

# Connecting for Life Dublin North City and County

Suicide Prevention Action and Implementation Plan 2021 - 2024









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 GP out of hours service.

**Dublin North City and County Emergency Departments:** 

- Beaumont Hospital
- Connolly Hospital
- The Mater Misericordiae University Hospital
- Temple Street Children's Hospital

Contact the Emergency Services on 999 or 112.

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

 D-DOC (Dublin North City and Council): call 0818 22 44 76 or visit www.northdoc.ie.

#### Mental Health Supports:

- Call the Samaritans 24 hour Freephone listening service on 116 123.
- Call Pieta House on 1800 247 247 (24hr Support) or text 'HELP' to 51444 (standard text rates apply)
- Do you need someone to talk to right now? 24/7 anonymous text support: Text HELLO to 50808
- Visit <u>www.yourmentalhealth.ie</u> for information on mental health supports and services.



Connecting for Life Dublin North City and County - Implementation Plan 2022 to 2024







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#### Foreword



### Mellany McLoone, Chief Officer, HSE Community Healthcare Organisation Dublin North City and County

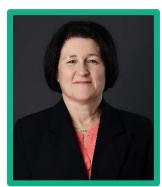
In communities across Dublin North City & County, the farreaching effects of suicide on families, friends, classmates and workplaces are severe and devastating. Suicide is one of the most complex and difficult to understand of human

behaviours. *Connecting for Life*, Ireland's National Strategy to Reduce Suicide 2015 – 2020 set out a vision of an Ireland where fewer lives are lost through suicide, and where communities and individuals are empowered to improve their mental health and wellbeing. In November 2020, *Connecting for Life*, Ireland's National Strategy to Reduce Suicide, was extended to 2024.

Connecting for Life involves preventative and awareness-raising work with a "whole of society" approach, including supportive work with local communities and targeted approaches for priority groups. By bringing together all aspects of our health and social care system alongside our education, statutory and community partners, we are working together to implement meaningful, evidence informed improvements to the approaches and services that we offer to people at risk of suicide and self-harm. Connected services mean that more people can get the right help, at the right time and in the right place.

*Connecting for Life* Dublin North City and County 2018 – 2020 was a truly local response to meet the goals of our national strategy, connecting public consultation, participation from community and service providers, and led by a committed interagency Steering Group. The extension of *Connecting for Life* Dublin North City and County 2021 – 2024 provides an opportunity to further advance and embed the established local implementation structures throughout the CHO area. I am proud to lead this initiative in Dublin North City & County and look forward to continuing this collaborative approach to ensure full implementation of all the goals and actions in this plan.

#### Introduction



#### Angela Walsh, Head of Mental Health, HSE Community Healthcare Organisation Dublin North City and County

*Connecting for Life* Dublin North City and County 2021 – 2024, is the extension of our local Suicide Prevention Action Plan. It is strongly aligned to the national Connecting for Life strategy, and is rooted in the principle of learning from previous

experience of implementing the first cycle of Connecting for Life Dublin North City and County 2018 – 2020.

Connecting for Life Dublin North City and County 2021 – 2024 articulates local implementation of national actions, and commits to actions that respond to our particular local needs, strengths and challenges in Dublin North City and County. Alongside the health service, this plan recognises the role that the wider community can play in supporting individuals and families, continues efforts to raise awareness of when and how to seek help and promotes hope, connectedness and quality services.

To achieve this, Connecting for Life Dublin North City and County has 7 Goals that are supported by a number of national and local actions to ensure their achievement.

- 1. To improve understanding of and attitudes to suicidal behaviour, mental health and wellbeing
- 2. To support local communities' capacity to prevent and respond to suicidal behaviour
- 3. To target approaches to reduce suicidal behaviour and improve mental health among priority groups
- 4. To enhance accessibility, consistency and care pathways of services for people vulnerable to suicidal behaviour
- 5. To ensure safe and high-quality services for people vulnerable to suicide
- 6. To reduce and restrict access to means of suicidal behaviour
- 7. To improve surveillance, evaluation and high quality research relating to suicidal behaviour

In developing Connecting for Life Dublin North City and County 2021 – 2024, we assessed progress in the implementation of the first cycle of the plan towards achieving

the overall strategic objectives. This helped identify what was working well, where the implementation challenges were, and assisted in establishing strategic priorities for the remaining period of the strategy.

Over the past four years significant progress across all of the seven goals has been achieved through Connecting for Life Dublin North City and County 2018 – 2020, with particular accomplishments in relation to stigma reduction, self-harm, public health communications, training delivery and early intervention services, amongst other strategic areas.

While Connecting for Life Dublin North City and County provides us with a clear path forward, we will continue to face challenges, such as our growing and diverse population, societal stresses such as the Covid-19 pandemic, ongoing resourcing issues, and difficulties in maintaining full staffing. Connecting for Life Dublin North City and County represents the commitment of all stakeholders to working together to continue to meet these challenges and take meaningful steps to reduce suicide and self-harm in this area.



## **Section One: Background**

## **1.1** Connecting for Life National Context

Ireland's national suicide prevention strategy, *Connecting for Life* was launched in June 2015 and the Implementation Plan for 2017-2020 was published in late 2017. The principal aim of *Connecting for Life* 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). In December 2019 the Department of Health supported an extension of *Connecting for Life* 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 *Connecting for Life* strategy to date was completed. One of the specific aims of the review was to identify longer-term strategic goals for *Connecting for Life*, beyond 2020.

The review concluded that the strategic vision of *Connecting for Life* and the seven strategic goals 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 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 *Connecting for Life* 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 the *Connecting for Life* 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 North City and County.

The process for the preparation of the new plan for Dublin North City and County is shown in <u>Section Three</u>, and was aligned with the development of the national *Connecting for Life* Implementation Plan 2020 – 2022.

### **1.2** Connecting for Life Dublin North City and County 2018 – 2020

In May 2018, the *Connecting for Life* Action Plan for Community Healthcare Organisation Dublin North City and County 2018 – 2020 was launched. This local area action plan was based on the same vision, goals, objectives and measurable outcomes as outlined in the National Strategy.

The Suicide prevention at sub-national (regional/local) level: Self-Evaluation instrument (SUPRESE) was utilised to obtain feedback on implementation progress for the first plan. Lessons learned from other areas has also been considered and integrated.

- Key highlights: Connecting for Life Dublin North City and County Action Plan (2018-2020)
- Workstream 1: Communications
- CfL conference Connecting our Communities 23rd of January 2020 with 150 delegates and 55 support agency exhibitors.
- **DNCC specific resources developed and distributed** to 1000+ organisations containing information related to mental health, suicide prevention and bereavement service provision
- **Mental Health events** such as First Fortnight, and Green Ribbon took place across DNCC.
- **Dublin CYPSC directory**: CYPSC's in the Dublin area worked together and with stakeholders to develop and launch a service directory for the region.
- Key highlights: Connecting for Life Dublin North City and County Action Plan (2018-2020)
- Workstream 2: Interagency Protocols
- CAMHS Text alert system operational reports reduction in DNA's operational.
- Online Training Provision expanded by Connecting for Life Stakeholders to ease access to learning during COVID-19 restrictions.
- **Specialised Training Programmes** targeting priority groups delivered by the HSE, See Change, Jigsaw, BeLonG To and Pavee Point.
- The **WRAP programme** was delivered to mental health/nursing staff through the RCNME in Connolly Hospital and Tayleur House. Suicide or Survive also ran this programme online.



- Workstream 3: Psychotherapeutic Supports
- Enhanced ADHD pathway to care within CAMHS extended within DNCC.
- Mental Health Services adapted to COVID-19 restrictions to provide a range of alternatives to face-to-face supports, including the launch of Tele-Psychiatry.
- CNS in Self-Harm Service expanded to ED's in all acute hospitals in Dublin North City and County.
- Suicide Bereavement Liaison Officer (SBLO) service established in Dublin North City and County
- Key highlights: Connecting for Life Dublin North City and County Action Plan (2018-2020)
- Workstream 4: Excellence in Care
- Best Practice Guidelines for Suicide Prevention Organisations launched February 2020 and piloted within DNCC based Community and Voluntary organisations.
- CDETB psychologists and Guidance Counsellors trained in Collaborative Assessment and Management of Suicidality (CAMS).
- CFL 'Dispose of Unused Medicines Properly' (DUMP) campaign pilot completed, planning in progress for CHO wide campaign.
- Jigsaw/UCD's **My World Survey 2** launched and DNCC specific findings reported at the Connecting for Life Conference.

There were, however, many areas of challenge with the implementation of the local plan:

- Effectively responding to incidents of suicide in the context of a lack of notification protocols
- Supporting high risk/priority groups effectively
- Managing the impact of the Covid 19 pandemic
- The impact of the cyber-attack on the HSE.
- Maintaining active engagement and participation of all stakeholders within the implementation structures of *Connecting for Life.*





## Section Two: Context for *Connecting for Life* Dublin North City and County

## 2.1 Demographic information for Dublin North City and County Community Healthcare

CHO Dublin North City and County is one of nine Community Healthcare Organisations across the country and is responsible for providing care and services to our geographical population of approximately 621,405.

Community Healthcare Services are the broad range of services that are delivered outside of the acute hospital setting and include:

Primary Care Social Care - Older Persons Social Care - Disabilities Mental Health Health and Wellbeing Quality, Safety and Service Improvement.

What are Community Healthcare Services?

Community Healthcare Services are delivered through the HSE and its funded agencies to people in local communities, as close as possible to people's homes. Community Healthcare Services focus on keeping you well so that you can continue to live at home or close to home through our health promotion, disease screening, diagnosis, treatment, and rehabilitation programs. You can refer yourself to most Community Healthcare Services or through your GP, public health nurse, community mental health team, etc. Services are provided as follows:

Primary Care includes your GMS general practitioner (GP), practice nurse, public health nurse, dietician, dentist, physiotherapist, occupational therapist, speech

and language therapist, podiatrist, community pharmacist, psychologist, and others.

Social Care - Older Persons includes a team of specialists working together to meet the needs of our older people such as home helps and home care teams and including daycare services, meals on wheels, community hospitals, and nursing homes.

Social Care - Disabilities includes specialist teams working with people with a disability through the specialist day, training, home support, respite, and residential services.

Mental Health refers to a wide range of services that extend from enjoying positive mental health to severe and disabling mental illness. It includes specialized secondary care services for children and adolescents, adults, older persons, those with an intellectual disability and mental illness as well as a range of mental health promotion initiatives provided by the national office for Suicide Prevention (NOSP). Services are provided in a number of different settings including the service user's own home, day hospitals, hostels, and acute units which are located in general hospitals.

Health & Wellbeing Healthcare reforms place considerable emphasis on keeping people healthy and well. Community Healthcare Services already play a critical role in promoting health and wellbeing by making every healthcare contact count and by working across sectors to create the conditions which support good health, on equal terms, for the entire population.

Community Healthcare Services place a strong emphasis on working with communities and individuals to maintain and improve your health and social wellbeing. We do this by providing you with an integrated, interdisciplinary, highquality, team-based, and user-friendly service.

"Deliver the right service, at the right time, in the right place, by the right team."

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Figure 1. Map of CHO Areas

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#### **Overview of CHO DNCC**

#### **Primary Health Care Centres**

- Balbriggan
- Ballymun
- Blanchardstown Care & Mental Health Centre Corduff
- Finglas
- Grangegorman Navan Road Primary
- Care Centre
- Oldtown
- Portmarnock
- Rush
- Summerhill

#### Voluntary

- CRC Clontarf
- Daughters of Charity

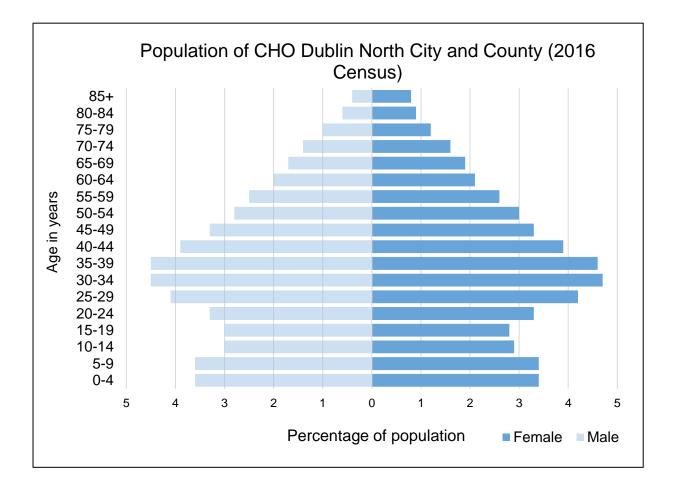
## CHNs for CHO DNCC

Network 1: Balbriggan Area Network 2: Swords Area Network 3: Coastal Area Network 4: Coolock Area Network 5: Kilbarrack Area Network 6: Finglas Area Network 7: Ballymun Area Network 8: Cabra Area Network 9: North Inner City Area Network 10: Clontarf Area Network 11: Blakestown Area Network 12: Blanchardstown Area



Figure 2. Map of CHO Dublin North City and County

Fingal, which constitutes the main growth area of the CHO, has the fastest growing population in the country and a relatively young age profile. Comparatively, there are neighbourhoods towards the inner city of little or no growth with older population cohorts. There are areas with high levels of socioeconomic disadvantage and challenges with poverty, unemployment, homelessness and substance misuse prevalent across the CHO, particularly concentrated in some communities. Some Electoral Divisions in the inner city have over 50% foreign national constitution. There are also pockets of affluence in the area. Figure 3 shows the population age profile of the Community Healthcare organisation. These numbers do not account for the recent increase in population due to Ukrainian nationals seeking shelter in Dublin North City and County.



**Figure 3.** Population Age Profile for Dublin North City and County Community Healthcare. Data Source: HSE Atlas Finder, CSO Census 2016.

In the Community Healthcare area 23% of the population were born overseas, and approximately 20% of the population do not have English as their first language, plus the arrival from February 2022 of the additional population of Ukrainians fleeing war and either settling or transiting the North Dublin area.

**Table 1.** Population Ethnic Profile for Dublin North City and County CommunityHealthcare. Data Source: HSE Atlas Finder, CSO Census 2016.

Ethnicity	No. of People	% of People	% Change from 2011 census
Irish	495909	79.8	6.7
UK	8266	1.3	-4.4
Polish	18250	2.9	-3.2
Lithuanian	5624	0.9	-6.4
Elsewhere in EU	37141	6	33.3
Elsewhere in world	29449		-18.2
Visitors/Not stated	26766	4.3	37.1

**Life Expectancy and Health Status:** There is a strong link between poverty, socioeconomic status and health. In 2020, 16.4% of children nationally were 'At risk of poverty' (Central Statistics Office).

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.

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**Health Inequalities.** Health and wellbeing are not evenly distributed across Irish society 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 39.9% 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: 21%, Disadvantaged: 11.9%, Very Disadvantaged: 5.2% and Extremely Disadvantaged: 1.8%.

**Homelessness**. Nationally, latest figures indicate that are over 9,000 people are homeless, with more than a quarter of these being children (Department of Housing, Local Government and Heritage 2022). With the increase in the homeless population and demand for Specialised Homeless Mental Health Services within the Dublin North Inner City area the implementation of Stepped Model of Mental Health Care for the Homeless. CHO DNCC Mental Health Services recruited a Consultant Psychiatrist, Non Clinical Hospital Doctor (NCHD), 2 Mental Health Clinical Nurse Specialist (CNS) and a mental health Social Worker and the team commenced work in Qtr. 4 2021.

The new Homeless Mental Health Services team will greatly aid the provision of services to the high concentration of Homeless facilities in both North and central inner city Dublin area and integration with the multiple agencies involved (e.g. social inclusion, mental health, prisons, Non-Government Organisations (NGO's) etc.).

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The Community Healthcare area will continue to review care packages and health care needs of complex homeless clients and 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. There are 2,801 Travellers in the Community Healthcare DNCC area (0.5% of the population) (Health Atlas Finder, CSO Census 2016). Access to CHO DNCC Mental Health and Wellbeing Services was made available in a culturally sensitive manner to the Traveller Community led by the Traveller Mental Health Service Co-ordinator in 2021. The Coordinator works collaboratively to implement Mental Health and Wellbeing improvements and projects for the Traveller Community. This will include the development of coproduced Mental Health training suite for Travellers, the development of positive Mental Health campaign for Travellers to reduce stigma in the travelling Community. The Coordinator will work with Section 38 Agencies, HSE Social Inclusion services and Traveller health and social care support agencies. In collaboration with the National Office for Suicide Prevention, a countrywide research on Mental Health and suicide within the Traveller community will be conducted. The estimated Roma population in Ireland is between 3,000 and 5,000 (Department of Justice and Equality 2017). Pavee Point provide support to the local Roma population through their Roma Programme.

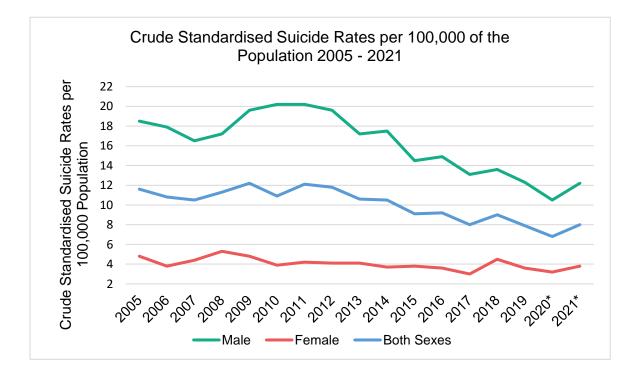
#### 2.2 Suicide and Self-Harm Data in Ireland

In Ireland, suicide mortality data is collated and reported on by the Central Statistics Office (CSO). 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. 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 on target for approval during 2022 which will facilitate more accurate and 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 than that which is currently available through the vital statistics released by the CSO.

Figure 4 below illustrates the trends observed in suicide rates in Ireland over the period 2005-2021. 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 4, the male rate is approximately 4 times higher than that of females, with this lowering to approximately 3 times higher in 2019.



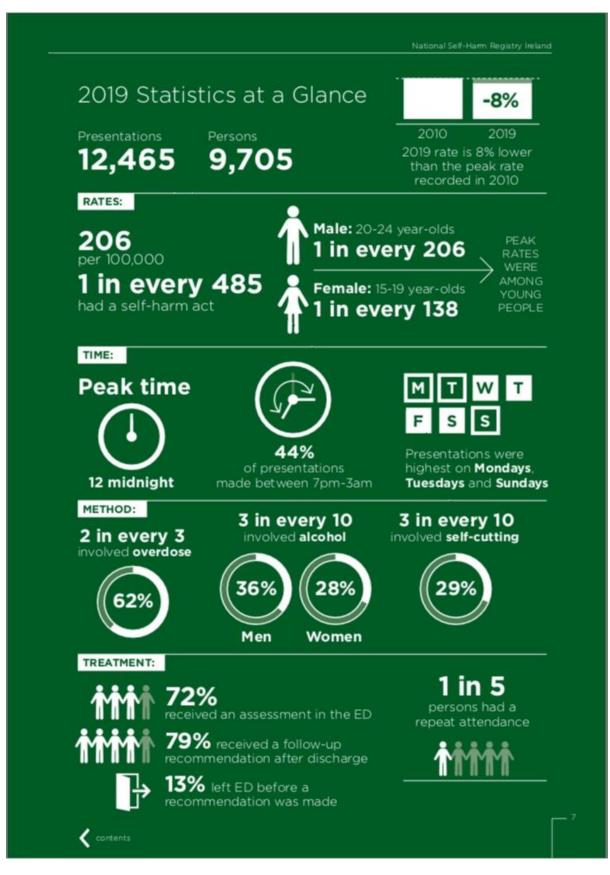
**Figure 4.** Crude standardised suicide rates per 100,000 of the population over the period 2005 - 2021 (2020 and 2021 data is provisional). Data Source: Central Statistics Office.

Self-harm describes the various methods by which people harm themselves nonfatally. Varying degrees of suicidal intent can be present and sometimes there may not be any suicidal intent. A history of one or more acts of self-harm is the single strongest predictor of repeated suicidal behaviour, both fatal and non-fatal.

The majority of acts of self-harm are not treated by medical services, therefore the full scale of the problem is hard to quantify. The National Self-Harm Registry, administered by the National Suicide Research Foundation, collates data on presentations of self-harm to all hospital emergency departments across the country.

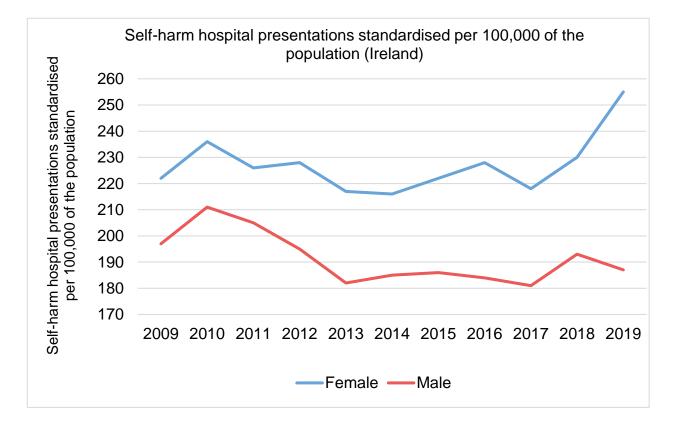


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**Figure 5.** Self-Harm Statistics at a Glance 2019. Data Source: National Suicide Research Foundation.

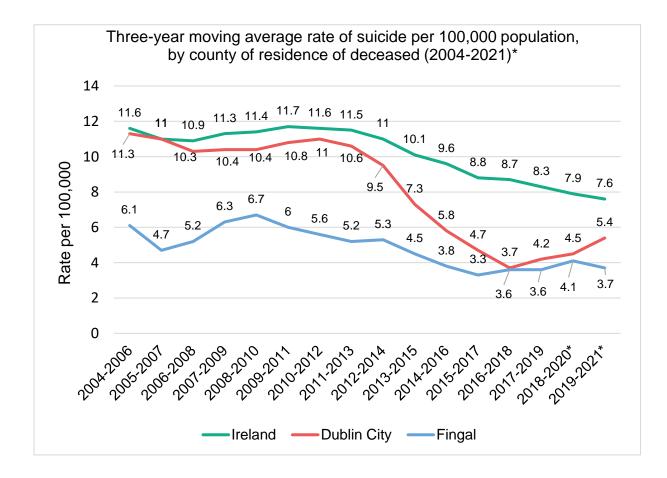
Figure 6 illustrates the standardised self-harm rates as based on presentations to hospitals, collected by the National Self-Harm Registry (National Suicide Research Foundation 2022). The national rate of self-harm presentations peaked in 2010, again during the recession period in Ireland. This was followed by slight successive decreases up to 2013, with the rate then relatively consistent up to 2017. Looking at the period covered in Figure 6, 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 6.** Self-harm hospital presentations standardised per 100,000 of the population. Data Source: National Suicide Research Foundation.

### 2.3 Suicide and Self-Harm Data in Dublin North City and County

Identifying particular trends in deaths by suicide across Dublin North City and County is problematic as not all suspected suicides are reported to the Resource Officers for Suicide Prevention. The Central Statistics Office (CSO) provides data on deaths by suicide by local government area, therefore figures for Dublin North City and County are only available aggregated to Dublin City Council and Fingal County Council geographic areas and by gender.

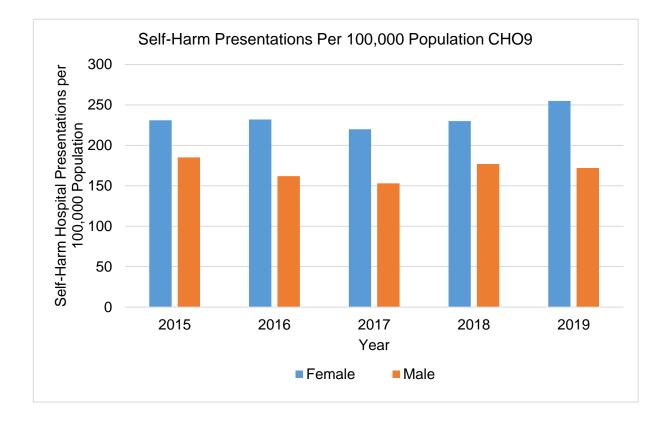


**Figure 7.** Three-Year Moving Average Rate of Suicide per 100,000 Population by Local Government Area and State (Source: HSE NOSP Briefing on CSO Suicide Statistics June 2022) \*Data for 2020 and 2021 is provisional and should be interpreted with caution.

Rates of self-harm in Dublin North City and County are similar to the national average, however there are some specific trends in self-harm data in this area that are presented below (Data Source: National Suicide Research Foundation):

 There were over 1,613 presentations for self-harm from residents of the CHO in 2019.

- Drug overdose, followed by alcohol and self-cutting are the most common methods of self-harm.
- The peak time of day for presentations to emergency departments was 9pm for women and midnight for men.
- The majority of patients attending the Emergency Departments for reasons related to self-harm were not admitted for inpatient treatment (57%) and 16% left the Department without being seen, or against medical advice.



**Figure 8.** Community Healthcare Dublin North City and County self-harm hospital presentations per 100,000 population 2015 – 2019 by sex. Data source: National Suicide Research Foundation.

#### **1.3 Priority Groups**

The national *Connecting for Life* strategy has identified a list of priority groups for suicide prevention initiatives. Priority groups identified in Dublin North City and County align with those in the national strategy. These groups are as follows:

- Health/mental health related groups: People with mental health difficulties of all ages, those who have engaged in repeated acts of selfharm, 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).

## 1.4 Impact of Covid-19

Research has indicated that the Covid-19 pandemic impacted the mental health of the Irish population; the Covid-19 Psychological Response Consortium (C19PRC) study (a collaboration between researchers in Ireland, Spain and the United Kingdom which surveyed approximately 1,000 respondents in Ireland) reported that mental health difficulties were common during the pandemic; 41% of people reported feeling lonely, 23% reported high levels of depression, 20% reported high levels of anxiety, and 18% reported high levels of post-traumatic stress (Spikola et al 2020).

The findings of a 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 *Connecting for Life* NGO partners nationally and in Dublin North City and County has also been evident in monthly surveys conducted

to track the effects of the public health emergency on their suicide prevention work. Some issues reported in these surveys over the period April - June 2020 included:

- Service users facing issues at home such as domestic abuse;
- Increased alcohol and substance misuse;
- Not all service users having the capacity or means to engage with online mental health services;
- Cramped and overcrowded accommodation;
- Home-schooling a stressor for both young people and parents;
- Stress for staff delivering mental health services remotely with limited peer support / supervision.

The Covid-19 pandemic has also impacted the delivery of statutory healthcare provision nationally and in Dublin North City and County:

- Delivery of suicide prevention training; in person training paused
- Provision of suicide bereavement responses to individuals and communities moved to online and telephone;
- Access to in-person supports and services severely curtailed;
- Increase in mental health difficulties in the general population due to the pressures of the pandemic (Spikola et al 2020);
- HSE staff deployment affected service provision across the CHO;

2.4 National Policy Context

There are a number of national policies which are relevant to suicide prevention, mental health, well-being and specific *Connecting for Life* priority groups.

• 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.

#### • 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 (Department of Health 2021).

#### • HSE National Psychosocial Response to the Covid-19 Pandemic.

This framework ensures that the critical psychosocial component 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).

## The Healthy Ireland Strategic Action Plan 2021-2025

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.

## HSE Mental Health Promotion Plan 2022-2027

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.

#### • Developing a Community Response to Suicide

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). The Dublin North City and County ROSPs developed a local area Suicide Critical Response Plan in 2017 which informed the development of the National Guidelines for developing a CRP. This plan has been activated on several occasions across the CHO and provided structured postvention support to incidents of traumatic deaths. The ROSP team are currently aligning the local area CRP with the National Guidelines.

Others relevant plans are shown in Appendix 3 of this document.

## **2.5 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:

- CHO Dublin North City and County Operational Plans
- CHO Dublin North City and County Health Ireland Implementation Plan 2018-2022
- Children and Young Person's Services Committees Plans for Fingal and Dublin North City

#### **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, driving the development and progression of the implementation of the local *Connecting for Life* plan. ROSPs connect with relevant statutory, community and voluntary organisations on suicide and selfharm policy and prevention issues, providing ROSP representation on a number of national committees and working groups.

ROSPs also lead on annual events linked with suicide prevention and mental health, such as World Suicide Prevention Day, World Mental Health Week/Month, as well as numerous local and regional events, providing guidance and support to statutory community and voluntary organisations with regard to suicide prevention and mental health promotion activities. 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 with the National Education and Training Plan. The Covid-19 pandemic significantly impacted the delivery of training, and, although some programmes moved online, others were not available remotely. However, since the Covid-19 restrictions have been lifted, these training programmes are again available face-to-face.

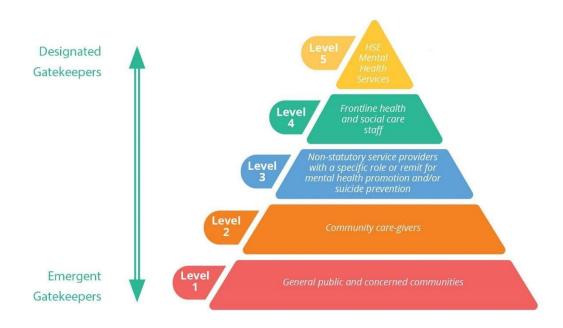


Figure 9. Suicide Prevention Training Stakeholder Groups

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.

All training is free of charge (fully funded by HSE). To book, visit Bookwhen Dublin North City & County Suicide Prevention Training:

### Www.Bookwhen.com/dublin-north-city-county-suicide-prevention-training

## 2.9 Suicide Prevention Training Statistics Dublin North City and County

Table 2 outlines the number of trainings and training applicants in 2020 and 2021 and projected figures for 2022 based on trainings scheduled. 2022 figures will likely

increase as new training dates continue to be added throughout the year. Face-toface training provision was severely curtailed in 2020 and 2021 due to the Covid-19 pandemic restrictions on in-person gatherings.

**Table 2.** Training Summary and Projections 2021-2022 Dublin North City andCounty

Training Programme	Training 2020*	Training Applicants 2020*	Training 2021*	Training Applicants 2021*	Training Scheduled 2022	Projected Training Applicants 2022
ASIST	1	22	2	38	11	264
SafeTALK	0	0	3	36	15	420
START	N/A	216	N/A	1514	N/A	2000
Suicide Bereavement for Professionals	1	14	1	26	3	54
Understanding Self- Harm	2	37	1	12	5	100
Grand Total	4	289	6	1613	34	2838

\* In person training provision affected by Covid 19 restrictions.



### 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, National Office for Suicide Prevention and National Mental Health Operations.

The development of *Connecting for Life* Dublin North City and County was based on the principle of learning from the preparation and implementation of the first Community Healthcare area *Connecting for Life* Plan 2015 – 2020 and is aligned with the national *Connecting for Life* Implementation Plan 2020 -2022.

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

- Alignment with other relevant national plans and policies: E.g. Sharing the Vision, Sláintecare and National Psychosocial Plan.
- Connecting for Life Interim Strategy Review: 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 Connecting for Life suicide prevention plan Self-Evaluation Project: The aim of this project was to review implementation progress of the 17 local action plans (now amalgamated into 10 local action plans), using a best practice self-evaluation checklist for suicide prevention at sub-national (regional/local) level.
- 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 HSE Resource Officers for Suicide Prevention with a framework to support the coordination, quality assurance, monitoring and evaluation of education and training actions identified in *Connecting for Life* (National Office for Suicide Prevention 2022).
- The Resource Officers for Suicide Prevention (ROSP) Learning Community of Practice (LCOP): This Forum was utilised to provide a consistent process and structure for streamlining the plan development
- **Development of new draft actions** for review by the lead partners responsible for implementing each action and the *Connecting for Life* Oversight membership, taking into account:
  - 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.
  - Exclusion of 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 *Connecting for Life* Oversight Group.
  - Feedback from the NOSP on the extended plan.

### **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 *Connecting for Life*, namely the 10 Local Area *Connecting for Life* 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 10). 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.



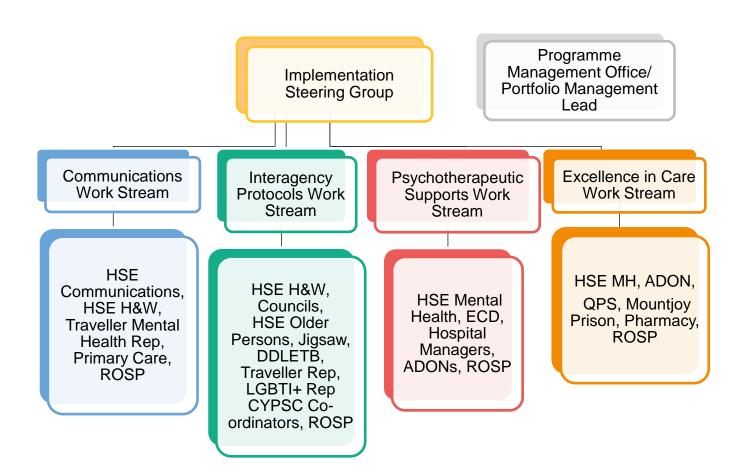
Figure 10. Overview of the national Connecting for Life implementation structures.

In Dublin North City and County Community Healthcare, the *Connecting for Life* implementation structures are aligned to the national structures. The ROSPs are the

designated leads for the coordination and implementation of *Connecting for Life* in Dublin North City and County 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 11 below provides further information on the role of the groups and teams responsible for local *Connecting for Life* implementation.

**Figure 11.** Dublin North City and County Community Healthcare *Connecting for Life* Implementation Structures



- Implementation Steering Group
- Work stream 1: Communications
- Work stream 2: Interagency Protocols
- Work stream 3: Psychotherapeutic Supports
- Work stream 4: Excellence in Care.

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 selfharm.



## **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 *Connecting for Life* 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 Steering Group, the Project Management Group and the four Work stream 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 North City and is covered by action **2.1.1 (a) of** *Connecting for Life* Action Plan Dublin North City and County: Implement, monitor and report on the delivery of *Connecting for Life* Action Plan Dublin North City and County. In 2024, in consultation with the Implementation Groups, a midterm review will take place to acknowledge interagency collaborative working throughout Dublin North City & County between statutory and community support services with the objective of reducing suicide and self-harm. The review will also give health and community services an opportunity to review their commitment to the work to reduce suicide in Dublin North City and County.



## 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 is being 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 North City and County are to:

- Promote and gain support for the development of *Connecting for Life* Dublin North City and County
- Engage a wide range of stakeholders in the development of *Connecting for Life* Dublin North City and County
- Give accurate and timely information about the project
- Ensure a consistent message
- Encourage use of project management best practices.

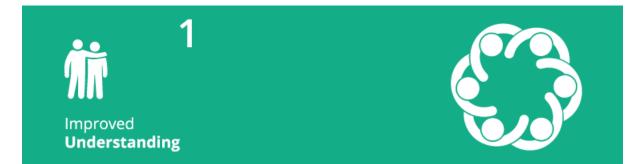
The communications plan will provide a framework to manage and coordinate the wide variety of communications that will support the implementation of the plan and covers:

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

The full Communication Plan will be available from the ROSPs upon completion.

# Section Seven: *Connecting for Life* Dublin North City and County Goals, Objectives and Actions

### Goal 1



Goal one of *Connecting for Life*, Ireland's national strategy to reduce suicide 2015-2020 (extended to 2024), 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 *Connecting for Life* Dublin North City and County there are 18 actions under goal one. The implementation of all actions are within the remit of Work Stream 1: Communications.

suicidal behaviour, mental health and w		ling of, and attitudes to,
National Objective 1.1: Improve popul	U	derstanding of suicidal
behaviour, mental health and wellbeing		
National Action: 1.1.2 Develop and im	plement a nat	ional mental health and well-
being promotion plan.		
Lead: HSE H&W, DOH HI		
Partners: NOSP, HSE MH		
<b>Local Action:</b> 1.1.2 (a) Implement relevent the Health Promotion Plan locally.	vant actions fr	om the HSE National Mental
Lead: HSE H&W		
Partners: HSE MH, HSE MH (ROSP),	Community ar	nd Voluntary Partners
<b>Purpose:</b> To provide strategic direction		
mental health & wellbeing actions acros		
population. To promote positive mental		
population through delivery of evidence		
initiatives.		
Planned Start date and duration: Q1		]
Location: Dublin North City and Count	V	
Inputs for 2022: HSE HW staff time (na rollout).		g group and driving local
Inputs for 2022: HSE HW staff time (na rollout). Milestones		g group and driving local
Inputs for 2022: HSE HW staff time (na rollout).		Assess National Plan and
Inputs for 2022: HSE HW staff time (na rollout). Milestones Overarching Milestone 2022	ational steerin	Assess National Plan and develop local response to
Inputs for 2022: HSE HW staff time (na rollout). Milestones Overarching Milestone 2022 Commence local rollout of relevant	ational steerin	Assess National Plan and develop local response to identified actions.
Inputs for 2022: HSE HW staff time (na rollout). Milestones Overarching Milestone 2022	ational steerin	Assess National Plan and develop local response to identified actions. Participate and deliver
Inputs for 2022: HSE HW staff time (na rollout). Milestones Overarching Milestone 2022 Commence local rollout of relevant	Q1 2022	Assess National Plan and develop local response to identified actions. Participate and deliver actions across DNCC.
Inputs for 2022: HSE HW staff time (na rollout). Milestones Overarching Milestone 2022 Commence local rollout of relevant	ational steerin         Q1 2022         Q2 2022         Q3 2022	Assess National Plan and develop local response to identified actions. Participate and deliver actions across DNCC. Review delivery to date
Inputs for 2022: HSE HW staff time (na rollout). Milestones Overarching Milestone 2022 Commence local rollout of relevant	Q1 2022	Assess National Plan and develop local response to identified actions. Participate and deliver actions across DNCC. Review delivery to date Plan for 2023 delivery
Inputs for 2022: HSE HW staff time (na rollout). Milestones Overarching Milestone 2022 Commence local rollout of relevant	ational steerin         Q1 2022         Q2 2022         Q3 2022	Assess National Plan and develop local response to identified actions. Participate and deliver actions across DNCC. Review delivery to date Plan for 2023 delivery following evaluation of 2022
Inputs for 2022: HSE HW staff time (na rollout). Milestones Overarching Milestone 2022 Commence local rollout of relevant	ational steerin         Q1 2022         Q2 2022         Q3 2022	Assess National Plan and develop local response to identified actions. Participate and deliver actions across DNCC. Review delivery to date Plan for 2023 delivery following evaluation of 2022 progress and future
Inputs for 2022: HSE HW staff time (na rollout). Milestones Overarching Milestone 2022 Commence local rollout of relevant actions.	ational steerin Q1 2022 Q2 2022 Q3 2022 Q4 2022	Assess National Plan and develop local response to identified actions. Participate and deliver actions across DNCC. Review delivery to date Plan for 2023 delivery following evaluation of 2022 progress and future assessed needs.
Inputs for 2022: HSE HW staff time (na rollout). Milestones Overarching Milestone 2022 Commence local rollout of relevant actions. Overarching Milestone 2023	Ational steerinQ1 2022Q2 2022Q3 2022Q4 2022Overarchi	Assess National Plan and develop local response to identified actions. Participate and deliver actions across DNCC. Review delivery to date Plan for 2023 delivery following evaluation of 2022 progress and future
Inputs for 2022: HSE HW staff time (na rollout). Milestones Overarching Milestone 2022 Commence local rollout of relevant actions. Overarching Milestone 2023 Continued implementation of relevant	ational steerin Q1 2022 Q2 2022 Q3 2022 Q4 2022	Assess National Plan and develop local response to identified actions. Participate and deliver actions across DNCC. Review delivery to date Plan for 2023 delivery following evaluation of 2022 progress and future assessed needs.
Inputs for 2022: HSE HW staff time (na rollout). Milestones Overarching Milestone 2022 Commence local rollout of relevant actions. Overarching Milestone 2023 Continued implementation of relevant actions.	Ational steerinQ1 2022Q2 2022Q3 2022Q4 2022OverarchiTBD	Assess National Plan and develop local response to identified actions. Participate and deliver actions across DNCC. Review delivery to date Plan for 2023 delivery following evaluation of 2022 progress and future assessed needs. ing Milestone 2024
Inputs for 2022: HSE HW staff time (na rollout). Milestones Overarching Milestone 2022 Commence local rollout of relevant actions. Overarching Milestone 2023 Continued implementation of relevant	Ational steerinQ1 2022Q2 2022Q3 2022Q4 2022OverarchiTBDmplementation	Assess National Plan and develop local response to identified actions. Participate and deliver actions across DNCC. Review delivery to date Plan for 2023 delivery following evaluation of 2022 progress and future assessed needs. ing Milestone 2024

<b>National Goal 1:</b> To improve the nation's understanding of, and attitudes to,					
suicidal behaviour, mental health and wellbeing. National Objective 1.1: Improve population-wide understanding of suicidal					
behaviour, mental health and wellbeing,					
factors.	anu assu	clated protective and lisk			
National Action: 1.1.2 Develop and imp	lement a	national mental health and			
wellbeing promotion plan.					
Lead: HSE H&W, DOH HI					
Partners: NOSP, HSE MH					
Local Action: 1.1.2 (b) Support the impl	ementatio	on of the actions in Healthy			
Ireland Dublin North City and County, tal					
Healthy Ireland Strategic Action Plan (20	)21-2025	).			
Lead: H&WB					
Key Partners: CO and Heads of Service					
Purpose: In line with the National HI Str	ategy we	are tasked with implemented			
key actions					
Planned Start date and duration: Q1 2					
Location: Dublin North City & County C					
Inputs for 2021 funding, staff, materials					
Inputs for 2022 funding, staff, materials	, supportir	ng partners			
Milestones 2021 Q3 & Q4					
Overarching Milestone 2022	Q1	Increase of MH actions in HI			
	2022	Implementation Plan with a			
		focus on reducing			
Commence the implementation of the	00	inequalities.			
national mental health and well-being	Q2	Increase of MH actions in HI			
promotion plan.	romotion plan. <b>2022</b> Implementation Plan with a				
	focus on reducing				
	Q3	inequalities. Increase of MH actions in HI			
	<b>2022</b> Implementation Plan with a				
	LULL	focus on reducing			
		inequalities.			
	Q4 Increase of MH actions in HI				
	2022 Implementation Plan with a				
		focus on reducing			
		inequalities.			
Overarching Milestone 2023					
Outputs by end of 2022: Percentage increase of CHO staff trained in MHP.					
Percentage increase of staff health and wellbeing initiatives with a MH focus.					
Percentage increase of staff attending se	elf-care or	Minding Your Wellbeing			
training.					

**National Objective 1.1**: Improve population-wide understanding of suicidal behaviour, mental health and wellbeing, and associated protective and risk factors.

**National Action: 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.

Lead: HSE MH

Partners: HSE H&W, DOD, Non-statutory partners, NOSP

**Local Action:** 1.1.3 (a) Support the delivery of new and existing national positive mental health campaigns at a local level through the provision of materials and support to local partners.

Lead: HSE MH (ROSP), HSE Communications

Key Partners: HSE H&W, Community & Voluntary Partners

**Purpose:** To improve the understanding of, and attitudes to, suicidal behaviour, mental health and wellbeing across the area.

Planned Start date and duration: 2021 - 2024

**Location:** Dublin North City and County

**Inputs for 2021**: NOSP Funding, ROSP time and support of partners to disseminate.

**Inputs for 2022:** NOSP Funding, ROSP time and support of partners to disseminate.

**Milestones** 

Milestones 2021 Q3 & Q4: Review and reprint resource

Overarching Milestone 2022	Q1	Distribute Mental Health	
	2022	Supports and Bereavement	
Increased awareness across general		Supports Leaflets.	
population and priority groups of	Q2	Distribute 'Numbers When	
national mental health campaigns.	2022	you Need them' wallet cards.	
	Q3	World Suicide Prevention	
	2022	Day Events & Green Ribbon	
		Events.	
	Q4	Events for Mental Health	
	2022	Awareness Week.	
Overarching Milestone 2023	Overarch	hing Milestone 2024	
Engage with the NOSP Mental Health	Develop local campaigns and		
Literacy Campaign and roll out locally.	materials. Continue roll out of National		
	MHL Car	mpaign	
Outputs by end of 2024: Population based mental health awareness, increased			

awareness of stigma and information about local 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	g, and ass	oclated protective and risk			
factors.					
National Action: 1.1.3 Deliver co-ordi					
Little Things, 2014) for the promotion of					
whole population with a focus on prote		n benaviours and consistent			
signposting to relevant support service	es.				
Lead: HSE MH					
Partners: HSE H&W, DOD, Non-statu					
Local Action: 1.1.3 (b) Develop a con					
implementation of Connecting for Life		th City and County.			
Lead: HSE MH (ROSP), HSE Comms					
Key Partners:					
<b>Purpose</b> : To ensure that timely, releva					
implementation progress information is	s provided	to relevant stakeholders and			
other appropriate audiences.					
Planned Start date and duration: Q2	2022, 6 m	nonths			
Location: Dublin north City and Count	ty				
Inputs for 2022: Staff time					
Milestones					
Overarching Milestone 2022 Q1					
	2022				
Communications strategy developed	Communications strategy developed <b>Q2</b>				
	2022				
	Q3	Commence the development			
<b>2022</b> of a comprehensive					
Connecting for Life DNCC					
Communications Plan.					
Q4 Communications plan					
2022 developed. Implementation					
of the plan begins.					
Overarching Milestone 2023 Overarching Milestone 2024					
Continued implementation of the Continued implementation of the					
communications plan.					
Outputs by end of 2022: Increased awareness and engagement in the					
implementation of Connecting for Life, as well as the delivery of consistent					
messaging to stakeholders.					

<ul> <li>National Goal 1: To improve the nation's understanding of, and attitudes to, suicidal behaviour, mental health and wellbeing.</li> <li>National Objective 1.1: Improve population-wide understanding of suicidal behaviour, mental health and wellbeing, and associated protective and risk</li> </ul>				
National Objective 1.1: Improve population-wide understanding of suicidal				
behaviour mental health and wellbeing and associated protective and risk				
sonariour, montal noutri and wondoing, and addodiated prototive and hold				
factors.				
National Action: 1.1.4 Build the link between alcohol/drug misuse and suicidal				
behaviour into all communication campaigns.				
Lead: HSE PC				
Partners: HSE H&W, NOSP, DOH				
Local Action: 1.1.4 (a) Progress the implementation of national campaigns				
relating to drug and alcohol awareness and misuse in Dublin North City and				
County.				
Lead: HSE Comms				
Key Partners: HSE PC				
<b>Purpose:</b> To provide information about the dangers of drug and alcohol use to				
the population of Dublin North City and County.				
Planned start date and duration: 2022 ongoing				
Location: Dublin North City and County				
Inputs for 2022: Supporting partners, materials, staff time				
Milestones:				
Milestones 2022 Q3 & Q4: Distribute resources				
Overarching Milestone 2022: Q1 Disseminate campaign				
2022 resources with stakeholders				
Increase awareness of drug and Q2 Monitor drug and alcohol				
alcohol issues 2022 trends locally and feed to				
National structures				
Q3 Disseminate campaign				
2022 resources with stakeholders				
Q4 Monitor drug and alcohol				
<b>2022</b> trends locally and feed to				
National structures				
Overarching Milestone 2023 Overarching Milestone 2023				
Increase awareness of drug and Increase awareness of drug and				
alcohol issues alcohol issues				
Outputs by end of 2022: Continue to disseminate resources locally in DNCC				
with all stakeholders and Section 39 organisations working in drug services.				

National Goal 1: To improve the nation's understanding of, and attitudes to,					
suicidal behaviour, mental health and wellbeing.					
National Objective 1.1: Improve population-wide understanding of suicidal					
behaviour, mental health and wellbeing, an	nd associa	ted protective and risk			
factors.					
National Action: 1.1.4 Build the link betwee		ol/drug misuse and suicidal			
behaviour into all communication campaigr	าร.				
Lead: HSE PC					
Partners: HSE H&W, NOSP, DOH					
Local Action: 1.1.4 (b) Ensure relevant loc					
and promote the link between mental healt	h and alco	ohol/drug misuse.			
Lead: HSE Comms	_				
Key Partners: HSE PC, HSE MH (ROSP),					
<b>Purpose</b> : To target a population using sub-					
reduction message. Given the psychologica					
use, reinforcing the link between use and the		on mental health is important.			
Planned start date and duration: Q2 202	2 - 2024				
Location: Dublin North City and County					
Inputs for 2022: Supporting partners, mate	erials, stat	ff time			
Milestones:					
Overarching Milestone 2022:	Q1	Disseminate campaign			
	2022	resources with			
To target a population using		stakeholders.			
substances and give a strong harm	Q2	Disseminate campaign			
reduction message.	2022	resources with			
_	stakeholders.				
	Q3	Disseminate campaign			
	2022	resources with			
stakeholders.					
	Q4	Disseminate campaign			
	2022 resources with				
stakeholders.					
Overarching Milestone 2023:		hing Milestone 2024:			
To target a population using	•	a population using			
substances and give a strong harm		es and give a strong harm			
reduction message.		n message.			
<b>Outputs by end of 2022</b> : Information/materials on the link between the alcohol and substance use on mental health disseminated.					

<b>National Goal 1:</b> To improve the nation' suicidal behaviour, mental health and we		nding of, and attitudes to,			
National Objective 1.1: Improve population-wide understanding of suicidal					
behaviour, mental health and wellbeing, and associated protective and risk factors.					
	<b>National Action: 1.1.5</b> Promoting Physical activity as a protective factor for mental				
health through the National Physical Act	•				
Lead: DOH HI, DTTAS	ivity i lan.				
Partners: Non-statutory partners					
Local Action: 1.1.5: Promote physical a	activitv as a	protective factor for mental			
health through the National Physical Act	•	F			
Lead: HSE H&W	, <u> </u>				
Key Partners: Sports Partnerships, LCI	DCs. CYPS	Cs and Local Authorities			
Purpose: Evidence shows link between					
being	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	,			
Planned Start date and duration: Ong	oing				
Location: Dublin North City & County					
Inputs for 2022: Continue grant aids wi	th local spo	orts partnership with key action			
of Physical Activity & Mental Health					
Milestones					
Overarching Milestone 2022	Q1	Grants signed by SP to			
••••••••••••••••••••••••••••••••••••••	2022	implement National Physical			
Promote physical activity (PA) via		Activity Plan in			
Sports Partnerships (SP) and MECC.		communities.			
		Continue to include PA in			
		MECC training.			
	Continue to support nationa PA plan and local				
		monitoring.			
	Q2	Continue to support national			
	2022	PA plan and local			
		monitoring.			
	Q3	Continue to support national			
	2022	PA plan and local			
		monitoring.			
		Support outdoor sports.			
	Q4	Continue to support national			
	2022	PA plan and local monitor.			
Overarching Milestone 2023		hing Milestone 2024			
Continued promotion of physical activity.	Continue	ed promotion of physical activity.			
Outputs by end of 2022:					
Promotion of physical activity through M	ECC and S	ports Partnerships as a			
protective factor for mental health.					

**National Objective 1.2:** Increase awareness of available suicide prevention and mental health services.

**National Action: 1.2.1** Deliver accessible information on all mental health services and access/referral mechanisms and make the information available online at YourMentalHealth.ie.

**Local Action:** 1.2.1 (a) Ensure information on all local mental health services is included and kept up to date on the 'www.yourmentalhealth.ie' online resource, and promote this as the single online point of access for information on statutory mental health services.

Lead: HSE MH, HSE MH ROSP

Partners: HSE PC, Community & Voluntary Partners

**Purpose:** Increase awareness of available suicide prevention and mental health support services in the Dublin North City and County area.

Planned Start date and duration: Q2 2022 ongoing

**Location:** Dublin North City and County

**Inputs for 2022:** Resource Officer, administrator and partner organisation time. **Milestones:** 

Overarching Milestone 2022	Q1	Review and update	
	2022	services database.	
Deliver up-to-date information on all	Q2	Promote	
local mental health services and how to	2022	yourmentalhealth.ie as a	
access them for the general population		service information focal	
and priority groups, and make available		point.	
online through yourmentalhealth.ie.	Q3	Collate information on	
	2022	services and update on	
		yourmentalhealth.ie.	
	Q4	Promote	
	2022	yourmentalhealth.ie as a	
		service information focal	
		point.	
Overarching Milestone 2023	Overarching Milestone 2024		
Review and update services database.	Review and update services		
	database.		
Outputs by end of 2022: 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.					
National Action: 1.2.1 Deliver accessible	informatio	on on all mental health			
services and access/referral mechanisms					
online at YourMentalHealth.ie.					
Local Action: 1.2.1(b) Support the updat	ing of exis	ting service directories e.g.			
CYPSC Dublin Directory and National Me					
explore/develop new resources to promot	e awarene	ess of mental health services.			
Lead: HSE MH (ROSP)					
Partners: CYPSC, YPAR, Community & Y	Voluntary	Partners			
Purpose: To support and ensure the prov	vision of a	ccurate accessible information			
on local services across all platforms.					
Planned Start date and duration: Q2 20	22 ongoin	Ig			
Location: Dublin North City and County					
Inputs for 2022: ROSP and administrator	r time, par	tner support			
Milestones					
Milestones 2021 Q3 & Q4: Cross referen	nce service				
Overarching Milestone 2022Q1Review service directory					
	2022	entries for statutory			
Update local service directories on an		services.			
annual basis to include details of	Q2	Align with ROSP service			
provision, whether available online,	2022	database.			
telephone and/or in person.	Q3	Update ROSP suite of			
	2022	resource leaflets.			
	Q4	Assess need for additional			
	2022	resource leaflets and			
posters.					
Overarching Milestone 2023		ching Milestone 2024			
Local directories details current. Additional resources developed					
Outputs by end of 2022: The provision of accurate accessible information on local services across all platforms.					
iocal services across all platforms.					

National Goal 1: To improve the nation's understanding of, and attitudes to,					
suicidal behaviour, mental health and wellbeing.					
National Objective 1.2: Increase awareness of available suicide prevention and					
mental health services.					
National Action: 1.2.2 Deliver targeted of		s to improve awareness of			
appropriate support services to priority g					
Local Action: 1.2.2 (a) Deliver nationally					
alongside local initiatives to increase awa		0			
issues and local support services for spe					
Lead: HSE MH, HSE MH (ROSP), HSE					
Partners: HSE H&W, Community & Volu					
Purpose: To increase awareness of mer					
local support services for specific priority	<b>•</b> ·	•			
Planned Start date and duration: Q2 20	022 ongoi	ing			
Location: Dublin North City and County					
Inputs for 2022: Materials, NOSP funding					
Inputs for 2023: Materials, NOSP funding	g, ROSP	time, partner support			
Milestones					
Milestones 2022 Q3 & Q4 National Carr					
Overarching Milestone 2023	Q1	Develop a communications			
	2023	strategy for local roll out of			
Deliver communications strategy for		national campaigns.			
Dublin North City and County with a	Q2	Review implementation of			
focus on priority groups.	2023	communications strategy.			
	Q3 Roll out Green Ribbon				
2023 Campaign and support					
World Mental Health					
Week/Month events.					
Q4 Review and update					
2023 communications strategy					
within the Communications					
Work Stream Group.					
Overarching Milestone 2024 Ongoing awareness campaigns across the area.					
Outputs by end of 2023: Communications Strategy developed. Improved					
awareness of available supports and services for priority groups.					

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**National Objective 1.2:** Increase awareness of available suicide prevention and mental health services.

**National Action: 1.2.2** Deliver targeted campaigns to improve awareness of appropriate support services to priority groups.

**Local Action:** 1.2.2 (b) Develop Child and Adolescent Mental Health Service (CAMHS) DNCC Microsite within www.hse.ie.

Lead: HSE MH CAMHs

Partners: HSE Digital, HSE Comms.

**Purpose:** To provide clear, accessible information on access to CAMHS service provision for parents/guardians and young people.

Planned Start date and duration: Q1 2022, 12 months

Location: Dublin North City and County

Inputs for 2022: Support of HSE Digital and HSE Communications.

Milestones 2022:

<ul> <li>Overarching Milestone 2022</li> <li>1) Digitisation of 'CAMHS Service info for Referrers'.</li> <li>2) Digitisation of 'CAMHS Service info for Families'.</li> </ul>	Q1 2022	Initial engagement with communications and Digital Health Team to establish CAMHS DNCC micro site within HSE website.	
3) Digitisation of 'CAMHS Made Simple' explanatory booklet.	Q2 2022	Initial engagement with communications re Digitisation of key CAMHS documents.	
	Q3 2022	Digitisation of key documents.	
	Q4 2022	CAMHS DNCC Microsite on HSE Website - live Digitisation of Key CAMHS documents within this site.	
Overarching Milestone 2023	Overarc	hing Milestone 2024	
Update as required.	Upload of new documents/guides.		
Outputs by end of 2022: Provision of provide clear, accessible information on			

access to CAMHS DNCC service for parents/guardians and young people.

**National Objective 1.2:** Increase awareness of available suicide prevention and mental health services.

**National Action: 1.2.2** Deliver targeted campaigns to improve awareness of appropriate support services to priority groups.

**Local Action:** 1.2.2 (e) Implement BeLonG To's LGBTI+ youth mental health campaign (Better Out Than In), encouraging help-seeking behaviour. **Lead:** BeLonG To

Partners:

Purpose: To increase help seeking behaviour amongst LGBTI+ Young People

Planned Start date and duration: Q1 2022

Location: Online, Nationwide

**Inputs for 2022:** Seek resource to support and promote the campaign through existing networks.

Milestones
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Overarching Milestone 2022	Q1	Review Impact of 2021
	2022	Better Out than In campaign.
Run the 'Better Out Than In' campaign	Q2	Plan 2022 Better Out Than
targeting LGBTQ+ young people.	2022	In campaign.
	Q3	Develop and roll out Better
	2022	Out Than In campaign.
	Q4	Review Impact of 2022
	2022	campaign.
Overarching Milestone 2023	Overarching Milestone 2024	
Run Better Out than In campaign.	Run Better Out Than In Campaign.	
Outputs by end of 2022: The 'Better Out Than In' campaign has been		

implemented and reviewed.

<b>National Goal 1:</b> To improve the nation's understanding of, and attitudes to,			
suicidal behaviour, mental health and wellbeing. National Objective 1.2: Increase awareness of available suicide prevention and			
mental health services.			
National Action: 1.2.2 Deliver targeted	campaign	s to improve awareness of	
appropriate support services to priority g	roups.		
Local Action: 1.2.2 (f) Undertake local s	scoping ex	ercise with Traveller women to	
identify emerging needs in relation to me			
in response to findings.			
Lead: Eastern Region THU			
Partners: Community & Voluntary Partner			
Purpose: To identify key mental health is			
and identify and co-produce culturally re-			
Planned Start date and duration: Quar	ter 3 2022	2	
<b>Location:</b> Dublin North City and County			
Inputs for 2022: Funding; staff; partner	time and i	nput	
Milestones			
Overarching Milestone 2022	Q1		
	2022		
Host event with Traveller women and <b>Q2</b> Event planning undertaken.			
relevant stakeholders to explore and	2022		
identify mental health needs of Traveller women.	Q3 Event taken place.		
Traveller women.	2022		
	Q4 Information from event		
2022 compiled into a forum			
report.			
Overarching Milestone 2023		ching Milestone 2024	
2022 world café event. Briefing note	ntify key actions emerging from To be identified following event 22 world café event. Briefing note recommendations.		
0	recomm		
and campaign materials on key issues and recommendations identified by			
event participants.			
Outputs by end of 2022: Forum overview report completed.			
Culpute by the of 2022. I found overview report completed.			

<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.					
National Action: 1.2.2 Deliver targete	ed campa	igns to improve awareness of			
appropriate support services to priorit	y groups.				
Local Action: 1.2.2 (g) Develop and	distribute	targeted Traveller mental health			
and wellbeing resources to support po	ositive me	ntal health and enable			
signposting to relevant supports.					
Lead: HSE MH (MH Service Co-ordin	ator for T	ravellers)			
Partners: ERTHU, Community Repre					
Purpose: Improve mental health and					
culturally appropriate mental health in	formation	materials with the Traveller			
Community.					
Planned Start date and duration: 20	<u> </u>	ng			
Location: Dublin North City and Cour					
Inputs for 2022: ERTHU, Primary He	alth Care	Projects and the wider Traveller			
Community partner time, funding.					
Milestones					
Overarching Milestone 2022	Q1 2022				
Development of Mental Health	Q2				
materials for the Traveller	2022				
Community.	Q3	Explore the development of a			
	2022	Traveller co-production working			
		group for the development of			
	mental health initiatives and				
	resources.				
	Q4	TBD			
	2022				
Overarching Milestone 2023 Overarching Milestone 2024					
Development of new Traveller MH	Develop	oment of new Traveller MH			
resources. resources.					
Outputs by end of 2022:					
Culturally appropriate mental health resources co-produced with Travellers.					

**National Objective 1.3:** Reduce stigmatising attitudes to mental health and suicidal behaviour at population level and within priority groups.

**National Action: 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.

Lead: NOSP

Key Partners: HSE MH, Youth sector, Non-statutory partners

**Local Action:** 1.3.1 (a) Aligned to national campaigns, develop and deliver local campaigns that reduce stigma, for example, the 'Green Ribbon' campaign and 'World Mental Health Week'.

Lead: HSE MH (ROSP), HSE Communications, See Change

Partners: CYPSCs, HSE PC, Community & Voluntary Organisations

**Purpose:** With a growth in national dialogue around mental health and wellbeing, there is still a hesitancy to talk openly about mental health, and

misunderstandings about suicidal behaviour persist. The language relating to suicide and mental health is often stigmatising. Mental health problems are a major risk factor for suicide. Campaigns/training aid education and challenges the stigma and discrimination faced by people experiencing such difficulties.

Planned Start date and duration: Q2 2022 ongoing

**Location:** Dublin North City and County

**Inputs for 2022:** ROSP and partner time, See Change resources (staff materials distribution partners)

Milestones Delivery of green ribbon campaign across the area

**Milestones 2022 Q3 & Q4** Delivery of green ribbon campaign materials to CfL partners and information sessions. Delivery of See Change Ambassador training and See Change in the Workplace workshops. Delivery of World Mental Health Week events.

Overarching Milestone 2023	Q1	Ordering of sufficient	
	2023	materials and commence	
Delivery of Green Ribbon campaign and		distribution.	
associated programmes in DNCC.	Q2	ROSPs support Green	
Delivery of additional workplace workshops.	2023	Ribbon campaign	
		through dissemination of	
		campaign resources,	
		participation in events	
		and highlighting events	
		across DNCC.	
	Q3	Deliver the national	
	2023	Green Ribbon campaign	
		including events and	
		workshops. Deliver See	
		Change in the Workplace	
		workshops.	
	Q4	Delivery of See Change	
	2023	in the Workplace	
	-		

	workshops. Deliver World Mental Health Week events.
<b>Overarching Milestone 2023</b> Reduction in mental health stigma	Overarching Milestone 2024 Reduction in mental health stigma
Outputs by end of 2022: A structured ro delivered across the area.	llout of stigma reduction campaigns

<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.				
National Action: 1.3.1 Deliver campa				
mental health difficulties and suicidal l				
stigma among priority groups.				
Lead: NOSP				
Key Partners: HSE MH, Youth sector	. Non-statuto	rv partners		
Local Action: 1.3.1 (b) Encourage pa				
schools in BeLonG To's Stand Up! Ca		5 ,		
Lead: BeLonG To	1 0			
Partners: Youth, Community and Volu	untary Partne	rs, Post-Primary Schools		
Purpose: To raise awareness of the in	mpact of iden	tity based bullying and tackle		
it.				
Planned Start date and duration: Q2	2 2022			
Location: Nationwide				
Inputs for 2022: Dept. of Education fu		akeholder support to promote		
the campaign through existing networ	ks.			
Milestones				
Overarching Milestone 2022	Q1			
	2022			
Run Stand Up! campaign 2022	Q2	Develop 2022 Stand Up!		
<b>2022</b> resources and distribute as				
		appropriate.		
	Q3	Commence Stand Up!		
	2022	training.		
	Q4	Complete training. Run		
	2022	Campaign and review		
impact				
Overarching Milestone 2023		hing Milestone 2024		
Run the Stand Up! Campaign	Run the	Stand Up! Campaign		
Outputs by end of 2022:				
Greater number of services participate	ed in the Stan	d Up Campaign. Increase in		

Greater number of services participated in the Stand Up Campaign. Increase in supportive school environments for LGBTI+ youth and reduction of mental health impact of identity based bullying with schools/youth services.

**National Objective 1.3:** Reduce stigmatising attitudes to mental health and suicidal behaviour at population level and within priority groups.

**National Action: 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.

Lead: NOSP

Key Partners: HSE MH, Youth sector, Non-statutory partners

**Local Action:** 1.3.1 (c) Launch Traveller-specific mental health website for young Travellers and parents to support good mental health, combat stigma and enable culturally appropriate signposting.

Lead: Eastern Region THU MH

Partners:

**Purpose:** To combat mental health stigma amongst Travellers youth, promote mental health awareness and signpost stakeholders to appropriate supports.

Planned Start date and duration: Q2 2022 – Q4 2024

Location: CHO Dublin North City and County

Inputs for 2022: Development of site, staff time

### Milestones

Overarching Milestone 2022		
Launch the mental health website for Travellers.	Q 2 2022	Finalise website content.
	Q3 2022	Prepare website launch.
	Q4 2022	Launch website and promote usage.
Overarching Milestone 2023 Continued promotion of the website's usage amongst target group(s) and ongoing content development.		thing Milestone 2024 Etermined.
Outputs by end of 2022		

#### Outputs by end of 2022:

Development of a mental health promotion/anti-stigma website targeting Traveller youth, their parents/guardians/carers and other professionals.

**National Objective 1.3:** Reduce stigmatising attitudes to mental health and suicidal behaviour at population level and within priority groups.

**National Action: 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.

Lead: NOSP

Key Partners: HSE MH, Youth sector, Non-statutory partners

**Local Action:** 1.3.1 (d) Develop a local communications campaign to reduce stigmatising attitudes to mental health amongst Travellers and align with the forthcoming Traveller Mental Health Promotion programme.

Lead: HSE MH (MH Service Co-ordinator for Travellers)

Partners: ERTHU, HSE H&W

**Purpose:** To raise awareness of the attitudes towards mental health and how this can lead to further mental health issues if not addressed or understood.

Planned Start date and duration: Q3 2022, 12 months

Location: Dublin North City and County

Inputs for 2022: Staff time

**Milestones** 

WINCSLOTICS			
Overarching Milestone 2022	Q1 2022		
Plan campaign targeting the Traveller community.	Q2 2022		
	Q3 2022	Develop a working group.	
	Q4 2022	Undertake community consultation.	
<b>Overarching Milestone 2023</b> Deliver campaign alongside associated materials.	<b>Overarching Milestone 2024</b> Continue campaign delivery.		
<b>Outputs by end of 2022</b> : Mental health promotion plan targeting the Traveller Community planned.			

### Goal 2



Goal two of *Connecting for Life*, Ireland's national strategy to prevent suicide 2015-2024, 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 *Connecting for Life* Dublin North City and County there are 9 actions under goal two led by statutory, community and voluntary section stakeholders. The implementation of all actions under goal two are within the remit of Work Stream 2: Interagency Protocols.

National Goal 2: To support local comp suicidal behaviour.	munities' capa	acity to prevent and respond to		
<b>National Objective 2.1:</b> Improve the co suicide through planned multi-agency a		community level responses to		
National Action: 2.1.1 Implement consistent, multi-agency suicide prevention				
action plans to enhance communities' c emerging suicide clusters and murder s	suicide. The pl	ans will be the responsibility		
of HSE Mental Health Division and align				
Organisations structure, Local Economi Young People's Services Committee's		•		
Lead: HSE MH	(011 00) 000			
Key Partners: DECLG, LA, HSE, CHO NOSP	s, Acute Hosp	bitals, Non-statutory partners,		
Local Action: 2.1.1 (a) Implement, mor				
Connecting for Life Action Plan Dublin I Lead: HSE MH, HSE MH (ROSP)	North City and	l County.		
<b>Partners:</b> CfL implementation partners				
Purpose: Ensure that Connecting for L	ife Dublin Nor	th City and County		
Implementation and Action Plan 2022-2	2024 is implen	nented, monitored and		
reported on. Planned Start date and duration: Ong	noing			
<b>Location:</b> CHO Dublin North City and C				
Inputs for 2022: Funding, staff and par				
Milestones				
Overarching Milestone 2022	verarching Milestone 2022 Q1 2022			
Develop reporting system for the	Q2 2022	Launch Plan.		
implementation.	Q3	Commence		
	2022	implementation and establish project		
		management system.		
		Report on action progress.		
	Q4 2022	Report on action progress.		
Overarching Milestone 2023		hing Milestone 2024		
Continued monitoring of action		ed monitoring of action		
implementation.		ntation. Conduct consultation mentation and prepare for a		
Outputs by end of 2022: Connecting for				

implementation structures embedded in CHO DNCC.

**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 integration of suicide prevention actions into local LECP, CHO area CYPSC's Plans.

Lead; HSE MH (ROSP)

Partners: Local Authorities, Fingal CYPSC, Dublin City North CYPSC

**Purpose:** Embed suicide prevention actions in policies, plans and decision-making work to bring diverse communities, services, organisations, healthcare providers and government agencies together to achieve a shared vision.

Planned Start date and duration: Q1 2022, 12-18 months.

Location: CHO Dublin North City and County

Inputs for 2022: Staff time, guidance

Milestones

Overarching Milestone 2022 Develop opportunities to create and foster interagency and internal partnerships to	Q1 2022	CYPCs engaged to embed suicide prevention/mental health promotion actions into their local service plans.
support community wellbeing.	Q2 2022	
	Q3 2022	
	Q4 2022	Work with partners in developing a shared vision around suicide prevention measures/actions for inclusion in local LECP's.
<b>Overarching Milestone 2023</b> Suicide prevention/mental health promotion actions included in appropriate plans.	<b>Overarch</b> i TBD	ing Milestone 2024
Outputs by end of 2022: Suicide prevention plans.	actions are	included in appropriate

<b>National Goal 2:</b> To support local communities' capacity to prevent and respond to suicidal behaviour.				
National Objective 2.2: Ensure that accurate information and guidance on				
effective suicide prevention are provided				
Family Resource Centres, Sports Organ	isations).	, , , , , , , , , , , , , , , , , , ,		
National Action: 2.2.1 Provide commun		organisations with guidelines		
and protocols on effective suicide prever	ntion.			
Lead: NOSP				
Key Partners: Non-statutory partners		ide Oritigal Despenses Disc to the		
Local Action: 2.2.1 (a) Align the draft D				
National Guidelines Developing a Comm Lead: HSE MH (ROSP)	iunity Res	ponse to Suicide.		
<b>Partners:</b> HSE MH, NOSP, Community	and Volun	ntary partners		
<b>Purpose</b> : To develop a community respo		· · ·		
suicide, inclusive of consultation with key		· · ·		
Planned Start date and duration: Q3 2		-		
Location: CHO Dublin North City and C	ounty			
Inputs for 2022: Staff time				
Milestones				
Overarching Milestone 2022	Q3	Complete review of existing		
	2022	DNCC CRP plan against		
Establish a CRP Working Group and		national guidance.		
0	commence alignment with national <b>Q4</b> Establish a CRP working			
CRPs guidelines.	2022	group.		
	Q1	Consult with key community		
	2023	stakeholders.		
	Q2	Launch CRP.		
2023				
Overarching Milestone 2023: Launch CRP		hing Milestone 2024:		
	aunch CRP Ongoing review and implementation of the CRP as necessary.			
Outputs by end of 2022: DNCC CRP reviewed and draft plan developed.				
outputs by the of 2022. Divoto officienced and drait plan 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).		
National Action: 2.2.1 Provide community-based organisations with guidelines and protocols on effective suicide prevention. Lead: NOSP		
<ul> <li>Key Partners: Non-statutory partners</li> <li>Local Action: 2.2.1 (b) Build capacity within FRCs locally around suicide prevention and mental health promotion. This will include: supporting the delivery of the Suicide Prevention Code of Practice and the implementation of the Framework 'Building Resilient Communities'.</li> <li>Lead: National FRC Mental Health Promotion Project, HSE MH (ROSP)</li> <li>Partners: Family Resource Centres</li> </ul>		
<ul> <li>Purpose: To provide training, support and best practice guidance around suicide prevention and mental health promotion for staff and volunteers of FRCs in DNCC</li> <li>Planned Start date and duration: Q1 2022, 2 years</li> <li>Location: Dublin North City and County</li> <li>Inputs for 2022: ROSP time and expertise</li> </ul>		
Milestones		
Overarching Milestone 2022	Q1 2022	Deliver 1 COP training to FRCs in DNCC.
Delivery of COP training to FRCs in DNCC.	Q2 2022	Launch the updated Framework 'Building Community Resilience.'
	Q3 2022	Start to deliver new programs identified in the Framework.
	Q4 2022	Continue to deliver training and Framework actions.
Overarching Milestone 2023 Continue to roll out actions associated with the Framework. On-going delivery of training to FRCs as need arises. Outputs by end of 2022: FRC staff are av prevention approaches.	<ul> <li>with the Framework. On-going delivery of training to FRCs as need arises.</li> </ul>	

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

**National Objective 2.3:** Ensure the provision and delivery of training programmes on suicide prevention to community-based organisations.

**National Action: 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.

Lead: NOSP

Key Partners: Non-statutory partners

**Local Action:** 2.3.2 (a) Continue to deliver awareness training programmes in line with National Training Plan prioritising professionals & volunteers across community-based organisations, particularly those who come into regular contact with people who are vulnerable to suicide.

Lead: HSE MH (ROSP)

Partners: Statutory and community & voluntary partners

**Purpose**: To increase awareness, knowledge and skills in dealing with people in crisis and connecting with services.

Planned Start date and duration: Ongoing

**Location:** Dublin North City and County

Inputs for 2022: Funding, staff, partners and trainer time

### Milestones

<b>Overarching Milestone 2022</b> Provide a suite of training workshops on suicide prevention and self-harm.	Q1 2022	Provide workshops on suicide prevention and self-harm. Provide quarterly statistics to NOSP.
	Q2 2022	Provide workshops on suicide prevention and self-harm. Provide quarterly statistics to NOSP.
	Q3 2022	Provide workshops on suicide prevention and self-harm. Provide quarterly statistics to NOSP.
	Q4 2022	Provide workshops on suicide prevention and self-harm. Provide quarterly statistics to NOSP.
<b>Overarching Milestone 2023</b> Provide workshops on suicide prevention and self-harm.	<b>Overarching Milestone 2024</b> Provide workshops on suicide prevention and self-harm.	
Outputs by end of 2022: Delivery of 30- public.	+ workshop	os to professionals and the

<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.			
National Action: 2.3.2 Deliver training and av		programmes in line with the	
National Training Plan prioritising professiona			
organisations, particularly those who come in			
vulnerable to suicide.	to regular t		
Lead: NOSP			
Key Partners: Non-statutory partners		the Broom receive the	
Local Action: 2.3.2 (b) Continue to deliver ar	•		
health training and eLearning programmes ac	cross DNC	<b>.</b>	
Lead: Jigsaw			
Partners: BeLonG To Youth Services, FAI, L			
Purpose: To increase awareness and skills o			
working/volunteering with children and young	people in I	relation to mental health.	
Planned Start date and duration: Ongoing			
Location: Dublin North City and County			
Inputs for 2022: Staff time and expertise, sup			
learning and training materials, local venues,	online acce	ess and resources.	
Milestones			
Overarching Milestone 2022	Q1	Plan delivery of 2022 training	
Increase the range, scope, and reach of	2022	and begin implementation (75	
mental health promotion workshops/		+ workshops/programmes).	
programmes and eLearning courses		Advertise eLearning	
through delivery of the following:		programmes amongst	
One Good Coach		stakeholders.	
One Good Adult	Q2	Continued Implementation	
<ul> <li>Self-care for One Good Adults</li> </ul>	2022		
	2022		
Supporting Young People's Mental			
Health	Q3	Continued Implementation	
Ways for Wellbeing Programme	2022	Continued implementation	
<ul> <li>One Good School (30+ schools)</li> </ul>	2022		
<ul> <li>"My Mental Health What Helps"</li> </ul>			
<ul> <li>RALLY: Mental Health Promotion</li> </ul>	0.4	O su tinue d'Insulans su tation	
Champions	Q4	Continued Implementation	
<ul> <li>Mental health and wellbeing in</li> </ul>	2022		
schools (eLearning).			
Overarching Milestone 2023	Overarch	ning Milestone 2024	
Continued rollout of the Jigsaw 2022		d rollout of the Jigsaw 2023	
programme as well as new mental health		ne as well as new mental health	
programmes and initiatives as appropriate.		nes and initiatives as	
	appropria		
Outputs by end of 2022: Increased knowledge of youth mental health awareness and			
development of akilla related to youth montal	• •		

**Outputs by end of 2022**: Increased knowledge of youth mental health awareness and development of skills related to youth mental health and wellbeing amongst stakeholders working/volunteering with young people in CHO DNCC and young people themselves.

National Goal 2: To support local communities' capacity to prevent and respond to suicidal behaviour. National Objective 2.3: Ensure the provision and delivery of training programmes on suicide prevention to community-based organisations. **National Action: 2.3.2** Deliver training and awareness programmes in line with the National Training Plan prioritising professionals and volunteers across communitybased organisations, particularly those who come into regular contact with people who are vulnerable to suicide. Lead: NOSP Key Partners: Non-statutory partners Local Action: 2.3.2 (c) Support and deliver, in conjunction with the local community, a series of wellbeing programmes to support the mental health of the community. Lead: Dublin Northwest Partnership, Dublin City Council (TBC) Partners: Purpose: To provide a range of group and individual supports to address the multifaceted needs of the community and support the running of wellbeing events and programmes. Planned Start date and duration: ongoing Location: Dublin North City and County Inputs for 2022: SICAP funding, staff time **Milestones Overarching Milestone 2022** Q1 Deliver wellbeing supports to Provide interventions and 2022 vulnerable groups vía DNP. programmes to vulnerable groups Promote existing DCC mental through DNP and DCC health/wellbeing programmes (e.g. Healthy Ireland at your Library). Q2 Continue to implement and 2022 promote programmes. Q3 Continue to implement and 2022 promote programmes. Q4 Develop strategy and actions for 2022 next iteration of Social inclusion programme. **Overarching Milestone 2023 Overarching Milestone 2024** Ongoing delivery of programmes and Ongoing delivery of programmes and initiatives. initiatives. Outputs by end of 2022: Delivery of a range of programmes by Dublin Northwest Partnership and Dublin City Council (TBC) to vulnerable groups.

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

**National Objective 2.3:** Ensure the provision and delivery of training programmes on suicide prevention to community-based organisations.

**National Action: 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.

Lead: NOSP

Key Partners: Non-statutory partners

**Local Action:** 2.3.2 (d) Deliver WRAP training to relevant mental health staff to assist them to look after their own mental health and to support the mental health and wellness of the people they work with.

Lead: HSE MH, RCNME

#### Partners:

**Purpose**: To promote staff health and wellbeing by providing them with an opportunity to develop their own Wellness Recovery Action Plan.

Planned Start date and duration: Q4 2022, 1 year

**Location:** Dublin North City and County

Inputs for 2022: Trainer and staff time

#### Milestones

Overarching Milestone 2022	Q4 2022	Deliver 1 WRAP training
Deliver 1 WRAP training in CHO DNCC.	Q1 2023	Deliver 1 WRAP training
	Q2 2023	
	Q3 2023	
<b>Overarching Milestone 2023</b> Deliver 2 WRAP trainings to HSE MH staff and other staff.	<b>Overarching Milestone 2024</b> TBD	
Outputs by end of 2022: Staff will be empowered to support their own wellness		

goals through the development of personal Wellness Recovery Action Plans.

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

behaviour.			
	ision and (	delivery of training programmes on suicide	
<b>National Objective 2.3:</b> Ensure the provision and delivery of training programmes on suicide prevention to community-based organisations.			
National Action: 2.3.3 Deliver a range of		ealth promoting programmes in	
		improving the mental health of the whole	
population and priority groups.			
Lead: HSE H&W			
Key Partners: HSE MH, DOH			
Local Action: 2.3.3 (a) Support access a	and partici	pation by local community and voluntary	
		mes e.g. Stress Control, Engage, Minding	
Your Wellbeing and Social Prescribing.			
Lead: HSE H&W			
Partners: HSE MH (ROSP), Community	& Volunta	ry Partners	
Purpose: To rollout suite of evidenced-b	ased ment	tal health promotion and stress prevention/	
		populations (including healthcare workers)	
and the general population to improve m			
Planned Start date and duration: Q1 2		ng	
Location: CHO Dublin North City and Co			
		Supporting partners to access populations	
for delivery of programmes. 4 Social Pres	scription L	ink Workers	
Milestones			
Overarching Milestone 2022	Q1	HSE HW staff trained and supported to	
	2022	deliver programmes. Training timetable	
Health promotion programmes		developed.	
delivered to HSE staff, other targeted		4 Social Prescribing Link Workers	
communities and the general		appointed and delivering social	
population.		prescriptions in targeted communities.	
	Q2	Continued delivery of programmes and	
	2022	social prescribing to target populations.	
		Regional network established for SP	
		Link Workers to support delivery.	
		New module of Engage programme	
	0.0	delivered.	
	Q3	Continued delivery of programmes and	
	2022	social prescribing to target communities.	
	Q4	Continued delivery of programmes and	
	2022	social prescribing to target communities.	
		Review delivery of annual programme	
Overarching Milestone 2022	Overere	and plan 2023 delivery.	
Overarching Milestone 2023		hing Milestone 2024	
Continued delivery of relevant programmes.			
Outputs by end of 2022: Local communities and targeted populations provided access to			
and participated in free relevant health promotion programmes e.g. Stress Control. Engage.			

and participated in free relevant health promotion programmes e.g. Stress Control, Engage, Minding Your Wellbeing and Social Prescribing.

# Goal 3



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.

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, Traveller Community, 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 *Connecting for Life* Dublin North City and County there are 22 actions under goal three led by mainly by statutory services in Dublin North City area. The majority of actions under Goal 3 will be implemented within the remit of Work Stream 2: Interagency Protocols. The exception to this are actions 3.1.2(e), 3.3.7(a), 3.3.7(b), 3.3.7(c) and 3.3.7(d) which are within the remit of Work Stream 3: Psychotherapeutic Supports.

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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.		itistisse and services at Driver w	
National Action: 3.1.3 Develop and deliver	largeted in	nitiatives and services at Primary	
Care level for priority groups. Lead: HSE			
Key Partners: NOSP			
<b>Local Action:</b> 3.1.3 (a) Support the roll out of	of suicido r	revention training, mental health	
promotion programmes and appropriate reso			
relevant stakeholders.			
Lead: HSE Older Persons			
<b>Partners:</b> Statutory and Community and Vol	untarv Par	tners	
Purpose: To increase awareness and capac			
stakeholders to reduce suicidal behaviour.	,		
Planned Start date and duration: Q3 2022	– Q3 2023	3	
Location: Dublin North City and County			
Inputs for 2022: Staff time, promotional mat	erials, acc	ess to training	
Milestones	· · · ·	<u> </u>	
Overarching Milestone 2022	Q3	Consult with stakeholders	
· · · · · · · · · · · · · · · · · · ·	2022	regarding mental health	
Increased awareness of specific needs of		information and education	
older persons in relation to mental health.		needs.	
Improved understanding amongst service		Scope skillset amongst partners	
providers about services available and		in providing mental health	
how to access same.		education and support to older	
Older persons and their carers/families		persons and their carers.	
empowered to access supports, education	Q4	Disseminate appropriate	
and services.	2022	information on training and other	
Increase in help seeking behaviour.		programmes to stakeholders.	
	Q1	Disseminate appropriate	
	2023	information on training and other	
	00	programmes to stakeholders.	
	Q2	Disseminate appropriate	
	2023	information on training and other	
Overershing Milestone 2022	0.0000000	programmes to stakeholders.	
Overarching Milestone 2023 Continued delivery of relevant training and	TBD	ching Milestone 2024	
programmes to stakeholders.	עסו		
	anding of i	ssues affecting older persons and	
<b>Outputs by end of 2022</b> : Improved understanding of issues affecting older persons, and their carers, including mental health. Improved education and understanding amongst			
older persons and their carers of how to recognise suicide ideation and support older			
persons with mental health needs. Improved	•		
available to support older persons to support		•	

**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 (b) Continue to provide counselling through the HSE NCS Counselling in Primary Care service (CIPC DNCC) to adults experiencing psychological difficulties where issues of suicidal ideation may present.

Lead: CIPC DNCC

Partners: HSE MH, HSE PC

**Purpose:** Counselling through CIPC provides clients with the opportunity to engage in evidence based counselling/psychotherapy via a choice of mediums [phone/video/in person]. This facilitates open exploration of suicidal ideation, assessment of risk as well as support to develop healthy coping strategies and enhance self-regulation skills. These interventions help reduce the number of people who engage in suicidal behaviours as evidenced through the CIPC National Evaluation Study.

Planned Start date and duration: Q1 2022, ongoing

Location: Dublin north City and County

**Inputs for 2022:** Access to appropriate counselling rooms in accessible locations across DNCC is essential to provide a timely, consistent and effective service to clients. Additional contract counsellors are required to respond to the increased demand and to ensure a timely response to clients in need. To implement the recommendations of the National CIPC evaluation particularly in relation to accessibility and waiting times. Delivery of ongoing training of counsellors in Emotion Focused Therapy in collaboration with TCD, as it has been demonstrated as an effective evidence based approach.

Milestones

<b>Overarching Milestone 2022</b> Continue to provide an effective and high quality service, while	Q1 2022	Monitor client satisfaction with CIPC – introduction of online client satisfaction survey.	
striving to reduce waiting times.	Q2 2022	Develop implementation plan for recommendations of CIPC national evaluation study.	
	Q3 2022		
	Q4 2022	Review clinical outcomes of counselling.	
Overershing Milestone 2022	Overerebi	Overershing Milestone 2024	

Overarching Milestone 2023 Overarching Milestone 2024

**Outputs by end of 2022**: By the end of 2022 it is expected that approximately 2,500 clients will have been referred to CIPC. 7,500 counselling sessions will have been offered. Implementation plan for recommendations of CIPC national evaluation will be in place and commenced. Results of client satisfaction with the service will be analysed and reviewed. Analysis of clinical outcomes [including level of risk presenting] for clients attending during 2022 initiated.

National Goal 3: 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		in or effective approaches to	
National Action: 3.1.3 Develop and deliv		d initiatives and services at Primary	
Care level for priority groups.	er largele	u milalives and services at Filmary	
Lead: HSE PC			
Key Partners: NOSP			
Local Action: 3.1.3 (c) Develop culturally	annronria	ate bereavement supports for	
Travellers who have been bereaved by su		ale bereavement supports for	
Lead: HUGG, HSE Mental Health Service		ators for Travellers	
Partners: HSE MH (ROSP), Local Travel			
Counselling Service, Exchange House			
<b>Purpose</b> : To develop Traveller peer led, of	ulturally a	appropriate supports for Travellers	
bereaved by suicide.		appropriate supports for Travellers	
Planned Start date and duration: Q1 20	22 18 mo	nths	
<b>Location:</b> Dublin South, Kildare and Wes			
Dublin South East and East Wicklow and			
Inputs for 2022: Staff time.			
Milestones			
	01		
Overarching Milestone 2022	Q1	Working group to meet to	
<b>—</b> 1 1 16 11 17	2022	continue to develop Traveller	
To develop culturally appropriate, peer		specific, peer led, suicide	
led, suicide bereavement supports for	-	bereavement supports.	
members of the Traveller Community.	Q2	Continue working group	
	2022	meetings.	
		Run information evening for	
	00	Traveller Community in CHO 9.	
	Q3	Continue working group	
	2022	meetings.	
		Run information evenings for	
		Traveller Community in CHO 6 &	
	04	7.	
	Q4 2022	Continue working group	
	2022	meetings.	
		Explore training needs of	
Overarching Milestone 2022	Overer	identified peer facilitators.	
Overarching Milestone 2023 Establish Traveller suicide		ching Milestone 2024 e running Traveller Suicide	
		8	
bereavement group where feasible.bereavement group where feasible.Outputs by end of 2022: Feasibility of establishing a Traveller bereavement support			
group scoped and potential (peer) facilitat	-		
group scoped and potential (peer) facilitat			

National Goal 3: To target approaches to reduce suicidal behaviour and improve mental

National Objective 3.1: Improve the implementation of effective approaches to reducing				
suicidal behaviour among priority groups.				
National Action: 3.1.3 Develop and de	eliver targ	eted initiatives and services at Primary Care		
level for priority groups.				
Lead: HSE PC				
Key Partners: NOSP				
· / · · · ·		out of national initiatives to promote positive		
mental health among the homeless cor	nmunity i	ncluding training of staff and the delivery of		
appropriate programmes.				
Lead: HSE PC				
Partners: HSE MH (ROSP)				
Purpose: Those affected by homelessness are evidenced as at higher risk of suicide. To				
work with homeless accommodation providers and personnel to enhance suicide prevention				
skills and post suicide supports.				
Planned Start date and duration Q1 2022 – Q4 2024				
Location: CHO Dublin North City and County				
Inputs for 2022: Support of ROSP Team, Engagement with providers, targeted advertising				
of training programmes				
Milestones				
Overarching Milestone 2022 Q1 Training availability disseminated through				
_	2022	PCSI and DRHE & HSE Funded		
		Homeless Training Co-Ordinator to ensure		
Provide Start and other relevant		that staff in private emergency		
quicide provention and postvention		accommodation raceive Start training		

FIDVIDE Start and Uther relevant		that stall in private energency	
suicide prevention and postvention		accommodation receive Start training.	
supports to private and public	Q2	Continue to provide Start and other	
homeless accommodation providers.	2022	relevant suicide prevention and	
		postvention supports to private and public	
		homeless accommodation providers.	
	Q3	Training availability disseminated through	
	2022	providers & HSE funded Homeless	
		Training Co-Ordinator to ensure that all	
		1547 staff in Private Emergency	
		Accommodation receive START training.	
	Q4	Personnel supported to engage with	
	2022	training.	
Overarching Milestone 2023	Overarching Milestone 2024		
Continue rollout across services.	Continue to provide Start and other relevant suicide		
	prevention and postvention supports to private and		
	public homeless accommodation providers.		
Outputs by end of 2022: Improved suicide prevention skills for staff working across private			
	-	- •	

and public homeless accommodation.

health among priority 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 (e) Continue to support residents of Balseskin Centre with a Health Screening Service including primary care psychology input.

Lead: PC

Partners: DCEIY

**Purpose**: Identify health and mental health needs migrants accessing the international protection and/or direct provision system. Provide access to short-term primary care level: a) symptom management & wellbeing groups to those in short-stay, and b) evidence-based treatments for those in longer stay arrangements.

Planned Start date and duration: 2021, ongoing

Location: Dublin North City and County

**Inputs for 2021**: funding, staff time, materials, supporting partners, SW, PC Psychology, Nursing,

**Inputs for 2022:** funding, staff time, materials, supporting partners, SW, PC Psychology, Nursing,

**Milestones** List the primary activities/programmes/events or strategies to be delivered in each year. For 2022 break them down quarterly.

Milestones 2022 Q3 & Q4: Health screening appropriate referral

Overarching Milestone 2023 Provide health screening and referral	Q1 2023	Explore increase capacity of service to respond to increased demand
to support the overall health needs of those seeking shelter	Q2 2023	Maintain service levels relative to demand
Provide access to primary care level:	Q3 2023	Maintain service levels relative to demand
a) mental health screening, b) symptom management & wellbeing groups to those in short-stay, and b) evidence-based treatments for those in longer stay direct provision arrangements, subject to resources.	Q4 2023	Maintain service levels relative to demand
Overarching Milestone 2023 Increase capacity as required	Overarching Milestone 2024 Continue to provide service	

**Outputs by end of 2024**: reduce incidents of ill health & mild-to-moderate mental health issues among refugees and those seeking international protection

National Goal 3: To target approaches to reduce suicidal behaviour and improve			
mental health among priority groups.			
National Objective 3.1 Improve the impl		n of effective approaches to	
reducing suicidal behaviour among priori			
National Action: 3.1.3 Develop and deliv	ver targete	d initiatives and services at	
Primary Care level for priority groups.			
Lead: HSE PC			
Key Partners: NOSP			
Local Action: 3.1.3 (f): Deliver Taking C	ontrol and	Finding My Way training to	
people with mental health problems and	the genera	l community.	
Lead: Shine			
Partners:			
Purpose: To ensure that recovery suppo	rts and pro	ogrammes are available to the	
priority groups in CHO9.			
Planned Start date and duration: Q1, 2	022 ongoir	ng	
Location: CHO Dublin North City and Co	ounty		
Inputs for 2022: Staff and facilitator time			
Milestones			
Overarching Milestone 2022	Q1	Deliver the Taking Control	
	2022	programme	
	Q2	Deliver 1 Taking Control	
Delivery of relevant programmes.	2022	(face to face)	
	Q3	Deliver 1 Taking Control	
	2022	(face to face) and 1 Finding	
My Way.			
	Q4	Deliver 1 Taking Control	
	2022	(face to face)	
Overarching Milestone 2023	Overarc	hing Milestone 2024	
Continued delivery of programmes. Continued delivery of programmes.			
Outputs by end of 2022: Approximately 50 individuals to have received mental			
health recovery programmes and supports.			
•••••			

National Goal 3: To target approaches mental health among priority groups.	s to reduce	suicidal behaviour and improve		
	<b>National Objective 3.1:</b> Improve the implementation of effective approaches to			
reducing suicidal behaviour among price	•			
National Action: 3.1.5 Provide and su				
professionals, including frontline menta				
providers. This training will improve rec				
suicidal behaviour among people vulne				
Lead: NOSP				
Key Partners: HSE PC, MH, Acute Ho	spitals			
Local Action: 3.1.5 (a) Support the rol	l out and p	romote staff engagement with the		
suite of Suicide Prevention and Interve				
Suicide Prevention across CHODNCC		· ·		
Lead: HSE MH (ROSP), HSE HR, HSI	E PC			
Partners: HSE Comms, HSE PC				
Purpose: To increase staff awareness	and improv	ve recognition of, and response to,		
suicide risk and suicidal behaviour amo	ong people	vulnerable to suicide using		
CHODNCC Health Services.	0			
Planned Start date and duration: 202	22			
Location: CHO Dublin North City and	County			
Inputs for 2022: NOSP Funding, use of		en application, support of		
stakeholders and partners, participation				
Inputs for 2023: Funding, promotion o				
Milestones	3			
Overarching Milestone 2022	Q1	Heads of Service disseminate		
	2022	information to all personnel within		
Delivery and advertisement of	2022	their remit and support staff to		
training to staff.		participate in training programmes		
		relevant to their roles.		
	Q2	Training included in HR Training		
	2022	Calendar. Start link/training		
		programmes included in		
		CHODNCC Induction process.		
	Q3	ROSPs disseminate resources and		
	2022	information for Mental Health		
		Month events.		
	Q4	Continue to promote training		
	2022 programme availability.			
Overarching Milestone 2023		ning Milestone 2024		
Sustained training to health and				
social care professionals, including				
frontline mental health service staff	and response to, suicide risk and suicidal			
and primary care health providers. behaviour among people vulnerable to				
suicide.				

**Outputs by end of 2022**: Achieve high levels of staff awareness in both statutory and community and voluntary sector. All staff aware of and engaging with relevant training programmes.

	· · · ·		
National Goal 3: To target approaches to reduce suicidal behaviour and improve			
mental health among priority groups.			
National Objective 3.1: Improve the imp		on of effective approaches to	
reducing suicidal behaviour among priorit			
National Action: 3.1.6 Continue the deve	elopment o	of mental health promotion	
programmes with and for priority groups,	including t	the Youth Sector.	
Lead: HSE H&W			
Key Partners: HSE MH, NOSP, Youth se	ector, Non	-statutory partners	
Local Action: 3.1.6 (a) Continue to prom	ote a rang	e of evidenced based	
programmes and initiatives to improve me	ental healt	h and wellbeing amongst young	
people and priority groups.			
Lead: HSE MH, CYPSCs, Local Authoriti	ies, HSE ⊢	1&W	
Partners: Community and Voluntary part	iners		
Purpose: To map and promote a range of	of mental h	ealth and wellbeing programmes,	
initiatives and services to inform and sup	port acces	s for the public and priority groups.	
Planned Start date and duration: Q3 20	022, 2 yea	rs	
Location: North Dublin City and County			
Inputs for 2022: Staff time, funding, infor	rmation sh	aring	
Milestones			
Overarching Milestone 2022	Q3	Map the current provision of	
5	2022	programmes and initiatives	
To promote targeted approaches to		currently in place to promote	
reduce suicidal behaviour and improve		positive mental health amongst	
mental health among priority groups.		priority groups.	
	Q4	Continued promotion and roll-	
	2022	out of appropriate programmes.	
	Q1	Continued promotion and roll-	
	2023	out of appropriate programmes.	
	Q2	Continued promotion and roll-	
	2023	out of appropriate programmes	
		and expand where feasible.	
Overarching Milestone 2024: Continued promotion and roll-out of programmes and			
initiatives.			
Outputs by end of 2022. Coordinated ar	oproach in	the provision of a range of	

**Outputs by end of 2022**: Coordinated approach in the provision of a range of programmes, initiatives and services to promote positive mental health amongst priority groups, including young people.

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<b>National Goal 3:</b> 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 priori				
National Action: 3.1.6 Continue the dev				
programmes with and for priority groups,	including the	e Youth Sector.		
Lead: HSE H&W				
Key Partners: HSE MH, NOSP, Youth s				
Local Action: 3.1.6 (b) Continue to prov				
through existing programmes run by BeL				
conjunction with mental health and youth	work partne	rs.		
Lead: BeLonG To				
Partners: Pieta, MyMind, Insight Matters				
<b>Purpose:</b> To ensure young LGBTI+ peopreference working with them have the				
professionals working with them have the		support and/or signpost		
them to appropriate services. Planned Start date and duration: Ongo	ing			
<b>Location:</b> Dublin North City and County <b>Inputs for 2022:</b> Staff time, partner time				
training	, delivery of t	lerapeutic services and		
Milestones:				
Overarching Milestone 2022	Q1 2022	Continued delivery of		
Development and roll out of Safe and		therapeutic groups.		
Supportive Services model.	Q2 2022	Continued delivery of		
Continue and build on therapeutic		therapeutic groups.		
interventions and supports.	Q3 2022	Continued delivery of		
Interventions and supports. Delivery of e-learning module to	Q3 2022			
	Q3 2022 Q4 2022	Continued delivery of		
Delivery of e-learning module to		Continued delivery of therapeutic groups. Continued delivery of therapeutic groups.		
Delivery of e-learning module to		Continued delivery of therapeutic groups. Continued delivery of therapeutic groups. Delivery of training to		
Delivery of e-learning module to professionals.	Q4 2022	Continued delivery of therapeutic groups. Continued delivery of therapeutic groups. Delivery of training to professionals		
Delivery of e-learning module to professionals. Overarching Milestone 2023	Q4 2022 Overarchii	Continued delivery of therapeutic groups. Continued delivery of therapeutic groups. Delivery of training to professionals ng Milestone 2024		
Delivery of e-learning module to professionals. Overarching Milestone 2023 Continued delivery of supports to	Q4 2022 Overarchin Continued	Continued delivery of therapeutic groups. Continued delivery of therapeutic groups. Delivery of training to professionals <b>ng Milestone 2024</b> delivery of supports to		
Delivery of e-learning module to professionals. Overarching Milestone 2023 Continued delivery of supports to professionals, parents/guardians and	Q4 2022 Overarchin Continued professiona	Continued delivery of therapeutic groups. Continued delivery of therapeutic groups. Delivery of training to professionals ng Milestone 2024 delivery of supports to als, parents/guardians and		
Delivery of e-learning module to professionals. Overarching Milestone 2023 Continued delivery of supports to professionals, parents/guardians and LGBTI+ young people as needed.	Q4 2022 Overarchin Continued professiona LGBTI+ yo	Continued delivery of therapeutic groups. Continued delivery of therapeutic groups. Delivery of training to professionals <b>ng Milestone 2024</b> delivery of supports to als, parents/guardians and ung people as needed.		
Delivery of e-learning module to professionals. Overarching Milestone 2023 Continued delivery of supports to professionals, parents/guardians and LGBTI+ young people as needed. Outputs by end of 2022: Delivery of cou	Q4 2022 Overarchin Continued professiona LGBTI+ yo unselling and	Continued delivery of therapeutic groups. Continued delivery of therapeutic groups. Delivery of training to professionals <b>ng Milestone 2024</b> delivery of supports to als, parents/guardians and ung people as needed. support by Pieta,		
Delivery of e-learning module to professionals. Overarching Milestone 2023 Continued delivery of supports to professionals, parents/guardians and LGBTI+ young people as needed. Outputs by end of 2022: Delivery of cou MyMind.org and Insight Matters. Provisio	Q4 2022 Overarchin Continued professiona LGBTI+ yo unselling and on of regular p	Continued delivery of therapeutic groups. Continued delivery of therapeutic groups. Delivery of training to professionals <b>ng Milestone 2024</b> delivery of supports to als, parents/guardians and ung people as needed. support by Pieta, peer support groups to		
Delivery of e-learning module to professionals. Overarching Milestone 2023 Continued delivery of supports to professionals, parents/guardians and LGBTI+ young people as needed. Outputs by end of 2022: Delivery of cou	Q4 2022 Overarchin Continued professiona LGBTI+ yo unselling and on of regular p arents/carers	Continued delivery of therapeutic groups. Continued delivery of therapeutic groups. Delivery of training to professionals <b>ng Milestone 2024</b> delivery of supports to als, parents/guardians and ung people as needed. support by Pieta, peer support groups to		

Notional Cool & To tanget any model to the			
National Goal 3: To target approaches t mental health among priority groups.	o reduce s	uicidal benaviour and improve	
	Iomontatio	on of effective approaches to	
<b>National Objective 3.1:</b> Improve the implementation of effective approaches to reducing suicidal behaviour among priority groups.			
National Action: 3.1.6 Continue the dev		of mental health promotion	
programmes with and for priority groups,			
Lead: HSE H&W	literataling		
Key Partners: HSE MH, NOSP, Youth s	ector. Non	-statutory partners	
Local Action: 3.1.6 (c) Ensure suicide p			
Connecting for Life Dublin North City and			
Mental Health Service Co-Ordinator for Y		5	
Lead: HSE MH			
Partners: HSE MH (ROSP)			
Purpose: To ensure a coordinated appro			
within the role of the Mental Health Servi	ce Co-Ord	inator for Youth.	
Planned Start date and duration: Q3 2	022		
<b>Location:</b> Dublin North City and County			
Inputs for 2022: Staff time and training (	where req	uired)	
Milestones			
Overarching Milestone 2022	Q3	Hold quarterly meeting.	
-	2022	Promote training and	
Support suicide prevention awareness		relevant initiatives within the	
within the youth sector.		youth sector.	
	Q4	Hold quarterly meeting.	
	2022	Promote training and	
		relevant initiatives within the	
		youth sector.	
	Q1	Hold quarterly meeting.	
	2022	Promote training and	
		relevant initiatives within the	
	00	youth sector.	
	Q2	Hold quarterly meeting.	
	2022	Promote training and relevant initiatives within the	
		youth sector.	
Overarching Milestone 2023	Overar	ching Milestone 2024	
TBD	TBD		
Outputs by end of 2022: Increased know		d awareness of suicide	
prevention practices within the youth sec			

<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.				
National Action: 3.1.6 Continue the deve		f mental health promotion		
programmes with and for priority groups,		•		
Lead: HSE H&W				
Key Partners: HSE MH, NOSP, Youth se	ector, Non-	statutory partners		
Local Action: 3.1.6 (d) Continue to suppo				
provision of suicide awareness/alertness				
Lead: HSE MH (ROSP)	0	1 3		
Partners: Deaf Community				
Purpose: Provide evidence based suicide	e preventio	n training to members of the		
deaf community and professionals workin				
Planned Start date and duration: Q3 20				
<b>Location:</b> Dublin North City and County				
Inputs for 2022: Staff time				
Milestones				
Overarching Milestone 2022/23	Q3	Link with Deaf Community		
	2022	partners around scheduling		
Deliver suicide awareness training to		of training.		
the deaf community.	Q4	Deliver training as required		
	2022			
	Q1 Continued delivery of			
	2023	training as required.		
	Q2	Continued delivery of		
	2023	training as required.		
Overarching Milestone 2023:		ing Milestone 2024:		
Delivery of suicide prevention training		of suicide prevention training to		
to the Deaf Community as required. the Deaf Community as required.				
Outputs by end of 2022: Delivery of training to the Deaf Community to increase				

awareness, knowledge and skills regarding suicide prevention.

<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.				
National Action: 3.1.6 Continue the develop		ntal health promotion		
programmes with and for priority groups, inclu-		•		
Lead: HSE H&W				
Key Partners: HSE MH, NOSP, Youth secto				
Local Action: 3.1.6 (e) Support access and				
education centres and teacher training in rele		•		
programmes including the feasibility of teach Lead: HSE H&W	er training ir	i mormai education centres.		
Partners: ETBs				
	-h 4 100	in a second in a		
Purpose: To promote a whole school approa	ich to wellbe	ang promotion.		
Planned Start date and duration: Ongoing Location: Dublin North City and County				
Inputs for 2022: HP&I/HWB programme to b	o delivered	to primary and post primary		
teachers through education centres as agree				
Milestones				
Overarching Milestone 2022	Q1	Primary school training:		
	2022	Zippy's friends, Healthy		
Delivery of evidenced based training to		Eating Policy		
teaching staff.		Development, Promoting		
		Wellbeing through physical		
		activity.		
		Post-primary school		
		training: Healthy food made easy, Mindout, Know		
	the Score, Skills for SPHE.			
	Q2	Continued delivery of Q1		
	2022	training.		
	Q3			
	2022			
	Q4	Continued delivery of Q1		
	2022	training plan for 2023		
Overershing Milestone 2022	Overerch	delivery.		
Overarching Milestone 2023		ing Milestone 2024		
Continued delivery of training as appropriate.	appropriat	l delivery of training as		
Outputs by end of 2022: HP&I Officers DNC				
for primary and post primary teachers though				

National Goal 3: To target approaches to reduce suicidal behaviour and improve			
mental health among priority groups.			
National Objective 3.1: Improve the imple		of effective approaches to	
reducing suicidal behaviour among priority			
National Action: 3.1.6 Continue the deve	•	•	
programmes with and for priority groups, i	ncluding the	e Youth Sector.	
Lead: HSE H&W			
Key Partners: HSE MH, NOSP, Youth se			
Local Action: 3.1.6 (f) Support the develo	pment and	local roll out of national	
Traveller Mental Health Promotion program	mme to loca	I Traveller organisations and	
Traveller Primary Health Care Projects.			
Lead: Pavee Point; Traveller Health Advis	ory Forum;	HSE Health and Wellbeing	
Partners: DNCC Local Traveller Organisa	itions		
Purpose: To promote wellbeing & early in	tervention a	mongst Traveller Primary	
Health Care Workers.			
Planned Start date and duration: Q2 202	22		
Location: Dublin North City and County			
Inputs for 2022: Ring fenced funding and	staff to driv	e forward.	
Milestones			
Overarching Milestone 2022	Q3	Programme content	
<b>–</b>	2022	finalised.	
Programme content developed.	Q4	Programme recruitment.	
	2022	Ũ	
	Q1	Programme rollout.	
2023			
	Q2		
	2023		
Overarching Milestone 2023	Overarc	hing Milestone 2024	
Programme rollout commenced.		entified at end of 2023.	
Outputs by end of 2022: Programme dev	veloped and	rolled out.	

National Goal 3: To target approaches to	o 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.				
National Action: 3.2.1 Continue the roll				
intervention and prevention of alcohol an		•		
Primary Care.	-	-		
Lead: HSE PC				
Key Partners: HSE H&W				
Local Action: 3.2.1 (a) Continue to roll of				
Intervention for Problem Alcohol and Sub	ostance U	se training programme to		
relevant health care professionals. Lead: HSE PC				
Partners: Statutory and Community Stak	ahaldare			
<b>Purpose</b> : To prepare professionals to as				
alter their alcohol or drug consumption.	5055, and	in necessary, assist a person to		
Planned Start date and duration: Q1 20	022. onac	ping		
Location: Dublin North City and County	,			
Inputs for 2022				
Milestones				
Overarching Milestone 2022	Q1	SAOR facilitators are		
	2022	requested to offer training		
Roll out the SAOR Screening and		within DNCC		
Brief Intervention for Problem Alcohol	Q2	Ensure that SAOR facilitators		
and Substance Use training	2022	are utilised by offering training		
programme to relevant health care		within DNCC by offering		
professionals.		dates, locations to all primary		
		care settings, Community GP services, Section 39		
		organisations		
	Q3	SAOR Training carried out		
	2022			
	Q4	SAOR Training carried out		
	2022	and reported to National		
		Office for Social Inclusion		
Overarching Milestone 2023:		ching Milestone 2024		
Increase in numbers people who have		e in numbers people who have		
received SAOR training.		d SAOR training.		
Outputs by end of 2022: Training model set out and dates/facilitators and				
locations is embedded in Social Inclusion Alcohol Program by the new Alcohol Co- Ordinator.				

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

**National Objective 3.3** Enhance the supports for young people with mental health problems or vulnerable to suicide.

**National Action: 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. **Lead:** HEA

Key Partners: NOSP

**Local Action:** 3.3.3 (a) Implement the HEA Student Mental Health and Suicide Prevention Framework in TUDublin and the JED Campus Foundation programme in DCU. **Lead:** DCU, TUDublin

**Partners:** HEA, JED Campus Foundation, HSE MH (ROSP)

**Purpose**: To ensure that required suicide prevention and postvention policies and protocols are in place and to support a whole university student mental health wellbeing and suicide prevention plan is established and implemented.

Planned Start date and duration: September 2021, 4 years

Location: Dublin North City and County (DCU and TUDublin)

**Inputs for 2022:** TUDublin/DCU staff time, specialist input, supports/funding for implementation.

Milestones 2022

Overarching Milestone 2022	Q1 2022	Implementation of CMS system (in line with 'Improve' theme of the framework) and	
Implementation of the National		delivery of Students in Distress training to	
Student Mental Health and Suicide Prevention Framework within		staff (TUDublin). Complete an internal audit and a DCU Student Healthy Minds Survey	
TUDublin and the JED.	Q2 2022	Delivery of 'Safe Talk' each semester (TUDublin). Cross DCU working group begins student MH&W strategic planning. DCU MH&W report outlining areas of best practice and suggested enhancements.	
	Q3 Implementation of framework in TUDublin.		
	2022 The DCU Student Mental Health and		
	Suicide Prevention Strategic Plan with		
	action steps for implementation is in		
		process.	
	Q4	Continued implementation of the	
	2022	frameworks in TUDublin and DCU.	
Overarching Milestone 2023	Overarching Milestone 2024		
Continued rollout of frameworks	Continued rollout of frameworks and associated		
and associated	policies/programmes as applicable.		
policies/programmes.			
Outputs by end of 2022: Increased	number (	of staff trained in suicide prevention and	

**Outputs by end of 2022**: Increased number of staff trained in suicide prevention and mental health awareness (TUDublin). Baseline assessment of DCU systems, policies, services, as applied to student mental health, a DCU Student Healthy Minds Survey and a two day cross campus stakeholders strategic planning consultation process completed.

National Goal 3: To target approaches to reduce suicidal behaviour and improve			
mental health among priority groups.			
National Objective 3.3: Enhance the supports for young people with mental			
health problems or vulnerable to suicide.			
National Action: 3.3.4: Implement the N		nti-Bullying Action Plan	
including online and homophobic bullying	<b>]</b> .		
Lead: DES			
Key Partners: HSE H&W, NOSP			
Local Action: 3.3.4 (a) Continue to prov			
LGBTI+ mental health, Stand Up! Campa	aign and S	Safe and Supportive Schools.	
Lead: BeLonG To			
Partners: Post-Primary Schools			
Purpose: Increase capacity of profession	nals worki	ng with LGBTI+ young people	
to reduce the impact of identity based bu	llying.		
Planned Start date and duration: Q1 2	022, 1 yea	ar	
<b>Location:</b> Dublin North City and County	and Natio	nal	
Inputs for 2022: Staff time, Education se	ector supp	port	
Milestones 2022:			
Overarching Milestone 2022	Q1	Delivery of Safe &	
5	2022	Supportive Schools	
Continued roll-out of training to		programme.	
professionals on supporting LGBTI+	Q2	Delivery of Safe &	
youth.	2022	Supportive Schools	
		programme.	
	Q3	Delivery of Stand Up	
	2022	training.	
	Q4	Delivery of LGBTI+ Youth	
	2022	Mental Health Training.	
Overarching Milestone 2023	Overar	ching Milestone 2024	
Continued delivery of training to		ed delivery of training to	
professionals.	profess		
Outputs by end of 2022: Delivery of a s			
professionals on mental health, creating safer spaces for LGBTI+ youth and			
tackling identity based bullying.			

<b>National Goal 3:</b> To target approaches to red health among priority groups.	duce suici	idal behaviour and improve mental	
National Objective 3.3: Enhance the supports for young people with mental health			
problems or vulnerable to suicide.			
National Action: 3.3.6 Deliver early interven	tion and p	osychological support service for	
young people at primary care level. Lead: HSE PC			
Key Partners: HSE MH			
Local Action: 3.3.6 (a) Continue to provide	Jiqsaw's b	prief early intervention service to	
people aged 12 to 25 in Dublin 15, North Fing	•	•	
growth and accessibility of the services throu			
Lead: Jigsaw	0 1		
Partners:			
Purpose: Provide tailored community-based	help for y	oung people experiencing mild to	
moderate mental health difficulties in three Ji			
sessions, on-line video calls or the Jigsaw te	xt-based of	chat service through Jigsaw.ie).	
Planned Start date and duration: On-going			
Location: Dublin North City and County			
Inputs for 2022: Staff time and expertise, su	pporting p	partners participation	
Milestones			
Overarching Milestone 2022	Q1	Provision of therapeutic support	
· · · · · · · · · · · · · · · · · · ·	2022	in line with local service plans	
Continued provision of therapeutic		and national policy.	
supports to young people living in Dublin	Q2	Continued provision of	
North City and County.	2022	therapeutic support.	
	Q3	Continued provision of	
	2022	therapeutic support.	
	Q4	Continued provision of	
	2022	therapeutic support.	
Overarching Milestone 2023	Overar	ching Milestone 2024	
Continued rollout of the Jigsaw 2022	Continu	ed rollout of the Jigsaw 2023	
programme as well as new mental health	program	nme as well as new mental health	
programmes and initiatives as appropriate.	program	nmes and initiatives as	
	appropr	riate.	
Outputs by end of 2022: Delivery of therap	eutic cont	acts in line with national KPI's and	
local service plans.			

National Goal 3: To target approaches to reduce suicidal behaviour and improve					
mental health among priority groups.					
National Objective 3.3: Enhance t		ts for young people with mental			
health problems or vulnerable to su					
National Action: 3.3.6 Deliver earl	•				
service for young people at primary	care leve				
Lead: HSE PC					
Key Partners: HSE MH					
		of tele psychiatry and computerised			
CBT (such as 'Pesky Gnats') to you	ing people	accessing HSE PC Psychology			
where appropriate.					
Lead: Mental Health					
Partners: Primary Care (Psycholog		us ta dali un assurutaria d ODT			
Purpose: Primary care psychology					
(e.g. Pesky Gnats, Silvercloud) & te					
appointments through Attend Anyw					
evidence-based treatments to your Planned Start date and duration:					
		4 Inclusive			
Location: Dublin North City and County					
Inputs for 2022: licenses, availability of Psychology Assistants to support					
computerised approaches where a					
Milestones: Assistant Psychologis		•			
Overarching Milestone 2022	Q1	Continuation of existing			
	2022	programmes.			
Ensure that computerised CBT	Q2	Continuation of existing			
and telepsychology provides	2022	programmes.			
accessible evidence based	Q3	Backfill of outstanding			
treatments to young people	2022	Psychology Assistant posts.			
requiring psychological services.	Q4	Training of Psychology			
	2022	Assistants & increasing access			
	to computerised CBT.				
Overarching Milestone 2023		hing Milestone 2024			
Maintain enhanced service		enhanced service relative to			
relative to staffing.	staffing.				
		o scalable/accessible psychological			
therapies at the prevention/early-intervention stage or with mild-to-moderate					
severity.					

National Goal 3: To target approaches to mental health among priority groups.	o reduce s	suicidal behaviour and improve		
<b>National Objective 3.3:</b> Enhance the supports for young people with mental health				
problems or vulnerable to suicide.				
National Action: 3.3.7: Deliver early inte	rvention a	and psychological support service for		
young people at secondary care level, inc				
Lead: HSE MH				
Key Partners:				
Local Action: 3.3.7 (a) Progress the CA	MUS Initia	tive to reduce waiting times 2022		
Lead: HSE MH		live to reduce waiting times 2022.		
Partners:				
<b>Purpose:</b> To ensure timely access to me	ntal haalth	tratmont for young poople across		
DNCC to contribute to reducing the risk of		r treatment for young people across		
Planned Start date and duration: Q1 20		20		
<b>Location:</b> Dublin North City & County		ig		
Inputs for 2022: Allocated time for CAM	He manag	amont to carry out raviow		
Inputs for 2023: Increase in CAMHs per				
Milestones				
	. ,	· .		
Milestones 2021 Q3 & Q4 Commence re	eview of re	eterrals		
Overarching Milestone 2022	Q1	Service review of all CAMHS		
	2022	team waiting lists with overview of		
CAMHS to reduce waiting time for the		numbers waiting more than 1 year		
service to below one year by		and over.		
December 2022.	Q2	Assess suitable referrals for		
	2022	partner agencies.		
Recruitment of 4 additional Health &		Recruitment commences of		
Social Care staff to participate in		Waiting List Initiative		
National Waiting List Initiative from		employments and CAMHS		
June 2022.		Service Development Posts.		
	Q3	Waiting List Initiative staff		
Recruitment of 5 additional frontline	2022	recruited.		
CAMHS Service Development Posts		25 Service users to be removed		
under 2022 Service plan to assist		from Waiting List.		
CAMHS services in North County	Q4	20 Service users to be removed		
Dublin.	2022	from waiting list.		
		5 additional frontline CAMHS		
		service development posts		
		recruited and filled.		
Overarching Milestone 2023		hing Milestone 2024		
Build upon early momentum of Waiting		ning of additional Community		
List Initiative 2022 by establishing new		teams to meet community need in		
targets to reduce waiting time to below		Sharing the Vision, HSE Health		
9 months within first half of 2023 and		s and Sláintecare to continue to		
below 6 months by end of 2023.		vait times for the service user		
		as low as possible.		
Outputs by end of 2022: Improved imple				
to services to reduce suicidal behaviour a	among you	ing people.		

National Goal 3: To target approaches to reduce suicidal behaviour and improve			
mental health among priority groups.			
National Objective 3.3: Enhance the supports for young people with mental health			
problems or vulnerable to suicide.			
National Action: 3.3.7: Deliver early int			
young people at secondary care level, ir	ncluding C	AMHS.	
Lead: HSE MH			
Key Partners:			
Local Action: 3.3.7 (b) Progress the relocation of Day Hospital to CAMHS DNCC at 44			
Nth Great Georges Street.			
Lead: HSE MH			
Partners: HSE Estates			
Purpose: To enhance and develop supp			
people with mental health difficulties wh			
Planned Start date and duration: Q1 2	2022 ongoi	ing	
Location: Dublin North City & County			
Inputs for 2021: Working group to facili			
Inputs for 2022: Support from MH man	agement, l	Estates and Procurement	
Milestones			
Overarching Milestone 2022	Q1	Day Hospital Transfer to 44	
	2022	NGGS.	
Establishment of CAMHS Day	Q2	Memorandum of Understanding	
Hospital Service within the CHO 9	2022	signed off in relation to provision	
Community CAMHS service delivery		of education to Day Hospital	
structure.		Service Users.	
	Q3	Completion of Training needs	
	2022	analysis of Day Hospital Staff.	
		Consolidate building of Multi-	
		Disciplinary Team with recruitment	
		of Psychologist, Senior Medical	
		Social Worker and Occupational	
		Therapist.	
	Q4 Core performance data		
	2022	consolidated into a CAMHS	
		DNC&C Day Hospital Annual	
		Report 2022 to facilitate informed	
		management decisions for future	
		planning and enhancement of the	
		Day Hospital for 2023.	
Overarching Milestone 2023	ng Milestone 2023 Overarching Milestone 2024		
Review 6 month pilot project of	Ongoing development of the CAMHS		
CAMHS Deliberate Self Harm Nurses	DNC&C Day Hospital will culminate in the		
based at Temple Street and further		hing of a Crisis Assessment Team	
developing based on findings for 2023.	for CAMHS DNC&C Service.		
Outputs by end of 2022: CAMHS Day Hospital operational at 44 North Great Georges			
St and linking closely with the 8 Community CAMHS teams delivering enhanced			
community supports to the service user.			

community supports to the service user.

National Goal 3: To target approaches to reduce suicidal behaviour and improve				
<u> </u>	mental health among priority groups. <b>National Objective 3.3:</b> Enhance the supports for young people with mental health			
-	appons ior	young people with mental health		
problems or vulnerable to suicide.	omiontion			
National Action: 3.3.7: Deliver early int				
for young people at secondary care leve Lead: HSE MH	a, including			
Key Partners:		re Developmental / Fisher and		
Local Action: 3.3.7 (c) Progress the CA	AIVINS Neu	ro Developmental / Enhanced		
ADHD service operation.				
Lead: HSE MH				
Partners:	fan als Halma	a such such such such Nerver		
Purpose: To ensure effective treatment				
Developmental issues and provide an el				
Planned Start date and duration: Q2 2		ng		
Location: Dublin North City & County		<b>T</b>		
Inputs for 2021: Recruitment of clinician				
Inputs for 2022: Support of MH Manage	ement to fa	acilitate service		
Milestones				
Milestones 2021 Q3 & Q4 Team recrui	ited			
Overarching Milestone 2022	Q1	Secure CHO 9 approval for the		
CAMHS Enhanced ADHD Neuro	2022	establishment and recruitment		
Developmental (EAND) Team		of a core CAMHS Enhanced		
operational		ADHD Neuro Developmental		
		(EAND) Team.		
	Q2	Recruitment and basing of		
	2022	initial core team at		
		Grangegorman Primary Care		
		Centre		
		EAND CAMHS Team		
operational and delivering frontline clinical service				
Q3 QB Testing Pilot commenced				
	2022	5		
	Q4	Review of first 6 months with		
	2022	plans to further develop the		
		service based on findings of		
	that review.			
Overarching Milestone 2023	Overarc	ching Milestone 2024		
2023	2024			
Expand the core team to a full	Continu	e to consolidated EAND CAMHS		
complement of an MDT Team	team lin	kages with relevant universities to		
facilitate innovation and research				
Outputs by end of 2022: Improved implementation of effective approaches to				

**Outputs by end of 2022**: Improved implementation of effective approaches to reducing suicidal behaviour among young people with identified risk factors.

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

**National Objective 3.3:** Enhance the supports for young people with mental health problems or vulnerable to suicide.

**National Action: 3.3.7:** Deliver early intervention and psychological support service for young people at secondary care level, including CAMHS.

Lead: HSE MH

Key Partners:

**Local Action:** 3.3.7 (d) Progress the development and operation of CAMHS DNCC Eating Disorder Team.

Lead: HSE MH

Partners: HSE Estates

**Purpose:** To reduce mortality rates and support recovery in those affected by eating disorders as eating disorders have the highest mortality and morbidity of all of the mental health conditions

Planned Start date and duration: Q1 2022, 6 months

Location: Dublin North City and County

**Inputs for 2021:** CAMHS Eating Disorder (ED) Team CHO DNCC approved by HSE National Mental Health in line with National Clinical Programme for Eating Disorders and its Model of Care. 10 headcount posts approved including Consultant Psychiatrist and multi-disciplinary health and social care staff.

**Inputs for 2022:** Recruitment of the CAMHS ED Team by Q4 2022. CAMHS DNCC and HOS Office to work with HSE Estates to identify suitable premises to locate ED Team in line with stipulations of the National Clinical Programmes for Eating Disorders Model of Care.

Milestones

Overarching Milestone 2022 Recruitment of ED Team.	Q1 2022	National MH approval secured for CAMHS ED Team.
Secure suitable premises.	Q2 2022	Preliminary work completed in relation to commencing the recruitment process for CAMHS ED Team. Engagement with HSE Estates to secure appropriate premises commenced.
	Q3 2022	Recruitment of CAMHS ED Team continues. Engagement with HSE Estates re premises continues.
	Q4 2022	CAMHS ED Team Recruited. CAMHS Eating Disorder Team secured.
Overarching Milestone 2023 Implement national strategy in conjunction with ED teams across other CHO's in the effective delivery of specialist eating disorder service. Plan and define engagement with stakeholders (Hospitals, GPs, community services networks, regional	Overarching Milestone 2024 Consolidate the enhancement and further development of CAMHS ED Team. Continue to work with Adult Mental Health colleagues on the development of CAMHS ED Hub.	

inpatient units & paediatric units) in	
relation to delivery of service for	
Eating Disorders.	
Outputs by end of 2022: ED Team is rec	cruited. Suitable premises for ED Team is
secured.	

## Goal 4



Goal four of *Connecting for Life*, Ireland's national strategy to reduce suicide 2015-2024, 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 *Connecting for Life* Dublin North City and County there are 21 actions under goal four primarily led by statutory services. The implementation of all actions under goal four are within the remit of Work Stream 3: Psychotherapeutic Supports.

**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 4.1.1:** Provide a coordinated uniform and quality assured 7/7 service and deliver pathways of care from primary to secondary mental health services for all those in need of specialist mental health services. **Lead:** HSE MH

Key Partners: HSE PC, Acute Operations, NGOs

**Local Action:** 4.1.1 (a) Support the development and operation of 7/7 mental health service in North Dublin.

Lead: HSE MH

### Partners:

**Purpose**: The community based mental health weekend team aims to provide a safe and effective alternative to inpatient care for service users who are in a mental health crisis during the weekends (Saturdays, Sundays and Bank Holidays from 09.00- 17.15pm inclusive). According to the vision for change working group a mental health weekend team offers immediate, short term, intensive treatment and support during a crisis period (2012). The service is staffed by mental health practitioners with relevant experience and expertise who have a link to the ADON and Consultant on call for advice and support.

Planned Start date and duration: Q2 2022 Re start the Weekend team Location: North Dublin Mental Health Service

**Inputs for 2022:** Full complement of staff across nursing and HSCP to support the roster for the service. All vacancies approved for recruitment. Medical and senior nurse management support to provide clinical governance OHH.

Inputs for 2023: Maintain staffing levels to operate service Milestones

Milestones 2021 Q3 & Q4 Plan in place for service development

<b>Overarching Milestone 2022</b> To have an out of hours mental health support service in operation in the North Dublin Mental Health Service.	Q1 2022 Q2 2022	Agreed not to restart till Q3 Actively fill HSCP vacancies. Steering group to meet to plan the stages to restart the weekend team.
	Q3 2022	Identify the team members, provide team enhancement and training. Agree the KPI's.
	Q4 2022	Monitor and evaluate the operations of the team KPI's
Overarching Milestone 2023 TBA	Overarching Milestone 2024 TBA	

**Outputs by end of 2022**: Weekend team in place and preforming as per the operational policy. Reduced admissions to the Approved centre. Reduced presentations to the emergency department. Enhanced service for NDMHS service users.

		ency and care pathways of r.
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 beh	naviour.
National Action: 4.1.1: Provide a coor service and deliver pathways of care fro services for all those in need of special Lead: HSE MH Key Partners: HSE PC, Acute Operation	om primary t ist mental he	o secondary mental health
Local Action: 4.1.1 (b) CAMHS DNCC		v to enhance working
relationships with service level and loca		
in 2022.		
Lead: HSE MH (CAMHS)		
Partners: Jigsaw		
<b>Purpose</b> : To continue to enhance and with the aim of CAMHS striving to play care being as streamlined and effective	its part in inf	fluencing available pathways of
Planned Start date and duration: Q1		
Location: Dublin North City and Count		0
Inputs for 2022: Regular meetings betweet Referral Coordinators (Jigsaw).	ween Team	Coordinators (CAMHS) and
Milestones		
Overarching Milestone 2022	Q1	CAMHS and Jigsaw
	2022	organising local
Enhanced working relationships and		engagements for the Fingal
collaborations with Jigsaw.		based teams and the Dublin
		15 teams in January 2022.
	Q2 2022	TBC
	Q3	
	2022	
	2022 Q4	

moderate to severe continuum of care of Child & Adolescent mental health.

<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.			
National Action: 4.1.1: Provide a coordin			
service and deliver pathways of care from	primary to	secondary mental health	
services for all those in need of specialist	mental hea	alth services.	
Lead: HSE MH			
Key Partners: HSE PC, Acute Operations			
Local Action: 4.1.1 (c) Support the devel	opment an	d operation of 7/7 mental	
health service in Dublin North City.			
Lead: HSE MH			
Partners:	uppers of up	akanda. Ta provida	
Purpose: To increase access for service			
increased support and reduced presentati Planned Start date and duration: Q2 20			
<b>Location:</b> Dublin North City MHS	zz, unguin	y	
Inputs for 2022: Clinical Nurse Specialist, OT and Social Work staff time			
Milestones			
Overarching Milestone 2022 Q1			
	2022		
Establish the 7/7 service for known MH	Q2	Commence the 7/7 service	
service users. <b>2022</b> in Dublin North City Me			
		Health Service.	
	Q3	Continue to provide the	
	2022	service and audit service	
delivery.			
	Q4	Implement	
	2022	recommendations from the	
audit.			
Overarching Milestone 2023		ning Milestone 2024	
Continuation of the 7/7 service.		tion of the 7/7 service.	
Outputs by end of 2022: Audit the service. Increased supports to the service			
users and reduction in attendance to Emergency Departments.			

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 s			
National Action: 4.1.1: Provide a coordi			
service and deliver pathways of care from		-	
services for all those in need of specialist	t mental he	alth services.	
Lead: HSE MH			
Key Partners: HSE PC, Acute Operation			
Local Action: 4.1.1 (d) Engage with the			
Health/NOSP/NSRF) to review the SCAN		-	
options to deliver the service more efficie	ently, includ	ing flexibility in appointment	
times and locations.			
Lead: HSE MH			
Partners: National Lead, HSE PC, Acute			
Purpose: To provide accessible local set			
behaviour with defined pathways to appro	•		
Planned Start date and duration: Q2 20	,	INS	
Location: North Dublin Mental Health Se			
<b>Inputs for 2022:</b> Create a SCAN hub in Coolock Primary Care Centre that all service users from the North Dublin Mental Health Service community can access.			
Milestones:		Service community can access.	
Milestones 2021 Q3 & Q4: Proposal to I	ocate SCA	N within service based within	
Primary Care.			
Overarching Milestones for 2022	Q1		
	2022		
Dian and develop Original Origin			
Plan and develop Suicide Crisis	Q2		
Assessment Service during 2022	2022	Dress and an animal of the	
	Q3	Proposed opening of the	
	2022	SCAN hub.	
	Q4	Ongoing	
	0000		
Overersking Miles(sigs 2000	2022		
Overarching Milestone 2023	Overarc	hing Milestone 2024	
Provided a SCAN service to those	Overarcl Assess p	people in the community via	
Provided a SCAN service to those experiencing suicidality in the North	Overarcl Assess p SCAN, re	eople in the community via esulting in reduced inpatient	
Provided a SCAN service to those	Overarcl Assess p SCAN, re admissio	people in the community via	

**Outputs by end of 2022**: Assess service users in the community via SCAN. Resulting in reduced inpatient admissions and supporting GPs in providing community based services. **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**: **4.1.1**: Provide a coordinated uniform and quality assured 24/7 service and deliver pathways of care from primary to secondary mental health services for all those in need of specialist mental health services.

Lead: HSE MH

Key Partners: HSE PC, Acute Operations, NGOs

**Local Action:** 4.1.1 (e) Support the development of the SCAN Service within CAMHS.

Lead: HSE MH

Partners:

**Purpose:** To increase capacity in CAMH's DNCC to provide vital services aligned with National Clinical Programme for Self-Harm & Suicide, best practice guidelines, Sharing the Vision & CFL

Planned Start date and duration: Q1 2023

Location: Dublin North City and County

**Inputs for 2022**: Planning to commence when Day Hospital and ED self-harm posts in Temple Street Children's University Hospital have been consolidated and embedded during the course of 2022.

Inputs for 2022: Planning group, proposal and budget

### Milestones

HS pilot site.
ite becomes
ne 6 month
ngs of tinue to nhance SCAN e coordination mmes of ospital and Harm into isis eam

**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 delivery pathways of care for those with co-morbid addiction and mental health difficulties.

Lead: HSE MH

Key Partners: HSE PC, Acute Operations

**Local Action:** 4.1.2: Implement in local service delivery, the national model of care for those with co-morbid addiction and mental health difficulties when published.

Lead: HSE MH

Partners: HSE PC

**Purpose:** To support those with co-morbid addiction and mental health difficulties access to appropriate supports.

Planned Start date and duration TBD

Location: Dublin North City and County

**Inputs for 2023:** Support implementation of national guidance (where available). **Milestones** 

Overarching Milestone 2023	Q1 2023	TBD
Support the implementation of the Model of Care for Dual Diagnosis in	Q2 2023	TBD
when published	Q3 2023	TBD
	Q4 2023	TBD
Overarching Milestone 2024		

Support the implementation of the Model of Care for Dual Diagnosis when published

**Outputs by end of 2023**: The development of additional supports to those experiencing co-morbid addiction and mental health difficulties

National Goal 4: 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.				
National Action: 4.1.4: Deliver a uniform				
services in accordance with existing and re				
have self-harmed or are at risk of suicide.		9		
Lead: HSE MH				
Key Partners: Acute Operations				
Local Action: 4.1.4 Implement the SSHA	ARP Guide	lines when published.		
Lead: HSE MH				
Partners:				
Purpose: To improve staff awareness, as	sessment a	and responses to the risk of		
suicide and self-harm and improve service	e delivery.			
Planned Start date and duration: TBC				
Location: Dublin North City and County				
Inputs for 2022: TBC				
Milestones				
Overarching Milestone 2022	Overarching Milestone 2022 Q1 2022			
	Q2 2022			
Where available, commence	Q3 2022	ТВС		
implementation of the SSHAARP programme recommendations.	Q4 2022	ТВС		
programme recommendations.	QT LULL	100		
Overarching Milestone 2023         Overarching Milestone 2024				
Where available, commence				
implementation of the SSHAARP		tation of the SSHAARP		
programme recommendations. programme recommendations.				
<b>Outputs by end of 2022</b> : TBC: Awaiting publication of SSHAARP programme findings.				

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

**National Action 4.1.5**: Deliver a comprehensive approach to managing selfharm presentations through the HSE Clincal Care Programme for the assessment and management of patients presenting with self-harm to emergency departments.

Lead: HSE MH

Key Partners: HSE Acute Hospitals

**Local Action:** 4.1.5 (a) Continue the implementation of the HSE Clinical Care Programme for the assessment and management of patients presenting with self-harm to Emergency Departments in the Mater Hospital, Beaumont Hospital and Connolly Hospital, including training ED staff on responding to self-harm. **Lead:** HSE MH

Partners: HSE Acute Hospitals

**Purpose**: To align with the National Clinical Care Programme to support people who are vulnerable to suicidal behaviour.

Planned Start date and duration: Q3 2022, ongoing

Location: Dublin North City and County

Inputs for 2022: Staff training and resources

#### Milestones

Overarching Milestone 2022	Q1 2022			
To enhance, consistency and care				
pathways of services for people vulnerable to suicidal behaviour through the Clinical Care Programme.	Q2 2022			
	Q3 2022	Provision of training as required to staff working throughout the emergency department. Increase staffing where resources allow.		
	Q4 2022	Commence implementation of recommendations from the revised Clinical Care Programme.		
<b>Overarching Milestone 2023</b> Continue the implementation of the HSE Clinical Care Programme.	Continue	the implementation of the ical Care Programme.		
Outputs by end of 2022: Audit of the presentations to the emergency department and implement recommendations based on audit findings.				

<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.				
National Action 4.1.5: Deliver a compre				
presentations through the HSE Clincal C				
management of patients presenting with				
Lead: HSE MH				
Key Partners: HSE Acute Hospitals				
Local Action: 4.1.5 (b) Extend the Clinic	cal Nurse	Specialist in Self-Harm to a		
seven day service in the Mater and Con				
Lead: HSE MH	<i>,</i> ,			
Partners: Mater and Connolly Hospitals				
Purpose: To expand service provision v		urces allow.		
Planned Start date and duration: Q2 2				
Location: Dublin North City and County				
Inputs for 2021: funding, staff, materials				
Inputs for 2022: funding, staff, materials				
Milestones				
Overarching Milestone 2022	Q1			
	2022			
Continue implementation of the				
Clinical Care Programme (7/7) in the	Q2			
Mater.	2022			
	Q3	Continue to recruit additional		
	2022	CNS for implementation of		
		the Clinical Care Programme		
		in the Mater Hospital.		
	Q4	Seek additional resources		
	2022	for the implementation of the		
		Clinical Care Programme in		
		Connolly Hospital.		
Overarching Milestone 2023	Overarc	ching Milestone 2024		
Continue implementation of the	Continu	e implementation of the Clinical		
Clinical Care Programme (7/7) in the	Care Pr	ogramme (7/7) in the Mater.		
Mater and seek additional resources				
for Connolly Hospital.				
Outputs by end of 2022: Where possible, increase staffing resources for the				
implementation Clinical Care Programme in the Mater and Connolly Hospitals.				

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

**National Action 4.1.5**: Deliver a comprehensive approach to managing selfharm presentations through the HSE Clincal Care Programme for the assessment and management of patients presenting with self-harm to emergency departments.

Lead: HSE MH

Key Partners: HSE Acute Hospitals

**Local Action:** 4.1.5 (c) Continue to support the operation of the Clinical Care Programme for Self-Harm in CHI Temple Street.

Lead: CHI @ Temple Street

Partners: HSE Mental Health

**Purpose**: To support the EDMHT service in CHI Temple St to deliver the National Clinical Programme for the assessment and management of patients who present to the emergency department following a self-harm act.

Planned Start date and duration Q3 2022, Permanent

Location: CHI @ Temple Street

Inputs for 2022: Staff / Time/ Funding / Training / Workspace / Support Milestones

Overarching Milestone 2022 That the EDMHT service in CHI Temple St delivers the National Clinical Programme for the assessment and management of patients who present to	Q1 2022	
	Q2 2022	
the emergency department following a self-harm act.	Q3 2022	Integrate service See and treat patients in ED
	Q4 2022	Integrate service See and treat patients in ED
Overarching Milestone 2023	Overarching Milestone 2024	
Continue to integrate service	Expand service	
Outputs by end of 2022: Treatment of DSH patients to ED including next of kin		

to receive support and advice on suicide prevention. The patient will be linked with appropriate pathway of care, and both the patient and their general practitioner will receive a written care plan.

**National Objective 4.2:** Improve access to effective therapeutic interventions (e.g. counselling, DBT, CBT) for people vulnerable to suicide.

**National Action: 4.2.1** Deliver accessible, uniform, evidence based psychological interventions, including counselling, for mental health problems at both primary and secondary care.

Lead: Mental Health Operations

Key Partners: NOSP, NGOs

**Local Action:** 4.2.1 (a) To pilot the role out of Schema therapy groups across Dublin North City and County Adult Mental Health Services.

Lead: HSE MH Psychology

Partners: DNCC AMH Management teams, CHO9 Connecting for Life

**Purpose:** Personality disorders are in the top 5 for admission to inpatient units and top 3 for readmission across Dublin North City. These numbers are reflected in referrals to Psychology where personality disorder and trauma represent the third and fourth highest number of referrals. Schema therapy has demonstrated efficacy in the treatment of people with suicidal ideation, trauma and personality disorder with decreases in symptom severity, inpatient admission and an increase in guality of life. (Fassbinder, 2016).

Planned Start date and duration: Q1 2022 – Q 4 2024

Location: Dublin North City and County

Inputs for 2021: Funding for staff training and supervision.

**Inputs for 2022:** Funding for staff supervision. Identification of staff lead for provision of Schema group therapy. Identification of staff supports needed. Identify clinical group space.

Materials for group delivery.

**Milestones 2021 Q3 & Q4:** Train staff in group schema therapy Dublin North City and County. Submit funding proposal for group schema therapy supervision Dublin North City.

Dubin North Oity.		
Overarching Milestone 2022 Roll out schema group therapy programme across Dublin North City and County.	Q1 2022	Develop plan for provision of group schema therapy across adult mental health services. Develop training plan. Submit funding for group supervision Dublin North County. Develop evaluation process
	Q2 2022	Obtain materials for group delivery and funding for same. Roll out 5 schema groups across DNCC adult mental health services.
	Q3 2022	Continue schema group delivery.
	Q4 2022	Staff attend day 4 of Group schema therapy training. Review group service user outcomes and review plan for 2023.

	Review staff training needs for 2023.		
<b>Overarching Milestone 2023</b>	Overarching Milestone 2024		
Sustain group schema therapy provision across DNCC			
<b>Outputs by end of 2022</b> : Staff trained and supervised in basic group schema therapy.			
Provision of 5 group schema therapy programmes across DNCC adult mental health services.			
Review of service user outcomes.			

National Goal 4: To enhance accessibility, consistency and care pathways of				
services for people vulnerable to suicidal behaviour.				
National Objective 4.2: Improve access to effective therapeutic interventions				
(e.g. counselling, DBT, CBT) for people vulnerable to suicide.				
National Action: 4.2.1 Deliver accessible, uniform, evidence based				
psychological interventions, including counselling, for mental health problems at				
both primary and secondary care.				
Lead: Mental Health Operations				
Key Partners: NOSP, NGOs				
<ul> <li>Local Action: 4.2.1 (b) Continue to provide Cognitive Behavioural Therapy for mental health service users in Dublin North City including recruiting more Clinical Nurse Specialists in CBT when resources available.</li> <li>Lead: HSE MH</li> <li>Partners:</li> </ul>				
<b>Purpose</b> : To enhance access to CBT therapy to mental health service users.				
Planned Start date and duration: Q2 2022 ongoing				
Location: Dublin North City MHS				
Inputs for 2022: Recruitment drive				
Milestones				
Overarching Milestone 2022 Q1 Commence recruitment				
2022 process.				
Recruit staff with the appropriate skills Q2				
to deliver this service. <b>2022</b>				
Q3 Continue recruitment				
2022 process.				
<b>Q4</b> Additional staff recruited.				
2022				
Overarching Milestone 2023 Overarching Milestone 2024				
Continue to provide Cognitive Continue to provide Cognitive				
Behavioural Therapy for mental health Behavioural Therapy for mental health				
service users in Dublin North City. service users in Dublin North City.				
service users in Dublin North City. service users in Dublin North City.				

**National Objective 4.2:** Improve access to effective therapeutic interventions (e.g. counselling, DBT, CBT) for people vulnerable to suicide.

**National Action: 4.2.1** Deliver accessible, uniform, evidence based psychological interventions, including counselling for mental health problems at both primary and secondary care.

Lead: Mental Health Operations

Key Partners: NOSP, NGOs

**Local Action:** 4.2.1 (c) Continue to deliver Behavioural Family Therapy, as part of the Early Intervention for Psychosis Clinical Care programme.

Lead: HSE MH

#### Partners:

**Purpose:** As per CHO DNCC Operational Plan 2022 The Early Intervention in Psychosis Programme is a National Clinical Programme that needs to continue to be rolled out in DNCC. BFT is a key strand of the EIP Clinical Programme and is an evidence based family-focussed intervention. BFT has been shown to be one of the interventions that reduces both acute unit admissions and readmissions.

**Planned Start date and duration:** BFT work and supervision ongoing across DNCC, BFT training x 1 week in Q3

**Location:** Dublin North City and County

**Inputs for 2021:** Funding for training materials – BFT manuals x 20, staff release to attend training, BFT supervision and to engage in BFT with families, Venue for BFT Training (Tayleur House), Catering for BFT training

Inputs for 2022

Milestones

Milestones 2021 Q3 & Q4 Continued BFT work with **Overarching Milestone 2022** Q1 2022 service users and family Continue to deliver Behavioural Family members across DNCC Therapy, as part of the Early Continued monthly Intervention for Psychosis Clinical Care supervision of BFT workers. programme. Q2 Continued BFT work across 2022 DNCC and continued supervision of BFT workers. Q3 BFT Training for new BFT 2022 workers 5/9/22-9/9/22 (20 delegates). Continued S/V of BFT Q4 2022 workers. **Overarching Milestone 2023 Overarching Milestone 2024** 

**Outputs by end of 2022**: Families continuing to avail of BFT and BFT providing positive outcomes and an evidence based therapeutic intervention to service users and family members. BFT stats for year end 2022 to be submitted to National Clinical Programmes Manager.

**National Objective 4.2:** Improve access to effective therapeutic interventions (e.g. counselling, DBT, CBT) for people vulnerable to suicide.

**National Action: 4.2.1** Deliver accessible, uniform, evidence based psychological interventions, including counselling for mental health problems at both primary and secondary care.

Lead: Mental Health Operations

Key Partners: NOSP, NGOs

**Local Action:** 4.2.1 (d) To resource multidisciplinary DBT service provision training across CHO9 for Adult and Child and Adolescent Mental Health Services. **Lead:** HSE MH Psychology

Partners: Mental health management teams and Connecting for Life

**Purpose:** DBT has demonstrated efficacy in the treatment of people with suicidal ideation and emotionally unstable personality disorder across DNCC.

Planned Start date and duration: Q2 2022,

Location: Dublin North City and County

Inputs for 2022: Adult Mental Health DBT groups.

Continue to seek funding to increase staffing resource across disciplines to DBT in both AMHS & CAMHS.

Identification of staff existing and potential training needs across Dublin North County and CAMHS. DNCC and local implementation steering group and policy development. Identification of staff supports needed. Identify clinical group space. Materials for group delivery.

**Inputs for 2023:** Train Staff in Dublin North County AMHS and CAMHS in DBT and roll out DBT service provision.

#### Milestones

DBT.

Train staff in DBT across Dublin North County AMHS and CAMHS. Roll out DBT in CAMHS & Dublin North County AMHS

Evaluate DBT

### Milestones 2021 Q3 & Q4

Overarching Milestone 2022Q1Develop criteria and process for the<br/>selection of staff to do DBT training in<br/>Dublin North County AMHS and<br/>CAMHS.Q2Seek expressions of interest from staff<br/>in both Dublin North County AMHS<br/>and CAMHS to do DBT training.Q3Select staff in Dublin North County<br/>AMHS & CAMHS to be trained in2022

Q1 2022	n/a
Q2 2022	DNCC Mental Health management team decision to proceed with DBT implementation plan.
Q3 2022	DBT local implementation group, Staffing needs, training plan, identification of DBT team leads.
Q4 2022	The DNCC DBT implementation team will provide a map of service need in Dublin North County AMHS and CAMHS, who is trained and to what level and

	the group will guide the HOS and the Mental Health management team on training needs.	
Overarching Milestone 2023	Overarching Milestone 2024	
DBT staff training in Dublin North County AMHS and CAMHS across DNCC. Roll out DBT in Dublin North County AMHS and CAMHS in DNCC Evaluate DBT.	To ensure the sustainability and long term implementation of DBT in Dublin North County AMHS and CAMHS.	
<b>Outputs by end of 2022</b> : Develop a strategy to expand the provision of DBT services in Dublin North County AMHS and CAMHS to areas where it does not currently exist.		
Ensure there is an effective plan to deliver DBT across CAMHS & Dublin North County AMHS in DNCC.		
Support research work being undertaken to capture the efficacy of DBT and attitudinal changes among staff who have undertaken training.		

	National Goal 4: 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.				
National Action: 4.2.1 Deliver accessible				
interventions, including counselling, for m				
and secondary care.				
Lead: Mental Health Operations				
Key Partners: NOSP, NGOs				
Local Action: 4.2.1 (e) Continue to provi				
who are suicidal through Pieta Dublin No	rth and the 2	24/7 Suicide Prevention		
Helpline.				
Lead: Pieta				
Partners:				
<b>Purpose</b> : To provide therapeutic support	s to those w	no suicidal (and/or self-		
harming). Planned Stort date and duration. Once	ina			
Planned Start date and duration: Ongo	ing			
Location: Dublin North City and County	r			
Inputs for 2022: Funding, staffing, resou Milestones	ices			
Milestones 2021 Q3 & Q4: Continued pr	ovision of th	erapeutic interventions to		
people who are suicidal.	04 2022	Continued provision of		
Overarching Milestone 2022	Q1 2022	Continued provision of		
Continued provision of therapoutic		therapeutic interventions to		
Continued provision of therapeutic				
interventions to people who are suicidal	02 2022	people who are suicidal.		
interventions to people who are suicidal.	Q2 2022	Continued provision of		
interventions to people who are suicidal.	Q2 2022	Continued provision of therapeutic interventions to		
interventions to people who are suicidal.		Continued provision of therapeutic interventions to people who are suicidal.		
interventions to people who are suicidal.	Q2 2022 Q3 2022	Continued provision of therapeutic interventions to people who are suicidal. Continued provision of		
interventions to people who are suicidal.		Continued provision of therapeutic interventions to people who are suicidal. Continued provision of therapeutic interventions to		
interventions to people who are suicidal.	Q3 2022	Continued provision of therapeutic interventions to people who are suicidal. Continued provision of therapeutic interventions to people who are suicidal.		
interventions to people who are suicidal.		Continued provision of therapeutic interventions to people who are suicidal. Continued provision of therapeutic interventions to people who are suicidal. Continued provision of		
interventions to people who are suicidal.	Q3 2022	Continued provision of therapeutic interventions to people who are suicidal. Continued provision of therapeutic interventions to people who are suicidal. Continued provision of therapeutic interventions to		
	Q3 2022 Q4 2022	Continued provision of therapeutic interventions to people who are suicidal. Continued provision of therapeutic interventions to people who are suicidal. Continued provision of		
interventions to people who are suicidal. <b>Overarching Milestone 2023</b> Continued provision of therapeutic	Q3 2022 Q4 2022 Overarch	Continued provision of therapeutic interventions to people who are suicidal. Continued provision of therapeutic interventions to people who are suicidal. Continued provision of therapeutic interventions to people who are suicidal.		
Overarching Milestone 2023	Q3 2022 Q4 2022 Overarch Continued	Continued provision of therapeutic interventions to people who are suicidal. Continued provision of therapeutic interventions to people who are suicidal. Continued provision of therapeutic interventions to people who are suicidal. <b>ing Milestone 2024</b>		

ideation in a range of locations in Dublin North City and County.

**National Objective 4.2:** Improve access to effective therapeutic interventions (e.g. counselling, DBT, CBT) for people vulnerable to suicide.

**National Action: 4.2.1** Deliver accessible, uniform, evidence-based psychological interventions including counselling for mental health problems at both primary and secondary care.

Lead: HSE Mental Health

Key Partners: NOSP, NGOs

**Local Action:** 4.2.1 (f) Continue to provide and expand MDT DBT provision including Decider Skills across Dublin North County Community Mental Health Teams.

Lead: North Dublin Mental Health Services

Partners: NOSP, NGOs

**Purpose:** To provide effective therapeutic interventions for people vulnerable to suicide particularly those experiencing EUPD.

Planned Start date and duration: Q2 2022 ongoing

Location: North Dublin Mental Health Services

**Inputs for 2022:** Continued support for the training of staff in Decider Skills, and DBT trainers into the future.

#### Milestones

**Milestones 2021 Q3 & Q4** Resource staff training across disciplines on all CMHT teams.

Overarching Milestone 2022	Q1 2022			
	Q2	Decider Skills and DBT		
Ensure qualified personnel to provide	2022	provision available in all		
service, on each CMHT across the		primary care settings.		
area of North Dublin	Q3	Ongoing		
	2022			
	Q4	All CMHT's have a DBT		
	2022	trained member on the		
		Multi-Disciplinary Team.		
Overarching Milestone 2023 Overarching Milestone 2024				
Increased delivery of DBT and Decider		requirement for inpatient		
Skills throughout the North Dublin	treatment in the approved centres			
Mental Health Service.		roviding appropriate treatment		
	in the cor	mmunity.		
Outputs by end of 2022:				
Easier access to DBT and Decider Skills across the community area and				

Easier access to DBT and Decider Skills across the community area and improved outcomes for people with EUPD.

**National Objective 4.2:** Improve access to effective therapeutic interventions (e.g. counselling, DBT, CBT) for people vulnerable to suicide.

**National Action: 4.2.1** Deliver accessible, uniform, evidence based psychological interventions, including counselling for mental health problems at both primary and secondary care.

Lead: Mental Health Operations

Key Partners: NOSP, NGOs

**Local Action:** 4.2.1 (g) The DNCC HSE National Counselling Service (including CIPC and Laragh Counselling for adults who have experienced childhood abuse) will continue to provide evidence based counselling to adults experiencing psychological difficulties where issues of suicidal ideation present.

Lead: HSE DNCC National Counselling Service

Partners: HSE MH, HSE PC

**Purpose:** Counselling provides a safe confidential space which gives an opportunity for those with suicidal ideation to talk about feelings, thoughts and concerns. Counselling supports clients to develop healthy coping strategies and enhance self-regulation skills which helps reduce the number of people who engage in suicidal behaviours as evidenced through the CIPC National Evaluation Study.

Planned Start date and duration: Ongoing

**Location:** Dublin North City and County

**Inputs for 2022:** Access to appropriate clinical rooms in Primary Care Centres Continuity in the form of a familiar, safe space to talk about painful issues is key to developing trust and enabling counselling to be effective. Additional sessional counsellors are required to respond to the increased volume of referrals and complexity of referrals which are being made as a result of the pandemic.

Delivery of ongoing training of counsellors in Emotion Focused Therapy (EFT) as it has been demonstrated as an effective evidence based therapeutic approach.

#### Milestones

<b>Overarching Milestone 2022</b> Continue to provide an effective and	Q1 2022	
high quality service, while striving to reduce waiting times.	Q2 2022	Commence EFT training with new cohort of staff.
	Q3 2022	
	Q4	Review clinical outcomes of
	2022	counselling
Overarching Milestone 2023	Overarching Milestone 2024	

**Outputs by end of 2022**: By the end of 2022 it is expected that approximately 2,750 clients will have been referred to the NCS as a whole. 11,000 counselling sessions will have been offered. Results of client satisfaction with the service will be analysed and reviewed. Analysis of clinical outcomes [including level of risk presenting] for clients attending during 2022 initiated.

National Goal 4: 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 commu				
National Action: 4.3.1 Deliver enhance				
families and communities that are know	n to menta	I health services and affected		
by suicide.				
Lead: HSE MH				
Key Partners: NOSP, NGOs				
Local Action: 4.3.1 (a) Continue to wor				
those impacted by suicide and collaboration	ate to opera	ate Community Response		
Postvention supports.				
Lead: HSE MH ROSP				
Partners: Pieta SBLO				
<b>Purpose:</b> To ensure timely, accessible,	safe and h	high-quality services for people		
bereaved by suicide.				
Planned Start date and duration: Q2	-	ing		
Location: Dublin North City and County				
Inputs for 2021: ROSP and partner tim				
Inputs for 2022: Operate Postvention p	programme	s as required		
Milestones				
Milestones 2021 Q3 & Q4 Collaborate to respond to suicide incidents				
Overarching Milestone 2022	Q1	Liaise with SBLO to ensure		
_	2022	support provided as		
Improved range of and access to		required.		
bereavement supports across the	Q2	Disseminate information on		
area.	2022	service continuously.		
	Q3	Liaise with SBLO to ensure		
	2022	support provided as required		
	Q4	Gather data on service		
	2022	provision and demand to		
		ensure appropriate		
response.				
Overarching Milestone 2023		ching Milestone 2024		
Increased awareness of service.		er expansion of service		
	accordi	ng to need.		
Outpute by and of 2022; Increased outpute and output of CDL C contine and currents				
<b>Outputs by end of 2022</b> : Increased awareness of SBLO service and supports				
available for families following a death by suicide.				

National Goal 4: 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.			
National Action: 4.3.1 Deliver enhance			
families and communities that are know			
by suicide.			
Lead: HSE MH			
Key Partners: NOSP, NGOs			
Local Action: 4.3.1 (b) Aligned with the	National T	raining Plan continue the roll	
out of Suicide Bereavement Support tra			
to front line personnel.	<b>J</b>		
Lead: HSE MH ROSP			
Partners: Statutory and Voluntary Sector	or Service I	Providers	
Purpose: People bereaved through suid			
Trained support personnel across Dubli			
these risks.			
Planned Start date and duration: Q1 2	2022 ongoi	ng	
Location: Dublin North City and County	/		
Inputs for 2021: NOSP funding, advertising, ROSP and service time			
Inputs for 2022: NOSP funding, advertise through networks			
Milestones			
Milestones 2021 Q3 & Q4 2 programm	es operate	d	
Overarching Milestone 2022	Q1	Training provision.	
_	2022		
To operate a minimum of 4 training	Q2	Training provision.	
programmes across the area.	2022		
	Q3	Training provision.	
	2022		
	Q4	Analyse	
	2022	demand/participation to	
		inform planning.	
Overarching Milestone 2023		hing Milestone 2024	
Increase number of		e number of fixed location	
trainers/programmes. training venues.			
Outputs by end of 2022: Increased number of trained personnel across services			

<b>National Goal 4:</b> To enhance accessibility, consistency and care pathways of services for people vulnerable to suicidal behaviour.			
<b>National Objective 4.3:</b> Improve the uniformity, effectiveness and timeliness of			
support services to families and commun	nities bere	aved by suicide.	
National Action: 4.3.1 Deliver enhanced	d bereavei	ment support services to	
families and communities that are known	n to menta	I health services and affected	
by suicide.			
Lead: HSE MH			
Key Partners: NOSP, NGOs			
Local Action: 4.3.1 (c) Participate in an			
Network to identify, support and promote	e services,	signposting and referral	
pathways.			
Lead: HSE MH ROSP			
Partners: Dublin North Bereavement Ne	etwork		
Purpose: To collaborate on suicide bere		supports across the area,	
promote services and training availability			
Planned Start date and duration: Q1 2	2022 ongoi	ng	
Location: Dublin North City and County			
Inputs for 2021: ROSP time, resource f			
Inputs for 2022: ROSP time, resource f	or materia	Is and events	
Milestones			
Milestones 2021 Q3 & Q4 Support Bere	eavement		
Overarching Milestone 2022	Q1	Update resource pack and	
	2022	distribute.	
Promote and increase the range of	Q2	Support and promote	
suicide related bereavement supports	2022	Bereavement Education	
across the area.		Event.	
	Q3	Participate in network	
	2022	planning.	
	Q4	Disseminate Bereavement	
	2022	Resource Pack across the	
		area.	
Overarching Milestone 2023	Overard	ching Milestone 2024	
Collaborative approach to service Increase the range of suicide related			
provision. bereavement supports across the area.			
Outputs by end of 2022: Increased awareness of effective suicide bereavement services.			

National Goal 4: To enhance accessibility, consistency and care pathways of			
services for people vulnerable to suicidal behaviour.			
National Objective 4.3: Improve the uniformity, effectiveness and timeliness of			
support services to families and commun	ities berea	aved by suicide.	
National Action: 4.3.1 Deliver enhanced	bereaven	nent support services to	
families and communities that are known	to mental	health services and affected	
by suicide.			
Lead: HSE MH			
Key Partners: NOSP, NGOs			
Local Action: 4.3.1 (d) Continue to Disse		5	
bereavement supports in Dublin North Cit			
individuals affected by suicide in line with	the Suicio	de Critical Incident Response	
Plan.			
Lead: HSE MH ROSP			
Partners: Statutory, Community and volu			
Purpose: To increase awareness of suic	ide bereav	ement supports across the	
area.			
Planned Start date and duration: Q1 20	)21 ongoir	าg	
Location: Dublin North City and County			
Inputs for 2021 NOSP funding, ROSP ar			
Inputs for 2022: NOSP funding, ROSP a	ind partne	r time	
Milestones			
Milestones 2021 Q3 & Q4 Update of Ber	eavement	t Supports Leaflet	
Overarching Milestone 2022	Q1	Disseminate Bereavement	
	2022	Resource packs across the	
Dissemination of Bereavement		area.	
Resource packs across the area to all	Q2	Promote Bereavement	
services.	2022	Network Education Event.	
	Q3	Promote training as part of	
	2022	Mental Health Month locally.	
	Q4	Review and update	
	2022	Bereavement Supports	
		Leaflet.	
Overarching Milestone 2023	Overarc	hing Milestone 2024	
Increased awareness of available	CFL Ber	eavement event in	
supports.	collabora	ation with Bereavement	
Network.			
Outputs by end of 2022: Increased awareness and accessibility of a range of			
suicide bereavement supports across the	area		

# Goal 5



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 for Suicide Prevention 2019)

In *Connecting for Life* Dublin North City and County there are 4 actions under goal five led by CDETB, DDLETB and HSE MH (ROSP). The implementation of all actions under goal five are within the remit of Work Stream 4: Excellence of Care.

<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.			
National Action: 5.1.1 Develop quality st			
provided by statutory and non-statutory o			
through an appropriate structure.	•		
Lead: NOSP			
Key Partners: Non-statutory partners			
Local Action: 5.1.1 Continue to support	the local ir	mplementation of the Best	
Practice Guidance for Suicide Prevention	Services.		
Lead: HSE MH (ROSP)			
Partners: Community & Voluntary Partne			
Purpose: To ensure that community base			
prevention activity are supported to use e	vidence b	ased and best practice	
approaches.			
Planned Start date and duration: Q3 20	)22, 6 mor	nths	
Location: Dublin North City and County			
Inputs for 2022: Training, resources for o	distributior	۱.	
Milestones			
Overarching Milestone 2022	Q3	Distribute updated Suicide	
	2022	Prevention in the Community:	
Provision of resources and information A practical Guide when			
to organisations engaged in the Best	to organisations engaged in the Best launched.		
Practice Guidance for Suicide	Q4	Disseminate relevant	
Prevention Services.	. <b>2022</b> resources, materials and		
		training opportunities.	
	Q1	Disseminate relevant	
	2023	resources, materials and	
		training opportunities.	
	Q2	Disseminate relevant	
	2023	resources, materials and	
0	•	training opportunities.	
Overarching Milestone 2023		ching Milestone 2024	
Continued distribution of relevant		ed distribution of relevant	
resources and advertisement of	resourc	es and advertisement of training.	
training. Outputs by end of 2022: Information, support and resources available to			
organisations from CHO DNCC ROSPs.			
organisations from CHO DNCC ROSPS.			

**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 Support the provision of relevant suicide prevention, self-harm and suicide bereavement training to staff within schools alongside other relevant mental health programmes.

Lead: DDLETB, CDETB

### Partners: HSE

**Purpose**: Facilitate access to appropriate mental health and suicide prevention training for teachers (e.g. SafeTALK, ASIST, Understanding Self-harm, Suicide Bereavement for Professionals and Key Contacts). Address mental health of staff and students proactively with the pilot delivery of the 'Changing Minds' programme within DDLETB.

Planned Start date and duration: Ongoing				
Location: North Dublin City and County				
Inputs for 2022: Access to training, staff time				
Milestones				
Overarching Milestone 2022	Q1	Preparation of pilot		
Staff engaged in SafeTALK and ASIST	2022	programme materials.		
training.	Q2	Delivery of pilot programme		
Delivery of Changing Minds programme:2022in schools.• for adults (3 x 2 hour sessions online)Q3				
				• for adolescents (3 x 2 hour sessions <b>2022</b>
online) – training for teaching staff	Q4	SafeTALK and ASIST		
(DDLETB).	2022	training delivered.		
		Changing Minds programme		
		delivered.		
Overarching Milestone 2023	Overarching Milestone 2023 Overarching Milestone 2024			
Continued delivery of training	Continue	d delivery of training		
programmes. programmes.				
Outputs by end of 2022: Changing Minds Youth mental health initiative pilot				
programme delivered in schools. Roll out of				
education in Q4. Deliver - Changing Minds: An adult mental health initiative once				
again in Q4 (DDLETB). Provision of suicide prevention training to DDLETB and				
CDETB staff.				

<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.				
National Action: 5.1.5 Disseminate inforr	nation on e	effective suicide prevention		
responses through the development and p	oromotion	of repositories of evidence-		
based tools, resources, guidelines and pro	otocols.			
Lead: HSE, DJE				
Key Partners:				
Local Action: 5.1.5 Disseminate informat	ion on effe	ective suicide prevention		
responses through the promotion of evide	nce-based	tools, resources, guidelines		
and protocols at a local level.				
Lead: HSE MH (ROSP)				
Partners: Statutory and Voluntary Partner	rs			
Purpose: To enhance and improve knowl		awareness among professionals		
and organisations working in areas related				
Planned Start date and duration Q3 202				
Location: Dublin North City and County				
Inputs for 2022: Staff time, resources, gu	idelines ar	nd protocols related to suicide		
prevention.				
Milestones				
Overarching Milestone 2022	Q1	Distribute relevant resources on		
	2022	an ongoing basis e.g. guidance		
Dissemination of accurate, up to date		documents and protocols		
information and resources to all CfL		developed by NOSP/ROSP;		
stakeholders and associated networks in		CSO briefing documents;		
DNCC.		NSRF research publications		
		etc.		
	Q2	Distribute relevant resources on		
	2022	an ongoing basis.		
	Q3	Distribute relevant resources on		
	2022	an ongoing basis.		
	Q4	Distribute relevant resources on		
	2022	an ongoing basis.		
Overarching Milestone 2023		hing Milestone 2024		
Continued distribution of relevant		ed distribution of relevant		
resources. resources.				
Outputs by end of 2022: Comprehensive and varied repository of resources				
available to all Connecting for Life stakeholders.				

**National Goal 5:** To Ensure Safe and high quality services to people vulnerable to suicide.

**National Objective 5.1:** Improve the response to suicidal behaviour within health and social care services with an initial focus on incidents.

**National Action: 5.2.3 (7.2.2)** 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 Develop a pilot project of systems and structures to ensure adequate staff support and quality care.

Lead: HSE MH

Partners: EAP, Health and Wellbeing

**Purpose:** To develop better systems and structures to build personal awareness and reflectiveness, ensure adequate staff support and quality care.

Planned Start date and duration: Q2 2022, ongoing

Location: Dublin North City Adult Mental Health Service Pilot

**Inputs for 2022:** Health and Wellbeing working group to identify inputs needed. Nurse Leadership to develop clinical supervision across all staff. Identification of supports needed to roll out Schwartz rounds. Obtain supervisor for reflective practice Psychologists/Multidisciplinary psychotherapists. 2 day training for Psychology/MDT psychotherapists on using Cognitive Analytic Therapy principles to support and build teams capacity to work with severe and enduring complex cases. Training for management in the supporting staff in the aftermath of suicide (Hospice training)

winestones		
Overarching Milestone 2022	Q1 2022	
Develop protocol to identify structures and supports to support staff in the aftermath of staff suicide. Develop Health and Wellbeing Working group under Health and Safety Action	Q2 2022	Scope supports for staff in the aftermath of suicide. Establish DNC staff health and wellbeing working group. Plan development of support structures for staff in their day to day work.
<ul> <li>plan. Provide staff with information as to local health and wellbeing processes and supports.</li> <li>Develop reflective practice and supervision processes towards case specific support, enhancing clinician understanding of the people they work with and how to better support them in intervention.</li> </ul>	Q3 2022	Staff consultation. Peer support – HSE H&W. Develop nurse clinical supervisory practice plan. Facilitate Schwartz Rounds. Provide planning and training/ support resources. Integrate critical incident stress management training and hospice training. Sustain reflective practice at DOP, Blanchardstown.
	Q4 2022	Agreement of plan for roll out in 2023.

Overarching Milestone 2023	Overarching Milestone 2024	
Support Nurse clinical supervision plan.	Sustain Schwartz rounds.	
Train staff grade psychologists in	Develop sustainable MDT clinical	
reflective practice through modelling and	supervision.	
support. Review plan for scalability	Sustain and extend reflective practice	
across CHODNCC.	across CHODNCC MH Services.	
Outpute by and of 2022: Health and Wallbaing working group identification of staff		

**Outputs by end of 2022**: Health and Wellbeing working group identification of staff needs and provision of information regarding available supports. Supports in place for roll out of Schwartz rounds. Protocol for staff support post suicide. Clinical supervision plan in Nursing. Psychology team reflective practice roll out plan for 2023 in place.

National Coal 5. To success and a set 11 to			
<b>National Goal 5:</b> To ensure safe and high quality services for people vulnerable to suicidal behaviour.			
<b>National Objective 5.4:</b> 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.			
National Action: 5.4.4 Recommend the			
as part of undergraduate curriculum of th	e relevant	professions.	
Lead: NOSP			
Key Partners:			
Local Action: 5.4.4 Continue and expan	d the rollo	ut of suicide prevention training	
in third level institutions across DNCC.			
Lead: HSE MH (ROSP)			
Partners: DCU, TUDublin			
Purpose: To increase awareness, knowl			
institutions in dealing with people in crisis		ecting them with services.	
Planned Start date and duration: Q1 20	022		
<b>Location:</b> Dublin North City and County			
Inputs for 2022: Funding, training mater	ials, traine	r time, venues.	
Milestones			
Overarching Milestone 2022	Q1	Run a SafeTALK in	
	2022	TUDublin.	
Continued provision of training to staff	Q2		
in third level institutions. <b>2022</b>			
	Q3	Liaise with TUDublin and	
	2022	DCU in relation to training	
		needs. Advertise training	
		provision to staff	
	Q4	Continued promotion of	
	2022	training and where	
		warranted, arrange training	
		on site.	
<b>Overarching Milestone 2023</b>		ching Milestone 2024	
Continued promotion/delivery of		ed promotion/delivery of training	
training to staff.	to staff.		
Outputs by end of 2022: Greater awareness amongst staff. Delivery of suicide			
prevention training to third level staff.			

# Goal 6



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 *Connecting for Life* Dublin North City and County there are four actions under goal six led by HSE MH, HSE QPS and HSE MH (ROSP). The implementation of all actions under goal six are within the remit of Work Stream 4: Excellence of Care.

National Goal 6: To reduce and restrict access to means of suicidal behaviour.				
National Objective 6.1: Reduce access to frequently used drugs in intentional				
drug overdose.				
National Action: 6.1.1 Support appropria	ate presc	ribing of medicines commonly		
used in intentional overdose, including be	enzodiaze	epines and SSRIs.		
Lead: DOH				
Key partners: -				
Local Action: 6.1.1 Deliver a CHO wide		ampaign to encourage and		
facilitate the disposal of unused medicati	on.			
Lead: HSE MH				
Partners: HSE Primary Care, local pharm	nacies, ⊢	ISE MH (ROSP)		
<b>Purpose:</b> To dispose unused or out of date medication safely and reduce potential				
for accidental/intentional poisoning.				
Planned Start date and duration: Q1 2022, 2 years				
Location: Dublin North City and County				
Inputs for 2022: Staff Time, funding				
Milestones				
Overarching Milestone 2022	Q1	Establish working group.		
_	2022			
Deliver a CHO wide DUMP campaign. <b>Q2</b> Secure stakeholder buy-in.				
2022				
	<b>A</b> A			

	2022	
	Q3	Prepare literature and source
	2022	campaign materials.
	Q4	Deliver the campaign and
	2022	review.
Overarching Milestone 2023	Overarc	hing Milestone 2024
Deliver a CHO wide DUMP campaign.	Deliver a CHO wide DUMP campaign.	
Outputs by end of 2022: Produce DUMP campaign materials and run the		
campaign, resulting in an increase in the disposal of unused and out of date		
medication.		

**National Goal 6:** To reduce and restrict access to means of suicidal behaviour. **National Objective 6.2** Reduce access to highly lethal methods used in suicidal behaviour.

**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.

#### Lead: LA

Key partners: DECLG, NOSP

**Local Action:** 6.2.1 Support relevant organisations to identify and map high risk locations, and introduce preventative measures to reduce risk and improve safety. **Lead:** HSE MH (ROSP)

Partners: Local Authorities, Emergency Services

**Purpose:** Place signage of relevant supports at high risk locations.

Planned Start date and duration: Q1 2023, 1.5 years

Location: Dublin North City and County

Inputs for 2022: ROSP & Partner time, funding, materials

#### Milestones

**Overarching Milestone 2023** 

Increased awareness of relevant supports at identified high risk locations.

Q1	Establish working group with
2023	LAs and emergency services.
Q2 2023	Promote the use of national signage developed by NOSP in partnership with Samaritans at identified areas in conjunction with the LA.
Q3 2023	Continue to support the placing of signage in identified locations.
Q4 2023	

**Overarching Milestone 2024:** Review need for signage to be located at additional locations.

**Outputs by end of 2023**: Increased awareness of relevant supports at high risk locations.

National Goal 6: To reduce and restrict access to means of suicidal behaviour.
National Objective 6.2: Reduce access to highly lethal methods used in suicidal
behaviour.

**National Action: 6.2.2** Implement a strategy to improve environmental safety within the HSE Mental Health Services (e.g. ligature audits).

Lead: HSE MH

Key partners: HSE Estates

**Local Action:** 6.2.2 (a) Support the local implementation of the National Ligature Risk Assessment and Management Policy through the provision of training to relevant staff.

Lead: HSE MH

Partners: HSE Estates

**Purpose:** To improve safety and reduce ligature points in approved centres and the upskilling of staff.

Planned Start date and duration: Ongoing

Location: Dublin North City and County

Inputs for 2022: Staff time to undertake relevant training

Mi	lestones	5
-		

Overarching Milestone 2022	Q1 2022	Support staff to undertake training. Using new audit tools,	
Train staff and use new policy to inform the undertaking of ligature		begin auditing of approved centres.	
audits of approved centres.	Q2	Continue to support staff training	
	2022	and auditing of approved centres.	
	Q3	Continue to support staff training	
	2022	and auditing of approved centres.	
	Q4	Continue to support staff training	
	2022	and auditing of approved centres.	
Overarching Milestone 2023	Overarching Milestone 2024		
Continued use of the National Ligature	Continued use of the National Ligature		
Risk Assessment and Management	Risk Assessment and Management Policy		
Policy and provision of training where	and provision of training where necessary.		
necessary.			

#### Outputs by end of 2022:

Staff trained to undertake new ligature audits. Safer approved centres.

National Goal 6: To reduce and restrict access to means of suicidal behaviour. National Objective 6.2: Reduce access to highly lethal methods used in suicidal				
behaviour.				
National Action: 6.2.2 Implement a strategy to improve environmental safety within the HSE Mental Health Services (e.g. ligature audits). Lead: HSE MH				
Key partners: HSE Estates				
<ul> <li>Local Action: 6.2.2 (b) Advise and promote environmental safety issues are considered in the specification and delivery of new buildings and refurbishment of existing HSE Mental Health Service buildings.</li> <li>Lead: HSE QPS</li> <li>Partners: HSE Estates, HSE Health &amp; Safety, HSE MH</li> </ul>				
Purpose: Reduction and restriction	of access	to means of suicidal behaviour.		
Planned Start date and duration: (				
Location: Dublin North City and Cou	unty			
Inputs for 2022: Increased staff reso	ource – Q	PS		
Milestones				
Overarching Milestone 2022 Provide advice on the refurbishment/development of	Q1 2022	Recruitment process for additional QPS advisors completed. Promote national ligature risk guidelines to stakeholders and offer support regarding implementation.		
buildings where required.	Q2 2022	Liaise with DNCC Estates to consider environmental safety prior to the refurbishment/development of buildings and to advise where necessary.		
	Q3 2022	Liaise with DNCC Estates to consider environmental safety prior to the refurbishment/development of buildings and to advise where necessary.		
	Q4 2022	Liaise with DNCC Estates to consider environmental safety prior to the refurbishment/development of buildings and to advise where necessary.		
Overarching Milestone 2023	Overar	ching Milestone 2024		
Continued promotion of ligature risk guidelines and environmental safety of buildings.	Continu	Continued promotion of ligature risk guidelines and environmental safety of buildings.		
V	red when			

# Goal 7



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 *Connecting for Life* Dublin North City and County there are 8 actions under goal seven led by a range of statutory partners. The implementation of all actions under Goal Seven are within the remit of Work Stream 4: Excellence of Care.

<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: 7.2.2:</b> Collate and report on incidents of suicide through current and expanded suicide surveillance systems over the life of Connecting for Life. <b>Lead:</b> HSE MH			
Key partners: -			
<ul> <li>Local Action: 7.2.2 (a) Support the collation and reporting of incidents of suspected suicide through current and expanded suicide surveillance systems over the life of Connecting for Life.</li> <li>Lead: HSE MH (ROSP)</li> <li>Partners: CfL Stakeholders</li> </ul>			
<b>Purpose:</b> To better understand trends in a inform suicide prevention efforts. <b>Planned Start date and duration:</b> Q3, or		ehaviour in various settings to	
<b>Location:</b> Dublin North City and County	igoing		
Inputs for 2022: Data/information on sus	pected sui	icides	
Milestones			
Overarching Milestone 2022	022 Q3 Obtain and analyse data from 2022 relevant sources and		
Utilise data sources across DNCC to	disseminate as appropriate.		
assess new and emerging needs and priority groups.	Q4 Obtain and analyse data 2022 from relevant sources and		
		disseminate as appropriate.	
	Q1	Obtain and analyse data	
	2023	from relevant sources and	
		disseminate as appropriate.	
	Q2	Obtain and analyse data	
	2023	from relevant sources and	
		disseminate as appropriate.	
Overarching Milestone 2023		ching Milestone 2024	
Utilise data sources across DNCC to		ata sources across DNCC to	
	ssess new and emerging needs and assess new and emerging needs and		
priority groups. priority groups.			
Outputs by end of 2022: Greater understanding of suicide trends in CHO DNCC.			

<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: 7.2.2:</b> Collate and report and expanded suicide surveillance syste				
Lead: HSE MH Key partners: -				
Local Action: 7.2.2 (b) Continue to build Health Staff to review incidents of suicide Framework (IMF) 2020. Lead: HSE QPS Partners: HSE MH, HSE QAVD				
<b>Purpose:</b> To enable mental health staff t and to facilitate learning in order to reduc empower mental health staff to improve	ce the risk	of suicidal incidents. To		
Planned Start date and duration: Ongo Location: Dublin North City and County	bing			
Inputs for 2022: Staff time				
Milestones	_			
Overarching Milestone 2022	Q1 2022	Develop a schedule for IMF related training.		
Delivery of appropriate training to staff.	Q2Coordinate places on QAVD2022training courses as available. Delivering training in line with the gap analysis.			
	Q3Coordinate places on QAVD2022training courses as available. Delivering training in line with the gap analysis			
Q4Coordinate places on QAVD2022training courses as available.Delivering training in line with the gap analysis				
Overarching Milestone 2023 Continued delivery of IMF training as needed.	Overarching Milestone 2024 Continued delivery of IMF training as needed.			
Outputs by end of 2022: Completion of a gap analysis in IMF related training for HSE MH services. Training plan in place. Increased capacity of staff to review suicidal incidents in line with the Incident Management Framework 2020. Sharing of reviews by mental health staff across DNCC MH services to promote patient safety.				

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

**National Objective 7.2:** Improve access to timely and high quality data on suicide and self-harm.

**National Action: 7.2.2:** Collate and report on incidents of suicide through current and expanded suicide surveillance systems over the duration of Connecting for Life. **Lead:** HSE MH

#### Key partners: -

**Local Action:** 7.2.2 (c) Promote timely reporting of suicide and self-harm related incidents to ensure high quality data is collected in the National Incident Management System (NIMS) by Mental Health staff.

Lead: HSE QPS

Partners: HSE MH

**Purpose:** To promote timely and accurate incident reporting and to aid data collation and facilitation of analysis on the trends regarding suicide and self-harm behaviours.

Planned Start date and duration: Ongoing

**Location:** Dublin North City and County

Inputs for 2022: Staff time, QSSI Data Manager time

### Milestones

Overarching Milestone 2022	Q3 2022	Complete the data analysis on the trends of suicide and self-harm.	
Commence data analysis of NIMS data		Present suicide and self-harm data and share as appropriate.	
	Q4 2022	Complete the data analysis on the trends of suicide and self-harm. Present suicide and self-harm data and share as appropriate.	
	Q1 2023	Complete the data analysis on the trends of suicide and self-harm. Present suicide and self-harm data and share as appropriate.	
	Q2 2023	Complete the data analysis on the trends of suicide and self-harm. Present suicide and self-harm data and share as appropriate.	
Overarching Milestone 2023	Overarching Milestone 2024		
Continue to analyse data and report on suicide and self-harm trends in CHO DNCC.	Continue to analyse data and report on suicide and self-harm trends in CHO DNCC.		
Outputs by end of 2022:			

### Outputs by end of 2022:

Mental health staff working in CHO DNCC are aware of the importance of timely reporting and quality of data when incidents of suicide and self-harm are reported. The availability of quality data will enable the HSE Mental Health and HSE QPS to facilitate improved analysis of incidents of suicide and self-harm.

<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.				
National Action: 7.2.2: Collate and report of	on incidents	s of suicide through current		
and expanded suicide surveillance systems				
Lead: HSE MH		J.		
Key partners: -				
Local Action: 7.2.2 (d) Extend the rollout of	f the 'Sudd	en and Unexpected Deaths		
in the Community Protocol' to North County	Dublin Me	ntal Health Service.		
Lead: HSE MH				
Partners:				
Purpose: To ensure early notifications of su		uicide deaths to relevant staff		
and allow for a timely response as required.				
Planned Start date and duration: Q3 2022				
Location: CHO Dublin North City and Coun	ity			
Inputs for 2022: Staff time				
Milestones				
Overarching Milestone 2022	Q3	Commence operation of		
To extend the operation of a notification	2022	protocol.		
protocol related to suspected suicides of	Q4	Continued use of		
mental health service users across the	2022	protocol.		
CHO.	Q1	Continued use of		
	2023	protocol.		
	Q2	Continued use of		
	2023	protocol.		
Overarching Milestone 2023 Overarching Milestone 2024				
Continued use of protocol and review		d use of protocol and review		
against any national guidance (if against any national guidance (if				
applicable). applicable)				
Outputs by end of 2022: The 'Sudden and Unexpected Deaths in the Community				
Protocol' has been operationalised across CHO DNCC Mental Health Services and				
notifications made where applicable.	notifications made where applicable.			

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

**National Objective 7.2:** Improve access to timely and high quality data on suicide and self-harm.

**National Action: 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. **Lead:** NOSP

Key partners: DOH, NSRF, DJE/IPS, DCYA/TUSLA

**Local Action:** 7.2.3 (a) Support the dissemination of 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.

Lead: HSE MH (ROSP)

Partners: CfL Stakeholders

**Purpose:** To ascertain and identify trends and demographics related to suicidal behaviour in CHO DNCC that will subsequently inform appropriate responses.

Planned Start date and duration: Q3 2022, ongoing

Location: Dublin North City and County

Inputs for 2022: Staff time, access to data Milestones

Q3	Obtain and analyse data	
2022	from relevant sources and	
	disseminate as appropriate.	
Q4	Obtain and analyse data	
2022	from relevant sources and	
	disseminate as appropriate.	
Q1	Obtain and analyse data	
2023	from relevant sources and	
	disseminate as appropriate.	
Q2	Obtain and analyse data	
2023	from relevant sources and	
	disseminate as appropriate.	
<b>Overarching Milestone 2024</b>		
Improved utilisation of data to inform		
responses.		
Outputs by end of 2022: Access to a range of reports and briefings that will		
f-harm in Ch	HO DNCC.	
	2022 Q4 2022 Q1 2023 Q2 2023 Overarchi Improved responses nge of report	

<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.			
National Action: 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.         Lead: NOSP       Key partners: DOH, NSRF, DJE/IPS, DCYA/TUSLA			
<ul> <li>Local Action: 7.2.3 (b) Support the implementation of ethnic identity monitoring for HSE Mental Health Services in line with future national guidance.</li> <li>Lead: HSE MH</li> <li>Partners: HSE MH (MH Service Coordinator for Travellers)</li> </ul>			
Purpose: To improve data collection and identify access, participation and outcomes for Travellers availing of MH services.         Planned Start date and duration: TBD			
Location: Dublin North City and County Inputs for 2022 Staff time, data collection, national guidance Milestones			
Overarching Milestone 2022 Align local processes of gathering	Q1 2022		
ethnic identifiers with national guidance.	Q2 2022		
	Q3 2022	Awaiting national guidance.	
	Q4 2022	Awaiting national guidance.	
Overarching Milestone 2023 (TBD) Awaiting national guidance			
Outputs by end of 2022: Outputs are dependent on national guidance.			

National Goal 7: To improve surveillance, evaluation and high quality research relating to suicidal behaviour.         National Objective 7.4: Develop a national research and evaluation plan that supports innovation and is aimed at early identification of suicide risk, assessment, intervention and prevention.         National Action: 7.4.1 Support research on risk and protective factors for suicidal behaviour (see Strategic Goal 3).         Lead: NOSP         Key partners: Third level institutions         Local Action: 7.4.1 Conduct research on the impact of suicide on Travellers and their access to mental health supports.         Lead: NISP         Partners: NUIG, Trinity College Dublin         Purpose: To gain knowledge on the impact of suicide on the Traveller.         Planned Start date and duration: Q2 2022 1 year         Location: CHO DNCC, CHO 1, 2, 3, 6         Inputs for 2022: Staff time, Peer researchers, stakeholder involvement         Milestones         Overarching Milestone 2022         Conduct two research studies on:         1 Traveller access to mental health services.         2 Impact of suicide on the Traveller         Q2       Recruitment of Traveller peer researchers for CHO 9 specific and national research.         Q2       Recruitment of thindings of both studies.         Overarching Milestone 2023       Overarching Milestone 2024         Q4       Launch findings of both studies.						
National Objective 7.4: Develop a national research and evaluation plan that supports innovation and is aimed at early identification of suicide risk, assessment, intervention and prevention.         National Action: 7.4.1 Support research on risk and protective factors for suicide behaviour (see Strategic Goal 3).         Lead: NOSP         Key partners: Third level institutions         Local Action: 7.4.1 Conduct research on the impact of suicide on Travellers and their access to mental health supports.         Lead: HSE MH (MH Service Co-ordinator for Travellers)         Partners: NUIG, Trinity College Dublin         Purpose: To gain knowledge on the impact of suicide on the Traveller.         Planned Start date and duration: Q2 2022 1 year         Location: CHO DNCC, CHO 1, 2, 3, 6         Inputs for 2022: Staff time, Peer researchers, stakeholder involvement         Milestones         Overarching Milestone 2022         Conduct two research studies on:         1 Traveller access to mental health services.         2 Impact of suicide on the Traveller community.         Q3         Commencement of research.         Q4         Launch findings of both studies.         2022         studies.         Overarching Milestone 2023         Begin the implementation of these studies recommendations.         Overarching Milestone 2023         Begin the im	· · · · · · · · · · · · · · · · · · ·	ce, evaluat	ion and high quality research			
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Partners: NUIG, Trinity College Dublin         Purpose: To gain knowledge on the impact of suicide on the Traveller.         Planned Start date and duration: Q2 2022 1 year         Location: CHO DNCC, CHO 1, 2, 3, 6         Inputs for 2022: Staff time, Peer researchers, stakeholder involvement         Milestones         Overarching Milestone 2022         Conduct two research studies on:         1 Traveller access to mental health services.         2 Impact of suicide on the Traveller community.         Q3         Commencement of zouce         Q4         Launch findings of both 2022         Research.         Q4         Launch findings of both 2022         Poterarching Milestone 2023         Begin the implementation of these studies recommendations.         Outputs by end of 2022: Recruitment and training of Traveller peer researchers.	11					
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Outputs by end of 2022: Recruitment and training of Traveller peer researchers.		N/A				
Launch of study findings/recommendations.			g of Traveller peer researchers.			
	Launch of study findings/recommendation	ons.				

National Goal 7: To improve surveillance.	evaluation	n and high quality research		
relating to suicidal behaviour.				
National Objective 7.4 4: Develop a nation	onal resear	ch and evaluation plan that		
supports innovation and is aimed at early i				
assessment, intervention and prevention.				
National Action: 7.4.4 Evaluate innovativ	e approacl	nes to suicide prevention		
including online service provision and targ	eted appro	paches for appropriate		
priority groups.				
Lead: NOSP				
Key partners: Third level institutions				
Local Action: 7.4.4: Support evaluation of innovative approaches to suicide				
prevention and targeted approaches for appropriate priority groups.				
Lead: HSE MH (ROSP)				
Partners:				
<b>Purpose:</b> To ensure that learning from innovative approaches to suicide				
prevention are shared to stakeholders.				
Planned Start date and duration: Q2 2022				
Location: Dublin North City and County				
Inputs for 2022				
Milestones				
Overarching Milestone 2022	Q1			
	2022			
Complete evaluation of the 'Mind It'	Q2	Support the evaluation of		
Project.	2022	the 'Mind It' Project.		
	Q3	Disseminate findings when		
	2022	available.		
	Q4	Disseminate findings when		
	2022	available.		
Overarching Milestone 2023	Overarching Milestone 2024			
Support the evaluation of programmes	Support the evaluation of			
where appropriate.		mes where appropriate.		
Outputs by end of 2022: Evaluation cond	increa of th			



## **Section Eight: Appendices**

# **List of Appendices**

- 1. Glossary of Terms
- 2. Abbreviations
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### **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 nonmedical 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
   <a href="https://www.hse.ie/eng/services/list/4/mental-health-services/connecting-forlife/publications/cfl-implementation-plan-dec-2020.pdf">https://www.hse.ie/eng/services/list/4/mental-health-services/connecting-forlife/publications/cfl-implementation-plan-dec-2020.pdf</a>
- Reducing Harm, Supporting Recovery a health led response to drug and alcohol use in Ireland 2017-2025 (28) <u>https://www.drugsandalcohol.ie/27603/1/Reducing-Harm-Supporting-Recovery2017-2025.pdf</u>
- The National Traveller and Roma Inclusion Strategy 2017-2021
   <u>https://www.gov.ie/en/publication/c83a7d-national-traveller-and-roma-inclusionstrategy-2017-2021/</u>
- National Traveller Health Action Plan (forthcoming)
- NOSP Suicide Prevention Education and Training Plan <u>https://www.hse.ie/eng/services/list/4/mental-health-services/connecting-forlife/publications/education-and-training-plan-v3.pdf</u>

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