

Monthly Meeting Minutes – 9 November 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

WOLLONGONG:

ADAM WALKER	(AD)	NSW Ambulance
ALEX HAINS	(AH)	SP Collaborative
ANDREA ARNDT-JACKMAN	(AAJ)	Neami National
CARRIE MILLER	(CM)	Lived Experience
COREY DE BRUIN	(CdB)	Lived Experience
DANIEL ERAK	(DE)	APM employment services
EMMA RINGLAND	(ER)	SP Collaborative
GIULIANA MORANDIN	(GM)	South Coast Private
JANET JACKSON	(JJ)	NSW Trains
JOAN GISSING	(JG)	Department of Education
JOHN CASEY	(JC)	ACON
LORNA MOXHAM	(LM)	UOW Global Challenges Program
NICK GUGGISBERG	(NG)	Kiama Municipal Council
RACHEL NORRIS	(RN)	Lifeline South Coast
RACHEL ROWLEY	(RR)	Kiama Municipal Council
REBECCA SNG	(RS)	Grand Pacific Health
TIFFANY WESTON	(TW)	UOW
TIM HEFFERNAN	(TH)	SP Collaborative Executive; Lived Experience Representative

NOWRA:

ANN FRANKHAM	(AF)	Lived Experience
GLENN WILLIAMS	(GW)	SP Collaborative Executive; MIND the GaP
SHARLENE CRUICKSHANK	(SC)	South Coast Medical Service Aboriginal Corporation
WENDI HOBBS	(WH)	SSPAN

APOLOGIES:

ADAM BRYANT	(ABr)	ISLHD
AMY BERTAKIS	(AB)	Wellways
ARMANDO REVIGLIO	(AR)	Wollongong City Council
BRIAN BOULTON	(BB)	Citylife Community Initiatives
CATHERINE CAMPBELL	(CC)	Shoalhaven City Council
CLARE LESLIE	(CL)	Lifeline South Coast
KIM KELLY	(KK)	COORDINARE
KYLIE HANIGAN	(KH)	Lived Experience; Hansen & Cole Funerals
LINDA LIVINGSTONE	(LLi)	SP Collaborative Executive; COORDINARE
MARILYN DUNN	(MDu)	Salvation Army
MICHELLE ELLIS	(ME)	Anglicare
MELISSA CAMERON	(MC)	Department of Education
VIDA BLIKAS	(VB)	SP Collaborative Executive; School of Psychology, UOW

2. Welcome and introduction

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

3. Working Group (WG) updates

a. WG1 (health interventions)

AH reported that WG1 has not met since July but their next meeting has been scheduled for next Friday 16th November 10am – 12pm.

b. WG2 (community interventions)

ER reported WG2 has been looking at how community suicide prevention training would ideally work. One element of an ideal training delivery is for training participants to receive a concise, up-to-date list of local support services (including clinical and non-clinical supports), so they are better equipped to connect someone who is struggling to the relevant supports. WG2 is working to develop this resource and has started by reviewing existing support service resources, including those developed by the Illawarra and Shoalhaven *Suicide Prevention and Awareness Networks*. ER asked Collaborative members if they know of any other existing resources or services for WG2 to consider in their review. CM suggested the local Hearing Voices Network be included in the resource.

ACTION 1: Carrie send details of Hearing Voices Network to Emma (eringland@coordinare.org.au)

CM

RS noted that the Collaborative will need to make sure the resource is kept up-to-date, and suggested it be made available on the Collaborative website. AH confirmed the resource will be available on the Collaborative website, as well as in hard copy. JC suggested the resource is also shared on Facebook.

ER invited Collaborative members interested in helping to prepare the resource to attend the next WG2 meeting. RN suggested the resource is also distributed to the broader Collaborative for feedback.

ACTION 2: Collaborative members interested in helping to prepare the support services resource email Emma (eringland@coordinare.org.au).

All

ACTION 3: Emma distribute draft support services resource to Collaborative members for input once prepared by WG2.

ER

c. WG3 (school interventions)

ER reported that WG3 has been continuing to discuss what else they would like to achieve in schools, aside from the implementation of the Youth Aware of Mental Health (YAM) program. As a start, WG3 are looking at what activities are already happening in schools, including programs such as [Project Air](#). ER asked Collaborative members if they know about any other programs/projects happening in schools that WG3 should be aware of. CM noted the [Living Books program](#) Wollongong City Council is delivering in schools. NG noted Kiama Council's Youth Services do a lot of work with local schools and other councils likely do as well. JG reported that local School-Link Coordinators are already in the process of mapping out what's happening in schools and will be able to help. JG also noted that local public schools have a network of Head Teachers in charge of wellbeing who will be a good point of contact for the Collaborative.

ACTION 4: WG3 find out more about school activity mapping done by local School Link Coordinators

WG3

ACTION 5: Joan help connect WG3 with the local Head Teacher Wellbeing Network

JG

DE noted there are a number of other organisations working with young people outside of schools. Group listed some of these organisations and emphasised the importance of reaching young people who are not engaged in traditional schooling.

ACTION 6: WG3 scope out avenues to reach young people not engaged in school.

WG3

d. WG4 (data-driven suicide prevention)

AH reported WG4 is continuing to work on improving access to accurate, timely data on local suicide deaths and attempts. AH noted there is building frustration about the inability to access accurate, timely data on suicide at all levels. The Black Dog Institute (BDI) are working with police and ambulance at a state level to improve the accuracy of their data. However, it is unknown how long it will take to get a more complete dataset from a state-level. So WG4 is also looking at how data can be collected locally.

a. WG5 (Aboriginal suicide prevention)

GW reported there is no update from WG5.

4. Sustainability

GW provided an overview of the results from the *Collaborative Health Assessment Tool* (CHAT) survey disseminated in October 2018. Around 70% of Collaborative members completed the survey, and overall the results suggest the Collaborative is going well but there are some areas we can improve on. GW emphasised that although the LifeSpan funding is finishing in July 2019, the Collaborative will continue and we will need to keep working together to sustain the work if we are going to have an impact on suicide.

[Click here for full overview of the CHAT survey results.](#)

RS highlighted that in preparation for LifeSpan finishing, the Collaborative will need to decide what to focus its resources on. RS went over the [LifeSpan Activity & Resourcing document](#), noting that the current levels of resourcing from the LifeSpan project are Nil/Low for most strategies. Some strategies are already being resourced locally and are well placed to continue beyond LifeSpan. Other strategies, particularly those relating to improving care, have had less activity and will require much more local resourcing if they are to be progressed.

RS reinforced that to-date the Collaborative's activity has been predominantly in raising awareness (e.g. community campaigns), rather than in improving care. This has made sense because even though these strategies have less evidence for reducing suicide deaths and attempts, they are easier to do and have helped the Collaborative build momentum. However, it is important to recognise that the strategies relating to improving care (e.g. emergency and follow-up care, treatment for suicidality) are likely to have a bigger impact on suicide rates.

RS noted the goals section of the CHAT survey results (page 4). The two goals regarded as the most critical by the Collaborative were to (1) improve the supports available to people who are suicidal, and (2) raise awareness about suicide being an important issue.



RS reiterated that improving care has been identified as the Collaborative's most critical goal and is likely to have the biggest impact on suicide. However, it will not be easy to do and we may not see results for a long time. Members were asked if the Collaborative should commit to the challenge of improving care or continue focusing on raising awareness. There was overwhelming consensus that improving care will be a priority moving forward, but that activities focused on raising awareness will also continue.

AH noted improving care fits into the Health Interventions working group (WG1). Collaborative members who would like to get involved with this work are welcome to join WG1. Their next meeting will be Friday 16th November 10am – 12pm. Note that this was planned to be held in Kiama (as discussed in this meeting), but has been moved to the COORDINARE office in Wollongong.

ACTION 7: Collaborative members interested in joining WG1 email Alex (ahains@coordinare.org.au).

All

5. Next meeting

Date: Thurs 13 December 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 2019 available [here](#). Please put these dates into your diary.