



# MidCentral District Health Board Suicide Prevention and Postvention Action Plan

1 Year  
2018 – 2019

## He Mihi Community

E ngā pae maunga o Ruahine o Tararua, o Tararua, e tu ake nei  
E ngā wai o Manawatu, o Ōroua, o Rangitikei e rarapa mai ana  
Karanga mai, karanga mai, karanga mai

E ngā mana, e ngā karanga maha huri āwhiotia i ngā tōpito o te aotūroa nei tēnā koutou katoa

Tena koutou i runga i ngā āhuetanga e uruhia mai nei i a tātou katoa, ahakoa ko wai, ahakoa nō hea

Kei āku nui, kei āku rahi, e ngā iwi kainga, arā, Rangitāne o Manawatu, Ngāti Kauwhata, Rangitāne o Tamaki Nui a Rua me Ngāti Raukawa ki te tonga,  
karanga mai, karanga mai.

## Background

The original MDHB Suicide Prevention Postvention Action Plan was from 2015-2017. As the Ministry of Health is working through the best possible way to progress with a national suicide prevention strategy, and with the Mental Health Enquiry taking place, the MoH have asked all DHBs who do not have a current Suicide Prevention Plan in place to move forward with one.

The options were to do either a 1 year interim plan, or a 3 year plan. In consultation with the MDHB Suicide Prevention Postvention Response Team, a 1 year plan was decided upon due to time constraints and the impact this would have on the ability to consult widely. During 2018-2019 work will commence on developing a long-term plan.

The MDHB Suicide Prevention Postvention Response Team's role is to coordinate a response to suspected suicides, as well as engage in suicide prevention initiatives. Membership consists of representatives from central and local government agencies and from appropriate health and social service agencies that can assist with the purpose of the team. Also, when a person on school age dies by suicide there is the Critical Incident Response Team available.

In late 2017, a Tararua Local Response Team was established to increase coordination and capacity of suicide postvention management, as well as to support community wellbeing and development initiatives in the areas of mental health promotion and suicide prevention, within the Tararua district. It consists of representatives from central and local government agencies and from community based health and social service agencies. This team provides a local response in partnership with the MDHB Suicide Prevention Postvention Response Team.

A Horowhenua Local Response Team is in the process of being created, with Local Response Teams for other areas of the community to also be developed in the future.

The MidCentral Mental Health and Addiction Network, called Unison was established in 2017, and aims to deliver better services by providers for mental health and/or addiction service users and their families/whānau.

Unison is a network of providers and stakeholders representing the complete continuum of service delivery across all age ranges. The combined coordinated input of all representatives aims to create an integrated system of care which includes input from intersectoral agencies and all other providers. Unison will play a role in supporting the implementation of mental health programmes, including the suicide prevention strategy, and

ensuring connectivity between providers who have input to suicide prevention. The combined group of providers in the Unison Network work together to identify and resolve the mental health and addiction needs of consumers who use their respective health, support and social services.

MDHB Locality plans in Tararua, Horowhenua and Manawatu have been developed in response to community needs. These include Mental Health & Addictions initiatives for the year 2018-2019.

## Population Suicide rates

In the 2013 census the MidCentral DHB population was assessed to be 162,564. The defined area is based on territorial authority and ward boundaries, and for MidCentral DHB these include Manawatu, Tararua, Horowhenua, a part of Kapiti district (Ōtaki Ward), and Palmerston North city. The gender split of the MidCentral population is 52% female and 48% male.

MidCentral District Population by Ethnicity at 2006 Census and 2013 Census (percentages):

<b>MidCentral District Population by Ethnicity at 2006 Census and 2013 Census (percentages)</b>											
<i>Census</i>	<i>European</i>	<i>Māori</i>	<i>Pacific Peoples</i>	<i>Asian</i>	<i>Middle Eastern/Latin American/African<sup>(2)</sup></i>	<i>Other Ethnicity</i>		<i>Total people, Other Ethnicity</i>	<i>Total people stated</i>	<i>Not Elsewhere Included</i>	<i>Total people</i>
						<i>New Zealander</i>	<i>Other Ethnicity</i>				
<b>2006</b>	71.4%	16.8%	2.9%	4.4%	0.6%	12.5%	0.0%	12.6%	97.3%	2.7%	100.0%
<b>2013</b>	77.9%	17.4%	3.5%	5.8%	0.7%	2.0%	0.0%	2.1%	95.1%	4.9%	100.0%

## Suicide rates

From 2004 to 2014, the average suicide rate for MidCentral DHB was 16.2 per 100,000. This compares to the national rate of 12 per 100,000 over the same time period. It is important to note that the rate for MidCentral tends to fluctuate to a large degree. As an example, 2005 had a rate of 22 per 100,000 people, while 2012 was 12.5 per 100,000.

### ***Age***

Using the same 2004-2014 time period, MidCentral is over the national average for most age groups. Unlike nationally, MidCentral has a peak in the 40-44 year old (28.2 per 100,000) and 45-49 (29.2 per 100,000) demographics. This means those in middle age are a demographic that require targeted initiatives.

As with the national average, MidCentral rates also peak for 20-24 year olds (29.5 per 100,000), meaning they are also a significant area that requires targeting.

### ***Gender***

Men outnumber women in suicide statistics, and MidCentral is no exception. Data shows that men take their lives at three times the rate of women. In particular, middle aged men are a key demographic that are over represented in MDHB.

No data is publicly available to show rates for those who are gender diverse.

### ***Ethnicity***

No public data sets show suicides by ethnicity on a DHB level. Nationally Maori have a higher rate of suicide than non-Maori.

### ***Locality***

MidCentral is made up of four territorial authorities, Tararua District, Manawatu District, Palmerston North City, and Horowhenua District. The Otaki ward of the Kapiti District is also part of MidCentral.

From 2004-2014 Tararua and Otaki were the areas that had the highest rates, although their smaller populations do mean that a small number of suicides can dramatically shift their rate.

A Local Response Team was established in Tararua in early-2018, and another is being established for Horowhenua/Otaki.

## Key achievements of the previous action plan

- Established pathway for Coronial data, received from Clinical Advisory Services Aotearoa on behalf of the Ministry of Health; and a response for all suspected suicides in MDHB region is undertaken.
- Development of a Tararua Local Response Team.
- Initiatives that support an inclusive environment for the rainbow community have been rolled out such as Gender & Sexual Diversity @ Work Trainings.
- Contracted the iwi Māori service provider Best Care Whakapai Hauora for Kaupapa Māori Suicide Prevention Services.
- Comprehensive report completed by YOSS and the Palmy Youth Network about young people's experiences of cyber bullying in Palmerston North. The report found that over a third of the young people surveyed had been victims of cyber bullying.
- Cyberbullying workshops delivered across the region for schools and professionals working with young people. A cyberbullying resource was also developed and distributed, which lists key resources.
- 'Coming together to remember those we have lost to suicide' community gatherings held yearly, in collaboration with ACROSS Social Services. This was identified as a need from the community.
- A range of education and training workshops delivered to various attendees, examples of these are: Wellbeing presentation to rural community; Children, Tamariki, Whanau and Families Forum which included presentations from a variety of services (CAFS, MSF, ACROSS, Child Health, Barnados, Child Development, Gateways); and perinatal mental health and wellbeing forum.  
In collaboration with CAFS, mental health/wellbeing session for employees at a construction materials company; training on anxiety delivered to RTLBs, PHNs; and The Detection and Management of People at Risk of Suicide Seminar, delivered to a wide variety of participants including front-line workers, tertiary education sector, and the NGO sector.
- A wide variety of mental health, wellbeing and suicide prevention postvention resources and service information distributed to agencies and the community, such as the ACROSS bereaved by suicide support group. Resources and information also disseminated in regards to current affairs/media, as appropriate.
- Implemented Vintage Parties for older people with the Palmerston North City Council to address social isolation and enhance well-being.
- Implemented specific approaches to support initiatives for Māori suicide prevention; particularly wananga in Foxton, Shannon and Levin (paepae wananga and safe talk forums).
- Implemented resource Toolkit for whanau and people working with families, under Supporting Parents Healthy Children initiative.
- Engaged with the local media to ensure awareness of media guidelines 'Guidelines and Reporting Suicide'.

- Kaupapa Maori suicide workshop held March 2018 to develop initiatives from a kaupapa maori response to suicide prevention and intervention using the turamarama declaration (launched by Dr Mason Durie in 2016).
- Liaison and information now occurs between mental health and addiction services and suicide prevention coordinator. Emerging trends can be identified from data.
- Coronial data on suspected suicide now collected and analysed in terms of trends and planning needs in the district.





	Develop a 5 Ways to Wellbeing style resource for young people	Resource is developed	Suicide Prevention Postvention Response Team, Mental Health Foundation	Central PHO, Te TiHi
<b>To coordinate key government and social service agencies initiatives to address identified service users issues</b>	To support the coordinated response	Establishment of Unison sub-committees which address wider health determinants e.g. housing, employment.	Ministry of Social Development, Housing NZ, Public Health Unit, City Council, UCOL,	Service Director MH&AS, MDHB UNISON
<b>Increase capacity &amp; capability of mental health addictions workforce around suicide prevention and postvention</b>	Facilitate workforce Suicide Prevention Forums to discuss ongoing suicide prevention to include update on current research, activities, issues, new resources  GP Practice Education Seminars  Trainings delivered that cover	Forums held annually across the region. Focus on Horowhenua and Tararua  Extra community meetings held if a suicide cluster or contagion develops  A series of 9 GP Education Seminars per annum	Clinical Mental Health Services, Iwi/Māori, Pacific, Refugee Services, NGOs, Kia Piki Te Kaha Suicide prevention Co-ordinators, G.P. Practices, Pharmacies, Specialist Child Adolescent and Family Mental Health Service, Public Health Services,	Public Health Services, NGO Project Coordinator  Central PHO

	suicide prevention, identification, screening, management, referral pathways		Central PHO	CAFS and Public Health
<b>Increase the confidence, skills and knowledge of the community around suicide prevention, as well as mental health wellbeing</b>	<p>Trainings delivered in settings that may be not be commonly accessed e.g. rural community.</p> <p>Provide national community trainings e.g. LifeKeepers</p> <p>Community led-initiatives are supported</p>	Trainings are delivered throughout the region	Child Adolescent Mental Health team, Ministry of Health (workshop trainings)	Public Health Service, CAFS, NGO Project Coordinator
<b>Support mental health and wellbeing initiatives for men</b>	Identify effective and evidence based initiatives/programmes for men	Initiatives supported/implemented	Suicide Prevention Postvention Response Team	Suicide Prevention Postvention Response Team
<b>Build mental health literacy and depression awareness</b>	<p>Provide Mental Health Awareness Training workshops e.g. Mental Health 101 and Depression Awareness workshops</p> <p>QPR Suicide Training Tool Gatekeeper Training ASIST Training Tool</p>	<p>Communities are informed about availability of workshops</p> <p>Information on referral pathways for help seeking is shared</p>	Supporting Families in Mental Illness, Marae, workplaces, rural support agencies, NGO's, Social Services, PHO, pharmacies, Age Concern	NGO Project Coordinator, Public Health Services

		Activities documented and evaluated		
<b>Support mental health and wellbeing initiatives for Māori and Pasifika</b>	Community suicide prevention initiatives are supported by (Kia Piki Te Kaha Service)	Relationship with Suicide Prevention Coordinators and Iwi Providers are strengthened and initiatives supported Initiatives documented	Iwi Services, Central PHO, Community Nurse for Pasifika	Kia Piki Te Kaha Māori Suicide Prevention Coordinators, Public Health Services, Pasifika Advisory Group
	Establish/strengthen relationships with Pasifika Community	Assistance with initiatives and resources provided on request	Pasifika Advisory Group Levin	
	Kaupapa Maori Suicide Prevention Roopu strengthen Turamarama Declaration initiatives.	Assistance with establishing initiatives aligned with Turamarama Declaration. Initiatives documented	Iwi Services, NGO's Mana o te Tangata Trust Central PHO Ministry of Education	Kia Piki Te Kaha Maori Suicide Prevention NGO Coordinator Mana o te Tangata Trust
<b>Support mental health and wellbeing initiatives for refugees</b>	Further strengthen relationships with refugee services and offer assistance with identified activities	Mental Health/Wellbeing presentations delivered to refugees as part of the orientation programme for new families are implemented and evaluated	Public Health Nurses, Red Cross Refugee Service, Multicultural Council, Central PHO	Public Health Services
<b>Support mental health and wellbeing</b>	Provide education on link between violence, sexual abuse	Training delivered re screening for family violence in primary	MDHB Family Violence Intervention	MDHBFamily Violence Intervention Coordinator,

<p><b>initiatives for people experiencing violence/domestic violence</b></p>	<p>and mental health Family violence screening and referral processes to be more fully implemented</p> <p>Support agencies working in family violence and sexual abuse</p> <p>Encourage health professionals to use opportunities to engage with patients about domestic violence e.g. 6 week post-natal check</p>	<p>care</p> <p>Staff of these agencies receive QPR or other appropriate community based training</p> <p>Information disseminated to health professionals</p>	<p>Coordinator, Public Health Service Promoters, CPHO, Manawatu Abuse Intervention Network, Te Aroha Noa (Men's Group), Police, Community Corrections, Women's Refuge, Kia Piki Te Kaha Service, Kauri Integrated Family Health Centre</p>	<p>NGO Project Coordinator, Public Health Services</p>
<p><b>Support mental health wellbeing for older people experiencing elder abuse</b></p>	<p>Work with Age Concern and MDHB Star ward to identify issues and coordinate a response</p>	<p>Programs are provided and evaluated</p>	<p>Age Concern, Police, City Council's, Housing NZ, Primary Mental Health Service, Health Promotion Advisers</p>	<p>MDHB Family Violence Intervention Coordinator, NGO Project Coordinator, Public Health Services</p>

## Action Area 2: Improve the Care of People who are Experiencing Mental Disorders Associated with Suicidal Behaviour

Activity/Objective	Action	Performance Measure/Milestone	Partners	Key Lead
<b>Recognition and support for people experiencing mental health &amp; alcohol and drug problems</b>	Disseminate “help seeking” information through non mental health sector e.g. Work and Income, workplaces	Two workshops a year are advertised, delivered and evaluated  Dissemination of information recorded via the NGO Workforce Development Coordinator	Supporting Families in Mental Illness, Kia Piki Te Kaha Coordinators Public Health Services, Health Promoters Iwi Providers, YOSS, Primary Mental Health Service, Specialist AOD Service, Youthline, MASH Trust	Public Health Services, NGO Project Coordinator
<b>Raise awareness of signs and symptoms exhibited by people experiencing mental health, alcohol &amp; drug addiction problems among health professionals and other front line workers</b>	Deliver Mental Health 101 Workshops, Mental Health Awareness Workshops, Information provided on bereaved by suicide support  Identify specific training needs for G.Ps practice Teams	Training delivered and documented by existing workforce development monitoring frameworks  Training requirements identified and provided where requested  Number of participants completing training are documented	Mental Health Services, Skylight, Kia Piki Te Kaha Service  Training Providers	NGO Project Coordinator, Public Health Services
<b>Refugees/immigrants</b>	Strengthen relationships with	Programs and workshops	English language	Public Health Services,

<b>with mental health issues are well supported</b>	refugee/immigrant services and provide opportunities to support refugees experiencing mental health and alcohol & drug addiction problems	provided as identified and requested by Refugee Services/Manawatu Multicultural Centre  Access to refugee/Immigrant support services/information	partners, Red Cross Refugee Services, Mental Health Services, Manawatu Multicultural Centre, Central PHO, G.P Practice Teams, Pharmacies	Central PHO
<b>Improve the care for Māori who have mental health, alcohol &amp; drug issues associated with suicidal behaviours</b>	Public Health Service to support and work alongside Suicide Prevention Coordinators in the delivery & support for marae, whānau and Māori communities	Initiatives are supported/strengthened as per Te Whakauruora Resource e.g. advocate for a choice of services to be available and appropriate for whānau to access help when required	Suicide prevention Coordinators, Clinical Mental Health Services, Central PHO, Iwi Services, Whānau/family Advisor, Māori Women's Welfare League, Pharmacies	Kia Piki Te Kaha, Public Health Services

### Action Area 3: Improve the Care of Service Users Who Make Non-fatal Attempts

Activity/Objective	Action	Performance Measure/Milestone	Partners	Key Lead
<p><b>Provide appropriate support for service users, parents family, whanaū (including Māori and Pacific) who have children who have attempted suicide/ self-harm</b></p>	<p>Establish follow up support for family/ whānau of a person who has attempted suicide or self-harm e.g. individual/group support, support from agencies, information and education</p>	<p>Follow up strategies identified and recorded</p>	<p>ACROSS Social Service, Clinical Mental Health Services, Emergency Department, GP Practice Teams, NGOs, Ministry of Education, Youth One Stop Shop, Supporting Families in Mental Illness, Oranga Tamariki, Kia Piki Te Kaha Suicide prevention Coordinators, Safe Community Coordinator-Palmerston North City Council</p>	<p>Supporting Families in Mental Illness Service</p>
<p><b>Improve communication and referral processes between GP Practice Teams, Specialist Mental Health Services and Emergency Department following a person's</b></p>	<p>Continued collaboration between ED and Mental Health Services on follow up of clients after a suicide attempt or serious self-harm  A prompt online notification is</p>	<p>Follow up processes are documented</p>	<p>Specialist Mental Health Services, Central PHO, Emergency Department, Mental Health Emergency Team , IT/Emergency</p>	<p>Specialist Mental Health Services, Central PHO, Emergency Department</p>



<p><b>self-harm attempt</b></p>	<p>provided to GP Practice Team's following an attempted suicide or self-harm</p> <p>Support improved referral pathways from GP Practice Teams interface with clinical Mental Health Service</p>	<p>Establishment of WEBPAS</p> <p>Strategy for improving timeliness of assessment identified</p>	<p>Department,</p>	
<p><b>Suicide and suicide attempt rates among Māori and Pacifica are reduced</b></p>	<p>Support Māori Suicide Prevention Coordinators to assist people to navigate through the mental health system to receive culturally appropriate help</p>	<p>Māori and Pacific people are able to access the service of their choice</p>	<p>Suicide Prevention Coordinators Kia Piki Te Kaha Service, Iwi and Māori Services, DHB Pacific Mental Health Liaison Coordinator</p>	<p>Kia Piki Te Kaha Suicide Prevention Co-ordinators, Public Health Service</p>

## Action Area 4: Reduce Access to Means of Suicide

Activity/Objective	Action	Performance Measure/Milestone	Partners	Key Lead
<p><b>Reduce access to potential suicide methods in order to reduce suicide risk</b></p>	<p>Monitor coronial data that looks at method of suicide to determine action for prevention e.g. firearms storage</p> <p>Work with local councils, institutions and businesses, for any recognized repetitive suicide methods e.g. jump sites</p> <p>Advise those caring for people at high risk of suicide to remove potential means to suicide e.g. toxic substances, firearms</p>	<p>Evidence of action is documented and reported to Community Prevention Postvention Reference Group</p> <p>Repetitive sites/methods for suicide attempts are identified and the appropriate authority/business are supported to take action</p> <p>Ensure information is available for distribution to carers, family/whānau</p>	<p>Suicide Prevention Postvention Response team</p> <p>Primary Mental Health Services, Police, Federated Farmers, Public Health Services, TA's</p> <p>NGO Sector, Clinical Mental Health Services, Central PHO, Public Health Services</p>	<p>Public Health Services, Suicide Prevention Postvention Response Team</p>
<p><b>Increase awareness for community about ways to reduce access to means of suicide</b></p>	<p>Provide information to friends/family of people to limit possibility of future suicide attempts</p>	<p>Information provided to friends/family about reducing suicide means as a prevention strategy e.g. pathways to helping agencies</p>	<p>Primary Mental Health Services, Specialist Mental Health Services, NGOs, community agencies, Crisis Intervention Response Team, Kia Piki</p>	<p>Public Health Services, Suicide Prevention Postvention Response Team, NGO Project Coordinator</p>

			Te Kaha Suicide Coordinators, Public Health Mental Promotion health Advisors	
<b>Safer dispensing/prescribing of medications</b>	Work with GP Practice Teams on providing information of dangers of over prescribing medication to those who have attempted suicide or are at risk of suicide	Action documented	Central PHO, Pharmacies, Integrated Medicine Management Leadership Alliance, Specialist Mental Health Services, Clinical Services & Pharmacy	NGO Project Coordinator
<b>Reduce access by Māori to means of suicide</b>	Support and work alongside Iwi/Māori Providers to provide information to families/whānau to remove potential means	Support and strengthen initiatives as per Te Whakauruora Plan e.g. Provide choice and access to services including tohunga, Māori healers	Iwi and Māori Providers, MidCentral Health, NGOs, Primary Mental Health	Public Health Service, Kia Piki Te Kaha Māori Suicide Prevention Coordinators

## Action Area 5: Promote Safe Reporting and Portrayal of Suicide Behaviour by the Media

Activity/Objective	Action	Performance Measure/Milestone	Partners	Key Lead
Agencies and community have appropriate information and resources in regards to current affairs/media	Resources and information disseminated in regards to current affairs/media	Resources and information disseminated as needed	Suicide Prevention Postvention Response Team	Public Health Services

## Action Area 6: Support Family/Whānau, Friends and others affected by Suicide or Suicide Attempt

Activity /Objective	Action	Performance Measure/Milestone	Partners	Key Lead
<b>Establish/strengthen relationship with agencies that will offer support to those bereaved by suicide including supporting the capacity and capability of facilitators of specialist suicide-prevention programs</b>	Promote and support services for those bereaved by suicide through general practice, media, churches, funeral directors, social services, marae, workplaces, clubs, sports groups and community groups  Support for suicide	Information about supportive agencies distributed  Facilitators of Bereaved by Support Groups feel well supported	Suicide Prevention Response Team, ACROSS Social Service, Kia Piki Te Kaha Suicide prevention Coordinators, Public Health Services, Supporting Families in Mental Illness, Iwi Services, Victim Support, Funeral Directors, Workplaces,	Public Health Services, ACROSS Social Service, Kia Piki Te Kaha Suicide Prevention Coordinators

	<p>bereavement facilitators</p> <p>Initiatives untaken as identified and appropriate</p> <p>Engage with tertiary sector to ensure good coordination following a suicide</p>	<p>Tertiary sector are supported following an event</p>	<p>Sports Clubs, MidCentral Health , General Practice, Family/Whanaū Advisor, Skylight, Mental Health Foundation, Youthline, Manawatu Police, Specialist Mental Health Services</p>	
<p><b>Ensure those bereaved by suicide have appropriate knowledge of self-help agencies</b></p>	<p>Liaise with Victim Support, Police and other mental health stakeholders to identify and provide up to date resources</p>	<p>Resources and agency information is provided</p>	<p>Victim Support, ACROSS Social Services, Police, Kia Piki Te Kaha Suicide Prevention Coordinators, NGO sector</p>	<p>Suicide Prevention Postvention Response Team</p>

## Action Area 7: Expand the Evidence about Rates, Causes and Effective Interventions

Activity/Objective	Action	Performance Measure/Milestone	Partners	Key Lead
<b>Respond to Coronial Data for all suspected suicides in the district</b>	Identify opportunities for intervention  Debrief meetings held as identified	Opportunities identified and implemented  Findings from evaluation will be feedback to services with recommendations	Clinical Advisory Services Aotearoa (CASA), Specialist Mental Health Services, Community Suicide Prevention Reference Group, Public Health Services , Mental Health Clinical Executive, Mental Health Serious Adverse Events Review Group	Suicide Prevention Postvention Response Team, Public Health Services
<b>Child Youth Mortality Review Committee - Review, to identify opportunities for prevention/modification.</b>	Member of MidCentral region Child Youth Mortality Review Committee with information provided as requested, and attend meetings	Attendance at meetings and contribute as appropriate.	Child Youth Mortality Review Committee Group	Public Health Service, Child & Youth Mortality Review Coordinator
<b>Increase evidence/research</b>	Research is undertaken	Research report/findings is produced on high end users and high risk populations in contact with mental health and addictions services	Mental Health Services	Mental Health Services

## Action Area 8: Increase the Coordination and Capacity of Suicide Postvention Management for at Risk People

Activity/objective	Action	Performance Measure/Milestone	Partners	Key Lead
<p><b>A coordinated response to suicide is implemented for all identified at risk groups</b></p> <p>Note: a protocol already exists between MidCentral Health CAMHS, Public Health Service and Ministry of Education for traumatic events such as suspected suicide involving early childhood centre and school children</p>	<p>A Suicide Support Model is developed including the formation of Governance Group, and Local Response teams across the district</p>	<p>Procedure of support following a suicide to prevent contagion or cluster is in place</p> <p>A governance group is formed.</p>	<p>Community Suicide Prevention Reference Group, Public Health Services, Local Response Team, CASA</p>	<p>Public Health Service, Suicide Prevention Postvention Response Team</p>
<p><b>Local Response Team is developed for Horowhenua district</b></p>	<p>Liaise with communities to discuss development of a Local Response Team</p> <p>Continue to support the Tararua Local Response</p>	<p>Local Response Team for Horowhenua region is established</p>	<p>Youth One Stop Shop, Tararua REAP Team, Tararua Youth Service, Strengthening Families Network, Ministry of Social Development, Oranga Tamariki, Levin</p>	<p>Public Health Service, Suicide Prevention Postvention Response Team</p>

	Team		Community Networks, Horowhenua Strengthening Families	
<b>Liase with Clinical Mental Health Services and community to map suspected suicide clients and identify trends</b>	<p>Emerging trends are identified from data</p> <p>Clinical Mental Health Services notified of Coronial Data to identify whether suspected suicide is under Clinical Mental Health Service's</p>	<p>Emerging trends are notified to Suicide Prevention Coordinator for any follow up actions</p> <p>An appropriate response is developed e.g. a trend is identified as a workplace therefore help-seeking information and support is provided to the workplace Information is shared with Mental Health Services Adverse Event Review Group and actioned as per processes</p>	<p>Prevention Postvention Response Team, Clinical Mental Health and Addictions services, Victim Support, Public Health Services</p> <p>Mental Health Services Adverse Event Review Group</p>	Public Health Service, Mental Health Service



