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Audit of Suicide Prevention Action Plan for the Canadian Armed Forces



July 2020

1259-3-0045 (ADM(RS))

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Acronyms and Abbreviations

ADM(PA)	Assistant Deputy Minister (Public Affairs)
ADM(RS)	Assistant Deputy Minister (Review Services)
ARA	Accountabilities, Responsibilities and Authorities
CAF	Canadian Armed Forces
CDS	Chief of the Defence Staff
CFB	Canadian Forces Base
DM	Deputy Minister
DMH	Director Mental Health
DND	Department of National Defence
DSFD	Director Strategic Force Development
FY	Fiscal Year
L1	Level One
MILPERSCOM	Military Personnel Command
OCI	Office of Collateral Interest
OPI	Office of Primary Interest
SID	Strategic Initiating Directive
SPAP	Suicide Prevention Action Plan
SSE	Canada's defence policy: <i>Strong, Secure, Engaged</i>
THWS	Total Health and Wellness Strategy
VAC	Veterans Affairs Canada
VCDS	Vice Chief of the Defence Staff

Results in Brief

Canada's defence policy: *Strong, Secure, Engaged (SSE)* lays out the Department of National Defence/Canadian Armed Forces (DND/CAF) vision for the next 20 years and puts its people at the core. In keeping with this policy, the CAF and Veterans Affairs Canada (VAC) established a Joint Suicide Prevention Strategy in 2017. As part of the Joint Strategy, the CAF developed a Suicide Prevention Action Plan (SPAP) with the "aim of mitigating suicide risks in the military community."¹ Successful and timely implementation of the numerous initiatives within the SPAP is critical to removing barriers to care, building a resilient armed forces, and ensuring appropriate care and support are provided to those who need it.

To support this implementation, the CAF requires adequate governance to ensure authorities, roles and responsibilities are clearly defined, as well as regular communication and collaboration amongst program implementers to minimize duplication and share best practices. Given the importance of suicide prevention, the audit was included in the Assistant Deputy Minister (Review Services) (ADM(RS)) Risk-based Audit Plan for fiscal years (FY) 2019/20 to 2021/22.

Overall Assessment

DND/CAF has a vast network of programs and services in place to ensure the health and well-being of all CAF personnel. Updating policies and procedures and clarifying stakeholder roles and responsibilities will enhance existing governance. Additional improvements could be realized in communication, collaboration and performance measurement practices to improve program and service awareness, and reporting information to support senior management decision making.

Findings and Recommendations

Governance. There is a governance process in place. Oversight and monitoring of the SPAP implementation will be enhanced by updating policies and procedures to provide clear direction and guidance by: defining accountabilities, responsibilities and authorities (ARA) for key stakeholders; and incorporating a risk-based oversight function to support complete, accurate and reliable information for decision making.

Communication. Programs and services are available to CAF members. Existing mechanisms can be leveraged to: continue soliciting CAF member feedback to address their needs; increase CAF member awareness of and accessibility to the CAF's health and wellness programs and services including suicide prevention initiatives; and share information and lessons learned with program implementers.

Performance Measurement. There are some elements of performance measurement for programs and services within the SPAP. Continued development of performance measures for SPAP, with clear and measurable objectives and outcomes, will enable the Department to better demonstrate progress and results of the SPAP and its initiatives.

¹ CAF-VAC Joint Suicide Prevention Strategy.

Note: Please refer to [Annex A—Management Action Plan](#) for the management response to the ADM(RS) recommendations.

1.0 Introduction

1.1 Background

Suicide is a major cause of premature death in Canada that has no bounds in age, gender, background or geography. Approximately 4,000 Canadians die by suicide every year, making it the ninth leading cause of death in the country.² Given that suicide is a complex issue that may involve any combination of factors including psychological, biological, social, cultural, spiritual and economic, it has no single prevention solution. Despite these complexities, there is hope that suicide can be prevented when collective efforts are harnessed to raise awareness, promote mental health and well-being and mitigate risk factors related to suicide.

In 2015, the Prime Minister tasked both the Minister of National Defence and the Minister of Veterans Affairs to collaboratively develop a CAF-VAC Joint Suicide Prevention Strategy. Published in October 2017, the CAF SPAP is the CAF's fulfillment of the Prime Minister's direction. Furthermore, DND and the CAF have identified suicide prevention as a critical priority and a cornerstone to the Department's commitment to the well-being of military members, as iterated in SSE.

The Strategy "defines the context for action, describes the goals upon which actions are focused, and shows the many programs, projects, and initiatives now underway to help reduce risks, build resilience in [the] CAF and Veteran communities, and prevent suicide among [its] military members and Veterans."³ The Strategy has garnered support from national health agencies and independent groups such as the Canadian Psychological Association and the Canadian Mental Health Association, and was lauded for its holistic approach to suicide prevention.⁴

The SPAP is underpinned by the existing Federal Framework for Suicide Prevention, the Surgeon General's Mental Health Strategy and the Report of the Mental Health Expert Panel on Suicide Prevention in the CAF. In 2016, the Panel reviewed suicide prevention in civilian and military populations, and issued 11 recommendations for action which are listed in [Annex B](#).

1.1.1 CAF Suicide Prevention Action Plan & Realignment

The CAF-VAC Joint Suicide Prevention Strategy includes over 160 CAF and VAC initiatives dedicated to reducing the risk of suicidality and enhancing health and wellness protective factors. Of these, 95 initiatives fall under the responsibility of the CAF, forming the CAF SPAP. These initiatives span seven lines of efforts, and cover different areas that contribute to suicide prevention such as Communicating, Engaging and Educating members. While CAF initiatives across these lines of effort are in various stages of development and completion, 55 are complete and already in operation. Given the many interdependencies between suicide prevention and total wellness, 62 of the 95 initiatives will be incorporated into the new Total Health and Wellness Strategy (THWS). The seven lines and their respective statuses are detailed in [Annex C](#).

² The 2016 Progress Report on the Federal Framework for Suicide Prevention. December 2016.

³ CAF-VAC Joint Suicide Prevention Strategy.

⁴ Ibid.

1.1.2 Total Health and Wellness Strategy

The health and wellness of personnel is crucial to having operationally ready units and effective support staff across the Defence team. SSE dedicates nearly \$200 million in funds to creating a THWS in support of Defence Team members. The broad goals of the THWS are to develop an overarching strategy that considers psychosocial well-being in the workplace, the personal dimensions of health, and the physical work environment in order to improve individuals' quality of living, life and job satisfaction, and engagement at work. Over 200 programs and services under the THWS will benefit the entire Defence Team.

At the time of audit, the THWS was under development and scheduled for release in FY 2020/21. The strategy development team visited bases and wings across the country and consulted with health and wellness service providers as well as military and civilian Defence Team members to inform strategy development. As a significant contributing factor to total health and wellness, the CAF SPAP will ultimately be included as a key initiative under the umbrella of the THWS.

1.1.3 Key Stakeholders

Military Personnel Command

Reporting directly to the Chief of the Defence Staff (CDS), Military Personnel Command (MILPERSCOM) is responsible for military personnel management including, but not limited to, recruitment, education, health services, casualty support and career transition. MILPERSCOM is responsible, with the support of other Level One (L1) organizations, for the development of the CAF Suicide Prevention Strategy.

Key organizations under MILPERSCOM involved in implementing initiatives within the CAF SPAP include:

- Surgeon General
- Chaplain General
- Director General Morale and Welfare Services
- Director General Military Personnel Research and Analysis
- Director Strategic Force Development⁵ (DSFD)

DSFD is responsible for the coordination, monitoring and reporting on strategy development and implementation.

Program Implementers

The original 95 CAF SPAP initiatives fell under the responsibilities of various L1 organizations including MILPERSCOM, the Canadian Army, the Royal Canadian Navy, the Royal Canadian Air Force, Assistant Deputy Minister (Public Affairs) (ADM(PA)) and Vice Chief of the Defence Staff (VCDS). These organizations were responsible for supporting the development and implementation of the CAF SPAP, as well as for providing status and performance updates to MILPERSCOM and to share lessons learned and best practices.

⁵ Changed to Director Personnel Strategy, December 2019.

Since the approved realignment in 2018 toward the THWS, MILPERSCOM is now responsible for the implementation of 30 of the 33 SPAP initiatives. The remaining three initiatives belong to ADM(PA) and VCDS.

CAF-VAC Joint Steering Committee

The CAF-VAC Joint Steering Committee is a strategic decision-making body co-chaired by the Commander MILPERSCOM and the Deputy Minister (DM) of VAC.⁶ The Committee serves as a venue for consultation on important joint issues and initiatives, including the CAF-VAC Joint Suicide Prevention Strategy, which have significant impacts on both organizations. The Committee meets at regular intervals—approximately three or four times annually. Joint priorities are managed by joint working groups with specific mandates, deliverables and timelines. Progress is reported on a quarterly and annual basis, and includes updates on the delivery of joint priorities. The annual report is circulated across both organizations, to the CDS, the Minister of National Defence, and the Minister of Veterans Affairs.

1.1.4 Tools and Process

CAF SPAP Implementation and Performance Trackers

To facilitate information gathering and reporting, and to provide an overview of the assigned initiatives, DSFD has developed two tracking tools: an Implementation Tracker and a Performance Tracker.

- The Implementation Tracker is used to track progress of initiatives, as they are being developed and implemented.
- The Performance Tracker is used to track implemented initiatives, focusing on outcomes and performance metrics to determine whether programs are meeting their objectives.

Information in both systems is self-reported for individual initiatives.

1.2 Rationale

Suicide is a complex, society-wide issue that has no single solution. To fulfill its commitment of continuously improving its approach of providing appropriate support, care and services to ensure the total health and well-being of CAF members, the CAF developed a SPAP to mitigate suicide risks in the military community. Successful and timely implementation of the numerous initiatives within the SPAP is critical to building a resilient armed forces, and ensuring appropriate care and support are provided to those in need.

Given the importance of suicide prevention, the audit was included in the ADM (RS) Risk-based Audit Plan for FYs 2019/20 to 2021/22.

⁶ Terms of Reference, CAF-VAC Joint Steering Committee, May 2019.

1.3 Objective and Audit Criteria

The objective of the audit was to provide assurance that the CAF has an effective framework to monitor the implementation of programs and services to support suicide prevention.

The criteria used for this audit was the following:

1. DND/CAF has a governance process to monitor and provide oversight on the development and implementation of the CAF SPAP.
2. Communication and coordination are carried out to ensure development and implementation of the CAF SPAP.
3. DND/CAF has established a performance measurement framework to monitor progress and results.

The assessment against the audit criteria can be found in [Annex D](#).

1.4 Scope and Methodology

The scope of this audit included the review of the tools and processes in place to develop and implement the CAF SPAP, including the Implementation and Performance Trackers and a selection of initiatives under the SPAP from January 2017 to May 2019. Scope exclusions and the complete listing of audit methodology are outlined in [Annex E](#).

2.0 Findings and Recommendations

2.1 Governance

There is a governance process in place. Some policies and procedures require updating. ARA could be improved for key stakeholders to guide reporting of initiatives in SPAP implementation.

We expected to find:

- Policies and procedures are updated and relevant;
 - ARA are clearly defined and communicated;
 - Effective monitoring function is in place; and,
 - Key information is accurate and complete to support decision making.
-

2.1.1 Policy and Procedures

Suicide prevention in the CAF is supported and guided by multiple policies and strategies. This includes *Canadian Forces Administrative Order (CFAO) 19-44 Suicide Prevention* and *Defence Administrative Orders and Directive 5017-0 Mental Health*, both of which have not seen significant updates since their publication in 1996 and 2000, respectively. *CFAO 19-44 Suicide Prevention* includes the responsibilities, measures and procedures for suicide prevention, intervention and post-intervention. Due to the evolution of prevention efforts and policies in the CAF, roles of some key stakeholders, such as Chaplains, are not defined. As well, several supplementary directives and procedures have either been cancelled or not referenced within other policy, limiting the overall usefulness of these documents.

Interviewees expressed that, as supervisors, knowing what resources and tools are available is important to effectively support the well-being and mental health of their staff. Interviewees also expressed a need for additional guidance to increase their mental health awareness.

Subsequent to the audit, a working group with representatives from various organizations was created to discuss and update the previously noted policies. A preliminary review of an early draft found that significant updates and changes have been proposed to reflect current research and knowledge within the suicide prevention landscape.

Notable Practice

DSFD, in collaboration with Director Mental Health (DMH), engaged relevant stakeholders to gather input to update suicide prevention policies.

2.1.2 Accountabilities, Responsibilities and Authorities

While the CDS Strategic Initiating Directive (SID) outlines high-level ARA and direction for MILPERSCOM and other supporting L1s for the development phase of the SPAP, there is no document to specify the on-going functional and administrative authority of MILPERSCOM in coordinating, monitoring and

reporting the on-going SPAP implementation or the expected roles and responsibilities of the involved program implementers.

Interviews revealed that some roles in supporting the SPAP implementation were not clear, such as responding to update requests in a timely manner. This impacted their ability to fulfill their responsibilities. Well-defined and communicated ARA for key stakeholders, such as program Office of Primary Interest (OPI) provide continuity in an environment with cyclical turnover due to military postings and support the successful implementation of the CAF SPAP.

2.1.3 Monitoring and Verification of Information

MILPERSCOM is the lead in coordinating, monitoring and reporting on the SPAP progress and performance. DSFD monitors implementation through the use of its SharePoint tracker system, where program implementers report status updates and performance semi-annually. Information provided by the program OPIs is reported in the Annual Progress Report for the CDS.

Interviews confirmed that the information is self-reported and not validated prior to its inclusion in the Annual Progress Report. The involvement of program OPIs from various L1s reporting through different chains of command contributes to DSFD's difficulty in ensuring the reliability of performance information.

During the audit, MILPERSCOM was exploring options, including the use of the Armed Forces Council to provide further oversight.⁷

A review of the monitoring and reporting tools, including the SPAP tracker and the Annual Progress Report, found instances where information was inconsistent or incomplete. For example:

- Statuses for three programs were found to be inconsistent between what was reported in the Annual Progress Report on Suicide Prevention versus the SPAP tracker; and,
- Two of six programs on the Implementation Tracker had incomplete status updates.

Without sufficient oversight and verification, there is a risk that performance information may not be timely or reliable. Establishing a monitoring and independent verification function within the Department would promote consistency across the L1s and strengthen the overall integrity of information reported.

2.1.4 Conclusion

While a process is in place to ensure monitoring and reporting on the implementation of the CAF SPAP, policies and procedures related to suicide prevention need to be updated to provide stakeholders and officers with relevant direction and support. Well-defined and communicated ARA for key stakeholders would strengthen the process and the collection of timely and reliable information. To ensure accurate and complete information is provided to senior management to support informed decision making, self-

⁷ Armed Forces Council is one of the primary governance committees for the CAF. It provides the CDS with decision advice from the principal CAF commanders and Institutional military leaders, with respect to issues of strategic importance related to the overall administration, management and employment of the CAF, including Force Development, Force Generation and Force Employment, as well as Forces Posture and Readiness.

reporting tracking process requires risk-based oversight. These initiatives will also help in supporting implementation activities of future strategies, such as the THWS.

ADM(RS) Recommendation

1. It is recommended that MILPERSCOM, in consultation with program OPIs, strengthen its monitoring of the implementation of the CAF SPAP by:

- Updating its policies and process to provide clear direction and guidance in supporting suicide prevention;
- Defining ARA for key stakeholders of the SPAP implementation; and
- Incorporating risk-based oversight to support complete and reliable information for decision making.

OPI: MILPERSCOM

2.2 Communication

Programs and services are available to CAF members. Enhanced communication and collaboration between MILPERSCOM and the various program OPIs could increase member awareness of SPAP programs.

We expected to find:

- The SPAP and its available programs and resources are adequately communicated to raise awareness; and
 - Collaboration amongst program OPIs to reduce duplication and to share best practices and lessons learned.
-

2.2.1 Stakeholder Engagement

While focus groups indicated awareness of resources available, such as the Sentinel Program, some suggestions were made by CAF members to address their needs and potential gaps. These could help support the SPAP:

- a) Develop a centralized location for CAF members to access all wellness and support programs and services.
- b) Extend hours of operation for the Mental Health Clinic or increase the number of personnel to meet increasing demand of services.
- c) Provide training to supervisors and junior leaders earlier in their careers on how to support the well-being of people as well as those who are may be facing varying levels of mental health.
- d) Share relevant information within the unit after a suicide event occurs, and a formalized process that provides support and awareness.

Regular consultation with CAF members provides valuable feedback to improve resources available to CAF members.

2.2.2 Strategy and Program Awareness

CAF member awareness and knowledge of available resources for suicide prevention is contingent on internal communication. While a heavy emphasis has been placed on mental health, overall awareness of the SPAP and its programs and services is limited, based on interviews with local implementers and focus group results. While the majority of the focus group participants across bases and wings visited did not recall the strategy itself, results from the program awareness survey (programs listed in [Annex F](#)) revealed that nearly half of the 20 sampled program initiatives under the strategy had awareness levels higher than 50 percent as shown in Table 1.

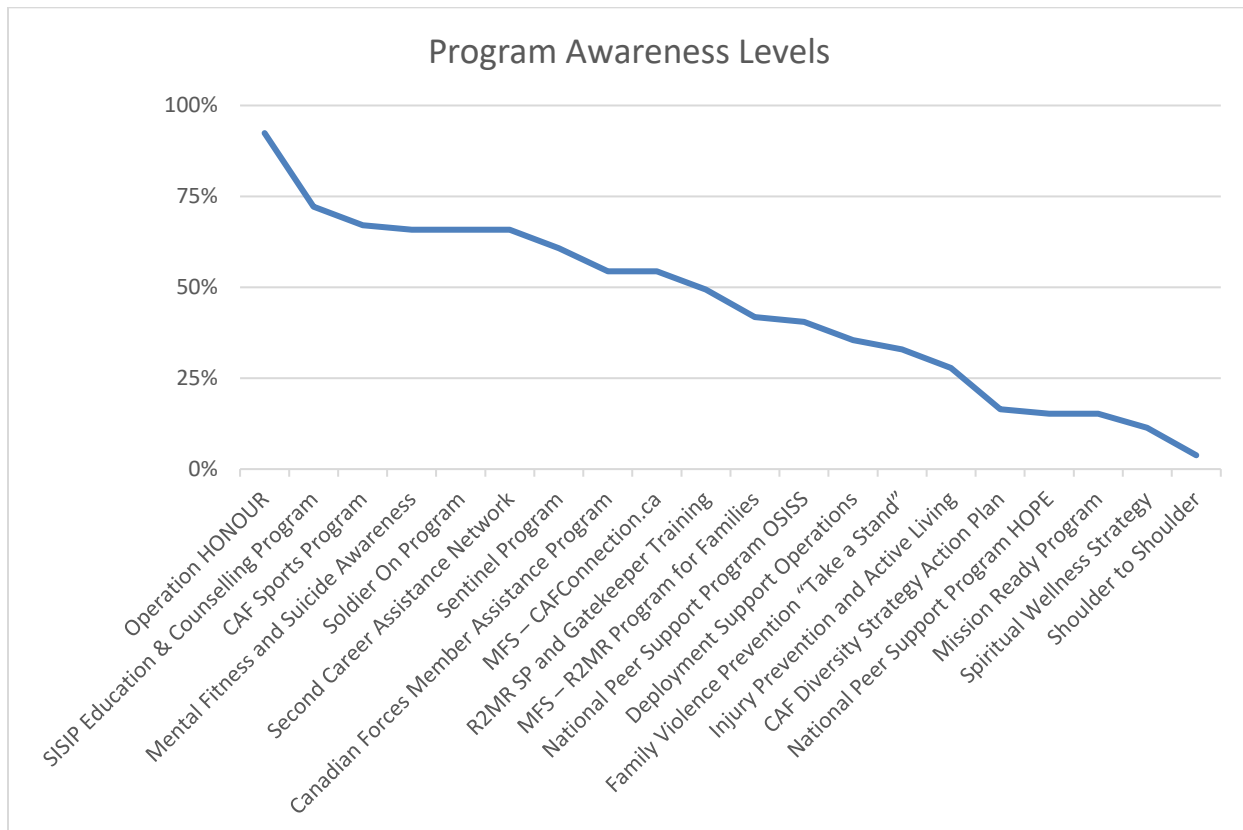


Figure 1. Program Awareness Levels. This chart shows focus group awareness levels of SPAP programs and services, prior to realignment in January 2019. See Annex F for list of full program names.

A communications plan and strategy was developed by ADM(PA) jointly with VAC for the release of the Joint Suicide Prevention Strategy. Without sufficient awareness of the SPAP and its initiatives, CAF members may not access the resources and tools that the Department has made available to support member well-being and reduce and prevent ideation, suicides and suicide attempts. Enhancing communication to increase awareness will further reinforce senior management’s commitment to the SPAP and overall betterment of CAF mental health.

2.2.3 Collaboration and Reporting

To support the complex and multi-dimensional issue of suicide prevention, it is crucial for responsible stakeholders to develop strong collaborative relationships to build capacity and provide an integrated network of programs to serve CAF members. DSFD worked with relevant stakeholders and identified interdependent programs in the development stage. There are currently limited opportunities or mechanisms available to foster the sharing of information, lessons learned and best practices between programs.

While MILPERSCOM, as the SPAP implementer, has an informal goal for quarterly status updates on all programs, this reporting requirement is not consistently understood amongst OPIs. For example, some believed the reporting frequency was semi-annual, while others mentioned reporting was as required. OPIs indicated proactive and early engagement of the SPAP implementer would be beneficial to

strengthening the collaborative relationship between the organizations. Subsequent to the audit, this relationship was notably improved through an initiative to engage key stakeholders in the development of communication plans. Additionally, MILPERSCOM expanded the distribution list for the Annual Progress Report to include key stakeholders.

2.2.4 Conclusion

While the CAF SPAP engaged program OPIs during the development phase, CAF members identified opportunities for improvement to SPAP initiatives to better meet their needs and to fill potential gaps in the existing network of suicide prevention initiatives. Regular consultation with CAF members would provide DSFD with valuable feedback to improve programs and services going forward. Further, continuous collaboration between programs, to enable sharing of information, lessons learned and best practices would also benefit SPAP implementation. Enhancing internal communications will increase program and service awareness and reinforce the CAF's commitment to supporting mental health.

ADM(RS) Recommendation

2. It is recommended that MILPERSCOM leverage existing mechanisms to continue:

- Soliciting CAF members input to address their needs, and support the proposed transition to the Total Health and Wellness Strategy; and
- Sharing information with program implementers.

OPI: MILPERSCOM

ADM(RS) Recommendation

3. It is recommended that MILPERSCOM and ADM(PA) jointly leverage existing communication channels and mechanisms to continue increasing CAF member awareness of and accessibility to the CAF's suicide prevention programs and services.

OPI: MILPERSCOM

OCI: ADM(PA)

2.3 Performance Measurement

There are elements of performance measurement for programs and services within the SPAP. Continued development of performance measures will enable the Department to better demonstrate progress and results.

We expected to find:

- Established SPAP objective and mission communicated;
 - A performance measurement framework that enables the determination of overall SPAP progress and effectiveness;
 - Clear alignment of program-level performance metrics to strategy level objectives; and,
 - Relevant, measurable and implemented performance indicators.
-

2.3.1 SPAP Objective and Performance Measurement

While SPAP objectives, mission and vision were found across several key documents including the published CAF-VAC Joint Suicide Prevention Strategy, the details between documents varied. The development and selection of appropriate performance indicators is driven by the objective(s) of the strategy. Without a clear objective, it is challenging to develop performance measures to assess strategy and program effectiveness. For example:

- The Strategy states its mission is to “prevent suicide and self-harm of Canadian Armed Forces members and Veterans by understanding, addressing, and mitigating the risks of suicide across the entire military and Veteran community.”⁸
- The CDS directive states the aim is to have the CAF “develop a comprehensive Suicide Prevention Strategy integrated across a spectrum of initiatives in order to reduce suicides, suicide attempts, and suicide ideation.”⁹
- A section within the CDS Directive titled “Specific Guidance and Considerations” notes that the goal will be “a reduction in CAF suicides with the ideal being zero suicides [...]”¹⁰

At the operational level, programs under the CAF SPAP are required to develop and report on performance. Several program OPIs interviewed expressed difficulties and concerns with determining appropriate and measurable indicators as well as aligning program goals and outcomes with the overall strategy objective. At the time of the audit, a review of the Performance Tracker (dated May 2019) found that more than half of the initiatives have complete metrics. Of those, six had indicators that measured the program outcomes. For example, the outcome of the Peer Support Program is to provide

⁸ Canadian Armed Forces and Veteran Affairs Canada Suicide Prevention Strategy 2017 978-0-660-20443-7.

⁹ CDS Strategic Initiating Directive – Suicide Prevention Strategy.

¹⁰ Ibid.

continued care for the next of kin and families of the fallen, which is measured by family satisfaction regarding services and support provided. The remaining nine initiatives measured the outputs as opposed to outcomes. For instance, the outcome of increasing education and awareness about suicide prevention cannot be fully measured based on the number of courses offered each year and in each official language.

While there are elements of performance measurement at the program level, there is no formal performance measurement framework to enable an overall evaluation of the SPAP's effectiveness. Suicide prevention is a non-linear, multifaceted subject, with suicide and ideation being tragic symptoms of many possible combinations of biological, genetic, psychological, social, cultural and environmental stressors. To claim that a prevention strategy is effective would require demonstration of a causal relationship between the strategy and the outcomes, to show that improvements are direct results of the strategy itself and not coincidental.¹¹ Similar to how suicide and ideation can be caused by a myriad of factors, reductions in suicide rates are equally complex and not easily attributable, as many other factors could influence outcomes.

Notwithstanding the previously noted challenges, Treasury Board's *Directive on Results* requires all programs¹² to establish a performance measurement strategy, which requires setting mandatory outcomes and performance indicators, and ensuring that reliable performance data is collected and available to manage programs and assess their effectiveness and efficiency. Recognizing the complexities in determining attribution, it may not be appropriate to assess the effectiveness of a prevention strategy based solely on quantitative data, such as a suicide rate¹³. Focusing on mitigating risk factors, such as promoting responsible media coverage and raising mental health awareness through continued education and training and focusing on mental health, may allow shorter term measurable metrics to determine strategy effectiveness, while continuing to work towards longer term strategy objectives such as a reduction in suicide rates.

Notable Practice

DMH tracks data on suicide attempts and recommendations from reviews to improve processes and quality of care.

2.3.2 Conclusion

To determine whether a strategy or program is working as intended, clear objectives must be established to support a performance measurement framework. Given the complex nature of suicide, and attribution and causation of suicide prevention, effectively measuring the Strategy's performance will continue to be a challenge. Having a clear strategy objective and using a combination of shorter and longer term performance metrics will enable the Department to demonstrate how the CAF SPAP is generating its intended results and fulfilling reporting requirements.

¹¹ "8.1 Need for outcome measures" Evaluation of Suicide Prevention Activities. Australian Government Department of Health. January 2014.

¹² Directive on Results, Treasury Board Policy, July 2017. Program is defined as "individual or groups of services, activities or combinations thereof that are managed together within the department and focus on a specific set of outputs, outcomes or service levels."

¹³ "8.2 Challenges of measuring outcomes for suicide prevention" Evaluation of Suicide Prevention Activities. Australian Government Department of Health. January 2014.

ADM(RS) Recommendation

4. It is recommended that MILPERSCOM, in collaboration with VCDS and SPAP program implementers, continue to establish and refine performance measures, with specific and measurable objectives and outcomes, to demonstrate the delivery of SPAP initiatives.

OPI: MILPERSCOM

OCI: VCDS and CAF SPAP Program Implementers

3.0 General Conclusion

Suicide is a complex, society-wide issue that has no single solution. The CAF developed the SPAP with the “aim of mitigating suicide risks in the military community.” Launched in 2017, the CAF Suicide Prevention Strategy demonstrates the strong commitment of the Defence Team in suicide prevention. Successful implementation of the vast initiatives within the strategy is critical to removing barriers to care, building a resilient armed forces and ensuring appropriate care and support are provided to those who need it.

The implementation of the CAF SPAP requires robust oversight, monitoring and reporting mechanisms to ensure information is complete, accurate and reliable. The ARA of key stakeholders should be clearly defined and communicated to ensure effective monitoring, reporting and oversight. To ensure senior management receives accurate and complete information to support informed decision making, risk-based oversight of self-reported initiative tracking is required.

Member engagement and consultation can provide valuable feedback to enable continuous improvement of programs and services. Communication and collaboration can be further enhanced to increase awareness of the strategy and programs, and to foster closer working relationships amongst the MILPERSCOM and program implementers to enable sharing of information and lessons learned.

Suicide prevention is a multifaceted subject, with suicide and ideation being symptoms of a greater mental health issue, so the measure of a strategy’s effectiveness is expectedly complex. Continued development of performance measures will enable the Department to better demonstrate progress and results. This will enable program implementers to align their program outcomes and indicators with those of the Strategy and further allow SPAP implementers to monitor and measure their overall progress.

Annex A—Management Action Plan

ADM(RS) uses recommendation significance criteria as follows:

Very High—Controls are not in place. Important issues have been identified and will have a significant negative impact on operations.

High—Controls are inadequate. Important issues are identified that could negatively impact the achievement of program/operational objectives.

Moderate—Controls are in place but are not being sufficiently complied with. Issues are identified that could negatively impact the efficiency and effectiveness of operations.

Low—Controls are in place but the level of compliance varies.

Very Low—Controls are in place with no level of variance.

Governance. There is a governance process in place. Some policies and procedures require updating. ARA could be improved for key stakeholders to guide reporting of initiatives in SPAP implementation.

ADM(RS) Recommendation (Moderate)

1. It is recommended that MILPERSCOM, in consultation with program OPIs, strengthen its monitoring of the implementation of the CAF SPAP by:

- Updating its policies and process to provide clear direction and guidance in supporting suicide prevention;
- Defining ARA for key stakeholders of the SPAP implementation; and
- Incorporating risk-based oversight to support complete and reliable information for decision making.

The MAP should not be read in isolation, but along with the CDS Frag O to the SPAP which will soon be released.

Agree with Recommendation: Yes

OPI: MILPERSCOM

OCI: CMPSP

Management Action

Action 1.1 DAOD 5017-0 Mental Health and MILPERSINST on Suicide Prevention

Target Date: September 2020

Action 1.2 SPAP Frag O

Target Date: March 2020

Communication. Programs and services are available to CAF members. Enhanced communication and collaboration between MILPERSCOM and the various program OPIs could increase member awareness of SPAP programs.

ADM(RS) Recommendation (Moderate)

2. It is recommended that MILPERSCOM leverage existing mechanisms to continue:

- Soliciting CAF members input to address their needs, and support the proposed transition to the Total Health and Wellness Strategy; and
- Sharing information with program implementers.

The MAP should not be read in isolation, but along with the CDS Frag O to the SPAP which will soon be released.

Agree with Recommendation: Yes

OPI: MILPERSCOM

OCI: CMPSP and DGMPRA

Management Action

Action 2.1 Your Say Survey scheduled every 2 years

Target Date: April 2019

Next date: Fall 2020

Action 2.2 Quarterly teleconference with implementers

Target Date: February 2020

Overall Completion Date: ongoing

ADM(RS) Recommendation (Moderate)

3. It is recommended that MILPERSCOM and ADM(PA) jointly leverage existing communication channels and mechanisms to continue increasing CAF member awareness of and accessibility to the CAF's suicide prevention programs and services.

The MAP should not be read in isolation, but along with the CDS Frag O to the SPAP which will soon be released.

Agree with Recommendation: Yes

OPI: MILPERSCOM

OCI: ADM(PA)

Management Action

Action 3.1 Communications Plan

Target Date: Completed 2018

Specific communications plan initiatives are ongoing, as required.

Overall Completion Date: ongoing

Performance Measurement. There are elements of performance measurement for programs and services within the SPAP. Continued development of performance measures will enable the Department to better demonstrate progress and results.

ADM(RS) Recommendation (Moderate)

4. It is recommended that MILPERSCOM, in collaboration with VCDS and SPAP program implementers, continue to establish and refine performance measures, with specific and measurable objectives and outcomes, to demonstrate the delivery of SPAP initiatives.

The MAP should not be read in isolation, but along with the CDS Frag O to the SPAP which will soon be released.

Agree with Recommendation: Yes

OPI: MILPERSCOM

OCI: CMPSPP and DGMPRA

Management Action

Action 4.1 Data collection to support performance measurement

Target Date: October 2020 annual report to assess compliance

Bi-annually to assess perceived confidence supporting someone in crisis

Overall Completion Date: ongoing

Annex B—Expert Panel Recommendations

Serial #	Expert Panel Recommendation (2016)
1	Create the position of a CAF Suicide Prevention Quality Improvement Coordinator
2	Conduct a systematic review of CAF member suicides since 2010
3	Increase suicide risk assessment and safety planning training
4	Conduct a needs assessment for suicide-specific psychosocial interventions
5	Consider implementing the Caring Contacts protocol following mental health crisis
6	Review best practices for screening for mental disorders and suicidal behaviour during recruitment, and pre-deployment
7	Create a working group to develop supports for CAF members transitioning to civilian life
8	Offer integrated treatment of addictions and mental health disorders
9	Consider novel methods for delivery of psychological and pharmacological interventions
10	Encourage safe media reporting of suicides
11	Engage patients and families in program planning

Table B-1. Expert Panel Recommendations. This table outlines the 11 recommendations made by the mental Health Expert Panel on Suicide prevention.

Annex C—Breakdown of CAF SPAP Initiatives by Lines of Effort

Lines of Effort	Total	Existing	Enhancing	In Development	Proposed
1) Communicating, Engaging & Educating	8	4	2	2	0
2) Building & Supporting Resilient CAF Members & Veterans	19	8	8	3	0
3) Connecting & Strengthening CAF Members & Veterans through Families and Community	14	3	11	0	0
4) Providing Timely Access to Effective Health Care & Support	9	1	1	7	0
5) Promoting Well-being of CAF Members through their Transition to Civilian Life	19	0	4	15	0
6) Protocols, Policies, and Processes to Better Manage Risk & Stress	7	2	3	2	0
7) Continuously Improve Through Research, Analysis and Incorporation of Lessons Learned and Best Practices	19	4	4	2	9
Total	95	22	33	31	9

Table C-1. Breakdown of CAF CPAP Initiatives by Lines of Effort. This table shows the breakdown of 95 initiatives under the SPAP by lines of effort, as well as their initial program status.

Annex D—Audit Criteria

Criteria Assessment

The audit criteria were assessed using the following levels:

Assessment Level and Description

Level 1—Satisfactory

Level 2—Needs Minor Improvement

Level 3—Needs Moderate Improvement

Level 4—Needs Significant Improvement

Level 5—Unsatisfactory

Governance

1. DND/CAF has a governance process to effectively monitor and provide oversight on the development and implementation of the CAF SPAP.

Assessment Level [Level 2] – A governance structure is in place to support CAF SPAP objectives. Some policies and procedures require updating. Defined ARA could be improved for some key stakeholders.

Communication and Collaboration

2. Communication and consistent coordination are carried out to ensure effective development and implementation of the CAF SPAP.

Assessment Level [Level 3] –Communication and collaboration between and amongst MILPERSCOM and the various program OPIs could be enhanced to support achievement of CAF SPAP objectives.

Performance Measurement

3. DND/CAF has established a performance measurement framework to effectively monitor progress and results.

Assessment Level [Level 2] – There are elements of performance measurement for programs and services within the SPAP.

Sources of Criteria

Governance:

- Reference to: Committee of Sponsoring Organizations of the Treadway Commission (COSO), Internal Control – Integrated Framework, March 2013

Communication and Collaboration:

- Reference to: Committee of Sponsoring Organizations of the Treadway Commission (COSO), Internal Control – Integrated Framework, March 2013
- Interviews with subject matter experts

Performance Measurement:

- Reference to: Committee of Sponsoring Organizations of the Treadway Commission (COSO), Internal Control – Integrated Framework, March 2013
- Directive of Results, TBS Policy, July 2017
- Interviews with subject matter experts

Annex E—Audit Scope, Methodology and Statement of Conformance

Scope Exclusions

The following were excluded from the scope of this audit:

- Military Transition line of effort. Why – While this is an essential area of work, it was recently subjected to an Evaluation.
- The work of VAC. Why – Outside of the mandate of DND internal audit.
- The work of the CAF-VAC Joint Steering Committee. Why – While this key governance committee was consulted during the audit, its work, mandate and initiatives were not reviewed.
- Total Health and Wellness Strategy. Why – The Strategy was under development during the planning and conduct phases of this audit.
- Suicide prevention related to civilians. Why – SPAP is military focused. Different programs exist to support civilians.

Methodology

The audit results for this report are based on the following:

- Review of the CAF-VAC Joint Suicide Prevention Strategy, CAF SPAP trackers, applicable policies and procedures;
- Review of non-statistical sample of 15 initiatives (see [Annex G](#));
- Interviews with staff from MILPERSCOM, including the CAF SPAP implementation team and program implementers within their associated initiatives;
- Visits to CAF bases and wings Canadian Forces Base (CFB) Petawawa, CFB Edmonton, CFB Greenwood, CFB Halifax and CFB Shearwater to conduct the following activities:
 - Site tours to observe members in garrison and better understand the base/wing culture;
 - Interviews with base/wing commanding officers;
 - Interviews with 39 local level program OPIs; and
 - Consultation with 79 CAF members through focus groups.
- Analysis of Medical Professional Technical Suicide Review and Board of Inquiry data;
- Consultation with the DND/CAF and VAC Ombudsmen; and
- Consultation with a performance measurement subject matter expert.

Statement of Conformance

The audit findings and conclusions contained in this report are based on sufficient and appropriate audit evidence gathered in accordance with procedures that meet the Institute of Internal Auditors' *International Standards for the Professional Practice of Internal Auditing*. The audit thus conforms to the Institute of Internal Auditors' *International Standards for the Professional Practice of Internal Auditing* as supported by the results of the quality assurance and improvement program. The opinions expressed in this report are based on conditions as they existed at the time of the audit and apply only to the entity examined.

Annex F—Selected Programs Included in Awareness Survey

Serial number	Program Name
1	Road to Mental Readiness (R2MR) Suicide Prevention and Gatekeeper Training
2	National Peer Support Program Operational Stress Injury Social Support (OSISS)
3	Canadian Forces Member Assistance Program (CFMAP)
4	Military Family Services – Road to Mental Readiness (R2MR) Program for Families
5	Shoulder to Shoulder
6	Mental Fitness and Suicide Awareness Training
7	Sentinel Program
8	National Peer Support Program (NPSP) Helping Our Peers by Providing Empathy (HOPE)
9	Injury Prevention and Active Living
10	Service Income Security Insurance Plan (SISIP) Personal Financial Education Program & Financial Counselling Program
11	Operation HONOUR
12	CAF Sports Program
13	Soldier On Program
14	Second Career Assistance Network (SCAN)
15	CAF Diversity Strategy Action Plan
16	Mission Ready Program
17	Military Family Services – CAFConnection.ca
18	Deployment Support Operations
19	Family Violence Prevention Awareness Campaign “Take a Stand”
20	Spiritual Wellness Strategy

Table F-1. Selected Programs in the Awareness Survey. This table lists 20 programs included in the working group awareness survey.

Annex G—Selection of Initiatives Sample

Serial #	Initiative #	Initiative	Responsible Organization
1	1.1	Produce a CAF Suicide Prevention Communication Plan for both external and internal audiences	ADM(PA)
2	1.2	CAF/DND Mental Health in the Workplace Strategy	VCDS D Safety G
3	1.4	Mental Fitness & Suicide Awareness Training	MILPERSCOM PSP
4	3.9	Shoulder to Shoulder	MILPERSCOM CFMWS
5	3.13	National Peer Support Program (NPSP) Helping Our Peers by Providing Empathy (HOPE) Program	MILPERSCOM DCSM
6	3.14	Sentinel Program	MILPERSCOM Chap Gen
7	4.2	Explore the Implementation of suicide-specific training for clinicians such as “Suicide Risk Assessment and Safety Planning” (2016 Expert Panel Recommendation #3)	MILPERSCOM DMH
8	4.3	Enhance the application of advanced communications technology to support health care delivery (2016 Expert Panel Recommendation #9)	MILPERSCOM DMH
9	4.7	PSP Deployment Support Ops to add Suicide Prevention Program	MILPERSCOM DMH
10	6.1	Review and Update Policies and Guidance Related to, or Impacting on, Suicidality and Mental Health	MILPERSCOM DSFD
11	6.2	Review and Update Policies and Guidance Related to Suicide Prevention, Intervention and Postvention	MILPERSCOM DSFD
12	6.6	Policing Persons in Crisis Military Police (MP) Training & Protocols for dealing with Persons in Mental Crisis (including suicidality)	MILPERSCOM DMH
13	7.6	Consider Implementing psychosocial protocols such as “Caring Contacts” following Mental Health Crisis. (2016 Expert Panel Recommendation #5)	MILPERSCOM DMH
14	7.7	Leverage Occupational Health and Safety (OHS) and General Safety Officers (GSO) to Support SP Program	VCDS D Safety G
15	7.13	Annual Progress Review	MILPERSCOM DSFD

Table G-1. Selection of Initiatives Sample. This table lists the 15 initiatives selected for review during conduct phase work.

Note: All initiatives listed in the CAF SPAP tracker were reviewed when evaluating performance measurement.