NORTHERN QUEENSLAND PHN

NATIONAL SUICIDE PREVENTION TRIAL
Work plan covering activities in 2019-20
**Summary of main activities**

**Project name:** Operation Compass  
**Mission:** To reduce the rates of suicide and increase wellbeing within the ex-ADF community and their families, through transition, connection and adaptation to life in Townsville post ADF; and also to ensure the sustainability and longevity of successful Operation Compass projects through integration into veteran support programs and within the Townsville community long after the project has ceased in 2020.

Utilising the Lifespan model framework adjusted to localised content.

**Activities include:**

- Suicide prevention/intervention/media training
- Creation of a Veteran Health Pathway
- NQ Connect assisting veterans via an online and phone counselling service
- Improving follow up and emergency care for those in suicidal crisis
- Encouraging and engaging the community in innovative community grant activities
- Offering support to GP clinics identifying at risk patients
- Providing after suicidal care for those that have attempted
- Assisting families by promoting mental health resilience and training in schools
- Supporting local Ex-Service Organisations (ESOs) with co design regarding acquired brain injury and traumatic brain injury
- Conducting an overall evaluation of the entire project and transitioning all successful activities on a local and national level.

Through these activities, Operation Compass will be able to identify and address the current issues affecting veterans and their families within the Townsville region. Operation Compass aims to assist in guiding future government and communities with planning for services, activities, and opportunities in order to reduce the current rate of suicide and...
ultimately prevent suicide in the Veteran community, in addition to increasing the well being and wellness of Veterans and their families through transition, connection, and adaption to life in Townsville post ADF service.

Current issues involving veterans include the type of discharge from service, access to supports, transition to employment, access to and type of psychological / psychosocial interventions, emergency/after hours and follow up care, identifying those at risk and who are socially isolated, and providing community support in addition to treatment.

The main area the project focuses on the initial identification, intervention and support for ex-ADF members, and their families, who are transitioning from military life to civilian life. Additionally, the supports that the ex-ADF member, and their family require when discharging from a hospital and / or treatment setting or following referral via the primary health system.

**Critical dates**

30 June 2020 – Evaluation of all projects to be completed

**Major milestones**

- Continued engagement to inform, consult, involve, collaborate, and empower veterans and families across the Townsville region.
- To build on relationships with stakeholders providing continued education and awareness promoting prevention through connection.
- Develop a transition plan for all successful activities to continue at a local and national level.

**Key partners**

Relationships have been developed to identify potential overlap and similarities in the services to gain the best outcome to the prevention of suicide, and longevity to the project. This list is not exhaustive or exclusive, as other stakeholders will be identified as the project develops.

- Non-Government Organisations (NGOs) funded as mental health services providers or Ex-Service Organisations
- Peer organisations including; Mates 4 Mates, 1 RAR, Overwatch Australia, Soldier On, Hounds 4 Healing, DFWA, War Widows, Alliance of Defence Service Organisations, RSL Qld, The Oasis Townsville Ltd, Defence Families Australia, Veterans Partners Support Group, Open Arms, Vietnam Veterans Association of Australia, TPI (Totally and Permanently Incapacitated), The Cameleers, NQ Phoenix Dragon Boat Club Inc, Psychology for
<table>
<thead>
<tr>
<th>Enhanced services for people who have attempted or are at higher risk of suicide</th>
<th>Proposed services in a broad context include the following:</th>
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<tr>
<td>• Enhancements to existing peer to peer services inclusive of education, development, support / supervision, increased resources and co-ordination through a third party.</td>
<td>• Increased review and engagement for people transitioning from the ADF; focussing upon risk factor screening, transition support, system navigation, and family interface.</td>
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<td>• Integrated referral pathways (veterans health pathways) through the primary health sector to specialist services available within the community.</td>
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<td>• Integrated referral pathways (veterans health pathways) through the primary health sector to specialist services available within the community.</td>
<td>• Enhanced support services for family members supporting at risk individuals.</td>
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- The development of a veteran’s hub (The Oasis) within the community which will support referral pathways and system navigation.
- Potential linkages to AOD services. (primary or tertiary)
- NQPHN teams including health systems improvement and GP support

Operation Compass is unique. NQPHN has not previously targeted ex-ADF and families in suicide prevention. Studies have shown that suicide rates among veterans are higher than that of the community.

Proposed services in a more dedicated context are included below.

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<thead>
<tr>
<th>Areas for focused activity</th>
<th>Strategy 1 – Aligns with Community Response and Clinical Support</th>
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<tbody>
<tr>
<td></td>
<td>Improving emergency and follow-up care for suicidal crisis</td>
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<tr>
<td></td>
<td><strong>Activities, Programs, Interventions, and Actions</strong></td>
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<tr>
<td></td>
<td>1. Focus on referrals through veteran health pathways, coordination, discharge protocols, and improving care during a crisis using the new Delphi Guidelines to include emergency department guidelines and clinical care pathways.</td>
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<td>2. Implement mechanisms for response following a suicide attempt including peer to peer support or clinical support dependent upon assessed risk.</td>
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<td>3. Community based after care post ideation and attempt by a range of service providers including Beyond Blue – The Way Back Support Service, NQ Connect and the Open Arms Veterans Peer Network.</td>
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<td>4. Collaborative roundtable between Defence, DVA, Open Arms, The Oasis Townsville Ltd, Defence Families Australia, Townsville Private Clinic, THHS and community agencies to ensure consistent support provided.</td>
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<td>5. Identify current after care service delivery models in Townsville, with the view of adapting them to ex-ADF with the assistance of a mental health nurse assisting Veterans after-hours at the Townsville Private Clinic.</td>
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<td>6. Provide training to lived experience people to deliver after care support</td>
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<td>7. Provide GP clinics with a stepped care approach through screening of veteran patients using a digital system through completion of surveys prior to seeing their GP. This system-based approach alerts GPs to possible mental health issues/suicidal thoughts assisting in suicide prevention.</td>
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**Timeline 2017-20**

These activities have either commenced or will be rolled out in 2019 and are anticipated to be completed by June 2020

**Strategy 2 – Aligns with Evidence-Based Programs**
Using evidence-based treatment for suicidality

**Activities, Programs, Interventions, and Actions**

2.1. Work with all practitioners (psychologists, psychiatrists, social workers, mental health nurses) on advanced training in suicide prevention and intervention (BDI program targeted to practitioners) and encourage the use of eHealth as complementary to face to face counseling.

2.2. Work with identified specialists in treating ex-ADF in ex-ADF cultural competency

2.3. Target service providers to ex-ADF and their families for increase in use of evidence-based eHealth programs as complementary to face to face therapy

2.4. Source community recovery training in responding to suicidal ideation and behavior reducing fear and stigma within the community

2.5. Source advanced training and improved care coordination for treatment providers to increase the use of eMental health therapies

2.6. Question, Persuade, Refer (QPR), a BDI online suicide prevention one-hour module providing knowledge and skills to identify warning signs of suicide, how to connect people with professional care, and providing confidence to talk to people about suicidal thoughts.

2.7. Promoting the Youth Aware of Mental Health (YAM) program a BDI program throughout schools in Townsville targeting building student’s knowledge of mental health through role play and interactive discussion. Train the trainer courses to be delivered in 2019 to become certified instructors.


**Timeline 2017-20**

January 2018 to June 2020

**Strategy 3 – Aligns with Stepped Care Veteran Support and Evidence Based Programs**

Equipping primary care providers to identify and support people in distress

**Activities, Programs, Interventions and Actions**

3.1. Actively recruit medical practices to participate in the provision of health services following transition for the ADF.

3.2. Implement universal screening to all patients in participating practices (target 10-20% of practices).

3.3. Coordinate JCU Med School training for a garrison city

3.4. Source advanced suicide prevention training targeted to clinicians with an interest in ex-ADF population
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<th>3.5. Through Connect to Wellbeing, link veterans and families into the stepped care model</th>
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<tr>
<td><strong>Timeline 2017-20</strong></td>
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<tr>
<td>April 2018 to June 2020</td>
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**Strategy 4 – Aligns with Evidence Based Programs and Innovative Programs**

Improving the competency and confidence of frontline workers to deal with suicidal crisis

**Activities, Programs, Interventions, and Actions**

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<td>4.1.</td>
<td>Provide formal training and informal stigma reduction strategies to frontline workforce.</td>
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<td>4.2.</td>
<td>Provide a toolkit for frontline workers to handout to the family after a suicide attempt or completed suicide.</td>
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<td>4.3.</td>
<td>Support the QLD Police Service co-responder model with training in ex-ADF needs.</td>
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<td>4.4.</td>
<td>Identify the frontline workers that are ex-ADF with the aim of providing additional gate-keeper training and information.</td>
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<td>4.5.</td>
<td>Explore the use of potential peer support models.</td>
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<td>4.6.</td>
<td>Provide education and training for safe media reporting</td>
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<td>4.7.</td>
<td>Promote #CheckYourMates to frontline workers for families of those in crisis, encouraging engagement in conversation and to check-in on their loved ones.</td>
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**Timeline 2017-20**

October 2017 ongoing

**Strategy 5 – Aligns with Community Response and Innovative Programs**

Promoting help-seeking, mental health and resilience

**Activities, Programs, Interventions, and Actions**

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<td>5.1.</td>
<td>Jointly work with Education Queensland and non-government schools on the implementation of the YAM program or similar.</td>
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<td>5.2.</td>
<td>Support Defence and DVA led improvements in pre-transition support, mental health and resilience.</td>
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<td>5.3.</td>
<td>Utilise Lived Experience peer support workers to work collaboratively with veterans, family supports, community agencies, and mental health clinicians to encourage help seeking behaviours.</td>
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<td>5.4.</td>
<td>Source expert insights forum for teachers, parents, and local school governance groups.</td>
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</table>
5.5. Operation Compass Small Community Grants provides innovative approaches to improve wellness, resilience, and better health outcomes for ex-ADF and families by local community engagement.

**Timeline 2017-20**

November 2017 ongoing

**Strategy 6 – Aligns with Evidence Based Programs, Community Response and Enduring Connections**

Training the community, families, and carers to recognise and respond to suicidality.

**Activities, Programs, Interventions, and Actions**

6.1. Joint strategy with various agencies to increase Townsville’s awareness of the suicide issue and offer the opportunity to engage in gatekeeper training in partnership with Townsville Suicide Prevention Network.

6.2. Target Ex-Service Organisations, families and carers, and other points of contact such as sporting and recreation clubs in suicide prevention, intervention, and media training.

6.3. Find community influence points for greater outcomes.

6.4. Workshop with local employers and business that are willing to fund and train their staff in suicide prevention programs (e.g. security, mining, retail).

6.5. Inviting community to be part of the process, for example, utilizing DCOs Welcome to Townsville Expo idea and creating a similar concept for newly arrived ex-ADF members and their families.

6.6. Utilise community support and action groups to increase the awareness.

6.7. Encourage employers and businesses to employ ex-ADF in their workforce.

6.8. Support Education Queensland and veteran families by promoting the YAM program throughout schools in Townsville which builds students’ knowledge of mental health through role play and interactive discussion.

6.9. Refer veterans and families to The Oasis Townsville which assists in transitioning, connecting, and integrating into the local community.

**Timeline 2017-20**

June 2017 ongoing

**Strategy 7 – Aligns with Evidence Based Programs**

Encouraging safe and purposeful media reporting

**Activities, Programs, Interventions, and Actions**
| **7.1.** Provide MindFrame and MindFrame Plus training to professionals and participants within service delivery and media. | **Timeline 2017-20**
September 2017 to June 2020

**Strategy 8 – Aligns with Data / Evidence and Community Response**

Digital enablement strategy

**Activities, Programs, Interventions, and Actions**

- 8.1. Provide access to online training and registration for services across the identified community.
- 8.2. Review and consider the opportunity for app-based and digital system access and navigation.
- 8.3. Develop patient identifier within electronic medical records which will link to care pathways.

**Timeline 2017-20**
January 2018 to June 2020

| **Other suicide prevention activity** | This project will focus solely upon the Veteran community and their families, however it will work closely with the Townsville Suicide Prevention Network to reach a wider audience. Additionally, the Federal Member for Herbert has been holding roundtable discussions with the Townsville community into suicide prevention strategies with ex-ADF personnel.

The activities that have been broadly discussed so far have been:

- defining a suicide prevention system through the Townsville area – utilising the Black Dog Lifespan Model
- transition programs (i.e. out of Defence and into civilian life, and out of hospital after an attempt)
- development of a toolkit for health providers and frontline workers
- enhancement of existing services to incorporate ADF specific health needs |
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<tr>
<th>Data collection and reporting</th>
<th>Current data collection</th>
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<td>Primary Mental Health Care Minimum Data Set (PMHC-MDS) data is currently collected by individuals/organisations commissioned to provide current services. However, this data does not identify ex-ADF personnel or their families.</td>
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<td>With the support of the Black Dog Institute and analysis of AIHW data, Operation Compass will give the project the geospatial mapping required to identify means restriction.</td>
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<td>As part of the Operation Compass Small Community Grants round 1 and 2, those veterans and families taking part in these activities are required to complete pre and post surveys measuring suicide prevention, wellbeing, wellness, resilience, social connectedness, improvements to mental health, nutrition, and diet. Results from these surveys will give insight into better health outcomes for the veteran community and their families about their views and opinions on suicide prevention in Townsville (as well as demographic data).</td>
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<td><strong>Provisions for trial specific data</strong></td>
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<td>A Research Partner has been identified to evaluate the implementation of strategies throughout the project. The evaluator from James Cook University, will commence an evaluation of all projects within the trial in 2019-20 from</td>
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<td><strong>Ethics</strong></td>
<td>ethics proposals to collection of data and completion of journal articles. They will provide a detailed report on their evaluation to ensure the sustainability of successful Operation Compass projects through integration into long-term local veteran support and health programs.</td>
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| **Other** | Other factors that could affect the conduct of this project include;  
- agencies working individually and not in concert with the project  
- The concurrent work that is being undertaken by the Department of Veterans Affairs and the Australian Defence Force, both of whom are focussing upon similar priorities. |
| **Transition arrangements** | The transition arrangements will be a partnership between the Townsville Suicide Prevention Network and the Department of Veterans Affairs and the stepped care primary mental health system which will be in its’ third year of establishment by this stage. |