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Connecting for Life

Report to the
**National Cross Sectoral Steering and
Implementation Group**
Q1-Q3 2017

HSE National Office for Suicide Prevention (September 2017)

Introduction

This is the fourth summary progress report under the *Connecting for Life (CfL)* strategy. As part of this reporting period, the HSE National Office for Suicide Prevention are testing the use of an Implementation Monitoring Dashboard, produced based on a review of the literature, to be used as a tool to monitoring implementation progress of *CfL*. Recently, lead agents of actions within *CfL* were engaged with NOSP in relation to the development of the *CfL Implementation Plan*. Based on the sign off by these lead agents on their actions as part of this plan, Implementation Monitoring Dashboards were circulated to them for completion. The list to follow outlines from whom which a Dashboard Template has been received from and included in this progress report.

Dashboard Templates received and included in this report:

- HSE Mental Health Division
- HSE National Office for Suicide Prevention
- HSE Primary Care Division
- HSE Health & Wellbeing Division
- HSE Acute Hospitals
- Press Council of Ireland
- Broadcasting Authority of Ireland
- Department of Education & Skills
- Department of Children and Youth Affairs/TUSLA
- Department of Defence
- Department of Social Protection
- Department of Transport, Tourism & Sport

Monitoring CfL Implementation Progress

The literature shows that it is important to set up systems to monitor (and evaluate) implementation to help strategy leads and implementers stay on track towards achieving their goals, while at the same time allowing for the identification of and response to setbacks and problems as they arise.

Research shows that organisations that are effective at strategic implementation have strong processes in place for systematically measuring and evaluating progress towards their goals. One mechanism used to monitor progress is quarterly or bi-annual implementation reviews. Key components of effective reviews are articulation of critical milestones (i.e. anticipated major events, accomplishments, or key decisions) and performance metrics (i.e. **on track**, **needs attention**, **off track**) for each major activity being undertaken. Thereby providing an opportunity to celebrate progress and achievements as well as highlighting areas which are off track and indicating why. The literature also shows that regular strategic reviews can be the key to holding people accountable for making sure activities happened.

A successful system for monitoring implementation delivers timely and relevant information that allow strategy leads and implementers to track progress towards outcomes and make adjustments to implementation arrangements as necessary. Such a system must track progress in a deliberate and systematic manner at regular intervals across all stages of implementation. The literature clearly shows that implementation is a process that occurs in distinct stages (Exploration, planning, implementation & business as usual). Please note that this process is not a linear one, one stage does not crisply end as another begins; you may move back and forth between stages. Stages of implementation do however provide a useful stage-based framework for thinking about the work. **Implementation Stage** based on The Centre for Effective Services (CES) Stages of Implementation are:

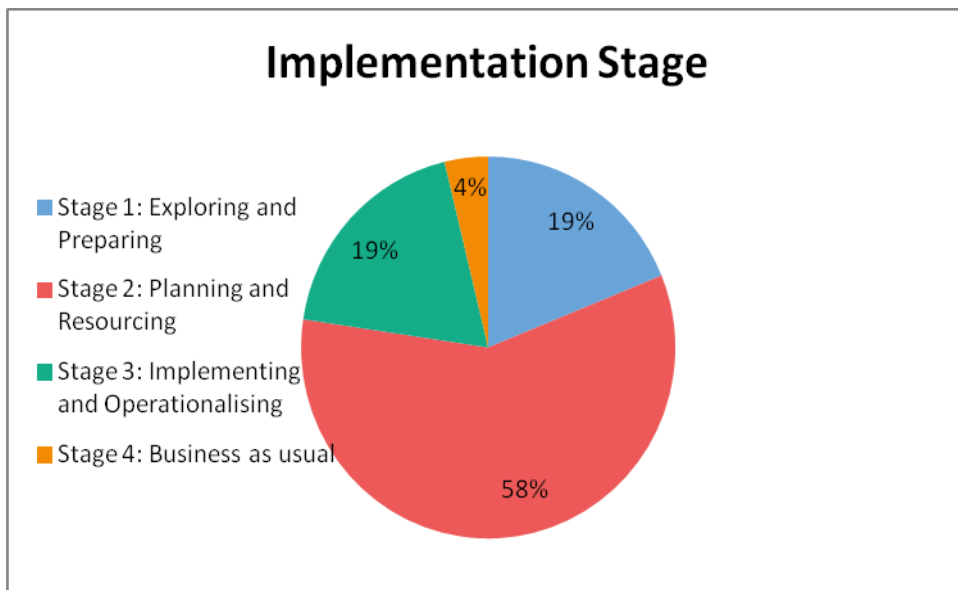
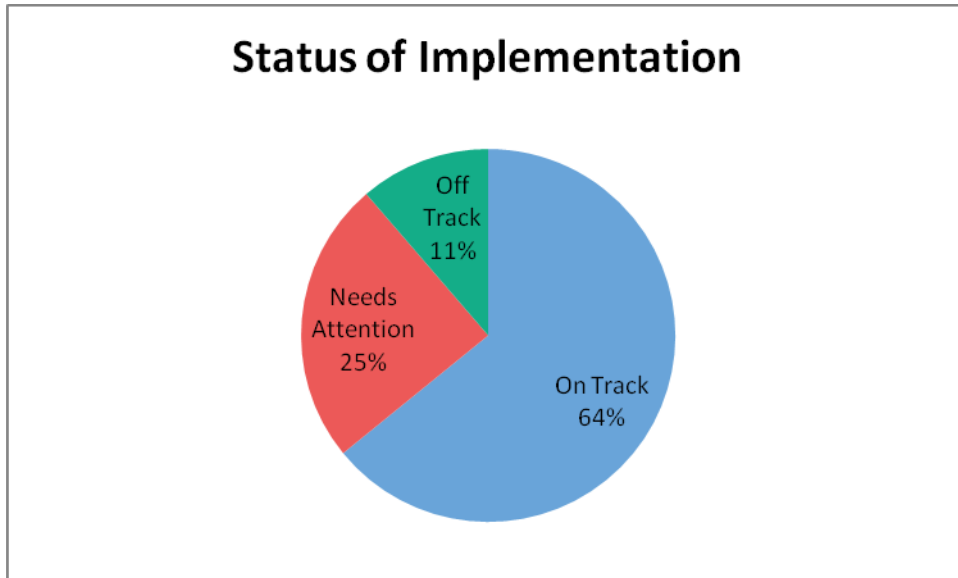
- **Stage 1:** Exploring and Preparing (and assessing readiness for change)
- **Stage 2:** Planning and Resourcing (and preparing for change)
- **Stage 3:** Implementing and Operationalising
- **Stage 4:** Business as usual

For the purposes of this report, based on information provided in dashboard templates received, the NOSP has given an overall 'Status of Implementation' and 'Implementation Stage' per action. The report outlines this information by:

- Total number of actions in which activity was reported on as part of this reporting period
- Goal, giving also an outline of 'Key Progress' in 2017 and 'Areas Of Concern/To be Prioritised'
- CfL Action Lead Agent

Outline of CfL Implementation Progress as of September 2017

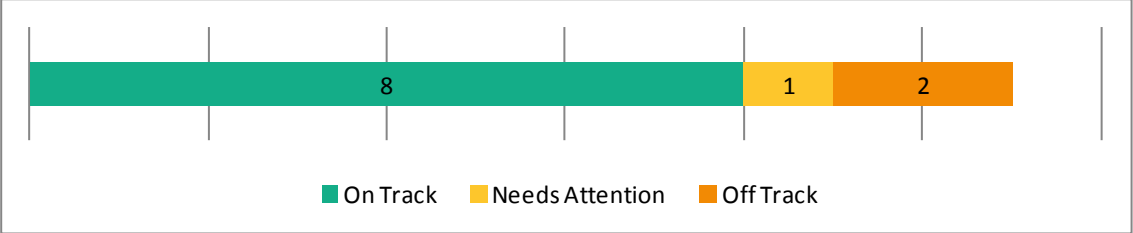
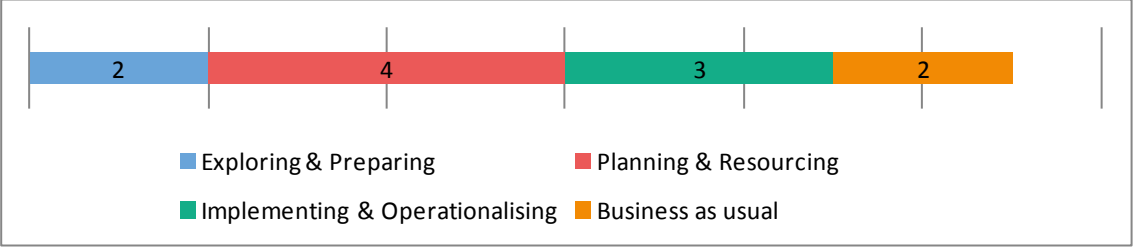
As part of this reporting period, out of 69 actions within CfL, an update on progress was received for 53 actions. The pie-charts to follow outline the 'Status of Implementation' and 'Implementation Stage' based on the activity conducted on these 53 actions.



Overview of Progress by CfL Goal

The tables to follow outline implementation progress by Goal, based on the dashboard templates received as part of this reporting period. It outlines the total number of actions per Goal, number of actions which an update has been received for, the status of implementation and implementation stage. Key 'Progress Achieved' and 'Areas of Concern/To be Prioritised' is also outlined.

Goal 1: To improve the nation's understanding of, and attitudes to, suicidal behaviour, mental health and wellbeing

No of Actions: 12	No for which update received: 11
Status of Implementation:	
 <p>■ On Track ■ Needs Attention ■ Off Track</p>	
Implementation Stage:	
 <p>■ Exploring & Preparing ■ Planning & Resourcing ■ Implementing & Operationalising ■ Business as usual</p>	
Key Progress Achieved in 2017	
<ul style="list-style-type: none"> -Preliminary report completed in relation to a survey of attitudes conducted amongst GPs (Action 1.1.1) -Evaluation of Green Ribbon campaign 2017 completed. (Action 1.3.1) -Evaluation of the #littletlings campaign to identify next iteration of the work.(Action 1.1.3) - In relation to the development of an up-to-date national directory of mental health services, currently process is taking place finalising the validation of information with the CHOs etc and preparing the intranet platform. (Action 1.2.1) -Second phase of USI, HSE Addiction services AND Drugs.ie harm reduction campaign delivered (Action 1.1.4) -Building on scoping paper to map and outline existing potential implementation structures for Mental Health Promotion Plan (Action 1.1.2) -The Memo of Agreement between the GAA and the GPA (Gaelic Players Association) in relation to the inter-county player endorsements was approved by Minister of State O'Donovan on 19 April 2017. This agreement stated that players would make appearances and provide endorsements to raise awareness of certain wellbeing issues including mental health (Action 1.1.5) 	

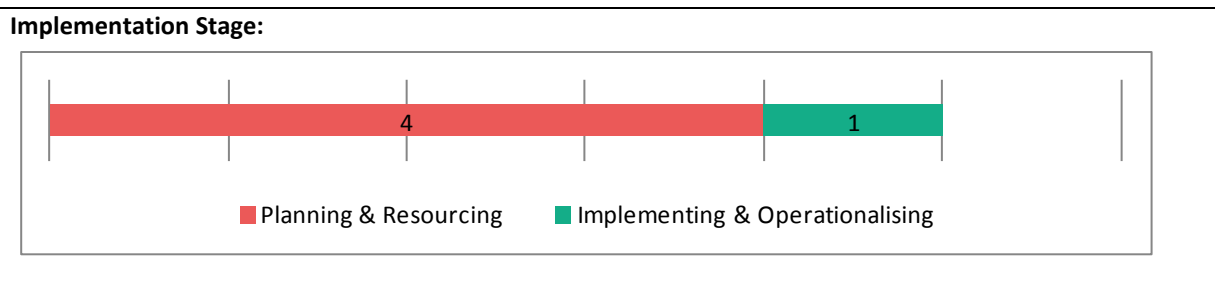
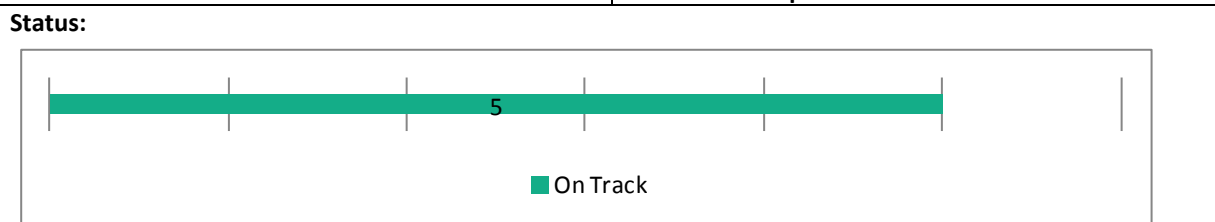
Of Concern/To Be Prioritised

Action 1.4.1 requires further discussion and consideration with regard to online platforms. A discussion paper has been circulated by the Dept of Communications, Climate Action and Environment to the relevant partners.

Anticipated delay in delivery on milestone for action 1.1.2.

Goal 2: To support local communities' capacity to prevent and respond to suicidal behaviour

No of Actions: 5	No for which update received: 5
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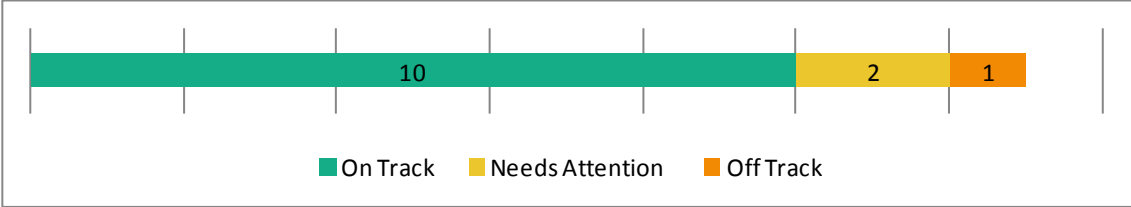

Key Progress Achieved in 2017

- Content of bereavement programme signed off and T4T in process (Action 2.3.2)
- Finalising of online suicide prevention modules (Action 2.3.2)
- Waterford Plan launched. Carlow are awaiting sign off on final draft for launch in Oct. Sligo/Leitrim are at final draft stage (Action 2.1.1)
- A number of performance monitoring indicators have been established and will be presented to the working group in Sept to pilot in Qtr 3. CHO's who have moved into implementation phase will be piloting a number of developed performance indicators. (Action 2.1.1)
- Delivery of Smart Start ongoing in preschools with achievement target of increase by 5% in 2017 of preschools delivering Smart Start on target (Action 2.3.3)
- Review meeting took place with Department of Education (NEPS) with agreement to scope the development of an Irish programme to eventually replace Zippy's Friends and be supported by health and education sectors. (Action 2.3.3)

Of Concern/To Be Prioritised

-Due to a key vacant position within NOSP, the publication of the National Training and Education Plan has been delayed. It is anticipated that publication will occur by end of year.

Goal 3: To target approaches to reduce suicidal behaviour and improve mental health among priority groups

No of Actions: 14	No for which update received:13
<p>Status:</p>  <p>■ On Track ■ Needs Attention ■ Off Track</p>	
<p>Implementation Stage:</p>  <p>■ Exploring & Preparing ■ Planning & Resourcing ■ Implementing & Operationalising</p>	
<p>Key Progress Achieved in 2017</p>	
<ul style="list-style-type: none"> -Recruit and establish CAMHS community based forensic mental health team. At present, nursing post has been filled (Action 3.3.7) -Supporting the implementation of CAMHS SOP based on review of current level of implementation across teams, including 16/17 years protocol. Gap analysis completed and MHD has met with CAPA. Working Group established and inaugural meeting took place on 8th Sept with a review to be completed Qtr 1 2018 (Action 3.3.7) -Protocol for Homeless Persons in Acute Hospitals and Mental Health Facilities developed and disseminated to key stakeholders for feedback (Action 3.1.3) - In relation to the National Overdose Prevention Strategy, Implementation of training plan taking place and provision of naloxone kits. 840 people trained and 1200 kits distributed. (Action 3.2.1) -32 Youth Mental Health promotion workshops delivered with 420 participants trained Q1-3. (Action 3.1.6) - Engage Training delivered to over 350 people between Q 1 - Q3 2017 (Action 3.1.6) -All units deploying overseas, including Naval Service ships deploying to the Mediterranean, briefed on suicide and self-harm. (Department of Defence, Action 3.1.1) -New entrants to DSP made aware of guidelines relating to suicide and self-harm as part of induction programme. So far in 2017, 204 new staff completed induction, while a total of 309 staff received customer service training in which awareness raising is addressed. (Department of Social Protection, Action 3.1.1) -Recruitment in train of 10 additional NEPs psychologists (Q.1-4) (Action 3.3.1) -Roll out of Incredible Years Programme to all DEIS primary schools & Rollout of Friends Programme to 	

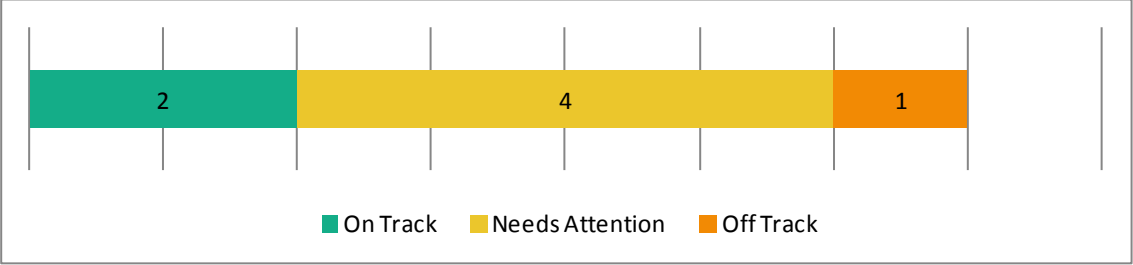
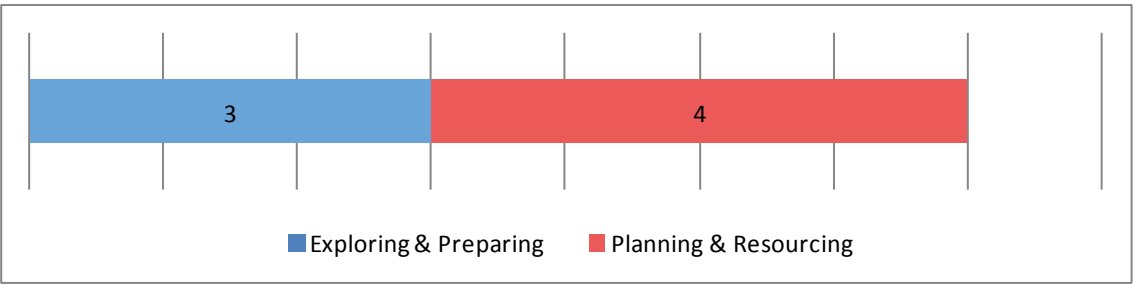
Primary and Post Primary schools (Action 3.3.2)

-Junior Cycle Wellbeing Guidelines introduced to schools autumn 2017 (Action 3.3.5)

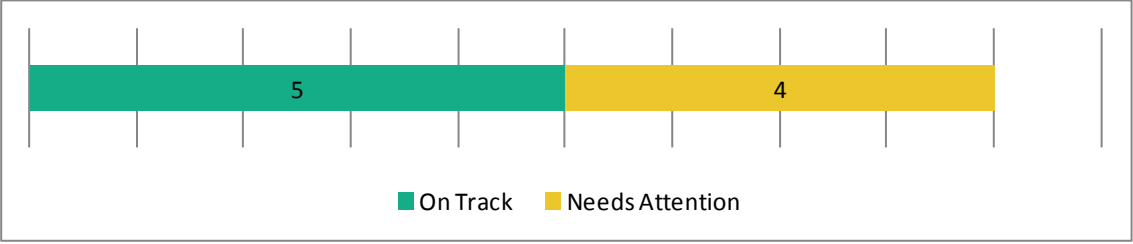
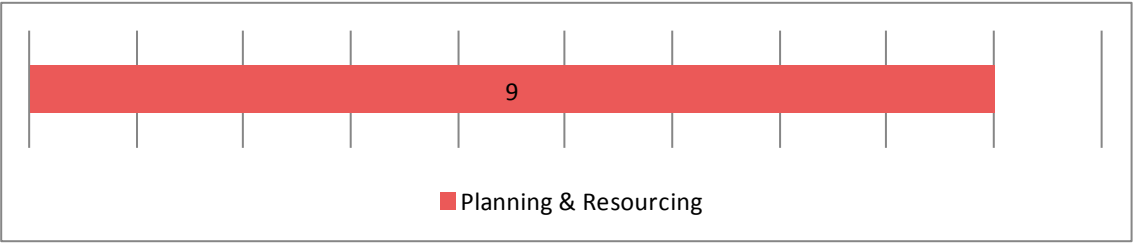
Of Concern/To Be Prioritised

Actions 3.1.1/3.1.2 requires the establishment of a cross sectoral operational group to drive implementation. Working groups would support knowledge sharing and problem solving in the realisation of actions.

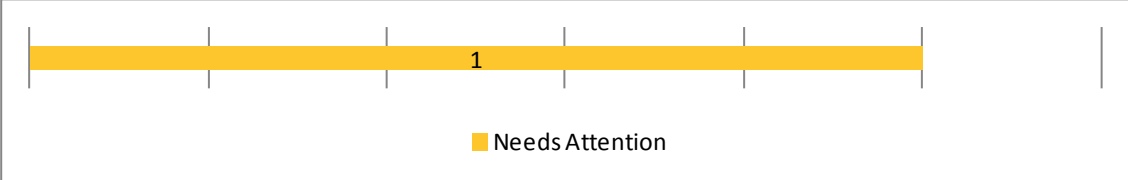

Goal 4: To enhance accessibility, consistency and care pathways of services for people vulnerable to suicidal behaviour

No of Actions: 8	No for which update received:7
Status:	
 <p>A horizontal stacked bar chart representing the status of 8 actions. The bar is divided into three segments: a green segment on the left labeled '2', a yellow segment in the middle labeled '4', and an orange segment on the right labeled '1'. Below the bar is a legend with three items: a green square followed by 'On Track', a yellow square followed by 'Needs Attention', and an orange square followed by 'Off Track'.</p>	
Implementation Stage:	
 <p>A horizontal stacked bar chart representing the implementation stage of 8 actions. The bar is divided into two segments: a blue segment on the left labeled '3' and a red segment on the right labeled '4'. Below the bar is a legend with two items: a blue square followed by 'Exploring & Preparing' and a red square followed by 'Planning & Resourcing'.</p>	
Key Progress Achieved in 2017	
<ul style="list-style-type: none"> -80% complete in terms of national 7/7 service roll out (Action 4.1.1) - Terms of Reference have been drafted for Dual Diagnosis Working Group (Action 4.1.2) -PMO are carrying out extensive consultation to finalise their discovery process in relation to assessment approaches (Action 4.1.4) -Testing currently being undertaken by ICT on the data collected as part of the Clinical Care Programme (Action 4.1.5) -RE Evaluation of Jigsaw Services, all documentation has been received regarding their clinical, financial and quality procedures and policies. Financial evaluation ToR have been agreed and evaluation is scheduled for 26th Sept (Action 4.2.1) -DBT project is at final evaluation stage. Gap analysis reviewed (Action 4.2.1) -MHD have carried out a mapping exercise to establish what bereavement services are available throughout the 9 CHO areas and identified gaps (Action 4.3.1) 	
Of Concern/To Be Prioritised	

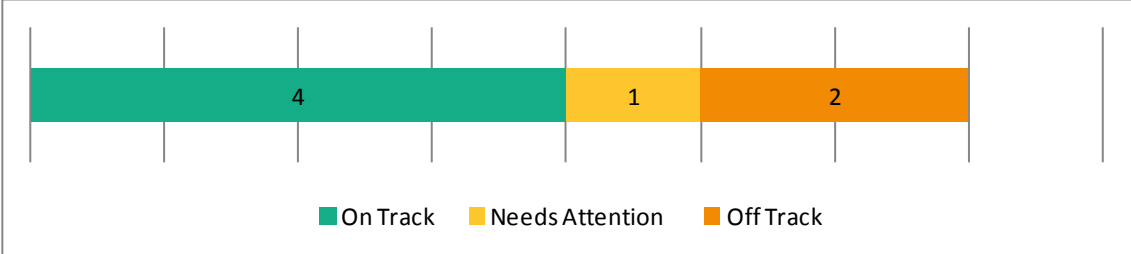
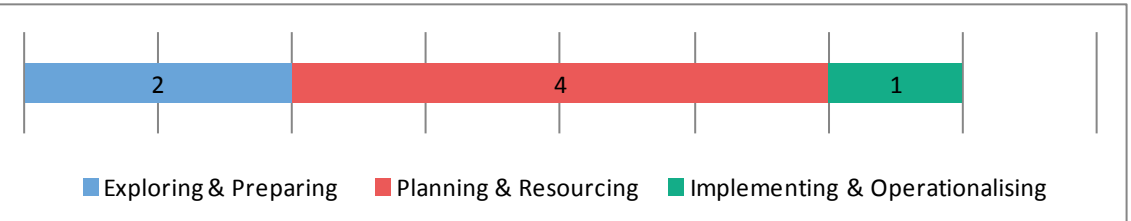
Goal 5: To ensure safe and high quality services for people vulnerable to suicide

No of Actions: 16	No for which update received: 9
<p>Status:</p>  <p>■ On Track ■ Needs Attention</p>	
<p>Implementation Stage:</p>  <p>■ Planning & Resourcing</p>	
<p>Key Progress Achieved in 2017</p>	
<p>-Draft Guidance produced for Suicide Prevention Services which is aligned with HSE MHD Guidance. (Action 5.1.1)</p> <p>-CfL quarterly newsletter sent in July. Ongoing building of repositories (Action 5.1.5)</p> <p>-PMO are carrying out extensive consultation to finalise their discovery process in terms of an exploration of procedures used to respond to suicidal behaviour across mental health services. (Action 5.2.1)</p> <p>-STORM courses completed (Q.1-3) 2 Bde (Dublin x 2, Athlone) 1 Bde (Kilkenny, Limerick, Cork) Naval Base, Curragh Camp / Numbers trained 150. In addition STORM training was provided to Kilkenny Fire Service (Department of Defence, Action 5.4.2).</p> <p>-124 staff received safeTalk training and 68 staff have completed stress awareness courses to end July 2017 (Department of Social Protection, Action 5.4.2)</p> <p>Launch of Guidance Competencies Framework by National Centre for Guidance in Education, Q3 (Action 5.1.2)</p> <p>Pilot completed for the delivery of safeTALK training for teachers through Education Centres in collaboration with NOSP (Department of Education & Skills, Action 5.4.2)</p>	
<p>Of Concern/To Be Prioritised</p>	
<p>-DOH Key actions require follow up/clarification and adaption regarding wording- Action 5.4.5</p> <p>-Action 5.4.2 requires the establishment of a cross sectoral operational group drive implementation. Working groups would support knowledge sharing and problem solving in the realisation of actions.</p>	

Goal 6: To reduce and restrict access to means of suicidal behaviour

No of Actions: 5	No for which update received:1
<p>Status:</p> 	
<p>Implementation Stage:</p> 	
<p>Key Progress Achieved in 2017</p>	
<p>-Additional funds have been ring fenced for capital expenditure to improve safety within HSE Mental Health Services (Action 6.2.2).</p>	
<p>Of Concern/To Be Prioritised</p>	
<p>-DOH Key actions require follow up/clarification and adaption regarding wording- Action 6.1.1</p>	

Goal 7: To improve surveillance, evaluation and high quality research relating to suicidal behaviour

No of Actions: 9	No for which update received: 7
<p>Status:</p>  <p>■ On Track ■ Needs Attention ■ Off Track</p>	
<p>Implementation Stage:</p>  <p>■ Exploring & Preparing ■ Planning & Resourcing ■ Implementing & Operationalising</p>	
Key Progress Achieved in 2017	
<ul style="list-style-type: none"> - As of the 1st of September 2017, all individuals taking part in the ‘Understanding Self Harm Training’ are asked to complete short online questionnaire pre/post training (and at a follow-up interval). (Action7.1.1) -Draft findings presented to the Implementation Advisory Group from the evaluation of the planning process that took place as part of the development of the local area action plans. (Action7.1.1) - An RfT was issued and awarded to a consultant (Kate Wilkinson) to design and facilitate the implementation of a sustainable LEARNING COMMUNITY OF PRACTICE with HSE Resource Officers for Suicide Prevention (Action7.1.1) -Tender Request issued to conduct a review of the National Self-Harm Registry Ireland. Tender awarded to successful applicant.(Action 7.2.3) -Findings from the feasibility study on a review of coronial files which NOSP commissioned the HRB to conduct have been signed off on. The HRB have been commissioned to continue a pilot review of coronial files (Action 7.4.3) -Risk register is now fully developed and reported on regularly in relation to serious incidents within mental health services (Action 7.2.2) 	
Of Concern/To Be Prioritised	
<ul style="list-style-type: none"> -Action 7.1.1 Technical issues with roll out of USH data collection 	

Overview of Progress by *CfL* Action Lead Agent

The table to follow gives an outline of implementation progress to date by *CfL* Action Lead Agent

Name of Government Department/State Agency	No of Lead Actions assigned	Status	Implementation Stage
HSE Mental Health Division	16	5 On Track 8 Needs Attention 3 Off Track	- 4 at Exploring and Preparing - 11 at Planning and Resourcing - 1 at Implementing and Operationalising
HSE National Office for Suicide Prevention	18	12 On Track 3 Needs Attention 3 Off Track	- 5 at Exploring and Preparing - 12 at Planning and Resourcing - 1 at Implementing and Operationalising
HSE Primary Care Division	6	5 On Track 1 Needs Attention	- 1 at Exploring and Preparing - 3 at Planning and Resourcing - 2 at Implementing and Operationalising
HSE Health & Wellbeing Division	3	2 On Track 1 Needs Attention	- 1 at Exploring and Preparing - 2 at Planning and Resourcing
HSE Acute Hospitals	1	On Track	- 1 at Exploring and Preparing
Department of Education and Skills	7	7 On Track	- 3 at Planning and Resourcing - 4 at Implementing and Operationalising
Department of Children & Youth Affairs/TUSLA	4	4 On Track	- 3 at Planning and Resourcing - 1 at Implementing and Operationalising
Department of Transport, Tourism and Sport	3	2 On Track 1 Needs Attention	- 2 at Planning and Resourcing - 1 at Implementing and Operationalising
Department of Defence	2	2 On Track	- 2 at Implementing and Operationalising
Department of Social Protection	2	2 On Track	- 1 at Implementing and Operationalising - 1 at Business as usual
Broadcasting Authority of Ireland	1	1 On Track	- 1 at Business as usual
Press Council of Ireland	1	1 On Track	- 1 at Business as usual

Enablement Steps Now Required

- ✓ Setup of Working Groups to drive implementation. Of importance is the establishment of: **Communications and Social Media Working Group (Action 1.4.1)**
This group to agree the parameters of the action and consider the key milestones and outputs anticipated from collaboration.
- ✓ Review/edit of the following actions to be considered:

Action	Lead Agent	Existing wording	Recommendations put forward
1.4.1	DECNR	Engage with online platforms to encourage best practice in reporting around suicidal behaviour, so as to encourage a safer online environment in this area	“Engage with online platforms to encourage best practice regarding suicide related content, so as to encourage a safer online environment in this area.”
5.4.5	DOH	Support the National Clinical Effectiveness Agenda and implement national clinical guidelines in line with the NCEC requirements	Difficulty regarding wording of same. Requirement to change from Guidelines to Guidance possibly.
6.1.1	DOH	Work with professional groups to reduce the inappropriate prescribing of medicines commonly used in intentional overdose, including benzodiazepines and SSRIs	Word change may be required from ‘inappropriate’ to other
Commitment edits			
5.4.2	Dept of Enterprise/ HAS	To develop guidance, training and support to workplaces in relation to suicide prevention and critical incident in collaboration with NOSP	Editing of commitment to reflect the function and mandate of the HSA