

## Illawarra Shoalhaven Suicide Prevention Collaborative

**Breakfast Meeting Minutes – 7 October 2015**

**Venue: IHMRI Level 3.301**

**Attendees:**

Dr Vida Bliokas	IHMRI, MHAB- Clinical Theme Leader; ISLHD
Prof Brin Grenyer	IHMRI, MHAB- Academic Theme Leader; UOW
Dr Alex Hains	Grand Pacific Health, Mental Health Manager
Ms Sue Baker-Finch	COO, IHMRI
Mr Peter Brown	Chair, Illawarra Suicide Prevention Awareness Network (ISPAN)
Dr Mitch Byrne	UOW, School of Psychology; Mind the Gap Planning Group
Ms Linda Cohen	Project Manager, Illawarra Shoalhaven Suicide Prevention Collaborative
Mr Tim Coombs	Director of Nursing Mental Health, ISLHD
Prof Frank Deane	Director, Illawarra Institute of Mental Health; UOW, School of Psychology
Mr Grahame Gould	Director, Lifeline South Coast
Mr Greg Hand	Learning and Wellbeing Coordinator, Department of Education
Mr Tim Heffernan	Peer Support Worker, ISLHD
Ms Erin Hiesley	Manager, Partners in Recovery
Mr Ron de Jongh	CEO, Grand Pacific Health
Ms Dianne Kitcher	CEO, Coordinaire
Dr Coralie Wilson	UOW, School of Medicine; Mind the Gap Planning Group

### **1. Preliminary Business**

#### **1.1 Apologies:**

Dr Andrew Bonney	UOW, School of Medicine; SIMLR Project
Mr Toby Dawson	Manager, IRT Foundation; Southern Health Research Alliance member
Ms Paula Hakesley	Director Mental Health, ISLHD
Ms Wendi Hobbs	Chair, Shoalhaven Suicide Prevention Awareness Network (SSPAN)
Prof Alison Jones	Executive Dean SMAH Faculty, UOW; Mind the Gap Planning Group
Ms Lynn Langhorn	Operations Manager Mental Health, ISLHD
Ms Margot Mains	CE, ISLHD
Prof Lorna Moxham	UOW School of Nursing; Southern Health Research Alliance member
Insp Phil O'Neil	Wollongong Area Command, NSW Police Force
Dr Margaret Rose	Director Research Governance, ISLHD; Southern Health Research Alliance member
Ms Leanne Simpson	Health Relationship Manager, Illawarra Zone, NSW Ambulance
Dr Melinda Williams	Head of Hospital & Health Service, Peoplecare; Southern Health Research Alliance, member
Ms Leanne Woodley	Special Education Consultant, Association of Independent Schools NSW
Mr Alan Woodward	Lifeline Foundation, Research Director

## **2. General Business**

### **2.1 Welcome and Introduction**

Vida Bliokas and Brin Grenyer welcomed the members and introduced new attendees. Linda Cohen, appointed on a casual basis as Project Manager, was introduced to the group.

Apologies expressed for those who could not attend. It was noted that most have expressed great interest in being involved in the Collaborative in the future.

Brin Grenyer: posed the question of the ways in which the group can measure whether they are in fact 'tender-ready'.

Brin attended the recent Australian Psychological Society (APS) conference, Graham Gould also attended. There was discussion around the need for better coordination and use of funds when it comes to mental health and suicide prevention. From an economic perspective, it makes sense to tackle mental health early on. Look at inequity in Australia – the majority of funds go to ongoing support rather than prevention, which leads us to consider how best to prevent mental health issues. Note cities receive six times more than regional areas. Focus should be on how to get better trained staff and more effective services in regional areas. Acknowledge those with lived experience, carers and sufferers.

### **2.3 National Action Plan**

Alex Hains: discussed *'Transforming Suicide Prevention Research: A National Action Plan'*, which was released on Sept 10<sup>th</sup>, National Suicide Prevention Day. He emphasized that research has to underpin what the Collaborative does to measure the effectiveness of any actions they take. He noted a current lack of intervention research on suicide prevention. Must make sure research looks at economic outcomes as well as the impact of intervention strategies.

NAP noted the need to tap into existing networks in the region to ensure suicide prevention is relevant to the local community.

NAP suggested ethical guidelines may need to be more flexible - learn what's going on and what is helpful to sufferers.

Coralie Wilson: noted research must be translational. If the current data is to be used, the level of quality must be at NHMRC standards. Emphasis on not using poor quality data!

Epidemiology – talked about in what ways but not how. For example - how people's behaviours change.

Brin Grenyer: queried research into lived experience?

Tim Heffernan: mentioned Nov 4 Consumer Led Research Network Forum, supported by the Community Mental Health Drug and Alcohol Research Network and the Mental Health Commission of NSW. Discussing consumer-led and co-production research in mental health, alcohol and other drugs.

## **2.3 Data Collection**

Sally McNeill: presented current status of data collection on behalf of Linda Cohen, project manager, including which organisations/individuals have been approached, what data they collect and the spatial coverage of that data. Requested additional suggestions from members if there are any sources that have not been considered.

Alex Hains: gathering data is about getting a picture of what's happening in the area as well as deciding what's measurable and can be identified as baseline. How do we measure the impact of our activities? Note: Black Dog Institute has 7 measures of ideation and risk – could this be adapted?

Consider how different is the data? How do the collection points define the data?

Data linkage is important to consider.

## **2.4 Possible Research Strategy**

Brin Grenyer asked Coralie Wilson to comment on a broader research strategy:

Coralie noted that quite a few groups exist to deal with suicide prevention because funding has been made available through lobbying. Any work done in this area must make meaningful change. There should be a focus on outcomes. Group should consider how to make it clear that what is being done is safe and ensures all research is outcome focused? Must pay attention at all times to the larger picture and be aware of the potential for harm.

## **2.4 Discussion Points**

Grahame Gould: mentioned the idea of an economist being involved in the collaborative. Possibly a health economist (? Simon Eckerman). He queried if there is data around the financial costs of suicide. Grahame also mentioned that reps from State Rail might be useful for consultation at a later point.

He discussed LifeLine's role and issues with the centralised system:

National call centre: + for reducing the queue; - for not being able to identify recurrent callers.

LifeLine South Coast propose running a trial to overcome problem callers, eg sexual callers. Opens the possibility that Lifeline operating in a local way might assist with some of the activity here. 3% of callers make up 6% of calls. Are there advantages to having a locally-based call centre? What is the best way to do it?

## **3. Close of Meeting**

Good examples of services implemented in the region - proposed presentations from intervention groups

Consider: quantity of data, quality of data and what is already happening? What are the best models? How do we know they are the best? What do we need to have in place to be tender-ready?

Not looking for “innovative” > looking for proof of networks working together in a cohesive and smooth manner.

Suggestion to map data onto wheel of 9 points (see: *Proposed suicide prevention framework for NSW*, p11)

The next meeting will be held on Wednesday 11<sup>th</sup> November 2015 at 7.30am with additional representatives, nominated by collaborative participants.