

Mental Health and Alcohol and Other Drugs Workforces Study Organisational Survey

How to Guide and FAQ's

About this survey

The Mental Health Commission is undertaking this survey to strengthen understanding of the mental health and alcohol and other drug workforce across Western Australia.

Information collected will contribute to a stronger evidence-base to support coordinated, system-wide efforts to strengthen workforce planning, policy, and service development.

How to complete this survey

Review this Guide for:

1. Information about questions you will be asked, and service matrix reference
2. Identify the level at which your organisation will report (organisation or service, see descriptions below)
3. Before you start, ensure you have access to key workforce data, such as FTE and headcount (or a reasonable estimate)

Who should complete this survey?

An organisation representative with sufficient knowledge of workforce composition, staffing, workforce planning and service delivery, for example Chief Executive Officer, Executive Director, Director, General Manager, Service Manager, Workforce Lead, Human Resources Lead or equivalent. Additional input from Human Resources, Finance, Operations, Clinical Leads and Service Managers may also be indicated.

What reporting level is required?

A single organisational survey response is recommended however, some larger organisations may elect to report at service level, that is, submit separate survey responses for specific services within an organisation. The survey will prompt you to identify whether you are reporting for the whole organisation or service.

Care should be taken to avoid duplicate reporting.

In scope:

- Public health services and hospitals
- Community managed organisations (not-for-profit)
- Private health service providers
- Government agencies or departments
- Peak bodies or membership organisations
- Aboriginal Community Controlled Organisations / Aboriginal Community Controlled Health Organisations

Organisations or service providers must be delivering mental health and/or alcohol and other drug services in Western Australia.

Out of scope:

- Academic and/or research institutions
- Sole traders and independent providers

Sole traders and independent providers who provide mental health and/or alcohol and other drug services in Western Australia should complete the [Individual Survey](#).



Survey Overview

A summary of the topics within the Organisational survey can be found below, to assist you in preparing a response.

Section A: About your organisation

This section confirms eligibility to complete the survey, captures key organisational details, and identifies the organisation's primary service focus. This information determines survey routing and subsequent questions and are therefore mandatory.

Why this matters: Provides an understanding of the various mental health and alcohol and other drug organisations in Western Australia.

Section B: Services your organisation delivers

This section outlines the organisation's service delivery profile by:

- Identifying broad service categories
- Selecting relevant service streams within those categories
- Providing additional context on service delivery (including wait times, target population groups, and partnerships with other organisations).

Detailed information on service streams and classifications is provided in the appendix. If you are unsure where your service fits, refer to the Tables 1 - 3 and select the option that most closely reflects your service activity. Multiple service streams may be selected where applicable.

The service structure used in this survey follows the Mental Health and Alcohol and Other Drug Strategy system maps, and aligns with the National Mental Health Service Planning Framework. This supports consistent classification across mental health and alcohol and other drug services.

Why this matters: Supports a system-wide understanding of service availability and service connectivity across the sector.

Section C: Workforce information

This section captures workforce size, composition, and distribution in relation to **any** mental health and/or alcohol and other drug service delivery, including:

- Workforce size: total staff, employment types, volunteers, Full Time Equivalent (FTE) and use of locums
- Workforce composition: role types (clinical, non-clinical, Lived Experience (Peer), and management/executive)
- Distribution: FTE allocation across service streams by role types (including vacancies)
- Capacity and turnover: resignations, attraction and retention initiatives

Where staff work across multiple service streams, estimate how their time is allocated and avoid double counting.

Why this matters: Provides insight into workforce capacity, size, distribution, and organisational challenges (workforce shortages and recruitment difficulties) to inform workforce planning and system-wide decision-making.



Frequently asked questions

About the survey

How does the survey reflect differences across the mental health and alcohol and other drug sectors?

The survey is designed to apply across both the mental health and alcohol and other drug sectors. Questions are tailored based on responses to screening questions to ensure relevance to your organisation's service context and to capture key differences between workforce groups.

How will the information collected be used?

Responses will contribute to an evidence base on workforce size, composition, distribution, and training needs. This information will inform workforce planning, policy development, and broader system improvement initiatives.

How long will the survey take to complete?

The survey is expected to take approximately 15 to 20 minutes, depending on the size of your organisation. However, additional time will likely be required prior to completion of the survey to coordinate responses and gather information such as headcount and FTE, or a reasonable estimate of these figures.

Completing the survey

Can the survey be completed in more than one sitting?

Yes. Progress can be saved, and the survey can be completed over multiple sessions, through the use of the "Save & Return Later" button. The 'return code' must be copied or saved when using this feature.

Can I consult others when completing the survey?

Yes. You may consult relevant colleagues, including human resources and finance to support accurate reporting.

What if I am unsure which response option to select?

Select the option that most closely reflects your organisation's service. Reasonable estimates may be provided where exact figures are unavailable.

What if my organisation operates across jurisdictions?

Responses should reflect your organisation's mental health and/or alcohol and other drug services in Western Australia. If your organisation operates across jurisdictions, report only on Western Australian services and workforce.

Privacy and confidentiality

Will my organisation be identified?

No. You can choose to provide your organisation's name to help with data quality checks (such as identifying duplicate responses), however this is optional and will not be included in any reporting.

How will data be managed?

Data will be managed in accordance with applicable privacy and information management requirements, stored securely, and used only for the stated purposes.

Support

Where can I go for assistance?

For further information or support, contact strategicworkforce@mhc.wa.gov.au.

Table 1. Service Stream Map - Mental Health

Service streams	Service sub-streams	Description	Examples
Prevention and Promotion	Public education and health promotion	Whole-of-community and targeted initiatives that promote mental wellbeing, increase mental health literacy, reduce stigma and support early help-seeking. This includes non-clinical education delivered by health or primary care providers (such as GPs) to communities or groups.	Examples include mental health awareness campaigns, suicide prevention campaigns, workplace wellbeing initiatives, school wellbeing education programs, community education events and mental health literacy programs.
	Supportive systems, settings, and environments	Activities that create environments and systems that promote mental wellbeing and reduce mental health risks across communities and settings (e.g. local government, sporting and community settings and Peak bodies).	Examples include development of wellbeing programs, workplace mental health initiatives, mentally healthy workplace frameworks, organisational wellbeing policies and sector-wide awareness and advocacy initiatives.
	Community development and action	Community-led and place-based activities that strengthen community and workforce capacity to promote mental wellbeing and prevent mental health harms.	Examples include school and workplace wellbeing programs, and coordinated local responses.
	Suicide prevention	Initiatives focused on reducing suicide and suicidal behaviour, including prevention, postvention and aftercare supports.	Examples include community suicide prevention programs, gatekeeper training, suicide awareness campaigns, aftercare services, postvention support activities and coordinated local suicide prevention initiatives.
	Social and emotional wellbeing	Holistic, culturally grounded programs supporting Aboriginal social and emotional wellbeing across connection to culture, family, community and country.	Examples include cultural healing programs, on-country activities, Aboriginal community wellbeing initiatives, family and community connection programs, cultural mentoring and social and emotional wellbeing programs led by Aboriginal organisations.
Community Support	Individual and group support	Non-clinical psychosocial supports provided to individuals or groups to support recovery, daily living, community participation and connection to services and NDIS-funded psychosocial supports.	Examples include peer support programs, psychosocial support services, recovery programs, social connection activities and life skills support.
	Family and carer support	Services providing information, education, peer support and flexible assistance to families, carers and significant others of people experiencing mental health issues.	Examples include family psychoeducation, carer support groups, peer support for carers, advocacy, service navigation and flexible respite supports.
	Short-term transitional/ residential and/or crisis support	Short-term residential and/or crisis services providing intensive psychosocial support in community settings, outside hospital environments.	Examples include crisis accommodation, peer respite services, short-term residential support and recovery houses.
Community Treatment	Counselling and /or psychological support and intervention	Clinically led counselling and structured psychological interventions supporting treatment and recovery.	Examples include counselling, psychology services, family therapy and group therapy programs.
	Primary care	Mental health care delivered through primary care services, including assessment, treatment and ongoing management.	Examples include General Practice, Aboriginal Medical Services and other community health services.
	Phone and/or virtual treatment or support	Telephone or digital supports providing assessment, care coordination or intervention.	Examples include telephone counselling, crisis helplines, telehealth services and online mental health support.
	Intensive day programs	Structured, non-residential programs providing intensive therapeutic support and multidisciplinary care during the day.	Examples include day therapy programs, therapeutic group programs and structured day treatment programs.

Table 1. Service Stream Map - Mental Health

Service streams	Service sub-streams	Description	Examples
Community Bed-Based	Mental health non-acute short stay	Short-term residential services providing intensive support in community settings, including Step Up / Step Down care.	Examples include supported accommodation, staffed residential services and long-term community housing support.
	Mental health rehabilitation and recovery accommodation	Time-limited residential programs supporting recovery and reintegration into the community.	Examples include rehabilitation accommodation, transitional housing and recovery accommodation programs.
	Long-term supported accommodation	Longer-term residential support for people with ongoing mental health needs.	Examples include supported accommodation, staffed residential services and long-term community housing support.
	Long stay residential aged care	Residential aged care services providing long-term accommodation and support for older people with complex mental health needs.	Examples include specialist aged care services and residential aged care for older people with complex mental health needs.
Hospital-Based	Hospital in the home	Hospital-level mental health treatment delivered in the home with clinical oversight.	Examples include mental health treatment provided at home and home-based clinical care.
	Consultation liaison	Hospital-based mental health assessment, advice and care coordination.	Examples include hospital mental health assessment services, liaison teams and referral services.
	Acute, sub-acute and non-acute inpatient units	Hospital-based mental health assessment, treatment and ongoing care.	Examples include psychiatric wards, mental health inpatient units and recovery units.
	Mental health observation areas	Designated areas within hospital settings providing short-term observation, assessment and stabilisation for people experiencing acute mental health distress.	Examples include observation units and mental health emergency assessment areas.
	Emergency and crisis support	Emergency department and crisis response services for people experiencing acute mental health distress.	Examples include emergency department mental health services, crisis response teams and acute care services.
Forensic	Services in prison and detention	Mental health care and psychosocial supports delivered within prisons and detention facilities.	Examples include prison mental health services and detention centre mental health support.
	Specialised bed-based mental health care services	Secure or specialised residential mental health services providing intensive assessment, treatment and rehabilitation for people within forensic or justice-related contexts.	Examples include secure mental health units, forensic mental health services, forensic psychiatric services and specialist inpatient mental health services.
	Specialised transitional and psychosocial support	Community-based psychosocial supports for people transitioning from forensic mental health services.	Examples include forensic transition support services, psychosocial support programs, recovery support services and community reintegration services.
	Court liaison and support	Mental health assessment and support linked to court processes.	Examples include court assessment services and court-based mental health support.
	Public liaison and support	Mental health support linked to policing and justice responses.	Examples include police co-response services and mental health liaison services.

Table 2. Service Stream Map - Alcohol and Other Drugs

Service streams	Service sub-streams	Description	Examples
Prevention and Promotion	Public education and health promotion	Whole-of-community and targeted initiatives that build knowledge, skills and awareness to prevent or delay harmful alcohol and other drug use, reduce stigma and promote help-seeking (e.g. campaigns, school-based programs). This includes non-clinical education delivered by health or primary care providers (such as GPs) to communities or groups.	Examples include school education programs, community awareness campaigns, social media campaigns, public information sessions, workplace education programs and alcohol and other drug prevention campaigns.
	Supportive systems, settings, and environments	Activities that create supportive environments and systems that reduce risk and increase protection from alcohol and other drug-related harm (e.g. local government, licensed premises, sporting and community settings and Peak bodies).	Examples include local government policies, liquor licensing initiatives, sporting club alcohol management programs, workplace alcohol and other drug policies, safer community initiatives and sector-wide awareness and advocacy initiatives.
	Community development and action	Community-led and place-based activities that strengthen local capacity to prevent and reduce alcohol and other drug-related harm.	Examples include community development programs, community mobilisation initiatives, Local Drug Action Groups, coordinated local responses, community partnerships and other place-based initiatives.
Community Support	Individual and group support	Non-clinical psychosocial and recovery supports that assist individuals to improve wellbeing and reduce alcohol and other drug related harm, including peer support, service navigation, advocacy and information.	Examples include peer support programs, psychosocial support services, recovery support programs, support groups, service navigation, advocacy services, consumer recovery programs, and alcohol and other drug treatment or support groups.
	Supported accommodation	Short- to medium-term community-based accommodation providing non-clinical support to people with alcohol and other drug-related needs, excluding bed-based treatment services.	Examples include recovery housing, transitional accommodation, supported accommodation and community living support programs.
	Safe places for people who are intoxicated	Non clinical services providing a safe, supervised environment for people who are intoxicated.	Examples include sobering up centers and community patrol services.
	Harm reduction	Services and programs that reduce harms associated with alcohol or other drug use, such as needle and syringe programs, overdose prevention, outreach and safer-use education.	Examples include needle and syringe programs, overdose prevention initiatives, outreach services and safer use education.
Community Treatment	Counselling and /or psychological support and intervention	Clinically led alcohol and other drug counselling, pharmacotherapy, case management and group work to address alcohol and other drug-related harm.	Examples include counselling services, pharmacotherapy programs, case management services and group treatment programs.
	Primary care	Alcohol and other drug treatment delivered within primary care settings, including assessment, treatment and ongoing management.	Examples include General Practice, Aboriginal Medical Services and community health services.
	Phone and/or virtual treatment or support	Treatment, counselling or advice delivered via phone or digital platforms.	Examples include telephone counselling, telehealth services, online treatment programs and referral services.
	Day rehabilitation	Structured, non-residential programs providing intensive alcohol and other drug treatment and rehabilitation in community settings.	Examples include day rehabilitation programs, structured treatment programs and outpatient rehabilitation services.



Table 2. Service Stream Map - Alcohol and Other Drugs

Service streams	Service sub-streams	Description	Examples
Community Bed-Based	Low medical withdrawal	24-hour supervised residential services providing withdrawal management and stabilisation for alcohol and other drug use.	Examples include withdrawal services, detoxification programs, Step Up / Step Down services, and short-stay residential support services.
	Residential rehabilitation	Live-in, voluntary treatment programs supporting recovery from alcohol and other drug use through structured therapeutic activities.	Examples include residential rehabilitation programs, therapeutic communities and healing programs.
	Post residential accommodation	Supported accommodation for people transitioning back into the community following residential alcohol and other drug treatment.	Examples include recovery accommodation, transitional housing and community reintegration support.
Hospital-Based	Hospital in the home	Hospital-level alcohol and other drug treatment, delivered in the person's home.	Examples include home-based withdrawal support and hospital-level treatment provided at home.
	Consultation liaison	Hospital-based assessment, brief intervention and referral linking patients to community alcohol and other drug services.	Examples include hospital-based alcohol and other drug assessment services, referral services and liaison teams.
	High/complex medical withdrawal	Inpatient medical services providing supervised withdrawal for people with complex alcohol or other drug needs.	Examples include inpatient withdrawal units, hospital detoxification services and medically supervised withdrawal.
	Behavioural assessment urgent care centres	Assessment and short-term intervention services providing rapid clinical support for people presenting with urgent alcohol and other drug-related needs, aiming to stabilise and refer to appropriate ongoing care.	Examples include behavioural assessment centres, urgent assessment centres and short-term stabilisation services.
Forensic	Diversion	Services that redirect people with alcohol and other drug-related issues away from the justice system and into assessment, treatment and support.	Examples include police diversion programs, court diversion programs and treatment referral pathways.
	Community linked services	Non-clinical psychosocial support services for people engaged with forensic alcohol and other drug services and their families.	Examples include family support services, peer support services and forensic community support programs.
	Forensic community assessment and treatment	Community-based assessment, case coordination and treatment services supporting people with alcohol and other drug use, including linkage to clinical and psychosocial supports.	Examples include forensic assessment services, case management services and community treatment services.
	Law enforcement and public safety	Alcohol and other drug-related services delivered in law enforcement and public safety contexts.	Examples include community patrol services, public safety initiatives and police partnership programs.
	Prison-based services	Alcohol and other drug assessment, treatment and psychosocial support delivered in custodial settings.	Examples include prison counselling services, rehabilitation programs, treatment services and pharmacotherapy programs.



Table 3. Service Stream Map - Mental Health and Alcohol and Other Drugs

Service streams	Service sub-streams	Description	Examples
Prevention and Promotion	Public education and health promotion	Whole-of-community and targeted initiatives that build knowledge, skills and awareness to prevent or delay alcohol and other drug harms, promote mental wellbeing, increase mental health literacy, and reduce stigma and support help seeking.	Examples include mental health awareness campaigns, alcohol and other drug prevention campaigns, workplace wellbeing initiatives, school education programs, suicide prevention campaigns and community education activities.
	Supportive systems, settings, and environments	Activities that create supportive environments and systems that promote mental wellbeing, reduce risk factors and increase protection from alcohol and other drug harms and mental health issues (e.g. local government, licensed premises, sporting and community settings and Peak bodies).	Examples include development of community wellbeing programs, local government wellbeing initiatives, organisational wellbeing policies and community safety initiatives, sector-wide awareness and advocacy initiatives.
	Community development and action	Community-led and place-based activities that strengthen community and workforce capacity to prevent and reduce mental health and alcohol and other drug harms.	Examples include Local Drug Action Groups, suicide prevention initiatives, mental health awareness campaigns, school and workplace wellbeing programs, and coordinated local responses.
	Community development and action - Suicide prevention	Initiatives focused on reducing suicide and suicidal behaviour, including prevention, postvention and aftercare, addressing contributing mental health and alcohol and other drug factors.	Examples include community suicide prevention programs, gatekeeper training, suicide awareness campaigns, aftercare services, postvention support activities and coordinated responses addressing both suicide risk and alcohol and other drug related factors.
	Community development and action - Social and emotional wellbeing	Holistic, culturally grounded programs supporting social and emotional wellbeing across connection to culture, family, community and country, addressing mental health and alcohol and other drug related needs.	Examples include cultural healing programs, on-country activities, Aboriginal community wellbeing initiatives, culturally secure alcohol and other drug programs, family and community connection programs and Aboriginal-led social and emotional wellbeing initiatives.
Community Support	Individual and group support	Non-clinical psychosocial supports that assist individuals or groups to reduce alcohol and other drug related harm, improve wellbeing, support recovery and strengthen community participation, including NDIS-funded psychosocial supports.	Examples include peer support programs, psychosocial support services, recovery support programs, support groups, service navigation, advocacy services, and consumer recovery programs, alcohol and other drug treatment or support groups.
	Supported accommodation	Community-based accommodation providing non-clinical / psychosocial support to people experiencing mental health and/or alcohol and other drug issues.	Examples include supported accommodation, transitional accommodation, recovery housing and community-based living support programs.
	Safe places for people who are intoxicated	Non clinical services providing a safe, supervised environment for people who are intoxicated (e.g. sobering up services, patrols).	Examples include sobering up centers, safe places for intoxicated people and community patrol services.
	Harm reduction and mental health and wellbeing support	Services and programs that aim to reduce harms associated with alcohol and other drug use and promote mental wellbeing, including education programs, wellbeing programs, overdose prevention and alcohol and other drug safer use strategies.	Examples include needle and syringe programs, overdose prevention initiatives, safer use education, outreach services, suicide prevention activities and community wellbeing initiatives.
	Family and carer support	Services providing information, education, peer support and practical assistance to families, carers and significant others supporting people with mental health and/or alcohol and other drug issues.	Examples include family education, carer support groups, peer support for carers, advocacy, service navigation and practical supports for families, carers and significant others.

Table 3. Service Stream Map - Mental Health and Alcohol and Other Drugs

Service streams	Service sub-streams	Description	Examples
Community Treatment	Counselling and /or psychological support and intervention	Clinically led counselling, pharmacotherapy, case management and structured psychological interventions to address alcohol and other drug and/or mental health related needs.	Examples include counselling services, psychology services, cognitive behavioural therapy, family therapy, pharmacotherapy programs, case management services and treatment programs.
	Primary care	Mental health and/or alcohol and other drug care delivered through primary care settings, including assessment, treatment and ongoing management of mental health and/or alcohol and other drug needs.	Examples include General Practice, Community Alcohol and Drug Services, Aboriginal Medical Services and other community health services.
	Phone and/or virtual treatment or support	Treatment, counselling, assessment or support delivered via phone or digital platforms.	Examples include crisis helplines, telephone counselling, telehealth services, online counselling services, virtual psychology appointments and online treatment programs.
	Intensive day programs	Structured, non-residential programs providing intensive alcohol and other drug and or therapeutic treatment, rehabilitation and multidisciplinary support in community settings for people with mental health and/or alcohol and other drug needs.	Examples include day rehabilitation programs, therapeutic day programs, mental health day therapy programs, structured treatment programs and multidisciplinary day programs.
Community Bed-Based	Long stay residential aged care	Residential aged care services providing long-term accommodation and support for older people with complex mental health and/or alcohol and other drug needs.	Examples include residential aged care services, specialist aged mental health services and aged care services for people with complex mental health and/or alcohol and other drug needs.
	Community bed-based treatment and support	Residential services providing 24-hour staffed support in community settings, including withdrawal management, treatment, rehabilitation and recovery support for people with mental health and/or alcohol and other drug needs.	Examples include withdrawal services, detoxification programs, Step Up / Step Down services, short-stay residential support services
	Residential rehabilitation and recovery accommodation	Residential programs supporting rehabilitation, recovery and reintegration into the community for people with mental health and/or alcohol and other drug needs.	Examples include residential rehabilitation programs, therapeutic communities, longer term mental health rehabilitation services, Aboriginal healing programs.
	Transitional / post-residential accommodation	Supported accommodation for people transitioning from residential treatment or intensive services, providing stability and connection to ongoing care.	Examples include transitional housing, recovery accommodation, tenancy support services, supported reintegration programs and community reintegration support.
Hospital-Based	Hospital in the home	Hospital-level mental health and alcohol and other drug treatment delivered in the home with clinical oversight.	Examples include psychiatric hospital in the home services, home-based withdrawal programs, acute treatment at home and home-based clinical care.
	Consultation liaison	Hospital-based assessment, brief intervention, advice and referral linking patients to community mental health and alcohol and other drug services.	Examples include hospital-based mental health assessment services, alcohol and other drug assessment services, consultation liaison teams and referral services.
	Emergency and crisis support	Emergency department and crisis response services for people experiencing acute mental health distress.	Examples include emergency department mental health services, crisis response teams, acute care teams, suicide crisis services and mental health emergency services.



Table 3. Service Stream Map - Mental Health and Alcohol and Other Drugs

Service streams	Service sub-streams	Description	Examples
Hospital-Based	Inpatient assessment, treatment and stabilisation	Hospital-based inpatient services providing acute, sub-acute and non-acute assessment, treatment, withdrawal management and stabilisation for people with mental health and/or alcohol and other drug needs.	Examples include psychiatric wards, mental health inpatient units, withdrawal units, inpatient detoxification services, sub-acute units and hospital stabilisation services.
	Short-term observation and/or urgent care centres	Services providing short-term observation, assessment, stabilisation and urgent intervention for people experiencing acute mental health distress and/or alcohol and other drug-related needs.	Examples include Mental Health Observation Areas, Mental Health Emergency Centres, behavioural assessment centres and short-term stabilisation services.
Forensic	Diversion	Services that redirect people with mental health and/or alcohol and other drug-related issues away from the justice system and into assessment, treatment and support, including court liaison, assessment and referral pathways.	Examples include police diversion programs, court diversion programs, mental health court support services, treatment referral pathways and justice diversion programs.
	Community linked services	Non-clinical psychosocial support services for people engaged with forensic alcohol and other drug services and their families.	Examples include psychosocial support services, peer support programs, family support services, forensic support services and community reintegration programs.
	Forensic community assessment and treatment	Community-based assessment, case coordination and treatment services supporting people with alcohol and other drug use, including linkage to clinical and psychosocial supports.	Examples include forensic assessment services, forensic treatment services, forensic case management and community treatment services.
	Services in prison and detention	Assessment, treatment and psychosocial support delivered within custodial settings for people with mental health and/or alcohol and other drug needs.	Examples include prison mental health services, prison alcohol and other drug services, prison counselling services, detention centre treatment programs and prison rehabilitation programs.
	Specialised bed-based mental health care services	Secure or specialised residential mental health services providing intensive assessment, treatment and rehabilitation for people within forensic or justice-related contexts.	Examples include secure mental health units, forensic mental health services, forensic psychiatric services and specialist inpatient mental health services.
	Specialised transitional and psychosocial support	Community-based psychosocial supports for people transitioning from forensic mental health services.	Examples include forensic transition support services, psychosocial support programs, recovery support services and community reintegration services.
	Law enforcement and public liaison support	Services delivered in partnership with law enforcement and public safety agencies, including co-response, liaison and support for people experiencing mental health distress and/or alcohol and other drug-related issues.	Examples include police and mental health co-response services, mental health liaison services, police diversion initiatives, community patrol services and public safety partnership programs.

