

Development of a practical, online, suicide prevention course for general practitioners in the South West



‘Every hospital or group of doctors should have research. Research directly benefits hospitals. Young doctors, registrars and interns should be encouraged to work on projects. Advancement results from everyone looking at their work critically, following up ideas and sharing them with other people.’

- Dr Val Lishman

SOME KEY PAST PROJECTS

Ross River Virus survey (2007)

Enhancing cancer services (2007)

Open disclosure project (2009)

Systematic discovery of familial

hypercholesterolemia study (2014)

NOW & THE FUTURE

- Investigating ways to help regional families who have a child with autism (Ends June 2018)
- Looking for more effective ways to detect gestational diabetes (Ends Dec 2017)
- Identifying ways to improve the care of people at the end of their life (2017-2019)
- Researching the high rate of methamphetamine use locally (2017)
- Reducing the stress faced by young doctors by teaching them the practice of mindfulness (2017)

These projects incorporate both small projects (up to \$10,000 over 12 months) and larger projects (c. \$100,000+ and multi years)

In February 2012 the then named Val Lishman Health Research Foundation (VLHRF) approached Professor Cobie Rudd at Edith Cowan University with a research idea.

The VLHRF had become aware of Professor Rudd's ground-breaking work in simulation research, and the application of this learning modality to mental health, and specifically her award of the first Australian Fellowship in simulation from the Australian Learning and Teaching Council. Her final report was titled; *Enhancing the uptake of learning through simulation in health*.

The first meeting with Emeritus Professor Adrian Egan, Manager of Research at VLHRF and colleagues was the catalyst to a very successful research collaboration to deliver an on-line suicide prevention course for GPs in the South West.

**LIFE in the South West of Western
Australia: A study of existing
suicide prevention services**

January 2011

VLHRF commissioned assessment of South West front-line services

Results for GPs

- Limited understanding of suicide (<50% could name risk factors for suicide)
- Limited understanding of roles and responsibilities (8% rated interprofessional collaboration as effective)
- Limited professional development (75% had undertaken no related PD in past 3 years)

SW Mental Health Network anecdotes

- clients often raising mental health issues at the very end of a 15-minute consultation
- clients with suicide ideation often identified on Friday afternoons when most services become unavailable
- a young client not wishing to disclose suicidal thoughts in front of her parents
- a GP being stuck for a suitable service to which she could refer her client
- allied health professional alerting GP to a client's suicidal ideation, GP grateful and takes over responsibility but does not inform allied health professional of outcomes
- a depressed nurse being advised to read her text-books

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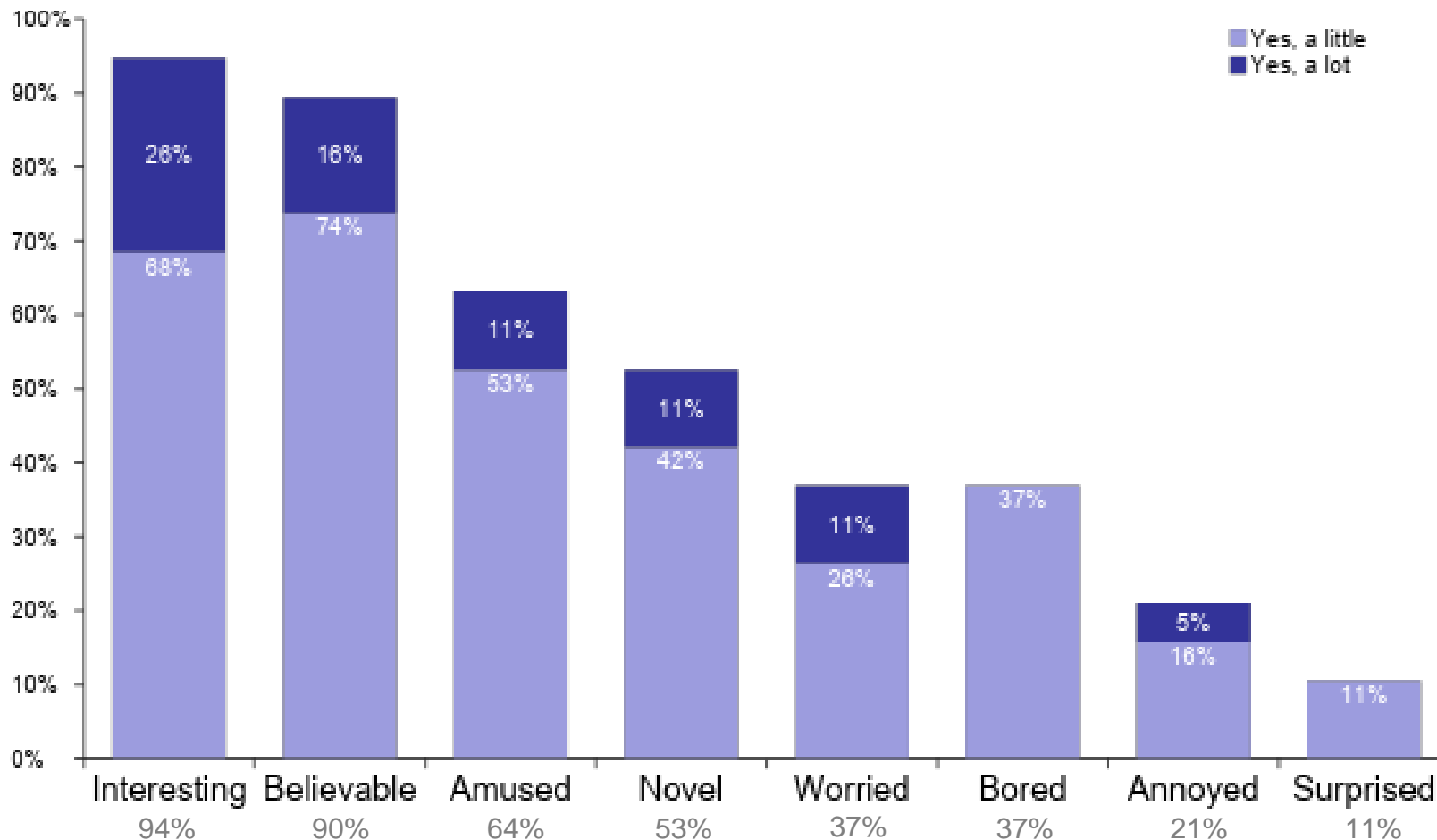
- Draft 1 – amalgam of anecdotes into 3 scripts incorporating 9 themes
- Draft 2 – psychiatrist input (Perth)
- Draft 3 – GP interprofessional expert input (UQ)
- Draft 4 – Producer/professional script writer input (media@work)
- Draft 5 – PAC input
- Draft 6 – testing with southwest GPs
- Draft 7 – final draft(s) with input from producer/script writer

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‘Nurse’ Animatic example

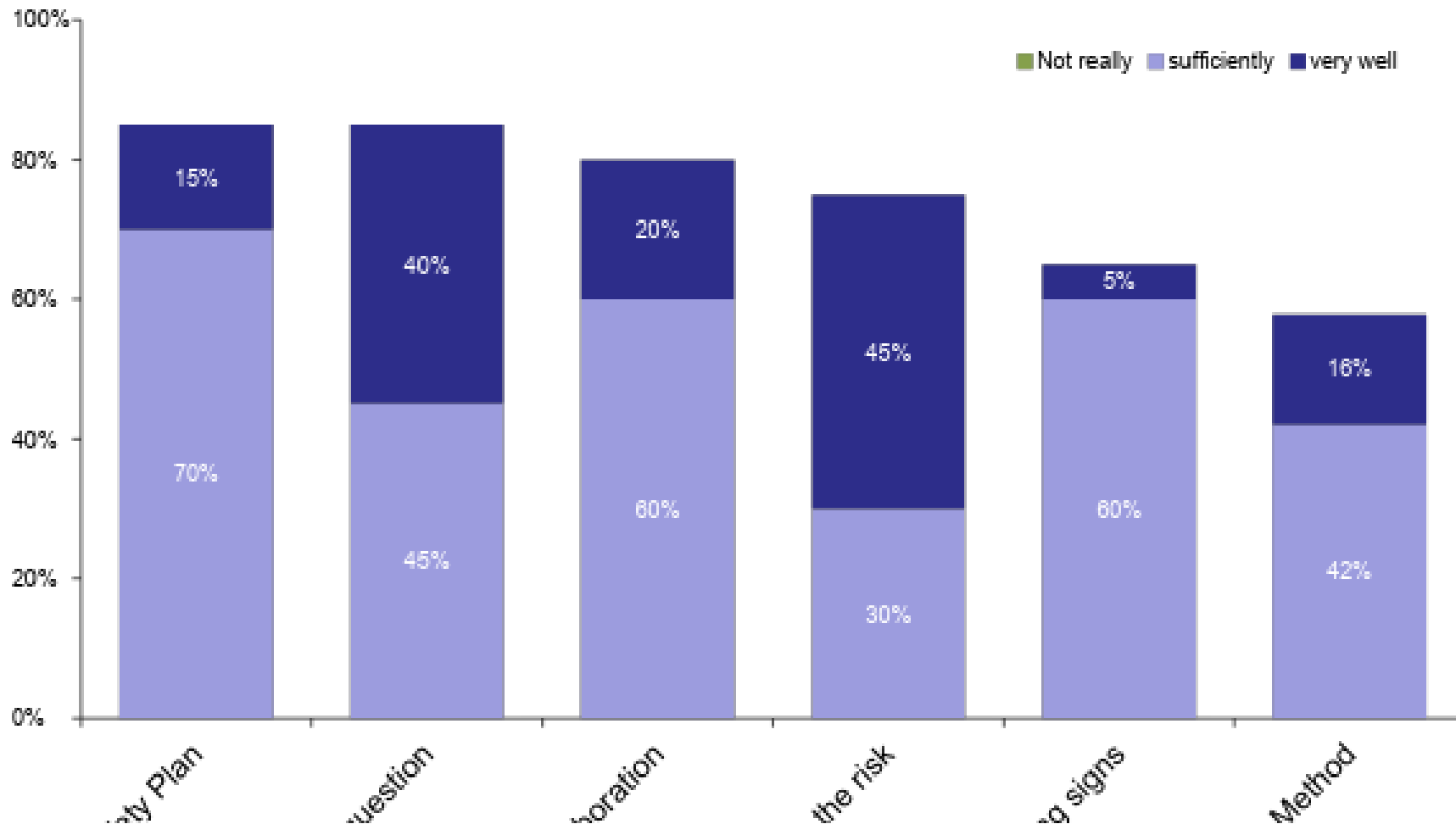


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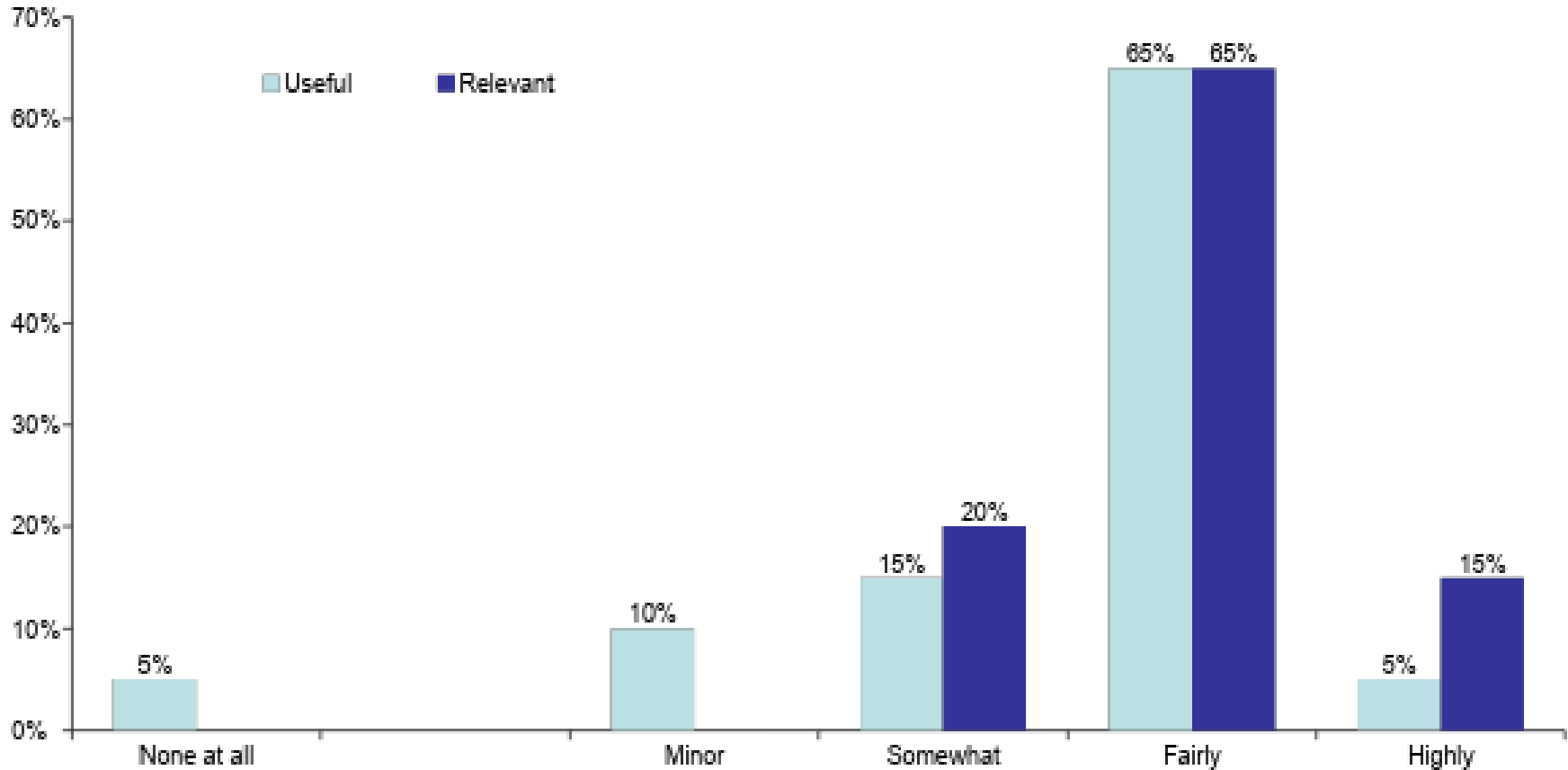
Agreement with the following descriptors about the scripts

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Extent to which scripts covered various aspects

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Overall usefulness and relevance to GPs

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Videos

- Format good
- Realistic scenarios
- Too much emphasis on risk identification and 'asking the question'
- GPs more interested to know the steps afterwards

Gatekeeper Course structure

- 2-day course too long
- presents GP referral as treatment endpoint

Wish list

- Main emphasis on action plan (treatment)
- Legal obligations and responsibilities
- Available local services
- 40 Cat1 points (4–6 hours)

Open-ended discussion

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- Focus group results suggest GPs more sophisticated than English and Devereux (2011) report implied
- Video scripts performed well for what they were designed but had wrong goals in mind
- GPs less interested in risk factors and ‘asking the question’ and more about ‘what to do next’

Proposed course structure – Dr Bryan Tanney (LivingWorks)

- Pretest module
 - quick, brief and with case component to ensure baseline knowledge of ‘warning signs’ and basic epidemiology

} large component of most courses
- Diagnosis of suicide risk, considering five contributing domains:
 - biological
 - cognitive
 - emotional
 - behavioural
 - environmental

} bio-psycho-social risk assessment
- Treatment as appropriate, considering:
 - availability
 - accessibility
 - acceptability
 - efficacy
 - timeliness

} GP pragmatic ‘what next’
- Measurement – has treatment diminished risk?
 - } no assessment scale with validated cutoff score but good scales for single risk factors

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- Evaluation of resultant resource:
 - *“The videos were really great, with the examples they really showed how things are.”*
 - *“The interactions seemed quite genuine and less contrived than what I’m used to. I liked the variation that was allowed within them. They basically treated the patients like intelligent people.”*
 - *“Some of the questions were really easy, but some of the others you had to really think about each option.”*
 - *“Some of the materials were designed in a way that you might jump to the obvious conclusion or answer but it became apparent that this might not be the right way to go about things.”*
 - *“I think I’ll be looking back at these in the future and thinking about my patients and how they might be similar to the patients from the videos.”*
 - *“It’s particularly relevant to GPs...”*
 - *“How to ask certain things and to approach the topic of suicide, and even just management of a person that is high risk, knowing what to do with them immediately.”*
 - *“It gave me a better idea of how to approach the situation which was really useful.”*

- Suicide Prevention Modules