National Suicide Prevention Strategy

Victorian ED Projects

Overall NSPS Goals

- Reduce deaths by suicide and suicidal thinking and behaviour
- Enhance resilience, interconnectedness and mental health
- Increase support available to individuals
- Provide a whole-of-community approach and enhance public understanding of suicide and its causes

NSPS Allocation of Funds

- Nationally $48 million over 5 years
- Vic allocation 4 streams - $4.5 million:

- Community Initiatives - $2.3m
- Strategic Development (ED projects)- $1.4m
- Indigenous $430k
- Post-Vention $300k

Community Initiatives

- 13 projects all working with youth;
- 9 projects working in schools;
- 8 rural projects / 5 metro projects
- 1 indigenous

Indigenous /Post-vention

- Indigenous project will focus on a Statewide strategy re community and health worker education in suicide prevention

- Post-vention will be a combination of capacity building and service coordination in the Northern metro region

ED projects (1)

- 4 ED projects
- 2 metro (Southern, Western)
- 2 rural (Goulburn Valley, Loddon Mallee)
- Different models
- Different lead agencies

ED projects (2)

- All are partnerships involving EDs, mental health services, Divisions GPs and variety of primary/community health agencies,
- Commenced late 2002
- Funded until June 2005

ED evaluation: key questions

Does improved follow-up of attempted suicide/deliberate self-harming people:

- reduce episodes of suicide/deliberate self-harm?
- enhance social and emotional wellbeing?
- increase use of appropriate alternatives to ED presentations?

Evaluation at cluster level

Using the evaluative effort of the Projects, identify

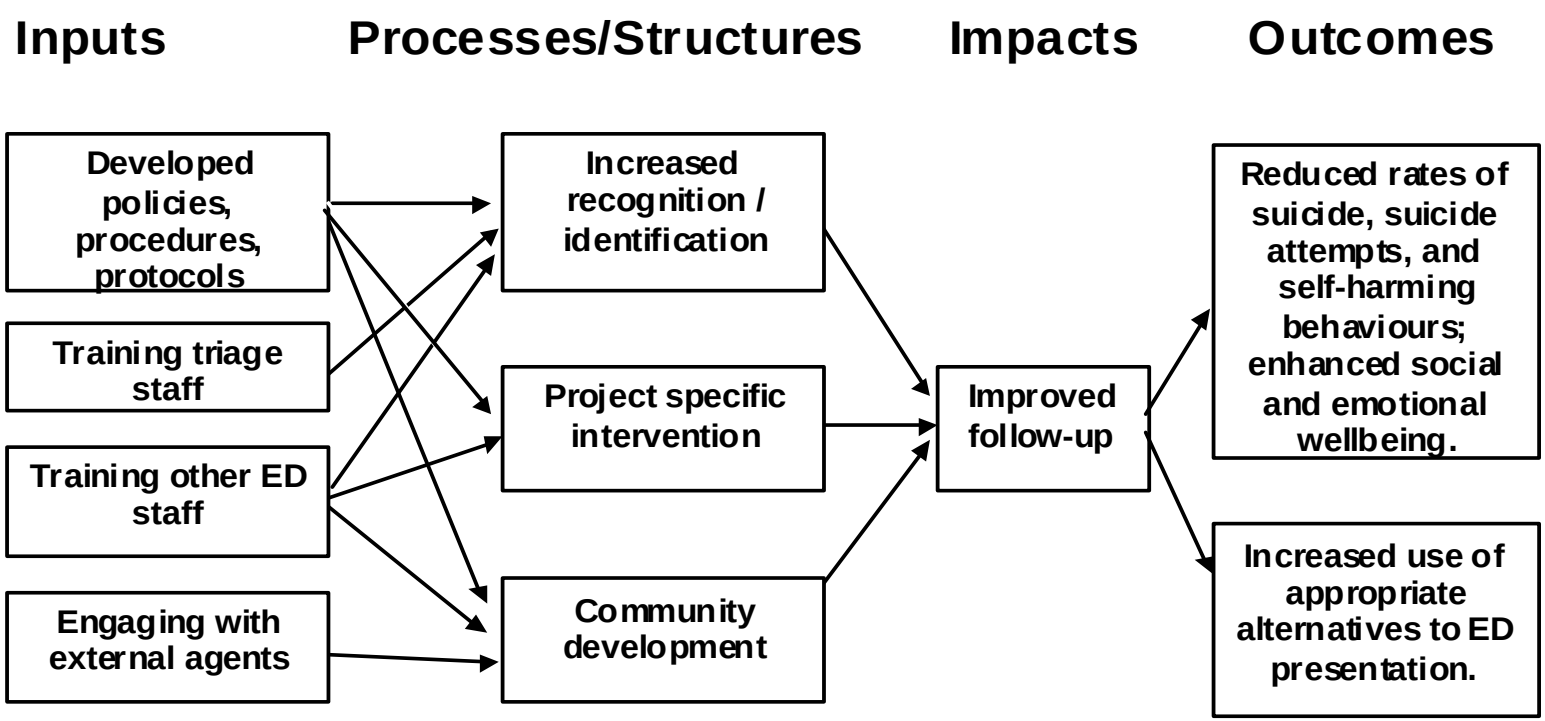
- Benefits to suicidal clients
- Improved capacity of EDs to work with such clients
- Reduced use of EDs by repeat clients
- Improvements in levels of support and treatment provided to clients
- Improved linkages between agencies
- Sustainability of changes and systems

ED projects: common features

- Enhanced recognition and identification of people presenting to ED with deliberate self-harm
- Intervention that aims to link people to forms of community-based follow-up
- Interaction with community-based service system to enhance follow-up capacity
- Adaptation of policies/ procedures/ protocols associated with triage, assessment, and pathways within ED
- Training and development to ED staff to support service improvement in triage, assessment and decision-making

Evaluation approach...

Common Program Logic



Current Issues

- staff turnover in projects
- changes in the operating environment
- data collection/reporting issues
- casework contact rather than formal agency protocols
- service system capacity

ED projects and BOMH (?)

Discussion points....

- identifying GPs with required training
- complexity of client group
- referral protocols for ED projects