



Cúram Sláinte Pobail Thoir  
ag freastal ar Bhaile Athá Cliath Thoir Theas,  
Bhaile Athá Cliath Theas agus Cill Mhantain  
**Community Healthcare East**  
serving Dublin South East, Dublin South and Wicklow



# Connecting for Life Dublin South East, Dublin South and Wicklow

## Implementation Plan 2022 - 2024

April 2022



Version 1.1: 4<sup>th</sup> April 2022

## **Inside front cover**

Are you, or someone you know, in crisis now and need someone to talk to?

Please do not be alone. If you are worried about yourself or someone you know it is important to get help as soon as possible. Everyone needs help from time to time. In fact, asking for help is a sign of personal strength.

Your first point of contact is your local GP. If it is late in the evening or at the weekend, contact your local out of hours doctor's service.

## **Dublin South East, Dublin South and Wicklow:**

### **Emergency Departments:**

- St. Vincent's University Hospital
- St. Michael's Hospital Dun Laoghaire
- Childrens Health Ireland at Crumlin
- Childrens Health Ireland at Tallaght

### **GP Out of Hours Services**

- EDOC (North East Wicklow, Dun Laoghaire and East Dublin): 01 221 4000, [www.edoc.ie](http://www.edoc.ie)
- Caredoc (South Wicklow): 0818 300365 / 059 913 8100, [www.caredoc.ie](http://www.caredoc.ie)

Contact the Emergency Services on 999 or 112.

Call the Samaritans 24 hour Freephone listening service on 116 123.

Visit [www.yourmentalhealth.ie](http://www.yourmentalhealth.ie) for information on mental health supports and services.

## Table of Contents

Figures and Tables .....	i
Section One: Background .....	1
1.1 Suicide and self-harm data in Ireland.....	3
1.2 Priority Groups.....	6
1.2.1 National Priority Groups .....	6
1.3 Impact of Covid-19 .....	7
Section Two: The Context for Connecting for Life Dublin South East, Dublin South and Wicklow.....	9
2.1 National Policy Context.....	9
2.2 Dublin South East, Dublin South and Wicklow Community Healthcare Context.....	11
2.2.1 Local Policy Context.....	11
2.3 Demographic information for Dublin South East, Dublin South and Wicklow Community Healthcare .....	12
2.4 Suicide and Self Harm in Dublin South East, Dublin South and Wicklow Community Healthcare .....	17
2.5 Local Priority Groups .....	19
2.6 Service Provision.....	19
2.7 The role of the HSE Resource Officer for Suicide Prevention (ROSP) .....	20
2.8 Suicide Prevention Training .....	20
Section Three: Development of the new plan.....	23
Section Four: Implementation Structures .....	26
Section Five: Monitoring and Evaluation .....	29
Section Six: Communications Plan.....	30
Section Seven: Action Plan .....	31
GOAL ONE .....	31
GOAL TWO.....	45
GOAL THREE .....	55
GOAL FOUR .....	75
GOAL FIVE .....	88
GOAL SIX .....	95
GOAL SEVEN .....	98
Section Eight: Appendices .....	102
List of Appendices .....	102
Appendix 1. Glossary of Terms .....	103

Appendix 2. Abbreviations .....	106
Appendix 3. Other relevant national plans and strategies .....	108
Appendix 4. National Connecting for Life Actions not included in Local Action Plan .....	109
Appendix 5. List of References .....	117

## Figures and Tables

### Figures:

Figure 1. Crude standardised suicide rates per 100,000 of the population over the period 2005-2020

Figure 2. Self-harm hospital presentations standardised per 100,000 of the population

Figure 3. Community Healthcare Dublin South East, Dublin South and Wicklow three-year moving average suicide rates

Figure 4. Community Healthcare Dublin South East, Dublin South and Wicklow self-harm hospital presentations per 100,000 population 2017 – 2019 by HSE Local Health Office – Male

Figure 5. Community Healthcare Dublin South East, Dublin South and Wicklow self-harm hospital presentations per 100,000 population 2017 – 2019 by HSE Local Health Office – Female

Figure 6. Suicide Prevention Training Stakeholder Groups

Figure 7. Overview of the national Connecting for Life implementation structures

Figure 8. Dublin South East, Dublin South and Wicklow Community Healthcare Connecting for Life Implementation Structures

### Tables:

Table 1. Population Age Profile for Dublin South East, Dublin South and Wicklow Community Healthcare

Table 2. Population Ethnic Profile Table 1. Population Age Profile for Dublin South East, Dublin South and Wicklow Community Healthcare

Table 3. Community Healthcare Dublin South East, Dublin South and Wicklow self-harm hospital presentations per 100,000 population 2017 – 2019 by HSE Local Health Office

## Section One: Background

Ireland's national suicide prevention strategy, Connecting for Life (CfL), was launched in June 2015 and the Implementation Plan for 2017-2020 was published in late 2017. In December 2019 the Department of Health supported an extension of CfL for a further five years, with official approval by Cabinet granted in November 2020. A national implementation plan for 2020-2022 was published. To align with this plan, the 10 local action plans have been updated to reflect the new national implementation plan.

The process to develop the 2020-2022 national implementation plan was informed by the **Interim Strategy Review of Connecting for Life 2015-2020**, in which a review of the national implementation of the CfL strategy to date was completed. One of the specific aims of the review was to identify longer-term strategic goals for CfL, beyond 2020, to assist on-going implementation of a whole of government approach to suicide prevention in Ireland. The review concluded that the strategic vision of CfL and the seven strategic goals of CfL remain relevant beyond 2020 and that a more concentrated, intensive and consistent implementation of the strategy beyond 2020 is required.

Specifically, the review concluded that some progress was evident across all seven strategic goals, with good progress highlighted in stigma reduction, self-harm, public health communications, media monitoring, the development of local CfL action plans, early intervention services, the coronial process for suicide death registrations, GP prescribing behaviours (regarding benzodiazepines), amongst other strategic areas. However, some areas were highlighted as having limited progress made, including the need for:

- More co-ordinated delivery of suicide prevention training;
- Strategic planning around priority or vulnerable groups;
- Restricting access to means of suicide in public places; and
- Evaluating the cost-effectiveness of the strategy.

While the first cycle of CfL illustrated an effective example of whole of government working (with 23 government departments working together with other statutory and non-statutory implementation partners), it is currently a case of much achieved, more to do at a national level and this is reflected in Dublin South East, Dublin South and Wicklow.

The process for the preparation of the new plan for Dublin South East, Dublin South and Wicklow is shown in [Section Three](#), and was aligned to the development of the national Connecting for Life Implementation Plan 2020 – 2022.

In March 2017, the Connecting for Life Action Plan for Community Healthcare East (Dublin South East, Dublin South & Wicklow) 2015 – 2020 was launched. This was based on the same vision, goals, objectives and measurable outcomes as outlined in the National Strategy.

The SUPRESE (Self-evaluation instrument for assessing suicide prevention at sub-national (regional/local) level) was used to obtain feedback on implementation progress for the first plan. Lessons learned from other areas has also been considered.

Over the past five years significant work across all of the seven goals has been achieved in Connecting for Life Dublin South East, Dublin South and Wicklow Community Healthcare, with particular successes in relation to:

- Suicide prevention and training delivery
- Establishment of the Suicide Bereavement Liaison Service for the CHO area
- The establishment of new services such as Jigsaw in Wicklow
- New protocols were developed within the Mental Health Services to guide the services response to suicide
- New information resources were developed and distributed annually across the area.

- Specific projects in parts of the Community Healthcare area e.g.:
  - 3 pilot Social Prescribing Programmes across the CHO area
  - The Woodlands for Health project was supported and extended to the Dun Laoghaire Rathdown area.
- Establishment of the Connecting for Life implementation structures
- Mental Health Promotion activities and initiatives for priority groups and the general population across the Dublin South East, Dublin South and Wicklow Community Healthcare area

There were however also areas of challenge in relation to the implementation of the local plans:

- Supporting active engagement and participation of all CfL stakeholders through the implementation structures
- Supporting high risk/priority groups effectively
- Managing the impact of the Covid 19 pandemic
- The impact of the cyber-attack on the HSE

## 1.1 Suicide and self-harm data in Ireland

The principle aim of CfL is to reduce suicide in Ireland, with a 10% reduction in suicide rates adopted as the minimum target of the strategy. This target was set by the World Health Organisation (WHO 2014). Given the complex and multifarious nature of risk factors for suicide, achieving this target will be challenging, and as the interim review of CfL highlighted, so too will be evidencing the contribution of CfL to any reductions observed.

Figure 1 below illustrates the trends observed in suicide rates in Ireland over the period 2005-2020. Analysis of the crude standardised suicide rates indicates that there was a substantial increase in suicide rates observed during the recession years in 2009-2013, followed by successive decreases during the 2015-2018 period. Looking at the period covered in Figure 1, the male rate is approximately 4 times



higher than that of females, with this lowering to approximately 3 times higher in 2019. Data indicates an increase in suicide rates observed in 2019 for both men and women.

**Figure 1.** Crude standardised suicide rates per 100,000 of the population over the period 2005 - 2020 (2020 data is provisional). Data Source: Central Statistics Office.

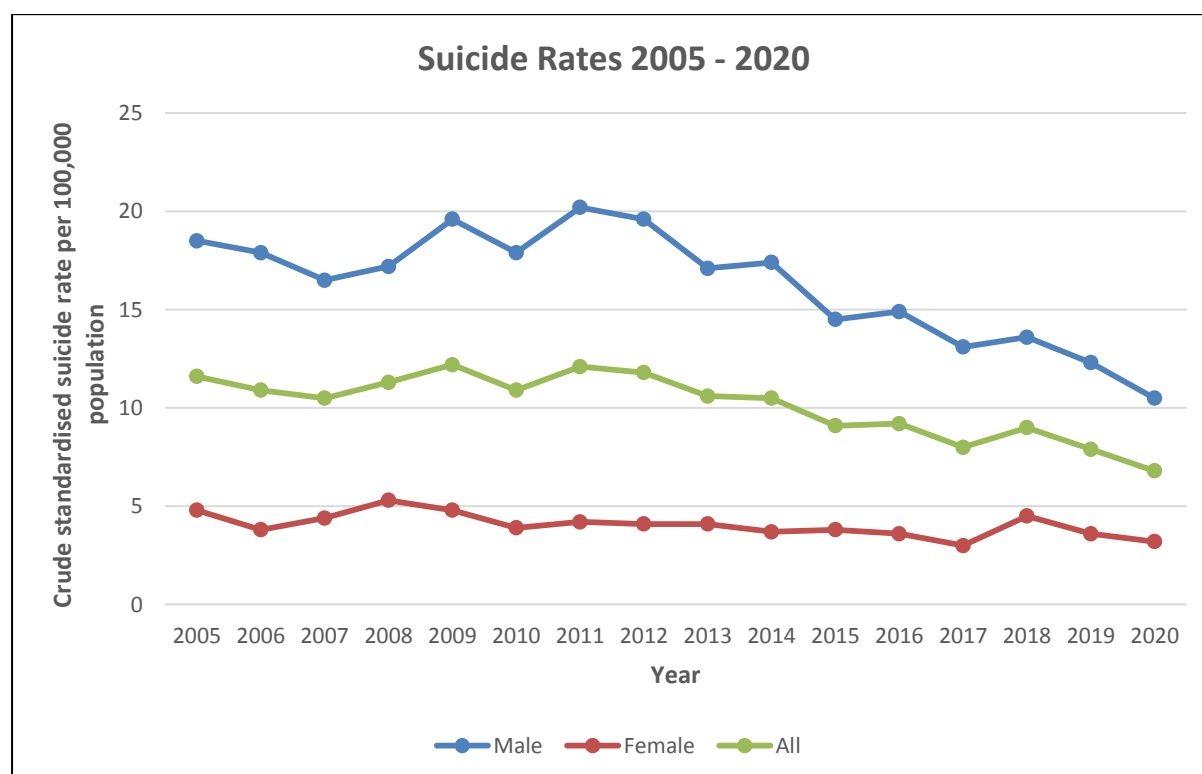
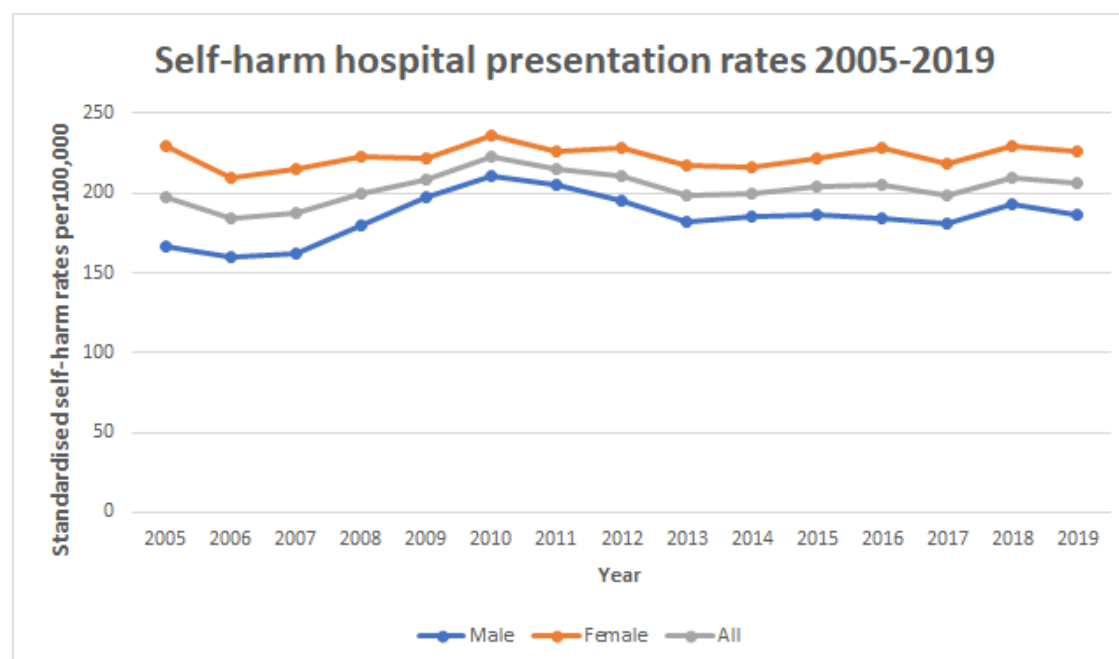


Figure 2 illustrates the standardised self-harm rates as based on presentations to hospitals, collected by the National Self-Harm Registry (National Suicide Research Foundation 2022). The national rate of self-harm presentations peaked in 2010, again during the recession period in Ireland. This was followed by slight successive decreases up to 2013, with the rate then relatively consistent up to 2017. Looking at the period covered in figure 2, the female rate of self-harm is approximately 1.2 times higher than the male rate. A 6% increase in self-harm hospital presentations was reported in 2018.

**Figure 2.** Self-harm hospital presentations standardised per 100,000 of the population. Data Source: National Suicide Research Foundation.



There are a number of issues with suicide data in Ireland as identified in the national strategy:

- Getting more timely data on suicides in Ireland and;
- Getting more accurate and comprehensive data on those that die by suicide.

In Ireland, suicide mortality data is collated and reported on by the Central Statistics Office (CSO). This data is gathered by allocating statistical codes to different causes of death, based on information included in official death certificates (National Office for Suicide Prevention 2019). There are two types of suicide data currently reported by the CSO, year of registration (of death) data, and year of occurrence (of death) data. Year of occurrence data is more reliable and is used by the NOSP and government. There is a time lag of approximately two years in obtaining more reliable year of occurrence data from the CSO, making timely responses to suicide prevention and postvention difficult. The national Garda Data Sharing Protocol is due to be approved in 2022 which will enable more accurate timely data sharing.

In addition, current data on suicide has limited information about the people who have died by suicide, including mainly, county of death, manner of death, age and gender. While helpful and invaluable to directing current work on suicide prevention, it does not allow for identification of additional risk factors for suicide to guide policy and service responses. To help address this, NOSP in partnership with the Health Research Board (HRB) and Irish coroners have been collating death investigation and administrative data collected as part of the coronial process to provide a more in-depth overview of suicide in Ireland that is currently available through the vital statistics released by the CSO.

## **1.2 Priority Groups**

### **1.2.1 National Priority Groups**

In the national strategy there is an identified list of priority groups for suicide prevention activities. These groups were as follows:

- Health/mental health related groups: People with mental health problems of all ages, those who have engaged in repeated acts of self-harm, people with alcohol and drug problems and people with chronic physical health conditions;
- Minority groups: Members of the LGBTQI+ community, members of the Traveller community, people who are homeless, people who come in contact with the criminal justice system (e.g. prisoners), people who have experienced domestic, clerical, institutional, sexual or physical abuse, asylum seekers, refugees, migrants and sex workers;
- Demographic cohorts: Middle aged men and women, young people and economically disadvantaged people;
- Suicide related: People bereaved by suicide;
- Occupational groups: Healthcare professionals, professionals working in isolation (e.g. veterinarians, farmers).

A focused approach to the CfL Priority Groups has come out of the NOSP collaborative research grant scheme, as this addresses gaps in knowledge for some priority groups. In addition, NOSP's review of research under CfL has also identified gaps.

### 1.3 Impact of Covid-19

It is likely that the Covid-19 pandemic will impact on mental health, and this has been indicated in findings from the Covid-19 Psychological Response Consortium (C19PRC) study - a collaboration between researchers in Ireland, Spain and the United Kingdom. Initial findings from this study (which surveyed approximately 1,000 respondents in Ireland) reported that mental health problems are common; 41% of people reported feeling lonely, 23% reported clinically meaningful levels of depression, 20% reported clinically meaningful levels of anxiety, and 18% reported clinically meaningful levels of post-traumatic stress (Spikola et al 2020).

The findings of the June 2021 research paper *"Predicting risk along the suicidality continuum: A longitudinal, nationally representative study of the Irish population during the COVID-19 pandemic"* (Hyland et al 2022), suggests that the COVID-19 pandemic may not be an exacerbating factor in suicidal behaviour; however, continued monitoring of the population over an extended period of time will be necessary.

The impact of Covid-19 on the work of CfL NGO partners has also been evident in monthly surveys conducted to track the effects of the public health emergency on their suicide prevention work. While it has been apparent that NGO partners have adapted effectively to the demands placed in them by Covid-19, there have been some concerns raised. Some issues reported in these surveys over the period April-June 2020 included:

- Clients facing issues at home such as domestic abuse;
- Increased alcohol and substance misuse;
- Restricted access to mental health and other health services;

- Not all clients having the capacity or means to engage in online mental health services;
- Cramped /overcrowded accommodation;
- Home-schooling a stressor both young people and parents;
- Stress for staff delivering mental health services remotely with limited peer support / supervision.

### **Impact of Covid 19 pandemic in Dublin South East, Dublin South and Wicklow Community Healthcare:**

- Delivery of Suicide Prevention training
- Provision of suicide bereavement responses to individuals and communities
- Access to supports and services
- Increase in mental health problems in the general population due to the pressures of the pandemic
- ROSEP and other HSE staff deployment
- Action lead and partners access to remote working technology and the inability to meet people face to face, thus there was very limited frontline engagement and this impacted on relationship building and development

## Section Two: The Context for Connecting for Life Dublin South East, Dublin South and Wicklow

### 2.1 National Policy Context

There are a number of national policies (and some legislation) which are relevant to suicide prevention, mental health and well-being. There are also other strategies which focus on specific CfL priority groups (for example Travellers, people who use drugs/alcohol or people who are homeless). This is important from an implementation perspective as it highlights a diverse range of policy instruments which can reinforce the objectives of CfL as it enters the next phase.

- **Sharing the Vision.** A Mental Health Policy for Everyone. Launched in June 2020, 'Sharing the Vision – A Mental Health Policy for Everyone' is the successor to 'A Vision for Change' that was launched in 2006. Sharing the Vision focuses on developing a broad based, whole system mental health policy for the whole of the population. The vision of the policy is to create a mental health system that addresses the needs of the population through a focus on the requirements of the individual. This policy supports continued implementation of Connecting for Life and specifically states that the Department of Health will extend the timeframe and funding for CfL to 2024. Specific actions which overlap with CfL (and, in particular, this implementation plan) can be seen in the areas of: stigma reduction; mental health promotion; whole school wellbeing promotion; improved pathways of care; social prescribing; enhanced access to talk therapies, dual diagnosis; enhancement of the National Clinical Care Programme for the Assessment and Management of Patients Presenting to emergency departments following self-harm; the priority groups of homeless people, those in direct provision, travellers and prisoners; and better suicide data. Specific actions are set out in the table in Appendix III of Sharing the Vision (Department of Health 2020).
- **Sláintecare.** Sláintecare is Ireland's ten-year programme to transform the country's health and social care services. It is the roadmap for building a world-class health and social care service. The Sláintecare vision is to

achieve a universal single-tier health and social care system where everyone has equal access to services based on need, and not ability to pay. Over time, everyone will be entitled to a comprehensive range of primary, acute and social care services. Sláintecare's aims are to improve patient and service user experience, improve clinician experience, lower costs, achieve better outcomes (Department of Health 2021).

- **HSE National Psychosocial Response to the Covid-19 pandemic.** This framework ensures that the critical psychosocial part of Ireland's response to the pandemic is promoted, supported and embedded within all Covid-19 responses. Psychosocial refers to the full spectrum of psychological, emotional, relationship, behavioural and cognitive experiences of people (HSE 2020).
- **Healthy Ireland: A Framework for Improved Health and Wellbeing 2013 – 2025.** The Healthy Ireland Strategic Action Plan 2021-2025 provides a clear roadmap of how to deliver good health, access to services, healthy environments, promote resilience and ensure that everyone can enjoy physical and mental, health and wellbeing, to their full potential. The plan builds on the work and progress made to date and focus on the remaining years of the Healthy Ireland Framework from 2013-2025 (Department of Health 2013).
- **HSE Mental Health Promotion Plan (forthcoming).** This is a five year plan that includes a number of action areas focused on promoting positive mental health across the population and among HSE staff. This is the first time the HSE has developed a plan solely focused on promoting positive mental health and the timing of the development of the Plan has never been more important in light of the impact of Covid-19 on the mental health and wellbeing of the population. The Plan takes a life course approach and includes actions of relevance to the general population as well as specific subgroups such as children, the working aged population, older people, mental health service users, their families and carers and other priority groups.

- **Developing a Community Response to Suicide.** Prepared by the NOSP, this guidance document is a resource to support those tasked with developing and implementing an Inter-Agency Community Response Plan (CRP) for incidents of suspected suicide, particularly where there is a risk of clusters and/or contagion. It outlines the processes involved in preparing such plans, how they should be governed, led and when required, activated (National Office for Suicide Prevention 2021).

Others relevant plans are shown in [Appendix 3](#) of this document.

## 2.2 Dublin South East, Dublin South and Wicklow Community Healthcare Context

### 2.2.1 Local Policy Context

In addition to the national policies and strategies shown above, there are a number of Community Healthcare area plans that are relevant in the context of suicide prevention:

- Dublin South East, Dublin South and Wicklow Mental Health Service Plan
- Healthy Counties Plans
- Children and Young Person's Services Committees Plans
- Local Healthy Ireland Plans (HSE HWB)
- Local and Regional Drug and Alcohol Task Force plans
- County Local and Economic and Community Plans
- County Community Development Committee Plans
- County Social Inclusion Community Activation Plans
- County Wicklow Traveller Mental Health Plan (in progress)



## 2.3 Demographic information for Dublin South East, Dublin South and Wicklow Community Healthcare

Dublin South East, Dublin South and Wicklow Community Healthcare Organisation was established in 2015 as part of the HSE's reorganisation of the country's community health services. The area covered by CHO 6 has a population of 393,239 (Health Atlas Finder, CSO Census 2016). This is an increase of 28,775 (approx. 7.9%) from the 2011 census. The area includes East Wicklow, Dún Laoghaire and Dublin South East. Integrated primary care, social care, mental health and health and wellbeing is the foundational building block to providing health care in the area, with effective clinical pathways and links to other specialist services (substance use, chronic disease, palliative care, etc).

The area is geographically and economically diverse. There is a mix of urban and rural terrain with a largely urban population residing in South East Dublin and Dún Laoghaire. Both the urban and rural communities differ significantly across geographic regions and even within regions. Key elements of diversity include demographic make-up, population density, terrain and distance from urban areas and community resources. Both communities also differ in terms of the economies that support them. These economic underpinnings impact socioeconomic status and other factors that have significant impact on the population's mental health. Table 1 shows the population age profile of the Community Healthcare organisation.

**East Wicklow:** County Wicklow rests on Ireland's East coast, overlooking the Irish Sea. Along with the stunning coastline, the Wicklow Mountains afford the county some amazing land and seascapes. The mountains form the boundary line between East Wicklow (Community Healthcare area Dublin South East, Dublin South and Wicklow) and West Wicklow (Community Healthcare area Dublin South, Kildare and West Wicklow). The area is a mix of urban and rural terrain offering both the tranquillity of the countryside and the convenience of the city as it borders county Dublin. While there are many benefits to rural life, living in rural Wicklow clearly presents some challenges to providing appropriate access to health care. These challenges stem from multiple factors: geographic remoteness, long travel distances, low population densities in some areas, reduced availability of health care providers

and sometimes inclement weather conditions. Access to some rural areas is challenging due to mountainous terrain and limited infrastructure. These are key factors influencing mental health care utilisation and accessibility.

**Dublin South East and Dún Laoghaire:** The Southside coastal areas stretch from Sandymount Strand all the way out to Bray and are well linked with the DART commuter rail system, which provides access to beautiful scenery along with swift transport. Seaside towns like Blackrock, Dún Laoghaire and Dalkey have many scenic walks and restaurants along with historical monuments. There are pockets of disadvantage within the area, and the disadvantaged and the unemployed of the Southside Partnership area co-exist in very close proximity to their more affluent neighbours, with high levels of unemployment. This needs to be kept in mind when addressing resource allocation within the area, as there may be a deficit of services in the area, which is generally perceived as being among the most financially and socially comfortable in all of Ireland.

**Table 1.** Population Age Profile for Dublin South East, Dublin South and Wicklow Community Healthcare. Data Source: HSE Atlas Finder, CSO Census 2016.

Age Group	No. of People	Change from 2011 Census (No.)	Change from 2011 Census (%)
0-4	25,102	-376	-1.5
5-19	73,400	5,293	7.2
20-64	236,420	5,520	2.3
65-74	32,191	4,726	14.7
75+	26,126	4,010	15.3
<b>Total</b>	<b>393,239</b>	<b>19,173</b>	-

In the Community Healthcare area 18% of the population, a total of 70,929 people, were born overseas, and approximately 13.2% of the population do not have English as their first language.

**Table 2.** Population Ethnic Profile Table 1. Population Age Profile for Dublin South East, Dublin South and Wicklow Community Healthcare. Data Source: HSE Atlas Finder, CSO Census 2016.

Ethnicity	No. of People/%	% Change from 2011 census
Irish	335,320/85.3	5.1
UK	8,444/2.1	-8
Polish	6,084/1.5	-8.3
Lithuanian	1,258/0.3	-6.2
Elsewhere in EU	13,565/3.4	-26.6
Elsewhere in world	14,733/3.7	-5
Visitors/Not stated	13,835/3.5	19.1

The CSO projections show that both the 20 - 64, 65 - 74 and 75+ age groups are expected to increase by 11.35%, 3.53% and 6.75% respectively. The CSO only provide population projections for anxiety and depression for people over age 55.

For anxiety the overall projected increase from 2022 - 2024 for people aged over 55 is 2.8%, but with higher increases for the older age groups (75 - 79: 5%, 80 - 84: 7.1% and 85+: 11.3 %).

For depression the overall projected increase from 2022 - 2024 for people aged over 55 is also 2.8%, and again with higher increases for the older age groups (75 - 79: 5.2%, 80 - 84: 7.7% and 85+: 6.7%).

This data shows that with the projected population growth in people over age 55, and the projected increases in anxiety and depression, there will be more older people diagnosed with anxiety and depression over the next three years. It is important to also note that these data projections do not account for the impact of Covid 19.

**Life Expectancy and Health Status:** There is a strong link between poverty, socio-economic status and health. In 2020, 16.9% of children were 'At risk of poverty' (Central Statistics Office (b)).

**Life expectancy at birth between the years 2000 and 2018.** Life expectancy in Ireland is now above the EU-28 average having increased by 2 years for women and 2.5 years for men since 2008: with women living to 84.1 years and men to 80.5 years in 2018. The EU-28 average life expectancy was 83.6 for women and 78.3 years for men in 2018: increasing by 1.3 and 2 years for women and men respectively since 2008.

**Health Inequalities.** The choices people make as individuals are likely to be determined by their social and economic circumstances, and it is important to look at interventions which can help the most vulnerable and deprived communities and address the wider structural determinants of health to help reduce health inequalities.

There is a recognised link between deprivation and chronic illness. The Community Healthcare area has a mix of urban and rural populations. There is variation in deprivation levels with deepened levels of deprivation in areas of Dublin. However, very often deprivation in rural areas is less visible. The specifics are often different from those seen in urban areas but equally as detrimental to communities.

On the Deprivation Level – Health Population Index 27.4% of the population in the Community Healthcare area are below the average on this index. This is broken down across the HP index determinants as follows: Marginally below average: 16.6%, Disadvantaged: 7.6%, Very disadvantaged: 2.6% and Extremely disadvantaged: 0.6%.

**Homelessness.** Nationally, latest figures indicate that over 9,000 people are homeless, with more than a quarter of these being children (Department of Housing, Local Government and Heritage 2022).

The Community Healthcare area will continue to review care packages and health care needs of complex homeless clients and will continue to support the development of Hospital Discharge Protocols for homeless clients.

**Travellers and Roma.** The 2016 Census recorded 30,987 Travellers living in the Republic of Ireland, an increase of 5.1% from Census 2011 (Central Statistics Office (a)). Irish Travellers are much younger than the general population. Almost three quarters of Travellers are aged 34 years or younger, while just over 7% are 55 years and over.

The estimated Roma population is between 3,000 and 5,000 (Department of Justice and Equality 2017). There are 1,167 Travellers in the Community Healthcare area (0.3% of the population) (Health Atlas Finder, CSO Census 2016).

**Demographic Cost Pressure.** In Dublin South East, Dublin South and Wicklow Community Healthcare area, increasing numbers of the community in the over 65 years age group is leading to increased demand for Home Supports from the Community and Acute Hospital settings. 14.82 % of the population of the Community Healthcare area falls into this age group.

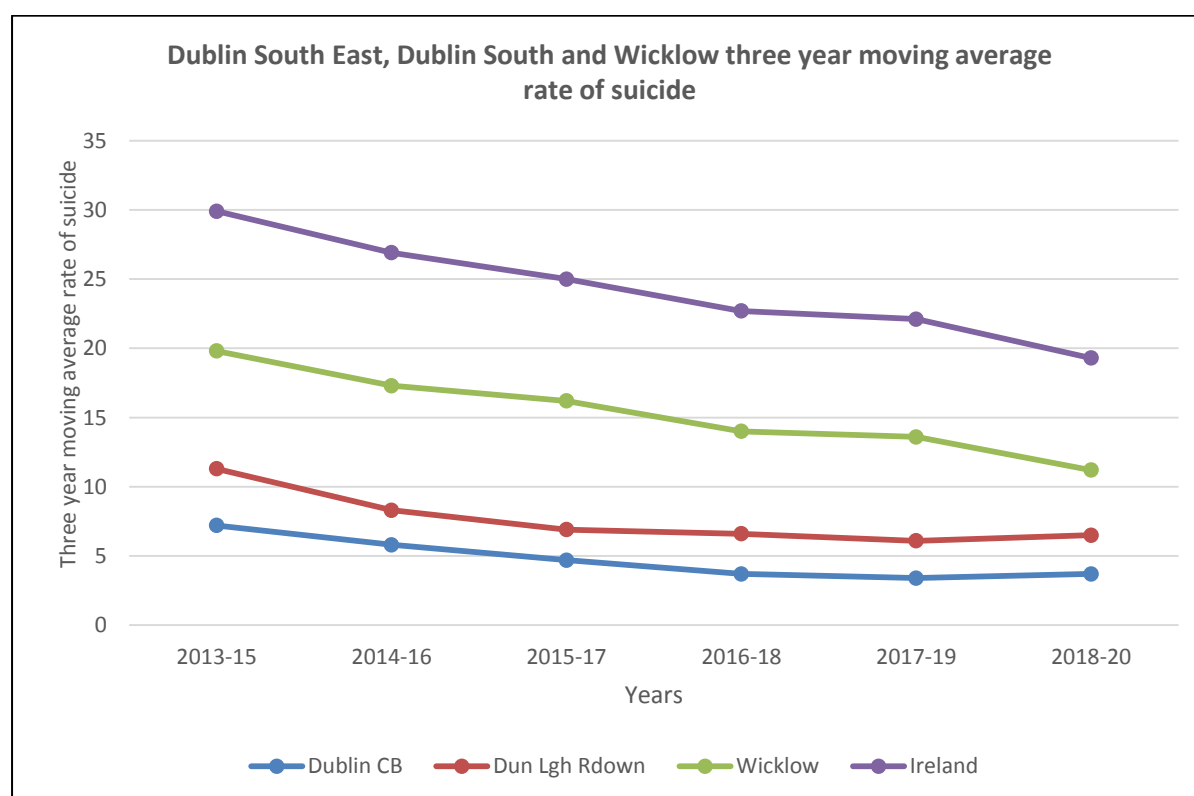
The Community Healthcare area delivers services and supports for people with a disability via a range of day, home support and residential service provision. Approximately 12.8% of the population of the area have stated they have a disability (Health Atlas Finder, CSO Census 2016). The demand for services for this cohort of the population continues to increase. The demand for placements for children who present with complex, challenging behaviours and for older clients who can no longer be cared for at home by ageing parents continues to grow, while resources to meet this demand are limited.

Chronic diseases are recognised as a major component of health service activity and expenditure as well as a major contributor to mortality and ill health. 38% of Irish people over 50 years have one chronic disease, 11% have two or more of eight chronic conditions and 65% of adults over 65 years have two or more chronic conditions. For all chronic conditions the prevalence is significantly higher in people with lower levels of education and in lower socio –economic. These factors pose a significant demand on health services due to the demographic increase in the Community Healthcare area coupled with the level deprivation (27.4% are below the average on the HP index).

## 2.4 Suicide and Self Harm in Dublin South East, Dublin South and Wicklow Community Healthcare

Identifying particular trends in deaths by suicide across Dublin South, Dublin South East and Wicklow Community Healthcare is problematic in that not all suspected suicides are currently reported to the Resource Officers for Suicide Prevention. The HSE Community Healthcare Area also shares two counties, Dublin and Wicklow, with other HSE Community Healthcare areas, and suicide statistics are currently only available at county level.

**Figure 3.** Community Healthcare Dublin South East, Dublin South and Wicklow three-year moving average suicide rates. Data Source: Central Statistics Office (a).



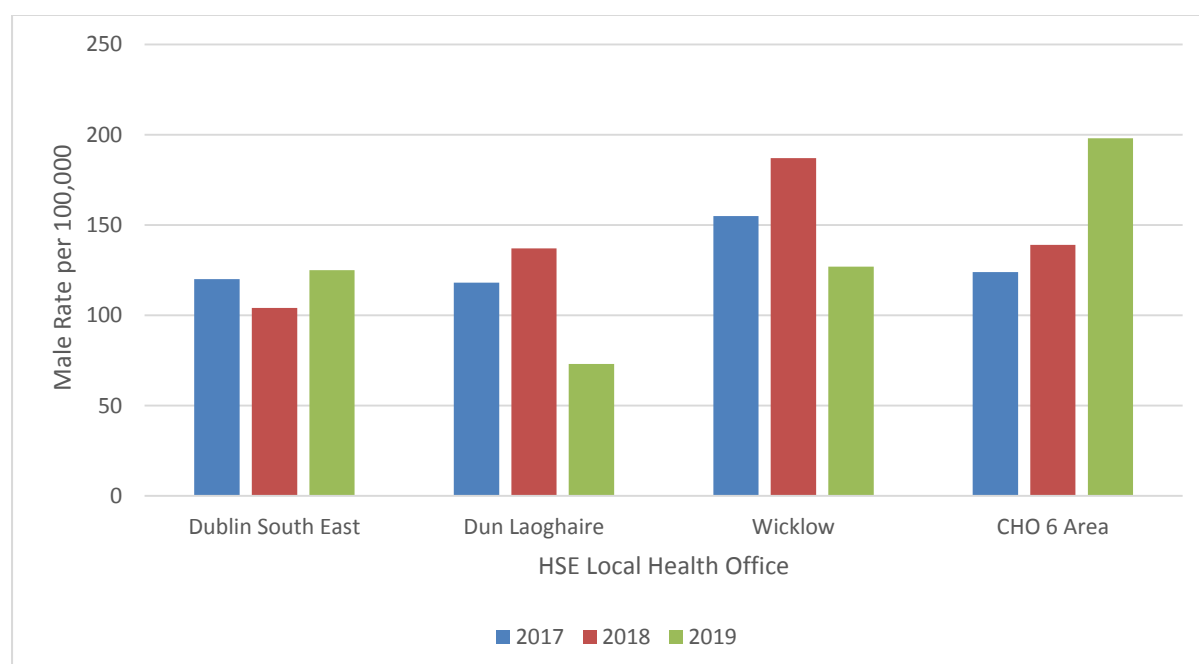
### Notes

- Data for 2020 is provisional and should be interpreted with caution.
- The rates shown cover the whole of Dublin County and Wicklow. It is not possible to get data for part of a county.

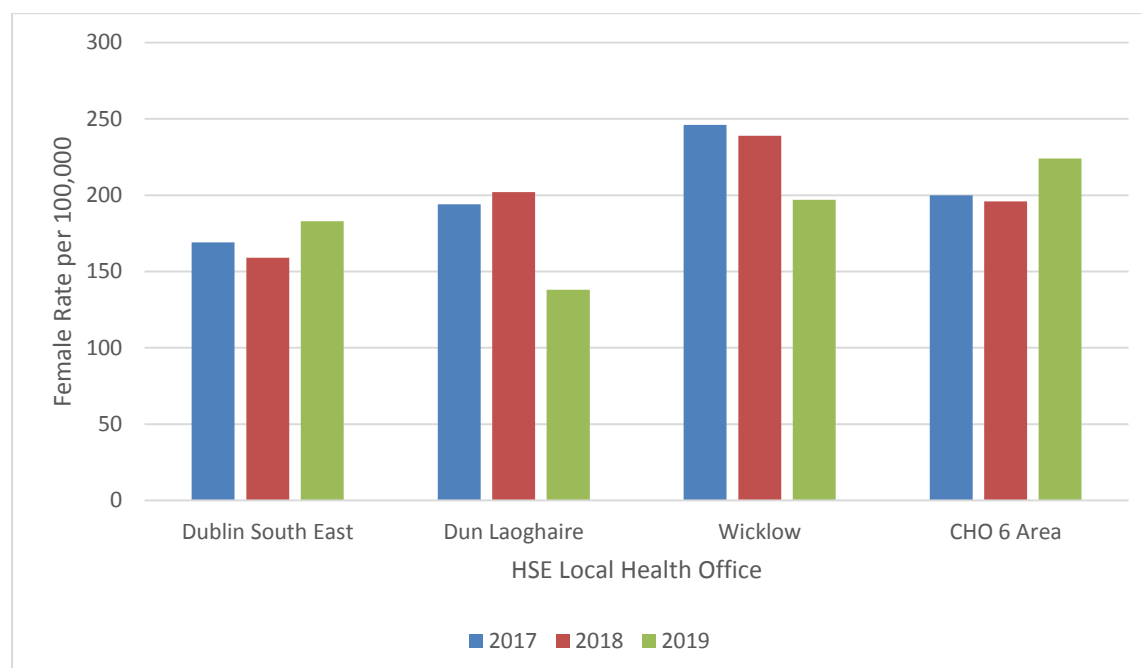
**Table 3.** Community Healthcare Dublin South East, Dublin South and Wicklow self-harm hospital presentations per 100,000 population 2017 – 2019 by HSE Local Health Office. Data Source: National Suicide Research Foundation.

HSE Local Health Office		2017		2018		2019	
		Persons	Rate per 100,000	Persons	Rate per 100,000	Persons	Rate per 100,000
Dublin South East	M	74	120	66	104	232	125
	F	110	169	99	159	348	183
Dun Laoghaire	M	73	118	85	137	45	73
	F	127	194	137	202	91	138
Wicklow	M	83	155	102	187	80	127
	F	141	246	139	239	132	197
CHO 6 Area	M	230	124	253	139	107	198
	F	378	200	371	196	125	224

**Figure 4.** Community Healthcare Dublin South East, Dublin South and Wicklow self-harm hospital presentations per 100,000 population 2017 – 2019 by HSE Local Health Office – Male. Data Source: National Suicide Research Foundation.



**Figure 5.** Community Healthcare Dublin South East, Dublin South and Wicklow self-harm hospital presentations per 100,000 population 2017 – 2019 by HSE Local Health Office – Female. Data Source: National Suicide Research Foundation.



## 2.5 Local Priority Groups

Specific Priority Groups have not been identified within the Dublin South East, Dublin South and Wicklow Community Healthcare area, and the national Priority Groups are used for the Connecting for Life priority group actions. The approved national Priority Groups are currently under review and the current priority groups will remain in place until the national review has been completed.

## 2.6 Service Provision

Throughout the Community Healthcare area there a broad range of supports and services targeted at the promotion of positive mental health, with a focus on recovery and addressing the needs of those experiencing mental health difficulties. Within the HSE these services fall primarily under the divisions of Mental Health, Primary Care



including social inclusion services and addiction services, Health and Wellbeing, and the Acute Hospitals. In addition there are a considerable number of community and voluntary organisations that offer supports and services to a wide variety of client groups.

## **2.7 The role of the HSE Resource Officer for Suicide Prevention (ROSP)**

The ROSP role is integral to all elements of suicide and self-harm prevention in the Community Healthcare area. It is a very broad and challenging role that encompasses ensuring support is available to communities and families after a suspected suicide, supporting the implementation of the Connecting for Life plan, linking with all relevant statutory, community and voluntary organisations on suicide and self-harm prevention issues, as well providing ROSP representation on a number of national committees and working groups.

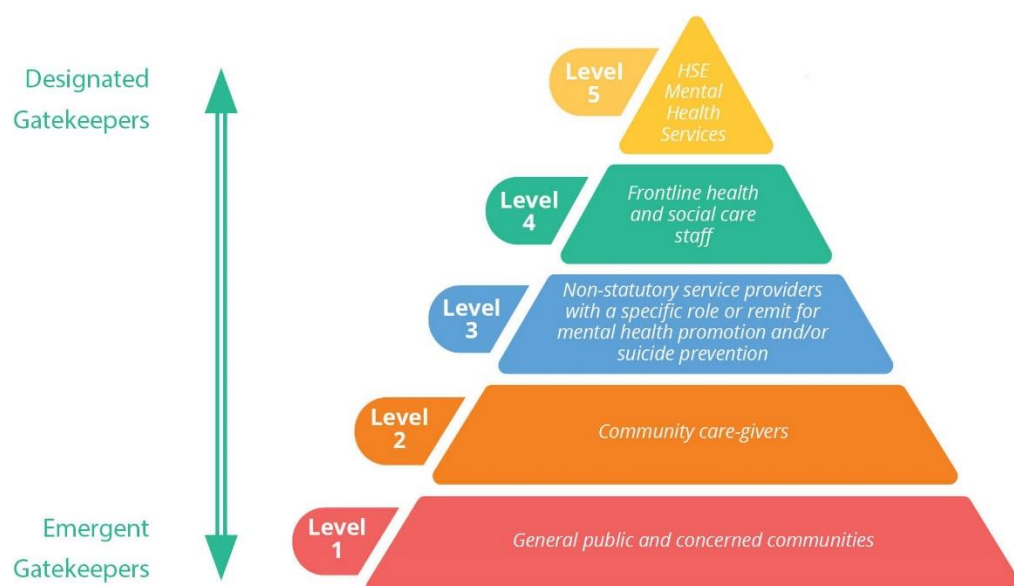
ROSPs also lead on annual events linked to suicide prevention and mental health e.g. World Suicide Prevention Day, World Mental Health Week, as well as numerous local and regional events, providing guidance and support to community and voluntary organisations where appropriate. The Community Healthcare ROSPs also play an active role in the national ROSP Learning Community of Practice, which provides a forum for shared support and learning.

## **2.8 Suicide Prevention Training**

A comprehensive range of suicide prevention, postvention and self-harm training is offered in the Community Healthcare area, aligned to the [National Education and Training Plan](#). The Covid 19 pandemic has impacted significantly on the delivery of training, and, although some programmes have moved online, others have not been available remotely and this has impacted on the number of training courses delivered

since March 2020. However, since the Covid restrictions have been lifted, these training programmes are again available face to face.

**Figure 6.** Suicide Prevention Training Stakeholder Groups



The training programmes available are:

- **ASIST.** ASIST – Applied Suicide Intervention Skills Training is a 2 day skills based workshop that equips participants for an effective suicide intervention role. The emphasis is on first aid – helping a person at imminent risk stay safe and seek further help.
- **SafeTALK.** SafeTALK is an internationally recognised half-day training programme that supports participants to recognise and engage persons who might be having thoughts of suicide, and to connect them with community resources. The programme stresses safety while challenging taboos that inhibit open talk about suicide.
- **STORM.** Skills Training on Risk Management for healthcare professionals.

- **LivingWorks START.** Online interactive training programme teaching the skills and knowledge to keep others safe from suicide. This is an introduction to suicide prevention.
- **Understanding Self Harm.** Understanding Self-Harm is a 1 day training programme which works to reduce the stigma of self-harm, improve individual and care agencies' awareness and sensitivities to self-harm issues and promote effective care services for those who self-harm.
- **Suicide Bereavement - Professional Programme.** The Bereavement Training Programme is a one day training programme which provides individuals with the skills and knowledge to support those bereaved through suicide.
- **Community Suicide Bereavement Programme.** This two-hour presentation provides guidance for communities on supporting people bereaved through suicide.

## Section Three: Development of the new plan

The development of the new plan was led by the two Resource Officers for Suicide Prevention (ROSPs) in the Community Healthcare area, supported by the Connecting for Life implementation groups, the Mental Health Management Team, the National Office for Suicide Prevention and national Mental Health Operations.

The development of Connecting for Life Dublin South East, Dublin South and Wicklow Community Healthcare was based on the principle of learning from the preparation and implementation of the first Community Healthcare area Connecting for Life Plan 2015 – 2020. The new plan is aligned in format and structure to the new national CfL implementation plan for the 2020 – 2022 period.

Commencing in autumn 2020, there were a number of strands to the preparation of the new plan which supported the review of the current plans and the development of the new plan for the Community Healthcare area:

- Alignment to other relevant national plans and policies e.g. Sharing the Vision, Slaintecare, the National Psychosocial Plan
- **Connecting for Life Interim Strategy Review.** Published in January 2019, the aim of this independent review was to assess progress in the implementation of national strategy towards achieving the overall strategic objectives, to help identify what was working well, where the implementation challenges were, and to help in setting strategic priorities for the remaining period of the national strategy (National Office for Suicide Prevention 2019).
- **NOSP local CfL suicide prevention plan Self-Evaluation Project.** The aim of this project was to review implementation progress on the 17 local action plans, using a Best Practice self-evaluation checklist for suicide prevention at sub-national (regional/local) level prepared by Professor Stephen Platt, NHS Health Scotland. Under four headings; General Implementation Progress, Suicide Prevention actions, Local Plan Monitoring and Review and Suicide Prevention Awareness and Training, local plan stakeholders shared their feedback through a survey and focus groups. All of the feedback was collated

and provided to all ROSPs from a shared learning perspective to support the new plan development.

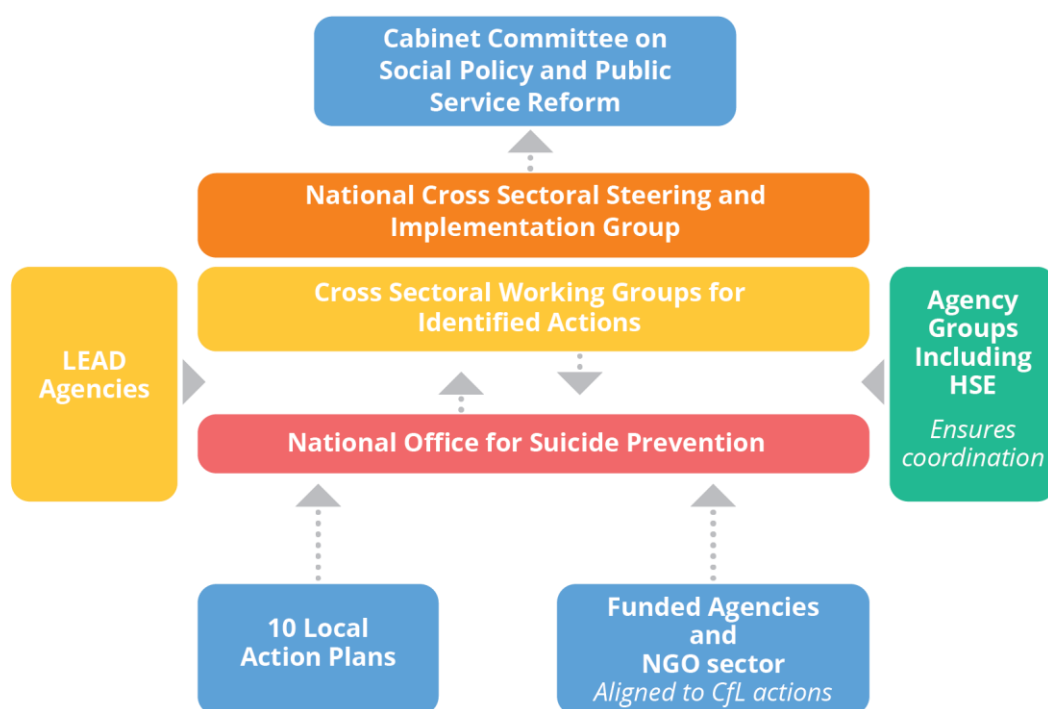
- **NOSP local suicide prevention innovation project.** The aim of this project was to identify and showcase innovation in local suicide prevention. ROSPs were invited to submit projects and initiatives for selection for a national showcase. The Covid 19 global pandemic prevented the showcase element of the project, however those project selected for the showcase were presented to the ROSP group for consideration for inclusion in the new local plans.
- **HSE NOSP National Education & Training Plan 2021-2022.** This Plan provides the HSE NOSP and HSE Resource Officers for Suicide Prevention with an overarching framework to support the coordination, quality assurance, monitoring and evaluation of education and training actions identified in CfL. This work will build the capacity of government departments, funded agencies, the HSE, community organisations, groups and individuals to identify and respond appropriately to people at risk of suicide and self-harm (National Office for Suicide Prevention 2022).
- Detailed review of the implementation progress of the action in the first plans to inform the new actions.
- Development of new draft actions for review by the lead partners responsible for implementing each action and the Connecting for Life Oversight membership. In developing the new actions the following considerations were taken into account:
  - Consideration for actions to be included has taken account of what worked well in the Community Healthcare area in the first plan, and what worked in other local action plans, the feedback provided in the recent consultation survey.
  - The evidence base for the action.
  - Minimising duplication of actions from other relevant plans.
  - Not including actions that can only be delivered at a national level.Where appropriate actions aligned to the national action have been included in the plan.
- Local approval of new plan by the CfL Oversight Group.
- Review of the new plan by the NOSP and national Mental Health Operations.

The Resource Officers for Suicide Prevention (ROSP) Learning Community of Practice (LCOP) was instrumental in the development of the approach to preparing the new CfL plans across the country, providing a platform and safe space for all ROSPs to discuss and agree a consistent process for the new plan development, supported by the NOSP and Mental Health operations nationally. This ensured the minimisation of duplication of effort, sharing of lessons learned and draft actions for inclusion in the new plans.

## Section Four: Implementation Structures

Nationally the implementation of Connecting for Life is supported by a set of tiered and interconnected structures, which have leadership representation from right across the policy and service system. The NOSP is also connected to bottom-up implementation structures which drive local implementation of CfL, namely the 10 Local Area CfL Suicide Prevention Action Plans, and other funded projects. This approach to implementation ensures there is an on-going feedback loop between what is happening locally and nationally (see Figure 6). At the core of implementation is the NOSP, who act as the implementation team from a national policy perspective, co-ordinating and supporting the activities of partners in both the statutory and non-statutory sector. The NOSP feeds into both top-down and bottom-up implementation structures.

**Figure 7.** Overview of the national Connecting for Life implementation structures.



In Dublin South East, Dublin South and Wicklow Community Healthcare, the Connecting for Life implementation structures are aligned to the national structures

(See Figure 7 below). The ROSPs are the designated leads for the coordination and implementation of Connecting for Life in Dublin South East, Dublin South and Wicklow Community Healthcare. Implementation Group membership includes senior and middle management from service delivery agencies including statutory and NGO, HSE senior and middle management from key service delivery agencies.

Figure 8 below provides further information on the role of the groups and teams responsible for local CfL implementation.

**Figure 8.** Dublin South East, Dublin South and Wicklow Community Healthcare Connecting for Life Implementation Structures





- Workstream 1: Communications
- Workstream 2: Interagency Protocols, Community Response Plans and Connecting for Life Action Plans
- Workstream 3: Psychotherapeutic Support for children and adults
- Workstream 4: Quality and Risk Service Provision, Clinical Care and Service User safety

The implementation of the new plan will continue to be guided by the following working principles:

- Shared responsibility
- Collaboration
- Partnership
- Parity of esteem
- Person centred
- Accountability
- Sustainability
- Acknowledge the lived experience of people touched by suicide and self-harm

## Section Five: Monitoring and Evaluation

At a national level, the implementation of Connecting for Life is monitored and reported on by the NOSP on a quarterly basis. The approach uses Implementation Monitoring Dashboards for all CfL action leads to use to report action implementation progress against the agreed milestones.

Aligned to the national approach, and supported by the Community Healthcare Project Management Office, the Oversight Committee, the Project Management Group and the four Workstream Groups are responsible for implementation monitoring and reporting of the plan.

Section Seven provides the key milestones and outputs by year for each action which will be used as the baseline for progress reporting.

HSE NOSP is working with an independent Evaluation Advisory Group (EAG) to plan for the evaluation of Connecting for Life.

The evaluation of Connecting for Life Dublin South East, Dublin South and Wicklow Community Healthcare is covered by action 7.1.1 in Section 7 of this plan. In Quarter Two of 2023, in consultation with the Implementation Groups, the whole plan will be reviewed, and some actions will be carried into the new plan, and new actions will be added based on the national and local context.

## Section Six: Communications Plan

Feedback from the implementation of the first plans suggested that communication of implementation progress could have been stronger. To address this a separate Communication plan has been prepared to ensure that timely, relevant, accurate, and consistent implementation progress information is provided to the relevant project stakeholders and other appropriate audiences. The Community Healthcare area Communications Office will actively support this essential element of effective implementation.

The aim of all communications for the implementation of Connecting for Life Dublin South East Dublin South and Wicklow are to:

- Promote and gain support for the development of CfL Dublin South East Dublin South and Wicklow
- Engage a wide range of stakeholders in the development of CfL Dublin South East Dublin South and Wicklow
- Give accurate and timely information about the project
- Ensure a consistent message
- Encourage use of project management best practices

The communications plan provides a framework to manage and coordinate the wide variety of communications that will support the implementation of the plan and covers:

- Communication Objectives
- Target audiences
- Communication channels (primary/secondary, on/offline)
- Key messages
- Feedback loops
- Annual Communications calendar

The full Communication Plan is available from the ROSPs.

## Section Seven: Action Plan

### GOAL ONE

Goal one of *Connecting for Life*, Ireland's national strategy to reduce suicide 2015-2020, aims to improve the nation's understanding of and attitudes to suicidal behaviour, mental health and wellbeing.

While there is a growing national dialogue around mental health and wellbeing, people in Ireland remain hesitant to talk openly about their own mental health, and misperceptions about suicidal behaviour persist. The language relating to suicide and mental health is often stigmatising or misleading. Inadequate or ill-informed media reporting can add to this problem. Mental health problems are a major risk factor for suicide. By working with people and organisations across society, including the media, we can achieve a greater understanding of suicide and the factors that protect and improve our mental health and reduce stigma (National Office for Suicide Prevention 2019).

In CfL Community Healthcare Dublin South East, Dublin South and Wicklow, there are 13 actions under goal one led by the HSE Resource Officer for Suicide Prevention, HSE Health and Wellbeing, HSE Addiction Services, the HSE Traveller Mental Health Coordinator, Mental Health Ireland and Headline.

<b>National Goal 1:</b> To improve the nation's understanding of, and attitudes to, suicidal behaviour, mental health and wellbeing		
<b>National Objective 1.1:</b> Improve population-wide understanding of suicidal behaviour, mental health and wellbeing, and associated protective and risk factors		
<b>National Action:</b> 1.1.2 Develop and implement a national mental health and well-being promotion plan. <b>Lead:</b> HSE H&W, DOH HI <b>Partners:</b> NOSP, HSE MH		
<b>Local Action:</b> 1.1.2 (a) Implement relevant actions in the HSE Mental Health Promotion plan locally. <b>Lead:</b> HSE H&W <b>Partners:</b> HSE MH, HSE MH (ROSP), Connecting for Life Interagency Implementation Groups		
<b>Purpose:</b> To provide strategic direction for evidence based mental health & wellbeing actions across the HSE & funded agencies.		
<b>Planned start date and duration:</b> Q2 2022, on-going		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> HP&I/HWB Manager participates on National Steering Group to rollout the National Mental Health Promotion Plan and HP&I Officers to support the rollout of this plan locally across Dublin South East, Dublin South and Wicklow		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  Plan for 2022 developed and implemented.	<b>Q1 2022</b>	
	<b>Q2 2022</b>	Assess HSE Mental Health Promotion Plan and develop local response to identified actions. Participate and deliver actions on CFL working group for the Community Healthcare East area.
	<b>Q3 2022</b>	Participate and deliver actions on CFL working group for the Community Healthcare East area. Review delivery to date as part of CFL working group and assess progress.
	<b>Q4 2022</b>	Participate and deliver actions on CFL working group for the Community Healthcare East area. Plan for 2023 delivery following evaluation of 2022 delivery and assessment of needs for 2023 plan.
<b>Overarching Milestone 2023:</b> 2023 Plan developed and implemented.		<b>Overarching Milestone 2024:</b> 2024 Plan developed and implemented.
<b>Outputs by end of 2022:</b> Implement relevant actions in the HSE Mental Health Promotion plan locally in a phased and inclusive way working with CfL key stakeholders.		

<b>National Goal 1:</b> To improve the nation's understanding of, and attitudes to, suicidal behaviour, mental health and wellbeing		
<b>National Objective 1.1:</b> Improve population-wide understanding of suicidal behaviour, mental health and wellbeing, and associated protective and risk factors		
<b>National Action:</b> 1.1.2 Develop and implement a national mental health and well-being promotion plan. <b>Lead:</b> HSE H&W, DOH HI <b>Partners:</b> NOSP, HSE MH		
<b>Local Action:</b> 1.1.2 (b) Support positive mental health and wellbeing activities for staff in Traveller Projects and Traveller Primary Health Care Projects. <b>Lead:</b> HSE MH (ROSP), HSE Traveller Mental Health Coordinator <b>Partners:</b> Traveller Groups, County Wicklow Traveller Mental Health Steering Group, HSE Social Inclusion, HSE Mental Health Engagement, HSE Recovery Education		
<b>Purpose:</b> To support staff working in Traveller Projects and Traveller Primary Health Care Projects around maintaining positive mental health and wellbeing.		
<b>Planned start date and duration:</b> Q1 2022		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b>		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  Explore the development of a staff Personal Wellbeing Module.	<b>Q1 2022</b>	Create a project group with defined ToR.
	<b>Q2 2022</b>	Scoping exercise with staff working in Traveller Projects and Traveller Primary Health Care Projects on required components for this module. Identify if any such modules/trainings exist in this sector or similar sectors.
	<b>Q3 2022</b>	Identify budget and resources needed to develop and implement such a module.
	<b>Q4 2022</b>	Development of a staff wellbeing module, if feasible.
<b>Overarching Milestone 2023:</b> TBD		<b>Overarching Milestone 2024:</b> TBD
<b>Outputs by end of 2022:</b> Feasibility of a staff wellbeing module assessed.		

<b>National Goal 1:</b> To improve the nation’s understanding of, and attitudes to, suicidal behaviour, mental health and wellbeing		
<b>National Objective 1.1:</b> Improve population-wide understanding of suicidal behaviour, mental health and wellbeing, and associated protective and risk factors		
<b>National Action:</b> 1.1.3 Deliver co-ordinated communication campaigns (such as Little Things, 2014) for the promotion of mental health and wellbeing among the whole population with a focus on protective health behaviours and consistent signposting to relevant support services. <b>Lead:</b> HSE MH <b>Partners:</b> HSE H&W, DOD, Non-statutory partners, NOSP		
<b>Local Action:</b> 1.1.3 (a) Deliver national mental health campaigns at a local level, and ensure information on relevant local supports and services are kept up to date. <b>Lead:</b> HSE MH (ROSP) <b>Partners:</b> Connecting for Life Interagency Implementation Groups, Community and Voluntary Organisations		
<b>Purpose:</b> To promote mental health in the population as measured by a working definition of mental health literacy which incorporates understanding of ways in which we can mind our mental health, support others and access supports and services as needs be.		
<b>Planned start date and duration:</b> Q1 2022, on-going		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> Expertise, materials, resource officer and partner time		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  Increased awareness across general population and priority groups of national mental health campaigns.	<b>Q1 2022</b>	Disseminate materials as available.
	<b>Q2 2022</b>	Disseminate materials as available.
	<b>Q3 2022</b>	Disseminate materials as available. World Suicide Prevention Day Events & Green Ribbon Events.
	<b>Q4 2022</b>	Disseminate materials as available. Events for Mental Health Awareness Week.
<b>Overarching Milestone 2023:</b> TBD		<b>Overarching Milestone 2024:</b> TBD
<b>Outputs by end of 2022:</b> Population based mental health awareness, campaigns complete regarding de-stigmatisation and information about supports.		

<b>National Goal 1:</b> To improve the nation's understanding of, and attitudes to, suicidal behaviour, mental health and wellbeing		
<b>National Objective 1.1:</b> Improve population-wide understanding of suicidal behaviour, mental health and wellbeing, and associated protective and risk factors		
<b>National Action:</b> 1.1.3 Deliver co-ordinated communication campaigns (such as Little Things, 2014) for the promotion of mental health and wellbeing among the whole population with a focus on protective health behaviours and consistent signposting to relevant support services. <b>Lead:</b> HSE MH <b>Partners:</b> HSE H&W, DOD, Non-statutory partners, NOSP		
<b>Local Action:</b> 1.1.3 (b) Plan, develop and deliver initiatives to support Mental Health Ireland's National <i>Hello, How Are You?</i> Campaign highlighting support services for Dublin South East, Dublin South, and Wicklow. <b>Lead:</b> Mental Health Ireland <b>Partners:</b> HSE MH (ROSP), HSE Mental Health Engagement Lead, HSE Traveller Mental Health Coordinator, Healthy Ireland, Wicklow Mental Health Association and community partners		
<b>Purpose:</b> To support the establishment of a national mental health promotion campaign called <i>Hello, How Are You?</i> This is a whole population campaign asking all of Ireland to come together on April 7th to say HELLO and to ask someone "How are you?" with meaning and to really listen to their answer. It also offers signposting to relevant supports and services.		
<b>Planned start date and duration:</b> Q1-Q3 2022		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> Expertise, materials, resource officer and partner time		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  To plan, develop and deliver initiatives to support Mental Health Ireland's National <i>Hello, How Are You?</i> Campaign highlighting support services for Dublin South East, Dublin South, and Wicklow.	<b>Q1 2022</b>	To co-ordinate relevant stakeholders to plan and co-produce local <i>Hello, How Are You?</i> Initiatives in CHO6.
	<b>Q2 2022</b>	To deliver agreed <i>Hello, How Are You?</i> Initiatives.
	<b>Q3 2022</b>	To evaluate impact of the <i>Hello, How Are You?</i> Initiatives.
	<b>Q4 2022</b>	
<b>Overarching Milestone 2023:</b>		<b>Overarching Milestone 2024:</b>
<b>Outputs by end of 2022:</b> To have run initiatives and events to mark <i>Hello, How Are You?</i> Day. To have developed resources and to have shared information and supports. To have engaged and connected and increased awareness within the community to mark the national <i>Hello, How Are You</i> day.		



<b>National Goal 1:</b> To improve the nation’s understanding of, and attitudes to, suicidal behaviour, mental health and wellbeing		
<b>National Objective 1.1:</b> Improve population-wide understanding of suicidal behaviour, mental health and wellbeing, and associated protective and risk factors		
<b>National Action:</b> 1.1.4 Build the link between alcohol/drug misuse and suicidal behaviour into all communication campaigns. <b>Lead:</b> HSE PC <b>Partners:</b> HSE H&W, NOSP, DOH		
<b>Local Action:</b> 1.1.4 Develop an annual campaign to highlight the risk of drug overdose for International Overdose Awareness Day on 29 <sup>th</sup> August. <b>Lead:</b> HSE Addiction Services, HSE PC, HSE MH (ROSP) <b>Partners:</b> DATFs		
<b>Purpose:</b> To target a population using substances and give a strong harm reduction message. Given the psychological effects of many drugs the messaging about suicidal behaviour is relevant.		
<b>Planned start date and duration:</b> Q1 2022		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> Working group with relevant partners in HSE MH, HSE Addiction & Local & Regional DATFs to develop resource that can be promoted annually in August to mark IOAD and highlight the risk of suicide.		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  The link between specific drugs of misuse and suicidal behaviour is highlighted through annual awareness campaign to mark International Overdose Awareness Day.	<b>Q1 2022</b>	Establish working group with key partners with clear ToR.
	<b>Q2 2022</b>	Develop resource to highlight risks and identify harm reduction strategies.
	<b>Q3 2022</b>	Resource to be launched and promoted across the region.
	<b>Q4 2022</b>	Review campaign.
<b>Overarching Milestone 2023:</b> TBD	<b>Overarching Milestone 2024:</b> TBD	
<b>Outputs by end of 2022:</b> Increase in awareness of harms of drug overdose and risk of suicide.		

<b>National Goal 1:</b> To improve the nation's understanding of, and attitudes to, suicidal behaviour, mental health and wellbeing		
<b>National Objective 1.2:</b> Increase awareness of available suicide prevention and mental health services.		
<b>National Action:</b> 1.2.1 Deliver accessible information on all mental health services and access/referral mechanisms and make the information available online at YourMentalHealth.ie <b>Lead:</b> HSE MH <b>Key Partners:</b> NOSP		
<b>Local Action:</b> 1.2.1 (a) Ensure all Dublin South East, Dublin South and Wicklow Community Healthcare Mental Health supports and services are included in yourmentalhealth.ie and promoted on the Dublin South East, Dublin South and Wicklow Community Healthcare Connecting for Life website. <b>Lead:</b> HSE MH (ROSP) <b>Partners:</b> HSE MH, Connecting for Life Interagency Implementation Groups		
<b>Purpose:</b> Increase awareness of available suicide prevention and mental health services in the Community Healthcare East area.		
<b>Planned start date and duration:</b> Q1 2022, on-going		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> Resource Officer and partner organisation time.		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  Deliver up-to-date information on all local mental health services and how to access them for the general population and priority groups, and make available online through yourmentalhealth.ie.	<b>Q1 2022</b>	Collate information on services and update on yourmentalhealth.ie.  Promote yourmentalhealth.ie as a service information focal point.
	<b>Q2 2022</b>	Collate information on services and update on yourmentalhealth.ie.  Promote yourmentalhealth.ie as a service information focal point.
	<b>Q3 2022</b>	Collate information on services and update on yourmentalhealth.ie.  Promote yourmentalhealth.ie as a service information focal point.
	<b>Q4 2022</b>	Collate information on services and update on yourmentalhealth.ie.  Promote yourmentalhealth.ie as a service information focal point.
<b>Overarching Milestone 2023:</b> TBD		<b>Overarching Milestone 2024:</b> TBD
<b>Outputs by end of 2022:</b> Regularly reviewed online mental health content. Accessibility of quality online information, online self-help tools, online supports, and online services.		

<b>National Goal 1:</b> To improve the nation's understanding of, and attitudes to, suicidal behaviour, mental health and wellbeing		
<b>National Objective 1.2:</b> Increase awareness of available suicide prevention and mental health services.		
<b>National Action:</b> 1.2.2 Deliver targeted campaigns to improve awareness of appropriate support services to priority groups.		
<b>Local Action:</b> 1.2.2 (a) Deliver national campaigns at a local level to improve awareness of appropriate support services in Dublin South East, Dublin South and Wicklow Community Healthcare to priority groups. <b>Lead:</b> HSE MH (ROSP), HSE MH <b>Partners:</b> Connecting for Life Interagency Implementation Groups, Community and Voluntary Organisations		
<b>Purpose:</b> To ensure awareness of supports and services amongst priority groups in CfL.		
<b>Planned start date and duration:</b> Q1 2022, on-going		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> ROSP and priority group organisations time, funding, materials		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  Deliver communications strategy for Dublin South East, Dublin South, and Wicklow with a focus on priority groups.	<b>Q1 2022</b>	Develop a communications strategy for Dublin South East, Dublin South, and Wicklow. Organise quarterly meetings with Communications Workstream/HSE Comms to review implementation of communications strategy.
	<b>Q2 2022</b>	Organise quarterly meetings with Communications Workstream/HSE Comms to review implementation of communications strategy.
	<b>Q3 2022</b>	Organise quarterly meetings with Communications Workstream/HSE Comms to review implementation of communications strategy.
	<b>Q4 2022</b>	Organise quarterly meetings with Communications Workstream/HSE Comms to review implementation of communications strategy.
<b>Overarching Milestone 2023:</b> TBD		<b>Overarching Milestone 2024:</b> TBD
<b>Outputs by end of 2022:</b> Communications Strategy developed. Improved awareness of available supports and services for priority groups.		

<b>National Goal 1:</b> To improve the nation's understanding of, and attitudes to, suicidal behaviour, mental health and wellbeing		
<b>National Objective 1.2:</b> Increase awareness of available suicide prevention and mental health services.		
<b>National Action:</b> 1.2.2 Deliver targeted campaigns to improve awareness of appropriate support services to priority groups.		
<b>Local Action:</b> 1.2.2 (b) Develop a "pathways to care for the suicidal client" template for GP Practices in the Community Healthcare East area.		
<b>Lead:</b> HSE MH (ROSP)		
<b>Partners:</b> ICGP, HSE PC		
<b>Purpose:</b> Emergency Departments typically report a high footfall of patients presenting in suicidal distress, many of who do not require such a service, or who experience even greater distress in such an environment. Clearly defined alternative routes can help bypass presentation to the ED in all but those cases that involve physical injury/drug overdose.		
<b>Planned start date and duration:</b> Q2 2022, 9 months		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> Research time for the pathway content and printing costs		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  A resource specific to GPs to assist caring for patients presenting with suicidal ideation/psychological distress.	<b>Q1 2022</b>	
	<b>Q2 2022</b>	Create working group with defined ToR. Develop risk assessment criteria. Research and agree pathway contents.
	<b>Q3 2022</b>	Develop risk assessment criteria. Research and agree pathway contents.
	<b>Q4 2022</b>	Print and distribute resource.
<b>Overarching Milestone 2023:</b> TBD		<b>Overarching Milestone 2024:</b> TBD
<b>Outputs by end of 2022:</b> A resource specific to GPs to assist caring for patients presenting with suicidal ideation/psychological distress.		

<b>National Goal 1:</b> To improve the nation's understanding of, and attitudes to, suicidal behaviour, mental health and wellbeing		
<b>National Objective 1.2:</b> Increase awareness of available suicide prevention and mental health services.		
<b>National Action:</b> 1.2.2 Deliver targeted campaigns to improve awareness of appropriate support services to priority groups.		
<b>Local Action:</b> 1.2.2 (c) Develop and install wellbeing boards in local GAA premises highlighting local support services in Wicklow.		
<b>Lead:</b> Mental Health Ireland		
<b>Partners:</b> HSE MH (ROSP), GAA Health & Wellbeing, Mental Health Engagement Lead, Healthy Ireland, Sports Partnership, Wicklow Mental Health Association		
<b>Purpose:</b> To ensure awareness of supports and services within the GAA and amongst the general population and priority groups as outlined in CFL in CHO6.		
<b>Planned start date and duration:</b> Q1 2022, 12 months		
<b>Location:</b> Wicklow		
<b>Inputs for 2022:</b> Partner time, MH Ireland time, funding, materials		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  To plan, develop and install wellbeing boards in local GAA premises, highlighting local support services in Wicklow.	<b>Q1 2022</b>	To plan and develop wellbeing boards through co-production.
	<b>Q2 2022</b>	To plan and develop wellbeing boards through co-production.
	<b>Q3 2022</b>	Install and launch GAA wellbeing boards.
	<b>Q4 2022</b>	Install and launch GAA wellbeing boards.
<b>Overarching Milestone 2023:</b>		<b>Overarching Milestone 2024:</b>
<b>Outputs by end of 2022:</b> To have visually improved awareness of available supports and services for the GAA, priority groups and the general population by coproducing visual informative wellbeing boards and erecting these at various GAA sites.		

<b>National Goal 1:</b> To improve the nation's understanding of, and attitudes to, suicidal behaviour, mental health and wellbeing		
<b>National Objective 1.3:</b> Reduce stigmatising attitudes to mental health and suicidal behaviour at population level and within priority groups.		
<b>National Action:</b> 1.3.1 Deliver campaigns that reduce stigma to those with mental health difficulties and suicidal behaviour in the whole population and self-stigma among priority groups.		
<b>Lead:</b> NOSP		
<b>Key Partners:</b> HSE MH, Youth sector, Non-statutory partners		
<b>Local Action:</b> 1.3.1 (a) Aligned to national campaigns develop and deliver suicide prevention and positive mental health awareness raising events and campaigns locally that reduce stigma, e.g. Green Ribbon campaign and local campaigns as appropriate.		
<b>Lead:</b> HSE MH (ROSP)		
<b>Partners:</b> Connecting for Life Interagency Implementation Groups, Community and Voluntary Organisations		
<b>Purpose:</b> While there is a growing national dialogue around mental health and wellbeing, people in Ireland remain hesitant to talk openly about their own mental health, and misperceptions about suicidal behaviour persist. The language relating to suicide and mental health is often stigmatising or misleading. Inadequate or ill-informed media reporting can add to this problem. Mental health problems are a major risk factor for suicide.		
<b>Planned start date and duration:</b> Q3 2022		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> ROSP and partner time, See Change resources		
<b>Overarching Milestone 2022</b>  Delivery of green ribbon campaign in Dublin South East, Dublin South, and Wicklow	<b>Q1 2022</b>	
	<b>Q2 2022</b>	
	<b>Q3 2022</b>	ROSPs support Green Ribbon campaign through dissemination of campaign resources, participation in events and highlighting events across the area.
	<b>Q4 2022</b>	
<b>Overarching Milestone 2023:</b>		<b>Overarching Milestone 2024:</b>
<b>Outputs by end of 2022:</b> A suite of cohesive stigma reduction campaigns delivered across the Community Healthcare East area.		

<b>National Goal 1:</b> To improve the nation's understanding of, and attitudes to, suicidal behaviour, mental health and wellbeing		
<b>National Objective 1.3:</b> Reduce stigmatising attitudes to mental health and suicidal behaviour at population level and within priority groups.		
<b>National Action:</b> 1.3.1 Deliver campaigns that reduce stigma to those with mental health difficulties and suicidal behaviour in the whole population and self-stigma among priority groups. <b>Lead:</b> NOSP <b>Key Partners:</b> HSE MH, Youth sector, Non-statutory partners		
<b>Local Action:</b> 1.3.1 (b) Aligned to national campaigns develop and deliver suicide prevention and positive mental health awareness raising events and campaigns that reduce stigma among the Traveller Community in Community Healthcare East. <b>Lead:</b> HSE MH (ROSP), Traveller Mental Health Coordinator <b>Partners:</b> Traveller Groups, CYPC, Community and Voluntary Organisations, MH Engagement Lead, Recovery Coordinator		
<b>Purpose:</b> Research shows that Travellers have a higher incidence rate of poor mental health, and stigma often represents a barrier to seeking help. Mental health problems are a major risk factor for suicide.		
<b>Planned start date and duration:</b> Q2-Q4 2022		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> ROSP and partner time, See Change resources, NOSP WSP day resources, WMH Day resources		
<b>Overarching Milestone 2022</b>  Roll out national campaigns within the Traveller Community in Dublin South East, Dublin South, and Wicklow.	<b>Q1 2022</b>	
	<b>Q2 2022</b>	Hold an event for Green Ribbon Month within the region's Traveller Projects.
	<b>Q3 2022</b>	Hold an event for Suicide Prevention Day within the region's Traveller Projects.
	<b>Q4 2022</b>	Hold an event for World Mental Health Day within the region's Traveller Projects.
<b>Overarching Milestone 2023:</b> TBD		<b>Overarching Milestone 2024:</b> TBD
<b>Outputs by end of 2022:</b> A suite of cohesive suicide prevention, mental health awareness, and stigma reduction campaigns delivered across Traveller Projects in the Community Healthcare East area.		



<b>National Goal 1:</b> To improve the nation's understanding of, and attitudes to, suicidal behaviour, mental health and wellbeing		
<b>National Objective 1.3:</b> Reduce stigmatising attitudes to mental health and suicidal behaviour at population level and within priority groups.		
<b>National Action:</b> 1.3.1 Deliver campaigns that reduce stigma to those with mental health difficulties and suicidal behaviour in the whole population and self-stigma among priority groups.		
<b>Lead:</b> NOSP		
<b>Key Partners:</b> HSE MH, Youth sector, Non-statutory partners		
<b>Local Action:</b> 1.3.1 (c) Establish a new national initiative, <i>Jumpers for Goalposts</i> , that both promotes mental health awareness, connection and conversation around mental health whilst also promoting sign posting to relevant supports.		
<b>Lead:</b> Mental Health Ireland		
<b>Partners:</b> HSE MH ROSP, HSE MH Engagement Lead, HSE MH Traveller Coordinator, Sports Partnership, Wicklow Mental Health Association, Healthy Ireland		
<b>Purpose:</b> To support the establishment a new national initiative, <i>Jumpers for Goalposts</i> , that both promotes mental health awareness, connection and conversation around mental health whilst also promoting sign posting to relevant supports. This initiative is inclusive to all priority groups.		
<b>Planned start date and duration:</b> Q2-Q4 2022		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> Lead and partner time		
<b>Overarching Milestone 2022</b>  To plan and deliver the Jumpers for Goalposts events in CHO6 areas targeting at risk men.	<b>Q1 2022</b>	
	<b>Q2 2022</b>	To plan Jumpers for Goalposts local events.
	<b>Q3 2022</b>	To deliver Jumpers for Goalposts at local level.
	<b>Q4 2022</b>	To deliver Jumpers for Goalposts at local level.
		To evaluate impact of Jumpers for goalposts.
<b>Overarching Milestone 2023:</b>		<b>Overarching Milestone 2024:</b>
<b>Outputs by end of 2022:</b> To have engaged with communities and to have run and evaluated a number of Jumpers for Goalposts in Community Healthcare East area.		



<b>National Goal 1:</b> To improve the nation's understanding of, and attitudes to, suicidal behaviour, mental health and wellbeing		
<b>National Objective 1.4:</b> Engage and work collaboratively with the media in relation to media guidelines, tools and training programmes to improve the reporting of suicidal behaviour within broadcast, print and online media.		
<b>National Action:</b> 1.4.4 Monitor media reporting of suicide, and engage with the media in relation to adherence to guidelines on media reporting. <b>Lead:</b> NOSP <b>Key Partners:</b> -		
<b>Local Action:</b> 1.4.4 Working with Headline, establish links with and support local media by providing updated information on media reporting such as the <i>Samaritans Media Reporting Guidelines for the Reporting of Suicide</i> , and report media breaches to Headline. <b>Lead:</b> HSE MH (ROSP), Headline <b>Partners:</b> Local media		
<b>Purpose:</b> The media have a significant role to play in promoting mental health, actively reducing stigma towards people with mental health difficulties, and reporting suicide safely and responsibly. The purpose is that all forms of Irish media responsibly and accurately cover mental health and suicide. Those affected by suicide, deliberate self-harm, mental health problems or mental illness is not adversely affected by media coverage. The mental health and mental well-being of the population is prioritised by the media in its work.		
<b>Planned start date and duration:</b> Q2 2022, on-going		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> ROSP time		
<b>Overarching Milestone 2022</b>  Information disseminated to all relevant print, online and broadcast media	<b>Q1 2022</b>	On-going reporting of media breaches
	<b>Q2 2022</b>	Send communication to all print, online and broadcast media. On-going reporting of media breaches
	<b>Q3 2022</b>	On-going reporting of media breaches
	<b>Q4 2022</b>	On-going reporting of media breaches
<b>Overarching Milestone 2023:</b> TBD		<b>Overarching Milestone 2024:</b> TBD
<b>Outputs by end of 2022:</b> Communication to all print, online and broadcast media and media breaches reported in a timely manner.		

## GOAL TWO

Goal two of *Connecting for Life*, Ireland's national strategy to prevent suicide 2015-2020, aims to support local communities' capacity to prevent and respond to suicidal behaviour.

Well-structured and co-ordinated community-based initiatives can translate into protective benefits for families and individuals, which contribute to reduced risk of suicidal behaviour. An empowered community can respond to the needs of its members and protect them in difficult times and can sustain these positive effects over time. The work of and partnership formed amongst HSE Resource Officers for Suicide Prevention and non-statutory organisations is crucial in ensuring this goal is met (National Office for Suicide Prevention 2019).

In CfL Community Healthcare Dublin South East, Dublin South and Wicklow, there are 7 actions under goal two led by HSE Mental Health, the Resource Officer for Suicide Prevention, HSE Health and Wellbeing and the Family Resource Centres.

<b>National Goal 2:</b> To support local communities' capacity to prevent and respond to suicidal behaviour.		
<b>National Objective 2.1:</b> Improve the continuation of community level responses to suicide through planned multi-agency approaches.		
<b>National Action:</b> 2.1.1 Implement consistent, multi-agency suicide prevention action plans to enhance communities' capacity to respond to suicidal behaviour, emerging suicide clusters and murder suicide. The plans will be the responsibility of HSE Mental Health Division and aligned with HSE Community Health Organisations structure, Local Economic & Community Plans and Children & Young People's Services Committee's (CYPSC) county plans. <b>Lead:</b> HSE MH <b>Key Partners:</b> DECLG, LA, HSE, CHOs, Acute Hospitals, Non-statutory partners, NOSP		
<b>Local Action:</b> 2.1.1 (a) Develop and participate in the implementation of Community Healthcare East CfL Action Plan 2022-2024 and facilitate CHO level reports on the local implementation of CfL as part of a national monitoring and reporting framework. <b>Lead:</b> HSE MH (ROSP), HSE MH <b>Partners:</b> HSE PMO, Connecting for Life Interagency Implementation Groups, Connecting for Life Oversight Group		
<b>Purpose:</b> Improve the continuation of community level responses to suicide through planned multi-agency approaches.		
<b>Planned start date and duration:</b> Q1 2022, on-going		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> Funding, expertise, ROSP and partner time.		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  Regular engagement between ROSPs, CfL Local Interagency Implementation Groups, CfL Oversight Group. Launch of the new Dublin South East, Dublin South, and Wicklow Connecting for Life Plan.	<b>Q1 2022</b>	Local interagency implementation groups and oversight group continue to meet and report on progress of actions.
	<b>Q2 2022</b>	Local interagency implementation groups and oversight group continue to meet and report on progress of actions.
	<b>Q3 2022</b>	Local interagency implementation groups and oversight group continue to meet and report on progress of actions.
	<b>Q4 2022</b>	Review and evaluate current actions and progress.
<b>Overarching Milestone 2023:</b> TBD		<b>Overarching Milestone 2024:</b> TBD
<b>Outputs by end of 2022:</b> Suicide prevention and response structures embedded and functioning as business as usual in Community Healthcare East area, with clear and regular communications channels in place to ensure flow of information and capture learning.		

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

**National Objective 2.1:** Improve the continuation of community level responses to suicide through planned multi-agency approaches.

**National Action:** 2.1.1 Implement consistent, multi-agency suicide prevention action plans to enhance communities' capacity to respond to suicidal behaviour, emerging suicide clusters and murder suicide. The plans will be the responsibility of HSE Mental Health Division and aligned with HSE Community Health Organisations structure, Local Economic & Community Plans and Children & Young People's Services Committee's (CYPSC) county plans.

**Lead:** HSE MH

**Key Partners:** DECLG, LA, HSE, CHOs, Acute Hospitals, Non-statutory partners, NOSP

**Local Action:** 2.1.1 (b) Support the implementation of Connecting for Life Dublin South East, Dublin South and Wicklow Community Healthcare through networking events and enhanced information sharing.

**Lead:** HSE MH (ROSP)

**Partners:** Connecting for Life Interagency Implementation Groups, Community and Voluntary Organisations

**Purpose:** To build the profile of CfL and to enhance partnership working.

**Planned start date and duration:** Q1 2022, on-going

**Location:** Dublin South East, Dublin South and Wicklow

**Inputs for 2022:** Funding, ROSP time and expertise

#### Milestones

<b>Overarching Milestone 2022</b>  Implement Communications plan for Dublin South East, Dublin South, and Wicklow	<b>Q1 2022</b>	Develop working group to include local HSE communications plan.
	<b>Q2 2022</b>	Implement all aspect of the communications plan.
	<b>Q3 2022</b>	Implement all aspect of the communications plan.
	<b>Q4 2022</b>	Review communications plan.

**Overarching Milestone 2023:**

**Overarching Milestone 2024:**

**Outputs by end of 2022:** Increased awareness and engagement in the vision, objectives and actions of CfL.

<b>National Goal 2:</b> To support local communities' capacity to prevent and respond to suicidal behaviour.		
<b>National Objective 2.2:</b> Ensure that accurate information and guidance on effective suicide prevention are provided for community-based organisations (e.g. Family Resource Centres, Sports Organisations).		
<b>National Action:</b> 2.2.1 Provide community-based organisations with guidelines and protocols on effective suicide prevention. <b>Lead:</b> NOSP <b>Key Partners:</b> Non-statutory partners		
<b>Local Action:</b> 2.2.1 (a) Aligned to the national <i>Developing a Community Response to Suicide</i> guidelines develop localised Community Response Plans. <b>Lead:</b> HSE MH <b>Partners:</b> HSE MH (ROSP), HSE PC, HSE Psychology, An Garda Síochána, SBLO, HSE Communications, Coroner, Tusla, NEPS, ETBs		
<b>Purpose:</b> To improve local Inter-Agency Community Responses for incidents of suspected suicide, particularly where there is a risk of clusters and/or contagion. To inform local communities of trends regarding suicidal behaviour where action is required to prevent future suicidal behaviour/suicides.		
<b>Planned start date and duration:</b> Q1 2022, 12 months		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> Relevant staff and partner time		
<b>Milestone</b>		
<b>Overarching Milestone 2022</b>  Community Response Plan for Community Healthcare East developed.	<b>Q1 2022</b>	Consult with all relevant stakeholders and review all relevant response plans. Continue to participate in the update of <i>Suicide Prevention in the Community – A Practical Guide</i> .
	<b>Q2 2022</b>	Write CRP.
	<b>Q3 2022</b>	Write CRP.
	<b>Q4 2022</b>	Finalise CRP and disseminate to relevant stakeholders.
<b>Outputs by end of 2022:</b> Community Response Plan for Community Healthcare East developed		

<b>National Goal 2:</b> To support local communities' capacity to prevent and respond to suicidal behaviour.		
<b>National Objective 2.2:</b> Ensure that accurate information and guidance on effective suicide prevention are provided for community-based organisations (e.g. Family Resource Centres, Sports Organisations).		
<b>National Action:</b> 2.2.1 Provide community-based organisations with guidelines and protocols on effective suicide prevention. <b>Lead:</b> NOSP <b>Key Partners:</b> Non-statutory partners		
<b>Local Action:</b> 2.2.1 (b) Disseminate the updated <i>Suicide Prevention in the Community: A Practical Guide</i> to community-based organisations. <b>Lead:</b> HSE MH (ROSP) <b>Partners:</b> Connecting for Life Interagency Implementation Groups, Community and Voluntary Organisations		
<b>Purpose:</b> To provide communities and community organisations with a practical recourse to support them in improving local responses to suicide prevention.		
<b>Planned start date and duration:</b> Q1 2022, 3 months		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> ROSP time		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  To ensure that all community partners have received <i>Suicide Prevention in the Community: A Practical Guide</i> to community-based organisations.	<b>Q1 2022</b>	Circulate document to relevant partners.
	<b>Q2 2022</b>	
	<b>Q3 2022</b>	
	<b>Q4 2022</b>	Recirculate document and any updates to all relevant organisations.
<b>Outputs by end of 2022:</b> All communities are aware of evidence based suicide prevention approaches for communities.		

<b>National Goal 2:</b> To support local communities' capacity to prevent and respond to suicidal behaviour.		
<b>National Objective 2.2:</b> Ensure that accurate information and guidance on effective suicide prevention are provided for community-based organisations (e.g. Family Resource Centres, Sports Organisations).		
<b>National Action:</b> 2.2.1 Provide community-based organisations with guidelines and protocols on effective suicide prevention.		
<b>Lead:</b> NOSP		
<b>Key Partners:</b> Non-statutory partners		
<b>Local Action:</b> 2.2.1 (c) Build capacity within Family Resource Centres locally around Suicide Prevention and Mental Health Promotion, to include supporting the delivery of the 'Suicide Prevention Code of Practice' and the implementation of the framework 'Building Resilient Communities'.		
<b>Lead:</b> National Forum of Family Resource Centres, National FRC Mental Health Promotion Project, HSE MH (ROSP)		
<b>Partners:</b> Family Resource Centres		
<b>Purpose:</b> To provide training, support and best practice guidance around suicide prevention and mental health promotion for staff and volunteers of FRCs nationally.		
<b>Planned start date and duration:</b> Q1 2022		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2021:</b> ROSP time and expertise		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  Develop and launch the Framework and deliver training in line with guidelines around Covid-19.  Deliver COP face to face training in line with guidelines for Covid-19.	<b>Q1 2022</b>	Explore blended learning options for the delivery of the Suicide Prevention COP.
	<b>Q2 2022</b>	Launch the updated Framework 'Building Community Resilience'
	<b>Q3 2022</b>	Start to deliver new programs identified in the Framework, for example, bereavement supports/training Roll out the blended learning version of the T4T COP.
	<b>Q4 2022</b>	Continue to deliver training and Framework actions.
<b>Overarching Milestone 2023:</b> Continue to roll out actions associated with the Framework. On-going review of training needs from FRCs and delivery methods.	<b>Overarching Milestone 2024:</b> Continue to roll out actions associated with the Framework. On-going review of training needs from FRCs and delivery methods.	
<b>Outputs by end of 2022:</b> That all communities are aware of evidence based suicide prevention approaches for communities.		



<b>National Goal 2:</b> To support local communities' capacity to prevent and respond to suicidal behaviour.		
<b>National Objective 2.3:</b> Ensure the provision and delivery of training programmes on suicide prevention to community-based organisations.		
<b>National Action:</b> 2.3.2 Deliver training and awareness programmes in line with the National Training Plan prioritising professionals and volunteers across community-based organisations, particularly those who come into regular contact with people who are vulnerable to suicide. <b>Lead:</b> NOSP <b>Key Partners:</b> Non-statutory partners		
<b>Local Action:</b> 2.3.2 In alignment with the National Training Plan, provide access to suicide prevention and self-harm training to staff and volunteers across community-based organisations, particularly those who come into regular contact with people who are vulnerable to suicide and present with self-harm. <b>Lead:</b> HSE MH (ROSP) <b>Partners:</b> Connecting for Life Interagency Implementation Groups, Community and Voluntary Organisations		
<b>Purpose:</b> To improve knowledge of risks and signs of suicide, positively shape attitudes and increase confidence in dealing with people in crisis and connecting them with services.		
<b>Planned start date and duration:</b> Q1 2022, on-going		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> Funding, expertise, ROSP, trainer and partner time		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  To continue to provide a suite of evidence-based online and face to face suicide prevention and self-harm trainings.	<b>Q1 2022</b>	Liaise with Breaking Through for quarterly statistics on training delivered in Dublin South East, Dublin South and Wicklow to ensure the training needs of organisations supporting people who are vulnerable to suicide and present with self-harm are met.
	<b>Q2 2022</b>	Liaise with Breaking Through for quarterly statistics on training delivered in Dublin South East, Dublin South and Wicklow to ensure the training needs of organisations supporting people who are vulnerable to suicide and present with self-harm are met.
	<b>Q3 2022</b>	Liaise with Breaking Through for quarterly statistics on training delivered in Dublin South East, Dublin South and Wicklow to ensure the training



		needs of organisations supporting people who are vulnerable to suicide and present with self-harm are met.
	<b>Q4 2022</b>	Liaise with Breaking Through for quarterly statistics on training delivered in Dublin South East, Dublin South and Wicklow to ensure the training needs of organisations supporting people who are vulnerable to suicide and present with self-harm are met.
<b>Overarching Milestone 2023:</b> TBD		<b>Overarching Milestone 2024:</b> TBD
<b>Outputs by end of 2022:</b> To have an increased number of people trained in self-harm awareness, suicide prevention and bereavement support skills in Dublin South East, Dublin South, and Wicklow; projected targets are 68 courses and 1700 participants in 2022.		

<b>National Goal 2:</b> To support local communities' capacity to prevent and respond to suicidal behaviour.		
<b>National Objective 2.3:</b> Ensure the provision and delivery of training programmes on suicide prevention to community-based organisations.		
<b>National Action:</b> 2.3.3 Deliver a range of mental health promoting programmes in community, health and education settings aimed at improving the mental health of the whole population and priority groups. <b>Lead:</b> HSE H&W <b>Key Partners:</b> HSE MH, DOH		
<b>Local Action:</b> 2.3.3 Support access and participation by local community and voluntary organisations in relevant health promotion programmes e.g. stress prevention/management programmes, Mind Your Wellbeing and Social Prescribing. <b>Lead:</b> HSE H&W <b>Partners:</b> HSE MH RO SP, Implementation Groups, Community & Voluntary Organisations		
<b>Purpose:</b> To rollout standardised suite of programmes to targeted population and general population to improve mental health of these populations.		
<b>Planned start date and duration:</b> Q2 2022, on-going		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> <ul style="list-style-type: none"> <li>➤ Planned timetable for delivery of programmes</li> <li>➤ Funding to train up and deliver range of programmes</li> <li>➤ Supporting partners to access population for delivery of programmes</li> <li>➤ Social Prescription Link Worker appointed in Slaintecare Healthy Communities Site in Bray, Co Wicklow. Funding for Sociap Prescribing Project through SHC in Bray, Wicklow area partnership funded through grant area funding and other various funding streams</li> </ul>		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>	<b>Q1 2022</b>	<ul style="list-style-type: none"> <li>• Team of HP&amp;I Officers trained and support to deliver range of programmes.</li> <li>• Timetable developed for this delivery.</li> <li>• SP Link Worker appointed and delivering social prescriptions in targeted communities.</li> </ul>
	<b>Q2 2022</b>	<ul style="list-style-type: none"> <li>• Team of HP&amp;I Officers trained and support to deliver range of programmes.</li> <li>• Timetable developed for this delivery.</li> <li>• SP Link Worker delivering</li> </ul>

		<p>social prescriptions in targeted communities.</p> <ul style="list-style-type: none"> <li>• Regional network established for SP Link Worker to support HC SP delivery.</li> </ul>
	<b>Q3 2022</b>	<ul style="list-style-type: none"> <li>• Team of HP&amp;I Officers trained and support to deliver range of programmes.</li> <li>• Timetable developed for this delivery.</li> <li>• SP Link Worker delivering social prescriptions in targeted communities.</li> </ul>
	<b>Q4 2022</b>	<ul style="list-style-type: none"> <li>• Team of HP&amp;I Officers trained and support to deliver range of programmes.</li> <li>• Timetable developed for this delivery.</li> <li>• SP Link Worker delivering social prescriptions in targeted communities.</li> <li>• Review of annual programme of delivery and planning ahead for 2023.</li> </ul>
<b>Overarching Milestone 2023:</b>		<b>Overarching Milestone 2024:</b>
<p><b>Outputs by end of 2022:</b> Local Community and targeted populations can access and participate in free relevant health promotion programmes e.g. stress prevention/management programmes, Mind Your Wellbeing and Social Prescribing in their communities (online or face-to-face).</p>		

## GOAL THREE

Goal three of *Connecting for Life*, Ireland's national strategy to prevent suicide, 2015-2020, aims to target approaches to reduce suicidal behaviour and improve mental health among priority groups.

While Ireland's overall suicide rate is among the lowest in the OECD, particular demographic groups have consistently been shown by both national and international research evidence to have increased risk of suicidal behaviour. These include young people aged 15-24, people with mental health problems of all ages, people with alcohol and drug problems, people bereaved by suicide and prisoners.

There are other groups with potentially increased vulnerability to suicidal behaviour where the research evidence is either less consistent or limited. These include asylum seekers, refugees, migrants, sex workers and people with chronic illness or disability. Further research is required for these groups. These risk groups may change over time. While there is significant overlap between many of the groups, it is important to note that even within a group where there is increased risk, only a minority will engage in suicidal behaviour (National Office for Suicide Prevention 2019).

In CfL Community Healthcare Dublin South East, Dublin South and Wicklow, there are 19 actions under goal three led by the following:

- HSE Mental Health
- HSE Resource Officer for Suicide Prevention
- HSE Health and Wellbeing
- HSE Addiction Services
- HSE Traveller Mental Health Coordinator
- HSE Primary Care
- HSE Social Inclusion Community and Voluntary Organisations
- Wicklow Traveller Mental Health Steering Group
- HUGG
- CfL Implementation Groups

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

National Objective 3.1: Improve the implementation of effective approaches to reducing suicidal behaviour among priority groups.

National Action: 3.1.3 Develop and deliver targeted initiatives and services at Primary Care level for priority groups.

Lead: HSE PC

Key Partners: NOSP

Local Action: 3.1.3 (a) Deliver suicide prevention training to staff within homeless service providers in the region.

Lead: HSE MH (ROSP)

Partners: HSE Social Inclusion, Connecting for Life Interagency Implementation Groups, Community and Voluntary Organisations

Purpose: To work with homeless accommodation providers and supports to enhance suicide prevention skills and post suicide support. Homelessness is recognised as a priority group and higher risk of suicide in Dublin South East, Dublin South and Wicklow Community Healthcare.

Planned start date and duration: Q2 2022, 12 months

Location: Dublin South East, Dublin South and Wicklow

Inputs for 2022: NOSP time, Breaking Through time, Homeless Accommodation Provider time

Milestones

<div>Overarching Milestone 2022</div> <div>Staff in homeless service organisations will have access to a suite of suicide prevention trainings.</div>	Q1 2022	
	Q2 2022	Identify sites and stakeholders within homeless service providers in the area.  Promote suite of training (online and face to face) to organisations.
	Q3 2022	Promote suite of training (online and face to face) to organisations.
	Q4 2022	Promote suite of training (online and face to face) to organisations.  Evaluate access to and suitability of this suite of trainings together with Breaking Through and relevant stakeholders.
	Overarching Milestone 2023: TBD	Overarching Milestone 2024: TBD

Outputs by end of 2022: Improved suicide prevention skills for staff working across private and public homeless accommodation.

<b>National Goal 3:</b> To target approaches to reduce suicidal behaviour and improve mental health among priority groups.		
<b>National Objective 3.1:</b> Improve the implementation of effective approaches to reducing suicidal behaviour among priority groups.		
<b>National Action:</b> 3.1.3 Develop and deliver targeted initiatives and services at Primary Care level for priority groups.		
<b>Lead:</b> HSE PC		
<b>Key Partners:</b> NOSP		
<b>Local Action:</b> 3.1.3 (b) Support the implementation of the relevant actions in the County Wicklow Traveller Mental Health Report Recommendations, with a focus with Travellers on what is working and why it works for Travellers. Build and strengthen models of good practice that are working in the Traveller Community locally.		
<b>Lead:</b> County Wicklow Traveller Mental Health Steering Group		
<b>Partners:</b> HSE MH (ROSP), HSE Social Inclusion, HSE PC, Traveller Groups, Traveller Mental Health Co-ordinator		
<b>Purpose:</b> To improve awareness of mental health and available mental health supports and to contribute to the improvement of mental health in this population group.		
<b>Planned start date and duration:</b> Q1 2022		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> ROSP and partner time, funding for materials and events.		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  Identify and progress actions from the County Wicklow Traveller Mental Health Report Recommendations.	<b>Q1 2022</b>	ROSPs attending Co. Wicklow Traveller MHSG in Q1 to identify relevant CfL related actions from the recommendations from the Co. Wicklow Traveller Mental Health Report and to progress already commenced actions from 2021.
	<b>Q2 2022</b>	Support the implementation of identified actions. Progress already commenced actions from 2021.
	<b>Q3 2022</b>	Support the implementation of identified actions. Progress already commenced actions from 2021.
	<b>Q4 2022</b>	Review status and progress of actions and assess needs for 2023.
<b>Overarching Milestone 2023:</b> To improve the experiences of Travellers engaging with service providers and to increase numbers of Traveller individuals and families engaging with the services and better outcome of progression.	<b>Overarching Milestone 2024:</b> Increase numbers of Travellers participating and engaging with healthy lifestyle choices, in education training/upskilling, apprenticeship, enterprise development, job uptake incentives and supports.	
<b>Outputs by end of 2022:</b> To improve Traveller MH and engagement with services.		

<b>National Goal 3:</b> To target approaches to reduce suicidal behaviour and improve mental health among priority groups.		
<b>National Objective 3.1:</b> Improve the implementation of effective approaches to reducing suicidal behaviour among priority groups.		
<b>National Action:</b> 3.1.3 Develop and deliver targeted initiatives and services at Primary Care level for priority groups.		
<b>Lead:</b> HSE PC		
<b>Key Partners:</b> NOSP		
<b>Local Action:</b> 3.1.3 (c) Develop culturally appropriate bereavement supports for Travellers who have been bereaved by suicide.		
<b>Lead:</b> HUGG, HSE Traveller Mental Health Coordinator		
<b>Partners:</b> HSE MH (ROSP), Local Traveller Projects, Traveller Health Unit, National Traveller Counselling Service, LGBT+ Ireland.		
<b>Purpose:</b> To develop Traveller peer led, culturally appropriate supports for Travellers bereaved by suicide.		
<b>Planned start date and duration:</b> Q1 2022, on-going		
<b>Location:</b> Dublin South, Kildare and West Wicklow Community Healthcare (CHO7), Dublin South East, Dublin South and Wicklow (CHO6) and Dublin North City and County (CHO9).		
<b>Inputs for 2022:</b> Funding, ROSP, partner time.		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  To develop culturally appropriate, peer led, suicide bereavement supports for members of the Traveller Community.	<b>Q1 2022</b>	Working group to meet to continue to develop Traveller specific, peer led, suicide bereavement supports.
	<b>Q2 2022</b>	Working group to meet to continue to develop Traveller specific, peer led, suicide bereavement supports.
	<b>Q3 2022</b>	Working group to meet to continue to develop Traveller specific, peer led, suicide bereavement supports.
	<b>Q4 2022</b>	Working group to meet to continue to develop Traveller specific, peer led, suicide bereavement supports.
<b>Overarching Milestone 2023:</b> TBD		<b>Overarching Milestone 2024:</b> TBD
<b>Outputs by end of 2022:</b> Traveller bereavement support group pilot commenced and culturally appropriate bereavement supports available to Travellers.		

<b>National Goal 3:</b> To target approaches to reduce suicidal behaviour and improve mental health among priority groups.		
<b>National Objective 3.1:</b> Improve the implementation of effective approaches to reducing suicidal behaviour among priority groups.		
<b>National Action:</b> 3.1.3 Develop and deliver targeted initiatives and services at Primary Care level for priority groups. <b>Lead:</b> HSE PC <b>Key Partners:</b> NOSP		
<b>Local Action:</b> 3.1.3 (d) Deliver suicide prevention training to new communities' organisations and people in Direct Provision. <b>Lead:</b> HSE MH (ROSP) <b>Partners:</b> HSE Social Inclusion, Connecting for Life Interagency Implementation Groups, Community and Voluntary Organisations		
<b>Purpose:</b> New communities and those residing in direct provision are at higher risk for suicidality. In Dublin South East, Dublin South and Wicklow new communities and those living in direct provision have been identified as a priority group.		
<b>Planned start date and duration:</b> Q2 2022, 12 months		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> ROSP and partner time, expertise, funding		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  Individuals and organisations supporting new communities and those living in direct provision will have access to a suite of suicide prevention training.	<b>Q1 2022</b>	
	<b>Q2 2022</b>	Identify sites and stakeholders within new communities and the Direct Provision system in the area.  Promote suite of training (online and face to face) to organisations.
	<b>Q3 2022</b>	Promote suite of training (online and face to face) to organisations.
	<b>Q4 2022</b>	Promote suite of training (online and face to face) to organisations.  Evaluate access to and suitability of this suite of trainings together with Breaking Through and relevant stakeholders.
<b>Overarching Milestone 2023:</b> TBD		<b>Overarching Milestone 2024:</b> TBD
<b>Outputs by end of 2022:</b> Increased capacity of those supporting new communities and those living in direct provision.		



<b>National Goal 3:</b> To target approaches to reduce suicidal behaviour and improve mental health among priority groups.		
<b>National Objective 3.1:</b> Improve the implementation of effective approaches to reducing suicidal behaviour among priority groups.		
<b>National Action:</b> 3.1.3 Develop and deliver targeted initiatives and services at Primary Care level for priority groups. <b>Lead:</b> HSE PC <b>Key Partners:</b> NOSP		
<b>Local Action:</b> 3.1.3 (e) Explore the feasibility of offering additional supports to people engaged in repeated acts of self-harm. <b>Lead:</b> HSE MH, HSE MH (ROSP) <b>Partners:</b> DATFs, HSE Addiction Services, St. Vincent's Hospital, Centre for Living		
<b>Purpose:</b> Repeated self-harm represents the single strongest risk factor for suicide. Providing additional supports for this group is key to reducing suicide rates.		
<b>Planned start date and duration:</b> Q1 2022, 12 months		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b>		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  Scoping exercise to identify required additional supports. Support self-harm team in EDs to analyse and respond to findings from statistics.	<b>Q1 2022</b>	Build relationship with self-harm team in SVUH and the Centre for Living.
	<b>Q2 2022</b>	Set up a working group with relevant stakeholders.
	<b>Q3 2022</b>	Working group continue to meet and explore responses.
	<b>Q4 2022</b>	Working group continue to meet and explore responses.
<b>Overarching Milestone 2023:</b> TBD		<b>Overarching Milestone 2024:</b> TBD
<b>Outputs by end of 2022:</b> Improved supports for people who are accessing the National Clinical Programme for self-harm in the CHO's hospitals.		

<b>National Goal 3:</b> To target approaches to reduce suicidal behaviour and improve mental health among priority groups.		
<b>National Objective 3.1:</b> Improve the implementation of effective approaches to reducing suicidal behaviour among priority groups.		
<b>National Action:</b> 3.1.3 Develop and deliver targeted initiatives and services at Primary Care level for priority groups. <b>Lead:</b> HSE PC <b>Key Partners:</b> NOSP		
<b>Local Action:</b> 3.1.3 (f) Promote the EDEN Suicide Prevention Programme in Dublin South East, Dublin South and Wicklow. <b>Lead:</b> HSE MH (ROSP) <b>Partners:</b> Suicide or Survive		
<b>Purpose:</b> To provide a supportive community-based programme for people who are suicidal so that they can develop tools to manage their own wellness, provide links into a range of supports in their own community and support the person to move away from suicide as an option of first choice in times of crisis.		
<b>Planned start date and duration:</b> Q1 2022		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> ROSP, partner time		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  Promotion of the EDEN programme across CHO area.	<b>Q1 2022</b>	Identify events/means to promote the EDEN programme across the CHO, in particular among priority groups.
	<b>Q2 2022</b>	Identify events/means to promote the EDEN programme across the CHO, in particular among priority groups.
	<b>Q3 2022</b>	Identify events/means to promote the EDEN programme across the CHO, in particular among priority groups.
	<b>Q4 2022</b>	Identify events/means to promote the EDEN programme across the CHO, in particular among priority groups.
<b>Overarching Milestone 2023:</b> TBD		<b>Overarching Milestone 2024:</b> TBD
<b>Outputs by end of 2022:</b> Increased awareness of EDEN programme across the CHO area and increased subscription to EDEN face-to-face and online programmes from people in Dublin South East, Dublin South and Wicklow.		

<b>National Goal 3:</b> To target approaches to reduce suicidal behaviour and improve mental health among priority groups.		
<b>National Objective 3.1:</b> Improve the implementation of effective approaches to reducing suicidal behaviour among priority groups.		
<b>National Action:</b> 3.1.3 Develop and deliver targeted initiatives and services at Primary Care level for priority groups. <b>Lead:</b> HSE PC <b>Key Partners:</b> NOSP		
<b>Local Action:</b> 3.1.3 (g) Promote the WITH (Wellbeing in the Home) Programme to support young people experiencing parental mental health issues. <b>Lead:</b> HSE MH (ROSP) <b>Partners:</b> Connecting for Life partners		
<b>Purpose:</b> To provide supports for the estimated 20% of young people who are living with parental mental health issues.		
<b>Planned start date and duration:</b> Q3 2022, 6 months		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> ROSP and partner time, WITH resources.		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  Make the WITH resources available across the area.	<b>Q1 2022</b>	
	<b>Q2 2022</b>	
	<b>Q3 2022</b>	Promotion of the WITH programme to support young people experiencing mental health issues.
	<b>Q4 2022</b>	Promotion of the WITH programme to support young people experiencing mental health issues.
<b>Overarching Milestone 2023:</b>		<b>Overarching Milestone 2024:</b>
<b>Outputs by end of 2022:</b> Improved support for young people living with parental mental health issues.		

<b>National Goal 3:</b> To target approaches to reduce suicidal behaviour and improve mental health among priority groups.		
<b>National Objective 3.1:</b> Improve the implementation of effective approaches to reducing suicidal behaviour among priority groups.		
<b>National Action:</b> 3.1.3 Develop and deliver targeted initiatives and services at Primary Care level for priority groups.		
<b>Lead:</b> HSE PC		
<b>Key Partners:</b> NOSP		
<b>Local Action:</b> 3.1.3 (h) Promote the newly developed resources, aimed at parents, guardians and young people to highlight care pathways for young people experiencing mental health issues.		
<b>Lead:</b> HSE MH (ROSP)		
<b>Partners:</b> CYPSC, NOSP		
<b>Purpose:</b> To provide localised, up to date and relevant information for parents and guardians and young people.		
<b>Planned start date and duration:</b> Q2 2022, 9 months		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> ROSP and partner time, funding		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  Resource completed and disseminated.	<b>Q1 2022</b>	
	<b>Q2 2022</b>	
	<b>Q3 2022</b>	
	<b>Q4 2022</b>	Resource completed and disseminated.
<b>Overarching Milestone 2023:</b>		<b>Overarching Milestone 2024:</b>
<b>Outputs by end of 2022:</b> Resource on mental health supports and services for young people completed and disseminated.		

<b>National Goal 3:</b> To target approaches to reduce suicidal behaviour and improve mental health among priority groups.		
<b>National Objective 3.1:</b> Improve the implementation of effective approaches to reducing suicidal behaviour among priority groups.		
<b>National Action:</b> 3.1.3 Develop and deliver targeted initiatives and services at Primary Care level for priority groups. <b>Lead:</b> HSE PC <b>Key Partners:</b> NOSP		
<b>Local Action:</b> 3.1.3 (i) Support the implementation of the mental health actions in the National Traveller Health Action Plan. <b>Lead:</b> HSE PC, HSE Social Inclusion <b>Partners:</b> HSE MH, HSE MH (ROSP)		
<b>Purpose:</b> To support the delivery of actions relevant to Connecting for Life for the Traveller Community in Dublin South East, Dublin South and Wicklow		
<b>Planned start date and duration:</b> Q1 2022, on-going		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> ROSP & partner time		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  To support the implementation of mental health actions in the National Traveller Health Action Plan.	<b>Q1 2022</b>	Liaise with relevant partners to identify cross strategy actions that require ROSP support.
	<b>Q2 2022</b>	Liaise with relevant partners to identify cross strategy actions that require ROSP support.
	<b>Q3 2022</b>	Liaise with relevant partners to identify cross strategy actions that require ROSP support.
	<b>Q4 2022</b>	Liaise with relevant partners to identify cross strategy actions that require ROSP support.
<b>Overarching Milestone 2023:</b>		<b>Overarching Milestone 2024:</b>
<b>Outputs by end of 2022:</b> Actions that require ROSP involvement agreed and implementation of relevant actions supported.		

<b>National Goal 3:</b> To target approaches to reduce suicidal behaviour and improve mental health among priority groups.		
<b>National Objective 3.1:</b> Improve the implementation of effective approaches to reducing suicidal behaviour among priority groups.		
<b>National Action:</b> 3.1.3 Develop and deliver targeted initiatives and services at Primary Care level for priority groups.		
<b>Lead:</b> HSE PC		
<b>Key Partners:</b> NOSP		
<b>Local Action:</b> 3.1.3 (j) Work with staff in regional hospitals to provide a suicide prevention and bereavement resource to each of the clinical areas in the hospital. In conjunction with this, training will be offered to staff in the hospital.		
<b>Lead:</b> HSE MH (ROSP)		
<b>Partners:</b> SVUH, St. Michael's Hospital, St. Columcille's Hospital		
<b>Purpose:</b> To ensure that staff in the hospitals of the region have ready access to the information they require to support them to intervene, provide support and signposting if they encounter someone who is at risk of suicide or someone who has been bereaved through suicide.		
<b>Planned start date and duration:</b> Q2 2022		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> ROSP time		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  To continue to liaise with hospitals re training opportunities for staff.	<b>Q1 2022</b>	
	<b>Q2 2022</b>	Create folder with resources and disseminate across the hospitals of the region.
	<b>Q3 2022</b>	Check in with partners re feedback on folders and assess training needs.
	<b>Q4 2022</b>	Provide any training required.
<b>Overarching Milestone 2023:</b> TBD		<b>Overarching Milestone 2024:</b> TBD
<b>Outputs by end of 2022:</b> Staff in the hospitals are more confident in providing supports should they encounter someone at risk or who has been bereaved.		

<b>National Goal 3:</b> To target approaches to reduce suicidal behaviour and improve mental health among priority groups.		
<b>National Objective 3.1:</b> Improve the implementation of effective approaches to reducing suicidal behaviour among priority groups.		
<b>National Action:</b> 3.1.3 Develop and deliver targeted initiatives and services at Primary Care level for priority groups. <b>Lead:</b> HSE PC <b>Key Partners:</b> NOSP		
<b>Local Action:</b> 3.1.3 (k) Promote suite of suicide prevention training across CHO6 services/networks, including Primary Care, Mental Health, Disability and Older People Services, Health & Wellbeing. <b>Lead:</b> HSE MH (ROSP) <b>Partners:</b> HSE PC, HSE MH, HSE Disability Services, HSE Health & Wellbeing, HSE Older People Services		
<b>Purpose:</b> To improve knowledge of risks and signs of suicide, positively shape attitudes and increase confidence in dealing with people in crisis and connecting with services.		
<b>Planned start date and duration:</b> Q1 2022, on-going		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> ROSP, partner time		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  Increased capacity within CHO6 services to support individuals who may be experiencing suicidal ideation and those who have been bereaved by suicide.	<b>Q1 2022</b>	Identify key stakeholders within divisions to help promote training. Promote suite of training (online and face to face) to divisions/services.  Promote suite of training (online and face to face) to divisions/services.
	<b>Q2 2022</b>	Promote suite of training (online and face to face) to divisions/services.
	<b>Q3 2022</b>	Promote suite of training (online and face to face) to divisions/services.
	<b>Q4 2022</b>	Promote suite of training (online and face to face) to divisions/services.
<b>Overarching Milestone 2023:</b> TBD		<b>Overarching Milestone 2024:</b> TBD
<b>Outputs by end of 2022:</b> Increased numbers of staff engaged in training.		

<b>National Goal 3:</b> To target approaches to reduce suicidal behaviour and improve mental health among priority groups.		
<b>National Objective 3.1:</b> Improve the implementation of effective approaches to reducing suicidal behaviour among priority groups.		
<b>National Action:</b> 3.1.5 Provide and sustain training to health and social care professionals, including frontline mental health service staff and primary care health providers. This training will improve recognition of, and response to, suicide risk and suicidal behaviour among people vulnerable to suicide. <b>Lead:</b> NOSP <b>Key Partners:</b> HSE PC, HSE MH, Acute Hospitals		
<b>Local Action:</b> 3.1.5 Continue to implement suicide prevention training programmes in line with the National Suicide Prevention Education and Training Plan for health and social care frontline professionals working with priority groups including paramedics, ED staff, GPs, Tusla. <b>Lead:</b> HSE MH (ROSP) <b>Partners:</b> GPs, Tusla, National Ambulance Service, ED staff, CYPSCs, NOSP		
<b>Purpose:</b> To provide a suite of evidence informed training in suicide prevention, intervention and postvention in order to support the practice of frontline health and social care professionals.		
<b>Planned start date and duration:</b> Q1 2022, on-going		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> ROSP & Partner time, expertise, funding, training participants.		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  Increased capacity among social care and frontline professionals working with priority groups.	<b>Q1 2022</b>	Promote suite of training (online and face to face) to ED staff.
	<b>Q2 2022</b>	Promote suite of training (online and face to face) to organisations.
	<b>Q3 2022</b>	Promote suite of training (online and face to face) to organisations.
	<b>Q4 2022</b>	Promote suite of training (online and face to face) to organisations.
<b>Overarching Milestone 2023:</b> TBD		<b>Overarching Milestone 2024:</b> TBD
<b>Outputs by end of 2022:</b> In line with the overall projected total number of 68 courses and 1700 participants, we aim to increase the overall number of staff in social care and frontline services trained to support those who may be self-harming or experiencing suicidal ideation.		



<b>National Goal 3:</b> To target approaches to reduce suicidal behaviour and improve mental health among priority groups.		
<b>National Objective 3.1:</b> Improve the implementation of effective approaches to reducing suicidal behaviour among priority groups.		
<b>National Action:</b> 3.1.6 Continue the development of mental health promotion programmes with and for priority groups, including the Youth Sector. <b>Lead:</b> HSE H&W <b>Key Partners:</b> HSE MH, NOSP, Youth sector, Non-statutory partners		
<b>Local Action:</b> 3.1.6 (a) Promote and deliver targeted mental health promotion and suicide prevention training to schools in Dublin South East, Dublin South and Wicklow. <b>Lead:</b> HSE H&W <b>Partners:</b> HSE MH (ROSP), ETBs, Connecting for Life Implementation Groups, Youth Sector		
<b>Purpose:</b> To promote a whole school approach to wellbeing promotion.		
<b>Planned start date and duration:</b> Q2 2022, on-going		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> HP&I/HWB programme to be delivered to primary and post primary teachers through education centres as agreed with Dept of Education.		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  Provision of training.	<b>Q1 2022</b>	
	<b>Q2 2022</b>	In line with HSE Mental Health Action Plan and pending successful hiring of additional staff and Covid regulations deliver primary and post-primary school training.  <u>Primary school training:</u> Zippy's friends, Healthy Eating Policy Development, Promoting Wellbeing through physical activity. <u>Post-primary school training:</u> Healthy food made easy, Mindout, Know the Score
	<b>Q3 2022</b>	Continued delivery of Q2 training
	<b>Q4 2022</b>	Continued delivery of Q2 training Plan for 2023 delivery
<b>Overarching Milestone 2023:</b> TBD		<b>Overarching Milestone 2024:</b> TBD
<b>Outputs by end of 2022:</b> Delivery of agreed targeted programmes for primary and post primary teachers through education centres through HP&I Officers in the region.		

<b>National Goal 3:</b> To target approaches to reduce suicidal behaviour and improve mental health among priority groups.		
<b>National Objective 3.1:</b> Improve the implementation of effective approaches to reducing suicidal behaviour among priority groups.		
<b>National Action:</b> 3.1.6 Continue the development of mental health promotion programmes with and for priority groups, including the Youth Sector. <b>Lead:</b> HSE H&W <b>Key Partners:</b> HSE MH, NOSP, Youth sector, Non-statutory partners		
<b>Local Action:</b> 3.1.6 (b) Continue to roll out youth mental health programmes across Dublin South East, Dublin South and Wicklow. <b>Lead:</b> Community & Voluntary organisations <b>Partners:</b> ETBs, Youth sector, CYPSCs, HSE MH (ROSP)		
<b>Purpose:</b> To promote mental health awareness and wellbeing across the youth sector.		
<b>Planned start date and duration:</b> Q2 2022, on-going		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> ROSP, partner time, funding		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  Improve the implementation of effective approaches to reducing suicidal behaviour among young people.	<b>Q1 2022</b>	
	<b>Q2 2022</b>	Identify and match programmes to services. Upskill trainers. Promote the introduction of new best practice programmes to services.
	<b>Q3 2022</b>	Identify and match programmes to services. Upskill trainers. Promote the introduction of new best practice programmes to services.
	<b>Q4 2022</b>	Identify and match programmes to services. Upskill trainers. Promote the introduction of new best practice programmes to services.
<b>Overarching Milestone 2023:</b> TBD		<b>Overarching Milestone 2024:</b> TBD
<b>Outputs by end of 2022:</b> Improved implementation of effective approaches to reducing suicidal behaviour among young people. Enhanced supports for young people with mental health problems or vulnerable to suicide.		

<b>National Goal 3:</b> To target approaches to reduce suicidal behaviour and improve mental health among priority groups.		
<b>National Objective 3.1:</b> Improve the implementation of effective approaches to reducing suicidal behaviour among priority groups.		
<b>National Action:</b> 3.1.6 Continue the development of mental health promotion programmes with and for priority groups, including the Youth Sector. <b>Lead:</b> HSE H&W <b>Key Partners:</b> HSE MH, NOSP, Youth sector, Non-statutory partners		
<b>Local Action:</b> 3.1.6 (c) Continue to support the “Woodlands for Health Programme” in Wicklow and Dun Laoghaire area and explore the potential to extend the programme in Dublin South East. <b>Lead:</b> HSE H&W <b>Partners:</b> HSE MH, HSE MH (ROSP), DLR Local Authority		
<b>Purpose:</b> Engagement with nature through outdoor activities can have a significant positive impact on people’s mental health and wellbeing. This is a recovery oriented programme which complements traditional mental health treatment.		
<b>Planned start date and duration:</b> Q1 2022, ongoing		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> ROSP, Lead/Partner time, funding, expertise		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  Achieve preventative and treatment effects on mental health outcomes, including depression, anxiety and psychological stress.	<b>Q1 2022</b>	Continue to support the initiative in Wicklow and Dublin South.
	<b>Q2 2022</b>	Continue to support the initiative in Wicklow and Dublin South.
	<b>Q3 2022</b>	Assess the feasibility of the programme for Dublin South East. Develop and implement any resulting actions.  Develop and implement any resulting actions.  Continue to support the initiative in Wicklow and Dublin South.
	<b>Q4 2022</b>	Develop and implement any resulting actions.  Continue to support the initiative in Wicklow and Dublin South.
<b>Overarching Milestone 2023:</b> TBD		<b>Overarching Milestone 2024:</b> TBD
<b>Outputs by end of 2022:</b> Enhanced implementation of effective approaches to improving mental health outcomes and reducing suicidal behaviour.		

<b>National Goal 3:</b> To target approaches to reduce suicidal behaviour and improve mental health among priority groups.		
<b>National Objective 3.2:</b> Support, in relation to suicide prevention, the substance misuse strategy to address the high rate of alcohol and drug misuse.		
<b>National Action:</b> 3.2.1 Continue the roll out of programmes aimed at early intervention and prevention of alcohol and drug misuse in conjunction with HSE Primary Care. <b>Lead:</b> HSE PC <b>Key Partners:</b> HSE H&W, DOH		
<b>Local Action:</b> 3.2.1 (a) Support the delivery of SAOR (Online Screening & Brief Intervention) training in relevant statutory, community and voluntary organisations across Dublin South East, Dublin South and Wicklow. <b>Lead:</b> HSE PC, HSE MH, HSE Social Inclusion <b>Partners:</b> HSE Addiction Services, DATFs, Community & Voluntary Organisations.		
<b>Purpose:</b> To provide evidence based interventions aimed at early intervention and to identify those engaged in harmful drug & alcohol use and make appropriate referrals to specialist services.		
<b>Planned start date and duration:</b> Q1 2022, 12 months		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> ROSP / HSE PC time, expertise		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  Increased number of staff across Primary Care and Mental Health in Dublin South East, Dublin South and Wicklow trained in SAOR (Screening & Brief Intervention).	<b>Q1 2022</b>	ROSP to meet PC and MH Management Team and discuss SAOR model and develop training plan for PC and MH in Dublin South East, Dublin South, and Wicklow.
	<b>Q2 2022</b>	Disseminate SAOR training date (1 per quarter) across Primary Care and Mental Health services in Dublin South East, Dublin South, and Wicklow.
	<b>Q3 2022</b>	Disseminate SAOR training date (1 per quarter) across Primary Care and Mental Health services in Dublin South East, Dublin South, and Wicklow.
	<b>Q4 2022</b>	Disseminate SAOR training date (1 per quarter) across Primary Care and Mental Health services in Dublin South East, Dublin South, and Wicklow.
<b>Overarching Milestone 2023:</b> TBD		<b>Overarching Milestone 2024:</b> TBD
<b>Outputs by end of 2022:</b> Increased capacity among staff in Primary Care and Mental Health settings to assess level of substance use and respond accordingly.		

<b>National Goal 3:</b> To target approaches to reduce suicidal behaviour and improve mental health among priority groups.		
<b>National Objective 3.2:</b> Support, in relation to suicide prevention, the substance misuse strategy to address the high rate of alcohol and drug misuse.		
<b>National Action:</b> 3.2.1 Continue the roll out of programmes aimed at early intervention and prevention of alcohol and drug misuse in conjunction with HSE Primary Care. <b>Lead:</b> HSE PC <b>Key Partners:</b> HSE H&W, DOH		
<b>Local Action:</b> 3.2.1 (b) Continue to offer the Diploma in Drug & Alcohol Studies provided by HSE Addiction Services. <b>Lead:</b> HSE Addiction Services <b>Partners:</b> University of Limerick		
<b>Purpose:</b> Aims to support actions in National Drug and Alcohol policy that call for increased training opportunities for individuals working in the field. The programme is intended for individuals actively engaged in management of drug and alcohol problems or those working with groups at risk for drug and alcohol misuse.		
<b>Planned start date and duration:</b> Q2-Q3 2022		
<b>Location:</b> This programme is currently being offered online.		
<b>Inputs for 2022:</b> Increase participant's capacity to understand and respond effectively and appropriately to drug and alcohol problems.		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>	<b>Q1 2022</b>	
	<b>Q2 2022</b>	Course 2021/22 complete
	<b>Q3 2022</b>	Course 2022/23 commence
	<b>Q4 2022</b>	
<b>Overarching Milestone 2023:</b> TBD		<b>Overarching Milestone 2024:</b> TBD
<b>Outputs by end of 2022:</b> What are the products of these milestones?		

<b>National Goal 3:</b> To target approaches to reduce suicidal behaviour and improve mental health among priority groups.		
<b>National Objective 3.3:</b> Enhance the supports for young people with mental health problems or vulnerable to suicide.		
<b>National Action:</b> 3.3.3 Work with the HSE to develop national guidance for higher institutions in relation to suicide risk and critical incident response, thereby helping to address any gaps which may exist in the prevention of suicide in higher education <b>Lead:</b> HEA <b>Key Partners:</b> NOSP		
<b>Local Action:</b> 3.3.3 Support third level institutions to implement the National Student Mental Health and Suicide Prevention Framework. <b>Lead:</b> HSE MH (ROSP) <b>Partners:</b> Third Level Institutions		
<b>Purpose:</b> To ensure there is an all of system response within HEIs to suicide prevention and postvention.		
<b>Planned start date and duration:</b> Q1 2022, on-going		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> Third Level Institution time and ROSP time		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  Continued support of implementation of National Student Mental Health and Suicide Prevention Framework.	<b>Q1 2022</b>	Continued implementation of framework in UCD.
	<b>Q2 2022</b>	Contact made with other 3 <sup>rd</sup> Level institutions to identify supports needed in implementation of framework.
	<b>Q3 2022</b>	Continued implementation of framework in 3 <sup>rd</sup> Level institutions.
	<b>Q4 2022</b>	Continued implementation of framework in 3 <sup>rd</sup> Level institutions.
<b>Overarching Milestone 2023:</b> TBD		<b>Overarching Milestone 2024:</b> TBD
<b>Outputs by end of 2022:</b> Effective implementation of National Student Mental Health and Suicide Prevention Framework & ROSPs engaged in suicide prevention in third level institutions.		

<b>National Goal 3:</b> To target approaches to reduce suicidal behaviour and improve mental health among priority groups.		
<b>National Objective 3.3:</b> Enhance the supports for young people with mental health problems or vulnerable to suicide.		
<b>National Action:</b> 3.3.6 Deliver early intervention and psychological support service for young people at primary care level. <b>Lead:</b> HSE PC <b>Key Partners:</b> HSE MH		
<b>Local Action:</b> 3.3.6 Support the establishment of the Jigsaw service in Dublin South East, Dublin South and Wicklow. <b>Lead:</b> Connecting for Life Implementation Groups <b>Partners:</b> Jigsaw		
<b>Purpose:</b> Enhance the supports for young people with mental health problems or vulnerable to suicide.		
<b>Planned start date and duration:</b> Q3 2022, 6 months		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> ROSP, Partner time, funding		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  Establish early intervention Jigsaw services as accessible and flexible services throughout the area. Available to young people aged 12 - 25 years.	<b>Q1 2022</b>	Continue to support the establishment of Jigsaw services in Co. Wicklow and Dublin City. Examine the feasibility of a Jigsaw service in Dublin South East and Dublin South.
	<b>Q2 2022</b>	Continue to support the establishment of Jigsaw services in Co. Wicklow and Dublin City. Examine the feasibility of a Jigsaw service in Dublin South East and Dublin South.
	<b>Q3 2022</b>	Continue to support the establishment of Jigsaw services in Co. Wicklow and Dublin City. Examine the feasibility of a Jigsaw service in Dublin South East and Dublin South.
	<b>Q4 2022</b>	Continue to support the establishment of Jigsaw services in Co. Wicklow and Dublin City. Examine the feasibility of a Jigsaw service in Dublin South East and Dublin South.
<b>Overarching Milestone 2023:</b> TBD		<b>Overarching Milestone 2024:</b> TBD
<b>Outputs by end of 2022:</b> Improved implementation of effective approaches to reducing suicidal behaviour among young people.		

## GOAL FOUR

Goal four of *Connecting for Life*, Ireland's national strategy to reduce suicide 2015-2020, aims to enhance accessibility, consistency and care pathways of services for people vulnerable to suicidal behaviour.

A person vulnerable to suicidal behaviour requires easy access to a continuum of support in accordance with his or her needs at a particular time – from a sensitive response to a disclosure of distress to crisis management or appropriate referral, psychotherapeutic interventions or longer-term support. Transition points between services need to operate under widely understood protocols, ensuring the person is guided through a supportive network of assistance and that the work of statutory and non-statutory service providers enhance and complement each other. In some geographical areas there are clusters of services and supports for certain groups, while in other areas there are service gaps. What is more, the response to the person in distress may vary according to the type and location of the service. The foundations of a sustained approach to preventing and reducing suicide and (especially repeated) self-harm are consistently available services and integrated care pathways, across both statutory and non-statutory services (National Office for Suicide Prevention 2019).

In CfL Community Healthcare Dublin South East, Dublin South and Wicklow, there are 10 actions under goal four, led by HSE Mental Health and the Resource Officer for Suicide Prevention.



<b>National Goal 4:</b> To enhance accessibility, consistency and care pathways of services for people vulnerable to suicidal behaviour.		
<b>National Objective 4.1:</b> Improve psychosocial and psychiatric assessment and care pathways for people vulnerable to suicidal behaviour.		
<b>National Action:</b> 4.1.1 Provide a co-ordinated, uniform and quality assured 24/7 service and deliver uniform pathways of care from primary to secondary mental health services for all those in need of specialist mental health services. <b>Lead:</b> HSE MH <b>Key Partners:</b> HSE PC, Acute Hospitals, DECLG, Non-statutory partners		
<b>Local Action:</b> 4.1.1 (a) Role out a 7/7 service in Dublin South East. <b>Lead:</b> HSE MH <b>Partners:</b> HSE MH (ROSP), HSE PC, Hospital Groups, HSE Clinical Care Programme for Self-Harm		
<b>Purpose:</b> To provide enhanced supports at primary care level for people who are at risk of suicide.		
<b>Planned start date and duration:</b> Q1 2022, 6 months		
<b>Location:</b> Dublin South East		
<b>Inputs for 2022:</b> ROSP and MH staff time, funding		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  Develop a 7o7 service for Dublin South East.	<b>Q1 2022</b>	Scoping the needs of the service.
	<b>Q2 2022</b>	Begin operational phase.
	<b>Q3 2022</b>	Evaluate effectiveness of the service.
	<b>Q4 2022</b>	Review feasibility for roll out of a 7 over 7 service in rest of the CHO.
<b>Overarching Milestone 2023:</b> TBD		<b>Overarching Milestone 2024:</b> TBD
<b>Outputs by end of 2022:</b> Delivery of a 7/o/7 service in Dublin South East.		

<b>National Goal 4:</b> To enhance accessibility, consistency and care pathways of services for people vulnerable to suicidal behaviour.		
<b>National Objective 4.1:</b> Improve psychosocial and psychiatric assessment and care pathways for people vulnerable to suicidal behaviour.		
<b>National Action:</b> 4.1.1 Provide a co-ordinated, uniform and quality assured 24/7 service and deliver uniform pathways of care from primary to secondary mental health services for all those in need of specialist mental health services. <b>Lead:</b> HSE MH <b>Key Partners:</b> HSE PC, Acute Hospitals, DECLG, Non-statutory partners		
<b>Local Action:</b> 4.1.1 (b) Explore the feasibility of providing the SCAN service in Dublin South East, Dublin South and Wicklow. <b>Lead:</b> HSE MH <b>Partners:</b> HSE MH (ROSP), HSE PC, Hospital Groups, HSE Clinical Care Programme for Self-Harm		
<b>Purpose:</b> To provide enhanced supports at primary care level for people who are at risk of suicide.		
<b>Planned start date and duration:</b> Q1 2022, 6 months		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> ROSP and MH staff time		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  Develop a business plan for the service for HSE operations.	<b>Q1 2022</b>	Develop a business plan for the service in conjunction with HSE MH for HSE operations.
	<b>Q2 2022</b>	Develop a business plan for the service in conjunction with HSE MH for HSE operations.
	<b>Q3 2022</b>	
	<b>Q4 2022</b>	
<b>Overarching Milestone 2023:</b> TBD		<b>Overarching Milestone 2024:</b> TBD
<b>Outputs by end of 2022:</b> Clear plan regarding the feasibility of offering the SCAN service.		

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

**National Objective 4.1:** Improve psychosocial and psychiatric assessment and care pathways for people vulnerable to suicidal behaviour.

**National Action:** 4.1.2 Provide a co-ordinated uniform and quality assured service and deliver pathways of care for those with co-morbid addiction and mental health difficulties.

**Lead:** HSE MH

**Key Partners:** HSE PC, Acute Hospitals, Non-statutory partners

**Local Action:** 4.1.2 Explore the feasibility to develop Dublin South East, Dublin South and Wicklow Community Healthcare protocols for formalised shared care planning and case management between HSE Mental Health Services, HSE Addiction Services and community and voluntary substance misuse services, and support related cross-sectoral training.

**Lead:** HSE MH

**Partners:** HSE Addiction Services, HSE National Clinical Care Programme for Dual Diagnosis, DATFs, Connecting for Life Interagency Implementation Groups, Community and Voluntary Organisations

**Purpose:** To provide a more effective continuum of care for individuals presenting with dual diagnosis.

**Planned start date and duration:** Q1 2022, 18 - 24 months

**Location:** Dublin South East, Dublin South and Wicklow

**Inputs for 2022:** HSE MH & Partner time, funding, expertise.

#### **Milestones**

<b>Overarching Milestone 2022</b>  Explore structures needed to support formalised shared care between addiction services and mental health services.	<b>Q1 2022</b>	Working group established with clear ToR agreed and key partner representation.
	<b>Q2 2022</b>	Depending on confirmation whether CHO was selected as a pilot site for NCP for Dual Diagnosis, working group continue to meet to discuss the structures needed for interagency care planning and implementation in Dublin South East, Dublin South and Wicklow.
	<b>Q3 2022</b>	Depending on confirmation whether CHO was selected as a pilot site for NCP for Dual Diagnosis, working group continue to meet to discuss the structures needed for interagency care planning and implementation in Dublin South East, Dublin South and Wicklow.
	<b>Q4 2022</b>	Depending on confirmation whether CHO was selected as

		a pilot site for NCP for Dual Diagnosis, working group establish the structures needed for interagency care planning and implementation in Dublin South East, Dublin South and Wicklow.
<b>Overarching Milestone 2023:</b> TBD		<b>Overarching Milestone 2024:</b> TBD
<b>Outputs by end of 2022:</b> Depending on whether CHO is a pilot site for NCP for Dual Diagnosis, establish structures needed for shared care planning and case management between HSE Mental Health Services, HSE Addiction Services and community and voluntary substance misuse services.		

<b>National Goal 4:</b> To enhance accessibility, consistency and care pathways of services for people vulnerable to suicidal behaviour.		
<b>National Objective 4.1:</b> Improve psychosocial and psychiatric assessment and care pathways for people vulnerable to suicidal behaviour.		
<b>National Action:</b> 4.1.4 Deliver a uniform assessment approach across the health services, in accordance with existing and recognised guidelines for people who have self harmed or are at risk of suicide. <b>Lead:</b> HSE MH <b>Key Partners:</b> HSE Acute Hospitals		
<b>Local Action:</b> 4.1.4 Establish the provision of STORM training for all relevant HSE Mental Health staff. <b>Lead:</b> HSE MH (ROSP) <b>Partners:</b> HSE MH		
<b>Purpose:</b> Many people who are self-harming or at risk of suicide interact with our health services at many different levels and for a range of reasons, e.g. people in distress may present to a GP with physical symptoms – a common approach and a positive culture towards suicide prevention, organisation-wide, can help in identifying, assessing and responding in a supportive way to people who may be at risk.		
<b>Planned start date and duration:</b> Q2 2022, on-going		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> ROSP, MH staff, NOSP time, funding		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  Establish STORM training across Mental Health Services in Community Healthcare East.	<b>Q1 2022</b>	
	<b>Q2 2022</b>	Identification of key disciplines for STORM training in Mental Health Services.
	<b>Q3 2022</b>	Provide training.
	<b>Q4 2022</b>	Provide training.
<b>Overarching Milestone 2023:</b> TBD		<b>Overarching Milestone 2024:</b> TBD
<b>Outputs by end of 2022:</b> STORM training delivered to targeted disciplines in Dublin South East, Dublin South and Wicklow Mental Health Services.		

<b>National Goal 4:</b> To enhance accessibility, consistency and care pathways of services for people vulnerable to suicidal behaviour.		
<b>National Objective 4.1:</b> Improve psychosocial and psychiatric assessment and care pathways for people vulnerable to suicidal behaviour.		
<b>National Action:</b> 4.1.5 Deliver a comprehensive approach to managing self-harm presentations through the HSE Clinical Care Programme for the assessment and management of patients presenting with self-harm to emergency departments. <b>Lead:</b> HSE MH <b>Key Partners:</b> HSE Acute Hospitals		
<b>Local Action:</b> 4.1.5 Continue to support the National Clinical Programme for the Management of Self-Harm in all Emergency Departments in Dublin South East, Dublin South and Wicklow. <b>Lead:</b> HSE MH (ROSP) <b>Partners:</b> SHCCP, HSE MH, SBLO, Hospitals		
<b>Purpose:</b> To improve the assessment and management of all individuals who present to the ED following self-harm or with suicidal ideation. To reduce the rates of repeated self-harm. To improve access to appropriate interventions at times of personal crisis. To ensure rapid and timely safe linkage to appropriate follow up and next care. To optimise the experience of families and carers in trying to support those who self-harm.		
<b>Planned start date and duration:</b> Q1 2022, on-going		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> Staff, funding.		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  Continued implementation of the Self-Harm Clinical Care Programme.	<b>Q1 2022</b>	Continued implementation of the Self-Harm Clinical Care Programme.
	<b>Q2 2022</b>	Continued implementation of the Self-Harm Clinical Care Programme.
	<b>Q3 2022</b>	Continued implementation of the Self-Harm Clinical Care Programme.
	<b>Q4 2022</b>	Continued implementation of the Self-Harm Clinical Care Programme.
<b>Overarching Milestone 2023:</b> TBD		<b>Overarching Milestone 2024:</b> TBD
<b>Outputs by end of 2022:</b> Continued implementation of the Self-Harm Clinical Care Programme.		

<b>National Goal 4:</b> To enhance accessibility, consistency and care pathways of services for people vulnerable to suicidal behaviour.		
<b>National Objective 4.2:</b> Improve access to effective therapeutic interventions (e.g. counselling, DBT, CBT) for people vulnerable to suicide.		
<b>National Action:</b> 4.2.1 Deliver accessible, uniform, evidence based psychological interventions including counselling for mental health problems in both primary and secondary care levels. <b>Lead:</b> HSE MH <b>Key Partners:</b> NOSP, Non-statutory partners		
<b>Local Action:</b> 4.2.1 Implement HSE Model of Care for Talking Therapies in Community Healthcare East. <b>Lead:</b> Demonstration site assigned to Dublin South East (DSE) Project Lead: Principal Psychology Manager DSE <b>Partners:</b> Community Healthcare East Talking Therapies Steering Committee, DSE Community Mental Health Teams		
<b>Purpose:</b> To develop a talking therapies service for adult mental health service users in Dublin South East in accordance with the National Model of Care for Talking Therapies. This is a demonstration project intended to inform the process of delivery of psychotherapies in mental health services with a view to increase capacity for the Model of Care across the CHO.		
<b>Planned start date and duration:</b> Q1-Q4 2022		
<b>Location:</b> Dublin South East		
<b>Inputs for 2022:</b> Development of Talking Therapies Hub following recruitment process for Talking Therapies staff. Development of Community Healthcare East Talking Therapies Steering Committee. Development of local infrastructure to enable service development and implementation across Community Mental Health Teams, including appropriate accommodation, equipment etc. Development of policies and procedures as part of implementation phase in consultation with National Talking Therapies Working Group. Represent Community Healthcare East on National Talking Therapies Working Group.		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>	<b>Q1 2022</b>	Development of Talking Therapies Hub following recruitment process for Talking Therapies staff. Development of local infrastructure to enable service development including appropriate accommodation, equipment etc.
	<b>Q2 2022</b>	Reporting on development and implementation quarterly to Senior Management team and as necessary to local Talking Therapies Steering Committee.
	<b>Q3 2022</b>	Reporting on development and implementation quarterly to Senior Management team and as necessary to local Talking Therapies Steering Committee.

	<b>Q4 2022</b>	Reporting each quarter to Senior Management team. Develop Talking Therapies Service Plan for 2023.
<b>Overarching Milestone 2023:</b> TBD	<b>Overarching Milestone 2024:</b> TBD	
<b>Outputs by end of 2022:</b> Development of Community Healthcare East Talking Therapies service for adult mental health service users within Dublin South East as the designated Demonstration Site in accordance with the National Model of Care for Talking Therapies.		
Identify outcomes for 2022 based on service outputs, collated data and outcome measures demonstrating service capacity and efficacy in accordance with nationally agreed evaluation standards of measurement.		



<b>National Goal 4:</b> To enhance accessibility, consistency and care pathways of services for people vulnerable to suicidal behaviour.		
<b>National Objective 4.3:</b> Improve the uniformity, effectiveness and timeliness of support services to families and communities bereaved by suicide.		
<b>National Action:</b> 4.3.1 Deliver enhanced bereavement support services to families and communities that are known to mental health services and affected by suicide. <b>Lead:</b> HSE MH <b>Key Partners:</b> NOSP, Non-statutory partners		
<b>Local Action:</b> 4.3.1 (a) Continue to support the provision of the SBLO service. <b>Lead:</b> HSE MH (ROSP) <b>Partners:</b> Pieta, NOSP		
<b>Purpose:</b> To inform Community Mental Health Services of supports available for families following a death by suicide.		
<b>Planned start date and duration:</b> Q1 2022, on-going		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> To ensure timely, accessible, safe and high-quality services for people bereaved by suicide.		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  Analysis of service provision against identified need.	<b>Q1 2022</b>	
	<b>Q2 2022</b>	Liaise with NOSP to gather annual data and analyse same for yearly comparisons.
	<b>Q3 2022</b>	Explore if current level of service provision matches local need.
	<b>Q4 2022</b>	Analysis completed.
<b>Overarching Milestone 2023:</b> TBD		<b>Overarching Milestone 2024:</b> TBD
<b>Outputs by end of 2022:</b> Information gathered and analysed to ascertain level of need in Dublin South East, Dublin South and Wicklow.		

<b>National Goal 4:</b> To enhance accessibility, consistency and care pathways of services for people vulnerable to suicidal behaviour.		
<b>National Objective 4.3:</b> Improve the uniformity, effectiveness and timeliness of support services to families and communities bereaved by suicide.		
<b>National Action:</b> 4.3.1 Deliver enhanced bereavement support services to families and communities that are known to mental health services and affected by suicide. <b>Lead:</b> HSE MH <b>Key Partners:</b> NOSP, Non-statutory partners		
<b>Local Action:</b> 4.3.1 (b) Support the expansion of bereavement supports across Dublin South East, Dublin South and Wicklow Community Healthcare. <b>Lead:</b> HSE MH (ROSP) <b>Partners:</b> HUGG		
<b>Purpose:</b> To inform Community Mental Health Services of additional supports available for families following a death by suicide.		
<b>Planned start date and duration:</b> On-going		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> ROSP time, HUGG, SBLO, MH staff time		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  Improved range of bereavement supports for people who have been bereaved through suicide.	<b>Q1 2022</b>	Liaising with mental health services, Community and Voluntary sector and other stakeholders when appropriate, provide new and updated information on suicide bereavement supports.
	<b>Q2 2022</b>	Liaising with mental health services, Community and Voluntary sector and other stakeholders when appropriate, provide new and updated information on suicide bereavement supports.
	<b>Q3 2022</b>	Liaising with mental health services, Community and Voluntary sector and other stakeholders when appropriate, provide new and updated information on suicide bereavement supports.
	<b>Q4 2022</b>	Liaising with mental health services, Community and Voluntary sector and other stakeholders when appropriate, provide new and updated information on suicide bereavement supports.
<b>Overarching Milestone 2023:</b> TBD		<b>Overarching Milestone 2024:</b> TBD
<b>Outputs by end of 2022:</b> Improved/updated range of bereavement supports available and accessible for people who have been bereaved through suicide.		

<b>National Goal 4:</b> To enhance accessibility, consistency and care pathways of services for people vulnerable to suicidal behaviour.		
<b>National Objective 4.3:</b> Improve the uniformity, effectiveness and timeliness of support services to families and communities bereaved by suicide.		
<b>National Action:</b> 4.3.1 Deliver enhanced bereavement support services to families and communities that are known to mental health services and affected by suicide. <b>Lead:</b> HSE MH <b>Key Partners:</b> NOSP, Non-statutory partners		
<b>Local Action:</b> 4.3.1 (c) Support families bereaved by suicide of people known to the HSE MH services across Dublin South East, Dublin South and Wicklow Community Healthcare. <b>Lead:</b> HSE MH <b>Partners:</b> HSE MH (ROSP), SBLO, HUGG		
<b>Purpose:</b> To support and communicate with families of people known to the HSE MH services who have died by suicide within a safe, high quality framework.		
<b>Planned start date and duration:</b> Q1 2022, ongoing		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> ROSP and MH staff time, expertise		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  Promotion and increased awareness of SBLO and HUGG bereavement services.	<b>Q1 2022</b>	Link in with Teams across CHO to promote SBLO and HUGG services, and other CfL campaigns. Tailor campaigns for each team.
	<b>Q2 2022</b>	Link in with Teams across CHO to promote SBLO and HUGG services, and other CfL campaigns. Tailor campaigns for each team.
	<b>Q3 2022</b>	Link in with Teams across CHO to promote SBLO and HUGG services, and other CfL campaigns. Tailor campaigns for each team.
	<b>Q4 2022</b>	Evaluate learnings across CHO staff of these services. Assess opportunity for further collaboration in future years.
<b>Overarching Milestone 2023:</b> TBD		<b>Overarching Milestone 2024:</b> TBD
<b>Outputs by end of 2022:</b> Promotion of SBLO and HUGG services. Awareness campaigns for bereavement by suicide.		

<b>National Goal 4:</b> To enhance accessibility, consistency and care pathways of services for people vulnerable to suicidal behaviour.		
<b>National Objective 4.3:</b> Improve the uniformity, effectiveness and timeliness of support services to families and communities bereaved by suicide.		
<b>National Action:</b> 4.3.2 Commission and evaluate bereavement support services. <b>Lead:</b> NOSP <b>Key Partners:</b> HSE PC, CHOs		
<b>Local Action:</b> 4.3.2 Consider the recommendations from the national bereavement survey and promote bereavement support services in Dublin South East, Dublin South and Wicklow. <b>Lead:</b> HSE MH (ROSP) <b>Partners:</b> HSE MH, HSE PC, HSE Social Inclusion, Community & Voluntary organisations		
<b>Purpose:</b> To inform Community Mental Health Services of additional supports available for families following a death by suicide.		
<b>Planned start date and duration:</b> Q2 2022, 6 months		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> ROSP time and expertise		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  Review additional supports needed and update existing support/resources as a result of the findings of the study.	<b>Q1 2022</b>	
	<b>Q2 2022</b>	Assess the findings of the national bereavement survey and how they apply locally.
	<b>Q3 2022</b>	Update existing supports/resources and assess the feasibility of implementing/providing additional resources/supports.
	<b>Q4 2022</b>	
<b>Overarching Milestone 2023:</b> TBD		<b>Overarching Milestone 2024:</b> TBD
<b>Outputs by end of 2022:</b> Existing suite of supports updated and additionally needed supports identified and feasibility assessed.		

## GOAL FIVE

Goal five of *Connecting for Life*, Ireland's national strategy to reduce suicide 2015-2020, aims to ensure safe and high-quality services for people vulnerable to suicide.

Supporting people through a time of distress can be difficult work; therefore, agencies need to have good-practice guidelines, clear care protocols, appropriate training and supervision mechanisms. By ensuring the quality and standard of both statutory and funded non-statutory health and social care services and strong governance and accountability structures, service users and providers are protected and the professionalism and safety of the service response are enhanced. All services must promote an ambition for recovery, restoring the individual's independence built on self-worth and self-belief (National Office of Suicide Prevention 2019).

In CfL Community Healthcare Dublin South East, Dublin South and Wicklow, there are 6 actions under goal five, led by the Resource Officer for Suicide Prevention, HUGG, the ECD QPS Oversight Committee and the Serious Incident Management Team.

**National Goal 5:** To ensure safe and high quality services for people vulnerable to suicidal behaviour.

**National Objective 5.1:** Develop and implement national standards and guidelines for statutory and non-statutory organisations contributing to suicide prevention.

**National Action:** 5.1.1 Develop quality standards for suicide prevention services provided by statutory and non-statutory organisations, and implement the standards through an appropriate structure.

**Lead:** NOSP

**Key Partners:** Non-statutory partners

**Local Action:** 5.1.1(a) Continue to support the HUGG Quality Standards Group.

**Lead:** HUGG

**Partners:** HSE MH (ROSP)

**Purpose:** To ensure safe and high-quality services for people bereaved by suicide.

**Planned start date and duration:** on-going

**Location:** Community Healthcare East

**Inputs for 2022:** ROSP time, HUGG Quality Standards Group; HUGG CEO

#### **Milestones**

<b>Overarching Milestone 2022</b>  Quality Standards Framework for Peer Support Groups for people bereaved by suicide	<b>Q1 2022</b>	HUGG CEO writing quality standards framework for peer support groups for people bereaved by suicide.
	<b>Q2 2022</b>	Framework completed.
	<b>Q3 2022</b>	Framework implemented.
	<b>Q4 2022</b>	

**Outputs by end of 2022:** What are the products of these milestones?  
 Quality Standards Framework for Peer Support Groups for people bereaved by suicide.

**National Goal 5:** To ensure safe and high quality services for people vulnerable to suicidal behaviour.

**National Objective 5.1:** Develop and implement national standards and guidelines for statutory and non-statutory organisations contributing to suicide prevention.

**National Action:** 5.1.3 Provide support and resources for the implementation of the Department's curriculum and programmes in the promotion of well-being in the school community. Facilitate access to appropriate mental health and suicide prevention training for teachers e.g. through summer courses and the Education Centre network. In this regard, the support services will work collaboratively and liaise, as appropriate, with Government agencies.

**Lead:** DES

**Key Partners:** HSE H&W

**Local Action:** 5.1.3 Provide suicide and self-harm awareness and prevention training to teachers where requested.

**Lead:** HSE MH (ROSP)

**Partners:** DES, ETBs, Education Centres

**Purpose:** Evidence shows that teachers are key community gatekeepers. Training will provide school staff with information to respond to students in suicidal crisis.

**Planned start date and duration:** Q1 2022, on-going

**Location:** Dublin South East, Dublin South and Wicklow

**Inputs for 2022:** ROSP & Partner time, funding, expertise, services contracted from BreakingThrough.

#### **Milestones**

<b>Overarching Milestone 2022</b>  Number of teachers trained online or face-to-face in suicide prevention increased.	<b>Q1 2022</b>	Disseminate information on online/face-to-face suicide prevention training to local schools.
	<b>Q2 2022</b>	Disseminate information on online/face-to-face suicide prevention training to local schools.
	<b>Q3 2022</b>	Disseminate information on online/face-to-face suicide prevention training to local schools.
	<b>Q4 2022</b>	Disseminate information on online/face-to-face suicide prevention training to local schools.

**Overarching Milestone 2023:** TBD

**Overarching Milestone 2024:** TBD

**Outputs by end of 2022:** Increased number of teachers completing online/face-to-face suicide prevention training and capacity built within the school community.

<b>National Goal 5:</b> To ensure safe and high quality services for people vulnerable to suicidal behaviour.		
<b>National Objective 5.1:</b> Develop and implement national standards and guidelines for statutory and non-statutory organisations contributing to suicide prevention.		
<b>National Action:</b> 5.1.5 Disseminate information on effective suicide prevention responses through the development and promotion of repositories of evidence-based tools, resources, guidelines and protocols. <b>Lead:</b> NOSP, DJE <b>Key Partners:</b> -		
<b>Local Action:</b> 5.1.5 Disseminate information on effective suicide prevention responses through the promotion of evidence-based tools, resources, guidelines and protocols at a local level. <b>Lead:</b> HSE MH (ROSP) <b>Partners:</b> Connecting for Life Interagency Implementation Groups		
<b>Purpose:</b> Supporting people through a time of distress can be difficult work; therefore, agencies need to have good practice guidelines, clear care protocols, and appropriate training and supervision mechanisms. By ensuring the quality and standard of both statutory and funded non-statutory health and social care services and strong governance and accountability structures, service users and providers are protected and the professionalism and safety of the service response are enhanced.		
<b>Planned start date and duration:</b> Q1 2022, on-going		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> ROSP time, partner time, materials		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  Increased awareness of available, evidence-based information.	<b>Q1 2022</b>	Dissemination of Community Response Plan, Suicide Bereavement Handbook and other evidence based literature as appropriate.
	<b>Q2 2022</b>	Dissemination of Community Response Plan, Suicide Bereavement Handbook and other evidence based literature as appropriate.
	<b>Q3 2022</b>	Dissemination of Community Response Plan, Suicide Bereavement Handbook and other evidence based literature as appropriate.
	<b>Q4 2022</b>	Dissemination of Community Response Plan, Suicide Bereavement Handbook and other evidence based literature as appropriate.
<b>Overarching Milestone 2023:</b> TBD		<b>Overarching Milestone 2024:</b> TBD
<b>Outputs by end of 2022:</b> Improved knowledge around resources and supports for suicide prevention and those bereaved by suicide.		



**National Goal 5:** To ensure safe and high quality services for people vulnerable to suicidal behaviour.

**National Objective 5.2:** Improve the response to suicidal behaviour within health and social care services, with an initial focus on incidents within mental health services.

**National Action:** 5.2.3 Implement a system of service review, based on incidents of suicide and suicidal behaviour, within HSE mental health services (and those known to the mental health service) and develop responsive practice models.

**Lead:** HSE MH

**Key Partners:** -

**Local Action:** 5.2.3 (a) Implement the recommendations from reviews of incidents of suspected suicide and suicidal behaviour.

**Lead:** ECD QPS Oversight Committee, Serious Incident Management Team (SIMT)

**Partners:** -

**Purpose:** Conducting an incident review is critical, to establish what happened and what actions are required to reduce the risk of reoccurrence. This will support improvement both in the area where the incident occurred and enable shared learning in the wider system.

**Planned start date and duration:** Q1 2022, on-going

**Location:** Dublin South East, Dublin South and Wicklow

**Inputs for 2022:** Staff time, expertise

#### **Milestones**

#### **Overarching Milestone 2022**

Recommendations implemented.

**Q1  
2022**

Learning notices created and circulated throughout CHE for shared learning from incident reviews.

**Q2  
2022**

Incident management training to be offered to MDTs in DSE in Q2 to support them in reporting and reviewing incidents.

**Q3  
2022**

Incident management training to be offered to MDTs in Wicklow in Q3 to support them in reporting and reviewing incidents.

**Q4  
2022**

Recommendations made from incident reviews will be tracked and updated by the relevant assigned owners at the relevant QPS Oversight committee via the QIP Action Log.

**Overarching Milestone 2023:** TBD

**Overarching Milestone 2024:** TBD

#### **Outputs by end of 2022:**

- Increased capacity and capability of staff in the area of Incident Management
- Recommendations to be tracked and owners of actions to provide updates regularly via relevant QPS committee.
- Relevant members of QPS committees to provide an update of Action Plans / Recommendations.

**National Goal 5:** To ensure safe and high quality services for people vulnerable to suicidal behaviour.

**National Objective 5.2:** Improve the response to suicidal behaviour within health and social care services, with an initial focus on incidents within mental health services.

**National Action:** 5.2.3 Implement a system of service review, based on incidents of suicide and suicidal behaviour, within HSE mental health services (and those known to the mental health service) and develop responsive practice models.

**Lead:** HSE MH

**Key Partners:** -

**Local Action:** 5.2.3 (b) Implement a system of regular review of incidents and trends that may lead to service improvements in relation to suicide and suicidal behaviour.

**Lead:** Serious Incident Management Team (SIMT), ECD QPS Oversight Committee

**Partners:** -

**Purpose:** To develop and share learning of incidents and trends relevant to suicide risk across mental health services in order to highlight areas of potential improvement and prevent incidents of self-harm and suicide.

**Planned start date and duration:** on-going

**Location:** Dublin South East, Dublin South and Wicklow

**Inputs for 2022:** Staff time, expertise

#### **Milestones**

<b>Overarching Milestone 2022</b>  Incident reviews completed.	<b>Q1 2022</b>	Data quality assurance initiative to commence to review data hygiene and accuracy reported on NIRF forms from incidents to ensure accurate data is being captured.
	<b>Q2 2022</b>	Provide data analysis to relevant QPS committees on incidents.
	<b>Q3 2022</b>	Formulate MDT / service specific training based on data reported locally and nationally.
	<b>Q4 2022</b>	Support the development of quality improvement / service improvement initiatives from analysis of data to further enhance learning across CHE.
<b>Overarching Milestone 2023:</b> TBD		<b>Overarching Milestone 2024:</b> TBD

#### **Outputs by end of 2022:**

- Increased capacity and capability of staff in the area of Incident Management
- Improved accuracy of Mental Health data.
- Regular review of Mental Health Incident data reviewing trends, and emerging patterns.
- Recommendations tracked and updated to ensure actions are achievable and monitored monthly via local QPS committees.
- Assigned recommendation action owners to report to relevant QPS committees to provide an update of Action Plans / Recommendations thus providing assurances to the Senior Accountable Officer (SAO).

**National Goal 5:** To ensure safe and high quality services for people vulnerable to suicidal behaviour.

**National Objective 5.4:** Ensure best practice among health and social care practitioners through (a) the implementation of clinical guidelines on self-harm and (b) the delivery of accredited education programmes on suicide prevention within the National Training Plan.

**National Action:** 5.4.2 Deliver training in suicide prevention to staff in government departments and agencies likely to come into contact with people who are vulnerable to/at risk of suicidal behaviour.

**Lead:** DAFM, DOH/HSE DJE/IPS, DSP, DES, DCYA/TUSLA DOD, DECLG, Local Authorities

**Key Partners:** NOSP

**Local Action:** 5.4.2 Deliver suicide awareness and prevention training to frontline staff in targeted statutory agencies.

**Lead:** HSE MH (ROSP)

**Partners:** NOSP, Statutory agencies including An Garda Síochána, Tusla, Local Authorities

**Purpose:** Statutory agency frontline staff may encounter people who are more likely to be at risk of suicide and from time to time may come across incidents where people have harmed themselves.

**Planned start date and duration:** Q1 2022, on-going

**Location:** Dublin South East, Dublin South and Wicklow

**Inputs for 2022:** ROSP & Partner time, funding and expertise, contracted services by BreakingThrough.

#### **Milestones**

<b>Overarching Milestone 2022</b>  Continued training for statutory agencies.	<b>Q1 2022</b>	Continued training for statutory agencies
	<b>Q2 2022</b>	Continued training for statutory agencies
	<b>Q3 2022</b>	Continued training for statutory agencies
	<b>Q4 2022</b>	Continued training for statutory agencies

**Overarching Milestone 2023:** TBD

**Overarching Milestone 2024:** TBD

**Outputs by end of 2022:** In line with the overall projected total number of 68 courses and 1700 participants, we aim to increase the overall number of staff in targeted statutory services trained to support those who may be self-harming or experiencing suicidal ideation.

## GOAL SIX

Goal six of *Connecting for Life*, Ireland's national strategy to reduce suicide 2015-2020, aims to reduce and restrict access to means of suicidal behaviour.

Restricting, where practicable, access to means of suicidal behaviour has been consistently shown to be effective in reducing suicidal behaviour across countries and settings. Implementation of strategies to restrict means can occur at national level, via legislation and regulations, and at local level, for example by improving safety at locations where people frequently attempt or complete suicide. This also includes exploring additional interventions for the most frequently used methods of suicide within the Irish context (National Office for Suicide Prevention 2019).

In CfL Community Healthcare Dublin South East, Dublin South and Wicklow, there are 2 actions under goal six, one led by the HSE Mental Health and the second by the Local Authorities.

<b>National Goal 6: To reduce and restrict access to means of suicidal behaviour.</b>		
<b>National Objective 6.2: Reduce access to highly lethal methods used in suicidal behaviour.</b>		
<b>National Action: 6.2.1 Local Authorities will be requested to consider, develop and implement measures where practical to restrict access to identified locations and settings where people are at risk of engaging in suicidal behaviour, and assist generally in reducing risk factors in public locations.</b>		
<b>Lead: LA</b>		
<b>Key partners: DECLG, NOSP</b>		
<b>Local Action: 6.2.1</b> Work with relevant organisations to identify and map high risk locations, and introduce preventative measures and additional supports at these locations.		
<b>Lead:</b> Local Authorities		
<b>Partners:</b> HSE MH (ROSP), HSE NOSP, An Garda Síochána, Samaritans		
<b>Purpose:</b> Local Authorities have an important role to play as leaders in public health and as local planners. Evidence shows that a number of effective steps can be taken to prevent public places being used for suicide and to increase the chances of last-minute intervention.		
<b>Planned start date and duration:</b> Q1 2022		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> Pulse data, ROSP & Partner time, funding, materials, signage		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  Preventative signage with relevant support details at identified locations.	<b>Q1 2022</b>	Establish working group with key partners in LAs, Samaritans & Gardai to utilise Garda pulse data to identify locations of suspected suicides across Dublin South East, Dublin South and Wicklow.
	<b>Q2 2022</b>	Promote the use of national signage developed by NOSP in partnership with Samaritans at identified areas in conjunction with the LAs.
	<b>Q3 2022</b>	Promote the use of national signage developed by NOSP in partnership with Samaritans at identified areas in conjunction with the LAs.
	<b>Q4 2022</b>	Promote the use of national signage developed by NOSP in partnership with Samaritans at identified areas in conjunction with the LAs.
<b>Outputs by end of 2022:</b> Increased awareness of relevant supports at high risk locations.		

<b>National Goal 6: To reduce and restrict access to means of suicidal behaviour.</b>		
<b>National Objective 6.2: Reduce access to highly lethal methods used in suicidal behaviour.</b>		
<b>National Action: 6.2.2 Implement a strategy to improve environmental safety within the HSE mental health services (e.g. ligature audits).</b> <b>Lead:</b> HSE MH <b>Key partners:</b> HSE Estates		
<b>Local action:</b> 6.2.2 Monitor and improve the environmental safety within HSE Mental Health Services, informed by local ligature audits. <b>Lead:</b> HSE MH <b>Partners:</b> HSE Estates, QSUS (H&S Officer and Quality and Risk Officer)		
<b>Purpose:</b> To develop and share learning on ligature audits relevant to suicide risk across mental health services in order to highlight areas of potential improvement and prevent access to means of self-harm and suicide.		
<b>Planned start date and duration:</b> ongoing		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> HSE MH & HSE Estates time		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  Complete ligature audits in the three approved centres.	<b>Q1 2022</b>	Conduct annual ligature audits to improve environmental safety within HSE Mental Health services and implement any recommendations.
	<b>Q2 2022</b>	Implement the recommendations from the audit.
	<b>Q3 2022</b>	Implement the recommendations from the audit.
	<b>Q4 2022</b>	Implement the recommendations from the audit.
<b>Overarching Milestone 2023:</b> Ligature audits complete.	<b>Overarching Milestone 2024:</b> Ligature audits complete.	
<b>Outputs by end of 2022:</b> Reduce the risk of suicide within HSE Mental Health services.		

## GOAL SEVEN

Goal seven of *Connecting for Life*, Ireland's national strategy to reduce suicide, aims to improve surveillance, evaluation and high quality research relating to suicidal behaviour.

Responsive, cost-efficient and effective suicide prevention services depend on the widespread availability of robust data – data on the types of services and interventions that are effective in reducing or preventing suicidal behaviour, on the groups most vulnerable to suicidal behaviour; on trends in suicidal behaviour in the country; and on key risk and protective factors. Improving the quality of the evidence base for suicidal behaviour and suicide prevention in the Irish context, having real-time and better integrated data surveillance systems for suicidal behaviour as well as accelerating the transfer of research findings into practice are fundamental to the success of *Connecting for Life* and other suicide prevention policies and practices (National Office for Suicide Prevention 2019).

In CfL Community Healthcare Dublin South East, Dublin South and Wicklow, there are 3 actions under goal seven, all led by the HSE Resource Officer for Suicide Prevention.

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

**National Objective 7.1:** Evaluate the effectiveness and cost-effectiveness of Connecting for Life.

**National Action:** 7.1.1 Conduct proportionate evaluations of all major activities conducted under the aegis of Connecting for Life; disseminate findings and share lessons learned with programme practitioners and partners.

**Lead:** NOSP

**Key partners:** -

**Local Action:** 7.1.1 Utilise the local CfL project management tools to monitor and present implementation progress and carry out evaluations as required.

**Lead:** HSE MH (ROSP)

**Partners:** HSE PMO, Connecting for Life Local Interagency Implementation Groups, Community and Voluntary Organisations

**Purpose:** To review and evaluate the implementation of the Dublin South East, Dublin South and Wicklow Connecting for Life plan.

**Planned start date and duration:** Q1 2022, 6 months

**Location:** Dublin South East, Dublin South and Wicklow

**Inputs for 2022:** ROSP & partner time.

#### **Milestones**

<b>Overarching Milestone 2022</b>  Monitoring and reporting of CHO CfL Action Plan	<b>Q1 2022</b>	Develop Project Management monitoring and reporting mechanism for CHO CfL Action Plan.
	<b>Q2 2022</b>	Utilise reporting tools to demonstrate effectiveness of CHO CfL Action Plan.
	<b>Q3 2022</b>	Utilise reporting tools to demonstrate effectiveness of CHO CfL Action Plan.
	<b>Q4 2022</b>	Utilise reporting tools to demonstrate effectiveness of CHO CfL Action Plan.

**Overarching Milestone 2023:** TBD

**Overarching Milestone 2024:** TBD

Outputs by end of 2022: Review of CfL implementation completed and key learning taken into consideration for continued implementation.



<b>National Goal 7:</b> To improve surveillance, evaluation and high quality research relating to suicidal behaviour.		
<b>National Objective 7.2:</b> Improve access to timely and high quality data on suicide and self-harm.		
<b>National Action:</b> 7.2.2. Collate and report on incidences of suicide through current and expanded health surveillance systems over the life of Connecting for Life. <b>Lead:</b> HSE MH <b>Key partners:</b> -		
<b>Local Action:</b> 7.2.2 Implement a real-time suicide surveillance system in Dublin South East, Dublin South and Wicklow in collaboration with the Coroners and explore the possibility to compare data on real-time cases of suspected suicide with data obtained via the PULSE system provided by the NOSP. <b>Lead:</b> HSE MH (ROSP) <b>Partners:</b> NOSP, SBLO, NSRF		
<b>Purpose:</b> To ensure that there is accurate, real time suicide data in Dublin South East, Dublin South and Wicklow by implementing a new real time surveillance system.		
<b>Planned start date and duration:</b> The start time will depend on agreement with NOSP.		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> ROSP and Partner time and expertise, funding		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  Implement a new real time surveillance system for accurate, real time suicide data in Dublin South East, Dublin South and Wicklow, in accordance with the template of the Observatory in Cork and Kerry.	<b>Q1 2022</b>	Obtain approval from NOSP and establish Advisory Panel.
	<b>Q2 2022</b>	Obtain ethical approval and finalise data sharing agreements with Coroners. Advisory panel meeting 1.
	<b>Q3 2022</b>	Commence data collection. Advisory panel meeting 2.
	<b>Q4 2022</b>	Review data collection. Advisory panel meeting 3.
<b>Overarching Milestone 2023:</b>		<b>Overarching Milestone 2024:</b>
<b>Outputs by end of 2022:</b>		

<b>National Goal 7:</b> To improve surveillance, evaluation and high quality research relating to suicidal behaviour.		
<b>National Objective 7.2:</b> Improve access to timely and high quality data on suicide and self-harm.		
<b>National Action:</b> 7.2.3 Collect, analyse and disseminate high quality data on suicide and self-harm and ensure adequate access to, and understanding of the data among those working in suicide prevention across all sectors. <b>Lead:</b> NOSP <b>Key partners:</b> DOH, NSRF, DJE/IPS, DCYA/TUSLA		
<b>Local Action:</b> 7.2.3 Link with the NSRF to extract and analyse data relating to self-harm in Dublin South East, Dublin South and Wicklow Community Healthcare and, in particular, to identify trends in suicide and self-harm across the area. Disseminate as appropriate to develop on-going responses in relation to identified need/trends. Self-harm captures all cases of self-harm including episodes with and without high levels of suicidal intent. <b>Lead:</b> HSE MH (ROSP) <b>Partners:</b> NSRF		
<b>Purpose:</b> We are seeking to ensure that there are accurate suicide and self-harm data in Dublin South East, Dublin South and Wicklow. This will help determine appropriate prevention, intervention and postvention activities.		
<b>Planned start date and duration:</b> Q1 2022, on-going		
<b>Location:</b> Dublin South East, Dublin South and Wicklow		
<b>Inputs for 2022:</b> ROSP time		
<b>Milestones</b>		
<b>Overarching Milestone 2022</b>  Utilise data to determine appropriate prevention, intervention and postvention activities.	<b>Q1 2022</b>	
	<b>Q2 2022</b>	Obtain and evaluate data from NSRF and disseminate as appropriate.
	<b>Q3 2022</b>	
	<b>Q4 2022</b>	Obtain and evaluate data from NSRF and disseminate as appropriate.
<b>Overarching Milestone 2023:</b> TBD		<b>Overarching Milestone 2024:</b> TBD
<b>Outputs by end of 2022:</b> Relevant agencies are provided with up to date data to support planning for appropriate activities and service development.		

## Section Eight: Appendices

### List of Appendices

1. Glossary of Terms
2. Abbreviations
3. Other relevant national plans and strategies.
4. National Connecting for Life Actions
5. List of References

## Appendix 1. Glossary of Terms

**Borderline Personality Disorder (BPD):** BPD is best understood as a disorder of mood and interpersonal function (how a person interacts with others).

**Families/friends/communities bereaved by suicide:** People who have been impacted, directly or indirectly, when someone has died by suicide.

**HSE mental health services:** The HSE provides a wide range of community and hospital based mental health services in Ireland. HSE mental health services are delivered through specialist mental health teams from childhood to old age.

**Incidence of self-harm/self-harm rates:** There is a national registry for self-harm presentations to Emergency Departments in General Hospitals. This is managed by the National Suicide Research Foundation.

**Mental health and wellbeing:** Mental health is defined as a state of wellbeing in which the individual realises his or her own potential, can cope with the normal stresses of life, can work productively, and is able to make a contribution to his or her community.

**Mental health problems:** Refers to a wide range of mental health conditions that affect mental health and impact on mood, thinking and behaviour.

**Mental health promotion:** Mental health promotion is any action which aims to promote positive mental health among the population and those who are at risk of experiencing mental health problems.

**Non-statutory/non-governmental organisations (NGO's) and community organisations:** Community, voluntary and non-statutory services, organisations and groups.

**People at acute risk of suicide/self-harm:** People who are at high risk of suicide or self-harm. This may include frequent, intense and enduring thoughts of suicide or self-harm, specific plans or high distress.

**People/groups that are vulnerable to self-harm:** People/groups that are more susceptible than other people/groups to the possibility of self-harm.

**People/groups vulnerable to suicide:** People/groups that experience more of the risk factors for suicide.

**Postvention:** Postvention or responding to suicide refers to the response, or intervention, to support relatives, friends and communities after someone dies by suicide.

**Reducing suicide/reducing self-harm:** Reducing suicide, or self-harm means lowering the number of deaths by suicide or the number of self-harm incidents.

**Resilience:** Resilience is the ability to cope with adverse or challenging circumstances.

**Risk and protective factors:** In general, risk factors increase the likelihood that suicidal behaviour will develop, whereas protective factors reduce this likelihood.

**Self-harm:** Self-harm describes the various methods by which people harm themselves. Varying degrees of suicidal intent can be present and sometimes there may not be any suicidal intent, although an increased risk of further suicidal behaviour is associated with all self-harm.

**Service user:** Person who uses the mental health services.

**Social exclusion:** Social exclusion refers to being unable to participate in society because of a lack of access to resources that are normally available to the general population. It can refer to both individuals, and communities in a broader framework, with linked problems such as low incomes, poor housing, high-crime environments and family problems.

**Social Prescribing:** Social Prescribing refers to the process of accessing non-medical interventions; it is a mechanism for linking people with non-medical sources of support within the community to improve physical, emotional and mental wellbeing.

**Stigma reduction:** Stigma reduction refers to the process of minimising negative beliefs associated with different types of mental health problems. It brings about a positive change in public attitudes and behaviour towards people with mental health problems.

**Suicidal behaviour:** Suicidal behaviour refers to a range of behaviours that include planning for suicide, attempting suicide and suicide itself.

**Suicide attempt/attempted suicide/someone who has attempted suicide:** A suicide attempt means any non-fatal suicidal behaviour, when someone has the intent to take their own life.

**Suicide cluster:** A suicide cluster refers to a number of unexpected suicide or attempted suicides that occur closer together in space and time than one would normally expect in any given community.

**Suicide prevention/Help prevent suicide:** Suicide prevention aims to diminish the risk and rates of suicide. It may not be possible to eliminate entirely the risk of suicide but it is possible to reduce this risk.

**Suicide/die by suicide:** Suicide is death resulting from an intentional, self-inflicted act.

**Targeted approach:** Embedded in a whole population approach and focuses on 1) identifying the smaller number of people who are vulnerable to suicide/self-harm and 2) putting in place appropriate interventions.

**Whole-population approach:** A whole-population approach focuses on suicide prevention for all members of society. It aims to reduce suicidal behaviour by addressing the risk and protective factors at individual, family, community and societal levels.

## Appendix 2. Abbreviations

AMHS: Adult Mental Health Services  
ASIST: Applied Suicide Intervention Skills Training  
CAMHS: Child and Adolescent Mental Health Services  
CAMS: Collaborative Assessment and Management of Suicidality  
CBT: Cognitive Behavioural Therapy  
CYPSC: Children and Young Person's Services Committee  
DATFs: Drug and Alcohol Task Force  
DBT: Dialectical Behavioural Therapy  
DECLG: Department of the Environment, Community and Local Government  
DES: Department of Education and Skills  
DJE: Department of Justice and Equality  
DOH HI: Department of Health Healthy Ireland  
DSP: Department of Social Protection  
ED: Emergency Department  
ETB: Education and Training Board  
FRC: Family resource Centre  
GAA: Gaelic Athletic Association  
GP: General Practitioners  
HRB: Health Research Board  
HSE: Health Service Executive  
HSE H&W: Health Service Executive Health and Wellbeing  
HSE MH: Health Service Executive Mental Health  
HSE MH (ROSP): Health Service Executive Mental Health Resource Officer for Suicide Prevention  
HSE NOSP: Health Service Executive, National Office for Suicide Prevention  
HSE PC: Health Service Executive Primary Care  
HSE PMO: Health Service Executive Project Management Office  
HUGG: Healing Untold Grief Groups  
ICGP: Irish College of General Practitioners  
LA: Local Authority  
LCDC: Local Community Development Company  
LECP: Local Economic and Community Plan

LGBTQI+: Lesbian, Gay, Bisexual, Transgender, Questioning, Intersex

NEPS: National Educational Psychological Service

NGO: Non-Governmental Organisation

NSRF: National Suicide Research Foundation

SBLO: Suicide Bereavement Liaison Officer

SICAP: Social Inclusion and Community Activation Programme

WRAP: Wellness Recovery Action Plan Programme



### Appendix 3. Other relevant national plans and strategies

- Connecting for Life Implementation Plan 2020 – 2022  
<https://www.hse.ie/eng/services/list/4/mental-health-services/connecting-for-life/publications/cfl-implementation-plan-dec-2020.pdf>
- Reducing Harm, Supporting Recovery – a health led response to drug and alcohol use in Ireland 2017-2025 (28)  
<https://www.drugsandalcohol.ie/27603/1/Reducing-Harm-Supporting-Recovery-2017-2025.pdf>
- The National Traveller and Roma Inclusion Strategy 2017-2021  
<https://www.gov.ie/en/publication/c83a7d-national-traveller-and-roma-inclusion-strategy-2017-2021/>
- National Traveller Health Action Plan (forthcoming)
- NOSP Suicide Prevention Education and Training Plan  
<https://www.hse.ie/eng/services/list/4/mental-health-services/connecting-for-life/publications/education-and-training-plan-v3.pdf>

## Appendix 4. National Connecting for Life Actions not included in Local Action Plan

### GOAL ONE

<b>National Goal 1: To improve the nation's understanding of, and attitudes to, suicidal behaviour, mental health and wellbeing</b>
<b>National Objective 1.1: Improve population-wide understanding of suicidal behaviour, mental health and wellbeing, and associated protective and risk factors</b>
<p><b>1.1.1</b> Measure how people currently understand suicidal behaviour, mental health and wellbeing and set targets for improved understanding.  <b>Lead:</b> NOSP  <b>Key Partners:</b> DOH</p>
<p><b>1.1.5</b> Promoting Physical activity as a protective factor for mental health through the National Physical Activity Plan.  <b>Lead:</b> DOH HI, DTTAS  <b>Partners:</b> Non-statutory partners</p>
<p><b>1.4.1</b> Engage with online platforms to encourage best practice in reporting around suicidal behaviour, so as to encourage a safer online environment in this area.  <b>Lead:</b> DCENR  <b>Key Partners:</b> NOSP, Non-statutory partners</p>
<p><b>1.4.2</b> Broadcasting Authority of Ireland will apply and monitor its Code of Programme Standards including Principle 3 - Protection from Harm, which references self-harm and suicide, so as to ensure responsible coverage around these issues in the broadcast media.  <b>Lead:</b> DCENR  <b>Key Partners:</b> Broadcasting Authority of Ireland</p>
<p><b>1.4.3</b> The Press Council will amend its code of practice to include a principle on responsible reporting of suicide.  <b>Lead:</b> Press Council of Ireland  <b>Key Partners:</b> -</p>

## GOAL TWO

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

**National Objective 2.1:** Improve the continuation of community level responses to suicide through planned multi-agency approaches.

**2.3.1** Develop a Training Plan for community based training (as part of the National Training Plan) building on the Review of Training completed by NOSP in 2014.

**Lead:** NOSP

**Key Partners:** Non-statutory partners

## GOAL THREE

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

**National Objective 3.1: Improve the implementation of effective approaches to reducing suicidal behaviour among priority groups.**

**3.1.1** Integrate suicide prevention into the development of relevant national policies, plans and programmes for people who are at an increased risk of suicide or self-harm. See Appendix 8 for exact wording on this action by each government department and agency.

**Lead:** DAFM, DOH, DJE, DSP, DCYA/TUSLA, DECLG, DOD, DTTAS

**Key Partners:** IPS, Garda Síochána, NEWS, ISC, NOSP

**3.1.2** Develop and implement a range of agency and inter-agency operational protocols (including protocols for sharing information and protocols in respect of young people) to assist organisations to work collaboratively in relation to suicide prevention and the management of critical incidents.

**Lead:** NOSP, HSE: Acute Hospitals, PC,MH, IPS/ Garda Síochána, Non-statutory partners

**Key Partners:** DAFM, DOH, DJE, DSP, DES, DCYA/TUSLA, DOD

**3.1.4** Evaluate as appropriate targeted initiatives and or services for priority groups.

**Lead:** NOSP

**Key Partners:** -

**3.3.1** Support the implementation of the relevant guidelines for mental health promotion and suicide prevention across primary and post primary schools, and the development of guidelines for Centres of Education.

**Lead:** DES

**Key Partners:** TUSLA, HSE H&W, NOSP

**3.3.2** Guide and encourage the implementation of the relevant policies and plans in schools, including support for development of Student Support Teams and for the management of critical incidents.

**Lead:** DES

**Key Partners:** TUSLA, HSE H&W, NOSP

**3.3.4** Implement the National Anti-Bullying Action Plan including online and homophobic bullying.

**Lead:** DES

**Key Partners:** HSE H&W, NOSP

**3.3.5** Support all schools to implement a new Wellbeing programme, which will encompass SPHE, CSPE and PE, in Junior Cycle; and encourage schools to deliver an SPHE programme (including RSE and mental health awareness) at Senior Cycle.

**Lead:** DES

**Key Partners:** HSE H&W, DCYA/TUSLA, DOH HI

**3.3.7** Deliver early intervention and psychological support service for young people at secondary care level; including CAMHS.

**Lead:** HSE MH

**Key Partners:** -

## GOAL FOUR

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

**National Objective 4.1:** Improve psychosocial and psychiatric assessment and care pathways for people vulnerable to suicidal behaviour.

**4.1.3** Ensure that those in the criminal justice system have continued access to appropriate information and treatment in prisons and while under Probation services in the community. The Irish prison service and the HSE National Forensic Mental Health Service will complete an agreed memorandum of understanding on improved links through the NFMHS Prison Inreach Service and the Probation service will engage with the HSE on maintaining and developing access to community psychiatric service.

**Lead:** DJE

**Key Partners:** IPS, Probation Service, HSE MH

## GOAL FIVE

<b>National Goal 5: To ensure safe and high quality services for people vulnerable to suicidal behaviour.</b>
<b>National Objective 5.1: Develop and implement national standards and guidelines for statutory and non-statutory organisations contributing to suicide prevention.</b>
<p><b>5.1.2</b> Continue to promote a whole-school approach to student guidance/ counselling within each post-primary school.</p> <p><b>Lead:</b> DES</p> <p><b>Key Partners:</b> TUSLA, HSE H&amp;W, NOSP</p>
<p><b>5.1.4</b> Conduct a statutory consultation process and (in the context of wider policy development on the regulation of health &amp; social care professionals) decide on the feasibility of designating by regulation the profession(s) of counsellor and psychotherapist.</p> <p><b>Lead:</b> DOH</p> <p><b>Key Partners:</b> -</p>
<p><b>5.2.1</b> Develop and deliver a uniform procedure to respond to suicidal behaviour across mental health services.</p> <p><b>Lead:</b> HSE MH</p> <p><b>Key Partners:</b> HSE PC, Acute Hospitals</p>
<p><b>5.2.2</b> Strengthen the data systems to report and learn from investigations and reviews on child protection and deaths of children in care in order to review the profile of need and requisite service response to vulnerable young people who are in the care of the state or known to TUSLA.</p> <p><b>Lead:</b> DCYA/TUSLA</p> <p><b>Key Partners:</b> -</p>
<p><b>5.3.1</b> Through the Death in Custody/Suicide Prevention Group in each prison, identify lessons learned, oversee the implementation of the corrective action plan, and carry out periodic audits.</p> <p><b>Lead:</b> DJE</p> <p><b>Key Partners:</b> Chaired by senior Governor in each prison</p>
<p><b>5.3.2</b> Ensure compliance with the relevant policies through regular audit and implementation of audit recommendations.</p> <p><b>Lead:</b> DJE</p> <p><b>Key Partners:</b> IPS</p>
<p><b>5.3.3</b> Implement the IPS Prisoner Release Policy, to ensure care, treatment and information is provided, including identifying the appropriate mental health services in each area for those leaving prison. This will include appropriate links with the community mental health services.</p> <p><b>Lead:</b> DJE</p> <p><b>Key Partners:</b> HSE MH, HSE PC</p>
<p><b>5.4.3</b> Support professional regulatory bodies to develop and deliver accredited competency based education on suicide prevention to health professionals.</p> <p><b>Lead:</b> DOH</p> <p><b>Key Partners:</b> A range of professional bodies</p>
<p><b>5.4.4</b> Recommend the incorporation of suicide prevention training as part of undergraduate curriculum of the relevant professions.</p>

**Lead:** Academic Oversight Structures

**Key Partners:** -

**5.4.5** Support the National Clinical Effectiveness Agenda and implement national clinical guidelines in line with NCEC requirements.

**Lead:** DOH

**Key Partners:** HSE MH, NOSP

## GOAL SIX

<b>National Goal 6: To reduce and restrict access to means of suicidal behaviour.</b>
<b>National Objective 6.1 Reduce access to frequently used drugs in intentional drug overdose.</b>
<b>6.1.1</b> Work with professional groups to reduce the inappropriate prescribing of medicines commonly used in intentional overdose, including benzodiazepines and SSRIs. <b>Lead:</b> DOH <b>Key partners:</b> -
<b>6.1.2</b> Continue improvements in adherence to the legislation limiting access to paracetamol through raising awareness amongst retailers and the public and the use of point of sale systems. <b>Lead:</b> DOH <b>Key partners:</b> -
<b>6.2.3</b> Ensure that access to ligature points in cells is minimised and that this issue is given ongoing attention, particularly in the planning of all new prisons. <b>Lead:</b> DJE <b>Key partners:</b> IPS



## GOAL SEVEN

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

**National Objective 7.1 Evaluate the effectiveness and cost-effectiveness of Connecting for Life.**

**7.2.1** Develop capacity for observation and information gathering on those at risk or vulnerable to suicide and self-harm, this includes children/young people in the child welfare/protection sector and places of detention, including prisons.

**Lead:** DJE, DCYA/TUSLA

**Key partners:** IPS, Coroners' Offices (in context of the recording of deaths), CSO, NSRF

**7.3.1** The Justice and Health sectors will engage with the Coroners, Garda Síochána, NOSP, CSO and research bodies in relation to deaths in custody, and recording of deaths by suicide and open verdicts, to further refine the basis of suicide statistics.

**Lead:** DJE

**Key partners:** DOH, NOSP, Coroners' Offices, Garda Síochána, CSO, Research Bodies

**7.4.1** Support research on risk and protective factors for suicidal behaviour in groups with an increased risk (or potential increased risk) of suicide behaviour (see Strategic Goal 3)

**Lead:** NOSP

**Key partners:** DOH

**7.4.2** Support the co-ordination and streamlining of research completed by third-level institutions.

**Lead:** HEA

**Key partners:** NOSP

**7.4.3** Develop working partnerships with centres of expertise to support evaluation and research, knowledge transfer and implementation support between researchers, policy makers and service providers.

**Lead:** NOSP

**Key partners:** -

**7.4.4.** Evaluate innovative approaches to suicide prevention including online service provision and targeted approaches for appropriate priority groups.

**Lead:** NOSP

**Key partners:** Third Level Institutions

## Appendix 5. List of References

Central Statistics Office (a). *Data*. <https://data.cso.ie/>. Accessed 03 November 2021.

Central Statistics Office (b). *Survey on Income and Living Conditions (SILC)*. <https://www.cso.ie/en/statistics/socialconditions/surveyonincomeandlivingconditionssilc/>. Accessed 03 November 2021.

Department of Health (2013). *Healthy Ireland: A Framework for Improved Health and Wellbeing 2013 – 2025*. <https://www.hse.ie/eng/services/publications/corporate/hienglish.pdf>. Accessed 03 November 2021.

Department of Health (2020). *Sharing the Vision: A Mental Health Policy for Everyone*. <https://www.gov.ie/en/publication/2e46f-sharing-the-vision-a-mental-health-policy-for-everyone/#>. Accessed 03 November 2021.

Department of Health (2021). *Sláintecare Implementation Strategy and Action Plan 2021-2023*. <https://www.gov.ie/en/publication/6996b-slaintecare-implementation-strategy-and-action-plan-2021-2023/>. Accessed 03 November 2021.

Department of Housing, Local Government and Heritage (2022). *Homeless Report - November 2021*. <https://www.gov.ie/en/publication/b08cb-homeless-report-november-2021/>. Accessed 31 January 2022.

Department of Justice and Equality (2017). *National Traveller and Roma Inclusion Strategy 2017 – 2021*. <https://www.gov.ie/en/publication/c83a7d-national-traveller-and-roma-inclusion-strategy-2017-2021/>. Accessed 31 January 2022.

Health Service Executive (2020). *HSE Psychosocial Response to the Covid-19 Pandemic*. <https://www.hse.ie/eng/services/publications/mentalhealth/hse-psychosocial-response-to-the-covid19-pandemic-2020.pdf>. Accessed 03 November 2021.

HSE Atlas Finder. *CHO 6: Dublin South East, Dun Laoghaire, Wicklow, CSO Census 2016*. <https://finder.healthatlasireland.ie/>. Accessed 03 November 2021.

Hyland, P., Rochford, S., Munnelly, A., Dodd, P., Fox, R., Vallières, F., McBride, O., Shevlin, M., Bentall, R. P., Butter, S., Karatzias, T., Murphy, J. (2022). *Predicting risk along the suicidality continuum: A longitudinal, nationally representative study of the Irish population during the COVID-19 pandemic*. *Suicide Life Threat Behav.*; 52(1):83-98.

National Office for Suicide Prevention (2019). *Connecting for Life. Ireland's National Strategy to Reduce Suicide 2015-2020. Interim Strategy Review*. <https://www.hse.ie/eng/services/list/4/mental-health-services/connecting-for-life/publications/cfl-interim-strategy-review.pdf>. Accessed 03 November 2021.

National Office for Suicide Prevention (2021). Developing a Community Response to Suicide. <https://www.hse.ie/eng/services/list/4/mental-health-services/connecting-for-life/publications/community-response-to-suicide.pdf>. Accessed 03 November 2021.

National Office for Suicide Prevention (2022). National Education and Training Plan 2021-2022. <https://www.hse.ie/eng/services/list/4/mental-health-services/connecting-for-life/publications/education-and-training-plan-v4.pdf>. Accessed 04 April 2022.

National Suicide Research Foundation (2022). *Reports*. <https://www.nsrp.ie/findings/reports/>. Accessed 03 November 2021.

Spikola, E., McBride, O., Vallières, F., Butter, S., Hyland, P. (2021). *Tracking the Irish adult population during the first year of the COVID-19 pandemic: A methodological report of the COVID-19 psychological research consortium (C19PRC) study in Ireland*. Acta Psychologica; 220.

World Health Organisation (2014). *Preventing Suicide. A global imperative*. [https://www.who.int/mental\\_health/suicide-prevention/exe\\_summary\\_english.pdf](https://www.who.int/mental_health/suicide-prevention/exe_summary_english.pdf). Accessed 03 November 2021.