

# **NATIONAL SUICIDE PREVENTION TRIAL**

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

*Country WA PHN – Midwest*

ACTION AREA	INFORMATION REQUIRED
<p><b>Summary of main activities</b></p>	<p>The Midwest National Suicide Prevention Trial is trialling a range of responses to suicide prevention which are informed by the Alliance Against Depression (AAD) Framework. WA Primary Health Alliance (WAPHA) is working with local community and stakeholders to resource activities, using the four pillars of the AAD framework as guiding principles for new activities, see Figure 1.</p> <p>The AAD provides a framework for WAPHA to work in partnership with communities to coordinate and integrate approaches to the prevention of suicide and treatment of depression. Embedding the success factors identified in the Aboriginal and Torres Strait Islander Suicide Prevention Evaluation Report (ATSISPEP) will ensure its relevance for Aboriginal communities.</p> <div data-bbox="680 552 1160 916" data-label="Diagram"> </div> <p><i>Figure 1: The four-level approach of the Alliance Against Depression framework.</i></p> <p>Extensive stakeholder engagement and partnerships have been key features of the Trial.</p> <p>The Trial has involved the formation of a Governance Group and a Steering Committee, made up of cooperation partners, community members and stakeholders to work as local advisory committee/reference group to the project.</p> <p>The role of the Midwest Suicide Prevention Governance Group (the Group) is to identify issues of concern and provide advice on appropriate services and activity commissioned in the conduct of the suicide</p>

	<p>prevention and self-harm trial in the Midwest region, and to optimise the concurrent delivery of the WA Mental Health Commission’s Suicide Prevention 2020 strategy with the National Suicide Prevention Trial (NSPT) in the region.</p> <p>The role of the Midwest Suicide Prevention Steering Committee (the Committee) is to provide advice about the Midwest (including Murchison and Gascoyne) Suicide Prevention workplan and its delivery and evaluation to the Group. As detailed in previous plans, men, including Aboriginal men, are the target population. This cohort will include farmers, fishers and Fly In/ Fly Out workers who are situated in numerous towns within the Midwest region.</p> <p>During 2018, both the Carnarvon Medical Service Aboriginal Corporation (CMSAC) and Geraldton Regional Aboriginal Medical Service (GRAMS) were contracted to conduct community consultations in Aboriginal communities throughout the Gascoyne, Midwest and Murchison areas to provide WAPHA with community action plans for these sites. The contracting of these bodies was to ensure all consultations in these communities and subsequent action plans for the duration of the trial site are culturally appropriate.</p>
<p><b>Key partners</b></p>	<p>The PHN will continue to consult with a range of key stakeholders at a state and international level, including a broad range of health, social service, education and justice stakeholders, and lived experience groups and other grassroots groups, including but not limited to:</p> <ul style="list-style-type: none"> <li>• <b>European Alliance Against Depression (EAAD)</b> WAPHA became the National Chapter of EAAD within Australia. Membership was granted to WAPHA by the Board of Directors of EAAD on 17th Jan 2017.</li> <li>• <i>Mental Health Commission WA (MHC): MHC and WAPHA have an agreement to jointly support adoption of the AAD in WA.</i> MHC also has a State suicide prevention strategy, under which they have commissioned Suicide Prevention Coordinators for each WA health region. This position in the Midwest is employed by the WA Country Health Service, a critical player in the suicide prevention arena in the region. This Mental Health Promotion Coordinator and the Coordinator of the Midwest Suicide Prevention Trial work closely together to ensure there is no duplication of initiatives or services. This</li> </ul>

	<p>collaboration adds value to the development of the joint regional planning as expected under the Coalition of Australian Governments Agreements.</p> <ul style="list-style-type: none"> <li>• Consumers/community groups, such as Midwest Yellow Ribbon for Life, Geraldton Suicide Prevention Action Group;</li> <li>• General Practitioners;</li> <li>• WA Country Health Service;</li> <li>• Geraldton Regional Aboriginal Medical Service (GRAMS);</li> <li>• Carnarvon Medical Service Aboriginal Corporation;</li> <li>• Community and mental health NGO providers;</li> <li>• Department of Communities;</li> <li>• Department of the Prime Minister and Cabinet;</li> <li>• Local government authorities;</li> <li>• Community Aboriginal Reference Groups;</li> <li>• Industry groups; and</li> <li>• Schools.</li> </ul> <p>As well as the Midwest Suicide Prevention Steering Committee, a Midwest Suicide Prevention Governance Group has been established with membership from WAPHA, WACHS, Mental Health Commission, GRAMS, Department of Communities, plus those with lived experience representation.</p>
<p><b>Enhanced services for people who have attempted or are at higher risk of suicide</b></p>	<p>Activities to support people who have attempted or are at risk of suicide include:</p> <ul style="list-style-type: none"> <li>• Publication of the “My Community Directory” on the WAPHA website. The information in the Directory will continue to be up-dated on a regular basis to ensure the information on referral pathways and services is relevant and current.</li> </ul>

	<ul style="list-style-type: none"> <li>Continued collaboration with the Midwest Mental Health Promotion Coordinator, funded by the WA Mental Health Commission, to facilitate a joined-up approach to suicide and self-harm prevention in the region.</li> </ul>
<p><b>Areas for focussed activity</b></p>	<p>The Midwest Trial is concentrating on men, including Aboriginal men, as being the target population. This cohort includes, but is not limited to, farmers, fishers and Fly In/ Fly Out workers, who are situated in numerous towns within the Midwest region.</p> <p>The towns targeted include: Geraldton, Kalbarri, Northampton, Denham, Carnarvon, Gascoyne Junction, Exmouth, Meekatharra, Mt Magnet, Morawa, Three Springs, Perenjori, Carnamah, Eneabba and Mingenew. However, a whole of population approach will be taken for the Suicide Prevention Trial, as per the AAD guidelines, as community/peer support and education around depression will be available for everyone in each community.</p> <p>Evidence about the needs of local target populations will be gathered at a local level, as each nominated town has a different target population.</p> <p>Community engagement will also provide information about local population needs.</p> <p>The four main areas of activity will include: primary health, public awareness, a focus on high risk groups, and community catalysts, in accordance with the AAD framework and ATISISPEP, and as adapted for each local context and local populations.</p> <p>The main activities to be undertaken are structured around the guiding principles of the AAD Framework and will include:</p> <ol style="list-style-type: none"> <li>1. Preparation, data analysis, planning and engagement, alignment with other suicide prevention initiatives.</li> <li>2. Community Alliance development – community catalysts including establishment of community working reference groups, public awareness, primary health care, focus on high risks groups (prevention, intervention, postvention).</li> <li>3. Lived experience, personal development and engagement.</li> </ol>

4. Partnerships and commissioning projects for change.
5. Evaluation (formative, summative, outputs and outcomes).

### **1. Primary care and mental health care**

Continued cooperation with primary and mental health care, focussing on training for general practitioners to identify and treat depression.

The aim is to improve the identification and treatment of depressed and suicidal persons. This is achieved through forming connections with primary care physicians in the local community and by offering advanced training to improve the quality of treatment to be provided.

### **2. General public depression awareness campaign**

A broad media campaign, “Depression Looks Different for Everybody” has been launched to inform the public through a coordinated depression awareness campaign that de-stigmatises depression and challenges commonly held misconceptions around suicidality.

These campaigns are regionally based and tailored to meet the need of the community and target groups within the Trial region. They will be rerun throughout the 2019/20 financial year.

### **3. Patients, high risk groups and relatives**

Training for stakeholders who are engaged with high-risk groups and vulnerable populations will continue. Training in Standard Mental Health First Aid and QPR Gatekeeper Training will continue to be offered to groups, such as Shire workers, St John Ambulance volunteers, teachers and the general community.

To ensure high-risk groups have the correct information on how to access primary care and receive the right treatment at the right time, the “My Community Directory” will be promoted at every opportunity by all WAPHA staff.

People identifying as LGBTI will be a particular focus, with plans to recruit and train champions. It is acknowledged that in the larger towns of Geraldton and Carnarvon it may be easier to recruit interested

	<p>people, rather than in the smaller communities where stigma may be an issue. However, expressions of interest will be sought from all communities.</p> <p>Postvention services are being mapped to identify gaps and to re-establish the Midwest postvention group.</p> <p><b>4. Community facilitators and stakeholder</b></p> <p>The Project Coordinator is working to develop Clinical Pathways for referring persons with depression or suicidal intent, and for aftercare for those that have attempted suicide. The pathways are being developed in collaboration with local services and agencies in response to consultations which identified gaps. Training and resourcing will better navigate the patient’s journey through the health system.</p>
<p><b>Other suicide prevention activity</b></p>	<p>There is a diverse range of activity in the Suicide Prevention Trial Site, that will continue during the 2019-2020 period.</p> <p>Those activities include:</p> <ul style="list-style-type: none"> <li>• Continuing to work with the Mental Health Promotion Coordinator at WA Country Health Services.</li> <li>• Work with and commission GRAMS, who have now taken over the management of Carnarvon Medical Service Aboriginal Corporation, to continue from the Stage 1 project of conducting yarning in Aboriginal communities, commissioned in 2018. Following a review of the GRAMS report on consultations completed in the Murchison, it was found that communities identified that grief and loss, trauma and community healing training was necessary to build resilience. GRAMS will also utilise the skills of Peter Kenyon (Bank of Ideas) to bring communities together to discuss the resources already available within communities that add value to training for interested community members.</li> <li>• Mental Health First Aid training for community members, will continue to be offered across all Midwest communities.</li> <li>• Education for GPs and other mental health professionals will continue as requested, with information on the AAD framework and the recognition and treatment of depression and anxiety given by Professor Geoff Riley.</li> </ul>

	<ul style="list-style-type: none"> <li>• Upskilling of Shire employees and community members in Mental Health First Aid training, following the successful training delivered in the communities of Mingenew, Carnamah, Three Springs, Kalbarri, Northampton and Geraldton.</li> <li>• The community of Eneabba has requested a Mental Health Services information session. This will occur in July 2019.</li> <li>• QPR Gatekeeper Training will continue to be offered to all communities within the Midwest.</li> <li>• WAPHA will host a Peter Kenyon Masterclass training in conjunction with the WA Local Government Association. This training will be held in Geraldton, the Murchison and Gascoyne.</li> <li>• Utilising the skills of Roses in the Ocean trained lived experience people to address community functions in the Midwest and offering interested community members the Roses in the Ocean training.</li> <li>• Work with service organisations, such as Rotary, to talk about the Suicide Prevention Trial with community groups;</li> <li>• Work with Chapman Valley Men’s Shed on the ‘Shinema’ project. This initiative will see a converted van taken to small Midwest communities to show a suitable movie, have a BBQ dinner, and promote community mental health and well-being. The progress of this project will be filmed. Lived experience training for interested community members will be offered via Roses in the Ocean;</li> <li>• A culturally appropriate version of the Roses in the Ocean training is being developed by staff at the University of Western Australia.</li> <li>• The media campaign “Depression Looks Different for Everybody” launched in March 2018, will continue in various media outlets, including a static display at Geraldton airport; the third stage of the campaign will continue throughout 2019/20. Other media opportunities to be continued are: a Community information sheet on the Trial; radio ads featuring people with lived experience; radio information sessions suitable for both Aboriginal and non-Aboriginal communities..</li> </ul>
<b>Recruitment and workforce</b>	<p>No issues are identified that may affect recruitment and/or commissioning of services to progress activities. The current workforce is made up of the following positions:</p>

	<ul style="list-style-type: none"> <li>• WAPHA’s Suicide Prevention Program Manager has oversight of the Suicide Prevention Trial in three regions: Perth South, Mid-West and Kimberley and reports to the Portfolio Manager.</li> <li>• Midwest Trial Project Coordinator (1FTE) has oversight of the Midwest Suicide Prevention Trial and reports directly to the Suicide Prevention Program Manager.</li> <li>• Project Support Officer (1FTE) provides support across the Trial Sites reporting directly to the Suicide Prevention Program Manager</li> <li>• Suicide Prevention Communications Officer provides communications support across the Trial Sites. This position reports directly to the Corporate Affairs Manager.</li> <li>• The Alliance Against Depression Trainer provides training and co-ordination support to the Midwest and Perth South Project Co-ordinators and to local Alliance leads in the region. This position reports directly to the Stakeholder Engagement Manager.</li> </ul>
<p><b>Data collection and reporting</b></p>	<p>Services commissioned by WAPHA to provide face to face programs and activities within the Trial regions are required to provide data to the Primary Mental Health Care Minimum Data Set (PMHC-MDS).</p> <p>All activities involving communities will be input into the new Suicide Prevention Trial Stream of the PMHC MDS retrospectively and ongoing until the end of the Trial. These will include community consultation, training, group activities, media and campaigning to address stigma and promote help seeking. All activity has been recorded to date and collected through observation, collection of documents and records, direct communication with community, focus groups, personal interviews and case study methods.</p> <p>WAPHA’s Project Support Officer will be the contact for PMHC MDS reporting for Trial purposes. WAPHA have appointed staff internally to manage the NMDS rollout and will work with the Project Control Group to ensure compliance amongst participants within the Trial.</p> <p>Progress reports will be prepared by the Project Coordinator.</p> <p>Delegated responsibility for the project is to the General Manager, State-wide Commissioning and Clinician Engagement.</p>

<p><b>Other</b></p>	<p>WAPHA is committed to developing a robust and integrated primary mental health care system that provides equity of access to care for patients with mental health issues. Current activity in which WAPHA is engaged, that will support an integrated primary mental health care system, include the:</p> <ul style="list-style-type: none"> <li>• <b><i>Fifth National MH and Suicide Prevention Plan 2017-2026</i></b><sup>1</sup> identifies suicide prevention as number two of eight priorities identified for this period. Action 5 (pg. 25) specifically states that the Government will support PHNs and LHNs to develop suicide prevention actions as part of a joint regional mental health and suicide prevention plan and at a regional level PHNs and LHNs will work together to map providers across the system develop stronger referral pathways and build community knowledge of the range of available services and how to access them. The Government’s Implementation Plan names the PHNs as having responsibility for jointly developing suicide prevention approaches with the LHNs, informed by the systems-based approach outlined in the WHO’s Preventing suicide: A global imperative.</li> <li>• <b><i>PHN Program Performance and Quality Framework (PQF)</i></b> - WAPHA has developed position papers and commitments to the seven pillars of the PQF including Mental Health, Aboriginal Cultural Competency and Workforce.</li> <li>• <b><i>WAPHA Mental Health and Suicide Prevention Regional Plan</i></b> – WAPHA is committed to aligning all commissioning and reform activities undertaken to the AAD framework and Mental Health and Suicide Prevention Regional Plan.</li> <li>• <b><i>Solutions that work: What the evidence and our people tell us. Aboriginal and Torres Strait Islander Suicide Prevention Evaluation Project Report (ATSISPEP)</i></b> - Indigenous suicide is a significant population health challenge for Australia. Suicide has emerged in the past half century as a major cause of Indigenous premature mortality and is a contributor to the overall Indigenous health and life expectancy gap.</li> </ul>
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<sup>1</sup> Fifth National MH and Suicide Prevention Plan 2017-2026 <http://www.coaghealthcouncil.gov.au/Portals/0/Fifth%20National%20Mental%20Health%20and%20Suicide%20Prevention%20Plan.pdf>

WAPHA will continue seek engagement from Aboriginal and Torres Strait Islander community members to ensure WAPHA's approach is a community-based intervention focussed on cultural appropriateness, safety and suitability.

- ***Contributing Lives, Thriving Communities - Review of Mental Health Programmes and Services*** -the AAD model provides communities with the framework and tools to achieve integration. The aim being to reduce current fragmentation, inefficiency, duplication and lack of coordinated planning within the mental health system.
- ***Mental Health 2020: Making it personal and everybody's business*** - three key reform agendas are considered fundamental principles of the AAD model:
  1. A system that is person centred supports people with mental health problems and/or mental illness to increase choice, flexibility and control of the services they receive. More emphasis will be placed on the important role of family, carers and friends in supporting people.
  2. Better connections between; public and private mental health services, the range of formal and informal supports, services, and community organisations will help ensure better support for people.
  3. A more balanced and equitable investment across the mental health system providing a full range of support and services from promotion, prevention and early intervention to treatment and recovery.
- ***Suicide Prevention 2020: Together we can save lives*** – the policy framework of the WA government is also consistent with the AAD model, as it also has a focus on: greater public awareness, united action across the community, coordinated and targeted responses for high risk groups, increased suicide prevention training and improved service responses.
- Members of all five Local Governments are associates of the community response steering group. The AAD provides extensive analysis and information on civic engagement throughout the trial. A focus of this stakeholder relationship is on building collaboration and involvement as an Alliance partner.

	<ul style="list-style-type: none"> <li>• The Mental Health Commission, through the Mental Health Promotion Officer, have a focus on suicide prevention in youth. This complements activity conducted by the Trial.</li> <li>• Wesley Life Force have established a presence in Carnarvon and Geraldton by providing funding for suicide prevention groups.</li> <li>• The Black Dog Riders group hold charity motor bike runs to provide funding for suicide prevention activities.</li> </ul>	
<b>Transition arrangements</b>	<p>Following the completion of the Midwest Trial, a couple of towns have shown interest in establishing an Alliance Against Depression in their communities. These communities will be assisted by the Trial coordinator to establish their Local Alliances during 2019/20.</p> <p>Groups, such as the Geraldton Suicide Prevention Action Group, Midwest Yellow Ribbon for Life and Roses in the Ocean will continue in the Midwest post Trial.</p> <p>WAPHA will work with all relevant stakeholders to determine transition arrangements post trial. This may include evidence of sustainable models through the normal reporting mechanisms. Transition arrangements may include self-sustaining working groups and/or projects led by and/or funded by other agencies. Exit strategies for the current coordinator position will begin in the second half of the financial year. Transition arrangements may include cessation of projects due to being part of a Trial.</p>	
<b>Planned expenditure 2019-20</b>	<p>Project management, coordination and administration</p> <p>Individual client services, group and other activities</p> <p>Major items not related to above <i>Please specify</i></p> <p>Other</p> <p><b>Total (GST exclusive)</b></p>	<p>\$380,000.00</p> <p>\$1,785,000.00</p> <p>\$</p> <p>\$</p> <p>\$2,165,000.00</p>