

# Mental Health Strategic Action Plan 2024



<b>COMMISSIONER'S INTENT</b>	<i>To create a safer community by strengthening organisational capabilities to engage and support mental health consumers and police response to mental health related incidents.</i>
<b>CORPORATE SPONSOR MESSAGE</b>	<p><i>The NSWPF understands that mental health continues to be a significant health issue across all communities with a substantial impact on the quality of life for the affected persons, their families, and carers. Our challenge is to build upon the good work of frontline police who are dealing with an increasing volume of often complex and high-risk incidents. The NSWPF is committed to improving capability for effective de-escalation, and management of persons affected by mental illness and disorders. We will continue to work closely with NSW Health and other key agencies to improve safety and build public confidence in the role of police in protecting vulnerable persons.</i></p> <p><i>Our objectives are to ensure that the NSWPF will:</i></p> <ol style="list-style-type: none"> <li><i>1. Ensure mental health consumers are treated with respect, dignity, care and enhance public confidence in police interventions.</i></li> <li><i>2. Enhance the capability of NSWPF employees when dealing with mental health related incidents through continued education and training.</i></li> <li><i>3. Collaborate with partner agencies, individuals with lived experience, and other stakeholders to develop and implement policies and responses that reflect best practices for supporting mental health consumers.</i></li> <li><i>4. Explore and consider new and emerging initiatives for collaborative mental health interventions, nationally and internationally for implementation by NSWPF and partnering agencies.</i></li> </ol> <p><i>Assistant Commissioner Steve Hegarty (APM) Corporate Sponsor for Mental Health</i></p>
<b>RISKS / OPPORTUNITIES</b>	<ul style="list-style-type: none"> <li>• <b>[R.1]</b> – Increased mental health related incidents being responded to by NSWPF resulting in poor or inconsistent outcomes for those suffering from mental illness and an increased risk of serious injury and/or critical incidents.</li> <li>• <b>[R.2]</b> – Inconsistent or insufficient training for frontline police in responding to incidents involving members of the community experiencing mental illness.</li> <li>• <b>[R.3]</b> – Inconsistencies or failures in policing responses lead to judicial / coronial criticism damaging public confidence in police.</li> <li>• <b>[O.1]</b> – Collaborative approach to mental illness with key partner agencies to increase efficacy of care and mitigate unnecessary police involvement, which reduces risks of unfavourable outcomes for consumers and police.</li> <li>• <b>[O.2]</b> – Develop and implement education and training aimed at improving capability and confidence of police in dealing with mental health related incidents.</li> <li>• <b>[O.3]</b> – Connect with external stakeholders, NGO's, families, carers, and those with a lived experience of mental ill health, to increase public confidence and engagement.</li> </ul>

FOCUS AREA	COMMUNITY & STAKEHOLDER CONCERNS	ACTIONS	EXPECTED OUTCOMES	TIME FRAME
1. Ensure mental health consumers are treated with respect, dignity, care and enhance public confidence in police interventions.	1.1 Community sentiment and expectation is that police will have an awareness and understanding of the vulnerabilities of individuals suffering a mental health crisis and demonstrate this knowledge in their interactions with members of the community.	<p>1.1.1 Collaborate with external agencies and identify those vulnerable to mental health related crimes, suicide, self-harm, and high-risk behavior.</p> <p>1.1.2 Consideration and review of recommendations from coronial, LECC, and independent reviews.</p> <p>1.1.3 Effectively respond to mental health incidents in line with NSWPF responsibilities with an emphasis on public safety, de-escalation, verbal communication, and confidence in engaging those experiencing mental illness.</p>	<p>1.1.1.1 Well managed stakeholder relationships and participation in local MOU committee meetings (ENGAGE).</p> <p>1.1.2.1 Effective interagency management framework plans or mental health care plans established for people with complex needs (MHC).</p> <p>1.1.2.2 Responsive framework in relation to policy, SOPs, training, or best practice guidelines to reflect recommendations (PETE, RMS, intranet).</p> <p>1.1.3.1 Continued training and development on de-escalation, verbal communication, and powers under the <i>Mental Health Act 2007</i> (PETE).</p>	Ongoing
2. Enhance the capability of NSWPF employees when dealing with mental health related incidents through continued education and training.	2.1 Insufficient training being completed by NSWPF staff members, or a lack of trained staff capable of responding to mental health related incidents.	<p>2.1.1 Consistent and mandatory annual mental health training delivered to all sworn NSWPF staff as per the mental health training framework.</p> <p>2.1.2 Ongoing review of mental health training packages in line with best practice to ensure training remains current, and relevant to the needs of the community and organisation.</p> <p>2.1.3 Adhere to the CET-endorsed mental health training framework when developing and implementing mental health-related training.</p> <p>2.1.4 Utilise face to face, online and scenario-based training to equip police officers with the confidence to engage and manage situations involving those experiencing mental health crisis and emotional distress.</p>	<p>2.1.1.1 MCPE development and record of completion maintained through PETE.</p> <p>2.1.2.1 Cohesive stakeholder engagement to ensure NSWPF training aligns with best practise and current community issues (MHC).</p> <p>2.1.3.1 Engagement with internal NSWPF practitioner and leadership stakeholders in mental health (MHC).</p> <p>2.1.1.4 Annual training package development in line with CET-endorsed mental health training framework (PETE, MHC).</p>	Ongoing

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FOCUS AREA	COMMUNITY & STAKEHOLDER CONCERNS	ACTIONS	EXPECTED OUTCOMES	TIME FRAME
		<p>2.1.5 Consult with NSWPF internal stakeholders to develop and implement training with an emphasis on verbal de-escalation, and to equip officers with information to assist in managing situations involving those experiencing mental health crisis.</p> <p>2.1.6 Embed a communications component into DEFTAC training to increase confidence in verbal de-escalation and engagement of those experiencing mental health crisis, along with identification of opportunities to engage, negotiate and de-escalate those experiencing symptoms of mental illness.</p> <p>2.1.7 Develop an understanding of the <i>Mental Health Act (2007)</i> to protect those at risk and vulnerable to mental health crisis.</p>	<p>2.1.5.1 Ongoing engagement with internal NSWPF practitioner and leadership stakeholders, online resources, training, and education (ENGAGE, PETE, MHC).</p> <p>2.1.6.1 Development and implementation of DEFTAC scenario-based training with verbal de-escalation and communication component (PETE).</p> <p>2.1.7.1 Develop and implement training and education on <i>Mental Health Act 2007</i> for all sworn NSWPF staff (PETE).</p>	
3. Collaborate with key partner agencies, individuals with lived experience, and other external stakeholders to develop and implement policies and responses that reflect best practices for engaging mental health consumers.	3.1 Inconsistencies or failures in policing responses to mental health related incidents can lead to unfavourable outcomes and lack of community confidence in police.	<p>3.1.1 Partnering with NSW Health and NSW Ambulance to work collaboratively in responding to situations involving people experiencing mental health crisis in a manner that best meets the clinical and safety needs of the person and the safety of staff and others.</p> <p>3.1.2 NSWPF will attend and actively participate in local MOU committee meetings to address current issues between NSW Health, NSW Ambulance, and NSWPF at a local level.</p> <p>3.1.3 Work collaboratively with NSW Health and Ambulance to optimise information exchange in line with the MOU, and privacy legislation.</p> <p>3.1.4 NSWPF will participate in high-level meetings with NSW Health regarding the MOU to review and clarify agency roles and responsibilities, ensuring the provision of appropriate response to individuals experiencing mental health crisis.</p> <p>3.1.5 Ongoing review of the PACER Program and development of a standard model of care to be adopted across all involved commands in collaboration with NSW Health.</p>	<p>3.1.1.1 Well managed stakeholder relationships and participation in local MOU committee meetings (ENGAGE).</p> <p>3.1.2.1 High-level MOU review meetings with participation from NSWPF (MHC).</p> <p>3.1.2.2 Well managed stakeholder relationships and participation in local MOU committee meetings (ENGAGE).</p> <p>3.1.2.3 Incorporation of MOU training in NSWPF mental health training (RMS, PETE).</p> <p>3.1.3.1 Well managed stakeholder relationships and participation in local MOU committee meetings (ENGAGE).</p> <p>3.1.4.1 High-level MOU review meetings with participation from NSWPF (MHC).</p> <p>3.1.5.1 Effective engagement with stakeholders as part of the PACER Advisory Committee (MHC).</p>	Ongoing
4. Explore and consider new and emerging initiatives for collaborative mental health interventions, nationally and internationally for implementation by NSWPF and partnering agencies	4.1 Community expectations as to the appropriate response by police and key partner agencies in response to mental health crises in the community.	4.1.1 Explore alternative models and initiatives nationally and internationally to improve response strategies and engagement with individuals experiencing mental health crisis in the community.	4.1.1.1 Responsive framework in relation to policy, SOPs, training, or best practice guidelines to reflect research findings and outcomes (MHC).	Ongoing

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