



Mental Health and Suicide Prevention Senior Officials Group

Terms of Reference – Psychosocial Project Group

Purpose

The Psychosocial Project Group (PPG) has been established by the Mental Health and Suicide Prevention Senior Officials Group (MHSPSO) to progress commitments under the National Mental Health and Suicide Prevention Agreement (National Agreement) in relation to future arrangements for providing psychosocial supports outside the National Disability Insurance Scheme (NDIS). The PPG will report to MHSPSO in accordance with the National Agreement governance structure and continue for the duration of the National Agreement, which is due to expire on 30 June 2026.

Background and Scope

The PPG has been established as part of governance structures to support implementation of the National Mental Health and Suicide Prevention Agreement (the National Agreement). The National Agreement sets out the shared intention of the Commonwealth and state and territory governments (states) to work in partnership to improve the mental health of all Australians and ensure the sustainability and enhancement of the Australian mental health and suicide prevention systems.

Responsibility for provision of psychosocial supports is shared between the Commonwealth (through the NDIS and other programs) and states and territories. The National Agreement commits all parties to undertaking a further analysis of unmet demand for psychosocial supports outside of the NDIS. The Commonwealth, states and territories have committed to working together to develop service models and agree future psychosocial support arrangements (including roles and responsibilities) for people who are not supported through the NDIS. This work and the work of PPG predates the Independent Review of the NDIS and National Cabinet's agreement to establish Foundational Supports. Interjurisdictional work to establish Foundational Supports, which may include psychosocial supports, is progressing through other governance arrangements and will have implications for the work of the PPG.

On 16 August 2024, Australian Health and Mental Health Ministers agreed to release the Final Report of the [Analysis of unmet need for psychosocial supports outside of the National Disability Insurance Scheme](#). The report is accompanied by the [Statement from Australian Health Ministers: Analysis of unmet need for psychosocial supports outside of the National Disability Insurance Scheme](#).

The report estimates, in 2022-23, around 230,500 people with a severe mental health challenge (aged 12 to 64 years) were unable to access psychosocial supports.

On 13 June 2025, Australian Health and Mental Health Ministers agreed that addressing unmet psychosocial support needs will be one of the central priorities in consideration of the next National Agreement. Ministers also agreed to at least maintain existing funding for psychosocial support services delivered through governments to ensure service continuity for the community.

Scope

The PPG will undertake work in consultation with the mental health sector, including people with lived and living experience of mental health challenges, their chosen supporters, carers, family and kin, and Aboriginal and Torres Strait Islander people, to inform consideration of the next National Agreement and support all Australian governments to invest in and deliver psychosocial support to better meet need in the community. This may include consideration of the following issues and priorities:

- guiding vision and principles
- identification and design of evidence-informed and good practice models of care shown to be effective and valued by people with lived and living experience, carers, family and kin
- system enablers including system navigation, workforce and data and outcomes measurement
- evaluation and accountability mechanisms.

By participating in the work of the PPG, jurisdictions are not committing to future investment in psychosocial supports. Any investment decisions will be considered by individual jurisdictions through appropriate channels.

In progressing this work, the PPG will consider how the disability and health systems work together to provide coordinated and streamlined care for people living with mental health challenges who require support from both systems or are transitioning from one system to another, and their chosen supporters, carers, families and kin.

The scope of PPG will be refined as work progresses, with the approval of MHSPSO and in accordance with the PPG's annual workplan.

Governance

As per clause 53 of the National Agreement, the PPG has been established by the Mental Health and Suicide Prevention Senior Officials Group (MHSPSO) to assist with implementation of the National Agreement and to progress key priority areas. It will report to MHSPSO according to National Agreement governance structures.

Specific duties

The PPG will:

- support Health and Mental Health Ministers' work to achieve an effective and equitable mental health system by developing and providing advice on psychosocial support arrangements
- provide expert advice and recommendations to MHSPSO on future arrangements and service models for providing psychosocial support outside the NDIS, including roles and responsibilities between the Australian Government and the states and territories and its interactions with the health and disability system
- collectively consider emerging risks, issues and evidence related to the provision of psychosocial supports both within and outside the NDIS, including long-term and downstream impacts on the mental health and suicide prevention systems
- provide a formal mechanism nationally to ensure good practice learnings such as promising practice are shared between jurisdictions and services

- maintain close linkages with other groups and organisations, including other MHPSO working groups and Foundational Supports governance groups, to ensure alignment with the work of PPG
- develop an annual workplan for endorsement by MHPSO that prioritises activities and initiatives in the psychosocial reform agenda.

The PPG will also, in undertaking its work, ensure it consults with:

- relevant stakeholders (including mental health peak bodies, Primary Health Networks, Local Hospital Networks, and the National Disability Insurance Agency); and
- people with lived and living experience of mental health challenges, and their chosen supporters, carers, family and kin.

In addition to the above, the PPG will provide advice to MHPSO on:

- progress against the annual work plan, including key risks and implementation issues
- emerging issues and priorities
- issues for resolution that cannot be resolved by members of the PPG, and
- any issues that should be brought to the attention of Health Chief Executives or Health and Mental Health Ministers.

Membership

Membership of the PPG comprises representatives from jurisdictions. Members must have sufficient expertise, skills and authority to make commitments on behalf of their jurisdictions.

Membership will also include four members with expertise in lived or living experience, with two members representing consumers and two members representing chosen supporters, families, carers and kin. Lived experience representatives should have relevant skills, knowledge and experience of psychosocial supports.

The PPG will be co-chaired by the Commonwealth and Queensland. All members may contribute to meeting agendas and raise items out-of-session as required.

A membership list is at [Attachment A](#). The Secretariat must be notified in writing of any lasting changes to PPG membership.

Sub-working groups

The PPG may convene time-limited sub-working groups to progress issues as required, at the discretion of the co-Chairs.

Lived experience representation and priority population groups

To ensure a person-centred mental health and suicide prevention system for all people living in Australia, the National Agreement requires those with experience of mental health challenges and/or suicide and their families and carers to be consulted throughout its implementation.

Lived experience representatives will be embedded as members within the PPG in accordance with the MHPSO Terms of Reference. In addition, the PPG will have representation from the national mental health lived experience peak bodies (National Mental Health Consumer Alliance and Mental Health Carers Australia) and the Lived Experience Group. The Lived Experience Group has been established as a working group to provide diverse mental health and suicide lived experience

perspectives to support the implementation of the National Agreement. The Lived Experience Group provides lived experience perspectives to the Working and Project Groups established by MHSPSO. The Lived Experience Group aims to reflect the breadth and diversity of mental health and suicide lived experience perspectives and acknowledges the range of definitions of lived and/or living experience and expertise from different population cohorts including First Nations peoples.

The PPG will consider perspectives of Aboriginal and Torres Strait Islander peoples to improve Aboriginal and Torres Strait Islander mental health, social and emotional wellbeing, and access to, and experience with, mental health and wellbeing services. Aboriginal and Torres Strait Islander stakeholders will be specifically approached to provide input on future arrangements. This will occur via existing mechanisms where possible and will align with the National Agreement on Closing the Gap.

Meetings

Meetings will be held on a quarterly basis, or as otherwise agreed by the co--Chairs. Meetings will be held virtually, with work progressed out-of-session where feasible.

Apologies and proxies

Representatives may delegate a proxy for attendance at meetings, but their representative must have sufficient expertise and authority to make commitments on behalf of their jurisdictions. The Secretariat must be notified in writing of any proxies in advance of the meeting.

Observers

Observers are able to attend meetings at the discretion of the co-Chairs but will not be part of the formal membership and will not have decision-making authority.

Confidentiality

All PPG documents are confidential, with circulation limited to members and where applicable, respective government agencies unless otherwise agreed.

If, during the period of a member's appointment to the PPG, a conflict of interest arises, whether actual, potential or apparent, the member must notify the Chairs immediately and take such steps as the co-Chairs may reasonably require to resolve or to otherwise deal with the conflict. Members will declare any conflicts of interest that pertain to the agenda at the start of each meeting.

Secretariat

Secretariat support is provided by the Commonwealth Department of Health, Disability and Ageing. Agendas and Meeting papers for decision are to be circulated by the secretariat no less than four business days before a meeting, or at the discretion of members. All meetings must have an agenda and minutes must be produced with an agreed record of decisions and action items.

Attachment A – Membership list

Member	Jurisdiction/Role	Position
Kristen Price (from May 2024)	Australian Government (Co-chair)	Assistant Secretary, Suicide Prevention Branch – Department of Health, Disability and Ageing

Member	Jurisdiction/Role	Position
Past member: Sarah Hawke		
Sandra Eyre	Queensland (Co-chair)	Senior Director, Mental Health Alcohol and Other Drugs Branch – Queensland Health
Amy Wyndham	New South Wales	Director, Community Programs and Partnerships, Mental Health Branch – NSW Health
Vincent Ponzio (from October 2024)	New South Wales	Director, Disability and Social Policy, Mental Health Branch – NSW Health
Emily Ramsey (from October 2024)	Victoria	Director, Service System Design Adult and Older Adults – VIC Department of Health
Past member: Phil Watson		
Ruth Langmead	Western Australia	Assistant Director, Strategic Management – WA Mental Health Commission
Melanie Robinson (from January 2025)	South Australia	Manager, Planning Service Design and Strategy – SA Department of Health and Wellbeing
Past member: Gise Paine, Amy Greenfield		
Kelly Ford (from July 2025)	Tasmania	Group Director, Mental Health Reform Services – TAS Department of Health
Past members: Jane Austin, Kate Garvey		
Wendy Kipling	Australian Capital Territory	Senior Director, Mental Health Policy and Strategy – ACT Health and Community Services Directorate
Melissa Heywood (from April 2024)	Northern Territory	Senior Policy Officer, Mental Health Alcohol and Other Drugs Branch – NT Health
Past member: Cherise Daiyi		
Katrina Armstrong (from October 2024)	Lived experience representatives	CEO – National Mental Health Family, Carers and Kin Peak Body
Priscilla Brice (from October 2024)		CEO – National Mental Health Consumer Peak Body
Heather Nowak (from October 2024)		Consumer representative – Lived Experience Group
Susan Adam (from October 2024)		Carer, family and kin representative – Lived Experience Group

Member	Jurisdiction/Role	Position
Past member: Deb Hamilton		