NICRS Model of Care

The National Indigenous Critical Response Service is a postvention support service. Postvention is defined by the World Health Organisation as:

‘Intervention efforts for individuals bereaved or affected by suicide [that] are implemented in order to support the grieving process and reduce the possibility of imitative suicidal behaviour.’

The NICRS Model of Care is an Aboriginal and Torres Strait Islander led model of care, based on the emerging literature relating to good practice, and the practice wisdom of our Aboriginal and Torres Strait Islander staff. This work builds on the knowledge and experience gained in delivering support to families in the UWA Critical Response Pilot Project.

NICRS defines Postvention Throughcare as:

Provision of coordinated and culturally responsive support to individuals and families affected by suicide or other trauma.

On the invitation of individuals or families, we work to enable families to access social and emotional wellbeing services to support them in their journey of healing and over time live safe and meaningful lives in the context of urban and remote settings. Simultaneously we work with the Traditional Owners, local communities and service providers to ensure individuals and families are well supported.

We regularly review our clients’ and families’ needs, modifying the throughcare plan as required as we continue to support their journey of healing.

Our model of care is illustrated in Figure 1 on the following page and discussed in the following pages.

Journey of healing

The journey of healing when a suicide occurs is illustrated at the top of Figure 1 in turquoise. NICRS staff are cognisant of the need to respond flexibly and be respectful of local cultural protocols and practices related to mourning or “sorry business”.

Whilst every attempt is made to respond as quickly as possible on the notification of a death, the timing of our response has regard to local cultural protocols, and the need to allow families to “process” the sudden passing of a loved one.

Our approach to supporting individuals, families and communities affected by suicide or other trauma seeks to strengthen the social and emotional wellbeing (SEWB) of those affected to build resilience and support healing detailed in Appendix 1. The roles our Critical Response Support Advocates (CRSAs) may play in supporting children, young people, individuals, families and communities are detailed in Appendix 2.
Response assessment process
We have a four step Response Assessment Process that guides our assessment to determine whether NICRS provides support or if it is more appropriate for local agencies to respond. This process involves:

**Step 1:** Receiving notification of incident

**Step 2:** Verification of the person(s) who have died or are seriously injured

**Step 3:** Collecting detailed information about the incident and obtaining client/family consent to explore how local services can assist and who is best placed to provide the assistance

**Step 4:** Explore with local services their engagement with the family and their capacity to respond and the appropriateness of NICRS responding

Assess individual and family needs
On the invitation of an individual or family, we visit and talk with those affected to identify their social and emotional wellbeing needs. Based on the needs identified, we develop a throughcare support plan to strengthen individual and/or families social and emotional wellbeing to support their journey of healing.

In this stage (Step 5) we access individual’s and families’ needs to strengthen their:
- Emotional health
- Cultural and spiritual health
- Physical health, and
- Social, family and community health

Develop a throughcare support plan
In developing a throughcare support plan (Step 6) we talk with individuals and families about the services and supports available locally to assist them and what their priorities are.

We see our role is one of supporting individuals and families on their healing journey, and accordingly we develop a throughcare plan to meet their needs. In doing so, with the client’s consent we liaise with local service providers and engage them in the development of a coordinated throughcare plan.

Implementing the throughcare support plan

Working in a coordinated way with local service providers we work to implement the throughcare support plan (Step 7). Many of the services and supports needed by families require local services or government agencies to respond to the needs of families.

NICRS plays a key role in providing emotional support, in coordinating care, and in advocating to ensure the services and supports are provided in a timely way.

Initially a contact visit with those we are supporting may be on a daily basis, then weekly basis, and generally over time the frequency between contact decreases as the family becomes stronger, their resilience increases, and it is considered safe for us to slowly withdraw our support.

Whilst NICRS slowly withholds over time, we hope the relationships with local agencies providing supports are strengthened, so that families have someone in their local community they can always contact as their needs may arise.

Reviewing individual and family needs

We review the needs of individuals and families at three-month intervals, to check they are receiving the services they need, and refine the throughcare support plan to address new and emerging needs.

Our clients often have complex needs and experience has identified the risk that they or the local service providers may disengage. We check in with clients at regular intervals to see how they are travelling and have the supports they need. If they are not comfortable with the services being provided we may liaise with the services providers to discuss the clients concerns and explore how these can be addressed. Similarly, if service providers need secondary consultation support in working with the clients, we are happy to provide this assistance.
Step Back
Our work is about building individuals and families resilience and supporting them on their healing journey.

From the beginning, in developing throughcare support plans, we envisage:
• what will be needed over time for our clients to live safe and meaningful lives, and
• at a point in the future, the need for our input will decrease as our clients become stronger and more resilient.

Step 8 involves NICRS stepping back.

As part of our three-monthly reviews we consider whether it is timely for the NICRS to foster greater independence as we see increased resilience in those we support, and our clients develop strong support systems with family, friends and local service providers.

While we may close a file, our service is always available when families need assistance. However, we hope our work with clients and local services assists the development of strong ongoing relationships, so in the future clients have local supports they can call upon as required.
Figure 1: NICRS Model of Care

- **Death to suicide or another traumatic incident**
- **Cultural Protocols**
  - Sorry Camp
  - Family arrivals
  - Funeral & burial arrangements
  - Mourning

**“Time out buffer” to allow individuals and families to adjust after notification of sudden death**

**Bereaved**

**Indicators and families journey of grief & healing to live a safe and meaningful life.**

**RESPONSE ASSESSMENT** – Guides if NICRS provide support or local agencies respond
- **STEP 1:** Notification
- **STEP 2:** Verification
- **STEP 3:** Collect detailed information about the incident and obtain client/family consent to explore who is best placed to assist
- **STEP 4:** Explore engagement and capacity of local services to response and appropriateness for NICRS to respond

**STEP 5: IDENTIFY NEEDS OF INDIVIDUALS AND FAMILY**
- Consider social & emotional wellbeing needs to strengthen:
  - Emotional health
  - Cultural and spiritual health
  - Physical health
  - Social, family and community health

**STEP 6: DEVELOP A THROUGHCARE SUPPORT PLAN**

**STEP 7: IMPLEMENT THROUGHCARE SUPPORT PLAN** for individuals & families in accord in partnership with local services

**STEP 8: STEP BACK**

**Review individual and family needs (3 monthly)**
Attachment 1: Strengthening Social and Emotional Wellbeing Framework

Our approach to working with individuals, families and communities affected by suicide seeks to strengthen the social and emotional wellbeing (SEWB) of those affected by suicide to build resilience and support healing.

While our service is not a healing service or a counselling service, the service is committed to working with individuals, families and communities in ways that facilitate healing. This may involve referring clients to Traditional Healers or healing services or incorporating healing approaches in the work we do with communities.

The framework for the role of CRSA articulated in this section and illustrated in Figure 1 was developed to articulate the roles SEWB counsellors play in strengthening individuals, families and communities wellbeing as part of the Developmental Review of the Social and Emotional Wellbeing Counselling Services for the Department of Health and Ageing in 2013. The framework was based on elements of good practice identified in the literature, the practice wisdom identified through undertaking extensive consultations nationally with SEWB clinicians and workers, and case studies of their model of care and consultations with people from the Stolen Generations.

We believe the framework has equal applicability to CRSA roles.

The key elements of the framework emphasise the importance of:

- Aboriginal and Torres Strait Islander culture
- healing processes
- a holistic approach to service provision, that focusses on strengthening cultural and spiritual health, emotional health, physical health, and social, family and community health
- responsiveness to local needs, and
- working with the local environment.

Aboriginal and Torres Strait Islander culture

Restoring connections to Aboriginal and Torres Strait Islander culture and strengthening social and emotional wellbeing is at the core of working with people who have been affected by trauma.

Our approach will be respectful of local culture and supports clients, families and communities to connect and draw upon their culture and reconnect with their cultural identity as required and where possible. The ways in which CRSA’s work with individuals, groups and communities may include drawing on local culture and incorporating cultural activities (including arts, music, fishing, traditional crafts etc.) as a way of supporting people to connect with culture, land, spirituality and their ancestors. Or alternatively, they may link individuals and families with people, groups or services that can support people reconnect with their cultural identity.

Healing processes

The Healing Foundation defines healing as:

- an ongoing journey to restore and sustain holistic wellbeing including physical, social, economic, emotional and spiritual wellbeing
- led by Aboriginal and Torres Strait Islander people, with and for their own communities
- founded in an Aboriginal and Torres Strait Islander worldview and strengthens cultures, and
- empowers individuals and communities to overcome trauma and its causes as well as its symptoms.

Healing is described in Voices from the Campfire in the following ways:

“Healing is also about personal renewal. It is about choosing to address individual trauma in an effort to purify the spirit by letting go of anger, shame and grief and being able to finally accept one’s experience and feel hopeful about the future”
"Healing is strengthening and connecting with your identity. It is about knowing where you belong and who you belong to, and the restoration of, and reconnection with, families, communities, and country. Healing is the renewal of language and culture: dance, story, music, art, identity and land."

“Healing is about the future. It is about looking forward and enabling cultural traditions to evolve in order to keep them strong and sustainable for future generations.”

In working with individuals and families we will link them with people and services who can support their healing. In our capacity building approaches, we incorporate healing processes where considered appropriate by the communities we are working with.

**Holistic approach**

Strengthening social and emotional wellbeing requires a holistic approach involving:

- working across the four domains of strengthening:
  - cultural and spiritual health
  - social family and community health
  - emotional health, and
  - physical health, and
- working at a range of levels including individuals, families and communities.

In supporting individuals and families who have been affected by suicide CRSAs will take a holistic approach and will work with people to support them strengthen their social, emotional, physical, cultural and spiritual health by referring to services, Elders, Traditional Healers, and community groups as appropriate.

**Responsiveness to need**

Mechanisms need to be in place to support the engagement of communities and clients in the design and development of our program.

Our CRSAs when working with individuals, families and communities will have the highest regard as to the ways in which we can respond to their needs.

**Figure 1: Roles of CRSAs in strengthening social and emotional wellbeing**

**Working with the environment**

It is essential our CRSAs have regard for the environment in which they are providing services and work with those in that environment to strengthen social and emotional wellbeing. This involves:

- ensuring our approach is well connected with local services, Elders, community leaders, Traditional Healers and community groups who are able to:
  - support the delivery of holistic and coordinated care, and
  - work with us to address the social determinants of health, and
- ensuring the working environment of CRSAs is supportive by providing strong professional and cultural supervision systems to support our CRSAs health and wellbeing.
## Attachment 2: Roles of CRSA’s in providing Postvention Support and strengthening SEWB

<table>
<thead>
<tr>
<th>Context</th>
<th>Postvention support</th>
<th>DOMAINS</th>
<th>Social and Emotional Wellbeing (SEWB)</th>
<th>Strengthen cultural and spiritual health</th>
<th>Strengthen emotional health</th>
<th>Strengthen physical health</th>
<th>Strengthen social, family and community health</th>
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</table>
| Children 3-12 years old | Make referrals to:  
- child psychologists and psychiatrists  
- mental health professionals  
- social workers  
Link children with services to help them communicate their feelings and grief.  
Link parents with services to assist them support their children in their grief and loss.  
Link with staff at children’s kindergarten or school to explore how they perceive the children are dealing with their grief. | Identify and establish cultural mentoring relationships with role models who can advocate and support the children.  
Use the arts where appropriate as a way for children to express their grief and loss and connect them to their culture. | Provide support to carers on ways of providing emotional support to their children to deal with their grief and loss.  
Creating a safe space for children to communicate their emotions.  
Teach children and parents coping strategies so they can learn to regulate their emotions.  
Refer to services so children are not left behind - they can suffer from post-traumatic stress disorder (PTSD) if issues are not recognised at the time.  
Explain to children the events that have occurred using appropriate and age-specific language.  
Talk to children about other issues that may be affecting their emotional health such as bullying. | Make referrals to a range of services to strengthen physical health including:  
- local GPs or health nurses at the Aboriginal and Community Controlled Health Service (ACCHS)  
- maternal and child health care workers | Make referrals to narrative therapists. |
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<th>Context</th>
<th>Postvention support</th>
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<td><strong>Young People</strong></td>
<td><strong>Make referrals to services to strengthen mental and emotional health including:</strong></td>
<td><strong>Strengthen cultural and spiritual health</strong></td>
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<tr>
<td>13-25 years old</td>
<td>- youth based counselling services</td>
<td><strong>Identify and establish cultural mentoring relationships with role models who can advocate and support them.</strong></td>
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<td>- mental health professionals</td>
<td><strong>Support young people express their grief and loss.</strong></td>
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<td>- social workers</td>
<td><strong>Listen to young people and provide emotional support and build their capacity to articulate what they need to be supported.</strong></td>
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<td>- youth workers</td>
<td><strong>Consider the additional support required if young people have been in out of home care or have been through the juvenile system.</strong></td>
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<td>Link with the young person’s school teacher, principal and counsellor to check on how they are dealing with their grief at school.</td>
<td><strong>Make referrals to range of services to strengthen physical health including:</strong></td>
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<td>- local GPs</td>
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<td>- health nurses at the ACCHS</td>
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<td><strong>Make referrals to narrative therapists.</strong></td>
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<td><strong>Work with young people to support their access to education and employment opportunities.</strong></td>
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<td>Context</td>
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<td>Individuals</td>
<td>Make referrals to services to strengthen mental and emotional health including:</td>
<td>Allow individuals to express themselves freely acknowledging their grief and loss.</td>
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<td>• counselling services</td>
<td>Be there to listen to people and provide emotional support and validate the pain people are feeling.</td>
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<td>• mental health professionals</td>
<td>Sit in silence and be present in the moment with people using Dadirri techniques (Inner Deep Listening and Quiet Still Awareness).</td>
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<td>• social workers.</td>
<td>Building up people’s spirits or resilience by encouraging people to identify ways they can remain strong, build networks of support, and creatively harness the emotions/energies they are experiencing.</td>
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<td>Link individuals to a range of support services to meet their needs.</td>
<td>Encourage and make warm referrals of clients to counselling services as required including:</td>
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<td>Provide linkages to legal services when clients have concerns relating to:</td>
<td>• social and emotional wellbeing counselling teams</td>
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<td>• coronial processes</td>
<td>• mental health workers</td>
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<td>• issues related to custody</td>
<td>Make referrals to local Aboriginal and Torres Strait Islander healing services.</td>
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<td>• whether foul play has occurred</td>
<td>Building the capacity of individuals so that they can eventually articulate what they need.</td>
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<td>Organise emergency relief to address immediate issues that are causing stress.</td>
<td>Support people to find spaces that allow them to feel calm or reflect.</td>
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<td>Talk with the client about the cultural practices and beliefs important to them in their time of grief and any cultural protocols that must be observed and incorporated.</td>
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<td>Identify and establish cultural mentoring relationships with clients who can advocate and support individuals.</td>
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<td>Develop safety plans with the client and their mentor.</td>
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<td>Encourage engagement with Traditional Healers as appropriate.</td>
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<td>Supporting people to return to country to address cultural and spiritual needs.</td>
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| Families| Make referrals to services to strengthen mental and emotional health including: • counselling services • mental health professionals • social workers • SEWB counselling program  
Linking individuals to a range of other support services.  
Provide linkages to legal services when clients have concerns relating to: • coronial processes • issues related to custody • issues of foul play (e.g. suspicion of murder)  
Being supportive in balancing family tensions, if and as required. Where there is conflict between family members, refer to services who can assist in resolve the tensions. | Social and Emotional Wellbeing (SEWB)       | Strengthen cultural and spiritual health  
Talk with families about the cultural practices and beliefs important to them in their time of grief and any cultural protocols that must be observed  
Each family member will have their own individual needs so there can be no prescription, and it is important to work with both the individuals and family.  
Encourage engagement with Traditional Healers as appropriate.  
Encourage and support yarning circles. | Strengthen emotional health  
Allow families to talk and cry – to express themselves freely acknowledging the grief and loss.  
Give families’ a safe and secure emotional space to speak freely about their grief and loss.  
Sit in silence and be present in the moment with families using Dadirri techniques (Inner Deep Listening and Quiet Still Awareness).  
Be culturally responsive, flexible and adaptable to the particular needs of each family.  
Build the capacity of families so that they can articulate their needs directly to services.  
Be on the journey with each family member. | Strengthen physical health  
Make referrals to range of services to strengthen physical health including: • local GPs or • health nurses at the ACCHS | Strengthen social, family and community health  
Encourage participation in family and community activities.  
Make referrals to narrative therapists.  
Refer to family counsellers who can support maintenance or restoration of family relationships. |
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<td>Strengthen physical health</td>
<td>• local GPs or health nurses at the ACCHS</td>
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<td>Make referrals to services to strengthen mental and emotional health including:</td>
<td>Work in accord with the kinship systems and</td>
<td>Work in inclusive ways of people with a</td>
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<td>• counselling services</td>
<td>have regard to being inclusive of</td>
<td>mental or physical disability or those</td>
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<td>• mental health professionals</td>
<td>grandparents.</td>
<td>who identify as LGBTQI.</td>
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<td>• social workers</td>
<td>Work with the Elders and Community Leaders</td>
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<td>in the community to respond to cultural and</td>
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<td>spiritual needs.</td>
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<td>Engage local counsellors and mental health</td>
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