

*Western NSW PHN*

**NATIONAL SUICIDE PREVENTION TRIAL  
Work plan covering activities in 2019-20**

ACTION AREA	INFORMATION REQUIRED
<p><b>Summary of main activities</b></p>	<p>WNSW PHN will continue to have a mix of activities across the six trial site local government areas. The local government based projects are applying a hybrid systems based approach based on the Lifespan model and recommendations of the ATISPEP report (2016):</p> <ul style="list-style-type: none"> <li>a) Northern Cluster (Cobar, Bourke, Brewarrina and Local Government Areas) <ul style="list-style-type: none"> <li>i) Cobar Local Suicide Prevention Project will continue to be run by Outback Division of General Practice. They will continue to undertake a range of community awareness raising, professional development, work in schools and strengthening of referral pathways in response to local community needs. Their focus populations are males in the mining industry, Aboriginal people and young people.</li> <li>ii) Walgett Local Suicide Prevention Project will continue to be run by Walgett Aboriginal Health Service. Like Cobar, they will continue to undertake a range of activities in response to local needs. Their focus populations are Aboriginal people and farming families.</li> <li>iii) Brewarrina Local Suicide Prevention Project will continue to be run by Walgett Aboriginal Health Service in response to local community needs. Their focus is Aboriginal community members.</li> <li>iv) Bourke Local Suicide Prevention Project</li> <li>v) A new project “Supporting remote community responses to suicidal behaviour and suicide.” This will be implemented in five small/remote Aboriginal communities/missions in the Local Government areas of Bourke, Brewarrina and Walgett.</li> </ul> </li> <li>b) Southern Cluster (Lachlan and Weddin Local Government areas) <p>The Southern Local Suicide Prevention Project will continue to be run by Western Plains Regional Development Inc. They will continue to undertake a range of community awareness raising, professional development, work</p> </li> </ul>

	<p>in schools and strengthening of referral pathways in response to local community needs. Their focus populations are Aboriginal people and farming families.</p> <p>c) Cross Regional Activities (working across the six local government areas):</p> <ul style="list-style-type: none"> <li>i) Workforce Capacity Building Project. This initiative is designed to address severe workforce shortages and build the pool of local residents with formal qualifications, knowledge and training to undertake suicide prevention work. During 2018/19 one group of 14 residents from the trial site LGA's are being supported to complete a Certificate IV in Community Services. In the next financial year we will (re)contract Western Plains Regional Development to recruit and support another group to either undertake a relevant Cert IV or Diploma course.</li> <li>ii) (New) Research project to develop pre/post measures of Social and Emotional Wellbeing for Aboriginal individuals participating in initiatives being undertaken in local communities. The measures will capture self-reported ratings of strength of connection to culture and community as well physical and mental wellbeing and other relevant/brief measures of quality of life. Following Departmental approval, we will undertake an open tender process with a view to contracting an academic unit with suitable expertise such as the Centre for Best Practice in Aboriginal and Torres Strait Islander Suicide Prevention.</li> <li>iii) (New) Development and trial of Hospital Emergency Department volunteer support service. The provider of the local suicide prevention project in the Southern Cluster has already engaged with relevant individuals in WNSW Local Health District and had preliminary discussions on arrangements for hospitals in those two communities. Pending Departmental approval, WNSW PHN will contract that provider to expand their initiative to include hospitals/multi-purpose centres across the Northern Cluster.</li> </ul>
<p><b>Key partners</b></p>	<p>National level partners:</p> <ul style="list-style-type: none"> <li>• University of Melbourne NSPT Evaluation team – provide support and updates with gathering data for the trial.</li> <li>• Sax Institute &amp; University of Western Sydney – have been collaborating with us to develop a Western NSW version of their computer based Suicide Prevention Decision Support tool.</li> </ul>

- Centre for Best Practice in Aboriginal and Torres Strait Islander Suicide Prevention – have assisted us with occasional expert advice and information to support our work in local Aboriginal communities.
- Black Dog Institute – have assisted us by arranging monthly teleconference (with Department representatives) to discuss progress/issues. We have also contracted BDI to deliver Advanced Suicide Prevention Training to GP's and psychologists/counsellors based in the trial sites.
- Wesley Lifeforce – collaborate with us to support the establishment and operation of Indigenous led community suicide prevention networks in a number of the trial site LGA's.

State, Regional and local level partners:

- As described above under the summary of main activities, WNSW PHN has contracted four different non-government organisations (including two ACCHO's) to deliver trial activities across six LGA's.
- Representatives of NSW Ambulance, Police, Western NSW LHD (Mental Health and Multi-Purpose Health Service Managers) and NSW Department of Education sit on the Regional Advisory Groups and local working committees established in the Northern and Southern Clusters and contribute to the monitoring and development of local activities. Separate and additional initiatives are also undertaken at the regional level, for example:
  - We are working with Western NSW LHD to develop and trial a voluntary support service for people who present at Emergency Departments.
  - We are working with the Regional Office of the Department of Education to plan and deliver professional development to teaching and wellbeing staff. We are also exploring if it is suitable and possible to roll-out YAM (a wellbeing program developed by BDI for Year 8 & 9 students) across schools in the trial sites.
- Trial site Regional Advisory Groups and/or LGA based Local Working Committees also have representatives of people with lived experience, Local Governments and relevant non-government organisations. These individuals contribute information, resources and advice about local needs, initiatives and processes for service improvements.
- We have engaged with the Regional Office of the Department of Prime Minister and Cabinet to share information about our respective funding to ACCHO's in the trial sites to ensure that project activities compliment rather than duplicate each other.

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

In broad terms, WNSW PHN has been cautious about establishing a new clinical support service for individuals at risk because the NSPT is time limited and PMHC Flexible Funds for suicide prevention would be insufficient to sustain such a service after the trial. Without disregarding this, it was considered appropriate to explore models of community-based services which could be hosted by existing organisations (with relevant infrastructure such as a GP/Psychologist) to provide services for individuals with low-moderate intensity suicidal thoughts and/or following an attempt.

WNSW PHN contracted a researcher in 2018 to undertake a scan of the literature and service sector in relation to community-based support models. The report included recommendations for a service model and evaluation measures. Shortly after that was completed, *beyondblue* sought expressions of interest from PHNs for funding to deliver their Wayback Support Service. We deferred our plans to trial the community based support model until announcements about *beyondblue* funding were made. During this waiting period, initiatives to support people at higher risk and/or who have attempted suicide include:

- Delivery of a suite of community awareness raising and education programs such as: Advanced Suicide Prevention Training (BDI), Aboriginal/Mental Health First Aid, ASSIST and SafeTalk to community members and GP's/health workers in the trial site LGA's.
- Hosting of a range of mental health and wellbeing community events for different community audiences such as: a comedy night and dinner for farming community members; and a camp on country for Aboriginal young men; and a community information night hosted by 'Mates in Mining'.
- All events include provision of information about telephone crisis support and local face-to-face support services. These contacts/resources are also regularly promoted through articles in local print media and Facebook sites.

The activities being undertaken for the trial can be distinguished from PMHC funded mental health and suicide prevention funded services in several ways:

- a) WNSW PHN PMHC funded mental health services principally deliver clinical psychological support services in the trial site LGA's;
- b) WNSW PHN PMHC funded suicide prevention services are principally delivered in LGA's other than the six trial site LGA's. The only exception is PMHC funding provided to Wesley Lifeforce for the purposes of establishing and supporting Indigenous led community suicide prevention networks in 3 trial site LGA's. These have either become the Local Working Committee for the LGA based NSPT projects or members from the Wesley network with lived experience have joined the NSPT Local Working Committee.

<b>Areas for focussed activity</b>	WNSW PHN will continue to focus on the priority populations identified in the previous AWP. However, we will intensify work with Aboriginal communities by contracting new services to providers in the smaller, remote areas/missions across the LGA's with the higher percentages of Indigenous residents (Bourke, Brewarrina and Walgett).
<b>Other suicide prevention activity</b>	The two new initiatives to undertaken in 2019/20 were described above in the section summaries main activities.
<b>Recruitment and workforce</b>	<p>All contracted providers and especially the ACCHO's/AMSs have experienced difficulties in recruiting project staff. Particular difficulties have been experienced by Bourke Aboriginal Health service and these were associated with turnover at Senior Executive and Board levels as well.</p> <p>The Workforce Capacity Building Project has already demonstrated its early effectiveness – and now, half of the six LGA project officer positions are held by participants in that program.</p> <p>WNSW PHN also experienced difficulties in recruiting a senior worker for the Northern Cluster (the position was finally filled in October 2018).</p>
<b>Data collection and reporting</b>	<p>WNSW PHN developed a quarterly project activity report template for LGA based contracted providers to complete, along with submission of regular statements of income and expenditure. The activity report was based on KPI's identified in provider contracts and were in alignment with the Lifespan model and ATSIPEP Report (2016) recommendations. None of the contracted providers deliver clinical support to individuals and therefore, they were not required to enter relevant data into the PMHC MDS.</p> <p>Since the recent development of the PMHC MDS additional fields for the NSPT, WNSW PHN has developed a simplified system to ensure contracted providers record data for the MDS and submit on a monthly basis.</p> <p>WNSW PHN is in the process of modifying our quarterly project activity reports to ensure providers are not double-entering information (the quarterly reports will focus on higher level themes etc as well as providing an updating on staffing and other operational matters).</p>
<b>Other</b>	As anticipated, all of the NSPT contracted providers have experienced different challenges and needed a significant lead in time (at least 8-10 months) to develop the detailed knowledge and confidence required to understand how best to address their local community needs in relation to suicide prevention. This has been a particular issue for Aboriginal communities who may not regularly use the word 'suicide.' The ACCHO's/AMSs have also struggled with staffing issues and consequently, implementation of activities.

	<p>WNSW PHN has provided additional support and assistance with preparation of Work Plans, Budgets and Positions descriptions etc and also kept in regular communication with relevant staff to see if any other assistance would be helpful.</p> <p>WNSW PHN staff also recently sought guidance from the Aboriginal Regional Assembly (covering the trial site LGA's). As a result, we will commission the "Supporting remote communities" project, seeking to engage the Local Aboriginal Community Working Parties and Land Councils in the process.</p>
<b>Transition arrangements</b>	<p>WNSW PHN NSPT has not included delivery of clinical/support services for individuals/consumers and we will therefore be focusing on sustaining and further growing the level of sector and community stakeholder engagement, knowledge and confidence that is being achieved with the trial. In the final year, contracted providers will be required/supported to develop a plan for continuation of local working committees and Regional Advisory Committees.</p> <p>WNSW PHN will also explore what PMHC funding and other sector suicide prevention resources could be utilised to further work in the trial site LGA's.</p>