



Government of **Western Australia**
WA Country Health Service

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WA Rural and Remote

Mental Health CONFERENCE 2023

Looking Beyond:

PEOPLE, RESILIENCE AND INNOVATION



Fremantle
Walyalup



TUESDAY 31 OCTOBER 2023 TO FRIDAY 3 NOVEMBER 2023

Esplanade Hotel Fremantle by Rydges, Fremantle

PROGRAM

Welcome

Welcome to the WA Rural and Remote Mental Health Conference 2023.

On behalf of the WA Country Health Service (WACHS) Board, staff and communities across the regions, I'm delighted to welcome you to Fremantle for one of the most important events on our regional health calendar.

Usually a biennial gathering, this year's Rural and Remote Mental Health Conference marks the first time we've met in person since 2019.

Importantly, it's the 30th anniversary of the very first mental health conference established to focus specifically on issues associated with mental health, alcohol and drugs in regional Western Australia (WA).

Fittingly, this year's conference theme is [Looking Beyond: People, Resilience and Innovation](#), designed to spark conversations and connections around our two most important cohorts: our consumers and our workforce.

The program has been thoughtfully curated into five broad streams:

- Social and emotional wellbeing
- Collaborative approaches in rural and remote mental health care
- Innovative workforce solutions for rural and remote mental health
- Technology, research and innovation
- Diversity and inclusion

With an area spanning more than 2.5 million square kilometres and a population of more than half a million – including more than 10 per cent who identify as Aboriginal – country WA demands unique and bold approaches to mental health service provision.

We can't – and don't – do it alone. Our partnerships with Aboriginal medical services, non-government organisations, GPs, other health service providers and most importantly, consumers and carers, are always front and centre.



This conference promises three days of ideas and inspiration delivered by some extraordinary individuals and teams.

I encourage you to take in as much as you can, and also to enjoy some of our more informal events to build connections and networks.

I look forward to meeting you in Fremantle to participate in this exciting event with you.



Jeff Moffet
Chief Executive
WA Country Health Service

Queries and information

For all conference assistance, please seek out one of the key staff members wearing a black and orange event staff T-shirt. Staff members have an overview of the conference and, if they can't resolve your query, will refer you to the appropriate person.

The registration desk, situated in the Southern Cross lobby, will be manned at the following times with a staff member able to assist with any queries you might have:

Tuesday 31 October 2023	6.00pm-8.00pm	Thursday 2 November 2023	8.15am-5.00pm
Wednesday 1 November 2023	8.45am-5.00pm	Friday 3 November 2023	8.00am-12.00pm

If you wish to speak to the conference coordinator, please contact Kate Chetwin on 0436 922 903.



Conference information

The WA Rural and Remote Mental Health Conference has been hosted by WACHS since the event's inauguration at Northam in 1992 with just ten delegates!

The conference is now held biennially and is hosted by each of the seven regions in turn. A key event for anyone who cares about access to mental health services and the particular issues facing regional and remote communities, this is an opportunity for mental health professionals from across WA to participate in information sharing, training, upskilling and networking.

Program

Please read the program in advance to pre-select your preferred sessions and familiarise yourself with each location. Delegates may choose sessions on the day, but please be aware that some rooms are subject to maximum numbers and may not be able to accommodate everyone.

All plenary (full group) sessions will be held in the Sirius Room with breakout sessions held in nearby rooms as indicated on the program.

Getting around

All social activities will be at nearby venues, all within walking distance from the conference venue.

Taxis

Ride-sharing services such as Taxis or Uber operate in Fremantle. Some local Taxi services include:

- Swan Taxi – 13 13 30
- Black & White Cabs – 13 32 22

Consumers and carers

The conference welcomes consumers and carers from around WA as conference delegates. Consumers in need of any support or assistance are encouraged to contact their local service coordinator, the registration desk or one of the key staff members.

Quiet Space – Wellness room

Some conference content is about trauma, which some delegates may find distressing. The Abrolhos Room located up the stairs from the main lobby, has been equipped for chill out time with tea, coffee and water. If you are feeling distressed, please speak to one of the key staff members.

Disabled access

If advised, the plenary can accommodate wheelchairs and those with mobility aids. The Wellness Room can also be accessed via a lift. If you require assistance to ensure your full participation in the conference, please speak to one of the key staff members.

E-poster presentations

Six e-poster presentations will be on display during the tea breaks on day two (Thursday 2 November 2023) and all delegates are encouraged to stop by the trade exhibition area and have a look at these inspiring examples of mental health practice around WA.

Food and beverages

Daytime meals during the conference are included and these will be served in the lobby area of the conference venue. Dietary requirements advised at registration will be accommodated and those meals will be clearly labelled, but please speak to a key staff member at the registration desk if you have any queries.

Breakfast and evening meals are not provided, except for the conference dinner for those who have purchased a ticket.

Please note: Alcoholic beverages will not be provided throughout the conference, but delegates are welcome to purchase their own during evening functions. For further information regarding social events, please visit the registration desk.

Social events

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Choir

Whether you are a born performer, or only sing in the shower, please dive in and join the conference choir, led by choir director Cindy van Dongen. Participants will learn a song, which will be performed before the conference closing address on Friday 3 November 2023.

Everyone is welcome and no experience is necessary; just bring a water bottle and enthusiasm to our programmed rehearsals. Expressions of interest to join the choir will be taken at registration.

REHEARSALS | SIRIUS ROOM

Wednesday 1 November 2023

8.15am-9.00am and
4.45pm-5.30pm

Thursday 2 November 2023

7.30am-8.30am

Friday 3 November 2023

7.30am-8.30am

Yoga

Wednesday 1 November 2023

7.00am

1 Fremantle Yoga Centre
Door 4, E-Shed,
Victoria Quay

Start your conference week off with a relaxing yoga session. Everyone is welcome and no experience is required, all you will need to bring is a water bottle and towel, all other equipment will be provided.

Pre-booking for this activity is required.

Soccer match

Wednesday 1 November 2023

5.00pm

2 Esplanade Park
Marine Terrace, Fremantle

It's on again, the traditional conference Soccer Match between the Metro Maulers and Rural Ramblers. We've organised a pitch at Esplanade Park, opposite the conference venue. The game will be two 20-minute halves starting at 5.30pm. **Match referee is Mark Lee, from Mark Lee Football Coaching.**

Everyone is welcome to play or cheer for the teams.

Players please bring your sports shoes, shorts and T-shirt.

Open Mic night

Wednesday 1 November 2023

6.30pm

3 Bar Orient
39 High Street, Fremantle

People of all talents (including none!) are invited to join the performers at the Open Mic night. This can be music, comedy or other participation. There will be a PA and some musical instruments provided, but bring your own instruments if you have them.

Performances will be in a private back room and food and drinks are available for purchase at the bar. The Wednesday night special is a \$5 schnitzel, chips and salad with a drink purchase. Performers and spectators welcome.

Bar Orient is a short five minute walk from the conference venue and Esplanade Park.

Conference dinner

Thursday 2 November 2023

6.00pm

4 Bathers Beach House
6/47 Mews Road, Fremantle

The optional conference dinner is for all delegates who purchased a ticket at registration. If you are unsure whether you did so, please check with the registration desk.

Canapés will welcome guests, followed by a sit-down three-course dinner followed by musical entertainment. Food and non-alcoholic drinks are included, and guests can purchase alcohol from the bar.

All purchased ticket holders will go in the draw to win a 9K White Gold Australian South Sea Pearl Pendant, valued at \$490, kindly donated by Willie Creek Pearls.

Bathers Beach House is a short five minute walk from the conference venue, across Esplanade Park.



Keynote speakers

Fiona Perry

Auslan Interpreter



Never elected, she never stood for public office. However, Fiona Perry has one of the most recognised and trusted faces in WA, and her fingers likely saved lives during the COVID pandemic.

As one of WA's leading Auslan interpreters, and often referred to as the 'sign language lady', Fiona stood beside Premier Mark McGowan, the Minister for Health and various health officials during hundreds of media conferences ensuring the deaf and hard of hearing community received vital and real time information about the pandemic and introduced a whole new way of communicating to a main stream audience.

In doing so, Fiona reinforced the critical need for people with hearing disability to be included in the communication, especially during a crisis. In the process 'the sign language lady' became a reluctant star. Regularly stopped by people in the street, in restaurants and shops.

Fiona is not deaf, but her high profile during the pandemic sparked a renewed interest in Auslan taking it even further than the hearing-impaired community.

Tim Heffernan

The Mental Health Commission of New South Wales



Tim Heffernan is Deputy Commissioner with The Mental Health Commission of New South Wales (NSW). An experienced peer worker, Tim was a past Chair of Being (NSW Consumer Advisory Group) and the NSW Public Mental Health Consumer Workers Committee.

He is co-Chair of the National Mental Health Commission's Stigma and Discrimination Reduction Strategy and was Deputy co-Chair of the Peer Workforce Development Guidelines Steering Committee. Tim worked as Mental Health Peer Coordinator with the South Eastern New South Wales Primary Health Networks from 2017 until June 2022.

Keynote speakers

Professor Pat Dudgeon

Poche Centre for Aboriginal Health



Pat Dudgeon is from the Bardi people in WA. She is a psychologist and professor at the Poche Centre for Aboriginal Health and the School of Indigenous Studies at The University of Western Australia (UWA). Her area of research includes Indigenous social and emotional wellbeing and suicide prevention.

She is the director of the Centre of Best Practice in Aboriginal and Torres Strait Islander Suicide Prevention at UWA. She is also the lead chief investigator of a national research project, Transforming Indigenous Mental Health and Wellbeing that aims to develop approaches to Indigenous mental health services that promote cultural values and strengths as well as empowering users. She has many publications in Indigenous mental health, in particular, the Working Together Aboriginal and Torres Strait Islander Mental Health and Wellbeing Principals and Practice 2014.

Joe Williams

The Enemy Within



Joe Williams is a Wiradjuri, 1st Nations Aboriginal man born in Cowra, raised in Wagga NSW having lived a 15-year span as a professional sports person. Joe played in the National Rugby League for South Sydney Rabbitohs, Penrith Panthers and Canterbury Bulldogs before switching to professional Boxing in 2009. As a boxer, Joe was a two-time WBF World Junior Welterweight champion and also won the WBC Asia Continental Title.

Although forging a successful professional sporting career, Joe battled the majority of his life with suicidal ideation and Bipolar Disorder. After a suicide attempt in 2012, Joe felt his purpose was to help people who struggle with mental health and wellbeing.

Joe is an author, having contributed to multiple books, as well as his own autobiography titled [Defying The Enemy Within](#). Joe was also named as finalist for the Courage Award in the 2017 National Indigenous Human Rights Awards, and in 2018, was awarded the Suicide Prevention Australia Life Award for his work in communities across the country. In 2019, Joe was awarded Australia's highest honour in the mental health field, announced as a co-winner of the National Mental Health Prize presented by the Australian Prime Minister.

Since founding the organisation The Enemy Within in 2014, Joe has delivered wellbeing programs to over 200 communities across Australia, as well as multiple countries around the globe, which aims to alleviate the mental and traumatic distress of individuals from all pockets of the community. Joe is also an Adjunct Associate Professor at the School of Psychology at the University of Queensland.

Dr Tracy Westerman

Indigenous Psychological Services



Dr Tracy Westerman AM is a proud Nyamal woman from the Pilbara in WA. She has long been considered a critical thought leader in Aboriginal mental health, suicide prevention and cultural competency.

In 2003, she became the first Aboriginal person to complete a combined Masters and PhD in Clinical Psychology. Dr Westerman is a widely sought-after keynote speaker delivering to over 80 national conferences, as well as internationally in Canada (2003); the USA (2004), Auckland (2006, 2007) and Wellington (2009). More than 40,000 individuals have attended her workshops arguably making her the most in demand trainer in Australia.

She has developed multiple unique psychometric tests enabling the identification of Aboriginal people at suicide and mental health risk, which ensure measured cultural competency improvements. Regularly sought out by all forms of media for her opinions, Dr Westerman is also published in many academic journals.

In 2018, she launched the Dr Tracy Westerman Indigenous Psychology Scholarship Program to address the unacceptable rates of Indigenous child suicide by increasing the number of Indigenous psychologists in our highest risk Indigenous communities. She launched the charity, The Westerman Jilya Institute for Indigenous Mental Health in 2020, to drive Indigenous mental health suicide prevention best practice. Jilya now supports 41 Indigenous psychology students via private donations, fundraising and government commitments. She has recently signed with UQP to publish her memoir in 2023, which will document her significant, ground breaking work.

Shanna Whan

Sober in the Country



Shanna Whan is a rural woman, founder, CEO and face behind Sober In The Country (SITC). She is an Australian of the Year recipient (Local Hero, 2022) who decided to 'do what she could to be part of the change' after overcoming her own lifelong battle with trauma-linked alcohol addiction and almost losing her own life in 2015. Today, SITC is a nationally respected grassroots organisation changing and saving lives, and preventing generational harm. Far from being anti-alcohol; the charity focuses on straight talk, peer support, social inclusion and the #OK2SAYNO movement. Shanna lives in rural north west NSW with her husband Tim.

WESTERN AUSTRALIA'S SEVEN REGIONS

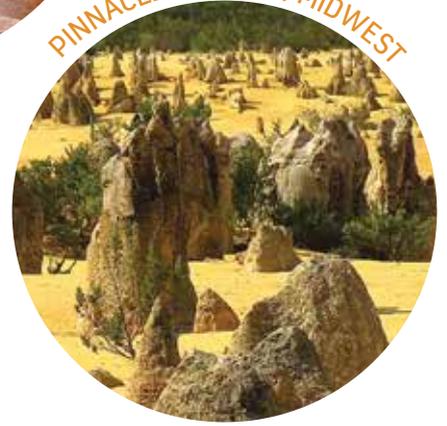
PURNULULU NATIONAL PARK, KIMBERLEY



HAMERSLEY GORGE, KARIJINI NATIONAL PARK



PINNACLES DESERT, MIDWEST



LAKE BALLARD, GOLDFIELDS



CANOLA FIELDS, WHEATBELT



PEMBERTON, SOUTH WEST



ALBANY, GREAT SOUTHERN



With an area spanning more than 2.5 million square kilometres and a population of more than half a million – including more than 10 per cent who identify as Aboriginal – country WA demands unique and bold approaches to mental health service provision.

Jeff Moffet
Chief Executive, WA Country Health Service

Our sponsors

We would like to take this opportunity to thank our sponsors for their support of the WA Rural and Remote Mental Health Conference 2023.

Carers and Consumers Bursary
Sponsored by Mental Health Commission



Government of Western Australia
Mental Health Commission

30th Anniversary Dinner
Sponsored by Willie Creek Pearls



Keynote Speaker Sponsor
Sponsored by Mental Health Commission
of New South Wales

**Mental Health
Commission**
of New South Wales

Keynote Speaker Sponsor
Sponsored by Indigenous Psychological Services



Government of Western Australia
WA Country Health Service

**Get
outta
town**

Choose to work and play in country WA

Visit jobs.wa.gov.au and search for WA Country Health Service today.

The advertisement features a textured, light brown background. In the top left corner is the Government of Western Australia logo and text. The main headline 'Get outta town' is in large, bold, black letters. Below it, three Polaroid-style photos are arranged: a man taking a selfie, three people standing in front of a brick building, and a kangaroo in a field. A yellow banner at the bottom contains the text 'Choose to work and play in country WA'. At the very bottom, a line of text provides the website 'Visit jobs.wa.gov.au and search for WA Country Health Service today.'

TUESDAY 31 OCTOBER 2023

6.00pm	Welcome reception and Welcome to Country ROTTNEST ROOM Jeff Moffet Chief Executive, WACHS
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Program – Day 1

Please note: program is subject to change

WEDNESDAY 1 NOVEMBER 2023

7.00am Yoga

8.45am Registration

OPENING PLENARY | SIRIUS

9.25am Conference opening and Welcome to Country

The Hon. Amber-Jade Sanderson MLA
Minister for Health and Mental Health

WA Country Health Service Welcome
Dr Neale Fong
Board Chair, WACHS

Acknowledgement of Lived Experience
Margaret Doherty
Mental Health Advisory Council

10.00am

Keynote

Fiona Perry

Interpreting in remote areas

10.45am

Morning tea and trade exhibition



Government of Western Australia
WA Country Health Service

Allied Health Transition to Practice Graduate Program

- ✓ Supports graduates to transition to rural and remote practice
- ✓ Allows graduates to upskill in a range of specialties, including mental health
- ✓ 12-month program, supported by clinical experts and educators

wacountry.health.wa.gov.au/WorkWithUs

- Aboriginal mental health: Social and emotional wellbeing
- Collaborative approaches in rural and remote mental health care
- Boots on the ground: Innovative workforce solutions for rural and remote mental health
- Moving forward: Technology, research and innovation
- Nothing about us without us: Diversity and inclusion

WEDNESDAY 1 NOVEMBER 2023

CONCURRENT SESSIONS

	SIRIUS	PLEIADES	ORION	ADMIRALTY GULF
11.15am	<p>Co-designing health services with Aboriginal communities</p> <p>Stella Starceвич Curtin University</p> <p>Sean Durant, Jacob Gregory, Toby Miller, Kevin Puertollano</p>	<p>LIVED EXPERIENCE ABSTRACT PRESENTATIONS</p> <p>Aboriginal and Torres Strait Islander Lived Experience (Peer) Worker Guide</p> <p>Sara Walsh Mental Health Commission WA</p> <p>Establishing a Lived Experience Program in Mental Health and Community Alcohol and Drug Services (Geraldton)</p> <p>Libby McLauchlan, Penny Thomas WACHS – Midwest Mental Health and Community Alcohol and Drug Services (CADS)</p>	<p>Counting what we do so what we do counts: A call for evidence-building practices</p> <p>Tim Carey Curtin University</p>	<p>Critical perspectives in dementia</p> <p>Noel Collins WACHS</p>
12.00pm	<p>Workforce panel</p> <p>Chair Paula Chatfield</p> <p>Panel</p> <p>Steve Blefari WACHS</p> <p>Sasha Rademakers Department of Health</p> <p>Claire Somers WACHS</p> <p>Monica Taylor Mental Health Commission</p>	<p>Reimagining eating disorders in rural WA: Digital solutions and a Wheatbelt partnership delivering innovative care close to home</p> <p>Bronwyn Raykos Centre for Clinical Interventions, Morgan Psychology</p>	<p>Mindfulness</p> <p>Samir Heble WACHS</p> <p>.....</p> <p>Mindfulness and meditation: A wellbeing initiative</p> <p>Arianna Patrick, Jennifer Smith WACHS</p>	<p>WACHS Mental Health Emergency Telehealth Service (ETS)</p> <p>Sherylee Girling, Gemma Powell WACHS Mental Health Emergency Telehealth Service</p> <p>Joanne Miller WACHS Mental Health Patient Flow</p>

- Aboriginal mental health: Social and emotional wellbeing
- Moving forward: Technology, research and innovation
- Collaborative approaches in rural and remote mental health care
- Nothing about us without us: Diversity and inclusion
- Boots on the ground: Innovative workforce solutions for rural and remote mental health

WEDNESDAY 1 NOVEMBER 2023				
12.45pm	Lunch and trade exhibition			
CONCURRENT SESSIONS				
	SIRIUS	PLEIADES	ORION	ADMIRALTY GULF
1.30pm	<p>Shifting perspectives: Examining the impact of Lived Experience on mental health services</p> <p>Facilitator Jess Brentnall WACHS</p> <p>Panel Tim Heffernan The Mental Health Commission of NSW David McMasters, Phoebe Wilson North Metropolitan TAFE</p>	<p>Lost in space: Substance addiction in rural and remote mental health systems</p> <p>Mathew Coleman WACHS and The Rural Clinical School of Western Australia</p>	<p>Clinical yarning: A framework for communication in Aboriginal health care</p> <p>Ivan Lin WA Centre for Rural Health (WACRH) and Geraldton Regional Aboriginal Medical Service Trevor Pickett WACRH</p>	<p>An introduction to The Grief Language Project for communities and workplaces</p> <p>Michelle Moriarty Grief Connect</p>
2.15pm	<p>Supporting the Aboriginal mental health workforce</p> <p>Helen Milroy The University of Western Australia</p>	<p>The Five Ws of the adult Gender Diversity Service (GDS)</p> <p>Michelle De Silva Royal Perth Bentley Group and East Metropolitan Health Service</p>	<p>Adolescent mental health</p> <p>Davinder Hans, Hayden Wilson WACHS</p>	<p>The Sexuality in Dementia Project – Phase 1: Human Centred Design Thinking</p> <p>Bronwyn Cutler WACHS – Great Southern</p>
3.00pm	Afternoon tea and trade exhibition			
PLENARY SIRIUS				
3.30pm	<p>Keynote Tim Heffernan Lived experience workforce development – rural workforce</p>			
4.30pm	Close of conference – Day 1			
5.00pm	Soccer match – Rural Ramblers vs Metro Maulers Esplanade Park			
6.30pm	Open Mic night Bar Orient			

-  Aboriginal mental health: Social and emotional wellbeing
-  Moving forward: Technology, research and innovation
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-  Boots on the ground: Innovative workforce solutions for rural and remote mental health

Program – Day 2

Please note: program is subject to change

THURSDAY 2 NOVEMBER 2023				
8.15am	Registration			
OPENING PLENARY SIRIUS				
8.55am	Conference opening			
9.15am	From consumer to advocate: Hayley's fight to Bring Back PHaMs Hayley Harris Bring Back PHaMs			
CONCURRENT SESSIONS				
	SIRIUS	PLEIADES	ORION	ADMIRALTY GULF
10.00am	What is needed for a trauma informed mental health service in Australia? Perspectives of clinicians Deborah Howe, Allyson Wilson Agency for Clinical Innovation ●	Going the distance: making mental health support work better for regional communities Yasmine Hooper, Lisette Kaleveld, Colin Penter Centre for Social Impact ●	Raising awareness of men's wellbeing and health in rural and remote WA Owen Catto The Regional Men's Health Initiative ●	Rural Psychiatry Training WA Steven Blefar, Matt Davidson, Zoe Retallick, David Townsend WACHS ●
10.30am	Morning tea and trade exhibition			
	e-POSTER PRESENTATIONS			
	Poster 1 - Creating a welcoming space for Aboriginal people Penny Thomas – WACHS			
	Poster 2 - Community mental health and primary health care Davina Whittle – Kimberley Mental Health and Drug Service (KMHDS)			
PLENARY SIRIUS				
11.00am	Keynote Pat Dudgeon The University of Western Australia Suicide prevention in rural and remote WA			

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THURSDAY 2 NOVEMBER 2023

ABSTRACT PRESENTATIONS

	SIRIUS	PLEIADES	ORION	ADMIRALTY GULF	PRINCE REGENT
11.45am	What is the future of mental care in WA? It looks like Safewards Sarah Bernard, Arianna Patrick WACHS – South West CMH	Mullewa Empowering Aboriginal Voices: Collective participation in Aboriginal health and wellbeing Charmaine Green WACRH	Cultural Information Gathering Tool (MR23): Story of Aboriginal people being shared throughout mental health Josephine Gray WACHS	Embracing the power of community: Working across the sectors to improve mental health Renee Knapp Think Effective Consultancy	Presence and effects of languages in child and adolescent mental health Antonios Chasouris WACHS – Midwest
	Mental Health Co-Response (MHCR): Moving forward technology, research and innovation Prabeesh Prasannan Pillai, Jacqueline Spinks Community Mental Health – South West MHCR: Leading collaborative approaches in rural and remote mental health care Sharon Southall WACHS – Midwest Mental Health and CADS	Aboriginal cultural issues masquerading as mental illness Ben Sketcher, Shayne Taylor WACHS – South West	Talking Resilience with Betty Bounceback Aimee Howard, Sue Luketina WACHS – Kimberley	My journey navigating the complex web of mental health care in WA Donna Reid Mental Health Carer Lived Experience	A local perinatal mental health campaign: People, partnerships and empowerment Elizabeth Lockyer, Isabel Ross WACHS – Midwest

- Aboriginal mental health: Social and emotional wellbeing
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12.30pm	Lunch and trade exhibition
	e-POSTER PRESENTATIONS
	Poster 3 - Supporting the Aboriginal and Torres Strait Islander social and emotional wellbeing and mental health workforce Darren Deves – Australian Indigenous HealthInfoNet
	Poster 4 - Pithanhi Wangka Kata Walykumunu come, let us talk ... and help you feel good Raylene Cooper, Crystal O'Loughlin and Bill Ring – WACHS – Goldfields

PLENARY | SIRIUS

1.15pm	Keynote Joe Williams The Enemy Within
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CONCURRENT SESSIONS

	SIRIUS	PLEIADES	ORION	ADMIRALTY GULF
2.15pm	Reducing the incidence of child maltreatment David Lawrence Curtin University	Roses in the Ocean, non clinical peer-led services Jon Eddy and Amy Bertakis Roses in the Ocean	COMBINED SUICIDE PREVENTION ABSTRACT SESSION Wheatbelt Suicide Prevention Project (WSPP): Delivering suicide prevention through a Collective Impact lens Jo Drayton Holyoake The Ripple Effect: A collaborative approach to rural and remote postvention Elizabeth Lockyer, Isabel Ross WACHS WACHS Wheatbelt Suicide Postvention: Creating pathways for collaborative critical responses following sudden death/suspected suicide Tendai Makanyanga WACHS	Homelessness in rural and remote WA Jane Armstrong East Metropolitan Health Service

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Program – Day 2 CONTINUED

Please note: program is subject to change

2.45pm	Afternoon tea and trade exhibition
	e-POSTER PRESENTATIONS
	Poster 5 - Lunch and Learn Claire Somers – WACHS
	Poster 6 - WACHS quality improvement in action – Child and Adolescent Mental Health Service (CAMHS) Life QI Emma Callaghan – WACHS

CONCURRENT SESSIONS

	SIRIUS	PLEIADES	ORION	ADMIRALTY GULF
3.15pm	<p>Can education of clinicians within a rural mental health service increase the efficacy of telehealth</p> <p>Elizabeth Kruck Kruck Mental Health Specialist</p> 	<p>SEWB Model of Service Pilot Program</p> <p>Rachel Radcliffe Aboriginal Health Council of Western Australia</p> <p>Patricia Hayward South West Aboriginal Medical Service</p> 	<p>Look out for Bigaagarri (threats and signs): Co-creating preventive, experiential, arts and cultural evidence models for holistic health conversations for the ALIVE National Centre for Mental Health Research Translation co-designed roadmap</p> <p>Victoria Palmer The University of Melbourne and The ALIVE National Centre</p> <p>Phillip Orcher Muruwori/ Gumbaynggirr</p> 	<p>Safe spaces</p> <p>Thomas Drake-Brockman Perth Children's Hospital</p> 

PLENARY | SIRIUS

3.45pm	<p>Keynote</p> <p>Dr Tracy Westerman Indigenous Psychological Services</p> <p>When you are not explaining the GAP – how can you close it? Why suicides and child removals continue to escalate</p>
4.30pm	Close of conference – Day 2
6.00pm	30th Anniversary Conference Dinner Bathers Beach House – <i>concludes at 11.00pm</i>

-  Aboriginal mental health: Social and emotional wellbeing
-  Collaborative approaches in rural and remote mental health care
-  Boots on the ground: Innovative workforce solutions for rural and remote mental health
-  Moving forward: Technology, research and innovation
-  Nothing about us without us: Diversity and inclusion

Program – Day 3

Please note: program is subject to change

FRIDAY 3 NOVEMBER 2023	
PLENARY SIRIUS	
8.45am	Final day opening
9.05am	Keynote Shanna Whan Sober in the Country
10.05am	Moving forward to where? Reimagining contentment and wellbeing in country WA Tim Carey Curtin University
10.50am	Choir performance
11.05am	Closing address WA Country Health Service Final remarks and close of conference
11.15am	Morning tea



Government of Western Australia
WA Country Health Service



Rural Psychiatry Training

Program WA

Supporting the next wave of rural mental health professionals

- ✓ End-to-end psychiatry training in regional WA
- ✓ Opportunities across acute clinical settings, child and adolescent services and consultation liaison



Learn more

- Aboriginal mental health: Social and emotional wellbeing
- Collaborative approaches in rural and remote mental health care
- Boots on the ground: Innovative workforce solutions for rural and remote mental health
- Moving forward: Technology, research and innovation
- Nothing about us without us: Diversity and inclusion

Abstracts

Aboriginal and Torres Strait Islander Lived Experience (Peer) Worker Guide

Sara Walsh

Mental Health Commission WA

The Mental Health Commission engaged the services of the ILEC to develop the Aboriginal and Torres Strait Islander Lived Experience (Peer) Worker Guide (Guide), a supporting resource to the recently released Lived Experience (Peer) Workforce Framework. This presentation will speak to both the process that was undertaken and the outcome of the project.

There are clear similarities between the Lived Experience (Peer) Workforces and the broader First Nations Peoples workforce. Relationships, connection, sharing power and blurring boundaries are features of these workforces but do not fit comfortably in hierarchically structured workplaces.

A cultural element of emotional labour could be present for First Nations workers who are embedded in and accountable to their community and who may often need to assist family and community members as part of cultural obligation. This means they may not often have the opportunity to switch off. This example invites us all to reflect on where the emotional labour sits in our domain and what organisational strategies need to be employed to minimise its impact. The Aboriginal and Torres Strait Islander Lived Experience (Peer) Worker Guide looks deeper into the nuances of this specific workforce and outlines strategies and supports that are required to build a thriving workforce.

The Guide will provide advice and strategies to organisations looking to employ and support Aboriginal and Torres Strait Islander Lived Experience (Peer) Workers. Having Aboriginal and Torres Strait Islander Lived Experience (Peer) embedded in mainstream services provides cultural security within the service provision.

The process undertaken for engagement is a best practice example of co-design with relevant stakeholders. This presentation will serve as a platform to not only promote the Guide itself but also to highlight the process undertaken to support future Aboriginal and Torres Strait Islander specific workings as the work was undertaken using true co-design and co-production practices.

Establishing a Lived Experience Program in Mental Health and Community Alcohol and Drug Services (Geraldton)

Penny Thomas and Libby McLauchlan

WACHS – Midwest Mental Health and CADS

In 2022, the Midwest Mental Health and CADS established a Lived Experience Program. The Midwest is unique in having peer workers working across Mental Health and CADS and this is also the first WACHS CADS team to have a Lived Experience Program. This presentation will outline the process of recruitment, training and culture change within the teams.

It will explore:

- Partnerships with COMWHA and others
- Recruitment and selection
- Training
- Culture change with staff
- Learnings – the good, the bad and the ugly!
- Future challenges

Highlights will include personal stories from participants in the Lived Experience Program as well as feedback from team members about the implementation of the program.

Abstracts

Mindfulness and meditation: A wellbeing initiative

Jen Smith and Arianna Patrick

WACHS

WACHS Mental Health initiated mindfulness and meditation sessions as an innovative staff wellbeing initiative. Evaluation evidenced reported benefit from a significant number of our workforce therefore moving into 2023 we are continuing with providing mindfulness and meditation sessions with all staff welcome.

Mindfulness and meditation are evidence-based practices to build resilience; working in mental health it is important to look after our mental health too. These sessions complement some of the already great wellbeing programs that are being run across health and bring added benefits of staying connected across our regions.

We would like to share with the audience why we do these sessions: the benefits for all staff and consumers, carers, what we do, what they involve and how they are facilitated and received. We will share some anecdotal evidence and evaluation data before facilitating a 10-minute mindfulness and meditation session.

Our aim is to share wellbeing practices for people to take away for themselves, start a conversation with others, come along to our WACHS-wide sessions building the capability, competence and confidence for all.

The Sexuality in Dementia Project - Phase 1: Human Centred Design Thinking

Bronwyn Cutler

WACHS

The World Health Organisation states that all people have a right to positive sexual expression in environments that affirm and promote sexual health and wellbeing. This includes older people and those that reside in residential aged care facilities (RACFs).

Research has shown that staff in RACFs have difficulty in dealing with the sexual behaviour of older people with dementia and that this is to do with not receiving support and training in the workplace, therefore making decisions based on their own attitudes, values and experiences.

The aim of The Sexuality in Dementia (SID) Project is to support the sexual health and wellbeing of people with dementia who reside in WACHS RACFs by improving the competence and confidence of staff dealing with sexual behaviour of people with dementia in their care. Management of older people with dementia who reside in RACFs and demonstrate sexualised behaviours is a complex and sensitive clinical issue, and there is a dearth of resources and training available to staff to assist them to work constructively with older people in this cohort.

Phase 1 of The SID Project utilised Human Centred Design Thinking (HCDT) workshops to engage with staff members at the frontline of the problem. HCDT is about building a deep understanding of the experience of the people you are designing a solution for, generating many ideas for the identified challenge, building one or more prototypes to test with the people you are designing for and eventually putting your co-designed, innovative new solution out into the world. This presentation steps through this initial phase of The SID Project.

Abstracts

Rural Psychiatry Training WA

Steven Blefari, Zoe Retallick, David Townsend
Rural Psychiatry Training WA

Background: There is a critical need for high quality psychiatric care in rural WA, but over 90 per cent of WA psychiatrists are in Perth. There are 13.5 psychiatrists per 100,000 people in WA, but only 4.3 per 100,000 outside Perth. Most existing WA trainees complete all training in Perth and don't complete any rural terms.

Objectives: To increase rural training and retention, WACHS applied to RANZCP to accredit our catchment as a new 2.5 million square kilometres rural training zone and established Rural Psychiatry Training WA (RPTWA) to run a comprehensive end-to-end training program for aspiring psychiatrists to live, train and practise in rural WA.

Methods: RPTWA is the first ever dedicated rural psychiatry training zone. We are working with communities, government and stakeholders to support each trainee and their family to become established and thrive in their rural communities. We are also working to expand training to smaller and remote posts while ensuring trainees have equitable access to training and education, secure pathways for support and access to appropriate supervision for remote practice.

Findings: Following provisional accreditation, we received strong interest from prospective and current trainees, with 23 trainees who joined the program in February 2023, many of whom have come from rural backgrounds.

Conclusions: The creation of RPTWA has been the culmination of years of work and lobbying by passionate rural psychiatrists and is thanks to close collaboration between WACHS, the WA Branch of RANZCP, the WA Branch Training Committee as well as multiple WA Government and community stakeholders.

What is the future of mental health care? It looks like Safewards

Sarah Bernard and Arianna Patrick
WACHS

Aim: Ignite a passion for Safewards as the future of mental health care.

Content of presentation: Safewards is a model of care which aims to reduce conflict and containment events on mental health inpatient units – based on 10 interventions developed through research in the United Kingdom by Professor of Psychiatric Nursing, Len Bowers. He concluded that common conflict points within mental health inpatient units such as aggression, substance use, absconding, deliberate self-harm and suicide attempts contribute to harmful, and potentially traumatising, containment events.

In 2020-2021 the South West Inpatient Unit saw the highest number of code blacks called within a five year period – coinciding with workers compensation claims tripling. The Safewards model commenced implementation in October 2021 in response to this unsettling period.

Within eight months there was a 23 per cent reduction in containment events and Workers Compensation claims were the lowest they had been in five years.

Safewards objectives are simple, yet effective: aim to establish the therapeutic relationship, explore alternative psychotherapeutic methods, reduce the use of restrictive practice, reduce trauma events and improve safety in mental health Units. It's that simple.

This is Safewards. This is the future of mental health care.

Abstracts

Mullewa Empowering Aboriginal Voices

Charmaine Green

WACRH

Dr Charmaine Green will present a session on the collaborative approaches taken by WACRH, in partnership with the Mullewa community, to contribute to improving the social and emotional wellbeing of the Mullewa community. Mullewa is located 99 kilometres east-northeast of Geraldton and 450 kilometres north of Perth. As at the 2021 Australian Census, the Mullewa population declined from 447 to 356 of which 52.4 per cent were male and 47.6 per cent female. The Aboriginal and Torres Strait Islander population was recorded as 90 (25.3 per cent). This session will focus on the Mullewa Empowering Aboriginal Voices (MEAV) project and associated program of community activities. MEAV is a three-year program of empowerment and connectedness in the Mullewa community to improve Aboriginal health and wellbeing. The MAEV programs aims are to address Aboriginal and Torres Strait Islander people's relationships and belonging to the Mullewa community for stronger health and wellbeing; identify and address the community needs of Aboriginal and Torres Strait Islander people living in Mullewa; identify and develop a strong cohort of Aboriginal and Torres Strait Islander community leaders and members who can continue to encourage collective participation in health promotion and community programs and activities in Mullewa. We will offer insight into program outcomes and progress including responses taken locally to tackling community violence; developing a Mullewa Healing Program resulting in the Mullewa Healing Forum; Mullewa Women's Centre activities; male and female healing yarning circles on country and documenting the Aboriginal voices of Mullewa through recorded interviews and lastly the establishment of a new WACRH Research Centre in Mullewa. Yamaji woman Dr Charmaine Green is a Research Fellow at WACRH in Geraldton WA. Dr Green leads the WACRH MEAV project, as well as the Midwest Aboriginal Men's Empowerment (MAME) project.

Embracing the power of community: Working across the sectors to improve mental health

Renee Knapp

Think Effective Consultancy

For too long, education, health, law enforcement, community groups and businesses have worked in isolation to address mental health issues. Yet, each of these key stakeholders can play a role of prevention, intervention or support in communities.

I help communities work across the sectors to achieve improved mental health outcomes by facilitating the development of mental health action teams and community wellbeing plans, so that real change can happen and we can start saving lives.

During this presentation I will:

- Outline the key benefits to developing a community/cross-sector approach to mental health
- Identify key areas to address when adopting this approach and provide a framework for successful change
- I will then explore some essential steps/strategies involved in setting up your own community mental health approach in your local area including:
 - Qualities of a mentally healthy community (that are important to your setting)
 - What is currently happening in the three tiers of mental health in your local area
 - Awareness and education
 - Prevention
 - Early intervention and available support services
 - Protective and risk factors that exist in your local community

I will provide you with a results framework and access to an implementation checklist to provide you with an overview and a starting point that will leave you with a clear pathway and vision to get you started on the journey to mental health improvement in your community.

Abstracts

Presence and effects of language disorders in child and adolescent mental health

Antonios Chasouris

WACHS

A limited scope study was conducted to investigate the prevalence of speech and language problems in children and adolescents attending clinics in WACHS Child and Adolescent Mental Health Service for the Midwest region (CAMHS). A screening assessment was devised with the aim of detecting difficulties with receptive and expressive language, voice, articulation, and fluency, by use of modified standardized tests and subjective ratings. All patients had been under the care of a key worker in CAMHS and were studied during a period of 52 months. Results showed that moderate or severe difficulties in at least one aspect of speech and language was present in over two-thirds of the 72 children and adolescents assessed. The most common problems occurred in the areas of expressive language and verbal communication. Problems with voice, articulation and fluency were less common. The limitations on the information obtained due to the nature of the population considered and the assessment procedure, and the implications of the findings for the management of patients are discussed.

Cultural Information Gathering Tool (MR23): Story of Aboriginal people being shared throughout mental health

Ms Josephine Gray

WACHS

The Cultural Information Gathering Tool (MR23) originated from Queensland then adapted across WACHS Aboriginal Mental Health. This unique tool is the first to be introduced for WACHS Mental Health Program to gather cultural relevant information shared by the consumer and families. This tool informs clinical assessments and are utilised in multidisciplinary reviews regarding the 'Aboriginal person' and cultural considerations, and cultural needs are integrated in care management and recommended cultural interventions.

Using a naturally YARNING process of sharing stories and cultural connections within family structures and experiences of trauma, and roles and responsibilities.

This tool helps build rapport and engagement with the Aboriginal person and would belong in the client clinical file and would travel person if transferred from the rural remote areas to metropolitan healthcare regions.

WACHS Aboriginal mental health workers are offered training in the tool and all helped review and co-design a tool more relevant to the rural and remote local cultural interactions and considerations from traditional to contemporary worldviews. The Cultural Information Gathering Tool (MR23) will help inform clinicians of cultural ways to care and cultural background knowledge of the person's situation for consideration, for better health outcomes for Aboriginal people's social and emotional wellbeing.

Abstracts

Mental Health Co-Response (MHCR): Moving forward technology, research and innovation

Jacqueline Spinks and Prabeesh Prasannan Pillai
WACHS

People experiencing a mental health crisis and/or presenting with behavioural disturbance remain an ongoing issue for police officers, who may have little or no experience of mental illness. This is clearly reflected in the state mental health and criminal justice statistics. The presentation of challenging behaviours related to people experiencing mental illness in rural and remote parts of WA communities, results in police involvement as a first point of contact. Sometimes involvement of police, may result in long delays for the person experiencing the mental health crisis and their families in accessing a culturally secure mental health services close to home and in a timely manner.

The MHCR in the South West commenced service delivery in July 2022 within the township of Bunbury, with the aim to improve outcomes for persons experiencing mental health crisis (including suicide/self-harm, co-morbid mental health, issues related to alcohol and other drugs). In May 2023 the model expanded using technology to commence a virtual service. This facilitates police in smaller towns within the region, to access telehealth support from an Authorised Mental Health Practitioner (AMHP). The AMHP can provide relevant information to assist police decision making when dealing with a person experiencing mental illness. Using the technology of telehealth this interaction may result in the person staying at home, being referred to the local community mental health team, local GP, or if required being transported to the nearest ED to have a mental health assessment via the Mental Health Emergency Telehealth Service.

This presentation will demonstrate how the use of technology, research (feasibility study) and innovation has resulted in improved quality mental health care for people living in very remote areas of the region where MHCR does not provide a face to face service.

Mental Health Co-Response (MHCR): Leading collaborative approaches in rural and remote mental health care

Sharon Southall
WACHS – Midwest Mental Health and CADS

People experiencing a mental health crisis and or presenting with behavioural disturbance remain an ongoing issue for police officers, who may have little or no experience of mental illness. This is clearly reflected in the state mental health and criminal justice statistics for rural and remote parts of WA. The presentation of challenging behaviours related to people experiencing mental illness in the community, results in police involvement as a first point of contact. This sometimes confronting involvement of police, may result in long delays for the person experiencing the mental health crisis in accessing a culturally secure mental health service.

The MHCR in the Midwest commenced service delivery in September 2021, with the aim to improve outcomes for persons experiencing mental health crisis (including suicide/self-harm, co-morbid mental health, issues related to alcohol and other drugs). The service includes an Authorised Mental Health Practitioner, working alongside a Police officer providing a true co-response, to assist police decision making when undertaking a welfare check and where mental illness is identified as a possible factor. Aboriginal mental health workers provide a post crisis response to ensure cultural security to MHCR.

This presentation will exemplify how joint leadership between WACHS Mental Health and WA Police, led to the development of collaborative and innovative approaches to improve access for people to specialist mental health assessments, treatment and support in a culturally secure and timely manner while reducing the number of ED presentations. Through the evaluation of qualitative and quantitative data, it will also demonstrate how this resulted in benefits for consumers, carers, police and mental health services.

Abstracts

Aboriginal cultural issues masquerading as mental illness

Ben Sketcher and Shayne Taylor

WACHS

A series of cases will be presented, describing instances where Aboriginal consumers receiving care for apparent mental health issues have had their issues identified by the collaborative efforts of clinicians and Aboriginal mental health workers as being primarily cultural or spiritual. Their problems, with patient and family consent, have been addressed culturally by elders and healers through family networks, resulting in substantial or complete resolution of their presenting problems.

My journey navigating the complex web of mental health care in WA

Donna Reid

Carer Lived Experience

In my experience it is evident that a medical facility is needed for complex needs. Multiple goals can be achieved through a planned admission process in conjunction with sedation and anaesthesia. Taking inspiration from my sons planned admission to Fiona Stanley Hospital for day procedures and from philanthropic doctors in NSW who, in their own time, run a clinic for adults with complex needs.

My presentation will cover:

- Navigating the complex web of mental health and complex needs through my lived experiences.
- Encouraging positive connections between individuals with complex needs and healthcare professionals.
- Advance planning with a collaborative approach.

An integrated medical clinic with multidisciplinary teams and planned admissions for patients with complex and mental health needs is unquestionably a key part of ensuring optimal healthcare.

A local perinatal mental health campaign: People, partnerships and empowerment

Isabel Ross and Elizabeth Lockyer

WACHS

Perinatal mental health issues affect one in five women, and one in 10 men. Despite being so common, discussions with stakeholders and community members in the Midwest identified very little awareness and support for perinatal wellbeing locally.

In response, the Mental Health Promotion Coordinators at WACHS – Midwest collaborated with Health Communication Resources, Geraldton Local Drug Action Group, and Geraldton Suicide Prevention Action Group to develop a perinatal mental health campaign specific to the Midwest.

Recognising that change comes from the community, the campaign engaged new mothers and fathers, and professionals, from Geraldton and Carnarvon to share their experiences, advice, and help-seeking recommendations. These were used to create a suite of social media videos, community service announcements and posters for distribution around the Midwest.

The response from the community was overwhelming. Social media posts had a reach of 45,000 over two months, with average engagement of 8.3 per cent. The videos generated valuable and validating conversations on social media. The campaign also led to featured parents becoming incidental community champions for perinatal mental health, which they accepted enthusiastically.

This project demonstrates the power of local faces and lived experience in developing low-cost impactful messaging, building positive partnerships, and empowering individuals and communities.

Abstracts

Talking Resilience with Betty Bounceback

Aimee Howard and Sue Luketina

KMHDS

This session provides a look at [Talking Resilience with Betty Bounceback](#). This short film introduces the character Betty who provides us with tips and information regarding resilience. The film features a range of Kimberley people who share their thoughts and views.

Aimee and Sue travelled to various parts of the Kimberley, with Goolarri Media, to meet and talk with people young and old, and from a range of environments and cultural backgrounds.

It was the intention of the film producers to create a resource that is suitable for a wide range of audiences. The film has now been launched around the Kimberley community. It is planned to use the film as a training tool for various social, emotional wellbeing courses and at different events that promote positive emotional development and good mental health.

Aimee and Sue will introduce the film and provide further details regarding the background and processes needed to develop the character and film.

It is hoped that the character of Betty Bounceback will be seen again through the film, written prevention materials and even in real life to continue promoting positive messages focussing on building and maintaining resilience.

WSPP: Delivering suicide prevention through a Collective Impact lens

Jo Drayton

Holyoake

Holyoake has delivered suicide prevention within the Wheatbelt for more than seven years. In 2022, Holyoake created the WSPP through funding from HPN. This presentation covers concept design, integrated implementation and showcases the outcomes WSPP has achieved in its first 18 months.

In designing the WSPP Holyoake overlaid a Collective Impact Framework with evidence-based suicide prevention models resulting in a 4-pillar model:

- **Primary care:** Delivery of mental health literacy, suicide prevention training and audio-visual display resources for doctors, pharmacists and Health Department staff.
- **Broad network free education and training:** Provision of free place-based and online mental health and suicide awareness and prevention training.
- **Community grants:** A grant round for organisations to deliver place-based grassroot suicide prevention activity in conjunction with the WSPP governance committee.
- **Community champions:** Identification of community champions who want to increase safety within their communities.

The success of the model is underpinned by the high level of engagement and integration of projects with partners including those who have not historically been involved in suicide prevention. This presentation will outline three collaborative partnerships that have resulted in unique projects:

Country Football Wellbeing Program (CFWP) – A pilot project with 20 clubs, which provides communication, education and environmental strategies that clubs can adopt. Participating clubs are rewarded for their engagement.

#DEADLYGIRLSMATTER Project – WSPP partnered with Shooting Stars and Deadly Minds Matter to fund an authentic youth co-designed wellbeing project. The project reached 115 students over three months.

Engagement with Local Government Authorities – Wheatbelt Local Government Authorities are accessing and utilising the WSPP to assist them in undertaking mental health and wellbeing and suicide prevention activity as part of the changes to their public health plans.

Abstracts

The Ripple Effect: A collaborative approach to rural and remote postvention

Isabel Ross and Elizabeth Lockyer

WACHS

There is an overwhelming amount of evidence to support the notion that people exposed to, affected by, and bereaved by suicide are at a two to five times increased risk of dying by suicide themselves. The 2021-2025 WA Suicide Prevention Framework lists individuals and groups affected by suicide as a priority population and has included postvention as one of four streams implemented across the state to reduce suicide deaths in WA.

The Midwest Mental Health Promotion Coordinator (MMHPC) role was established with WACHS in 2018 and has spent the past five years building from scratch a comprehensive and collaborative postvention response throughout the region.

To achieve this, the MMHPC established, and continues to refine a region-wide Postvention Coordination Committee, involving various government, NGO, regional and lived experienced representatives. Through this committee a notification and response procedure has been developed, enabling a timely and consistent response to suicide deaths in the region. The committee meet quarterly to review and improve this procedure, as well as each individual postvention response, enabling constant quality improvement and flexibility to respond to and meet the community's needs.

With the establishment of this committee and procedure, gradually and significantly improved inter-service collaboration, and increased community awareness, 100 per cent of suicides occurring in the region are now responded to in a timely and effective manner.

WACHS Wheatbelt Suicide Postvention: Creating pathways for collaborative critical responses following sudden death/suspected suicide

Tendai Makanyanga

WACHS

The objectives of suicide postvention activities are to:

- minimise further harm to bereaved individuals, families and communities;
- ensure a locally coordinated, appropriate and safe response to meeting the support needs of those bereaved by suicide;
- ensure that the most appropriate agency provides the support based on the persons' or families' needs;
- promote safe practice in supporting those who are bereaved; and
- be culturally responsive, and monitor trends and gather research about the prevalence of suicide.

INCLUSION CRITERIA

Inclusion Criteria is individuals/families/communities that are bereaved by suicide. No time limit to the bereavement, as the grief, loss and sadness does not really end. The focus is more on those most recently bereaved by suicide, and who have had an impact to their daily function; who are facing mental health challenges such as low mood and anxiety; with a clearer focus on those who are at risk of suicide and/or self-harm themselves and who may have presented to hospital in a crisis.

Encompasses three distinct categories of those bereaved by suicide:

- The deceased has passed away within the Wheatbelt, bereaved is in the Wheatbelt
- The deceased has passed away outside the Wheatbelt, but bereaved are in the Wheatbelt
- The deceased has passed away in the Wheatbelt, the bereaved are outside the Wheatbelt

WACHS Wheatbelt Suicide Postvention provides clinical mental health assessment and suicide risk assessment of individuals bereaved by suicide, who may be at risk of suicide themselves. The aim will ultimately be to lead towards reduced sudden death/suspected suicides in the region.

Poster presentations

WACHS – Midwest Mental Health and CADS: Creating a welcoming space for Aboriginal people

Penny Thomas
WACHS

Midwest Mental Health and CADS, and the Consumer and Carer Advisory Group (CCAG) have partnered to create a welcoming space for all people.

This poster will feature artwork from Wajarri/Nhanda artist Leeann Pedersen, who also happens to be a valued member of our Access Team.

Leeann's artwork is just one example of the many ways that our teams actively strive towards diversity and inclusion.

Our poster will highlight how we have achieved:

- A high proportion of Aboriginal staff (identified and non-identified positions)
 - Welcoming artwork in public and team spaces
 - Naming of interview rooms using local Indigenous names
 - Aboriginal mental health coordinator attending CCAG
 - Increasing Aboriginal representation in our CCAG membership
-

Community mental health and primary health care

Davina Whittle
KMHDS

Broome Regional Aboriginal Medical Service (BRAMS) and Kimberley Mental Health and Drug Service (KMHDS) mental health clinic represents a proactive and innovative approach to addressing the mental health needs of Aboriginal clients in Broome, WA. The clinic is designed to successfully transition community mental health clients into primary health care, with the goal of preventing mental health deterioration and reducing the need for referrals to KMHDS.

The initial establishment of this clinic at BRAMS was a strategic response to the high number of clients who received long-term care coordination with KMHDS (some for more than 20 years) that had ongoing treatment needs, were generally stable in presentation and required low level support. The four hour a week depot-monitoring clinic provides a consistent approach to support clients to receive and monitor their medications.

The clinic is funded through the Rural Health Outreach Fund and is managed by a KMHDS senior mental health clinician.

The clinic aims to prevent clients 'falling through the gap' when discharged from the specialised mental health service into primary care.

Since its inception two years ago the clinic has evolved. Developments include:

- Encouraging and empowering clients to self-monitor their symptoms and medications and take an active role in managing their mental health
- Improving cultural safety by allowing Aboriginal clients to receive treatment at an Aboriginal Community Controlled Health Service
- Reducing stigma that clients may feel attending KMHDS as they now attend their primary care clinic
- Higher success rate in successful discharge from specialist service to primary care
- Fostering a collaborative and cooperative partnership between BRAMS and KMHDS

Conclusion: The BRAMS based mental health clinic, is an innovative solution in the provision of mental health care to clients to support successful discharge from specialist mental health services to primary care.

Poster presentations

Supporting the Aboriginal and Torres Strait Islander social and emotional wellbeing and mental health workforce

Darren Deves

Australian Indigenous Health *InfoNet*

Over the past 26 years the Australian Indigenous Health *InfoNet* (Health *InfoNet*) has contributed to 'closing the gap' in health between Aboriginal and Torres Strait Islander people and non-Indigenous Australians by making knowledge of Aboriginal and Torres Strait Islander health readily available to the health workforce and the general public. As a free web resource, the Health *InfoNet* can also be displayed on digital platforms such as mobile phones or tablets, making it highly accessible at any time to inform policy and practice in a way that has immediate and practical utility. All resources on the website can be downloaded for printing or for use on a device, making it a particularly valuable source of information for individuals and organisations anywhere in Australia, including those living and working in remote communities.

Information on the Health *InfoNet* website is sorted into various health topic portals, including a dedicated Social and Emotional Wellbeing Portal, which contains information and resources specific to Aboriginal and Torres Strait Islander peoples. This portal contributes to the workforce development of mental health workers, social workers and psychologists who work with Aboriginal and Torres Strait Islander clients by providing information on relevant events, courses, programs, organisations, funding and jobs, as well as the latest policies and other publications relevant to Aboriginal and Torres Strait Islander social and emotional wellbeing.

This presentation will provide an overview of the work of the Health *InfoNet* and highlight how those working in the social and emotional wellbeing and mental health space can use the Health *InfoNet* to inform their professional practice in working with Aboriginal and Torres Strait Islander peoples and communities. A brief demonstration will show users how to access resources on the Health *InfoNet*'s Social and Emotional Wellbeing Portal.

Pithanhi Wangka Kata Walykumunu come, let us talk ... and help you feel good

Raylene Cooper, Crystal O'Loughlin and Bill Ring
WACHS

The Aboriginal Mental Health Team (AMHT) is an integral part of the Goldfields Mental Health Service (GMHS), and is playing a major role in promoting access to services and advocating for the Aboriginal population across the whole of health services. We would like to describe some of the ways we are doing this. The eight team members are all passionate about providing a voice for Aboriginal consumers and building bridges between them and staff.

The team works closely with doctors, clinicians and staff across all GMHS streams, and within hospital settings to assist Aboriginal people with their mental health and social and emotional wellbeing. For staff, the AMHWS provide cultural guidance and support in working with Aboriginal consumers, and create the vital link between health workers, family/carer and client.

Aboriginal people make up one third of admissions to Kalgoorlie Hospital Mental Health Inpatient Unit; our team is always available to assist clients, family and staff to negotiate the challenges of being admitted to an unfamiliar possibly frightening environment.

Team members accompany clinicians on Outreach visits to Northern Goldfields or Norseman, providing a culturally appropriate service that Aboriginal people feel more comfortable to access.

The AMHT participates in the Goldfields Health Aboriginal Reference Group (GHARG), comprised of all Aboriginal staff in WACHS Goldfields and chaired by the Regional Aboriginal Health Consultant. GHARG works to align regional programs and outcomes with the Aboriginal Health Strategy and National Safety and Quality Health Service Standards relating to Aboriginal consumers especially Standard 2 Partnering with Consumers.

A new GHARG initiative is the Aboriginal On-call roster, which members of the AMHT participate in. This was created so that Aboriginal people who feel they are not being listened to in hospital can talk to staff who then contact Aboriginal On-call to provide cultural advice.

Poster presentations

Lunch and Learn

Claire Somers

WACHS

Recent technological advances provide exciting opportunities for the delivery of education to rural and remote healthcare providers. Online education can overcome barriers of distance, cost and more recently, social distancing measures during COVID-19.

WACHS Mental Health Lunch and Learn sessions were developed in 2022 as a monthly delivery of education for all staff across WACHS Mental Health. Due to the engagement and positive feedback from staff, these sessions have been increased to fortnightly. During the sessions, we hear from a variety of presenters including nurses, consultant psychiatrists, psychologists, members from the Aboriginal Mental Health Team and more. The objective of these sessions is to create a learning environment that maximises interactivity, develops information literacy and fosters a workplace that values professional and personal development.

The purpose of this e-Poster is to highlight and promote accessible education opportunities for our rural and remote mental health staff.

WACHS Quality Improvement in Action: CAMHS Life Qi

Emma Callaghan

WACHS

South West Infant and Child Adolescent Mental Health Service (ICAMHS) identified a significant time delay between receipt of referral to referral outcome, as well as inefficient processes and procedures, impacting on clinical capacity, duplication of documentation, delays in treatment and an inefficient use of the current resources.

So to streamline service delivery and address inefficiency and with the support of Nick Coulter from WACHS Central Office, the South West CAMHS Qi project was started in March 2023. With the genesis of the Live Qi project team and the registering as a Quality Improvement Activity SW ICAMHS was on its way to improved service delivery.

This presentation will give an overview of the WACHS Qi model for improvement, including looking at key stages and definitions around the use and creation of the driver diagram.

The presentation will then follow the Qi process from initial workshop, through each change idea addressed through the PDSA cycle and will include live data updates and changes along the way.

The continuing impact of the collective efforts of the project team will be highlighted including identifying changes to the project Life Qi team. The progress score of the project will also be illuminated. The timeline of the project is ongoing with an expected goal date of December 2023.

Initially, there were 24 change ideas in the driver diagram, which through the process has been refined down to 19, of which six have a corresponding PDSA cycle attached. Seven secondary drivers are linked to a measure. Balance measures have been collected and identified for each PDSA throughout the project and process measures have been highlighted for each improvement. Feedback from consumers has been gathered and identified in the process. As this is a team undertaking there will be several presenters.

HEALTH PROFESSIONALS NETWORK

Working together to build stronger, healthier rural communities



JOIN YOUR LOCAL NETWORK

The Health Professionals Networks are collegiate networks of health professionals who provide care to the rural communities in each of the seven regions of WA.

The aim of the networks is to provide rural and remote health professionals with better support and greater opportunities to network, upskill, share information and collaborate in a local supportive community environment.

For further information on any of our networks, visit the following websites:

gohpn.com.au

gshpn.com.au

khpnp.com.au

mwhpn.com.au

phpn.com.au

swhpn.com.au

wbhpn.com.au

STATEWIDE STAKEHOLDERS



Government of Western Australia
WA Country Health Service



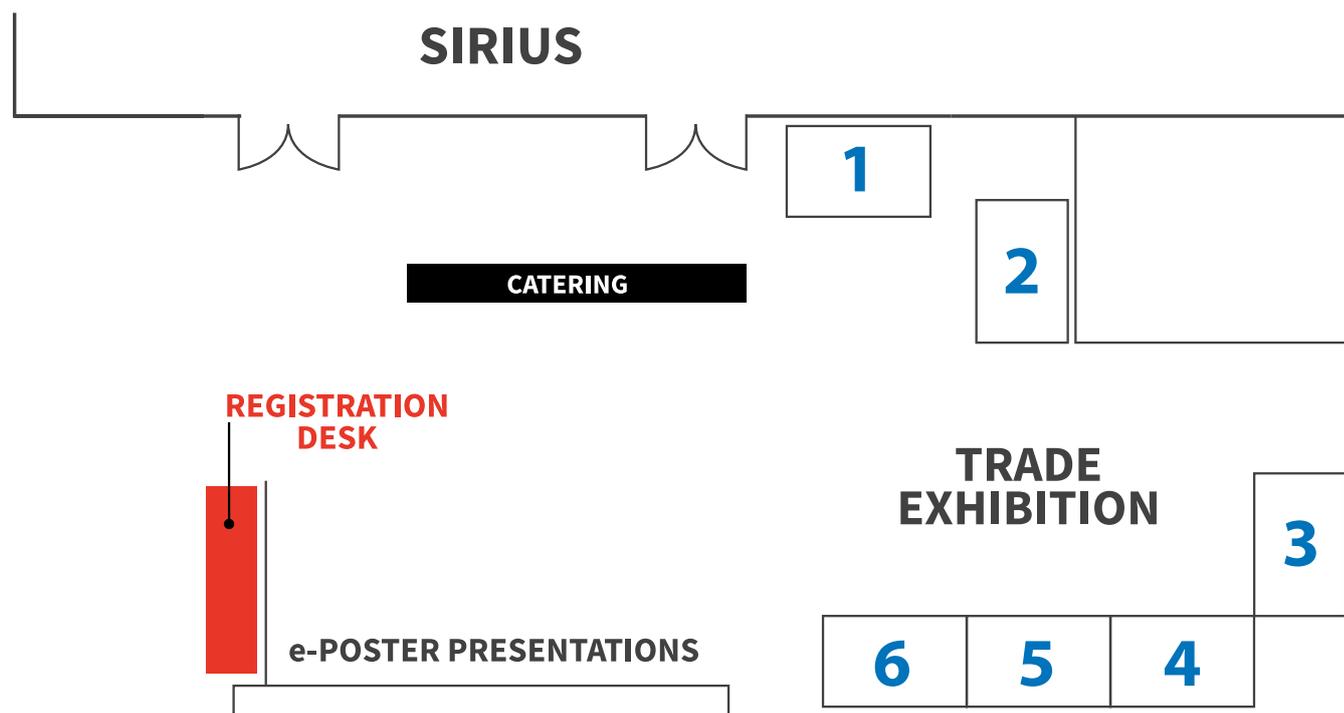
Regional
Training Hubs



WA Primary
Health Alliance
Better health, together

phn
PERTH NORTH, PERTH SOUTH,
COUNTRY WA
An Australian Government initiative

Exhibition floorplan



Exhibitors

- 1 WA Country Health Service
- 2 Mental Health Commission
- 3 Edith Cowan University
- 4 Neami National
- 5 HESTA
- 6 Rural Health West

We would like to take this opportunity to thank the conference exhibitors for their support

Venue floorplan

