarious and reputational risks associated with commissioned services are addressed.

► **The Board has established a 'Commissioned Services and Clinical Governance Board Committee'** to drive clinical governance associated with delivered and commissioned services, including mental health and suicide prevention, that will assist the Board in fulfilling its responsibilities. The Board has ultimate accountability for the delivery of activities and services under the Wentworth Healthcare Strategic Plan. This includes assurance that due diligence has been applied in fulfilling governance obligations relating to Wentworth Healthcare's mental health and suicide prevention services commissioning processes and clinical governance leadership, supervision, clinical risk management and quality standards.

► **The Board has appointed the CEO** to provide oversight of the development of mental health and suicide prevention services governance, strategy and management. The CEO, Executive and Management team have a responsibility to provide oversight with the implementation of mental health and suicide prevention programs, services and systems within the organisation. Where the implementation is delegated, a system of monitoring will be in place that provides a mechanism to confirm that quality and safety systems and processes are functioning effectively. Evaluating both delivered and commissioned mental health and suicide prevention services will address the key elements of this framework and incorporate clinical governance compliance. The actions and decisions of the CEO, Executive and Managers in relation to mental health and suicide prevention services is also informed and supported by the Wentworth Healthcare Mental Health Clinical Advisory Committee and the Wentworth Healthcare Mental Health Consumers and Carers Committee.

► **Wentworth Healthcare Program Managers and their teams** are responsible for understanding, utilising and implementing the Wentworth Healthcare Mental Health Framework and for overseeing day-to-day implementation of the systems and processes in their respective program areas of responsibility and in the contracted services they commission. This includes maintenance of collaborative relationships with stakeholders, clinical governance pre-commissioning due diligence and clinical risk management post commissioning; implementing proactive quality improvement initiatives; and identifying capacity-building opportunities with service providers.

► **Service providers including commissioned organisations and clinicians** have responsibilities in recognising Wentworth Healthcare's Mental Health Framework in working in partnership to design and deliver mental health and suicide prevention services in the region

► **Consumers, carers and community members** have a role in implementation through meaningful engagement with Wentworth Healthcare in decision-making about planning care and treatment of mental health and suicide prevention direct services and commissioned services, and the well-being of themselves and the community. Advocating about their own healthcare journey can contribute significantly towards quality improvements in mental health and suicide prevention care in the region.

KEY ENABLERS

The successful implementation of the Mental Health Framework is supported through:



1. Culture and our Approach – Recovery orientation, trauma informed, and person-centered care will guide our activities as a commissioner and deliverer of mental health and suicide prevention services, modelling best practice in primary mental health care



2. Workforce – Supporting, growing, and sustaining the mental healthcare workforce through analysis of local workforce data, advocacy, and innovation in commissioning to meet current and future needs, particularly in regional communities and priority populations.



3. Governance – Ensuring an authorising environment that supports accountability for the implementation of systems and processes to support effective application of the Framework.



4. Engagement – with consumers with lived experience of mental ill health and/or suicide, community and other key stakeholders as being central in supporting the design, development, delivery, evaluation, and quality improvement of mental health and suicide prevention services.



5. Partnerships – developed across sectors and organisations that facilitate information sharing, collaborative learning, and enhanced approaches to meaningful improvement in experience and outcomes of mental health and suicide prevention care that matter to people.



6. Frameworks/Policies/Guidelines – National and State guidance that inform and align with local strategies in mental health and suicide prevention to best support mental health experience and outcomes.



7. Funding – Financial resources and funding opportunities beyond regular income streams are made available and supported by innovative, efficient, and flexible arrangements to deliver effective and more tailored mental health and suicide prevention services that suit our regional needs.



8. Technology – supports and facilitates aspects of commissioning and delivering mental health and suicide prevention services through the Wentworth Healthcare Digital Mental Health Strategy. The Digital Mental Health Strategy articulates the effectiveness of flexible mediums for the delivery of care; the efficiency of secure electronic means in communicating transitions of care across health sectors and; the value of data in driving quality improvement of care.

ABOUT THE FRAMEWORK

This framework is inspired by need, both nationally and locally within our region. The National Study of Mental Health and Wellbeing has identified the rates of mental illness are continuing to increase, following similar trends to previously released surveys (Australian Bureau of Statistics, 2022). Consistently, over two in five Australians aged 16-85 years had experienced a mental disorder at some time in their life and Mental and Behavioural Conditions continue to remain at the top of the list of chronic conditions experienced by Australians.

Within the Nepean Blue Mountains region it is estimated that up to 17% (64,693) of the population will be likely to experience a mental illness within a 12-month period with a further 23.2% of the population are expected to be at risk of a mental illness (Wentworth Healthcare, 2021).

This Framework also brings together a range of approaches developed in Australia's States and Territories and draws upon and complements existing National and NSW specific research, frameworks and policies to provide a regionally responsive approach to guide best practice and service delivery with mental health and suicide prevention in primary mental health care. The recent Productivity Commission (2020) Inquiry Report into Mental Health has conservatively suggested the cost to the Australian economy of mental illness and suicide to be up to \$70 billion per year and up to an additional \$150 billion per year associated with diminished health and reduced life expectancy for those living with mental illness, noting further "These costs have been rising over time, with no clear indication that the mental health of the population has improved".

Since 1992, Australia has had a National Mental Health Strategy and a National Mental Health Policy that provides a strategic framework to guide coordinated government efforts in mental health reform and service delivery. The current Fifth National Mental Health and Suicide Prevention Plan (2017) is a five-year plan to improve the provision of better integrated mental health and related services in Australia.

In NSW, the NSW Mental Health Commission (2020) published the Strategic Plan Living Well in Focus 2020-2024 following extensive consultation throughout NSW and was specifically shaped by recent natural disasters and the COVID-19 pandemic. This plan identified three strategic priorities centred around

community recovery, strategic investment in community wellbeing and mental health and ensuring the right workforce for the future.

The National Mental Health and Suicide Prevention Agreement came into effect in March 2022 with Specific commitments to address gaps through Bilateral schedules by each state. The Bilateral Schedule on Mental Health and Suicide Prevention: New South Wales will as a priority work together to address areas identified for immediate reform as informed by key reports and inquiries to support a more integrated mental health system (Federal Financial Relations, 2022).

THE FRAMEWORK MODEL

Wentworth Healthcare's Mental Health Framework will guide our mental health service development and implementation in the region. The framework is informed by:

- National and NSW State Mental Health and Suicide Prevention policy and strategy (Department of Health and Aged Care, 2014; Mental Health Commission, 2017)
- The unique needs of the residents living in the region and
- A local roadmap, rationale, and strategic focus on Primary Mental and Suicide Prevention Healthcare in the region

The Framework recognises:

- The impact of consecutive, recent natural disasters including drought, fire and floods in addition to the COVID-19 Pandemic
- The key objectives of the Wentworth Healthcare and the Nepean Blue Mountains Local Health District Joint Regional Mental Health and Suicide Prevention Strategic Plan (2021)
- That mental health, suicidal distress, and many common mental disorders shaped to

a great extent by the social, economic, and physical environment in which people live (World Health Organization, 2022)

- That a 'Stepped Care' approach to the delivery of mental health care that will ensure mental health and suicide prevention services in the NBM region are flexibly matched to an individual's needs over their lifespan and are person centred (Australian Psychological Society, 2018).

The Framework is supported by **four pillars** that are central to the commissioning and monitoring of mental health and suicide prevention services in the region. These will include:

- the expertise of **lived experience**
- incorporation of **culture and inclusiveness**
- being informed by **data driven decision making** and
- being **regionally co-designed and locally adapted** to meet the needs of the region.

The pillars of this framework are underpinned by **four key considerations that** emphasise our focus on the **Individual person**, the **System**, the **Region** and **Quality Care**.

The Four Focus areas articulate the approaches:

Focus Area 1: A whole-of-lifespan approach informs our understanding of the development of mental health problems and service needs of people at different stages in their life. The nature and timing of services and supports depends not just on the individual's age, but on the risk factors and critical transition points that characterise each stage of life and acknowledges that there are social determinants that may contribute to a person's mental health. A whole-of-person approach acknowledges the person's situational circumstances, social, cultural, spiritual, and practical needs that contribute to a person's mental health and wellbeing. A focus on the individual adopts stepped care as "an evidence-based, staged system comprising a hierarchy of interventions, from the least to the most intensive, matched to the individual's needs" (Australian Government, 2019).

Focus Area 2: A whole-of-system approach emphasises effective promotion, illness prevention, early intervention and harm minimisation, treatment and support and includes the consideration of needs beyond Mental Health social determinants. This focus area will also consider the investment in workforce within the region and will prioritise integration of services and development of strong partnerships including co-design and commissioning of programs and services.

Focus Area 3: Commissioning health services that meet the needs of people in the NBM region, extends to strategically representing the community in relation to Primary Care Mental Health and advocating for unmet mental health and suicide prevention needs. This focus area will be led through strengthening communication with an aspiration to advocate as a leading voice for the needs of the region.

Focus Area 4: Funding to commission mental health and suicide prevention services is often bound by service parameters that define the nature or limits of the services being funded. Taking a **sustainable and quality driven approach** will ensure Wentworth Healthcare are able to diversify funding and invest strategically in Mental Health and suicide prevention services that will further meet local needs. This focus area will address a strategic framework for philanthropy and other sources of income. This focus area will also prioritise research and evaluation of services. Evaluation and research in mental health are critical to the evidence base for clinical care, to targeted investment in prevention and early intervention, to understanding the progress of existing reforms, and to support the case for future reform and service delivery in our region. Evaluation provides valuable information about how well programs and services are working, how they can be improved and highlighting new areas for development. **Mental Health and suicide prevention research is pivotal in the implementation of new knowledge. It drives innovation by generating knowledge and evidence about prevention, causes, impacts and treatment of mental illness.**

FRAMEWORK MODEL

PILLARS

Lived Experience Inclusion at Every Level	Culture and Inclusion
<p>The voices of people with lived experience of a mental health issue which includes carers, families and kinship groups are at the centre of our work and we acknowledge the expertise acquired through living with mental health issues and caring for people on their recovery journeys.</p>	<p>Our organisation will be culturally legitimate, accountable, and reflective of the diversity of the NBM region. Cultural Governance will enshrine culture at the heart of governance and in recognition that cultural groups will have systems of laws, traditions, rules, and codes of conduct.</p>

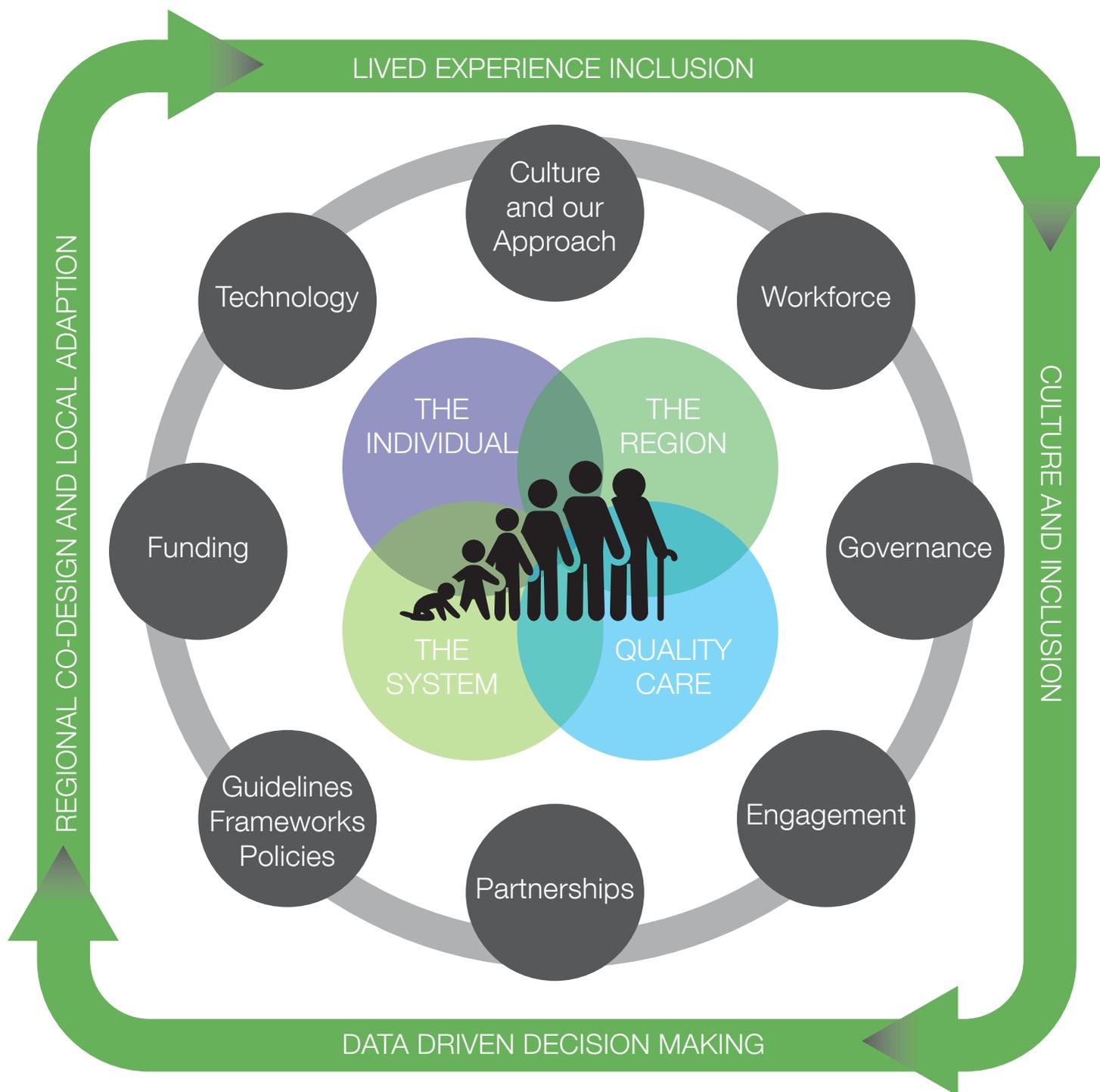
FOCUS AREAS

Focus Area 1 – The Individual Adopt and optimise Whole-of-person, Whole-of-lifespan approach to Mental Health and Wellbeing	Focus Area 2 – The System Adopt and optimise Whole-of-System approach to Mental Health and Wellbeing (Workforce)
<p>A whole-of-lifespan approach informs our understanding of the development of mental health and service needs of people at different stages in their life. The nature and timing of services and supports depends not just on the individual's age, but on the risk factors and critical transition points that characterise each stage of life.</p> <p>A whole-of-person approach acknowledges the person's situational circumstances, social, cultural, spiritual, and practical needs that contribute to a person's mental health and wellbeing.</p>	<p>A whole-of-system approach emphasise effective promotion, illness prevention, early intervention and harm minimisation, treatment and support and includes the consideration of needs beyond Mental Health (social determinants) and is adaptable and responsive to changing circumstances and situations (contemporary environmental changes including natural disasters and pandemics).</p>
<ul style="list-style-type: none"> • Investment is made in services pre and postnatal, early childhood, adolescence, early to late adulthood and older adults. • Investment is made in services that improve systems and processes to ensure better services that meet the needs of NBM residents from Culturally and Linguistically diverse backgrounds. • Investment is made in services that improve the mental health and social and emotional wellbeing of First Nations people in NBM. • Investment is made in services that improve the mental health and wellbeing of residents in NBM who identify as LGBTIQ+. • Improving the data collection of priority population groups who access services in NBM region will ensure sustainable and tailored services that accurately represent the needs of the community. • Consistent and evidenced based intake and assessment will improve access and matching to appropriate care. • Primary care that is equipped to provide person-centred care will support people across the spectrum of needs, over time and as their needs change - stepping care up and down according to need. • Improving the mental health outcomes and experience for people accessing commissioned mental health services and supports in the community will reduce hospital presentations, admissions and distress scores. 	<ul style="list-style-type: none"> • Regional workforce development including Specialist Clinical and Non-clinical positions is promoted and grown including the Peer Workers, Carers and Family Support, Aboriginal and Cultural Liaison and Support Workers, Psychiatrists and Allied Health Professionals. • Primary care is trained and equipped with the tools and knowledge to navigate the available services operating in the NBM region. • Joint Regional Planning is co-led through effective partnership development between public, private and with community services beyond health (social determinants). • Localising and implementing the National Disaster Mental Health and Wellbeing Framework will ensure provision of mental health services during and following disasters.

Data Driven Decision Making Evidence Informed Practice	Regional Co Design and Local Adaptation
<p>All decisions made will be informed by verified and valid facts and data collected for the NBM region and reflective of the needs of the region.</p>	<p>Our organisation will commit to achieve integrated regional co-design, planning and service delivery. This will be done through cooperative arrangements between PHNs and LHDs as well as community representatives. National initiatives will be adapted to meet the unique needs of the local region. The 2022 Bilateral Agreement will be incorporated.</p>

Focus Area 3 – The Region Assess, Represent, Advocate and Promote Mental Health and Wellbeing	Focus Area 4 – Quality Care Excellence, Quality and Sustainability
<p>Meeting the primary roles of the PHN to commission health services that meet the needs of people in the NBM region, this extends to strategically representing the community in relation to Primary Care Mental Health and advocating for unmet mental health needs.</p>	<p>Ensuring Wentworth Healthcare implements evidence-based frameworks will ensure currency and relevancy in the mental health sector.</p> <p>Funding received to commission services may be tied to specific service parameters. Taking a sustainable and quality driven approach will ensure Wentworth Healthcare are able to diversify funding and invest strategically in Mental Health services to enable more tailored and flexible approaches with delivering uniquely local services.</p>
<ul style="list-style-type: none"> • Strategically communicate key messages for the region. • Local ‘news stories’ communicated well will offer a lived experience lens of people living with Mental Health needs in our region. • Strengthening the voice for the region on matters associated with Primary Care Mental Health will follow Best Practice, promote and facilitate Research, Innovation and advancement in Mental Health and suicide prevention services in the region. • GPs and Key Allied Health Professionals are supported to be provided with up-to-date information and resources to improve knowledge of mental health and suicide prevention services and referral pathways throughout NBM region. 	<ul style="list-style-type: none"> • Services meet Mental Health Quality Standards with good Governance that includes formalised policy frameworks, work practices and processes and a governance structure that is conducive to transparent evaluation and effective reporting. • Wentworth Healthcare Lived Experience and Co-Design Frameworks are available. • Wentworth Healthcare Cultural Governance Framework is available. • Increased revenue diversity and growth of flexible revenue streams will further Wentworth Healthcare's vision for financial sustainability. • A Philanthropy Charitable Donations Framework that articulates a clear Charter, Social Compact and Operating Models for Wentworth Healthcare will be available. • Fundraising/Sponsorship as a focus for securing funds for the region will support mental health service development. This will be achieved by generating fundraising income within the community through building relationships and initiatives with new and prospective fundraising supports including individuals, businesses, community groups, clubs, residents/ families in the region. • Mental Health and Suicide Prevention Service Excellence is actively promoted in NBM nationally and internationally via publication of good news stories, presentation at local, National and International Conferences.

MENTAL HEALTH AND SUICIDE PREVENTION FRAMEWORK



1. The four **Pillars** are represented by each of the four borders of the framework. These pillars are interwoven and are core considerations to all our work and provide a frame or scaffold on which we have built the focus areas.
2. Inside the frame are eight **Enablers** that assist in facilitating achievement of the vision of improving the mental health of the region. They are visually displayed as a flow within the circle, representing the flow on effect with each other.
3. In the centre is a Venn diagram of four overlapping circles to represent the four areas of interconnected focus on the **Individual**, the **Region**, the **System** and **Quality Care**.
4. The overlapping circles sit on top of a representation of **Lifespan** ensuring that a Lifespan perspective of the people within in our community are at the centre of all considerations.

ACKNOWLEDGEMENTS

ACKNOWLEDGEMENT OF COUNTRY

Wentworth Healthcare wishes to pay respect to the traditional owners and custodians on whose land we walk, work and live. We acknowledge and learn from the strengths of Aboriginal people, their culture and connection to country, land and waters across the vast Nepean Blue Mountains region.

ACKNOWLEDGEMENT OF LIVED EXPERIENCE

The voices of people with lived experience of a mental health issue and caring, families and kinship groups are central to all we do at Wentworth Healthcare. Wentworth Healthcare acknowledges the expertise acquired through living with mental health issues and caring for people on their recovery journeys. We place lived experience at the heart of all we do, and value co-design and co-production.

CONTRIBUTIONS TO WENTWORTH HEALTHCARE MENTAL HEALTH AND SUICIDE PREVENTION FRAMEWORK

Wentworth Healthcare thanks the members of the community, and numerous organisations and government agencies who have provided input, ideas, data and other information for use in the Wentworth Healthcare Mental Health and Suicide Prevention Framework. We would particularly like to thank those people with lived experience who shared their stories with us — in individual meetings, in advisory committees and forums and through submission and comments to this framework. The insights provided by people who are or have lived with mental ill-health, and their families and carers, have been invaluable. Additionally, Wentworth Healthcare would like to acknowledge the significant contributions made by mental health professionals – general practitioners, psychiatrists, allied health professionals and professional helpers and support staff who have contributed their valuable insights and professional experiences.

WENTWORTH HEALTHCARE WOULD ALSO LIKE TO THANK:

- Wentworth Healthcare Mental Health Consumers and Carers Advisory Committee
- Wentworth Healthcare Mental Health Professionals and Services Advisory Committee
- Wentworth Healthcare Primary Mental Health Care Teams
- The Nepean Blue Mountains Local Health District Mental Health Service

REFERENCES

Australian Bureau of Statistics. (2022). National Study of Mental Health and Wellbeing. Retrieved from <https://www.abs.gov.au/statistics/health/mental-health/national-study-mental-health-and-wellbeing/latest-release>

Australian Government Department of Health. PHN Mental Health Flexible Funding Pool Programme Guidance: Stepped Care, Canberra: Australian Government Department of Health; 2019.

Australian Psychological Society. (2018). Stepped care for mental health treatment. A system in need of psychological expertise, 40(6). Retrieved from <https://psychology.org.au/for-members/publications/inpsych/2018/december-issue-6/stepped-care-for-mental-health-treatment-a-system>

Department of Health and Aged Care. (2014). National Suicide Prevention Strategy. Retrieved from <https://www1.health.gov.au/internet/publications/publishing.nsf/Content/suicide-prevention-activities-evaluation-background-national-suicide-prevention-strategy>

Federal Financial Relations. (2022). The Bilateral Schedule on Mental Health and Suicide Prevention: New South Wales. Retrieved from https://federalfinancialrelations.gov.au/sites/federalfinancialrelations.gov.au/files/2022-03/nmh_sp_bilateral_agreement_nsw_0.pdf

Mental Health Commission. (2020). Living Well in Focus 2020-2024. Retrieved from <https://www.nswmentalhealthcommission.com.au/report/living-well-focus-2020-2024>

Mental Health Commission. (2017). The Fifth National Mental Health and Suicide Prevention Plan. Retrieved from <https://www.mentalhealthcommission.gov.au/Monitoring-and-Reporting/Fifth-Plan>

Productivity Commission. (2020). Inquiry Report into Mental Health. Retrieved from <https://www.pc.gov.au/inquiries/completed/mental-health#report>

Royal Australian & New Zealand College of Psychiatrists. (2016). The economic cost of serious mental illness and comorbidities in Australia and New Zealand. Retrieved from <https://www.ranzcp.org/files/resources/reports/ranzcp-serious-mental-illness.aspx>

Wentworth Healthcare. (2021). Health Needs Assessment.

Wentworth Healthcare and Nepean Blue Mountains Local Health District. (2021). Joint Regional Mental Health and Suicide Prevention Strategic Plan 2021-2026. Retrieved from <https://www.nbmphn.com.au/Resources/Programs-Services/Mental-Health/Mental-Health-and-Suicide-Prevention-Implementation>

World Health Organisation. (2022). Mental health: strengthening our response. Retrieved from <https://www.who.int/news-room/fact-sheets/detail/mental-health-strengthening-our-response>

World Health Organisation. (2014). Social Determinants of Mental Health. Retrieved from https://apps.who.int/iris/bitstream/handle/10665/112828/9789241506809_eng.pdf



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