NATIONAL SUICIDE PREVENTION TRIAL Work plan covering activities in 2018-19

This Activity Work Plan is an update to the 2017-18 Activity Work Plan submitted to the Department in May 2017. This plan focuses on trial activities up until 30 June 2019.

All sites participating in the National Suicide Prevention Trial (the 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.

Work plans are to identify major activities in all stages of the trial that relate to these objectives.

Activities should be restricted to those undertaken in the 2018-19 financial year, irrespective of whether these are in part of the year only or extend beyond the financial year.

All work plans are to be assessed to ensure that activities are in line with the parameters of the National Suicide Prevention Trial as specified in the *National Suicide Prevention Trial: Background and overview.*

ACTION AREA	INFORMATION REQUIRED
Summary of main activities	Provide a brief description of activities to be undertaken
	WNSW PHN proposed in its work activity plan submitted to the Department on 6 November 2017 that it would undertake three components of work and these will continue during the 2018/19 financial year. The components are:
	 a) Commissioning the provision of local activities to be delivered by organisations in a <i>Northern Cluster</i> of four local government areas - Bourke, Brewarrina, Cobar and Walgett; b) Commissioning the provision of local activities to be delivered by organisations in a <i>Southern Cluster</i> of two local government areas - Lachlan and Weddin; c) Commissioning the delivery of activities of <i>cross-regional activities</i> to be delivery by organisations with relevant expertise.
	Across the Northern and Southern Clusters providers are required to:
	 i) Establish a Regional Coordinating Advisory group and local (LGA based) working groups to develop a regional suicide prevention plan. The regional plan will be informed by the plans developed by each local working group. The plans will respond to local needs and align with the systems-based "Lifespan" approach developed by the Black Dog Institute. It will include steps to build the capacity and promote integration of services as well as specific evidence based strategies for: workforce development and community gatekeeper training; community and media awareness raising; work in schools and other initiatives that address suicide risk factors in local communities. ii) Employ a local Trial workforce to support the work of the Regional Advisory Group, local working committees and organise activities. iii) Monitor and submit invoices to WNSW PHN for expenditure of a flexible pool of funds allocated for the Regional Advisory Group to use in accordance with the plan(s) they and the local working groups develop.
	The four cross-regional activities are:
	 i) Commissioning research and stakeholder consultations on crisis support and after care services; and then the development, trial and evaluation of a new (probably community based) services. ii) Commissioning a workforce capacity building project to recruit and support 12 local residents to complete a relevant Cert III or IV qualification. iii) Engaging and consulting with people with lived experience across the Trial Sites, and depending on results, the establishment and support of a network for Indigenous and non-Indigenous people. iv) Conducting Information sessions in each cluster about relevant e-mental health resources available.
	Identify major milestones and critical dates where relevant

	Com	ponent	Progress
	Commission Southern Cl	uster	Organisation commissioned and project staff employed.
	Commission Northern Cl	uster	Senior worker being recruited by WNSW PHN. Local providers identified and negotiations progressing for employment of local project staff.
	Commission Workforce	Capacity Building Project	Organisation commissioned and recruitment for staff occurring. Negotions for tailored TAFE course progressing.
	Commission Crisis and A	ftercare service research	Researcher commissioned; report due 26 March. Trial and evaluation of service schedule for 1 Jul 2018– 31 Jun 2019.
	Engaging People with liv	ed experience	Arranged visit by Roses in the Ocean CEO in Dec 2017 to discuss plans and currently being finalised.
	Information sessions abo	out E-mental Health	First community session planned for Northern Cluster March 2018.
Key partners	 respective roles and re progress in establishin formal and/or information 	ng key partnerships for new	activities this financial year arrangements to support partnerships
	Component		Key partnerships & roles
	Southern Cluster	 Lachlan and Weddin LG/ a) Planning and deliver community and ser b) Focussing on the for particularly those and community and community and community and ser b) Focussing on the for particularly those and community the development and community a	llowing 'at risk' populations: Indigenous people; young people; males, ged 25-54 years in the mining and agricultural industries. on of Trial work across local health, welfare and emergency services,

Norther	 e) The development of clear service agreements and referral pathways between current providers of suicide prevention, crisis support, after care and bereavement services. f) Workforce training strategies suitable for those in roles ranging from first responders, to front line staff, generalist and specialist practitioners. g) Community gatekeeper training strategies. i) Community awareness raising strategies. i) Work in schools to promote mental health and build resilience. j) Engagement of local media to ensure responsible reporting of mental illness/ suicide. k) The identification of procedures for supports be provided following a death by suicide (including Indigenous specific interventions) i) Other innovative responses to local need. m) Supporting the participation of people with lived experience on regional and local committees. This includes working with WNSW PHN in their organising of training for people with lived experience and the establishment of a group(s). n) Working in collaboration with the PHN in their commissioning of research into alternative models for crisis and aftercare services and the trial of such a service. o) The use of culturally appropriate and safe processes and initiatives. n Cluster WNSW PHN is currently negotiating contracts with Outback Division of General Practice, Bourke Aboriginal Medical Service and Walgett Aboriginal Media Service to fund employment of a project worker in each of the four LGAs. Those workers will be supervised by the senior worker currently being recruited by WNSW PHN and their responsibilities will largely be the same as those listed above for the Southern Cluster. A North Western NSW Suicide Prevention Regional Advisory Group was established in October 2017 and consists of senior regional representatives of Police, Ambulance, Department of Education, Local Health Districts (Mental Heal
	 A contract has been signed with Western Plains Regional Development Inc to deliver the Project Workforce Capacity Building Project across all six Trial LGAs. Their responsibilities include: a) Recruiting local residents with an interest in and capacity to complete a Certificate III qualification in Community Services or relevant Certificate IV (with subjects in suicide prevention/ crisis support). b) Providing participants with financial support to cover the costs of their education. c) Maintaining regular contact with each participant and ensure that any personal or educational problems are identified and responded to early.

Crisis and Aftercare service research	 d) Arranging for participants to undertake practical components of their course and/or other regular voluntary work with local organizations undertaking suicide prevention work. e) Develop and maintain a partnership with Western NSW TAFE to develop Cert III course for participants that includes crisis intervention and bereavement support subjects. f) Develop and maintain partnerships with commissioned providers in the Northern and Southern Clusters to provide relevant work experience in local Trial activities. Argyle Research P/L has been engaged to undertake the research and their responsibilities are: a) Provide a scan of peer-reviewed and grey literature concerning: The main types of support that individuals and their carers may seek in times of suicidal crisis, including after a suicide attempt. The nature and effectiveness of hospital based crisis and aftercare support services (including outpatient Mental Health services). The nature and effectiveness of other non-hospital based support services for relevant/related conditions such as mental illness crisis, high risk drug and alcohol intoxication. b) Identify models of services and support projects showing promise. Comment on their curves and support projects showing promise.
	 b) identify models of services and support projects showing promise, comment on their suitability for rural and remote communities with high proportions of Indigenous residents and males engaged in agricultural and mining industries. c) Make recommendations for a service model to be trialled by WNSW PHN for a 12 month period. d) Make recommendations for an evaluation methodology for the trial service.
	Argyle Research have been introduced to Roses in the Ocean and Black Dog Institute.
Engaging People with lived experience	Developing partnership with Roses in the Ocean
General	We have started conversations with The Centre of Best Practice in Aboriginal and Torres Strait Islander Suicide Prevention with a view to having their staff visit Trial communities from Mar - June 2018. This will support commissioned services in using the ATSISPEP planning tools.
	With 2017/18 funds from the flexible mental health fund, WNSW PHN has commissioned Wesley Lifeforce to establish Indigenous Suicide Prevention Networks across our entire catchment. We have since requested that priority be given to Trial site LGA's with a view to

	networks also taking on the role of local working committees to develop local plans for the Trial. Wesley have also been engaged with NSPT funds to facilitate a one-day planning session with the Northern Cluster Regional Advisory group and this will also be offered to the equivalent group in the Southern Cluster.		
Enhanced services for	Describe activities to be undertaken, including referral pathways and services.		
people who have attempted or are at higher risk of suicide	In preparation for the Suicide Prevention Trial, WNSW PHN contracted the Centre for Rural and Remote Mental Health to consult with service providers and communities across the northern cluster of local government areas. One theme identified was dissatisfaction with or suspicion of having to use Police and Hospital Emergency Department services when a person is in suicidal and/or mental health crisis. This was a particular concern for Aboriginal community members.		
	We are also aware that research on client's perspectives of Emergency Department support following a suicide attempt has reported low levels of satisfaction with care during hospitalisation and also poor follow-up after discharge.		
	In response to these issues, WNSW PHN contracted research on crisis and aftercare support services as described above. It is our intention to trial and evaluate the model proposed by the researchers in the 2018/19 financial year and we can provide specific details about the nature of the service when they are available.		
	We are currently having early discussions with existing services who may have the capacity to quickly establish and conduct the service once the model is finalised. These are services that already have General Practitioners, Psychologists and community workers on staff.		
	Identify how these activities differ from PHN base activities funded from the mental health flexible funding pool		
	Suicide prevention services currently commissioned by WNSW PHN from flexible funds are either seeking to engage relevant Local Health District units with a view to improving referral pathways and/or providing psychosocial support or group programs for people who have attempted suicide.		
Areas for focussed activity	Identify any new areas or populations being targeted this financial year		
	No new populations or areas are being targeted beyond what was identified in the updated Activity Work Plan approved in November 2017, that is:		
	 Aboriginal and Torres Strait Islander people Men in Farming and Mining industries Youth – focussing on Aboriginal and Torres Strait Islander people 		

	Provide supporting evidence where available
	Summarise where and what services are to be provided for each target area and population this financial year.
	All of the providers commissioned to deliver activities in the Northern and Southern Clusters are or will be required to meet key performance indictors in their contracts concerning priority populations. The specific nature of these are to be developed in consultation with the local needs of the priority populations. The Workforce Capacity Building project is to focus on recruiting participants from the target groups. The Crisis and Aftercare Research Project is to make recommendations about a service model that would be suitable for a rural/remote context with higher percentage of residents from the target groups
Other suicide prevention	Identify any new initiatives being implemented within the trial area(s) and who is responsible for these.
activity	No initiatives are being implemented beyond what was identified in the updated Activity Work Plan approved in November 2017
Recruitment and workforce	Identify any issues that may affect recruitment and/or commissioning of services as necessary to progress activities.
	As described in email communications with the Department in January this year, WNSW PHN experienced challenges negotiating with currently commissioned suicide prevention services (from flexible funding pool) in the Northern Cluster of LGA's because of the confusion about the need to separately deliver and account for NSPT and 'business as usual' activities. With the Department's approval, we consequently decided to directly recruit the senior worker for that cluster and given general difficulties in obtaining suitable workers, this will delay commencement of some local activities. WNSW PHN's Suicide Prevention Coordinator continues to support higher level activities such as the development of a regional suicide prevention plan by the North Western NSW Suicide Prevention Advisory Group established last October to oversee work for the trial in the Northern Cluster.
Data collection and	Confirm what data are being collected routinely on services and consumers, including outcome measures.
reporting	WNSW PHN has developed a reporting template for Southern and Northern Cluster providers to complete and submit according to the frequency schedule specified in their contracts. This is provided below and is designed to capture the broad range of sector development, workforce training and community awareness raising activities they will undertake.
	A bespoke reporting template will be developed for the Workforce Capacity Building Project provider to complete and will include both formative and summative outcome measures.
	The Crisis and Aftercare Research project will identify an evaluation methodology. This is the only trial activity to provide clinical/counselling support to individuals and providers will also be required to enter client details on the PMHC MDS.

	Identify any major ad hoc or one-off collections to be undertaken this financial year Nil. Identify any major issues affecting compliance with reporting requirements and how these are to be remedied No issues at this stage. We understand the Department is updating the old NSPP MDS and we request that as much notice as possible is provided about when this will go live as some of our contracted providers will need time to obtain the necessary software and training.
Other	<i>Identify any other major factors affecting conduct of trial activities not covered above</i> Although we have developed a budget and schedule to achieve all activities by Jun 2019, we have little to no capacity to absorb unexpected delays resulting from outside sources and/or difficulties in recruitment etc. Given our late start, large geographical distances to cover and higher proportions of Aboriginal and Torres Strait Islander communities (which require much longer time for consultation), we would welcome further consideration of whether an extension may be possible.
Transition arrangements	<i>Confirm arrangements or proposed strategies for managing the transition of consumers post the trial</i> All providers contracted are clearly informed about the trial being a one-off initiative that is due to conclude in Jun 2019. Only one initiative – the Crisis and Aftercare support service will deliver support services to individuals and their tender and contract will clearly articulate a need to have a plan, process and timeframe to transition clients to other services if they require further assistance after the service finishes.