

NATIONAL SUICIDE PREVENTION TRIAL

Ex-ADF and families suicide prevention project

Operation Compass

Activity Work Plan covering activities in 2018-19

SITES ARE EXPECTED TO CONTINUE TO IMPLEMENT TRIAL ACTIVITIES IN 2018-19 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:

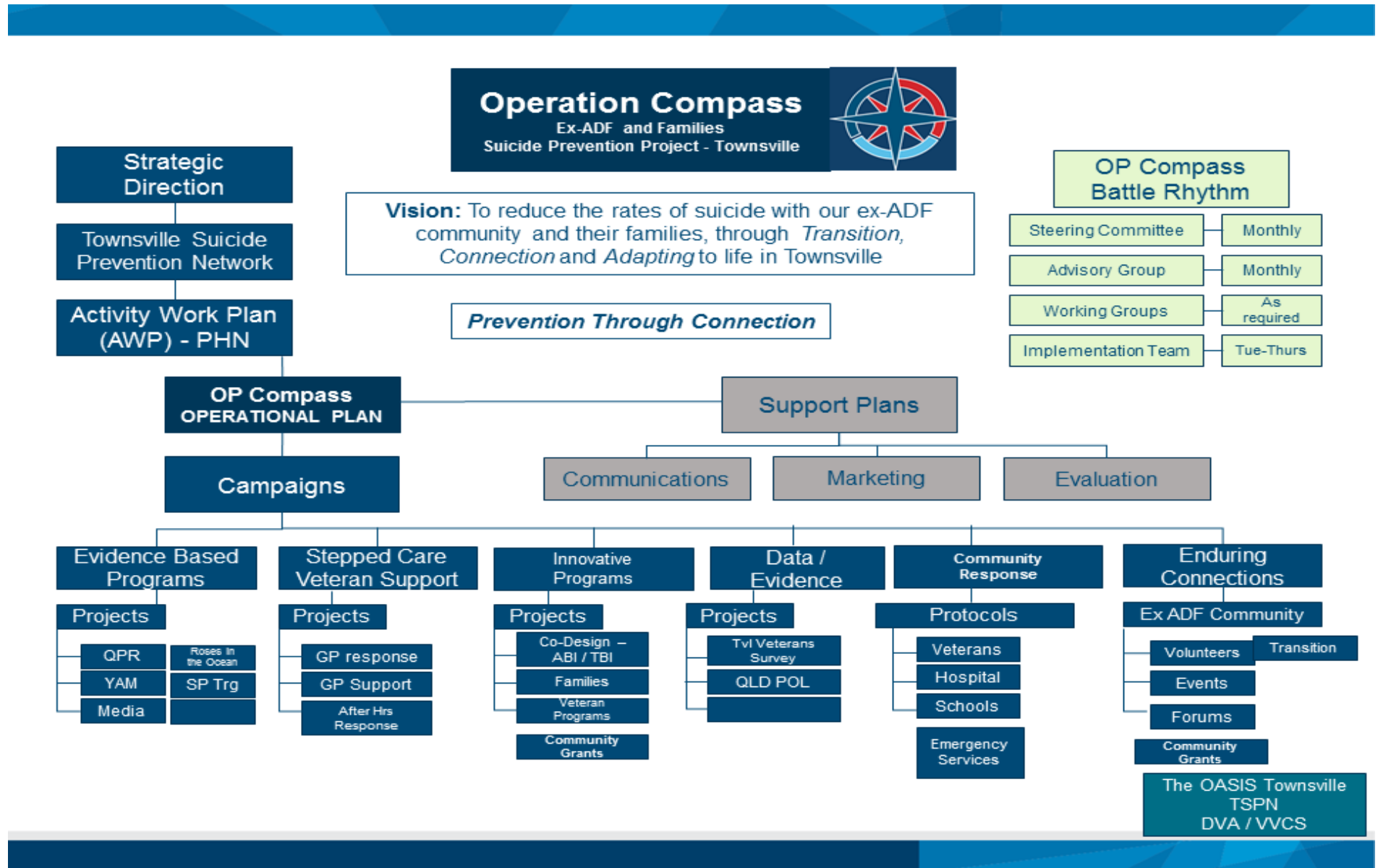
- Promote the development and trialling of strategies in communities with higher risk of suicide due to economic hardship or other circumstances.
- Focus on activities at a local level.
- Develop a systems-based approach to the delivery of suicide prevention services.
- Provide enhanced services for 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 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*.

Operation Compass Governance and Framework



ACTION AREA	INFORMATION REQUIRED
<p>Summary of main activities</p>	<p>Project name: Operation COMPASS</p> <p>Mission: To help members of the ex-ADF community (including families) to transition, connect and adapt to life in Townsville.</p> <p>Identification and review of the presenting issues which are affecting this sector of the community. Initial information suggests that many of the difficulties experienced by this group are in relation to the transition from services process and expectation of life away from the ADF. However this has yet to be confirmed by specific evidence and as such cannot be the only focus of the project.</p> <p>Potential additional matters are in relation to the type of discharge from service; access to supports; transition to employment; access to and type of psychological / psychosocial interventions; follow up and community support in addition to treatment.</p> <p>With this in mind the main area the project is focusing upon is initial identification, intervention and support for ex-ADF members, and their families, who are transitioning from military life to civilian life. Additionally, the supports that the ex-ADF member, and their family, require when discharging from a hospital and / or treatment setting or following referral via the primary health system.</p>
<p>Key partners</p>	<p>Relationships have been developed to identify potential overlap and/or similarities in the services to gain the best outcome to the prevention of suicide, and longevity to the project. This list is not exhaustive or exclusive, as other stakeholders will be identified as the project develops.</p> <ul style="list-style-type: none"> • Non-Government Organisations funded as Mental Health services providers or Ex-Service Organisations • Peer organisations: Mates 4 Mates, RAR Overwatch Australia, Soldier On, Hounds 4 Healing, DFWA, War Widows, Alliance of Defence Service Organisations, RSL Qld • ADF: 3rd Brigade Townsville, JHC, Discharge Coordination Services, DCO • Department of Veterans Affairs and Veterans and Veterans Families Counselling Service • Legacy • Townsville Private Clinic • Townsville Hospital & Health Service

	<ul style="list-style-type: none"> • The Mater Hospital • Black Dog Institute • Qld Government Agencies: QPS, QAS, QFES, QHealth, Qld Education • Townsville City Council • Redbourne Digital provider • Commonwealth Department of Health (funding body) • Commonwealth Department of Veterans Affairs (interested party) • Australian Defence Force
<p>Enhanced services for people who have attempted or are at higher risk of suicide</p>	<p>Proposed services in a broad context include the following:</p> <ul style="list-style-type: none"> • Enhancements to existing peer to peer services inclusive of education, development, support / supervision, increased resources and co-ordination through a third party • Increased review and engagement for people transitioning from the ADF; focussing upon risk factor screening, transition support, system navigation and family interface • Integrated referral pathways through the primary / mental health sector to specialist services available within the community • Enhanced support services for family members supporting at risk individuals • Possible development of Veterans Hub within the community which will support referral pathways and system navigation • Potential linkages to AOD services (primary or tertiary) • NQPHN portfolios, eHealth, Systems Integration, PPES <p>Proposed services in a more dedicated context are included below.</p>
<p>Areas for focussed activity</p>	<p>Strategy 1 – Aligns with Community Response and Stepped Care Veteran Support</p> <p>Improving emergency and follow-up care for suicidal crisis</p> <p>Activities, Programs, Interventions, and Actions</p> <ol style="list-style-type: none"> 1.1. Joint focus on referral pathways, coordination, discharge protocols and improving care during a crisis using the new Delphi Guidelines, this is to include emergency department guidelines and clinical care pathways 1.2. Implement mechanism for response following suicide attempt for example peer to peer support or clinical support dependent upon assessed risk

- 1.3. Community based aftercare post ideation and attempt by a range of service providers
- 1.4. Collaborative roundtable between Defence, DVA, VVCS and community agencies to ensure of consistent support provided
- 1.5. Identify current aftercare service delivery models in Townsville, with the view of adapting it to ex-ADF
- 1.6. Provide training to Lived experience people to deliver aftercare support

Timeline 2017 /18

These activities have commenced and are anticipated to be completed by June 2018

Strategy 2 – Aligns with Evidence Based Programs

Using evidence based treatment for suicidality

Activities, Programs, Interventions, and Actions

- 1.
- 2.
 - 2.1. Work with practitioners as a whole (psychologists, psychiatrists, social workers, mental health nurses on Advanced Training in Suicide Prevention (BDI program targeted to practitioners) and increase use of ehealth as complementary to face to face counselling.
 - 2.2. Work with identified specialists in treating ex-ADF in ‘ex-ADF cultural competency’ (resource and training needs to be developed for this).
 - 2.3. Target service providers to ex-ADF and their families for increase in use of evidence based ehealth programs as complementary to F2F therapy
 - 2.4. Community recovery training in responding to suicidal ideation and behavior reducing fear and stigma within the community
 - 2.5. Advanced training and improved care coordination for treatment providers, increased use of e-mental health therapies for example
 - 2.6. Digital enablement strategy to support the use of these models

Timeline 2017 /18

January 2018 to June 2018

Strategy 3 – Aligns with Stepped Care Veteran Support and Evidence Based Programs

Equipping primary care to identify and support people in distress

Activities, Programs, Interventions and Actions

3.

- 3.1. Actively recruit medical practices to participate in the provision of health services following transition for the ADF
- 3.2. Implement universal screening to all patients in participating practices (target 10-20% of practices).
- 3.3. Coordinated JCU Med School training for a garrison city
- 3.4. Advance suicide prevention training targeted to clinicians with an interest in ex-ADF population

Timeline 2017 /18

April 2018 for commencement

Strategy 4 – Aligns with Evidence Based Programs and Innovative Programs

Improving the competency and confidence of frontline workers to deal with suicidal crisis

Activities, Programs, Interventions, and Actions

4.

- 4.1. Provide formal training and informal stigma reduction strategies to frontline workforce.
- 4.2. Provide a toolkit for frontline workers to handout to the family after a suicide attempt or completed suicide
- 4.3. Support the QLD Police Service co-responder model with training in ex-ADF needs
- 4.4. Identify the frontline workers that are ex-ADF with the of providing additional gate-keeper training and information
- 4.5. Explore the use of potential peer support models

Timeline 2017 /18

October 2017 ongoing

Strategy 5 – Aligns with Community Response and Innovative Programs

Promoting help-seeking, mental health and resilience

Activities, Programs, Interventions, and Actions

- 5.
 - 5.1. Jointly work with Education Department and non-government schools on the implementation of Youth Aware of Mental Health program or similar
 - 5.2. Defence and DVA led improvements in pre-transition support, mental health and resilience
 - 5.3. Utilising peer supports to encourage help seeking
 - 5.4. Expert Insights forum for teachers, parents, and local school governance groups

Timeline 2017 /18

November 2017 ongoing

Strategy 6 – Aligns with Evidence Based Programs, Community Response and Enduring Connections

Training the community, families and carers to recognise and respond to suicidality

Activities, Programs, Interventions, and Actions

- 6.
 - 6.1. Joint strategy with various agencies to increase Townsville’s awareness of the suicide issue and offer the opportunity to engage in Gatekeeper training in partnership with Townsville Suicide Prevention Network
 - 6.2. Target ex-service organisations, families and carers, and other points of contact such as sporting and recreation clubs/venues
 - 6.3. Find community influence points for greater outcomes
 - 6.4. Workshop local employers and business that are willing to fund and train their staff in Suicide Prevention Programs (e.g. Security, Mining, Retail)
 - 6.5. Inviting community to be part of process, for example, utilizing DCOs Welcome to Townsville Expo idea and creating a similar concept for newly arrived Ex-ADF members and their families.
 - 6.6. Utilising community support/action groups to increase the awareness (e.g. the working groups from the community)
 - 6.7. Encouraging employers and businesses to take on Ex-ADF in their workforce

Timeline 2017 /18

June 2017 and ongoing

	<p>Strategy 7 – Aligns with Evidence Based Programs</p> <p>Encouraging safe and purposeful media reporting</p> <p>Activities, Programs, Interventions, and Actions</p> <p>7.</p> <ul style="list-style-type: none"> 7.1. Provide MindFrame and MindFrame Plus training to professionals and participants within service delivery and media. 7.2. Appropriate and localized help-line information made available for media outlets 7.3. Messaging made available for the community to use in social media and agency communications 7.4. Use of community champions to give the message of ‘accessing support is the right thing to do’ 7.5. Implementation of communication strategy inclusive of social media <p>Timeline 2017 /18</p> <p>September 2017 to January 2018</p>
	<p>Strategy 8 – Aligns with Data / Evidence and Community Response</p> <p>Digital enablement strategy</p> <p>Activities, Programs, Interventions, and Actions</p> <p>8.</p> <ul style="list-style-type: none"> 8.1. Provide access to online training, and registration for services across the identified community 8.2. Review and consider the opportunity for app-based / digital system access and navigation 8.3. Develop patient identifier within electronic medical records which will link to care Pathways <p>Timeline 2017 /18</p> <p>January 2018 ongoing</p>
<p>Other suicide prevention activity</p>	<p>This project will focus solely upon the Veteran community and their families, however it will work closely with the Townsville Suicide Prevention Network to reach a wider audience. Additionally, there have been roundtable discussions with the Townsville community into suicide prevention strategies with Ex-ADF personnel.</p> <p>These activities that have been broadly discussed so far have been:</p>

	<ul style="list-style-type: none"> • Define a suicide prevention system across region – utilising Black Dog Lifespan Model • Transition programs (i.e. out of Defence and into civilian life, and out of hospital after an attempt) • Development of a toolkit for health providers and frontline workers • Enhancement of existing services to incorporate ADF specific health needs <p>Facilitate HHS based Community Suicide Prevention Plans</p>
<p>Recruitment and workforce</p>	<p>22 May: Project Manager to the ex-ADF and Families Suicide Prevention Project commenced. The project manager is responsible for the scoping, implementation, and evaluation of the Federal Government’s pilot suicide prevention trial in the Townsville region, aimed at ex-ADF members and their families. The role will work closely with local stakeholders to develop localised suicide prevention and intervention plans reflective of the region’s needs. This will include co-ordinating the activities of the project, informed by the project’s working groups and steering committee.</p> <p>January 2018 update:</p> <p>The 0.5 FTE programme officer in support of this project has been converted to a FT position.</p>
<p>Data collection and reporting</p>	<p>Current data collection</p> <p>Primary Mental Health Care Minimum Data Set (PMHC-MDS) data is currently collected by individuals/organisations commissioned to provide current services. However, it is not identified if this information identifies Ex-ADF personnel or their families.</p> <p>With the support of Black Dog Institute analysis of AIHW data will give the project the geospatial mapping required to identify means restriction.</p> <p>The implementation team is setting up an online questionnaire to gain more information from the Ex-ADF community about their views and opinions on suicide prevention in Townsville (as well as demographic data).</p> <p>Provisions for trial specific data</p> <p>Research partners have been identified to evaluate the implementation of certain strategies throughout the project. The College of Healthcare Sciences, and the College of Public Health, Medical and Veterinary Sciences, from James Cook University, have both offered undergraduate students to complete all the requirements for evaluation; from</p>

	ethics proposals to collection of data and completion of journal articles. The students are able to be supervised by the project manager (qualifications for supervision of students is current) along-side the lecturers from James Cook University.
Other	<p>Other factors that could affect the conduct of this project are agencies working individually and not in concert with the project.</p> <p>The concurrent work that is being undertaken by the Department of Veterans Affairs and the Australian Defence Force, both of whom are focussing upon similar priorities</p>
Transition arrangements	The transition arrangements will be a partnership between the Townsville Suicide Prevention Network and the Department of Veterans Affairs and the Stepped Care Primary Mental Health system which will be in its' second year of establishment by this stage.