

CHCCS417B Provide support and care relating to suicide bereavement

Release: 1



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Modification History

| CHC08 Version 3 | CHC08 Version 4 | Comments |
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| CHCCS417A Provide support and care relating to suicide bereavement | CHCCS417B Provide support and care relating to suicide bereavement | ISC upgrade changes to remove references to old OHS legislation and replace with references to new WHS legislation. No change to competency outcome. |

Unit Descriptor

Descriptor This unit describes the knowledge and skills

required to provide support for individuals who are experiencing bereavement in relation to suicide

Application of the Unit

Application This unit of competency may be applied in a range

of community services contexts involving supporting individuals dealing with suicide

bereavement

Licensing/Regulatory Information

Not Applicable

Pre-Requisites

Not Applicable

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Employability Skills Information

Employability Skills

This unit contains Employability Skills

Elements and Performance Criteria Pre-Content

Elements define the essential outcomes of a unit of competency.

The Performance Criteria specify the level of performance required to demonstrate achievement of the Element. Terms in italics are elaborated in the Range Statement.

Elements and Performance Criteria

ELEMENT

PERFORMANCE CRITERIA

1. Recognise the impact of the aftermath of suicide

- 1.1 Outline and recognise shared features of all loss
- 1.2 Outline and recognise distinctive *features of suicide loss* and trauma
- 1.3 Outline and recognise the additional features of suicide bereavement after a mental illness
- 1.4 Recognise the elevated risk of suicide and other harm behaviours that may be associated with suicide loss
- 1.5 Recognise the increased risk of developing adverse impacts on health and well being after suicide loss

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ELEMENT

PERFORMANCE CRITERIA

- 2. Identify and understand needs of and provide *support for those bereaved by suicide*
- 2.1 Demonstrate an understanding of suicidal ideation and other risk taking behaviours
- 2.2 Recognise the importance of proactive measures that facilitate early access to suicide bereavement support as required by the bereaved
- 2.3 Identify essential immediate and ongoing resources and processes for support of persons bereaved by suicide
- 2.4 Apply understanding of the difference and boundaries among *education*, *support* and *therapeutic approaches*
- 2.5 Apply understanding of the *principles of working* with persons bereaved by suicide, including bereavement support and suicide prevention
- 2.6 Address the *needs of the individual*, *family and community* in a plan for dealing with the aftermath of suicide, including the identification of *external support agencies*
- 2.7 Recognise the impact of *lifespan and developmental issues* on suicide bereavement
- 2.8 Recognise the impact of cultural, social, ethnic and spiritual issues impacting on people bereaved by suicide
- 2.9 Identify the role and value of diverse mourning practices and rituals
- 2.10 Recognise the use and power of language and communication
- 3. Identify suicide prevention strategies in the aftermath of suicide
- 3.1 Identify the main areas to be considered in the aftermath of a suicide
- 3.2 Apply knowledge of *suicide prevention and post-vention skills*
- 3.3 Identify and apply *intervention responses* to address elevated suicide risk and increase safety

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ELEMENT

PERFORMANCE CRITERIA

- 4. Identify appropriate self-care resources
- 4.1 Monitor own stress level in relation to working in the area of suicide bereavement
- 4.2 Use appropriate *self-care strategies* to develop and maintain physical and emotional well being

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Required Skills and Knowledge

REQUIRED SKILLS AND KNOWLEDGE

This describes the essential skills and knowledge and their level required for this unit.

Essential knowledge:

The candidate must be able to demonstrate essential knowledge required to effectively do the task outlined in elements and performance criteria of this unit, manage the task and manage contingencies in the context of the identified work role

These include knowledge of:

- Distinctive features of suicide bereavement and related issues
- Recognition of the impact of trauma
- Principles of working with persons bereaved by suicide (including bereavement and suicide prevention)
- Awareness of how suicide bereavement can impact the health and well being of an individual
- Awareness of how the presence of a mental illness in an individual before a suicide can complicate reactions to loss and grief of those bereaved
- Differences and boundaries among education, support and therapeutic approaches
- Knowledge at the jurisdictional level of police and coronial procedures and those of other relevant agencies
- Health promotional approach to adversity, including the awareness and value of community capacity building
- Understanding of the impact of lifespan and developmental issues on reactions to suicide bereavement (e.g. children and the elderly)
- Awareness of the Mindframe guidelines
- Awareness of national and state/territory suicide prevention strategies and frameworks
- Knowledge and use of evidence-based approaches to suicide bereavement support

Essential skills:

It is critical that the candidate demonstrate the ability to:

- Take proactive measures that facilitate early access to suicide bereavement support when required
- Address needs of the individual, family and community in planning to deal with the
 aftermath of suicide, including the identification of external support agencies as well as
 individual strengths
- Apply intervention responses to address elevated suicide risk, and other risk taking behaviours, and increase safety

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REQUIRED SKILLS AND KNOWLEDGE

In addition, the candidate must be able to effectively do the task outlined in elements and performance criteria of this unit, manage the task and manage contingencies in the context of the identified work role

These include the ability to:

- Apply verbal and non-verbal approaches to effectively deal with and respond to each individual
- Use effective communication skills, including:
 - use empathic listening skills
 - use appropriate communication techniques to respond to individual needs
 - · provide information clearly and sensitively
 - obtain feedback to confirm understanding
- Maintain documentation as required, including effective use of relevant information technology in line with work health and safety (WHS) guidelines

Evidence Guide

EVIDENCE GUIDE

The evidence guide provides advice on assessment and must be read in conjunction with the Performance Criteria, Required Skills and Knowledge, the Range Statement and the Assessment Guidelines for this Training Package.

Critical aspects for assessment and evidence required to demonstrate this unit of competency:

- The individual being assessed must provide evidence of specified essential knowledge as well as skills
- This unit is best assessed in the workplace or in a simulated workplace under the normal of range conditions
- Assessment should be gathered on one or more occasions but must reflect the normal range of client situations encountered in the workplace

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EVIDENCE GUIDE

Access and equity considerations: •

- All workers in community services should be aware of access, equity and human rights issues in relation to their own area of work
- All workers should develop their ability to work in culturally and linguistically diverse (CALD) environments
- In recognition of particular issues facing Aboriginal and Torres Strait Islander communities, workers should be aware of cultural, historical and current issues impacting on Aboriginal and Torres Strait Islander people
- Assessors and trainers must take into account relevant access and equity issues, in particular relating to factors impacting on Aboriginal and/or Torres Strait Islander clients and communities

Context of and specific resources for assessment:

 This unit can be assessed independently, however holistic assessment practice with other community services units of competency is encouraged

Method of assessment:

- Consistent performance and development would be expected to be demonstrated involving a combination of oral and written tasks while also featuring simulated and actual practice
 Examples might include:
 - group exercises
 - written (e.g. journal) and verbal responses to questioning
 - simulated exercises

Related units:

This unit is recommended to be assessed in conjunction with related unit:

CHCCS426B Provide support and care relating to loss and grief

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Range Statement

RANGE STATEMENT

The Range Statement relates to the unit of competency as a whole. It allows for different work environments and situations that may affect performance. Add any essential operating conditions that may be present with training and assessment depending on the work situation, needs of the candidate, accessibility of the item, and local industry and regional contexts.

Features of suicide loss may include:

- Feelings of rejection, abandonment and blaming
- · Feelings of remorse, guilt and responsibility
- Feelings of anger and/or helplessness
- Feelings of relief
- Feelings of stigma and shame (depending on cultural context)
- Denial
- The need to understand why the search for motive and acceptance when there may not be a motive
- Difficulty acknowledging the cause of death
- Fear of hereditary susceptibility
- Loss of basic trust
- Loss of sense of safety
- Increased risk of suicide
- Trauma

Support for those bereaved by suicide may include:

- · Individual grief counselling
- Group grief counselling
- Self-help support group
- Psycho-educational support group
- Social network
- Recognised telephone and web-based counselling services
- Psychological services
- Mental health services
- Suicide prevention services
- Pastoral/spiritual care support

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Education approaches may include:

- Information about aspects such as
 - psychological processes
 - practical needs
 - · coping strategies
 - emotional needs
 - physical needs
 - social needs
 - spiritual needs

Support approaches may include: •

- Psychological support
- Emotional support
- Therapeutic methods
- Health promotional support including community capacity building approach

Therapeutic approaches may include but are not limited to:

- Therapeutic methods such as
 - rational emotive therapy
 - systematic desensitisation
 - person-centred therapy
 - group therapy

Principles of working with persons bereaved by suicide may include:

- 'Above all, do no harm'
- Duty of care
- Confidentiality and privacy
- Cultural safety
- Sensitivity and respect
- Acceptance and non-judgement
- 'Rights of Persons bereaved by suicide'
- Risk management

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Needs of the individual, family and community may include:

- Information about general grief and loss theory
- Information about trauma
- Understanding of individuality of grief
- Understanding of cultural diversity in grief and loss
- Statistics about suicide and suicide bereavement
- Information about possible cognitive restrictions of the individual
- Dealing with stigma (e.g. psychosocial, legal and religious) and isolation
- Understanding of feelings of rejection, abandonment and blame
- Understanding of feelings of remorse, guilt and responsibility
- Understanding of feelings of anger and/or helplessness
- Understanding of feelings of relief
- Understanding of feelings of stigma and shame (depending on cultural context)
- Understanding the need to understand why the search for motive and acceptance that there may not be a motive
- Dealing with denial
- Dealing with difficulty acknowledging the cause of death
- Dealing with fear of hereditary susceptibility
- Dealing with contagion
- Working with family dynamics
- Understanding loss of basic trust and loss of sense of safety
- Assessing increased risk of suicide and other risk taking behaviours
- Logistical and legal issues
- Information about coping strategies and interpersonal tactics
- Acknowledging strengths
- Supporting therapeutic process of hope
- Working towards resilience and integration
- Developing potential for growth
- Lifespan approach to suicide prevention
- A continuum of care
- Identifying individual strengths

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Lifespan and developmental issues may include:

- Children's development level
- Adolescents
- Elderly
- Intellectual disabilities
- Developmental disabilities

External support agencies may include, but are not limited to:

- Coroner's office
- Housing services
- Financial management services
- Funeral services
- Legal services
- Translation services
- 24 hour crisis services
- Recognised telephone and web-based counselling services
- Grief counselling services
- Psychological services
- Disability services
- Domestic and family violence services
- Aboriginal and/or Torres Strait Islander health services
- Emergency services
- Mental health services
- Mental health community teams
- Suicide prevention services
- Government agencies, such as Veterans' Affairs

Use and power of language and communication refers to:

Reactions to specific words such as 'committed suicide'

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Suicide prevention and post-vention skills and intervention responses may include:

- Identifying warning signs
- Risk assessment
- Counselling skills
- Intervention responses
- Engaging people
- Life sustaining actions
- Helping actions
- Protective factors
- Developing safety plans

Self-care strategies may include:

- Personal management and self-monitoring
- Supervision
- Follow-up support and defusing
- Reflection on practice
- Recognition of negative emotions and well being
- Peer support
- Ongoing professional development and formal training
- Knowing when and how to ask for back up support

Unit Sector(s)

Not Applicable

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