



CDS Frequently Asked Questions 2017

(v1.02 2022)

These updated FAQs have been prepared for District Health Boards with the input of the Ministry of Health, and should be read in conjunction with the CDS MoU and CDS Explanatory Notes.

These FAQs are intended to help your DHB make the most of CDS.

What is CDS? (Coronial Suspected Suicide Data Sharing Service)

- Since 1 July 2014 CDS has been delivered by CASA (Clinical Advisory Services Aotearoa) on behalf of the Ministry of Health in order to help implement Action 11.2 of the NZ Suicide Prevention Action Plan 2013-2016. This action is to "establish a function to ... share up-to-date provisional coronial data on suicide deaths with agencies working in local areas to help prevent further suicides".
 - o http://www.health.govt.nz/publication/new-zealandsuicide-prevention-action-plan-2013-2016
- CDS operates under the auspices of a Memorandum of Understanding (MoU) between the Coronial Service, the Ministry of Health, CASA and each DHB.
- CDS is also supported by a Privacy Impact Assessment which examines the service in relation to the Health Information Privacy Code 1994, Rules 1-12.
 - o http://www.health.govt.nz/system/files/documents/publications/suicideprevention-toolkit-district-health-boards
- From 1 July 2014 the Chief Coroner agreed to release basic information on suspected self-inflicted deaths (SSIDs) via CDS to support DHBs in their local postvention responses after a death by suspected suicide.
- SSID data provision via CDS recognises the key role of DHBs in leading suicide postvention in their regions.

How is suicide postvention also suicide prevention?

- Postvention has been identified by the WHO as an important component of suicide prevention.
- Bereaved families, friends and communities require care and support for their own health and wellbeing.
- Some people and communities who have been bereaved as a result of suicide, may be more at risk of suicide themselves.

How does CDS contribute to suicide postvention? (CDS primes postvention)

• CDS reviews SSID data received in encrypted notifications from NIIO (National Initial Investigation Office of Coronial Services NZ) for completeness, accuracy and to assess whether a suspected suicide is linked to more than one DHB.

- CDS disseminates SSID data to authorised recipients of impacted DHBs.
- Timely, accurate data about suspected suicides (albeit provisional) in your region or linked to your region helps your DHB deliver appropriate and well-coordinated postvention responses as soon as possible.

What is meant by timely and appropriate local responses to suspected suicides?

- The impact of a suicide on family, whanau, friends and the wider community can vary depending on circumstances. Any postvention response in the acute or medium term needs to be mindful that the notification is of a suspected suicide only; the exact cause of death has yet to be determined by a Coroner.
- In determining what is timely and appropriate, it is anticipated that DHBs will:
 - o Be connected with other agencies in their communities.
 - o Promote access to services and supports that they and other agencies can provide.
 - Facilitate collaboration across agencies where a high risk of contagion is identified, drawing on expertise such as CASA's Community Postvention Response Service (CPRS) as required.
 - Use learnings from postvention activities to contribute to the development and ongoing review of their district suicide prevention plans aimed at building community resilience and well-being, and targeting modifiable risk factors evident in their communities.

Who should receive CDS notifications about suspected suicides on behalf of your DHB?

- Only DHB staff who have been authorised by the appropriate senior manager of your DHB as having a role in supporting local postvention responses.
- Only those who have read and agreed to the CDS MoU which sets out expectations of all parties in respect of the collection, use, disclosure and retention or disposal of information in the notifications.
- People who receive notifications from CDS about suspected suicides on behalf of a DHB are known as "authorised recipients". CDS recommends a minimum of two authorised recipients per DHB to cover leave and unanticipated staff absences.
- Removing, adding or otherwise changing authorised recipients for SSID data from coronial notifications is the responsibility of your DHB. It is your DHB's responsibility to inform CDS when authorised recipients leave, change role or are otherwise no longer valid recipients of notifications from CDS on behalf of your DHB.

Who can be a DHB authorised recipient?

 Authorised recipients can be 'employees or agents of the DHB' with a role, function, or accountability supporting local responses to suspected suicides who have been authorised by the DHB to perform the role. For example, they could be a Mental Health Services clinician, or a DHB-contracted Suicide Prevention Co-ordinator based in a PHO.

Can a person who is not an employee or agent of a DHB, be an authorised recipient?

 No. A person who is not an employee or agent of a DHB (e.g. a member of a local postvention response group who is an employee or agent of the Ministry of Education, or Child Youth and Family) cannot be authorised by a DHB as a recipient of coronial notifications through the CDS.

How accurate is the information in SSID notifications?

- The information is provisional, it can be subject to inaccuracies and elements may be missing.
- After analysis and checks for completeness and accuracy by CDS, the information is sent to
- DHBs largely as it is received from NIIO.
- It is particularly important for all authorised recipients to be mindful of the status of notifications sent as either: "Identity not yet confirmed" or "Believed to Be". In both cases the identity of the deceased has not been officially confirmed. Extreme caution must be exercised in undertaking any actions prior to receipt of official confirmation of identity of the deceased from NIIO.

How are DHBs expected to manage the sensitive information in SSID notifications?

- The CDS MoU requires that DHBs manage the collection, use, disclosure, retention and disposal of all parts of the information contained in SSID notifications in accordance with:
 - o The Official Information Act 1982,
 - o the Privacy Act 1993,
 - o the Health Information Privacy Code 1994 and
 - o any specific health information security policies each DHB has as applies.

What must be considered in deciding whether to share any part(s) of SSID notifications with another person or agency?

- If an employee or agent of a DHB wants to disclose sensitive information from the notification with another agency, the DHB's own privacy protocols apply. The Health Information Privacy Code (HIPC; Rules 10 and 11) provides that information can be disclosed where that disclosure is:
 - o One of the purposes in connection with which it was obtained &/or
 - o To prevent or lessen a serious threat to public health or public safety or the life or health of an individual.
- For example, it is quite usual that consideration would be given to sharing information from SSID notifications with some or all of the members of local suicide postvention community working groups. Members of these groups often have their own professional membership with an established code of ethics, or they represent agencies with confidentiality protocols, and an agreement with a DHB in relation to their function. Where this is not the case, a confidentiality statement must be signed

so that the sensitive information being shared continues to be managed in accordance with the Privacy Act 1993 and the HIPC 1994; this confidentiality statement can be provided by the DHB for them to sign.

- In determining whether, to whom and how to disclose sensitive information from SSID notifications it is therefore appropriate to consider the following questions:
 - o Is the purpose of sharing the information for supporting local postvention responses?
 - o Do I believe on reasonable grounds that the disclosure is necessary "to prevent or lessen a serious threat to public health or public safety or the life or health of the individual concerned" (HIPC 1994 Rules 10(1)(d) and 11(2)(d)).
 - o Am I making the disclosure to a party who can act to mitigate any identified risk?
 - o Coronial Suspected Suicide Data Sharing Service (CDS) 2016 FAQs 4
 - o Am I disclosing information only to the extent necessary to help mitigate any identified risk?
 - O Have I emphasised to any party with whom I am sharing the information that this information is provisional and can be subject to inaccuracies?
 - o Am I transmitting the information using a secure method (e.g. direct to the appropriate person verbally over the phone, in a password protected document attached to an email)?
- If in doubt, check with your DHB Privacy or Legal Officer on what activity is permitted.

When are DHBs notified of SSIDs by CDS?

- CDS service specifications require that DHBs are provided with SSID notifications within 2 hours of their receipt by CASA on standard business working days and working hours.
- SSID notifications are transmitted to DHBs via the secure encrypted Cisco Ironport Registered Envelope System (CRES).
- Decryption of SSID notifications can only be undertaken by DHBs' registered authorised recipients with their own unique password.
- You can access notifications from a mobile device in two ways:
 - o Forward the email you receive from secure@coroner.casa.org.nz to mobile@res.cisco.com. You will receive an email from mobile@res.cisco with a link to access the notification. Click the link and follow the instructions for the CRES envelope opener as usual.
 - o To simplify opening a secure message you can install the Cisco Business Class Email Mobile application on your mobile device from the app store.
 - When you receive a notification on your mobile device touch and hold the securedoc_xxxxxxxxxxxxxxxx.html attachment until a menu appears.
 - Select Cisco BCE app to open the attachment.
 - Select or enter your email address and tap submit.
 - Enter your password as usual and read the encrypted message.
- The backup protocol for any outage of the secure platform or the transmission service for notifications is for direct phone contact to be made by CDS with one of your DHB's authorised recipients.
- The CRES system is fully auditable.

Why is more than one DHB notified about some suspected suicides?

- Notifications about suspected suicides are sent to all known impacted DHBs. If your DHB has information about a suspected suicide connected to or impacting on another DHB please notify CDS. You can do this by replying to the original notification email from secure@coroner.casa.org.nz providing a brief explanation of the nature of the connection or impact and the other DHB(s) impacted.
 - o For example, when there is cross-DHB impact:
 - Deceased died in one DHB region but the body of the deceased is being returned for tangihanga or burial in another.
 - Deceased died in one DHB region but had until recently resided in another.
 - Deceased resided in one DHB but attended school or worked in another.
 - Deceased died in prison in one DHB region but normally resided in another.

How will a DHB know if another DHB has also been informed?

• When CDS assesses that multiple DHB(s) should be informed about any given SSID notification, the relevant authorised recipients for all DHBs will receive the notification and all impacted DHBs will be listed in the subject line of the notification.

What if my DHB thinks the notification should be alerted to another DHB (not originally assessed by CDS as impacted by that SSID notification?)

• An authorised recipient provides a rationale for this request to CDS and asks CDS to alert another DHB of a notification. Where this request is granted, all original DHBs alerted to this notification are updated.

Where can I get additional support on suicide postvention matters?

- Police Regional Inquest & Inquiry Office.
- Victim Support Bereavement Service Specialists (0800 Victim 842 846).
- Clinical Advisory Services Aotearoa (Community Postvention Response Service (CPRS) www.casa.org.nz). Bree Solomon; CPRS Clinical Manager; 021 552 950; bree.solomon@casa.org.nz.
- CASA is also contracted by the Ministry of Health to deliver the national CPRS. CPRS
 assists DHBs and communities in coordinating local responses to suicide clusters and
 suicide contagion.
- Preventing and responding to suicide: Resource kit for schools available at:
 - http://www.education.govt.nz/assets/Documents/School/Traumatic-incidents-and-emergencies/SuicidePreventionOCT2013.pdf
- Reporting Suicide: A resource for the media available at:
 - o http://www.health.govt.nz/publication/reporting-suicide-resource-media
- Suicide Prevention Toolkit for District Health Boards (February 2015) which includes a copy of the CDS MoU, PIA and Explanatory notes available at:
 - o http://www.health.govt.nz/publication/suicide-prevention-toolkit-district-health-boards

Waka Hourua (Te Rau Matatini & Le Va) http://wakahourua.co.nz/resources

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