



**BLACK SWAN**  
Mental Health Services

# Psychosocial Support Services

**Helping to achieve better health, well-being, and recovery.**

Black Swan Health's Psychosocial Supports Program assists people with severe, persistent mental illness and their carers and families. We help individuals apply for NDIS and collaborate with multiple sectors to enhance our clients' health, well-being, and recovery.

**Our program is designed for individuals who:**

- Have long-term, severe mental health issues.
- Have needs that can't be addressed by a single support service.
- Struggle to get the help they need from other places.

**We connect clients with services that support:**

- Social skills and connections, including family connections.
- Day-to-day living skills.
- Financial management and budgeting.
- Finding and maintaining a home.
- Vocational skills and goals.
- Maintaining physical well-being, including exercise.
- Building broader life skills, including confidence and resilience.

We assist clients in developing tailored supports to improve health, wellness, and recovery. We help clients find the right places to get the assistance they need, coordinate various services to meet their specific needs, and find solutions to practical problems such as housing and health needs.



**Access the Services:**

- Refer into the program by completing the Booking / Inquiry Form online or on the back this flyer and submit it to Black Swan Health via fax (9201 0033) or email [psychosocial@blackswanhealth.com.au](mailto:psychosocial@blackswanhealth.com.au).
- Alternatively, self-refer over the phone by calling (08) 9201 0044.

**Enquire  
Now  
Contact Us**

Phone 1300 820 398 | (08) 9201 0044  
Email [psychosocial@blackswanhealth.com.au](mailto:psychosocial@blackswanhealth.com.au)  
[www.blackswanhealth.com.au](http://www.blackswanhealth.com.au)



## Psychosocial Support Services - Inquiry / Booking Form

<b>Eligibility Criteria:</b> What suburb do you live in? _____ <input type="checkbox"/> aged between 18 and 65 <input type="checkbox"/> have mental condition that affects day to day life <input type="checkbox"/> not currently receiving NDIS or similar supports	
<b>Supports Required:</b> <input type="checkbox"/> Interested in applying for NDIS <input type="checkbox"/> One-on-one support <input type="checkbox"/> Group support with activities <input type="checkbox"/> Service navigation	
Name:	Date of Birth:
Gender:	Ethnicity:
Phone:	Email:
Preferred mode of contact: email / text / call Can we leave a voicemail? Yes / No	Interpreter required? Language?
Address:	
How did you hear about our services?	
Remarks / further questions?	
Signature	Date: