



The Department for Child Protection Suicide Prevention Action Plan 2026 – 2029



Government
of South Australia

Department for
Child Protection



A message from the Department for Child Protection Chief Executive

The South Australian Suicide Prevention Plan 2023-2026 was launched in July 2023 by Preventive Health SA with the vision to create compassionate, resilient and connected communities that support wellbeing and prevent suicide in South Australia.

Under the *Suicide Prevention Act 2021 (SA)*, the Department for Child Protection (DCP) is one of ten prescribed agencies required to design, develop and implement an Action Plan.

I am pleased to present the DCP Suicide Prevention Action Plan 2026 – 2029 (Action Plan).

The Action Plan recognises that families involved with the child protection system and the carers and staff who support them are disproportionately impacted by suicide. The Action Plan sets out the practical measures identified by people with lived and living experience that can help us better respond to the needs of staff, carers, infants, children and young people. This includes specific interventions and approaches that prioritise suicide prevention, early intervention, aftercare and support.

The Action Plan has been developed following a comprehensive review of the department's policies, procedures and resources, as well as consultation with those connected to the out-of-home care system across South Australia who have with lived and living experience of suicide related distress.

I gratefully acknowledge the DCP staff, representative bodies, carers and young people with a care experience who generously gave their time to share their narratives, wisdom and living and lived experience to inform the Action Plan's development.

Jackie Bray
Chief Executive
Department for Child Protection

Acknowledgement of Country

We acknowledge the South Australian child protection system operates across many Aboriginal lands. We acknowledge and respect Aboriginal people as the state's First People and Nations and recognise Aboriginal people as Traditional Owners and occupants of lands and waters in South Australia.



The Journey, by artist Gabriel Stengle.

Lived and living experience

The department would like to acknowledge people with a lived and living experience of suicide. We acknowledge those who have experienced suicidal thoughts, survived a suicide attempt, cared for someone through suicidal crisis, or have been bereaved by suicide. The department also acknowledges those who are impacted by suicide in community or through their line of work.

Aboriginal people are disproportionately impacted by suicide, including suicide related distress, loss and bereavement. Their lived and living experience encompasses the ongoing impacts of intergenerational trauma and its effects on holistic wellbeing, which includes the cultural, spiritual, physical, social, and emotional wellbeing of the individual, family, and community.

We also recognise the added cultural load and challenges Aboriginal employees face due to working in a system where Aboriginal infants, children, young people are over-represented.

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If you need help

If you or someone you know are having thoughts of suicide, please seek help.

South Australian Mental Health Triage

13 14 65

24/7 assistance in a mental health emergency

Lifeline

13 11 14

24/7 phone crisis response, and online crisis support chat available each evening

13 YARN

13 91 76

24/7 phone crisis support for Aboriginal and Torres Strait Islander People

Kids' Helpline

1800 551 800

24/7 phone and online counselling for youth 5 – 25 years

kidshelpline.com.au

MensLine Australia

1300 789 978

24/7 advice, therapy and support for men with family and relationship concerns

mensline.org.au

Beyond Blue

1300 224 636

24/7 telephone, online and email counselling

beyondblue.org.au

Lived Experience Telephone Support Service

1800 013 755

Non crisis support for mental health conditions between 5pm – 11:30pm 365 days a year

Letss.org.au

Thirrili National Indigenous Postvention Service

1800 805 801

24/7 telephone support

thirrili.com.au/nips

Grieflink

Online information for people who are dealing with a grief caused by the death of someone close to them, and for those who are supporting them

grieflink.org.au

Regional Access

1300 032 186

24/7 telephone and online counselling for people 15 years and older living or working in regional South Australia

saregionalaccess.org.au

QLife

1800 011 046

Online chat or phone counselling for lesbian, gay, bisexual, transgender and intersex people, 3pm – midnight, 7 days a week

qlife.org.au

Suicide Call Back Service

1300 659 467

National 24/7 professional telephone and online counselling for anyone affected by suicide

suicidecallbackservice.org.au

StandBy – Support after Suicide

1300 727 247

24/7 support for anyone bereaved or impacted by suicide

Standbysupport.com.au

About DCP

The Department for Child Protection (DCP) was formed in November 2016 in response to recommendations from the Child Protection Systems Royal Commission, led by the Honourable Margaret Nyland AM.

We work in partnership with families, government and non-government organisations, carers and the community to care for and protect vulnerable children and young people by addressing harm and keeping them safe.

Where children and young people cannot stay safely in the family home, we will find a place for them to live, preferably with members of their family and kinship networks, or with foster carers.

We aim to give young South Australians in our care every opportunity to reach their full potential. We are committed to privileging the voices of children and young people so they are more meaningfully and appropriately involved when decisions are made about their care.

We have offices across South Australia, from as far west as Ceduna, to Coober Pedy and the APY Lands in the north, Berri in the east, and Mount Gambier in the south. Our offices are generally located within a town centre and service the wider regions.

Our responsibilities

The department administers the following legislation:

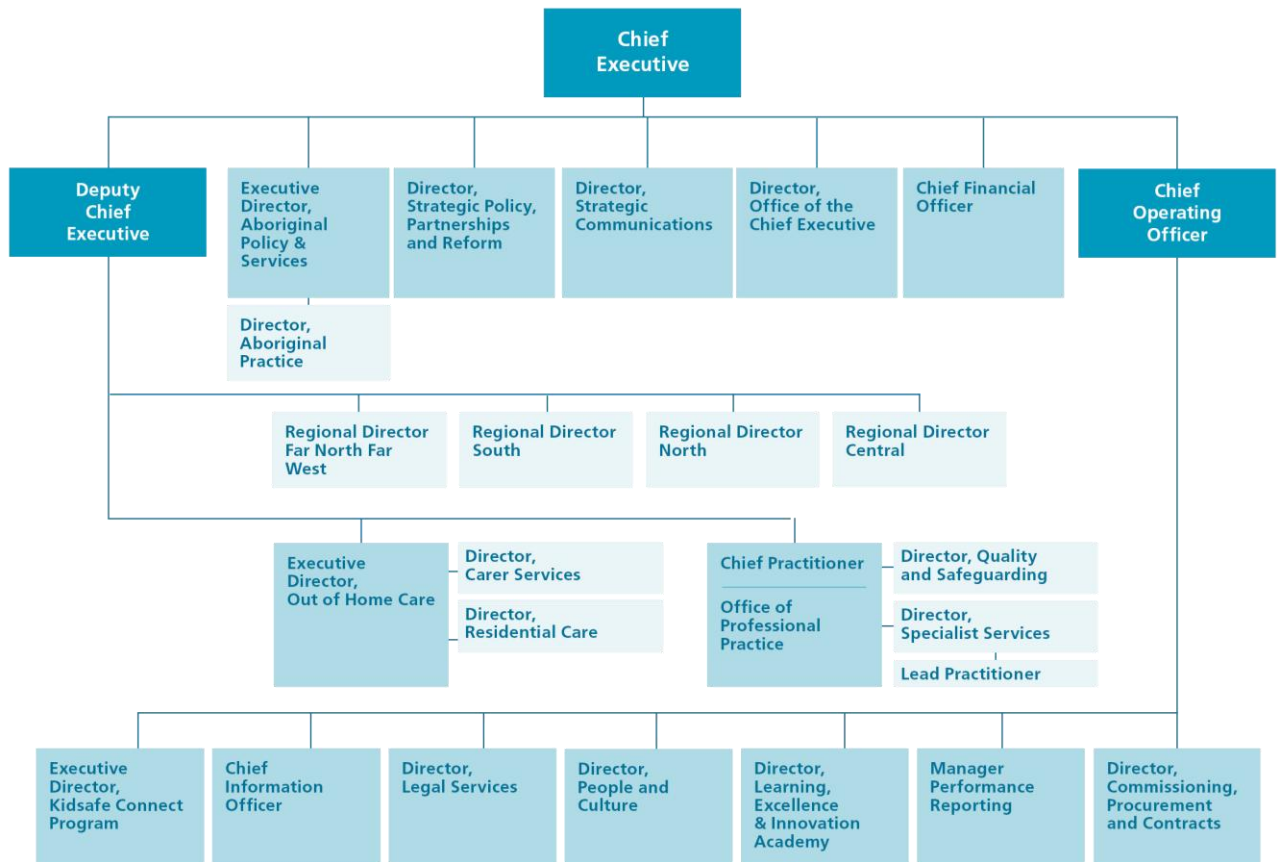
- *Children and Young People (Safety) Act 2017*
- *Children and Young People (Safety) Regulations 2017*
- *Family and Community Services Act 1972*
- *Adoptions Act 1998*
- *Adoption (General) Regulations 2018.*

We use a child-centred, trauma-informed practice approach that builds the capability and expertise of our employees and focuses on cultural safety, strengthening families, supporting carers and working in partnership to meet children and young people's need for safety.

We are responsible for:

- responding to concerns about children and young people who have experienced harm or are at risk of harm
- placing children and young people in care when they are unable to live safely with their families
- providing case management and support for children and young people under the guardianship or custody of the Chief Executive
- supporting the reunification of children and young people with their families if it is safe to do so
- managing the adoption process
- supporting children and young people from a refugee background through the Commonwealth Guardianship team.

Organisational structure



DCP vision for suicide prevention

DCP is committed to suicide prevention and reducing suicide-related distress by developing and delivering trauma-informed and culturally-responsive initiatives to promote the social and emotional wellbeing of staff, carers, children, young people and families.

Strategic context

This Action Plan furthers the objectives of the [Suicide Prevention Act 2021](#) and the State’s [Suicide Prevention Plan](#) by addressing the unique needs of high-risk priority populations, including Aboriginal children, young people, families and communities, children and young people in care or with a care experience, frontline staff and families in regional and remote locations.

State Suicide Prevention Priorities



The [DCP Strategic Plan 2022 – 2026](#) outlines our shared vision, purpose and priorities. The Strategic Plan values are **Respect, Trust, Collaboration, Accountability, Integrity and Transparency**.

 <p>A thriving workforce We are future focused in our workforce strategy, supporting and valuing our staff, proactively recruiting, and establishing sustainable systems, processes and workplaces that enable us to be highly effective.</p>	 <p>Active and collaborative partnerships We work together with our service partners and alongside the community to improve outcomes for children, young people, carers and families.</p>	 <p>Closing the Gap We commit to a transformed child protection system that makes active efforts and where Aboriginal people and communities are empowered to lead decision making about the care and wellbeing of Aboriginal children and young people.</p>	 <p>Working alongside carers We respect and value carers as vital partners in keeping children and young people safe and well.</p>
 <p>Leaders in practice excellence Staff in all parts of child protection develop and use best practice in their work to deliver improved outcomes for children, young people, carers and families.</p>	 <p>A child protection system that meets the needs of children and young people We commission and deliver services based on a deep understanding of the needs of children and young people in care and our aspirations for them to heal from trauma and reach their full potential.</p>	 <p>Quality services and safeguarding We are accountable and transparent, and pursue continuous improvements to promote the safety and wellbeing of children and young people throughout the services we fund and provide.</p>	

Development of the Suicide Prevention Action Plan

An internal working group was established to oversee the Action Plan's development.

The working group included representatives from various directorates with diverse skills, knowledge and cultural perspectives. The role of the working group was to:

- identify existing agency programs, policies, procedures and resources
- identify gaps, strengths and weaknesses in our agency responses
- ensure effective engagement with lived and living experience communities throughout the consultation and development process
- share knowledge and expertise in areas of practice
- design and develop meaningful actions.

Consultation with lived and living experience communities was undertaken throughout 2025, including a series of in person and online forums and a final public consultation process through YourSAy.

Consultation

South Australians of any age, race, ethnicity or gender can experience suicide risk. People with certain life experiences or identities may experience a combination of stressors linked to increased risk of suicide. The voices of the department's identified priority groups were of paramount consideration in the development of the action plan strategies.

The following priority groups were invited to contribute to the development of DCP's Suicide Prevention Action Plan through targeted and public consultation processes:

- **People with lived and living experience of suicide** are at heightened suicide risk.
- **Aboriginal and Torres Strait Islander children, young people and families** experience loss by suicide at a much higher rate than that of non-Aboriginal people.
- **Frontline staff** are at risk of experiencing vicarious trauma.
- **People with lived and living experience of the out-of-home care system** may have experiences of displacement, placement instability and trauma as a result of abuse and neglect, including children and young people in residential care and foster and kinship care.
- **Children and young people involved with youth justice** face unique and compounding vulnerabilities placing them at higher risk.
- **Adoptees** are vulnerable due to prolonged uncertainty associated with loss of identity.
- **People living in regional South Australia** have suicide rates higher than those in metropolitan Adelaide.
- **People who identify as LGBTQIA+** have a higher rate of suicide-related behaviours than their peers.
- **People from culturally and linguistically diverse backgrounds** may experience racism and discrimination.
- **People living with disability** may experience discrimination.
- **Foster and kinship carers** are at risk of experiencing vicarious trauma in their caregiving role.

Actions

In line with the State plan, the department’s actions are listed under the 5 priority groups; **Partner, Respect, Prevent, Respond, Review**. The department’s actions are meant to complement, not replace existing suicide prevention efforts. They aim to enhance these efforts by implementing broader, long-term solutions tailored to the workplace and specific sectors, with a focus on including people with lived and living experience at the centre.

Priority 1: Partner

Enable multisectoral and whole of community approaches to suicide prevention.

Supporting people and promoting hope requires combined effort of many individuals, organisations and sectors working together and sharing a sense of responsibility. Working together and sharing information will build understanding and create meaningful and timely responses.

ACTION	MEASURE
<i>Contribute to an ongoing multi-sector committee for suicide prevention.</i>	<ul style="list-style-type: none"> · DCP participates in and contributes to a multi-sector committee established to consider suicide prevention initiatives to support children and young people at risk of suicide.
<i>Contribute to the Suicide Prevention Website as a hub of resources to facilitate mental health and suicide prevention strategies.</i>	<ul style="list-style-type: none"> · The Action Plan is provided to Preventive Health SA for public access via its website · Relevant resources or programs developed during the implementation of the Action Plan are shared with Preventive Health SA in line with progress reporting requirements.
<i>Improve support for family-based carers who respond to instances of self-harm and/or suicide-related distress in their caregiving role for children and young people.</i>	<ul style="list-style-type: none"> · Further learning and development opportunities are sourced and/or developed to support family-based carers in their role as a caregiver for a child or young person who engages in self-harming behaviours and/or experiences suicide-related distress. · Additional information and resources are developed for family-based carers to increase awareness and access to community-based mental health services for children and young people.

<p><i>Seek culturally appropriate, timely and responsive preventative and early intervention wellbeing support for all children and young people in care.</i></p>	<ul style="list-style-type: none"> · Strategies are identified to improve timely assessment of children and young people’s psychological and emotional needs following their entry to care, including: <ol style="list-style-type: none"> a) Culturally appropriate referral pathways for Aboriginal and Torres Strait Islander children and young people for a psychological needs assessment and ongoing therapeutic support and b) Culturally appropriate referral pathways for children and young people from Culturally and Linguistically Diverse (CALD) communities for a psychological needs assessment and ongoing therapeutic support.
<p><i>Explore partnerships with key agencies to develop trauma-informed procedures in response to children and young people experiencing situational crisis.</i></p>	<ul style="list-style-type: none"> · A review is completed of the management of, and response to, situational crisis for children and young people in care, in partnership with key agencies. · Practice guidance is reviewed, along with the structure of Complex Case Management Meetings, to increase consideration of evidence-based self-harm and suicide early intervention, prevention and support approaches.
<p><i>Partner with service providers to further develop support programs for young people leaving care with consideration for young people’s psychological and emotional wellbeing needs.</i></p>	<ul style="list-style-type: none"> · Partnership agreements with transition from care, mentoring and post care services, are reviewed, to ensure a young person’s psychological and emotional wellbeing needs are supported by all service providers.

Priority 2: Respect

Promote social and emotional wellbeing and prevent and respond to suicide risk for Aboriginal South Australians.

The profound experience of grief and loss today due to the long-lasting effects of colonisation, stolen generations, dispossession of traditional lands, and loss of culture and knowledge passed forward from one generation to another, contributes to poor social and emotional wellbeing and suicide related distress. This carriage of intergenerational trauma along with continuing racism and discrimination contributes to Aboriginal people being at greater risk of suicide and poor life outcomes.

In building social and emotional wellbeing, the impact of racism and trauma and the social economic disadvantage many Aboriginal people experience must be addressed. Suicide prevention responses should be culturally sensitive and compassionate, recognising the strengths, skills and resilience of Aboriginal people and the importance of connection to Country.

ACTION	MEASURE
<i>Amend the current Reconciliation Action Plan to include the acknowledgement of striving for better mental health outcomes together with community.</i>	<ul style="list-style-type: none"> · The current DCP Reconciliation Action Plan includes the acknowledgement of striving for better mental health outcomes together with the community.
<i>Continue to mandate cultural training and incorporate learnings into decision-making.</i>	<ul style="list-style-type: none"> · Cultural awareness training is amended to include suicide prevention. · Additional learning and development opportunities are made available to enhance cultural responsiveness and increase staff understanding of the cultural protocols relevant to suicide-related grief and loss in Aboriginal communities.
<i>Review mechanisms in place for connecting and partnering with South Australian Aboriginal Communities.</i>	<ul style="list-style-type: none"> · A review is completed of DCP's mechanisms for connecting and partnering with South Australian Aboriginal communities to co-design future suicide prevention initiatives, programs and action plans.
<i>Increase access to support for Aboriginal foster and kinship carers experiencing grief and loss.</i>	<ul style="list-style-type: none"> · Increase engagement with Aboriginal Community Controlled Organisations to improve access to support for Aboriginal foster and kinship carers experiencing grief and loss.
<i>Support a culturally safe and mentally healthy workplace.</i>	<ul style="list-style-type: none"> · Aboriginal Mental Health First Aid representatives are trained across offices/locations.
<i>Increase protective factors in regional locations by creating opportunities for Aboriginal carer communities to connect.</i>	<ul style="list-style-type: none"> · Work with the community and non-government organisations to increase opportunities for carers to connect in the Far North Far West regions.

Priority 3: Prevent

Create compassionate, safe and resilient communities.

Building suicide prevention awareness and skills will help people to feel able to recognise and respond to concerns, provide support, ask for and seek help, and reduce suicide-related distress in their communities.

ACTION	MEASURE
<i>Commit to the use of safe and consistent language when discussing mental ill-health and suicide through the signing of Everymind’s National Communications Charter.</i>	<ul style="list-style-type: none"> The Everymind’s National Communication Charter is signed.
<i>Continue to contribute to safe messaging on World Suicide Prevention Day.</i>	<ul style="list-style-type: none"> The DCP Staff Wellbeing Framework includes a campaign for safe messaging on World Suicide Prevention Day to increase awareness and challenge attitudes.
<i>Provide training to all workers to reduce stigma and recognise and respond to the signs of impending or actual suicide distress.</i>	<ul style="list-style-type: none"> Role-specific training is sourced and/or developed for staff working in different areas of the agency with varying roles. This includes mandatory/induction training and ongoing professional development.
<i>Review collaboration models used in connecting with lived and living experience communities.</i>	<ul style="list-style-type: none"> Review and/or develop a collaboration and consultation model to engage with lived and living experience communities to better inform future programs and action plans.
<i>Promote staff wellbeing initiatives amongst residential care teams to build and maintain resilience in the workforce.</i>	<ul style="list-style-type: none"> A peer support program is sourced/developed and implemented in residential care in line with the Public Sector Mentally Healthy Workplaces Framework and DCP Wellbeing Framework.
<i>There will be a commitment to include preferred language and terminology when referencing self-harm and suicide in DCP documents and resources.</i>	<ul style="list-style-type: none"> The DCP Writing Style Guide is reviewed and updated to ensure that all future documents and resources reflect preferred language when referencing self-harm and suicide.
<i>Define the roles and responsibilities of the organisation, carers and staff in response to children and young people who disclose thoughts of suicide.</i>	<ul style="list-style-type: none"> Redefinition of roles and responsibilities of the organisation, carers and staff in response to children and young people who disclose thoughts of suicide to ensure trauma-informed, safe, inclusive and compassionate responses.
<i>Review and update the DCP Supervision Framework to include suicide related distress as a factor that impacts upon staff wellbeing.</i>	<ul style="list-style-type: none"> The DCP Supervision Framework is reviewed and updated to include suicide related distress as a factor that impacts upon staff wellbeing. Psychological Safety training or similar is provided to those in leadership roles who have responsibility for managing teams.
<i>Accountability for the psychological and emotional wellbeing of children and young people will be shared with DCP’s partnering non-government agencies.</i>	<ul style="list-style-type: none"> Contract management requirements for all DCP-contracted services for children and young people are amended to include suicide prevention, early intervention, after care and support.

Priority 4: Respond

Meeting the needs of people and communities when, and in the ways, they are needed.

Suicide prevention is not 'one size fits all'. Tailoring compassionate and timely suicide prevention responses, with a focus on those who may be more at risk and/or bereaved by suicide, will help reduce peoples' and communities' distress.

ACTION	MEASURE
<i>Establish an internal mental health and wellbeing working group, informed by priority populations with living and lived experience where possible.</i>	<ul style="list-style-type: none"> · An internal mental health and wellbeing working group is established to include representatives with subject matter expertise and/or living and lived experience.
<i>Review HR protocols to ensure adequate support is provided to staff impacted by suicide loss.</i>	<ul style="list-style-type: none"> · A review of HR protocols is completed and considerations for staff wellbeing are included for those impacted by suicide loss.
<i>Develop site-specific response protocols and plans for suicide-related events.</i>	<ul style="list-style-type: none"> · Site-specific incident management protocols and safety plans for suicide-related events are reviewed and/or developed for children and young people in family-based care. · Further support is provided to residential care staff to prepare and implement the Wellbeing Plan to respond, intervene and to deescalate situational crises. · Practice guidance will be developed for staff responding to a child or young person at imminent risk of suicide.
<i>Review opportunities to manage the risk of psychological injuries and illnesses in the workplace as required under the new Work Health and Safety (Psychosocial Risks) Amendment Regulations 2023.</i>	<ul style="list-style-type: none"> · The risk management of psychological injuries in the workplace is reviewed and control measures identified.
<i>Improve client information management and recording of a child or young person who has been identified as at risk of self-harm, or suicide related distress or engaging in self-harming behaviours.</i>	<ul style="list-style-type: none"> · The recording of client psychological and emotional wellbeing needs is improved within current C3MS system capabilities, tools and processes to enhance early intervention efforts and improve information gathering and sharing.
<i>Provide DCP workforce with aftercare and support following a critical incident.</i>	<ul style="list-style-type: none"> · DCP engage the existing Employee Assistance Providers to increase capability to provide responsive, culturally appropriate in-person debriefing support for individuals and/or teams following a critical incident or death of a child or young person in care.

Priority 5: Review

Monitor and evaluate suicide prevention strategies and support evidence informed practice.

Evaluating strategies will provide information on what is working and how to best target, deliver and maximise impact on suicide prevention.

ACTION	MEASURE
<i>Engage with the Suicide Prevention Council to source relevant data on emerging priority populations to improve preparation, prevention, response and recovery protocols.</i>	<ul style="list-style-type: none"> Annual data from the Suicide Prevention Council is sourced to improve preparation, prevention, response and recovery protocols.
<i>Utilise data collection methods within the agency to better identify and respond to concern or distress emerging in communities.</i>	<ul style="list-style-type: none"> Significant incident reporting capabilities are further developed to report against incidents and occurrences of self-harm and suicide.
<i>Monitor and report on the psychological and emotional wellbeing needs of children and young people in residential care as a priority group.</i>	<ul style="list-style-type: none"> An audit of residential care houses is conducted to ensure compliance with the Residential Care: Supporting children and young people who are at risk of self-harm and suicide Procedure.
<i>Regularly report to the Suicide Prevention Council on implementation of suicide prevention strategies.</i>	<ul style="list-style-type: none"> A report is completed and submitted on or by 31 October each year detailing the agency's progress towards implementing the Action Plan actions.
<i>Include evidence-based considerations for suicide prevention in the review and development of all agency policies and procedures to achieve best practice.</i>	<ul style="list-style-type: none"> The Manual of Practice, procedures and/or Practice Papers will be updated to include suicide prevention. Practice Papers will be developed for staff to ensure best practice approaches to suicide prevention.

Relationship to other policies, strategies and frameworks

We are committed to creating an environment which prioritises the emotional and social wellbeing of our staff. We seek to foster and maintain a safety-and-wellbeing-first workplace culture where we can take care of each other and ourselves. The Department for Child Protection Suicide Prevention Action Plan has been developed with the consideration to the obligations and with the intent to deliver on the principles of the following departmental strategies:

- DCP Wellbeing Framework
- Reconciliation Action Plan
- DCP Practice Approach
- Aboriginal and Torres Strait Islander Child Placement Principle
- SA Public Sector Anti-Racism Strategy 2023 – 2028.

Employee wellbeing framework

Employee health and wellbeing is supported by the Commissioner for Public Sector Employment [Mentally Healthy Workplaces Framework](#).

Department for Child Protection staff can access a range of wellbeing initiatives such as the 10,000 Steps Challenge, Fitness Passport and *Wellbeing - Supporting Self-care* calendar of events.

R U OK? Day communications are issued annually and local offices are encouraged to host connection events to get involved, raise awareness and make asking “R U OK?” a part of every day.

Employees can access free and confidential support via the Employee Assistance Program for themselves and their immediate family members. This includes one-on-one employee assistance counselling to support staff members to manage challenges, concerns or issues affecting them at work or at home.

The department adheres to the Determinations of the Commissioner for Public Sector Employment under section 16(1) of the *Public Sector Act 2009*. This includes additional leave provisions relating to workplace flexibility, cultural and community obligations and carer's leave. Up to two days of paid bereavement leave are provided, along with up to 14 days of cultural leave that can be used to participate in Sorry Business.

Under the *Work Health and Safety Act 2012* and the *Return to Work Act 2014*, DCP provides support to staff to return to work following a work-related injury or illness, including psychological injury. The department recognises that early notification and intervention are imperative to reducing work-related stress and psychological harm.

Reconciliation Action Plan

Reconciliation activities are driven by DCP's [Reconciliation Action Plan](#). The vision for reconciliation is for Aboriginal and Torres Strait Islander peoples and non-Indigenous people to be united in a common purpose – to ensure that Aboriginal and Torres Strait Islander children and young people in care have a strong sense of identity and are connected to family, culture and Country.

The plan's commitments are underpinned by a genuine desire to bring about change. There are five dimensions of reconciliation: **Race relations, Equality and equity, Unity, Institutional integrity and Historical acceptance.**

Activities in the plan will continue to build on systems supporting better outcomes for Aboriginal children and young people in care, encouraging self-determination for families and communities and promoting respect and understanding of Aboriginal cultures.

DCP Practice Approach

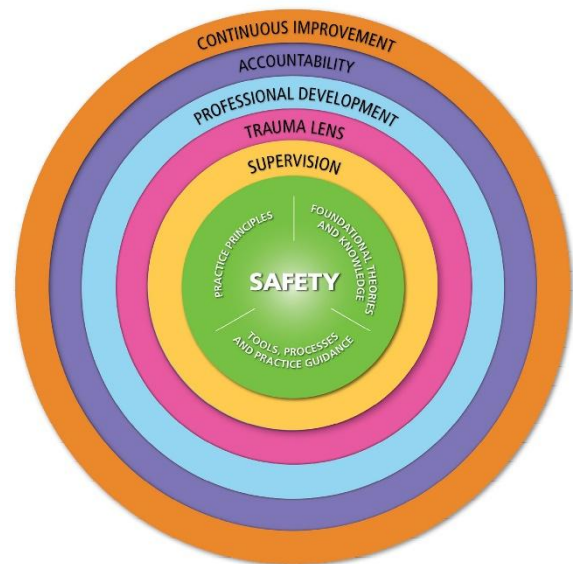
[The DCP Practice Approach](#) is unique to South Australia's legislative and cultural context. The Practice Approach is focused on children and young people's physical and emotional safety during all phases of child protection work. With safety at the centre, the Practice Approach combines foundational knowledge and theories across the elements that support best practice.

Children and young people who are placed in care have often experienced trauma as a result of abuse and neglect. This can have a significant impact on their emotional and psychological wellbeing.

DCP has a responsibility to identify and implement strategies to safeguard children and young people.

For children and young people receiving services from DCP, safeguarding is more than preventing further harm. Safeguarding is the duty of care and responsibility to implement preventative and responsive systems, policies and practices to ensure infants, children and young people are:

- safe from harm
- supported to heal from trauma
- empowered to have a voice and be heard
- connected to family, kin, community, culture and Country
- cared for in a way that ensures their physical, emotional, cultural and spiritual wellbeing and promotes healthy development so they can reach their full potential.



Aboriginal and Torres Strait Islander Child Placement Principle

In South Australia and Australia more broadly, Aboriginal and Torres Strait Islander infants, children and young people are over-represented in the child protection system.

[The Aboriginal and Torres Strait Islander Child Placement Principle](#) is a guiding framework for action and promotes the importance of the five core elements – **Prevention, Partnership, Placement, Participation** and **Connection** and precursor **Identification**.

Commitment to embedding the elements of the Principle is critical to achieving meaningful change and improving outcomes for Aboriginal infants, children, young people and their families and communities.

Implementation, monitoring and reporting

Implementation and planning will require collaboration across the department and directorates, given the shared role of preventing suicide. Planning will involve engagement with sectors, services and communities to coordinate the efforts in meeting the plan's goals.

Under s 26(1) of the *Suicide Prevention Act 2021 (SA)*, DCP will report to the Suicide Prevention Council annually before 31 October. A summary of Action Plan implementation outcomes will also be provided to the department's Strategic Leadership Committee (SLC).

Under s 25(7), the department will conduct a review of the Action Plan on the fourth year of implementation. DCP will review the plan every four years and engage with the Suicide Prevention Council to source data on emerging priority populations to improve preparation, prevention, response and recovery protocols.

Glossary and definitions

Term	Meaning
DCP	The Department for Child Protection
EAP	Employee Assistance Program
LGBTIQA+	Lesbian, gay, bisexual, transgender, intersex, queer or questioning and asexual
The Act	<i>The Suicide Prevention Act 2021 (SA)</i>
ICT	Information and communications technology
C3MS	Connected Client Case Management System
CE	Chief Executive
Staff	An employee of the Department for Child Protection
Situational crisis	A sudden or unexpected significant disruption of a person's usual way of functioning that requires immediate intervention and support.
Imminent risk	A situation where a person's life or health is in immediate danger where medical treatment is necessary to prevent serious harm and or death.
Suicide related distress	When person's psychological and emotional health is deteriorating and has thoughts of suicide.
Self-harm	A deliberate attempt to hurt oneself.



Government of South Australia
Department for Child Protection

The Department for Child Protection

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