

Appendix 1: Suicide Prevention Action Plan 2025–2029 Quarterly update (1 January 2026 – 31 March 2026)

Action	Action and completion date	Agency	Previous status	Current status	Agency commentary and key milestones	Risks	RAG Status <sup>1</sup>
<b>1. Improve access to suicide prevention and postvention supports</b>  <i>Impact: More people in suicidal distress or impacted by suicide can access the support they need, when they need it</i>	Establish a suicide prevention community fund focused on populations with specific needs (eg, maternal, youth and rural communities) to complement existing Māori and Pacific funds (by 31 Dec 2025).	Health NZ	Partially complete	Completed	<ul style="list-style-type: none"> <li>The Mental Health Foundation launched the All-of-Population Suicide Prevention Community Fund to support community-led initiatives that respond to suicide prevention needs across the population. The fund closed on 17 March 2026 and is currently in the assessment phase, with successful recipients expected to be announced in May 2026.</li> </ul>	<ul style="list-style-type: none"> <li>N/A</li> </ul>	N/A
	Establish peer support roles in eight emergency departments for people presenting with mental health and addiction needs (by 31 Oct 2025).	Health NZ	Partially complete	Completed	<ul style="list-style-type: none"> <li>Peer support specialists will have commenced in all of the eight initial emergency departments (EDs) identified as part of the initial tranche, with Tauranga being the final one to launch, at the end of January 2026.</li> <li>Procurement process for evaluation is complete and the evaluation of round one is currently getting underway</li> <li>Prioritisation of a further three EDs to establish peer support roles is progressing well, with Hawkes Bay, Hutt Valley and Whangarei selected as the locations.</li> </ul>	<ul style="list-style-type: none"> <li>N/A</li> </ul>	N/A
	Establish six crisis recovery cafés/hubs/services, which are regionally led and designed with communities, to respond to local and specific population group needs (by 30 June 2026).	Health NZ	On track	Partially complete	<ul style="list-style-type: none"> <li>New Crisis recovery cafés (cafés) are now operational in Whanganui, Counties Manukau, Christchurch and Dunedin.</li> <li>Boosted cafés have also been launched in Whakatane and New Plymouth.</li> <li>A further tranche of cafés are in negotiation with regions – these will be in Whangārei, Hastings and a South Island location (likely Invercargill or Nelson).</li> <li>Funding for an additional two cafés has been prioritised. These are scheduled to come on stream in quarter one 2026/27 and will be in Waikato and Central Auckland.</li> </ul>	<ul style="list-style-type: none"> <li>The ability to stand up cafés in line with agreed timeframes remains challenging given the large amount of co-design that is required to ensure the model of care is tailored and appropriate to the specific location and service user group.</li> </ul>	Amber
	Evaluate the six crisis recovery cafés/hubs/ services (by 30 June 2028).	Health NZ	On track	On track	<ul style="list-style-type: none"> <li>Evaluation of the six crisis recovery cafes/hubs/services will begin once they are all established.</li> </ul>	<ul style="list-style-type: none"> <li>N/A</li> </ul>	Green
	Improve suicide bereavement support services by improving access to and the timeliness of initial supports after a suicide death, and responsiveness to population groups (by 31 Dec 2028).	Health NZ	On track	On track	<p>Reconfiguration of Suicide Postvention Services continues to progress. Key highlights for this period:</p> <ul style="list-style-type: none"> <li>Te Ahi Kā o te Whānau (National Framework) and ngā pou (pillars of suicide prevention and postvention concepts) have been finalised and expected to be endorsed by ELT in early April for implementation to get underway. This framework establishes a nationally consistent foundation focused on:                             <ol style="list-style-type: none"> <li>timely, coordinated initial supports for whānau following a suicide death</li> <li>population-wide accessibility balanced with locally co-designed, culturally responsive delivery</li> <li>integration across clinical, community, and lived-experience-led responses</li> </ol> </li> <li>This approach is intended to strengthen early engagement, reduce fragmentation, and improve responsiveness for diverse population groups while maintaining clinical safety.</li> <li>The next phase of the reconfiguration is focussed on reorientation of suicide prevention and postvention roles (eg, alignment of position profiles) across Health NZ. Advice is being prepared for ELT consideration in mid-April</li> <li>Procurement for new suicide prevention and postvention services are yet to commence due to resourcing challenges. Recruitment is underway with dedicated resource expected to be in place early next quarter. The aim is to have these services recommissioned and stood up in the new financial year.</li> <li>Existing suicide postvention services, including Te Aho (CASA) and Te Rau Ora, remain in place to 30 June 2026, and may require a short-term extension (up to three or six months maximum) to provide continuity of service while the procurement process is completed.</li> <li>Coroners Court – Information Sharing: We’re continuing to work closely with the coroner, who has expressed their support for facilitating information sharing once a permanent provider is established. To formalise this arrangement, a memorandum of understanding will be developed between Health New Zealand  Te Whatu Ora and the Coroners Court. Please note that this action is scheduled to take place in Q4.</li> </ul>	<ul style="list-style-type: none"> <li>The transition may result in some service disruption due to insufficient time to establish new services, and the potential loss of institutional knowledge, impacting both service users and referral pathways.</li> <li>There are time pressures and competing priorities to develop robust systems.</li> <li>Access to coronial information and effective sharing across new and existing providers is constrained by privacy protocols and information-sharing limitations.</li> <li>An information sharing agreement to be put in place with the Coroners Court for all suicide postvention services to be able to operate effectively.</li> </ul>	Green

<sup>1</sup>Green: on track to meet deliverable date and no substantial risks. Amber: missed deliverable date by <1 quarter/ will not meet deliverable date or minor risks likely to result in delay to delivery of action. Red: missed deliverable date by >1 quarter or significant risks/ issues impacting on delivery of the action.

Action	Action and completion date	Agency	Previous status	Current status	Agency commentary and key milestones	Risks	RAG Status <sup>1</sup>
	Increase visibility of mental health and addiction resources on the Heartlands service centre website (by 31 July 2025).	Ministry of Social Development (MSD)	<b>Completed</b>	<b>Completed</b>	<ul style="list-style-type: none"> <li>Link to the 1737 website added on Heartlands website.</li> <li>A 1737 banner was inserted on the Heartlands website on 6 November 2025.</li> </ul>	N/A	N/A
	Share and improve awareness of available suicide prevention resources in partnership with existing rural and primary industries stakeholders and partners (by 31 Dec 2025).	Ministry for Primary Industries (MPI)	<b>Partially complete</b>	<b>Completed</b>	<ul style="list-style-type: none"> <li>MPI's list of suicide prevention and wider mental wellbeing resources and support services has been shared with key industry partners, who have provided further input to the list, and with on-the-ground staff.</li> </ul>	N/A	N/A
	Refresh the organisational suicide prevention and postvention action plan (by 31 Dec 2025).	Department of Corrections	<b>Partially complete</b>	<b>Complete</b>	<ul style="list-style-type: none"> <li>The action has been approved, with rollout scheduled over the coming months. Subsequent refinements have produced a prioritised set of high-value deliverable actions.</li> <li>Several actions from the initial draft of the refreshed plan are already underway and have been incorporated into the refreshed plan.</li> </ul>	<ul style="list-style-type: none"> <li>Delivery of prioritised actions depends on cross-directorate and inter-agency coordination, creating risk to timeline given the scale and complexity of implementation.</li> </ul>	N/A <sup>2</sup>
	Update operating procedures for when people in custody or care express suicidal ideation or intentions.	New Zealand Police	<b>Completed</b>	<b>Completed</b>	<ul style="list-style-type: none"> <li>Action was completed in June 2025.</li> </ul>	N/A	N/A

<sup>2</sup> Action updated on 12 May 2026

Action	Action and completion date	Agency	Previous status	Current status	Commentary and key milestones	Risks	RAG Status
<p><b>2. Grow a capable and confident suicide prevention and postvention workforce</b></p> <p><i>Impact: The capacity and capability across suicide prevention workforce is increased and communities, families and whānau are better equipped</i></p>	Expand suicide prevention training and guidance to strengthen existing resources; increase access to training; reach wider audiences; and better equip workforces, communities, families and whānau to support people who may experience suicidal distress (by 31 Dec 2025).	Health NZ	Completed	Completed	<ul style="list-style-type: none"> <li>Three population group programmes remain on track to deliver the expansion of training and guidance.</li> <li>Asian Family Services (AFS) are delivering suicide prevention and postvention training (in-person or online) for the sector, mental health clinicians, and communities, supported through additional funding to increase training reach and volume and/or as part of existing workplan.</li> <li>Te Rau Ora and Le Va are on track to deliver their training roll out in Q4.</li> </ul>	<ul style="list-style-type: none"> <li>Some funding constraints but these are being worked through to assist with the initial development and then ongoing delivery of the four different components.</li> </ul>	N/A
	Establish national consistency for the suicide prevention and postvention coordinator workforce. This includes developing induction materials and best practice supports for suicide prevention and postvention coordinators and Kia Piki te Ora workforces (by 30 June 2026).	Health NZ	On track	On track	<ul style="list-style-type: none"> <li>Le Va is developing a training package for the national network of postvention coordinators, scheduled to launch on 1 July 2026.</li> <li>Te Rau Ora has established training for Kia Piki te Ora and will deliver this in Q4.</li> <li>In parallel, Hauora Māori Services continues to work with the national Suicide Pre-Postvention Network and the regional commissioning teams to align workforce development with the national framework and strategic direction.</li> </ul>	<ul style="list-style-type: none"> <li>Continued conversations and negotiations will need to be prioritised to ensure an information sharing agreement is in place with the Coroners Court for all suicide postvention services to be able to operate effectively.</li> <li>Unanticipated delays in the programme reorientation to achieve national consistency across Suicide Prevention and Postvention workforce. This is being monitored closely to ensure any change in timelines for completion are managed within expectations.</li> </ul>	
	Publish a national competency-based framework for a range of workforces and community settings such as community organisations, maraes, schools, and family and whānau members (by 30 June 2026).	Ministry of Health	On track	On track	<ul style="list-style-type: none"> <li>Work continues on updating the competency framework ahead of finalising before 30 June 2026.</li> </ul>	<ul style="list-style-type: none"> <li>Adequate time needed for consultation, particularly with Health NZ, to ensure framework is reflective of workforces and community settings</li> </ul>	
	Develop and publish enhanced guidance for health professionals on assessing and supporting people who might be suicidal or experiencing suicidal distress (by 30 June 2028).	Ministry of Health	On track	On track	<ul style="list-style-type: none"> <li>Scoping work for this action is continuing and is expected to be completed in mid-2026.</li> </ul>	N/A	
	Update practice guidance and supports for social workers and carers working with children and young people who might be suicidal or experiencing suicidal distress (by 30 June 2026).	Oranga Tamariki	On track	On track	<ul style="list-style-type: none"> <li>The project to update practice guidance and supports for social workers and carers began in February 2026.</li> </ul>	N/A	
	Promote the existing training module for frontline staff focused on early identification of clients who may experience suicidal distress (by 30 June 2027).	MSD	On track	On track	<ul style="list-style-type: none"> <li>The suicide prevention learning module has been made into a series of three e-learning modules which is a compulsory component of the service delivery induction, ensuring all new staff complete this within six months of their initial onboarding.</li> <li>There is continued monitoring of completion rate trends to inform where promotion might be targeted for best results.</li> </ul>	<ul style="list-style-type: none"> <li>Operational volume peaks may impact on ability for staff to complete the training modules.</li> </ul>	
	Collaborate with other agencies to support the development of prevention and practice knowledge for 37 diverse providers delivering Elder Abuse Response Services (EARS) to NZ Pākeha, Māori, Pacific, and Southeast Asian older people experiencing, or who may experience, elder abuse (by 30 June 2028).	MSD	On track	On track	<ul style="list-style-type: none"> <li>MSD has commissioned work to build their evidence base on older people's experiences of abuse to better understand which types of interventions work best. Work is underway with a supplier to confirm the evaluation plan and approach. This work will help inform future commissioning of EARS, including how to build prevention and practice knowledge.</li> </ul>	N/A	

Action	Action and completion date	Agency	Previous status	Current status	Commentary and key milestones	Risks	RAG Status
<b>3. Strengthen the focus on prevention and early intervention</b>  <i>Impact: There are safer and more supportive environments, particularly for children and young people</i>	Develop and implement a national alcohol screening and brief intervention programme. Invest in initiatives that denormalise alcohol in community environment (from 1 July 2025).	Health NZ	On track	On track	<ul style="list-style-type: none"> <li>The Screening, Briefing intervention, and Referral to Treatment (SBIRT) advisory group have had their second meeting in March 2026.</li> <li>The SBIRT workforce training and support package is in the design and development phase.</li> <li>Continuing support for rollout of alcohol and other drugs SBIRT in seven pilot sites. Planning for 2 pilot trainings in SBIRT pilot sites of workforce SBIRT package over April/May.</li> <li>Procurement underway for further SBIRT tool; and resources development to assist healthcare and other setting delivery.</li> </ul>	• N/A	
	Create safer physical environments in inpatient mental health and addiction facilities including progressing work to remediate and minimise ligature points (from 1 July 2025).	Health NZ	On track	On track	<ul style="list-style-type: none"> <li>Round 1 Community Action Fund (CAF) surveys have been completed by funded organisations. An impact report (summarising reporting, survey results and case studies) is being prepared due mid-April.</li> <li>Community support for alcohol policy and licensing contract is in place to deliver this work. An initial planning session was held in March 2026. A performance and learning framework have been developed with the successful organisation.</li> <li>2026 season project plans for 12 Rugby Football Unions and 5 National Provincial Unions are due at the end of March.</li> <li>Attitudes and Behaviours survey for Sports initiatives has been received showing strong impact of sports-based initiatives to denormalise alcohol.</li> <li>Round 1 Pacific fund surveys have been completed by funded organisations. An impact report (summarising reporting, survey results and case studies) is being prepared and due mid-April.</li> </ul>	• N/A	
	Launch a new wellbeing promotion campaign that can respond to significant events, with an initial focus on youth, but flexibility to target other groups based on needs (by 31 July 2025).	Health NZ	Completed	Completed	<ul style="list-style-type: none"> <li>The wellbeing promotion campaign includes a community grants components that was launched on 7 October 2025 by the Mental Health Foundation, that has funding for the community-led activities that strengthen connection, resilience, and wellbeing, as well as training or workshops that build long-term wellbeing skills (you can find more information here: <a href="https://mentalhealth.org.nz/top-up-community-grants">mentalhealth.org.nz/top-up-community-grants</a>).</li> <li>This is one part of a wider grant programme</li> </ul>	N/A	N/A
	Develop and implement a cross-government work programme focused on maternal mental health (by 31 Oct 2025).	Ministry of Health	Completed	Completed	<ul style="list-style-type: none"> <li>A cross-government work programme to support maternal mental health under the Child and Youth Strategy has been developed and was approved by Child &amp; Youth Ministers on 15 October 2025.</li> <li>Initial work programme is for Health agencies only, but greater cross-agency focus over time</li> <li>Implementation is underway, including development of a maternal mental health investment package.</li> </ul>	• Resourcing for investment package is still to be confirmed.	N/A
	Invest in improved acute, respite, or crisis recovery services for young people in two regions working with local communities and young people to identify opportunities to enhance existing services (by 30 June 2026).	Health NZ	On track	On track	<ul style="list-style-type: none"> <li>Discussions on the location of these services are well advanced with the regions, with a decision imminent.</li> </ul>	N/A	
	Develop and publish supplementary resources to support the implementation of the suicide media guidelines (by 31 Dec 2026).	Health NZ	On track	On track	<ul style="list-style-type: none"> <li>The first resource, <i>Safely reporting about suicide: a guide for media and digital creators and moderators</i> is now live and available both as an electronic copy and in print.</li> </ul>	N/A	
	Update available information and communication to ensure mental health resources are suitable for older people and their families and whānau, so they know where to go for support, and so that responders can better address the needs of older clients (by 30 June 2028)	Office for Seniors	On track	On track	<ul style="list-style-type: none"> <li>Work commissioned to adapt, for New Zealand, an online learning tool for late life self-harm and suicide prevention.</li> <li>Pilot Testing with 50 non-professional users (NGOs, carers, etc).</li> <li>To then pilot test cultural inclusivity.</li> <li>Final report tool will then be completed, and journal article published.</li> <li>Followed by promotion of tool to potential users.</li> </ul>	<ul style="list-style-type: none"> <li>Availability of resources at Auckland University for this work.</li> <li>Getting ethics approval.</li> <li>Lack of availability of Māori and Pacific old age professionals to test tool.</li> <li>Availability of resources at Auckland University to undertake this work.</li> </ul>	

Action	Action and completion date	Agency	Previous status	Current status	Commentary and key milestones	Risks	RAG Status
	Strengthen support provided to students experiencing self-harm and after a suicide through implementation of postvention and self-harm resources in schools (by 31 Dec 2027).	Ministry of Education	<b>On track</b>	<b>On track</b>	<ul style="list-style-type: none"> <li>Postvention and self-harm resources for schools were published on the Ministry of Education's website in December 2025. A copy is available at: <a href="http://www.education.govt.nz/news/support-schools-responding-self-harm-and-suspected-suicide">www.education.govt.nz/news/support-schools-responding-self-harm-and-suspected-suicide</a>.</li> <li>An implementation plan is in development and expected to be finalised by March 2026.</li> </ul>	N/A	
	Promote appropriate communication about suicide using the updated postvention and self-harm resources for school staff and whānau (by 31 Dec 2027).	Ministry of Education	<b>On track</b>	<b>On track</b>		N/A	
	Promote use of the guidance and resources for engaging with clients who are experiencing distress through the digital internal noticeboard system for frontline service centre staff (by 30 Sep 2025)	MSD	<b>Completed</b>	<b>Completed</b>	<ul style="list-style-type: none"> <li>Due to the digital internal noticeboard system not being available for the foreseeable future, alternative communication channels such as the MSD staff intranet and regular all staff updates have and will continue to be used to promote the use of guidance and resources.</li> <li>The alternative channels used reach all MSD staff and can also be targeted to leadership or specific operational teams. This allows for more flexibility of messaging and linking to relevant events/topics.</li> </ul>	N/A	N/A

PROACTIVELY RELEASED

Action	Action and completion date	Agency	Previous status	Current status	Commentary and key milestones	Risks	RAG Status
<b>4. Improve the effectiveness of suicide prevention and our understanding of suicide</b>  <i>Impact: More effective and efficient suicide prevention efforts are in place</i>	Establish a cross-agency working group for monitoring progress against suicide prevention actions (by 30 Sep 2025)	Ministry of Health	<b>Completed</b>	<b>Completed</b>	<ul style="list-style-type: none"> <li>Group established and first meeting held on 25 September 2025</li> </ul>	N/A	N/A
	Evaluate the effectiveness of Vote Health suicide prevention services investment and explore changes informed by available evidence (by 30 June 2026).	Health NZ	<b>Underway</b>	<b>On track</b>	<ul style="list-style-type: none"> <li><b>Suicide prevention services</b> continue to work under the newly updated specifications in place through to 30 June 2027</li> <li><b>Suicide postvention services</b> will be reconfigured based on recommendations and upcoming guidance from the Wānanga Report. Current contracts may need to be extended only until Dec 31, 2026, to allow time for this reconfiguration work.</li> </ul>	N/A	
	Map the suicide prevention and postvention system and supports to identify gaps and areas for improvement (by 30 June 2026).	Ministry of Health	<b>On track</b>	<b>On track</b>	<ul style="list-style-type: none"> <li>Mapping the suicide prevention and postvention system is progressing. With an external supplier selected to undertake the mapping work. Their final report is expected mid-June 2026.</li> </ul>	<ul style="list-style-type: none"> <li>Need adequate time to allow time for consultation, particularly with Health NZ, to ensure mapping is reflective of existing system</li> <li>Potential for data quality issues, which will be assessed as part of compiling the report</li> </ul>	
	Explore opportunities to improve existing data systems for suicide prevention, for example, improvements to quality and consistency and how data are shared with the Suicide Prevention and Postvention Coordinators (by 30 June 2027).	Ministry of Health	<b>On track</b>	<b>On track</b>	<ul style="list-style-type: none"> <li>Work to scope out the programme of work for this action is continuing.</li> <li>Work by Health NZ with the Coroners Court to establish a new agreement to share coronial data and strengthen information-sharing mechanisms across providers will support this action (as referenced in actions above).</li> </ul>	N/A	
	Explore opportunities to build the alcohol harm evidence-base to inform system responses and improve tracking of alcohol-related suicides (by 30 June 2028).	Health NZ and Ministry of Health	<b>On track</b>	<b>On track</b>	<ul style="list-style-type: none"> <li>Initial discussions between Health NZ and the Ministry of Health have taken place to determine the scope and shared milestones for this work and are ongoing.</li> </ul>	<ul style="list-style-type: none"> <li>FTE resourcing in both Health NZ and the Ministry of Health required to support this action, and this is being worked through in ongoing discussions.</li> </ul>	
	Evaluate the Suicide Prevention Strategy 2019–2029 and action plans to inform future strategy and work programme (by 30 June 2029)	Ministry of Health	<b>On track</b>	<b>On track</b>	<ul style="list-style-type: none"> <li>Work to scope out the programme of work for this action is continuing.</li> </ul>	N/A	
	Review available evidence and research along with insights from ethnic service providers to better understand Middle Eastern, Latin American and African (MELAA) youth mental health, including suicide and self-harm hospitalisations (by 31 Dec 2025)	Ministry for Ethnic Communities	<b>Completed</b>	<b>Completed</b>	<ul style="list-style-type: none"> <li>The literature review and Integrated Data (IDI) Infrastructure research have been completed.</li> <li>Building on this work, further activities are underway:                             <ul style="list-style-type: none"> <li>An academic peer review scheduled for January 2026, with drafting of the research report already in progress.</li> <li>Development of a plan for additional engagement with service providers and the wider community.</li> </ul> </li> </ul>	N/A	N/A
	Work with the Ministry of Health and Health New Zealand to explore opportunities to improve the quality of available data regarding veterans in New Zealand to better understand veterans' mental health and wellbeing, including suicide and self-harm hospitalisations, to support further prevention actions (by 30 June 2027).	Veterans' Affairs	<b>On track</b>	<b>On track</b>	<ul style="list-style-type: none"> <li>Initial discussions held with Veteran's Affairs Board to promote this work, understand their priorities and test initial thinking.</li> <li>Meeting with Social Investment Agency to determine what is possible within current IDI datasets.</li> </ul>	<ul style="list-style-type: none"> <li>Existing datasets may be insufficient.</li> <li>IDI resource and prioritisation will be required for exploration.</li> </ul>	

PROACTIVELY RELEASED