

Monthly Meeting Minutes – 10 May 2018 8:30-9:30am, COORDINARE office, Ground floor The Central building Squires Way, Innovation Campus, North Wollongong & video link to GPH Centre, 107 Scenic Dr, Nowra

1. Attendees

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WOLLONGONG:			
ADAM BRYANT	(AB)	ISLHD	
ADAM WALKER	(AD)	NSW Ambulance	
ALEX HAINS	(AH)	SP Collaborative	
BRIAN BOULTON	(BB)	Citylife Community Initiatives	
CARLIE SCHOFIELD	(CS)	Illawarra Aboriginal Medical Service	
CYNTHIA MCCAMMON	(CMc)	Catholic Education	
DAMIAN CASTLES	(DC)	ISLHD	
EMMA RINGLAND	(ER)	SP Collaborative	
HEATHER MCCARRON	(HM)	TAFE NSW	
IRENA PRESCOTT	(IP)	Lived Experience	
JANET JACKSON	(11)	NSW Trains	
JOAN GISSING	(JG)	Department of Education	
NICK GUGGISBERG	(NG)	Kiama Council	
RON DE JONGH	(RDJ)	Grand Pacific Health	
REBECCA SNG	(RS)	SP Collaborative Executive; Grand Pacific Health	
TIM HEFFERNAN	(THe)	SP Collaborative Executive; Lived Experience Representative	
VIDA BLIOKAS	(VB)	SP Collaborative Executive; School of Psychology, UOW	
NOWRA:			
ANN FRANKHAM	(AF)	Lived Experience	
GLENN WLLIAMS	(GW)	SP Collaborative Executive; MIND the GaP	
MICHELLE DICKSON	(MD)	Waminda	
SHARLENE CRUICKSHANK	(SC)	South Coast Medical Service Aboriginal Corporation	
PHONE:			
MELISSA CAMERON	(MC)	Department of Education	
NICKY SLOSS	(NS)	Association of Independent Schools	
APOLOGIES:			
AMY BERTAKIS	(AB)	Wellways	
ARMANDO REVIGLIO	(AR)	Wollongong City Council	
JULIE CARTER	(JC)	SP Collaborative Executive; ISLHD	
LINDA LIVINGSTONE	(LLi)	SP Collaborative Executive; COORDINARE	
LYNN LANGHORN	(LLan)	ISLHD	
MARY-ANNE FLEETON	(MF)	Anglicare	
SANDRA BOLACK	(SB)	ispan	
ROZ JENNINGS	(RJ)	Department of Education	
TOM MCCOLL	(TM)	Shellharbour City Council	



2. Welcome and introduction

TH welcomed attendees and did Acknowledgement of Country and Acknowledgement of people with lived experience.

3. Working Group (WG) updates

a. WG1 (health interventions)

TH provided an update on recent discussions and milestones for WG1:

- WG1 has started discussing evidence-based treatment of suicidality through psychological interventions. TH noted it is difficult to find out how effective psychological services are currently.
- Rollout of the <u>StepCare</u> mental health screening tool is starting in general practices next week 2 of the 13 general practices who have signed up will start using the screening tool on Monday (14th May).
- NextSteps Aftercare service has been achieving good results for those who sign up, however work is still being done to increase referrals to the service, which has been somewhat slow so far.

b. WG2 (community interventions)

ER reported that WG2 has been mapping out how Community Suicide Prevention Training (CSPT) would ideally work and what needs to be done to achieve this. ER highlighted the goal is to ensure that people not only undertake CSPT, but are also effectively using the skills they have learnt to help others in the community.

ER reported WG2 has also been planning a media campaign which will be run across local Fairfax media outlets. ER noted the campaign will start with the 1-page summary of local suicide statistics, followed by a schedule of stories promoting the work which is being done to prevent suicide locally.

Collaborative members shared tricky questions and topics which media may ask for comment on during the campaign, including:

- Isn't there a relationship between mental health and suicide?
- Considering the success of Youth Aware of Mental Health (YAM), will the program be rolled out with a younger age group?
- Recent story linking increased ED presentations by young people and failing of headspace.*

*AH noted the study referred to in this story reported increased presentations in young people but did not link this increase with the headspace service (this inaccurate connection was made by the media). Collaborative members reinforced the unhelpfulness and inaccuracy of the story.

RdJ asked if 1-page summary can now be used by Collaborative members. AH noted that the campaign (including the 1-page summary) is being offered to Fairfax as an exclusive, to help get the biggest impact. Collaborative members were given a hard copy of the 1-page summary, but were asked to hold off on using it until the media campaign.

ACTION 1: Emma distribute electronic copy of 1-page summary once ready to be used.

ER

JJ asked about the timing of the campaign. AH noted that Fairfax are guiding the Collaborative on the best timing for the campaign, but we are aiming to start as soon as possible and regularly publish stories until around RUOK? Day in September.



Collaborative members will play an important role in the campaign by sharing and helping to develop stories.

ACTION 2: Collaborative members are invited to contribute stories / spokespeople for media campaign. Members to contact Alex/Emma to discuss (<u>suicideprevention@coordinare.org.au</u>)

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c. WG3 (school interventions)

HM reported WG3 has prepared a media release for YAM. NS noted the release of the new Kindergarten to Year 10 PDHPE school syllabus may also be worth incorporating into the campaign.

HM noted Public and Catholic schools are already doing YAM so WG3 is now focusing on engaging independent schools. The accessibility of YAM by students who need a support person from the school in the room (e.g. when a student needs support due to Autism) has come up as an issue. Evidence for YAM shows it is only effective when there are no school staff in the room. WG3 is discussing how to balance maintaining fidelity while ensuring all students have access to the program. BB reported that when he helped with YAM there was a number of students with Autism Spectrum Disorder in the class, who were able to participate without assistance.

ACTION 3: Cynthia find out how students with disability from Catholic schools have been engaged in YAM to date.

CMc

HM reported WG3 has started to review the implementation and delivery of YAM. AH noted that there will be a more thorough review of how YAM has gone at the end of Term 2, which will include analysis of the program's impact. CMc noted there has been very positive anecdotal feedback from Catholic schools so far.

d. WG4 (data-driven suicide prevention)

AH reported WG4 has been looking at what means people are using to suicide and discussing what can be done to restrict these means. AH also noted a number of improvements have been made to public locations where suicides are known to occur, to make them safer.

e. WG5 (Aboriginal suicide prevention)

GW reported WG5 has been working out how to best meet with Aboriginal people to discuss the LifeSpan funding (see item 4 below). WG5 have also been discussing the suitability of the existing LifeSpan communication resources (e.g. the LifeSpan videos) for Aboriginal communities.

NG noted that regional NAIDOC awards would be a good opportunity to engage Aboriginal communities.

4. Funding allocation process – meetings update

ER reported that meetings with people with lived experience and men have now been held, as part of the <u>LifeSpan Funding allocation process</u>. ER provided an overview of some of the key themes emerging from the meetings which will be summarised and shared with the Collaborative once meetings with Aboriginal people have been held.

AH reinforced that the Collaborative is keen to hear from people from high risk groups who were not able to attend meetings and asked Collaborative members to let us know if there is anyone else who would like to provide input. Men's Sheds and homelessness services were identified as key groups to engage with.

TELEPHONE: 1300 069 002 POSTAL ADDRESS: PO BOX 325, FAIRY MEADOW, NSW 2519



ACTION 4: Collaborative members send contact details of anyone from high risk groups who would like to have input to Alex/Emma (<u>suicideprevention@coordinare.org.au</u>).

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National resources

AH provided an overview of newly available, national online resources for mental health and suicide prevention:

Head to health: database of free or low cost mental health services and resources (e.g. websites, forums, apps etc)

<u>Life in Mind</u>: online platform to connect Australian suicide prevention services and programs with each other and the community - services/programs are not required to have evidence to be listed on the website. Collaborative members encouraged to submit details of their services/programs to Life in Mind.

<u>The Suicide Prevention Hub</u>: information on suicide prevention activities which have really good evidence, as determined by an independent, expert advisory group (AH noted he is a member of the advisory group).

ACTION 5: Collaborative members think about how the Collaborative can utilise above National resources.

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ACTION 6: Collaborative members send feedback on whether they find the above National resources helpful or relevant to Alex (ahains@coordinare.org.au).

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6. Shoalhaven NGO executive vacancy

GW reported an expression of interest for the Shoalhaven NGO executive vacancy has been received from SC. The EOI was accepted by the members unanimously.

7. Additional items

Federal budget

AH provided an overview of the funding allocated to mental health and suicide prevention related activities in the federal budget announcement on Tuesday.

8. Next meeting

Date: Thurs 14 June 2018

Time: 8:30-9:30am

Venue: COORDINARE office, Ground floor The Central building

Squires Way, Innovation Campus, North Wollongong & video link to GPH Centre, 107 Scenic Dr, Nowra

Meeting schedule for 2018 available here. Please put these dates into your diary.