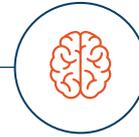
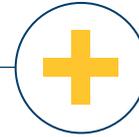


National Suicide Prevention Trial Activity Work Plan 2018-19

Overview



Country SA PHN is one of the National Suicide Prevention Trial sites, bringing significant resources, activity and funding to areas of need in regional South Australia. The trial is placed at a regional level to better respond to local needs, and identify new learnings in relation to suicide prevention strategies. Suicide Prevention strategy and activity is being implemented in to the Country North region through to mid-2019, with the main service hubs for activity being located at Whyalla, Port Augusta, Port Pirie, Port Lincoln and the Yorke Peninsula including capacity building spillage across Far West and Outback South Australia. The trial will adopt a system-based approach to the delivery of suicide prevention services, targeting populations identified at a local level as 'at-risk'. For the Country SA PHN region, three target groups were selected based on a needs assessment conducted within the region, including youth (12-24 years), adult males (25-45 years) and Aboriginal and Torres Strait Islander.

Overview

The work plan focuses on trial activities up until 30 June 2019 as follows:

- Planning and development activities beginning in 2017-18.
- Identification of service areas and target populations.
- Activities to be undertaken in 2018-19, including implementation in all focus areas.
- Indicative timelines and expenditure.

All sites participating in the National Suicide Prevention Trial are required to:

- Promote the development and trialling of strategies in communities with higher risk of suicide due to economic hardship or other circumstances.
- Focus on activities at a local level.
- Develop a systems-based approach to the delivery of suicide prevention services.
- Provide enhanced services for people who have attempted or are considered at higher risk of suicide, which builds upon base activities being undertaken by Primary Health Networks where appropriate.
- Trial strategies for preventing suicide attempts and deaths among one or more of four high risk populations:
 - Aboriginal and Torres Strait Islander peoples
 - Men, particularly in the very high-risk age range of 25 to 54 years
 - Young people
 - Veterans
- Gather evidence and participate in a comprehensive evaluation of their activity.

Key Partnerships

- Country Health SA Local Health Network
- headspace Port Augusta and Whyalla
- Port Augusta Aboriginal Advisory Group
- Aboriginal Community Engagement Group
- ACCHOs in the trial region
- South Australian Health and Medical Research Institute
- University Department of Rural Health, UniSA
- University of Adelaide- Rural Clinical School
- LGAs in the trial region
- Department of Education and Child Development
- Office of the Chief Psychiatrist, SA Health
- South Australian Police
- South Australian Ambulance Service, Country North Region

Identify the main elements of how this is to be undertaken and how this responds to local circumstances and needs

A systems approach to suicide prevention recognises that successful suicide prevention requires a multilevel, multifactorial approach. This requires both healthcare and community involvement and collaboration. It must also involve those with lived experience (those who have first-hand knowledge or experience of living with suicide behaviours and consequences).

To ensure that the systems approach is targeted to the areas of greatest need in the first instance, suicide death and attempt data was geospatially mapped to identify regions in Country SA with high death rates and hospitalisations related to intentional self-harm.

Furthermore, mental health services are generally recognised as being less available in rural and remote areas, where access to qualified specialist staff is limited. As a follow up to the evidence based data, community consultations have been/will be held



across LGAs with elevated suicide rates including face to face consultations/ teleconferencing and paper based surveys.

The regions selected were in the top seven highest for the Country North region. The Country North region was selected due to suicide prevention services being available in other regions with highest rates. Furthermore, within these regions, significant economic hardships have occurred as of late - with approximately 2500 jobs lost - having a profound impact on male mental health especially.

The trial in Country SA plans to utilise the Black Dog Institute's LifeSpan model as the system approach to integrated suicide prevention.

Establishment of a Community Working Group and engagement of relevant stakeholders and communities

- Development of a National Suicide Prevention Steering Committee membership
- Consumer and service provider suicide prevention survey will be re-distributed towards the end of the trial and compared with baseline data.
- Scheduled media releases to inform community of opportunities for engagement, promote activities and strategies being trialled in regions.
- Community working groups will be active predominantly throughout the planning/consultation period.
- Aboriginal and Torres Strait Islander regional forum: ACHHOs, Aboriginal led organisations and community members to be engaged in the trial zone. Port Augusta has long held cultural significance as a natural meeting place. As such CSAPHN will host regional forums and workshops with Black Dog Institute to support learning practices and aid knowledge exchange of Aboriginal led co design of best practice crisis and aftercare support on country.
- Future forums are planned to be held in all the major centres across the region (Port Pirie, Whyalla, Yorke Peninsula and Port Lincoln) targeting the target groups including youth, young and middle aged males and Aboriginal and Torres Strait Islander focussed sessions.

Input from people with lived experience

Community lived experience: existing suicide prevention networks in the Yorke Peninsula, Port Pirie, Port Augusta, Whyalla and Port Lincoln regions will be engaged as key stakeholders and act as a conduit and support mechanism for community lived experience engagement and consultation throughout the life of the trial.

Aboriginal and Torres Strait Islander: key Aboriginal community leaders from each region will lead and support the steering committee in identifying culturally appropriate input and feedback mechanisms.

Youth lived experience: engagement mechanism will be facilitated via Headspace, whom are currently providing services in Port Augusta, Port Pirie and Whyalla. Face to face individual, group and digital options for input in planning and feedback of services will be explored. Youth reference group will be consulted with options to meet with and inform the steering committee strategy.

Wider engagement approaches will be adopted if necessary and supported via Suicide Prevention Australia's Lived Experience Network. A lived experience survey is a means of achieving this.

Main trial activities and approach

Project Management and Coordination

NSPT Coordinator

- Ongoing facilitation and coordination to drive and assist project activities within the National Suicide Prevention Trial. The position will continue to engage a range of internal and external organisations, to ensure coordination of evidence-based suicide prevention activities across the region.

Suicide Audit

- CSAPHN will continue to work with the Black Dog Institute to find a suitable mechanism and data sets to conduct a Suicide Audit within the trial region.

Regional Outcomes

- Ongoing leadership and advocacy for a SA formalised referral mechanism after death by suicide from first responders (Police and Ambulance) and SA postvention response providers.

Client Services & Community Capacity Building

Commissioned Services

- Emergency and Follow up Care for suicidal crisis in the Yorke Peninsula, Port Pirie, Port Augusta, Whyalla and Port Lincoln.
- Trial of an Indigenous specific Emergency and Follow up Care for suicidal crisis service with the Aboriginal community in Port Augusta.
- NSPT Youth project officer role within regional headspace centre to target youth population and coordinate all youth strategy and activity as part of trial. NSPT Youth project officer will work closely with NSPT co-ordinator.
- Trial - You Me Which Way (YM-WW), a culturally appropriate suicide prevention training program in up to five selected Aboriginal and Torres Strait Islander communities within the NSPT region. YM-WW has previously been evaluated in Queensland. CSAPHN are supporting local adaption and evaluation of YM-WW in a regional SA context. YM-WW will enhance capacity for local community leaders and natural helpers to deliver culturally appropriate training to community.



Capacity Building

- Allocation of funds (Small Grants) for regional Suicide Prevention Networks (SPN) to undertake activities which improve mental health literacy, decrease stigma, increase help seeking behaviours and build community capacity and confidence in suicide prevention.
- Explore the use and appetite for an electronic, mental health screening tool to be used in General Practitioner practice waiting rooms.

Professional Development & Training

- Targeted opportunities for community, workforce and health professionals to access best practice evidence base suicide prevention training via online and face to face modalities.
- Forums across the trial region to bring together a select group of expert clinicians, researchers and consumers with lived experience. Combining presentation and interactive discussion, the forums will aim to provide participants with intimate access to the knowledge and expertise of the speakers with a focus on suicide prevention. Focus topics will be a result of the NSPT consultation findings.
- Continuation of advocating and supporting the regional roll out of SA Health's 'Connecting with People' Training for commissioned services under the NSPT and identified frontline staff in the trial region to ensure commonality in language, assessment and risk stratification of suicidal clients.

School Communities

- Working collaboratively with Department of Education and Child Development (DECD) identifying suitable school-based programs focused on increasing help-seeking, mental health literacy, and knowledge of suicide warning signs and help strategies for both staff and students.
- Funding of evaluated trainings Youth Aware of Mental Health (YAM), Question Persuade Refer (QPR) and Applied Suicide Intervention Skills Training (ASIST) in identified schools.

Geographical areas where services are to be provided and relevant community issues that led to areas being selected

Northern Country Region, inclusive of Eyre and Flinders, Yorke and Northern with capacity building spillage across Far West and Outback.

Main service hubs for activity will be located at Whyalla, Port Augusta, Port Pirie and Port Lincoln.

Data sources showed increased suicide behaviours and death due to suicide in the chosen communities. The geographical positioning of trial allows for whole of region effect and creation of communities of practice.

Targeted populations

The Country SA PHN trial region will target three of the four possible population groups, Aboriginal and Torres Strait Islander, Young and Middle-Aged Males and Youth.

Services/interventions to be delivered for each target area/population

Aboriginal and Torres Strait Islander peoples

- Community consultations in each region;
- Aboriginal Aftercare Service for Improved Emergency and Follow up Care for Suicidal Crisis in Port Augusta;
- Commissioning of the You, Me, Which Way program to deliver culturally appropriate suicide prevention training to be delivered throughout the trial region;
- Commissioning of culturally driven suicide prevention strategies throughout the trial region.

Young and Middle Aged Males

- Suicide Prevention Network targeted activities;
- Funded QPR training for identified male community groups;
- Industry engagement. Consultation with national suicide prevention service providers Mates in Construction & Oz Help to target opportunities for male dominated industry in the trial region;
- Peer to Peer suicide prevention activities.

Youth

- Establishment and support of Youth reference group;
- Partnership with DECD to provide YAM workshops year 8-9 students at schools identified as high needs or at risk of poor mental health outcomes in the trial region. QPR training for teachers, general staff. ASIST for targeted counselling and wellbeing staff creating a layered and three-tiered community of mental health literacy and suicide awareness, knowledge and intervention skills;
- NSPT Youth Project Officer to coordinate and drive youth strategy and activity across sectors;
- Commissioning of youth driven suicide prevention strategies throughout the trial region.

Enhanced services for people who have attempted or are at higher risk of suicide

Aftercare services

Post suicide attempt is an identified gap in the trial region. The Emergency Care and Follow Up for Suicidal Crisis service is a new suicide prevention model aimed at increasing protective factors and saving the lives of one of the population groups most at-risk of suicide: people who have attempted suicide or those at risk of suicide and lacking support.



The key goals of the Emergency and Follow up Care for Suicidal Crisis are to:

- Help a person stay safe and connect with existing health and community services during a period of high risk and vulnerability;
- Actively integrate the service with Country Health SA Local Health Network (CHSALHN) services, Community Mental Health Teams, General Practice, CSAPHN commissioned services, and other key services;
- Improve access and coordination of adequate level of primary mental health care intervention to maximise engagement, recovery and prevent escalation;
- Referral pathways: Referral and intake processes are established and operating via providers centralised intake system;
- Cultural adaptation to After Care services to support Indigenous communities;
- Commissioning of Aboriginal and Torres Strait Islander Aftercare Service. The service was co-designed by local aboriginal people and key stakeholders, guided by key principles identified by the ATSIPEP report and national Aftercare models which have evidence base evaluations;
- Facilitate meetings between the LHN, Emergency Department, Community Mental Health team and the local ACCHO to have shared guidelines for implementation and referrals mechanisms across acute, primary and community sectors for the Aboriginal Aftercare service.

Data Collection

- We are continually working towards quality improvement in this space and all individuals/organisations to be commissioned to provide trial services that fall under the scope of the Primary Mental Health Care (PMHC) Minimum Data Set (MDS) will also be managed and monitored for compliance.
- To ensure the best quality data is obtained from the trial, Country SA PHN aims to create a combination of both the PMHC MDS and the National Suicide Prevention (NSP) Minimum Data Set (MDS), like the example provided in the Evaluation framework dispersed in April. Additionally, we aim to work with the assigned evaluator to aid and assist their data collection, this process has thus far been halted due to late assignment of the evaluation team.
- A NSPT survey has been distributed as part of the consultation phase of the trial for community members and service providers to complete. The data was compiled and summarised in March 2018 to advise further trial activity post June 30, 2018.
- Engagement with South Australian Ambulance Service to gather monthly data regarding suicide attempts and suicides in the Whyalla region with plans to expand out to other service hubs across the region.

