WORKING TOGETHER

FOR THE WELLBEING AND

MENTAL HEALTH OF THE

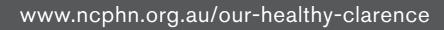
CLARENCE VALLEY



HEALTHÝ Clarence

IF YOU NEED HELP OR SOMEONE TO TALK TO:

Lifeline	13 11
Suicide Call Back Service	1300 65
Kids Helpline	1800 55
MensLine Australia	1300 78
eheadspace	1800 65
beyondblue	1300 22
Mental Health Access Line	1800 01



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CLARENCE



PLAN

2016 - 2018

www.lifeline.org.au/Get-He	14
www.suicidecallbackservice.org.	9 467
) www.kidshelp.com.	1800
	99 78
www.eheadspace.org.	0 890
www.beyondblue.org.	46 36
	1 511

GET INVOLVED: ourhealthyclarence@ncphn.org.au



Clarence Valley Mental Health and Wellbeing | PLAN 2016 – 2018



OBJECTIVE 1

Improve access to evidencebased treatment, crisis care and coordinated care after a suicide attempt



OBJECTIVE 2

Improve the capacity of the workforce and the community to respond to people at risk of suicide



OBJECTIVE 3

Increase the availability of evidence-based mental health and wellbeing programs within schools



OBJECTIVE 4

Improve community awareness of mental health and how to access information and services



OBJECTIVE 5

Improve community engagement, early intervention and prevention

- 1.1 Develop and implement agreed guidelines and tools for treatment, crisis care and follow up of people who have self-harmed, including for case coordination and sharing of information between providers
- 1.2 Ensure availability of evidence-based group programs, where appropriate
- 1.3 Improve access to holistic counselling, psychiatry and General Practitioners across the lifespan
- 1.4 Identify and communicate availability of health professionals in the region with expertise in the treatment of suicidal individuals using agreed communication protocols
- 1.5 Develop local resource packs for people who have self-harmed and their families 1.6 Establish a Postvention* Planning Network and Guidelines, including communication protocols
- 2.1 Provide training opportunities to GPs and other health providers on holistic screening for suicidality, immediate risk management, and identification of mental disorders such as depression, including utilisation of the peer workforce to provide training
- 2.2 Promote agreed guidelines and tools for crisis care and follow up of people who have self-harmed to all service providers 2.3 Deliver Mental Health First Aid, Youth Mental Health First Aid, Aboriginal Mental Health First Aid and ASIST training to
- frontline workers and community members
- 2.4 Develop and implement strategies to support those who have been trained 2.5 Provide broad community education for mental wellbeing and suicide prevention
- 3.1 Support schools to adopt frameworks such as KidsMatter and MindMatters, and programs such as Youth Aware of Mental Health, Signs of Suicide Sources of Strength and peer support programs
- 3.2 Work with local Aboriginal organisations and/or community members to identify and implement culturally safe and competent programs for Aboriginal young people in the school environment
- 3.3 Investigate the feasibility of screening school students for signs of mental health concerns
- 3.4 Support schools in ongoing implementation of existing staff training to support youth mental health
- 3.5 Offer training to parents and carers to enhance their capacity to identify and respond to depression and suicide risk
- 4.1 Develop Our Healthy Clarence website
- 4.2 Provide workshops and support to local organisations to promote awareness and engagement with their services 4.3 Promote access to good quality health, wellbeing and service information
- 4.4 Engage local media organisations to establish a coordinated mental health and wellbeing campaign
- 4.5 Develop Our Healthy Clarence communication plan to enhance awareness of the initiative
- 5.1 Develop and maintain a community engagement and planning framework to underpin implementation of the *Our Healthy Clarence* plan
- 5.2 Develop and implement non-clinical support services for young people and other groups with a focus on prevention and early intervention
- 5.3 Develop and promote community spaces to hold meetings and support groups, and provide opportunities for community members to come together formally and informally

*Postvention refers to action taken after a suicide attempt or a suicide death.