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Connecting for Life

Report to the
**National Cross Sectoral Steering and
Implementation Group**
Q1 2018

HSE National Office for Suicide Prevention (April 2018)

Introduction

This report gives an outline of *Connecting for Life (CfL)* activity during Quarter 1 of 2018. *CfL* action lead agents were requested to provide an update on the activity of their relevant lead actions during the period Q1, 2018. They were also requested to give an outline of activity proposed to take place in Q2. The purpose of this report is to focus primarily on the 'red flag' issues that are hindering the implementation of *CfL*. A bi-annual implementation progress report (published in June/July and December) will give a more detailed analysis of overall implementation activity.

Dashboard Templates received and included in this report from:

- HSE Mental Health
- HSE National Office for Suicide Prevention
- HSE Primary Care
- HSE Health & Wellbeing
- Department of Health
- Broadcasting Authority of Ireland
- Department of Agriculture, Food and the Marine
- Department of Education and Skills
- Department of Employment Affairs & Social Protection
- Department of Defence
- Department of Justice/Irish Prison Service/An Garda Síochána/Probation Service
- Press Council of Ireland
- Department of Transport, Tourism & Sport
- Department of Rural and Community Development
- Department of Communications Climate Action & Environment
- Health and Safety Authority/ Department of Jobs, Enterprise and Innovation
- Higher Education Authority/Academic Oversight Structures (progress reported by the Department of Education and Skills)

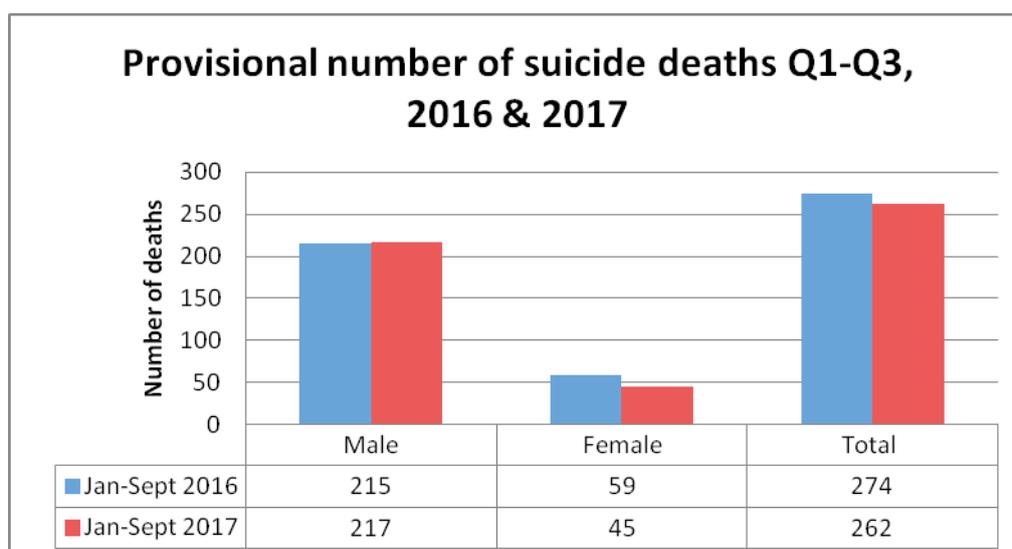
Dashboard Templates not received from the following:

<u>Government Department/State Agency</u>	<u>Actions</u>	<u>Comment</u>
Department of Children and Youth Affairs/TUSLA	3.1.1, 5.2.2, 5.4.2, 7.2.1	No update on progress on actions received since Q3, 2017.
Local Authorities	5.4.2, 6.2.1	No update on progress received since Q1, 2017.
HSE Acute Hospitals	3.1.2	Engagement with HSE Acute Hospitals is still in place with regards seeking an update on 2017 implementation progress, setting Milestone Activity for 2018 as well as an activity update for Q1.

Update on Suicide and Self-Harm Statistics

Provisional Suicide Statistics (Q1-Q3, 2016 & 2017)*

Provisional suicide numbers released by the Central Statistics Office January – September 2016 & 2017



The graph above gives a comparison between Q1-Q3 2016 and 2017 provisional suicide numbers. When comparing Q1-Q3 2016 with Q1-Q3 2017 numbers there is over a 4% reduction in the number of suicides (274 to 262). Currently, 2015 is the most recent year for which ‘year of occurrence’ data is available. For further information on the most up-to-date suicide figures, click [here](#).

Provisional Self-Harm Statistics (January – June 2017)*

Provisional Self-Harm Incidence rate (EASR) per 100,000, Jan-Jun 2016 & 2017

	2016	2017	Change
Male	190	185	-2.6%
Female	235	247	+5.1%
All	212	216	+1.9%

Provisional self-harm data, as released by the National Self-Harm Registry Ireland showed that:

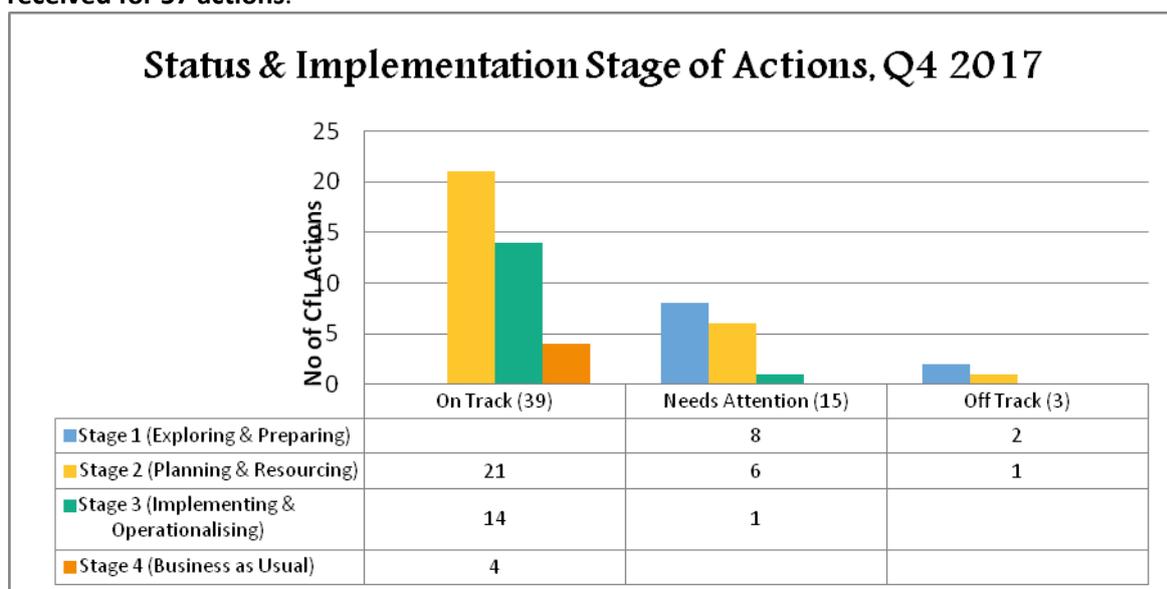
- In the first six months of 2017, the Registry recorded 5,522 presentations to hospital due to self-harm, involving 4,619 individuals. This is equivalent to the number recorded for the same period of 2016 (n=5,471).
- The rate of individuals presenting to hospital following self-harm was 216 per 100,000 in the first six months of 2017 – 1.9% higher than the rate for the same period in 2016.
- Drug overdose was the most common method of self-harm, involved in 65% of cases. Alcohol was involved in 29% of cases (28% for women and 31% for men). Self-cutting was the only other common method, involved in 27% of cases.
- The incidence of self-harm was highest – at 647 per 100,000 – among 15-19 year olds, while the lowest rates was among those aged 10-14 years and 60 years and over.

***Note: The suicide and self-harm data presented above should be interpreted with caution as figures are provisional and subject to change.**

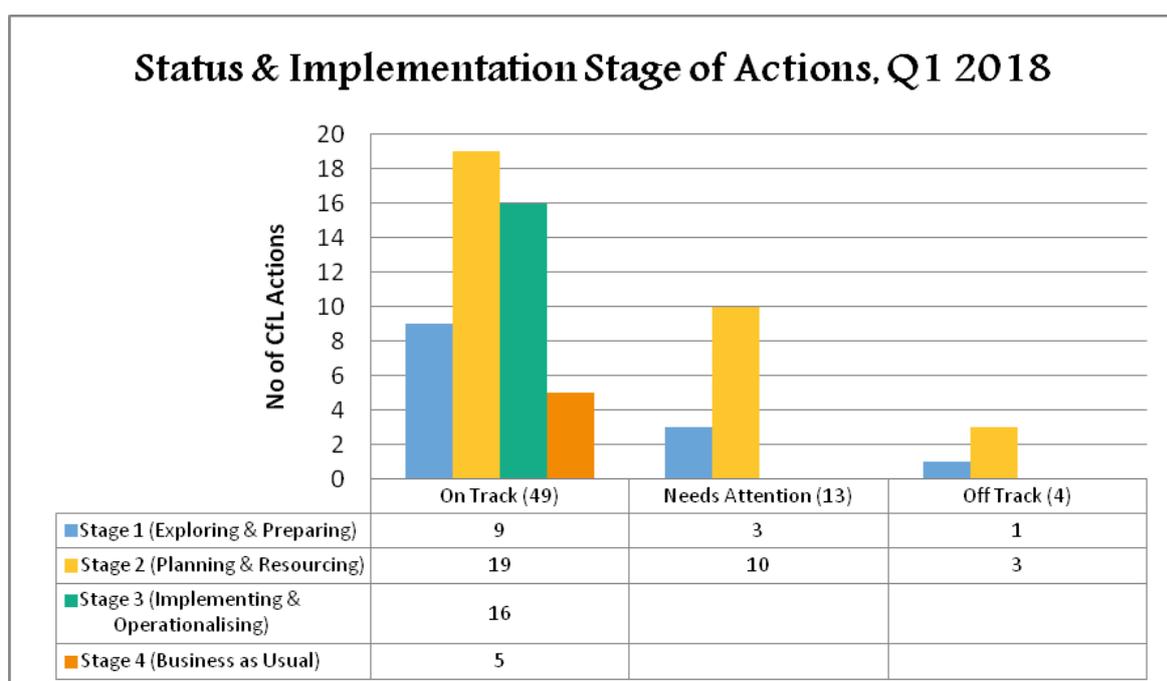
Outline of *CfL* Implementation Progress (Q1, 2018)

The graphs below give an overview of the status (i.e. On Track, Needs Attention, Off Track) and implementation stage (based on the Centre for Effective Services stages of implementation) of *CfL* actions as of Q4, 2017 and Q1, 2018. It is important to note that the status and implementation stage of actions is self-reported by *CfL* Lead Agents and not linear.

As part of the Q4, 2017 reporting period, out of 69 actions within *CfL*, an update on progress was received for 57 actions.



As part of the Q1, 2018 reporting period, out of 69 actions within *CfL*, an update on progress was received for 66 actions.



Based on *CfL* activity reported for Q1, the majority of actions (n=32) are in 'Stage 2' implementation.

Implementation Progress: Key Highlights Q1 2018

<p>Goal 1: To improve the nation's understanding of, and attitudes to, suicidal behaviour, mental health and wellbeing</p> <ul style="list-style-type: none">○ #littlthings review<ul style="list-style-type: none">○ found the campaign continues to promote awareness of mental health○ prompts visits to yourmentalhealth.ie for information & calls to the Samaritans for support ACTION 1.1.3○ campaign is informing development of an awareness campaign targeting post primary school pupils ACTION 1.2.2○ Broadcasting Authority of Ireland: No complaints in respect of Principle 3 pertaining to self-harm & suicide ACTION 1.4.2
<p>Goal 2: To support local communities' capacity to prevent and respond to suicidal behaviour</p> <ul style="list-style-type: none">— Two Cfl area-level action plans launched in Q1 (Cfl Kildare West Wicklow & Cfl Dublin South); total number of published plans is now 14 (out of 17). ACTION 2.1.1— Capacity building activities in Q1 include;<ul style="list-style-type: none">○ MindOut Teacher training (n=73); Zippy's Friends Teacher Training (n=20); 4 Youth Mental Health Workshops delivered in conjunction with Jigsaw (n=56 participants) ACTION 2.3.3○ Mental Wellbeing training delivered to HSE Staff (n=58) ACTION 2.3.3○ Area-level Cfl suicide prevention training Q1 included safeTALK (n=2455), ASIST (n=630), ASIST Tune-Up (n=66), Understanding Self-Harm (n=281), STORM (n=57) ACTION 2.3.2
<p>Goal 3: To target approaches to reduce suicidal behaviour and improve mental health among priority groups</p> <ul style="list-style-type: none">○ All HSE CHO Area 2018 Operational Plans include action to 'roll out suicide prevention training to staff working with vulnerable individuals in line with Connecting for Life' ACTION 3.1.3○ GP survey conducted and findings disseminated to inform development of training within Primary Care ACTION 3.1.3○ Men's Health Symposium with focus on Middle Aged Men including launch of Suicide Research funded by NOSP. ACTION 3.1.5○ Protocol completed for NEPS & Inspectors in regard to oversight of critical incidents response in schools. ACTION 3.3.2○ Evaluation of Mental Wellbeing training targeting HSE staff completed; report submitted for editing ACTION 3.1.6○ Capacity building activities in Q 1 include<ul style="list-style-type: none">○ STORM Training (CHO 4) across Mental Health/Drug & Alcohol/Homeless sector (n=10). (Aggregated number over 6 months =78)○ Train the Trainer for the National men's Health Engage Training (n=15) including representatives from Traveller community.
<p>Goal 4: To enhance accessibility, consistency and care pathways of services for people vulnerable to suicidal behaviour</p> <ul style="list-style-type: none">○ Funding allocated from the Programme for Government to fund additional 14 Clinical Nurse Specialist posts. ACTION 4.1.5○ Jigsaw evaluation contract awarded & fieldwork has been mapped ACTION 4.2.1
<p>Goal 5: To ensure safe and high quality services for people vulnerable to suicide</p> <ul style="list-style-type: none">○ Best Practice Guidance: Second Engagement Event took place with 22 NGO partners (13 February 2018) to begin testing the relevance and importance of themes for NGO partners as part of the development of Best Practice Guidance ACTION 5.1.1○ Survey of NGO's partners readiness to engage with Best Practice Guidance conducted○ Capacity Building activities Q 1 include<ul style="list-style-type: none">○ safeTALK training (n=58) within Department of Employment Affairs & Social Protection ACTION 5.4.2○ safeTALK training (n=16) delivered to Sport Ireland staff, and Senior Managers within the Department of Transport, Tourism & Sport have been trained in mental health first aid ACTION 5.4.2○ safeTALK training (n=14) delivered to Department of Health staff ACTION 5.4.2
<p>Goal 6: To reduce and restrict access to means of suicidal behaviour</p> <ul style="list-style-type: none">○ In relation to the Health Products Regulatory Authority monitoring the retail sale of paracetamol products, all repeat exercise paracetamol retail compliance cases have been closed or actioned. ACTION 6.1.2○ Health & Social Care Regulatory Forum have agreed to progress action relating to supporting appropriate prescribing of medicines commonly used in intentional overdose, including benzodiazepines and SSRIs ACTION 6.1.1
<p>Goal 7: To improve surveillance, evaluation and high quality research relating to suicidal behaviour</p> <ul style="list-style-type: none">○ The review of National Self-Harm Registry Ireland has been completed & submitted (by Professor David Gunnell, Bristol University) to NOSP ACTION 7.1.1○ Review of the SCAN service has commenced; the National Suicide Research Foundation (NSRF) are undertaking the work ACTION 7.2.3○ Evaluating the implementation of Cfl:<ul style="list-style-type: none">○ Publication in Q1 of the findings from a survey of key stakeholders involved in Cfl area-level suicide prevention strategic action planning.

Overview of Progress by CfL Action Lead Agent

The table below gives an outline of the self-reported implementation progress by HSE Area for Q1, as well as outlining as to whether or not activity is planned to take place in Q2.

Name of Government Department /State Agency	Number		Status	Implementation Stage	No. actions for which activity planned Q2, 2018
	Lead Actions assigned	for which update received Q1 2018			
HSE Mental Health (MH)	17	17	13=On Track 4= Need Attention	4 = Exploring &Preparing 7 = Planning & Resourcing 3 = Implementing & Operationalizing	17
HSE National Office for Suicide Prevention (NOSP)	17	17	10=On Track 4=Need Attention 3=Off Track	2 = Exploring &Preparing 13=Planning & Resourcing 2=Implementing & Operationalising	17
HSE Primary Care (PC)	6	6	5=On Track 1=Needs Attention	5=Planning & Resourcing 1=Implementing & Operationalising	6
HSE Health & Wellbeing (H&W)	3	3	2=On Track 1=Off Track	1=Exploring and Preparing 1=Planning & Resourcing 1=Implementing & Operationalising	3
HSE Acute Hospitals (AH)	1	0			
Department of Education and Skills (DES)	7	6 (no update given for action 3.3.5)	6=On Track	2 =Planning & Resourcing 3=Implementing & Operationalising 1=Business as usual	4 (no evidence of planned activity actions 3.3.2, 3.3.4, 3.3.5)
Department of Transport, Tourism and Sport (DTTAS)	3	3	2=On Track 1=Needs Attention	2=Planning & Resourcing 1=Implementing & Operationalising	3
Department of Defence (DoD)	2	2	2=On Track	2=Implementing & Operationalising	2
Department of Agriculture, Food & the Marine (DAFM)	2	2	2=Need Attention	1=Exploring & Preparing 1=Implementing & Operationalising	2
Department of Employment Affairs & Social Protection (DEASP)	2	2	2=On Track	1=Planning & Resourcing 1=Implementing & Operationalising	2
Department of Rural and Community Development (DRCD)	2	2	2=Needs Attention	2=Planning & Resourcing	2
Department of Communications Climate Action & Environment (DCCAIE)	1	1	1=On Track	1=Planning & Resourcing	1
Broadcasting Authority of Ireland (BAI)	1	1	1=On Track	1=Business as usual	1
Press Council of Ireland (PCol)	1	1	1=On Track	1=Business as usual	1
Department of Health (DoH)	9	9	9=On Track	2=Exploring & Preparing 2=Planning & Resourcing 3=Implementing & Operationalising 2=Business as usual	9
Health & Safety Authority (HSA)	1	1	1=On Track	1=Planning & Resourcing	1
Department of Justice/IPS/Garda Siochána/Probation	10	10	7=On Track 3=Need Attention	1=Exploring & Preparing 4=Planning & Resourcing 5=Implementing & Operationalising	10
HEA/AOS	3	3	3=Need Attention	3=Exploring & Preparing	3

Key CfL implementation challenges identified from Dashboards received

Implementation Challenges	CfL Actions Impacted	Lead Agent	Commentary
Stakeholder Collaboration			
Competing priorities	1.1.2 Develop/implement Mental Health & Wellbeing Promotion plan	HSE H&W, DoH HI	<i>(CfL Dashboard entry):</i> ' Need to agree timeframe & resource from DoH with other priorities within Health Promotion & Improvement delaying progression in relation to convening a National Steering Committee'
Partnership working	7.1.1. Conduct proportionate evaluations of all major activities under the aegis of Connecting for Life; disseminate findings and share lessons learned with programme practitioners and partners	NOSP	<i>(Comment):</i> CfL Monitoring and Evaluation team need to be linked into all relevant CfL monitoring and evaluation work to ensure a focus on measurable behaviour change (i.e. outcomes) rather than activity and/or outputs.
Planning &Resourcing (staff, financing etc)			
Failure to plan for anticipated change	2.3.1 Develop Training & Education Plan (for community)	NOSP	<i>(Comment)</i> Due to delays in the replacement of two senior posts and one support post to NOSP's Strategy Coordination, Quality & Education Function – <ul style="list-style-type: none"> • Suicide prevention Training plan is yet to be published • National & area-level training targets have not be set • 'Priority groups' training targets have not been set
	2.3.2 Deliver Training as per Plan for community organisations		
	3.1.5 Provide training for health & social care professionals		
	5.4.1 Develop Training Plan (for those working with 'at risk'		
	5.4.2 Deliver training to staff in relevant government depts.		

Report compiled by Hugh Duane (NOSP)

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