

**SUICIDE PREVENTION:**

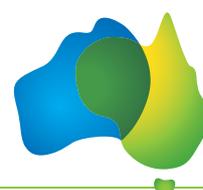
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# **A COMPETENCY FRAMEWORK**

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***June 2021***



**Suicide Prevention  
Australia**

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# Executive summary

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Attention on suicide and suicide prevention in Australia has never been as evidently needed as now. Suicide arises from a complex interaction between many vulnerabilities and risk factors. However, suicide can also be influenced by social and economic circumstances. Major system reform in Australia has highlighted the need for a whole-of-government response to suicide, co-created with people with a lived experience of suicide.

Suicide Prevention Australia is the national peak body for the suicide prevention sector. Our members include the largest and many of the smallest suicide prevention and mental health not-for-profits, practitioners, researchers, and leaders.

Suicide Prevention Australia, in collaboration with its members and stakeholders, have developed **Suicide Prevention: A competency framework** (the Framework) to enhance and build capacity, and capability of the non-clinical suicide prevention workforce to respond to people experiencing suicidal thoughts and behaviours. The Framework is informed by, and brings together, knowledge experts in workplace suicide prevention and suicide prevention training.

The Framework provides a starting point for employers and staff to consider what they need to know to promote wellbeing and intervene effectively to reduce distress and suicidal behaviour in their workplace. This document explores why a competency framework is needed, the evidence and Government policy that has informed the development of the Framework, and ways to adapt, tailor and apply the Framework to different working environments and roles.

The Framework identifies the minimum standard of suicide prevention and postvention knowledge, skills, attitudes, attributes, and values necessary for staff in their workplace. The Framework can be used by employers as a gap analysis to identify areas for improvement in the induction, education and training, and support and wellbeing of their staff.

The Framework promotes a compassionate and collaborative focus to reducing suicide risk in non-clinical workforces, and thereby the community. We are striving to ensure that every person who needs support can access a consistent, high-quality, and safe standard of care.

**“I would like the framework to be a starting point to breakdown fear of the unknown of how to speak to someone in a fragile mental health state. I hope this framework encourages people to act with kindness, hope, compassion and humanity.”**

*Amanda Tuffrey, Expert by Experience<sup>1</sup>*



# Introduction

Suicide Prevention Australia is committed to promoting and building the capacity of the sector to provide compassionate, high-quality, and sustainable suicide prevention and postvention initiatives.

Our vision at Suicide Prevention Australia is a world without suicide. We encourage evidence-informed actions that promote wellbeing, early and effective intervention to reduce distress and suicidal behaviour. This requires a collective effort from everyone in the Australian community.

For this reason, Suicide Prevention Australia emphasises the need to build workforce capacity in suicide prevention, beyond the bounds of the mental health sector and healthcare system. Internationally and nationally, it is increasingly recognised there is a need for a specific suicide prevention competency framework that addresses the knowledge, skills and attitudes and attributes of the diverse workforces in the suicide prevention sector. Workforces, and the broader community, need the support, tools and capability to reduce risk and distress, particularly as the first time a person discloses their distress is a critical moment.

**“There is also consideration needed to ensure resources are visible and applicable to a range of contexts. This includes workplaces and schools which were regarded in the research as being influential in shaping habits, experiences and behaviour that transcend into people’s lives more broadly.”**

**KPMG<sup>2</sup>**

## AN INTERNATIONAL APPROACH TO WORKPLACE SUICIDE PREVENTION

*A Report of Findings to Direct the Development of National Guidelines for Workplace Suicide Prevention<sup>3</sup>* (the Report) highlights that whilst many mental health and wellbeing programs exist in the workplace, the topic of suicide prevention is often neglected. Survey participants identified that workplace suicide prevention increases staff health and wellbeing (86%). Getting leader buy-in, lack of funding, and time were identified as the most cited barriers to integrating suicide prevention in the workplace.

To guide employers and workplaces embedding suicide prevention as a health and safety priority, the following nine practices are recommended:

- Leadership: cultivating a care culture focused on community wellbeing
- Job strain reduction: assess and address job strain and toxic work contributors
- Communication: increase awareness of understanding suicide and reduce fear of suicidal people
- Self-care orientation: self-screening and stress/crisis inoculation planning
- Training: build a stratified suicide prevention response program and specialised training by role
- Peer support and wellbeing ambassadors: informal and formal initiatives
- Mental health and crisis resources
- Mitigating risk: reduce access to lethal means and address legal issues
- Crisis response: accommodation, re-integration and postvention

## THE NATIONAL SUICIDE PREVENTION ADVISER

*The National Suicide Prevention Adviser – Final Advice (2020)*<sup>4</sup> (the Final Advice) provides a collection of resources from the National Suicide Prevention Adviser and Taskforce. It recommends that suicide prevention is a responsibility of all levels of government and all communities and enshrines the lived experience voice in every element of suicide prevention promotion, prevention, and early intervention.

The Final Advice identified workforce as a key enabler within system reform for a more connected and compassionate approach. All workforces that engage with people or communities experiencing distress and suicidal behaviour must have the capacity to provide a compassionate response, relevant to their role<sup>4</sup>.

Workforce development is recommended to prioritise evidence-informed and compassion-focused initiatives that improve the capacity and capability of all workforces involved in suicide prevention. People who are in distress interact with a wide array of workforces. It is imperative that we build the capability and capacity of our workforces to respond compassionately and provide warm referral to the right support.

**“People experiencing distress interact with workforces across various sectors, at different times and in different ways. Every contact that a person has with a department, service or individual worker is an opportunity to have a positive impact, ensuring they get the right supports at the right time.”**

**Christine Morgan**, National Suicide Prevention Adviser<sup>4</sup>

In recognition of the diverse workforces in suicide prevention, the Final Advice provides an example of the knowledge, skills, attitudes and attributes required.

### WORKFORCE CATEGORIES OF GOVERNMENT AND PUBLIC SECTOR AGENCIES AND COMPETENCIES REQUIRED



Figure 1 Workforce categories (National Suicide Prevention Adviser, 2020)<sup>4</sup>

## WHAT IS COMPETENCY?

A competency is defined as “the consistent application of knowledge and skill to the standard of performance required in the workplace. It embodies the ability to transfer and apply skills and knowledge to new situations and environments”<sup>5</sup>.

**“Competency, as a concept goes beyond the successful learning of standardised knowledge or skills – it embraces demonstrated application of this knowledge or skill in specific roles and situations.”**

*Hawgood et al., in press*<sup>6</sup>

## WHY COMPETENCIES IN SUICIDE PREVENTION?

Research highlights the criticality of compassionate offering of help to people in distress accessing appropriate and timely support. The pathway someone in distress follows is altered by the ability of others to respond appropriately to the first disclosure of distress or suicidal behaviour. Ensuring this is vital in preventing a future suicide attempt<sup>2</sup>.

**“Connect with me authentically; care, compassion, empathy, and being relatable are core requirements for anyone who helps me.”**

*KPMG*<sup>2</sup>

Suicide prevention training and education in all workplaces provides an opportunistic approach for promotion, prevention, and early intervention to a large population. Evidence highlighted that ‘gatekeeper’ training or short programs that are aimed at increasing the knowledge, skills and attitudes of people to identify potential suicidality, provide people with the ability to respond safely and supportively, and refer to appropriate services.

‘Gatekeeper’ programs are demonstrated to improve people’s knowledge, skills and confidence when responding to someone experiencing suicidal thoughts. However, without agreement around the competencies required in suicide prevention, it is difficult to effectively measure the impact of the different gatekeeper programs on reducing suicide rates<sup>6</sup>.

It is essential that suicide prevention initiatives in the workplace focus on reducing the stigma of suicidal behaviour. Similar attitudes about suicide and suicidal behaviour have the potential to inhibit helpful behaviours towards a person at risk<sup>8</sup>.

Suicide prevention has the potential to have a positive effect when integrated into existing workplace health and safety activities<sup>3</sup>. Building can create compassionate, safe, and supportive working environments, where staff and consumers, feel they can express distress without stigma and access the care they need.

**“Suicide prevention starts with recognising the warning signs and taking them seriously.... Encouraging these kinds of conversations is a powerful tool to reduce the fear and silence surrounding suicide and ultimately prevent deaths by suicide.”**

*Beyond Blue*<sup>7</sup>

## WHAT IS THE NON-CLINICAL WORKFORCE?

The non-clinical workforce refers to staff in any workforce or role involved in preventing suicidal behaviour and responding to individuals and communities affected by suicide.

The Framework will identify and bring together all the relevant knowledge, skills and values to work effectively in suicide prevention for non-clinical workforces.

The non-clinical workforce includes, but is not limited to:

- Lived Experience Network coordinators
- Peer Network, Consumer and Carer Coordinators
- Suicide prevention and postvention staff and volunteers
- Welfare and community sector settings, including housing services, justice, child protection and out-of-home services
- Education, including teachers and support staff in primary, secondary, and higher education
- Employers, senior managers, and human resource teams
- Organisations working with priority populations or populations and groups disproportionately affected by suicide
- Government agencies and service providers at life transitions and
- Community groups and sporting clubs
- Organisations and registered training providers that develop and deliver suicide prevention intervention or gatekeeper training

Whilst the focus of the Framework is non-clinical workforces, the knowledge, skills, and attributes highlighted here offer a guide for workforce development programs for diverse roles and experience.



# Suicide Prevention: A competency framework

The Framework identifies the gaps and areas of need that can inform workplace wellbeing, education, and training program development in diverse, non-clinical workforces. The following sections provide an overview of a competency framework for non-clinical workforces.

## A COMPETENCY FRAMEWORK METHODOLOGY

The methodology used in the development of the **Suicide Prevention: A competency framework** is highlighted in Figure 2 below.

A needs analysis was undertaken to review and map the current landscape of international, national, and state/jurisdictional mental health and suicide prevention training programs.

Two rounds of consultations with 54 member organisations and 80 participants explored and informed the domains, common and important content topics, identified gaps, and what level of knowledge and skills may be required for a particular role, in each sector/industry.



Figure 2 Suicide Prevention: A competency framework methodology

## A COMPETENCY FRAMEWORK FOR NON-CLINICAL WORKFORCES

The Framework builds on the evidence of ‘what works’ regarding the knowledge and skills required for workforces in suicide prevention across diverse settings. Participants in the consultation identified that a suicide prevention competency framework was overlooked in mental health and suicide prevention workforce development. That is, a competency framework was required in suicide prevention that brought together the experience of people with a lived experience of suicidal behaviour and best practice approaches to suicide prevention in workplaces, industry, and community.

The Framework provides a guide for staff induction and workforce development in suicide prevention. The Framework is intended to be applied to the specific needs of the role and workplace conditions. The Framework recommends the essential competencies for organisations and their staff to work safely and effectively to reduce suicidal behaviour.

Participants identified the core competencies required for non-clinical workforces in suicide prevention (see Figure 3 on the next page).

Figure 3 Suicide Prevention: A competency framework for non-clinical workforces

## CORE COMPETENCIES



### FOUR PRINCIPLES UNDERPINNING THE FRAMEWORK

**PARTICIPATION**



**RESPECT**



**EVERYONE HAS A ROLE IN SUICIDE PREVENTION**



**CONTINUOUS IMPROVEMENT**



## Participants in the consultation identified four principles that underpin the Framework:



- **Participation:** collaboration and sharing of knowledge that incorporates the voices of lived and living experience and all relevant experts and stakeholders.



- **Respect:** enhancing the respect and compassion for people experiencing suicidality through the provision of cultural humility and appropriate sensitivity.



- **Everyone has a role in suicide prevention:** suicide impacts the entire community. Suicidal thoughts and behaviours may be influenced by a range of social, economic, and personal factors, so employees in a range of roles and organisations may have contact with a person in suicidal distress and offer helpful responses.



- **Continuous improvement:** informed by a culture of continuous quality improvement and implementation of best practice suicide prevention.

The competencies are grouped in the following key domains:

### 1. Induction and continuous development

This domain focuses workplace requirements to actively promote, monitor, evaluate and improve the safety of individuals by tailoring of organisational policies and procedures.

This domain emphasises how to support team members in the first few days from orientation and induction into their new workplace and role, ideally continuing for the employment tenure.

This domain describes the skills and knowledge, the duty of care and legislative requirements for the management and application of ethical behaviour, and policies. This could include respecting difference, privacy, and confidentiality.

This also includes identifying and addressing protective and mitigating risk factors within the workplace for psychological injury and/or crisis.



### 2. Knowledge

The intent of this domain focuses on the individual's knowledge required to support someone in crisis.

This domain describes the skills and knowledge required for promotion of wellbeing and support; prevention of suicidal behaviour; and postvention for people affected by suicide.

These collections of competencies explore how to identify and recognise warning signs, protective and risk factors, responding and connecting to appropriate services and understanding self-care, self-compassion, and boundary setting.

### 3. Safe communication

The intent of this domain focuses on the individual's ability to effectively, communicate with compassion and safe language.

This domain describes communication skills which may include open and transparent conversation, deep listening, being present with the person, acknowledging and validating a person's circumstances and/or feelings, while offering support.

### 4. Collaborative support

The intent of this domain focuses on the conscious effort to engage in positive, trusting, and open relationships.

This domain describes engagement and communication within workplace teams. This includes active, respectful, and sensitive support that addresses the diverse needs of the person, with the ability to recognise power differentials, and act responsibly.

This domain explores how, where and who to escalate referral, whether internally within the workplace and/or external services.

# How to use the Framework

Suicide Prevention Australia encourages workplaces to apply the Framework to meet their specific needs. That is, the Framework provides a guide to workplace suicide prevention that is centred on continuous quality improvement. To develop such a culture, education and training is critical and requires a coordinated and proactive approach to build the capacity of the suicide prevention workforce across the key domains of the Framework.

It is recommended that a workplace embed the Framework through the following:

1. Utilise the Framework as a gap analysis for the specific roles of a workplace and identify areas for improvement in workplace suicide prevention.
2. Use this Framework to ensure that the organisational structures and the induction and training programs that they provide meet the competences for the specific roles.

3. Coaching, supervision, and human resource structures can incorporate the Framework to guide reflective practice.
4. Incorporate the competencies into policies and procedures and communicate them throughout the workplace.
5. Formal and informal support and referral pathways are communicated throughout the workplace.
6. Suicide prevention and postvention training providers consider how the Framework supports the development of training material.
7. Research utilises the Framework to evaluate the effectiveness of suicide prevention training in the workplace.

The application of this Framework is described further in Figure 4 below and on the next page. Each of the competencies include an example of tools and resources that can be utilised to address areas for improvement.

Figure 4 How to use the Framework.

HOW TO USE THE FRAMEWORK		
Key competency domain	Intent overview and application	Examples to build the capacity and capability of the competency
<b>Induction and Continuous Development</b>	<p>The intent of this domain focuses on the workplace, describing the continuous and sustainable workplace requirements to actively promote, monitor, evaluate and improve the safety of individuals by tailoring of organisational policies and procedures in suicide prevention as and when needed.</p> <p>This domain emphasises how to support team members in the first few days from orientation and induction into their new workplace and role, ideally continuing for the employment tenure.</p> <p>This domain describes the skills and knowledge required about the duty of care and legislative requirements for the management and application of ethical behaviour, and policies. This could include respecting difference, privacy, and confidentiality.</p> <p>This also includes identifying and addressing protective and mitigating risk factors within the workplace for psychological injury and/or crisis.</p>	<p>BeyondBlue: Heads up</p> <p>Batyr: batyr@work</p> <p>Everymind: Mindframe</p> <p>R U OK: Workplace Champion Guide</p> <p>Suicide Risk Assessment: How the workplace can contribute to suicide prevention</p> <p>Suicide Prevention for Leaders Legal and Ethical Aspects to Suicide Risk Assessment and Management</p> <p>SuperFriend: Indicators of a Thriving Workplace Building a Thriving Workplace</p> <p>StandBy – Support after Suicide: Workplace Toolkit</p>

Figure 4 How to use the Framework (cont.)

Key competency domain	Intent overview and application	Examples to build the capacity and capability of the competency
<b>Knowledge</b>	<p>The intent of this domain focuses on the individual's knowledge required to support someone in crisis.</p> <p>This domain describes the skills and knowledge required for promotion of wellbeing and support; prevention of suicidal behaviour; and postvention for people affected by suicide.</p> <p>These collections of competencies explore how to identify and recognise warning signs, protective and risk factors, responding and connecting to appropriate services and understanding self-care, self-compassion, and boundary setting.</p>	<p>AISRAP: Suicide Prevention Skills Training</p> <p>Anglicare WA: Accidental Counsellor</p> <p>Australian Men's Health Forum: Resources</p> <p>Black Dog Institute: QPR</p> <p>Blue Knot Foundation: Foundations for Building Trauma Awareness Talking about trauma</p> <p>Calm: The Voice of Education in Suicide Half Day Suicide Awareness Training</p> <p>Care for Life Suicide Prevention Network Inc: Bereavement Resources</p> <p>Centre for Rural and Remote Mental Health: Community Support Skills</p> <p>Everymind: The National Communication Charter</p> <p>Lifeline: Accidental Counsellor</p> <p>LivingWorks: Suicide Prevention Training</p> <p>MATES: General Awareness Training</p> <p>Mental Health First Aid Australia: Mental Health First Aid Standard</p> <p>Roses in the Ocean: SP Peer Workforce Training</p> <p>Rural and Remote Mental Health: Rural Minds</p> <p>Suicide Prevention Pathways: Talk Suicide Awareness</p> <p>Wesley Mission Lifeforce: Workplace Training</p>
<b>Safe Communication</b>	<p>The intent of this domain focuses on the individual's ability to effectively, communicate with compassion and safe language.</p> <p>This domain describes communication skills which may include open and transparent conversation, deep listening, being present with the person, importantly acknowledging and validating a person's circumstances and/or feelings, while offering support.</p>	<p>Everymind: Mindframe The National Communications Charter</p> <p>Lifeline South Coast: Psychological First Aid</p> <p>Livingworks: SafeTalk Training</p> <p>Mental Health First Aid Australia: Mental Health First Aid Standard</p> <p>Roses In The Ocean: Communications Guidance</p> <p>Suicide Prevention Pathways: Talk Suicide Intervention Skills Talk Suicide Intervention and Support Skills</p>
<b>Collaborative Support</b>	<p>The intent of this domain focuses on the conscious effort to engage in positive, trusting and open relationships.</p> <p>This domain describes engagement and communication within workplace teams. This includes active, respectful and sensitive support that addresses the diverse needs of the person, with the ability to recognise power differentials, and act responsibly.</p> <p>This domain explores how, where and who to escalate referral, whether internally within the workplace and/or external services.</p>	<p>Beyond Blue: Heads Up</p> <p>Black Dog Institute: Suicide Prevention Implementation</p> <p>Roses in the Ocean: Co-design</p> <p>StandBy – Support after Suicide: Workplace Toolkit</p>

The above list has examples to build the capacity and capability of the competency is provided as a guide and may not represent an extensive list of training and resources for the key domain.

# Conclusion and next steps

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The Framework provides a starting point for employers and staff to consider what they need to know to promote wellbeing and to intervene effectively to reduce distress and suicidal behaviour.

The Framework provides a guide for the induction and workforce development in suicide prevention. The Framework is intended to be applied to the specific needs of the role and workplace conditions. It suggests the essential competencies for organisations and their staff to work safely and effectively to reduce suicidal behaviour.

Whilst the focus of the Framework is non-clinical workforces, the knowledge, skills, and attributes highlighted offer a guide for workforce development programs for diverse roles and experience.

The 'next steps' to build the capacity and capability of the suicide prevention workforce are to:

- Extend this work to include the clinical workforce.
- Develop a continuous development program utilising the architecture of the Framework.
- Introduce a suicide prevention workforce community of practice.
- Advocate for the embedding of suicide prevention competencies in suicide prevention training.
- Encourage suicide prevention training providers to acquire accreditation with the Suicide Prevention Australia Standards for Quality Improvement.

Suicide Prevention Australia's **Suicide Prevention: A competency framework** promotes a compassionate and collaborative focus to reducing suicide risk in non-clinical workforces, and thereby the community. We are striving to ensure that every person who needs support can access a consistent, high-quality, and safe standard of care.



**Together, working towards our ambition of a world without suicide.**

# Acknowledgements

Suicide Prevention Australia acknowledges and thanks the following participating organisations who have contributed to the development of **Suicide Prevention: A competency framework**.

AISRAP	NEAMI WA
Alan Woodward - NMHC Commissioner, National SP Taskforce Co-chair	Northern Beaches Local Council
Beyond Blue	NSW MH Commissioner, Co-Chair NMHCCF, Co-Chair, NMHC Peer Support worker practice guidelines initiative
Black Dog Institute	Parent's Beyond break up
Blue Knot Foundation	Relationships Australia
CEO Community College (formerly Vocation Skills Board member)	Roses In The Ocean
Everymind	RUOK?
Former Lifeline GM	SANE Australia
Illawarra Shoalhaven LHD	Suicide Prevention Australia
LGBTIQA+ Health Alliance	SuperFriend
Lifeline Australia	University of Melbourne
LivingWorks	University of New England
MATES	University of South Australia
Mental Health First Aid Australia	Victorian Department of Human Services
Mental Health Victoria	WA Mental Health Commission
Mental Health Victoria (NDIS Workforce capability standards development)	Wesley LifeForce Mission
National Mental Health Commission, and The Director, National Workforce Initiative	Young Lives Matter

## Further Information:

Attention: Quality Systems and Practice | [admin@suicidepreventionaust.org](mailto:admin@suicidepreventionaust.org)

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