

Monthly Meeting Minutes – 13 April 2017 8:30-9:30am, 32.301, level 3, IHMRI building, UoW Wollongong campus & video link to GPH Centre, 107 Scenic Dr, Nowra

1. Attendees

WOLLONGONG:

ALEX HAINS	(AH)	Regional Manager, SP Collaborative	
BRIN GRENYER	(BG)	SP Collaborative Executive; IHMRI	
CYNTHIA MCCAMMON	(CMc)	Catholic Education	
JOHN FLANNAGAN	(JF)	ISPAN	
GRAHAME GOULD	(GG)	Director, Lifeline South Coast	
HEATHER MCCARRON	(HMc)	TAFE NSW, Shellharbour & Moss Vale Campuses	
LEANNE WOODLEY	(LW)	Association of Independent Schools	
LINDA LIVINGSTONE	(LLi)	SP Collaborative Executive; COORDINARE	
LYNDALL FOWLER	(LF)	West Street Community Service	
MICHELLE FRASER	(MF)	Disability Services Australia	
RON DE JONGH	(RdJ)	Grand Pacific Health (GPH)	
VIDA BLIOKAS	(VB)	School of Psychology, UOW	

NOWRA:

CLARE LESLIE	(CL)	Lifeline South Coast
GLENN WLLIAMS	(GW)	SP Collaborative Executive, MIND the GaP
HELEN BACKHOUSE	(HB)	Flourish (formerly Richmond PRA)
JUDITH SIMONS	(JSi)	One Door (formerly Schizophr <mark>enia Fellowship)</mark>
KIMBERLY CHISWELL	(KC)	Waminda

APOLOGIES:

ANTHONY TALTY	(AT)	Ambulance Services, Illawarra Zone
ARMANDO REVIGLIO	(AR)	Wollongong City Council
DEBRA MURPHY	(DM)	Regional Development Australia Illawarra
ERIN HIESLEY	(EH)	SP Collaborative Executive; Youth Health Manager, GPH
JANET JACKSON	(11)	NSW Trains
KELLY PARISH	(KP)	ARAFMI
LYNN LANGHORN	(LLan)	Mental Health Director of Nursing, ISLHD
NICK GUGGISBERG	(NG)	Kiama Council
SANDRA BOLACK	(SB)	ISPAN
TIM HEFFERNAN	(THe)	SP Collaborative Executive; Lived Experience Representative
TIM HUDMAN	(THu)	SSPAN

2. Welcome and introduction

KC welcomed attendees and new representatives were introduced, including MF from Disability Services Australia.



3. Aftercare - Next Steps Service

RdJ provided an update on this proposal for members, saying that Grand Pacific Health (GPH) had met with the NSW Ministry of Health as part of negotiations, during which substantial changes were suggested by the Ministry. RdJ is still in conversations with the service partners (Flourish, South Coast AMS, ISLHD) about how these changes will likely affect the planned service delivery. RdJ emphasised that he was confident model fidelity could still be maintained.

NSW Ministry of Health requiring governance of this new service to include reporting to both the PHN and the Collaborative.

ACTION 1: RdJ to continue to update the Collaborative members as negotiations progress, with a more detailed presentation of the planned service likely at the May meeting.

RdJ

4. Working Groups

Working Groups have formed with Leads identified. AH has met with all Leads to provide orientation and Leads are expected to contact their Working Group members in the next week to organise initial meetings.

ACTION 2: Working Group Leads to contact their relevant Working Group members to organise initial meetings.

Working Group Leads

ACTION 3: AH to attend initial Working Group meetings to provide all members with orientation to LifeSpan and purpose of Working Groups.

ΑH

5. Report Card

AH introduced concept of a Report Card, providing a regular report on how we are going as a region in relation to suicide prevention. See below for points raised:

- Accurate and timely information is a clear gap, as it's not currently possible to confidently assess how we're
 going or whether our suicide prevention efforts are having the anticipated effects.
- Improved suicide data underpins all other activities, and it's important to base our efforts on reality, not rumour
- Not just about measuring stuff, but about <u>learning more about how to most effectively reduce suicide, and about engaging people</u> (e.g. improved data will enable us to more clearly articulate the rationale for what needs to be done)
- The evaluation that is required is beyond the scope of any one organisation as we're wanting to influence improvements in the way the system works across sectors – the Collaborative is well-placed to facilitate this level of evaluation
- The Collaborative is well-positioned to advocate for measures that are meaningful to people in the community, to keep our focus on the things that will really make a difference
- Important to measure both intended and unintended consequences of suicide prevention efforts
- Regular feedback loop required to ensure that data is actually used to improve services and supports available



LLi facilitated exercise where members in attendance wrote down their response(s) to the following question: 'Through your involvement (and that of your organisation/group) in the SP Collaborative, what are you hoping to see achieved?'

Responses were collated and analysed thematically to highlight areas Collaborative members would like reported on within a Report Card. These will form a starting point for what we'd like to be able to include in a Report Card, with Working Groups to continue refining the barometers of success.

ACTION 4: Collaborative members who did not attend this meeting are encouraged to email their all responses to the above question to AH via ahains@coordinare.org.au. all

ACTION 5: AH to begin working on Report Card. Those interested in contributing to this work are encouraged to contact AH.

6. Executive role vacancy

As discussed at the March meeting, EH has accepted a new role within the ISLHD. Therefore, she can no longer fulfil the Collaborative's Illawarra NGO executive role. This was put out to EoI via email after the March meeting. AH advised that one nomination had been received, from Rebecca Sng (Manager, Primary Mental Health Services, Grand Pacific Health).

This nomination was accepted unanimously.

7. Project Officer recruitment

AH advised that 4 people were interviewed (from the 39 applications received), but none were successful. The position has been re-advertised with some re-shaping to emphasise the skill set required (i.e. project management, community engagement) and a number of applications have already been received.

ACTION 6: AH to advise members of the outcome of this recruitment as soon as possible. AH

8. Additional items

SP Collaborative website

AH advised that website is now live and will be a very useful resource for people to access up-to-date information and to support the Collaborative practice of transparent communication. Please check the website regularly for updates - www.suicidepreventioncollaborative.org.au.

National LGBTI Mental Health & Suicide Prevention Strategy

AH advised that this Strategy was released shortly after the March meeting and highlights a number of areas we need to address within our region, e.g. making health services more welcoming for the LGBTI communities.

Postvention



AH advised that discussions with the Black Dog Institute about a Regional Suicide Response plan have begun. AH noted that this was likely to be a significant piece of work (akin to an additional LifeSpan strategy), but was certainly warranted and likely to make a really practical difference to the community.

ACTION 7: Any members interested in contributing to a Regional Suicide Response planning are encouraged to contact AH on ahains@coordinare.org.au as soon as possible.

all

Youth Aware Mental Health (YAM)

LLi advised that the trainers for public schools have been recruited and the trainers for non-government schools should be confirmed very shortly. Trainers will themselves be trained by YAM experts from Sweden & America with two options – the week of 15 or 22 May.

A number of members were keen to discuss the evaluation of this (and other) activities. AH noted that this would be something for Working Groups to contribute to and feed back to the monthly meetings.

9. Next meeting

Date: Thurs 11 May 2017 Time: 8:30-9:30am

Venue: Level 3 meeting room, IHMRI building, UoW Wollongong campus

Video link: from GPH Centre, 107 Scenic Dr, Nowra Phone link: contact AH for details if this is required

Meeting schedule for 2017 available here. Please put these dates into your diary.