



AUSTRALIAN SAILING TEAM

Wellbeing Management Plan

Version:	2.0
Date Adopted by Australian Sailing Board:	[]
Effective Date:	[]
Review Frequency:	Annual
The Australian Sailing Lead Psychologist is responsible for this document.	

Contents

1. Overview	2
2. Scope	2
3. Wellbeing Literacy Plan	4
4. Wellbeing Management Plan	10
5. Safety Management Plan	11
6. Confidentiality and Informed Consent	13
7. Responsibility and Limitations	15
8. Performance Pathways	15
9. Appendices	16
Appendix I: Contacts Required to Execute Wellbeing Management Plan	17
Appendix II: SMHAT-1 Link	18
Appendix III: Face to face Screen Form	19
Appendix IV: Release of Information/Consent Forms	21
Appendix V: Mental Health Crisis Contact Numbers (Safety Management Plan)	23

1. Overview

A healthy sport system is needed to support and nurture our athletes. At Australian Sailing (AS) we support the values and actions within this document. AS actively works to facilitate a welcoming environment and culture that embraces the 'Win Well' pledge of balancing ambitious sporting goals with cultures that are safe, fair, and supportive, and instil the critical foundation of a healthy sport system. We recognise that how we treat all members of our organisation is important, most importantly our athletes.

AS has a clear commitment at the highest level to providing a safe sporting environment that works proactively in supporting athletes' wellbeing. AS seeks to provide a safe sporting environment that promotes early identification of wellbeing issues to mitigate any risk to athletes and is committed to training and upskilling all role holders with relevant skills in this area. All role holders within the organisation, including athletes, family members, coaches, performance support team members and AS staff have a responsibility to support a safe sporting environment. In addition, all role holders have the right to expect that the sporting environment in which they work is safe and supportive. These guidelines set out the actions that are implemented by AS to assist in providing this safe sporting environment as it relates to Athlete Wellbeing.

2. Scope

This document applies to the following AS members/participants:

- **AS athlete:** any athlete who is categorised as an Australian Sailing Team (AST – *Podium and Podium Ready*) or Australian Sailing Pathways Team (ASPT - *Podium Potential*) athlete;
- **Coach:** an employee in an AS National Coaching Role or AS coaching performance pathway role as well as coaches contracted to AS to work with the AST or ASPT; and
- **Staff member:** any AS employed staff member working in the performance pathway, who has direct contact with an AS athlete, as well as staff contracted to AS to work with the AST and ASPT.

AS acknowledges that:

- all athletes, coaches, and staff in the AS high performance program operate in an environment that may, at times, place high levels of stress on the individual; and
- an individual's coping skills may not always be sufficient or effective to manage stressful life and sport-specific events.

Consequently, AS has a responsibility to support and promote mental health literacy and to support athletes, coaches and staff who may experience a wellbeing issue.

A wellbeing issue is any medical or psychological issue that has materially impacted, or has the potential to materially impact, the physical and/or mental health functioning of an AS athlete, coach and/or staff member.

Common wellbeing issues include depression, anxiety, grief or other behavioural changes. For athletes this can be caused by non-selection, severe injury, termination of financial or coaching support, periods of poor performance, heavy/excessive training competition loads and transition out of the sport.

More complex wellbeing issues include other diagnosable mental health issues, suicidal ideation, psychosis, loss and grief issues, aggressive conduct, disordered eating behaviours, post trauma, addiction, or self-harm behaviours.

This document consists of the following components:

- **Wellbeing Literacy Plan:** outlines how AS promotes mental health literacy and supports AS athletes, coaches and staff members in monitoring and attending to their wellbeing;
- **Wellbeing Management Plan:** outlines how AS will provide appropriate medical and psychological support to an AS athlete, coach and/or staff member experiencing a wellbeing issue; and
- **Safety Management Plan:** outlines how AS will respond to an AS athlete, coach and/or staff member who may be experiencing suicidal ideation or intent.

The Wellbeing Management Plan and Safety Management Plan may be used in support of the AS response to a critical incident under the AS Critical Incident Management Plan or where a wellbeing issue is otherwise identified.

3. Wellbeing Literacy Plan

Poor mental health literacy and a lack of understanding about the connection between mental health and performance are often cited as barriers for seeking help and of poor wellbeing in athlete populations. Ultimately, AS seeks to create a culture where members feel comfortable and confident to have open conversations about wellbeing and know how to seek help and/or support someone who is struggling with their wellbeing.

This is supported through the AS Wellbeing Literacy Plan.

The Wellbeing Literacy Plan consists of a number of strategic wellbeing programs such as screening and literacy workshops offered by AS. The table below sets out each wellbeing strategy accompanied by a brief description.

Strategy	Description
Mental Health Screening	<ul style="list-style-type: none"> Athletes will complete the Athlete Psychological Strain Questionnaire (APSQ) via the AIS Athlete Management System (AMS) on a biannual basis. If athletes score above the threshold (>17 as per IOC recommendations from SMHAT-1: see Appendix II) they will also be required to complete a Depression, Anxiety, Stress Scale 21 (DASS 21) as well as a face-to-face interview with the AS Lead Psychologist or National Institute Network (NIN) Psychologist. Athletes will also complete a mandatory face-to-face screen (in person or via telehealth) each year, alongside the APSQ. See face to face screen form template in Appendix III. This process is managed in line with the wellbeing management plan and is expanded below. Athletes, coaches, and travelling staff members are required to complete a Medical Screen with the AS Chief Medical Officer annually. The medical screen will explore participants' physical health, mental health, and history.

Other Wellbeing Measures	<ul style="list-style-type: none"> • The AS Disordered Eating Guidelines should be followed and be implemented along with the Wellbeing Management Plan for identification, prevention, and treatment of disordered eating behaviours and/or low energy availability. • AS athletes complete metrics via Training Peaks. Specifically, athletes report on fatigue, soreness, sleep quality and quantity, stress and illness. For any category that is flagged the AS Physiologist will consult with the Performance Support Team for further information/ insight and appropriate follow up. If required, follow up contact is made with the athlete in line with the wellbeing management plan. • Every two years, athletes, coaches and staff are invited to participate in a comprehensive Wellbeing Health Check conducted by the AIS. Such findings provide a detailed snapshot of the mental health & wellbeing status of the sailing High Performance program and are used to shape the AS Mental Health Literacy Program.
Mental Health Support	<ul style="list-style-type: none"> • For athletes, coaches and staff requiring clinical assessment and management, a referral to a psychologist within the AS network or within the AIS Mental Health Referral Network is facilitated. This referral can be actioned by any athlete/staff member, family member, friend, teammate and/or the individual's significant other. Such information will be disseminated by the AS Lead Psychologist and AS Athlete Wellbeing & Engagement (AW&E) Advisor via AS communication channels. • Athletes, coaches and staff can also self-refer to the AIS Mental Health Referral Network: <ul style="list-style-type: none"> ○ Phone: +61 2 6214 1130 (Monday – Friday 9am – 5pm AET) ○ Email: mentalhealth@sportaus.gov.au

<p>Wellbeing Literacy Workshops</p>	<ul style="list-style-type: none"> • Workshops and educational resources on body image, disordered eating and low energy availability will be provided to staff members and athletes. This content will be led by the AS Nutrition Lead in conjunction with other performance support members and external supports (e.g., AIS). • Mental Health First Aid Training will be developed and delivered to nominated athletes, coaches and staff members. The purpose of this training is to ensure they develop the necessary skills on how to offer initial support to athletes who are developing a mental health problem, experiencing a worsening of an existing mental health problem or in a mental health crisis, until appropriate professional help is received, or the crisis resolves. • Other workshops and educational resources will be utilised where relevant to ensure athletes, coaches, and staff members have the knowledge, skills, and awareness of mental health to support themselves and others within the environment.
<p>AW&E Screening</p>	<ul style="list-style-type: none"> • Athletes will complete the Athlete Domain Check via the AMS on an annual basis. If an athlete's satisfaction score has a margin greater than 2 points from importance, the athlete will be required to book an appointment with the AIS AW&E Advisor. For example: <div data-bbox="549 1554 1372 1628" data-label="Figure"> <p>The figure shows two horizontal sliders. The left slider is titled 'Importance of Health & Wellbeing including sleep' and has a scale from 1 to 10. A teal bar is filled up to the number 8. The right slider is titled 'Satisfaction with Health & Wellbeing including sleep' and also has a scale from 1 to 10. A teal bar is filled up to the number 5.</p> </div> <ul style="list-style-type: none"> • This appointment will explore whether the athlete requires a personal, career and/or community development plan.

Mental Health Screening Process

The process for proactive screening of AS athletes for wellbeing issues is outlined in the table above (Mental Health Screening section). Feedback about the screening process, mental health literacy (education, support seeking and self-help) will be provided to all athletes, coaches, and staff members as part of an early intervention strategy.

Measures

The Mental Health Screening Process will utilise the Athlete Psychological Strain Questionnaire (APSQ) & the Depression Anxiety Stress Scale (DASS 21). The APSQ is the recommended triage screening tool by the IOC for athletes 16 years and above. It is a 10-item self-report questionnaire that was developed specifically to measure psychological strain in athletes over the most recent four-week period. The DASS 21 is a 21-item self-report questionnaire intended to assess the severity of the core symptoms of depression, anxiety, and stress over the most recent seven-day period.

Process

AST (*Podium and Podium Ready*) and ASPT-*Podium Potential* athletes will be notified by multiple communication channels to complete the APSQ via the AMS and to organise their face-to-face screen with the relevant Psychologist when indicated. The turnaround period for completion is 7-10 days. Once completed, the scores will be reviewed by the AS Lead Psychologist and AS Chief Medical Officer (CMO). Should the athlete score highly on any of the scales, these will need further exploration in the mandatory face-to-face screen or at another organised meeting. Any required follow up will then be completed by the AS Lead Psychologist or NIN Psychologists, with informed consent from the athletes. Athletes will be advised that their questionnaire scores and screening completion will be shared with their relevant NIN, to ensure all relevant providers are aware of the athletes' status to satisfy NIN and AS screening requirements. See the below 'Mental Health Screening Process' flow chart for further information. The APSQ & DASS 21 are not clinical instruments and cannot diagnose depression, anxiety, or stress. It will give an indication as to whether any of these issues are having a significant effect on the individual's life at the time of assessment.

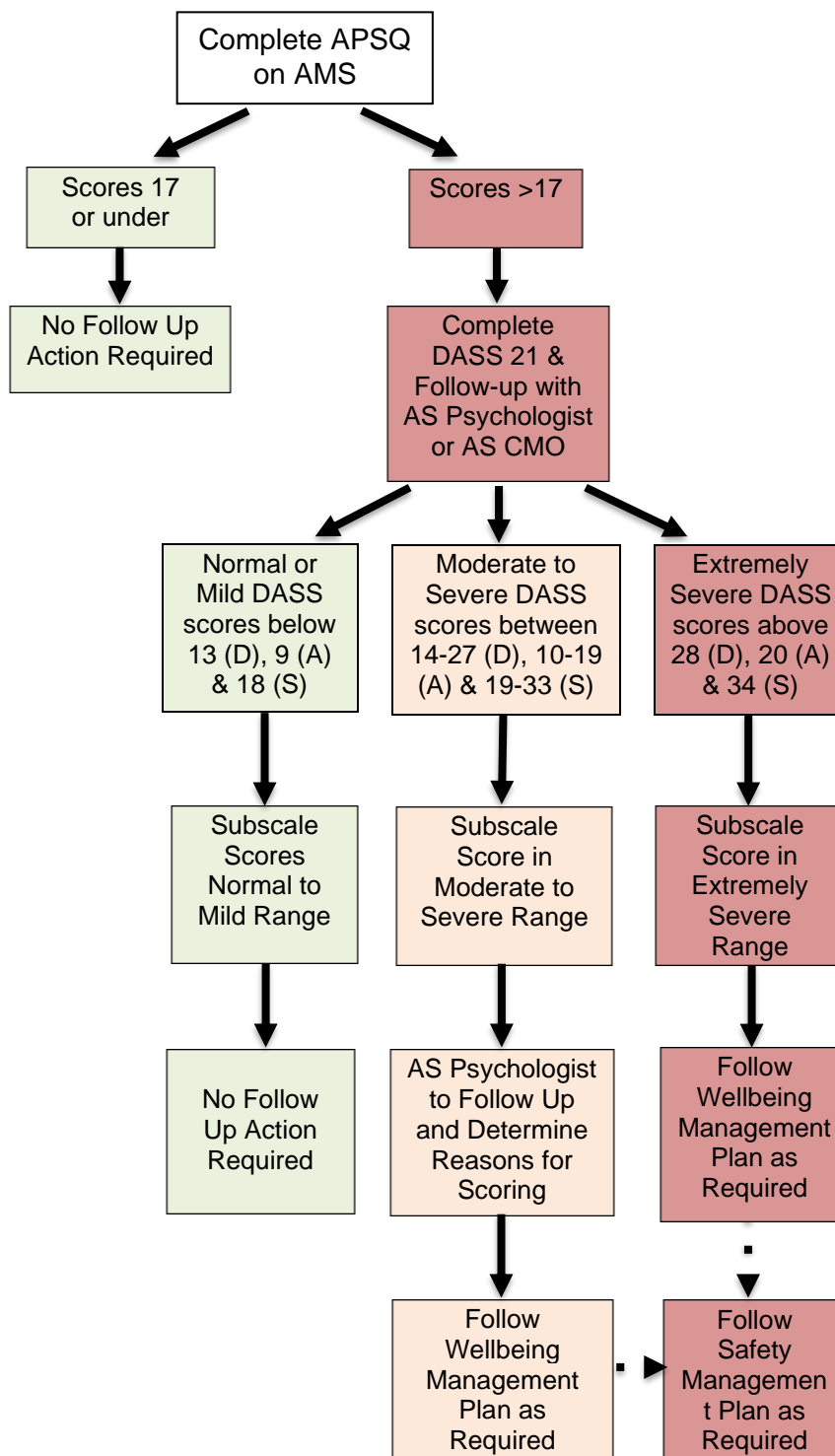
Youth athletes

In the context of this document, youth athletes are those that are under the age of 18.

In the case of youth athletes, the following recommendations are made:

- Parental consent is required either verbally or written before engaging in the Mental Health Screening Process and are required to sign the Release of Information Form (see [Appendix IV](#)) alongside the athlete;
- Athletes aged 16+ will complete the standard screening process outlined above (IOC guidelines for the implementation of the SHMAT-1, which utilises the APSQ, is for athletes aged 16+);
- If an athlete is aged 15 years and below, they will be required to only complete the face-to-face component of the Mental Health Screen at both time points (rather than at the initial time point).

Mental Health Screening Process

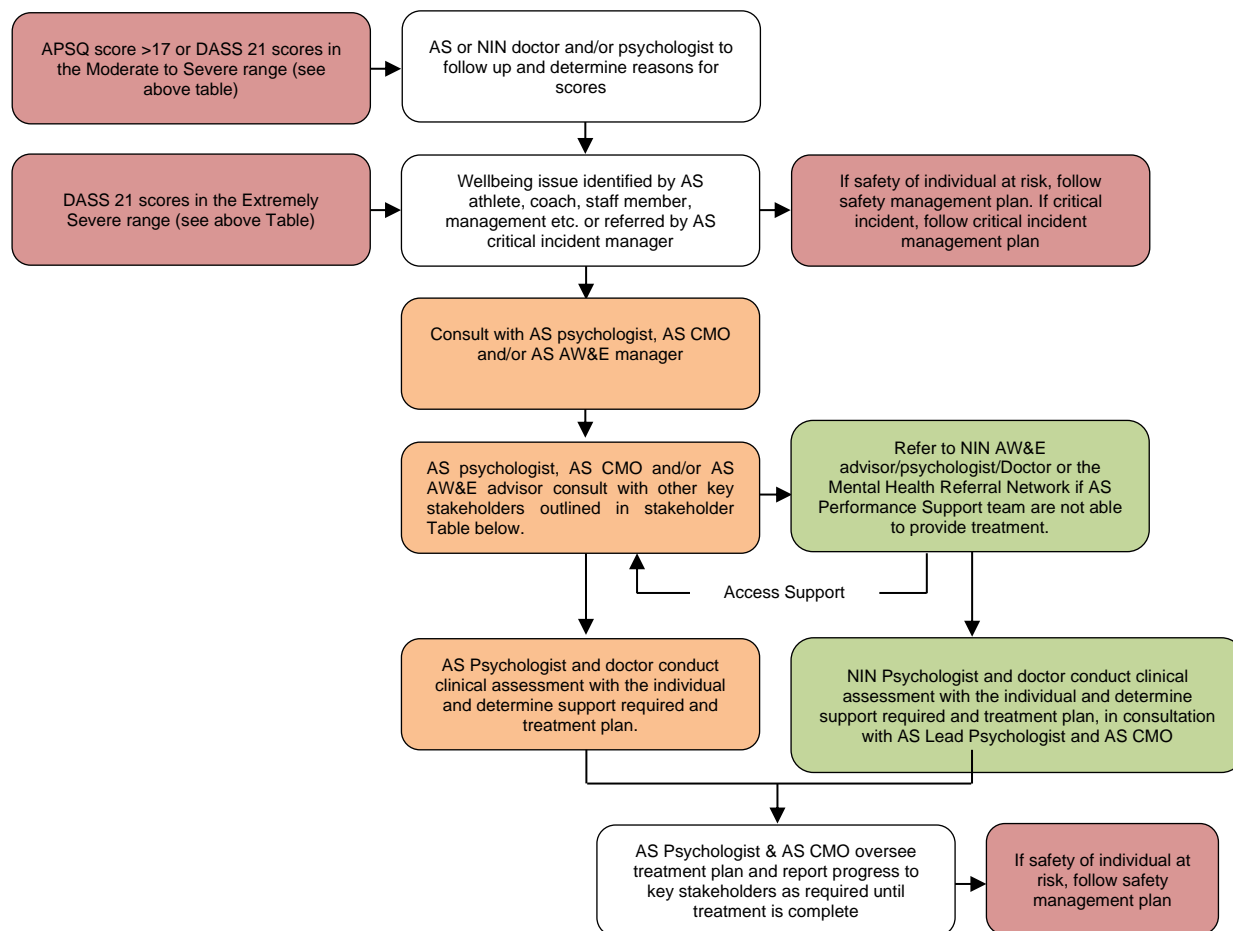


4. Wellbeing Management Plan

If a wellbeing issue is identified or referred by the AS Critical Incident Manager under the Critical Incident Management Plan, the Wellbeing Management Plan (see diagram below) should be followed.

An appropriate support team and treatment plan will be established. Treatment of the affected individual will be in accordance with the plan and managed by the treating psychologist. The treating psychologist must report treatment progress as required to the AS Lead Psychologist (if another Psychologist is the treating practitioner) and AS CMO. Further dissemination of treatment progress will be at the discretion of the athlete, treating practitioner, AS Lead Psychologist & AS CMO in line with professional standards around informed consent and confidentiality. The treating psychologist must establish an effective working relationship with the affected individual and all stakeholders to ensure optimal medical and psychological care. Athlete confidentiality should be strictly observed and only those people that “need to know”, as determined by the athlete, AS CMO and psychologist, should be informed of the wellbeing issue and treatment plan. Notwithstanding the clinical support AS makes available to AS athletes, individuals may elect to seek external clinical support, ask for a referral, or self-refer to the AIS Mental Health Referral Network of psychologists.

Wellbeing Management Plan



5. Safety Management Plan

There may be times when a person faces severe difficulties that potentially impact on their immediate safety, such as through suicidal ideation or intent. AS aims to identify individuals who are at such risk early and encourage them to speak with the AS Lead Psychologist, NIN Psychologist or the AIS Mental Health Referral Network.

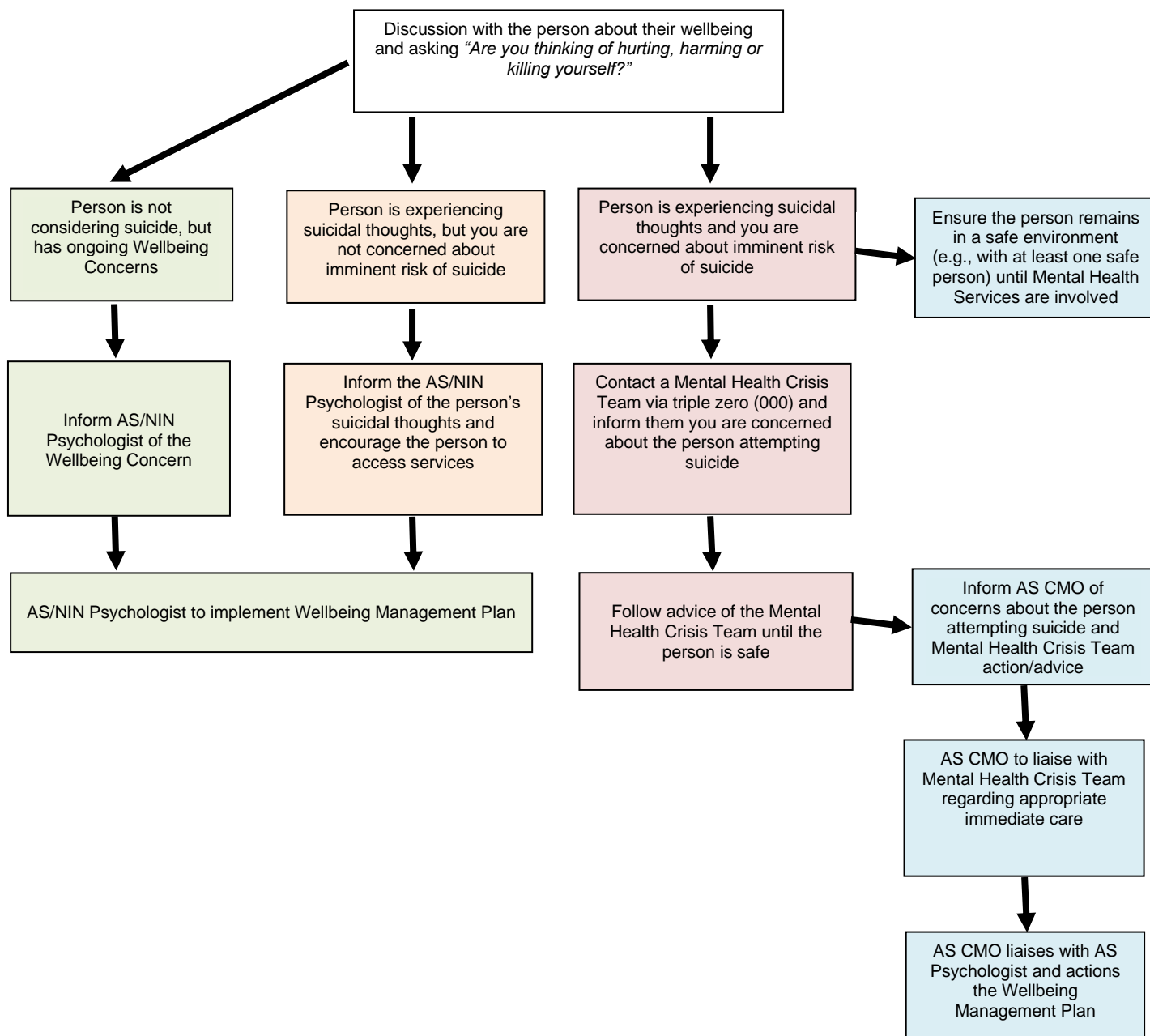
It is crucial to be aware of signs that someone is experiencing difficulty and what to do if an AS athlete, coach or staff member presents as contemplating suicide. If you are concerned about the safety of a person, an initial discussion with them regarding the difficulties they are experiencing is appropriate. If they give an indication of factors suggesting that they may be considering suicide, asking them if they are experiencing thoughts of suicide, and/or contemplating committing suicide is appropriate. Though not an exhaustive list, indicative behaviours or circumstances may include:

- ongoing low mood;
- considerable weight loss or gain;
- expressions of hopelessness;
- withdrawal from relationships;
- increased aggressive behaviour or impulsivity;
- a recent stressful or humiliating event; or
- statements that indicate they are considering suicide (e.g., “*No one cares if I live or die*” or “*I wish I wasn’t here*”)

Where an AS staff member or athlete is concerned about an AS athlete or staff member attempting suicide the following **Safety Management Plan** should be observed. This protocol may also need to be supported by the Wellbeing Management Plan. This information is disseminated to athletes and staff during their attendance at designated mental health workshops, previously outlined in this document.

Please see [Appendix V](#) for Mental Health Crisis Contact Numbers.

Safety Management Plan



6. Confidentiality and Informed Consent

Given the extremely complex and volatile nature of a wellbeing issue, confidentiality is essential. There is an acknowledged need for restriction of information to the identified "need to know" support team (as determined by the athlete, AS CMO and AS Lead psychologist), established to assist the AS athlete, coach and/or staff

member. There may be legal and public information implications involved in managing wellbeing issues and it is essential that the necessary obligations are acknowledged.

Where there is an immediate and specified risk of harm to the identified AS athlete, coach and/or staff member that can be averted only by disclosing information, that person will be informed that certain information will be shared with the support team who are in a designated “need to know” capacity. In such cases, the AS athlete, coach and/or staff member will be asked to complete the “Release of Information” form (see [Appendix IV](#)). All attempts will be made to ensure athletes have appropriate informed consent around the disclosure of information and their rights to confidentiality in this environment. All stakeholders (see below Table) will be made aware of the limits to confidentiality and how appropriate information will be shared.

Stakeholders

Tier	Who?	Communication
1	<ul style="list-style-type: none"> Athlete 	Athlete will be communicated with openly around debriefing, informed consent, confidentiality, and how the information will be used. A priority is sharing the results of their mental health screens back to athletes if they wish around the results of the screen, including scale scores and potential action items.
2	<ul style="list-style-type: none"> AS Lead Psychologist AS Chief Medical Officer 	The core group of practitioners to have access to outcomes of the Mental Health Screening Process and any Wellbeing issue. Information will be discussed using professional discretion to ensure appropriate outcomes. All attempts will be made to ensure consent is given to communicate with this group.
2a	<ul style="list-style-type: none"> NIN Psychologist NIN Chief Medical Officer AS Athlete Wellbeing & Engagement Advisor Others if needed (e.g., AS Lead Dietician if DE Concerns) 	Other providers who may fall within Tier 2, depending on circumstance (e.g., Disordered Eating concern, or NIN Psychologist is point of contact). Note: NIN Psychologists will have access to their respective NIN scholarship athlete APSQ and DASS 21 results via the AMS.
3	<ul style="list-style-type: none"> National Coach AS Performance Support Manager AS High-Performance Director NIN Coach AS Performance Support Staff NIN Performance Support Staff AS Technical Director 	Utilising professional discretion by those in Tier 2 or 2a, and acknowledging informed consent, this group will be kept updated on any information that may be relevant towards their roles and assist them in supporting the athlete. Information and/or feedback on how they can assist the athlete will be shared in an appropriate way, if consent is given.
4	<ul style="list-style-type: none"> AS CEO AS Board Others (e.g., CIMT) 	To be notified of Mental Health screening protocols or if there is an identified Critical Incident that activates the Critical Incident Management Plan – appropriate information may be shared using professional discretion by those in above Tiers.

7. Responsibility and Limitations

AS is responsible for implementing an effective protocol that identifies appropriate resources and treatment/support for AS athletes, coaches or staff members dealing with issues that affect wellbeing.

While every attempt may be made to provide appropriate assistance, there will be occasions where AS athletes, coaches or staff members cannot or will not participate in the recommended treatment or support program. It is acknowledged, therefore, that one of the limitations of the program could be that person's agreement to commit to the proposed support program.

For issues requiring long-term treatment or rehabilitation or specialist expertise, it will be necessary to refer to external clinical specialists.

8. Performance Pathways

The AS Wellbeing Management Plan outlines AS's commitment to supporting athletes categorised as Australian Sailing Team (AST - *Podium and Podium Ready*) or Australian Sailing Pathways Team (ASPT - *Podium Potential*) athletes. Other AS Performance Pathway athletes (i.e., ASPT-*Developing* and SSPP-*Emerging or Pre-Emerging*), and any athlete that holds a state sailing training agreement are not considered under this Wellbeing Management Plan. Athletes in the Performance Pathway will be screened and managed by the processes aligned to their NIN. AS recognises the importance of consistent processes throughout Sailing's pathway and are committed to working with the NINs to ensure consistency in processes where applicable.

9. Appendices

- I. Contacts Required to Execute Plan
- II. SMHAT-1
- III. Face to Face Screen Form
- IV. Release of Information
- V. Mental Health Crisis Contact Numbers

Appendix I: Contacts Required to Execute Wellbeing Management Plan

AS Chief Medical Officer	Dr Kathy Yu	+61 417 381 144
AS Lead Psychologist	Kai Morris	+61 467 544 980
AS Performance Director	Iain Brambell	+61 413 668 055
AS Athlete Wellbeing & Engagement Advisor	Tom Livsey	+61 423 426 681

Appendix II: SMHAT-1 Link

The International Olympic Committee Sport Mental Health Assessment Tool 1 (SMHAT-1) can be found here:

<https://olympics.com/athlete365/app/uploads/2021/06/BJSM-SMHAT-1-Athlete365-2020-102411.pdf>

Appendix III: Face to face Screen Form

Mental Health Screen

Name: _____

D.O.B. _____

These questions are designed to ensure you are provided with the best possible personal and psychological support in the lead up to and during the next season.

The information you provide will be seen by your nominated psychologist and AST doctor. Otherwise, all responses will remain confidential unless your prior consent is obtained. The only exception to this is when required by law or to reduce risk of harm.

-
1. **Current Social/Personal Circumstances:** (e.g. living arrangements, relationships, general health, injuries, social and/or vocational interests, etc.)

 2. **Have you recently or are you currently experiencing any personal difficulties** (e.g., relationship difficulty/breakdown, vocational/financial problems, death of a family member or friend, etc.)? If yes, provide brief details.

 3. **Experience of a mental health issue and/or had treatment for a mental health issue** (for example anxiety, depression, psychosis, sleep or eating disorder, risk behaviour/self-harm)? If yes, provide brief details. Psychologist to explore specific symptoms (e.g., have you ever experiences moments of panic, times of low motivation) use completed APSQ and/or DASS21 as a guide.

4. **Are you currently experiencing and/or seeking treatment for a mental health issue** (e.g., taking medication, working with a doctor, counsellor, psychologist or psychiatrist)? If yes, provide details.

If yes, please provide your psychologist's details: (*Please note: this person will not be contacted without your consent)

5. **Do you foresee any personal and/or behavioural challenges in the lead up to and/or during the upcoming season for which you may need psychology support** (e.g., separation from usual family/ support system, feeling restricted or isolated within the POD, conflict with teammates, sleep difficulties, alcohol or gambling issues, cultural differences, etc.)? If yes, please provide brief details (including personal resources, strategies and support required)
6. **In the face of challenges, how much support do you have available to you** (for example from your family, friends, teammates, AW&E and/or Psychologist)? (Please select which number you feel best represents your current level of support):
7. **What, if any, difficulties are you experiencing in relation to your performance and/or categorisation?** (for example financial issues with decreased funding, increased performance pressure with new categorisation)

Appendix IV: Release of Information/Consent Forms

RELEASE OF INFORMATION

I _____
(Please PRINT your name/s)

of _____
(Please PRINT your address)

agree to the following information being shared for treatment planning and/or service coordination. By signing this form, I am allowing service providers or agencies to exchange information that will be useful in planning current treatment, and/or will make it easier for them to work together effectively in planning and/or providing services.

This information should only be released to (name/agency):

Information to be released (e.g. report, personal details):

Expiration & Terms: I understand that this consent is only applicable for up to one year from the date of my signature below, and that it encompasses consent to release information from before the signature date as well as additional information received after this consent is signed. In addition, I understand that information may be shared in writing, via email, in computerised form, and/or in meetings or by telephone.

Revocation: I understand that I can withdraw this consent at any time. The revocation will not apply to information that has already been released. I must revoke this consent in writing to the AS Lead Psychologist. This will stop the listed parties from sharing information after they know my consent has been withdrawn.

Signature: _____
(signature)

Date: ____/____/____

Signature: _____
(witness signature)

Date: ____/____/____

Signature: _____
(Parent / Guardian signature)

Date: ____/____/____

RELEASE OF INFORMATION

I _____
(Please PRINT your name/s)

agree to the following information being shared to benefit treatment planning, service coordination and/or my performance. By signing this form, I am allowing service providers or agencies to exchange information that will be useful in planning current treatment, and/or will make it easier for them to work together effectively in planning and/or providing services.

I give consent for the information contained throughout my Mental Health Screen to be shared with the following people (please note that consent can be withdrawn at any time and at your discretion, unless the information is required by law or to reduce risk of harm):

Tick Box:

- ☐ AS Doctor (Dr Kathy Yu)
- ☐ NIN Psychologist
- ☐ Nominated Class Coach
- ☐ Tom Livsey (AS AWE Advisor)
- ☐ AS Performance Support Team
- ☐ Other _____

If you only consent to certain information being shared, please indicate below:

Expiration & Terms: I understand that this consent can be withdrawn at any time, and that it encompasses consent to release information from before the signature date as well as additional information received after this consent is signed. In addition, I understand that information may be shared in writing, via email, in computerised form, and/or in meetings or by telephone.

Revocation: I understand that I can withdraw this consent at any time. The revocation will not apply to information that has already been released. I must revoke this consent in writing to the AS Lead Psychologist. This will stop the listed parties from sharing information after they know my consent has been withdrawn.

Signature: _____
(signature)

Date: ____/____/____

Signature: _____
(witness signature)

Date: ____/____/____

Signature: _____
(Parent / Guardian signature)

Date: ____/____/____

Appendix V: Mental Health Crisis Contact Numbers (Safety Management Plan)

NSW	1800 011 511
VIC	1300 874 243
SA	13 14 65
QLD	13 43 25 84
NT	1800 682 288
WA	1800 676 822
ACT	1800 629 354
TAS	1800 332 388

Lifeline: 131 114

Website: <http://www.lifeline.org.au/>

24 hour telephone counselling service can be contacted anonymously

Kids Helpline: 1800 551800

Website: <http://www.kidshelp.com.au>

Telephone and online counselling for younger individuals – 5 to 18 years of age

Suicide Call Back Service: 1300 659 467

Website: www.crisissupport.org.au

10am – 8.30pm (EST) telephone counselling service

Websites:

Lifeline: http://www.lifeline.org.au/find_help/suicide_prevention

Beyond Blue: <http://www.beyondblue.org.au>

Living is for Everyone: <http://www.livingisforeveryone.com.au/>