

# Northern Territory Suicide Prevention

Strategic Framework  
**2018-2023**

**IMPLEMENTATION PLAN**

**12 MONTH PROGRESS REPORT**

# Summary

The Northern Territory Suicide Prevention Strategic Framework (NTSPSF) Implementation Plan 2018–2023 was released in August 2018.

The Implementation Plan contains goals and actions in priority areas to prevent suicides. It spells out how each action may be achieved, while supporting the agencies responsible for these actions to happen. This is aligned with the *Fifth National Mental Health and Suicide Prevention Plan* which established a national approach for collaborative government effort.

Preventing suicide requires work in a wide range of areas. Our plans to prevent suicide must include targeted initiatives for people who are most at risk of suicide.

There has been considerable progress and many notable achievements across the last few years. Importantly, this progress report card highlights some areas where ongoing focus is needed and demonstrates the importance of remaining accountable and dedicated to each goal of the Implementation Plan.



The Northern Territory Suicide Prevention Strategic Framework Implementation Plan 2018–2023

This progress report card articulates key achievements during the first year of implementation, including the forging of strategic relationships with stakeholders essential to the delivery of an integrated systems approach to suicide prevention policy, strategies, services and programs.

Information in this progress report is organised under three priority areas:

- 1.** Stronger community awareness and capacity
- 2.** Improved system integration, coordination and accessibility
- 3.** Focused support for vulnerable groups and a stronger evidence base.

# Top three achievements in suicide prevention actions

## **Community action planning (CAP) - a regional systems-based multi-intervention approach to preventing suicide:**

The aim of this work includes identifying established community planning groups and networks in each region and supporting the development and monitoring of localised suicide prevention actions.

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## **Community Suicide Prevention Grants:**

Community groups and non-government organisations have been awarded grants of up to \$10,000 to assist in raising awareness about suicide and suicide prevention, focussing on community building and support for vulnerable groups. There is \$200,000 available each year, which in 2018/19 supported 22 projects, and 2019/20 will support 29 projects.

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## **Funded training for staff and community members working with priority groups:**

Targeted training for community members and health and social care staff in supporting vulnerable people.

- Lifeline's Applied Suicide Intervention Skills Training (ASIST) - Central Australia and Barkly
- Anglicare's ASIST - Top End
- Mental Health Association of Central Australia Suicide Story Training - Central Australia and Barkly
- Mates in Construction Ltd - Mental Health, Suicide Prevention Awareness Program - NT wide
- Indigenist Pty. Indigenous LGBTQTI+ inclusive practices suicide prevention workshops - NT wide
- OzHelp - Tradies Tune Up Program - Mental Health and Suicide Prevention Awareness Program - Darwin and Palmerston

# Progress by Goals and Actions

## Goal 1

**Building stronger communities that have increased capacity to respond to and prevent suicidal behaviours through raising awareness and reducing stigma.**

### ACTIONS

- 1.1 Promote online and face-to-face prevention and awareness services and resources.
- 1.2 Increase accessibility to prevention, intervention and postvention initiatives being delivered in all sectors.
- 1.3 Identify and promote opportunities for training and awareness raising in the community and workplaces.
- 1.4 Promote and support resilience building for individuals, carers and communities through community level activities.

### COMPLETED

#### NT Health website

NT Health Suicide Prevention Information and Support website provides current information on online, telephone and face-to-face bereavement counselling and crises support for NT residents.

#### Online training

NT Health supported Lifeline Australia and the Mental Health Academy to deliver a free online Suicide Prevention Summit conference for allied health professionals covering suicide prevention contexts including children/youth, Indigenous, lived experience, evidence-based approaches, counselling and access to technology.

### ONGOING

- **Funded services:** NT Health funds a range of non-government service providers to support the implementation of the NTSPSF including \$1.825 million for the delivery of NT-wide evidence-based suicide prevention activities, grants and training workshops including ASIST and SafeTalk.
- **NT Health Community Suicide Prevention Grants:** NT Community groups and non-government organisations have been awarded grants of up to \$10,000 to assist in raising awareness about suicide and suicide prevention and focusing on priority vulnerable groups. The 2018/19 grants totalled \$200,000 across 22 projects. The current 2019/20 grants total \$200,000 across 29 projects.
- **Community Action Planning (CAP) - a regional systems-based multi-intervention approach to preventing suicide:** This work includes identifying established community planning groups and networks in each region and supporting the development and monitoring localised suicide prevention actions.
- **Bereavement Support Services:** Supporting the development of services for those bereaved by suicide, affected by suicide attempts and community organisations needing to respond to emerging or occurring clusters.
- **Media:** Promote national Mindframe reporting guidelines for responsible reporting of suicide.

## Goal 2

**Informed, inclusive services that provide timely, integrated, compassionate and culturally safe responses that meet the diverse needs of people across the NT.**

### ACTIONS

- 2.1 Agency collaboration to ensure service coordination, aligned with system reforms.
- 2.2 Establish an online platform covering all of the NT.
- 2.3 Develop and improve coordination and analysis of relevant NT data to inform ongoing prevention activities and enable innovative service responses.
- 2.4 A clear public policy, across government that supports suicide prevention.

### COMPLETED

#### **Indigenous Suicide Prevention Youth Services Appraisal and Mapping – Darwin and Palmerston**

- 50+ services relevant to this group engaged and mapped, (details disseminated ongoing) to address a coordinated service response for high-risk cohort.
- Shared across other service mapping exercises e.g. Northern Territory Primary Health Network (NTPHN) Needs Assessment Mapping,
- Wesley Directory Service Finder and Northern Territory Council of Social Service.
- Identification of duplication, service-response gaps and lateral connection of services lines to counter fragmentation.
- Further supporting access, discussions are underway for a more accessible version of a service response directory for use by 15 - 25 year old Indigenous youth and their families.

### ONGOING

#### **Examples of Whole of Government responses**

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##### **Schools and Educational settings**

- Education provided for teachers around suicide discussions, awareness raising in school community peer workforce, with a focus on teachers - trust from students.
- Mental Health First Aid Training for teachers (de-medicalised), training for teachers to listen with understanding.
- Promotion of anti-bullying strategies including the use of The Australian Student Wellbeing Framework blueprint for preventing and addressing bullying in schools, and implementation of policies and guidelines relating to cyber bullying and cyber safety.
- Access of support, resources and professional development relating to suicide prevention through external services providers, i.e. Headspace, and Beyond Blue 'Be You' school aged children's mental health training available to educators.
- Presence of school counsellors in middle schools, senior schools (61 sites) including four schools with independent school counsellors.
- Implementation of a whole-school approach to wellbeing and positive behaviour through the development of resources and supports for schools to improve student wellbeing (which includes the NT Social and Emotional Learning (SEL).

## Corrections Facilities

- All custodial staff and community corrections staff receive training to diagnose, assess and manage risk. Trainee Correctional Officers (TCOs) attend the Mental Health First Aid (MHFA) program. Custodial staff participate in a formal debriefs and are offered services of the Employee Assistance Program.
- The Initial Risk Needs Assessment (IRNA) is to be completed by custodial reception staff and by community corrections officers within their first 24 - 48 hours of release or an order being written by the court. At risk inmates can also be reported by any officer at any later stage during incarceration by Prison Support Officers and Treatment team staff.
- There are a range of noncustodial prisoner support services provided to prisoners to manage issues related to non-prison based matters.
- Healthy lifestyles units in each prison to assist prisoners to be involved in activities outside of life in prison.
- The Elders Visiting Program provides support to prisoners on release depending on which community they reside in. Elders will work with family of those in prison.
- At Risk training is delivered during the TCOs and Senior Correctional Officer Program, other sessions are delivered during the TCOs program which include discussions with people from the Sentence Management Team, Forensic Mental Health and other areas in the Correctional Centres.

### Case Study ONE

#### **Community Suicide Prevention Grants: Rirratjingu Aboriginal Corporation's**

##### ***"Healthy Bodies Healthy Minds Suicide awareness campaign"***

The Gove Peninsula Yolngu Communities suffered a spate of suicide with three deaths spread across a two-week period East Arnhem's Rirratjingu Aboriginal Corporation's "Healthy Bodies Healthy Minds Suicide awareness campaign" was awarded a grant of \$10,000 to assist in raising awareness about suicide and suicide prevention, focussing on priority vulnerable groups.

Education sessions and guest presenters were hosted to directly engage groups of youth affected from the recent suicides. The initiative provided support through conversation and availability of staff and volunteers to take calls 24/7. The program worked alongside existing programs currently deliver to the Yirrkala Community. An awareness campaign was delivered using an existing successful social media platform (Rirratjingu Aboriginal Corporation Facebook Group with 35,000+ followers and Djarrak Football Club Facebook page - 1900+ followers). Program participants communicated suicide prevention theme video messages using both English and Yolngu Matha languages.

## Child Youth and Family Services

- Families and Children Enquiry & Support (now the Family and Children Enquiry Service) hotline staff and Child Protection frontline staff refer clients to other appropriate services such as Lifeline.
- Frontline Youth Outreach and Re-engagement staff undertake ASIST and MHFA training to provide appropriate responses and services to young people vulnerable to suicidal behaviours (Tennant Creek and Alice Springs).
- Youth Justice frontline staff undertake Youth Mental Health First Aid accredited training workshops and suicide intervention and awareness training workshops (Darwin and Alice Springs).
- Employee Assistance Support Program is promoted through the Territory Families intranet and Senior HR Consultants.
- Mental Health Matters training for senior leaders in 2018, aiming to increase awareness and understanding about anxiety, depression, and suicide and inform participants about mentally healthy workplaces.
- All new young people admitted to youth detention centres are provided fact sheets detailing information about suicide and mental health.

## Police Services

- Consent based referrals from Police to external service providers using SupportLink; particularly for individuals who come into police contact due to criminal offending (duty of care) but do not meet the threshold for application of the *Mental Health and other Services Act*.
- Need to develop and fund co-response model of Mental Health Access Team (MHAT) frontline support to police and ambulance on a 24/7 basis. Co-response initiative discussion commencement in July 2019.
- Enhancing Youth Diversion model to include accessibility to medical assistance when required.
- Providing MHFA training to first responder staff to assist in their preparedness for responding to calls for acute assistance from the public.
- Cooperative relationship between Police and mental health service providers through the development and delivery of multi-agency care plans and operating protocols.
- Delivery of MHFA training (or similar) for all first responder staff across the full gambit of first responders so a consistent and standardised response understanding is maintained.

## Mental Health Inpatient Services

- GP Suicide Risk Assessment Training being developed.
- Access - Immediate attention for suicide and self-harm Emergency Department presentations.
- Assessment – 100% of presenting people (to any of the relevant services) have a documented assessment that incorporates an assessment of psychosocial stressors, a cultural assessment, a screen for mental illness and subsequent risk assessment.
- Discharge - whenever a person is discharged from any of the services, they and their significant others (if appropriate) should be provided with a written copy of their discharge plan. This should also be sent to all others involved in the person's care.
- Follow-up (Darwin Way Back Aftercare Service) - best practice management of presentations for suicidal behaviour. Follow-up appointment with a continuing care provider within 48 hours of discharge if they remain at risk of self-harm or suicide (and do not have a management plan that states otherwise).
- Established notification processes and postvention services - see also Goal 1 Action 1.2.

## Suicide Prevention / Community Resilience Coordinators

- NTPHN and the NT Social and Emotional Wellbeing (SEWB) Working Group has committed to supporting SEWB Socio-cultural position funds for Suicide Prevention or Community Resilience Coordinator positions within Aboriginal Community Controlled Health Services (ACCHS), NTG Primary Health Centres or other NGO agencies employment where need is identified.

### Case Study TWO

#### Community Action Planning Wadeye – Thamarrurr Development Corporation

NT Health has initiated the co-design and development of a culturally appropriate monitoring and evaluation tool with Thamarrurr Development Corporation Men's Shed in Wadeye. Drawing on lived experience to inform its structure, the project can be adapted across regions and service providers to assist in sharing the story and impact of community-led and driven solutions in preventing suicide. This initiative aims to assist in strengthening the evidence base for Aboriginal-led solutions in the mental health and wellbeing space.

The project is being delivered through a series of workshops with the selected group to understand the space in which activities are undertaken to bridge gaps in sharing and telling the stories that relay the impact of a range of local initiatives and programs.

Workshop participants are encouraged to bring two or three stories to share at a workshop. These stories are used to test and modify and seek overall feedback on the co-design process. This project further attempts to understand what a suicide prevention activity monitoring and evaluation tool could look like, helping to tell the story of activities more effectively and to build community project activity evidence.

**NT suicide and self-harm register platform discussions – ongoing exploration include:**

- Actions to improve the quality and consistency of national and regional suicide data.
- Coordinated inter-agency NT Suicide Surveillance and Self-Harm Register Workshop August 2019 to discuss options for a NT register including the establishment of a coronial database, which improves the quality and timeliness of suicide data.
- Scope the feasibility of establishing surveillance sites for suicide attempt data.
- Related research includes Menzies' NT Suicide - Psychological Autopsies Project.
- Discussions of Aboriginal community-based suicide surveillance system for the provision of wrap-around prevention and postvention support.

**Coordination of Postvention Services**

- NT Health monitors, reviews and improves the processes following notification from the Office of the Coroner to the relevant health service and ongoing next of kin bereavement response services.

**Case Study THREE**

**NT Health Community Suicide Prevention Grants:**

Sabrina's Reach for Life, a Darwin Suicide Bereavement Support Group (NT's first one) were awarded a grant of \$10,000 to assist in raising awareness about suicide and suicide prevention, focussing on priority vulnerable groups.

Sabrina's were formed to enable a recovery group through post-crisis aftercare and postvention for those in community who have been impacted and have a lived experience of suicide. Sabrina's provides a safe and inclusive environment to educate, promote resilience, inspire others and instil hope and to empower and support those with lived experience to share their insights and stories with a view to preventing suicide.

Sabrina's operates at grass roots to help change the culture and stigma surrounding suicide, preserve and promote life through compassion and understanding and develop suicide prevention strategies for building resilience, understanding mental illness and how to deal with grief and loss.

The project will be run in partnership and with the support of StandBy Support After Suicide – both in the NT and Nationally.

## Goal 3

**Focused and evidence informed support for the most vulnerable groups of people.**

### ACTIONS

- 3.1 Promote local training opportunities for staff providing services to priority groups.
- 3.2 Identify the relevant priority groups to inform professional development needs across the region.
- 3.3 Embed professional development in workplaces to facilitate a culturally safe and trauma informed approach to engaging individuals and communities.

### COMPLETED

**Funded training for staff working with priority groups:** targeted training for health and social care staff in supporting vulnerable people, especially those in primary health care services:

- **Lifeline's Applied Suicide Intervention Skills Training (ASIST)** - Central Australia and Barkly
- **Anglicare's ASIST** - Top End
- **Mental Health Association of Central Australia Suicide Story Training** - Central Australia and Barkly
- **Mates in Construction Ltd** - Mental Health, Suicide Prevention Awareness Program - NT wide
- **Indigenist Pty. Indigenous LGBTQI+ inclusive practices suicide prevention workshops** - NT wide
- **OzHelp - Tradies Tune Up Program** - Mental Health and Suicide Prevention Awareness Program - Darwin and Palmerston

### ONGOING

**National review of trauma-informed care and cultural safety practice training:**

- NT Health is leading a national review of all staff delivering mental health services, particularly those in forensic settings, to Aboriginal and Torres Strait Islander peoples in trauma-informed care that incorporates historical, cultural and contemporary experiences of trauma.

**Culturally-secure partnerships that embed resources into practice:**

- Partnerships between mainstream specialist mental health, Aboriginal wellbeing services and community organisations continue to be maintained and strengthened.
- Culturally appropriate community activities to engage youth, build cultural strengths, leadership, life skills and social competencies are provided.
- Co-design programs and services that are underpinned by the level of complexity of trauma, harm and powerlessness. Presenting response needs to improve and reflect the diversity, and try to lessen the harm and grief for Aboriginal people.
- Support of NT Social and Emotional Wellbeing (SEWB) initiatives e.g. Trauma-Informed education.
- Culturally-safe peer support group and Individual mentoring training.