

# **NATIONAL SUICIDE PREVENTION TRIAL**

## **Work plan covering activities in 2019-20**

**SITES ARE EXPECTED TO CONTINUE TO IMPLEMENT TRIAL ACTIVITIES IN 2019-20 AND ALSO TO ENSURE THAT TRANSITION ARRANGEMENTS ARE IN PLACE FOR THE CONTINUING CARE OF AT-RISK INDIVIDUALS POST THE TRIAL**

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.

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 2019-20 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
<b>Summary of main activities</b>	<p>The main focus during 2019/2020 will be to build on the work and achievements of the NWMPHN LGBTI+ taskforce which include developing shared understanding of the contributory factors to suicide for LGBTI+ people; co-designing a systems based framework and appropriate interventions.</p> <p>Key activities will include commissioning of services and embedding these activities with the NWMPHN region. In summary, main activities will include:</p> <ul style="list-style-type: none"> <li>• Implementation, awareness and uptake of primary interventions identified by the taskforce: <ul style="list-style-type: none"> <li>○ Affirmative practice</li> <li>○ Individual mentorship</li> <li>○ Family mentorship</li> <li>○ Aftercare.</li> </ul> </li> </ul> <p>In addition to these activities, work will continue on:</p> <ul style="list-style-type: none"> <li>○ Capacity building of the community to identify and respond to suicide risk</li> <li>○ Development of a tailored postvention plan for the LGBTI+ community</li> <li>○ Building Mental Health workforce capacity to provide safe service environment</li> <li>○ Engagement with the LGBTI+ taskforce to identify further opportunities and embed the commissioned services within the NWMPHN.</li> </ul>
<b>Key partners</b>	<p>The LGBTI+ taskforce has been established as part of the governance to support this trial activity and is comprised of key partners who bring experience, insight and expertise. The taskforce will continue to operate and includes members from Thorne Harbour Health (formerly the Victorian Aids Council), Drummond Street Services, Merri Health, Bisexual Alliance, Australian Gay and Lesbian Multicultural Council (AGMC), Australian Research Centre for Sex Health and</p>

	<p>Society (ARCSHS), Carers Victoria, EQUINOX, Northside Clinic, Minus 18, Orygen youth health, Switchboard and Victoria Police amongst others.</p> <p>Ongoing collaboration will also include consultation with Local Hospital Networks, particularly in the target areas of the trial, and advisory committees at NWMPHN including the clinical council, community advisory council, Mental Health Expert Advisory Group.</p> <p>Other key partners are contracted service providers including: Mind Australia; Drummond Street Services; Livingworks; Switchboard, Your Community Health, Jesuit Social Services, St Vincent's Hospital, and Mercy Health amongst others.</p>
<b>Enhanced services for people who have attempted or are at higher risk of suicide</b>	<p>Continued workforce development to work with LGBTI+ consumers and understand the unique context and needs of individual community groups.</p> <p>Implementation of the tailored training and initiatives developed by the LGBTI+ taskforce beyond initially identified priority settings and services.</p>
<b>Areas for focussed activity</b>	<p>The trial is working to develop a new model for LGBTI+ suicide prevention, informed by the Blackdog Institute Lifespan model, but tailored to the specific context of the LGBTI+ communities.</p> <p>Areas of focussed activity, to address identified issues and needs, include the following:</p> <ul style="list-style-type: none"> <li>• Affirmative practice training- a targeted approach to mental health and suicide prevention services to ensure their services are accessible and a safe space for LGBTI+ people and those who support them</li> <li>• Individual mentorship- a cross-generational approach to providing LGBTI+ people at periods of vulnerability (such as coming out or transitioning) with a mentor</li> <li>• Family mentorship- an approach to providing families of LGBTI+ people who require assistance in supporting their LGBTI+ loved one with mentorship and support</li> <li>• Aftercare- follow up of a person presenting to health care services following either a suicide attempt or with suicidal ideation.</li> <li>• Development of a postvention plan for the LGBTI+ community and community organisations</li> </ul>

	<ul style="list-style-type: none"> <li>Community based training to enhance the capacity of community members in the North Western Melbourne region to assess for and respond to suicide risk. This includes a range of evidence-based training including: QPR (Question, Persuade, Refer); ASIST and Safetalk.</li> </ul> <p>Through continued engagement with the taskforce, we will continue to identify areas for focussed activity that fit within the parameters and timeframe of the trial.</p>
<b>Other suicide prevention activity</b>	<p>Opportunities to implement smaller scale initiatives during 2019/20 will continue to be explored within the resources available and informed by continued engagement.</p> <ul style="list-style-type: none"> <li>Development of a trans and gender diverse learning module for mental health practitioners with Melbourne University (ANZPATH)</li> <li>Continued development and promotion of resources to support People of Colour who also identify as LGBTI+</li> <li>Improving the capacity for mainstream organisations to respond to the needs of LGBTI+ people</li> </ul> <p>A key focus will be to embed the commissioned activities and support key services of interest to participate.</p> <p>Through continued engagement with the sector, insights into how access can be improved and what comprises appropriateness/ safety of services, will inform the commissioning of services and capacity building of commissioned providers, including for NWMPHN stepped mental health services.</p>
<b>Recruitment and workforce</b>	<p>No specific issues anticipated, however many stakeholders have experienced workforce changes during the period of the trial.</p>
<b>Data collection and reporting</b>	<p><i>Confirm what data are being collected routinely on services and consumers, including outcome measures</i></p> <ul style="list-style-type: none"> <li>PMHC MDS is collected for all direct service delivery activities.</li> </ul> <p><i>Identify any major ad hoc or one-off collections to be undertaken this financial year</i></p> <ul style="list-style-type: none"> <li>Number of training events held</li> <li>Participation rates in training, including the types of participants e.g. community members; service providers</li> </ul>

	<p><i>Identify any major issues affecting compliance with reporting requirements and how these are to be remedied</i></p> <p>Compliance will continue to be monitored and appropriate actions implemented as required.</p>
<b>Other</b>	<p><i>Identify any other major factors affecting conduct of trial activities not covered above</i></p> <p>Engagement and identification of priorities has been a long and complex process, this has however ensured strong buy in and development of significant strategic priorities. Consequently, there have been delays in activating this work and significant activity will be occurring over a relatively short period (2019/20).</p>
<b>Transition arrangements</b>	<p><i>Confirm arrangements or proposed strategies for managing the transition of consumers post the trial</i></p> <p>Detailed transition strategies will be developed during the 2019/20 period. Consumers receiving counselling services will continue to have access to stepped care mental health services.</p>