Queensland Mental Health Commission

Reducing suicide and its impact

Queensland Suicide Prevention Action Plan 2015-17 Summary



Seek help

National 24/7 crisis services

Lifeline 13 11 14

Suicide Call Back Service 1300 659 467

MensLine Australia 1300 78 99 78

Kids Helpline 1800 55 1800 (24/7 crisis support) or www.kidshelp.com.au

National support services General support

beyondblue support service 1300 22 4636 or email/chat at www.beyondblue.org.au

Lifeline www.lifeline.org.au/Get-Help/

Suicide Call Back Service www.suicidecallbackservice.org.au

SANE Australia Helpline 1800 18 SANE (7263) www.sane.org

Our goal

The Queensland Suicide Prevention Action Plan 2015-17 aims to reduce suicide and its impact on Queenslanders and is a step towards achieving a 50 per cent reduction

in suicide in Queensland within a decade.

This shared goal will be achieved by building on actions already being implemented, identifying those initiatives most likely to make a difference and promoting promising and innovative practice.

1

About the Action Plan

The Action Plan outlines actions across four related priority areas and will contribute to the *Queensland Mental Health, Drug and Alcohol Strategic Plan 2014-2019* (the Strategic Plan) outcomes of a population with good mental health and wellbeing, reduced avoidable harm and reduced stigma and discrimination.

It acknowledges that broader issues such as improving mental health and wellbeing and preventing and reducing the adverse impact of problematic alcohol and drug use are central to achieving our shared goal. The Action Plan is supported by other action plans being developed as part of the Strategic Plan, including:

- The Queensland Mental Health Promotion, Prevention and Early Intervention Action Plan to improve mental health and reduce the incidence, severity and duration of mental illness.
- The Queensland Alcohol and other Drugs Action Plan to prevent and reduce the adverse impact of alcohol and drugs on Queenslanders.
- The Queensland Aboriginal and Torres Strait Islander Social and Emotional Wellbeing Action Plan to improve social and emotional wellbeing.
- The Queensland Rural and Remote Mental Health and Wellbeing Action Plan to improve the mental health and wellbeing of people living in rural and remote communities.

Suicide and its impact on Queenslanders

In 2014, an estimated 627 people in Queensland took their lives¹. While suicide rates have remained relatively stable in Queensland at around 13.3 per 100,000 people between 2009–2013 they continue to be higher than the national rate of 10.9 per 100,000 people and higher than the rates in most other states and territories².

According to the Australian Institute for Suicide Research and Prevention one third (31.2 per cent) of people who died by suicide in Queensland between 2002 and 2011 had previously attempted suicide³. For every person who dies by suicide, an estimated 30 people attempt suicide⁴ with a higher proportion of women attempting suicide than men.

Some groups experience higher rates of suicide including Aboriginal and Torres Strait Islander peoples; people living in rural and remote communities; people living with mental illness; children and young people known to the child protection system; people from culturally and linguistically diverse backgrounds and Lesbian, Gay, Bisexual, Transgender and Intersex people.

The impacts of suicide are immediate, far-reaching and longlasting. They are felt by families, friends, work colleagues and the broader community, who may struggle to support a person experiencing suicidal behaviour or to cope with the aftermath of a suicide. The number of people impacted by suicide is difficult to quantify, with one study finding that for every suicide six people identify as being bereaved by suicide⁵.

There are also significant impacts on service providers, particularly those providing support and treatment, and first responders such as police and ambulance services, who are required to respond to these types of incidents.

2

Priority Area 1: Stronger community awareness and capacity

Our purpose

To build stronger and more supportive families, workplaces and communities so they are better equipped to support and respond to people at risk of, and impacted by, suicide.

Our focus

- Promote community leadership by supporting local level solutions to enhance community connectedness and engagement.
- Raise community awareness about suicide to ensure that individuals, families and communities have the capacity to have safe conversations about suicide and recognise and help a person at risk of suicide.
- **Reduce stigma** associated with suicide and other related issues such as mental illness and financial problems, to remove barriers to people seeking the support they need, when they need it.
- Support and help those bereaved and impacted by suicide, including families, communities, service providers and first responders to assist them in managing the impact of suicide and suicide attempts.

- 1. Develop and trial a place-based suicide prevention initiative that builds on community strengths in a rural and remote community (Queensland Mental Health Commission).
- 2. Work with national partners including *beyondblue* to support a range of community awareness, education and stigma reduction activities that aim to reduce suicide risk by supporting people to protect their mental health and improve opportunities for people to get the right help at the right time when they are unwell (Queensland Mental Health Commission).
- 3. Increase community awareness of suicide prevention activities through enhanced coordination and promotion of community events for World Suicide Prevention Day (Queensland Mental Health Commission).

- 4. Review the accessibility of resources to assist and support people bereaved by suicide, as well as for people who have attempted suicide, their families, friends and other support persons (Queensland Mental Health Commission).
- 5. Provide resilience training for staff identified as first responders to assist them in managing the personal impact of attending to traumatic or stressful situations (Department of Justice and Attorney-General).
- 6. Support the MATES in Construction Scoping Project 'Saving lives in the Construction Industry' to scope the expansion of its suicide prevention initiatives to rural and regional Queensland and to include small and medium sized businesses (Queensland Mental Health Commission).
- 7. Develop a Queensland Police Service framework for Improving Mental Health, Well Being and Suicide Prevention Plan 2015-17 (Queensland Police Service).
- 8. Provide programs for front line officers that focus on post-incident support including FireCare and Embrace and improved access to employee assistance programs (Queensland Fire and Emergency Services).
- 9. Continue facilitation of Employee Exposure Prevention and Support Programs to provide employee assistance and psychology services (Queensland Rail).

Priority Area 2: Improved service system responses and capacity

Our purpose

To ensure people at risk, including those who have attempted suicide, get the support they need, when and where they need it.

Our focus

- Equip all service providers with the necessary skills and knowledge to identify and respond in an appropriate and timely way to support people at risk of suicide, dependent on their respective roles and responsibilities.
- Provide person-centred assessment, support, treatment and care for those at risk that not only considers the point-in-time clinical assessment, but the life circumstances of the person needing support including appropriate follow-up care for those who have attempted suicide.
- Continue efforts to reduce access to the lethal means of suicide within facilities and community infrastructure and provide support to individuals at risk to eliminate or reduce the risk of suicide.

- **10.** Enhance the capacity of hospital emergency departments to identify and respond to those at risk of suicide (Queensland Health).
- 11. Implement a 'Suicide Recognition and Intervention' training package for front line Queensland Rail staff (Queensland Rail).
- 12. Continue training front line PoliceLink staff in understanding suicidal behaviours and managing callers at high risk of suicide (Queensland Police Service).
- **13.** Provide mental health training for school staff to identify individuals at risk and respond appropriately (Department of Education and Training).
- 14. Support improved responses in public hospitals by reviewing and updating existing education and support resources (Queensland Health).
- 15. Improve the identification and assessment of people at risk of suicide at the point of admission into custody in Queensland's Correctional Centres (Department of Justice and Attorney-General).
- 16. Require Senior Guidance Officers and Guidance Officers, as first responders in State Schools, attend suicide prevention and intervention training (Department of Education and Training).

- 17. Provide training, support and resources to assist staff, as well as foster and kinship carers, to understand and respond to the mental health needs of children and young people (Department of Communities, Child Safety and Disability Services).
- Implement a suicide prevention and resilience model across Queensland's Correctional Centres to provide person-centred assessment, support, treatment and care for those at risk (Department of Justice and Attorney-General).
- 19. Enhance personal resilience of prisoners and strengthen protective factors through delivery of the Strong Not Tough Adult Resilience program (Department of Justice and Attorney-General).
- 20. Pilot a project to deliver best practice support and follow-up care to people who have attempted suicide, or expressed significant suicidal ideation (Queensland Mental Health Commission).
- 21. Continue to ensure that young people in youth detention centres are in a safe environment where risk of, and opportunity for, suicide and self-harm is minimised (Department of Justice and Attorney-General).
- 22. Implement updated *Operational Practice Guidelines* for Probation and Parole for managing offenders under community based orders identified as at increased risk of suicide (Department of Justice and Attorney-General).

- 23. Continue risk assessment of all people in custody in police watchhouses, with appropriate management of those at high risk (Queensland Police Service).
- 24. Continue to expand safer cell measures in Queensland's correctional centres (Department of Justice and Attorney-General).
- 25. Develop an environmental safety guideline that is designed to promote a culture of safety and the necessary system supports in acute mental health inpatient wards (Queensland Health).

Priority Area 3: Focused support for vulnerable groups

Our purpose

To address the specific needs of groups who are experiencing higher rates, and who are at greater risk, of suicide.

Our focus

- Improve the effectiveness of mainstream services to better understand and respond to the needs and circumstances of vulnerable groups.
- In partnership with at-risk groups, customise approaches to meet their unique needs and circumstances ensuring they are included in the planning, implementation and evaluation of such initiatives.

- 26. Contribute to and partner in national research projects including *Improve men's access to care: a national ambulance approach to reduce suicide and to improve the mental health of men and boys* (Queensland Ambulance Service).
- 27. Provide staff education and support to improve awareness to better respond to people presenting at risk of suicide in regional locations or at customer service counters, and implement internal workforce awareness strategies through existing Health and Wellbeing programs (Department of Natural Resources and Mines).
- 28. Continue to support the Drought Wellbeing Service to increase access to community based, clinical mental health services in drought affected areas (Queensland Health).
- 29. Reform the youth justice system to ensure it is more responsive to issues impacting on young people's offending behaviour with an improved focus on mental health needs (Department Justice and Attorney-General).

- 30. Improve outcomes for children in contact with the child protection system through a review of therapeutic services available to young people in care and implementing the Child and Family Reform Program that aims to reduce child abuse by supporting families earlier, to keep children safe and provide for their wellbeing (Department of Communities, Child Safety and Disability Services).
- 31. Implement the new *Strengthening Families Protecting Children Framework for Practice* which will provide child protection practitioners with a common set of values, knowledge and practice tools (Department of Communities, Child Safety and Disability Services).
- 32. Scope current service models, barriers for accessing services and options for improvement, for Aboriginal and Torres Strait Islander young people at risk of suicide within the Townsville region (Queensland Mental Health Commission).
- 33. Develop tailored suicide prevention training and materials to support culturally and linguistically diverse communities, particularly communities from a refugee background, to recognise and support a person who is at risk of suicide (Queensland Mental Health Commission).

Priority Area 4: A stronger more accessible evidence base

Our purpose

Build a stronger, more accessible evidence base that drives continuous improvement in research, policy and practice.

Our focus

- Provide more accessible research about what works to better inform service delivery and practice.
- Enable timely access to accurate and relevant data to inform local responses to areas of identified need.
- Include the wisdom of those with a lived experience into research, policy and service development.

- 34. Support innovative research that aims to better identify and respond to the unique risk and protective factors that may lead to groups or populations being at increased risk of harm (Department of Justice and Attorney-General).
- 35. Develop and implement a Data and Information Sharing Network to enhance the collection, analysis and dissemination of suicide mortality and attempt data (Queensland Mental Health Commission).
- 36. Maintain the Child Death Register, which includes details of all child deaths, including suicides, since 2004 and report on data and trends annually (Queensland Family and Child Commission).
- **37.** Partner with other jurisdictions to develop a national surveillance system for overdose and suicidal behaviour (Queensland Ambulance Service).
- 38. Monitor and analyse suicide and self-harm incidents in order to support security operational tasking across the south east Queensland rail network in both the short and mid-terms (Queensland Rail and Queensland Police Service).

- **39.** Review the deaths and serious injuries of children who were known to Child Safety within one year prior to the incident or who were in out-of-home care at the time of the event, including suicides (Department of Communities, Child Safety and Disability Services).
- 40. Implement a process for monitoring and analysing incidents of suspected suicide and significant self-harm involving individuals with current or recent contact with a Queensland Health service (Queensland Health).
- 41. Undertake systematic monitoring of suicide and selfharm incidents including a regular review of Queensland Corrective Services suicide and self-harm data (Department of Justice and Attorney-General).
- 42. Trial and evaluate a *Suicide Prevention Lived Experience Speakers Bureau Train the Trainer Program* to raise awareness within communities and workplaces about suicide and to empower people to take an active role in local suicide prevention activities (Queensland Mental Health Commission).

Governance, monitoring, reporting and review

The implementation of the Action Plan will be overseen by a newly established Queensland Suicide Prevention Reference Group convened by the Commission. Members of the Reference Group will include government and non-government organisations including those supporting people affected by suicide.

The Commission will monitor the Action Plan's implementation and will report on progress annually. Progress will be measured based on age standardised rates of suicide in Queensland and on the rates of suicide experienced by vulnerable groups.

The Commission will review the Action Plan after 12 months.

Acknowledgement

The Queensland Government and the Queensland Mental Health Commission would like to thank members of the community and stakeholders for their contribution to developing the Action Plan. We particularly acknowledge those who have a lived experience of suicide for sharing their personal experiences that have informed our renewed approach and our actions.

References

8

- 1. Australian Institute for Suicide Research and Prevention (2015), Suicide Mortality Data in Queensland for 2014, Griffith University, Brisbane.
- 2. Australian Bureau of Statistics 2015, Causes of Death Australia 2013, Australian Bureau of Statistics, Canberra.
- 3. Kolves, K, Potts, B & De Leo, D 2015, 'Suicides in Queensland 2002-2011', Australian Institute for Suicide Research and Prevention, Brisbane.
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- Flynn. L, Robinson, E (2008) Family issues in suicide prevention, AFRC Briefing No. 8, Australian Institute of Family Studies, retrieved on 11 June 2015, https://aifs.gov.au/cfca/publications/family-issues-suicide-postvention



Further information

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Translation

The Queensland Government is committed to providing accessible services to Queenslanders from all culturally and linguistically diverse backgrounds. If you have difficulty in understanding the Action Plan, you can contact us on **1300 855 945** and we will arrange an interpreter to effectively communicate the report to you.



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