

National Suicide Prevention Leadership Group - Minutes

Location: Verity House, COSLA (19 Haymarket Yards, Edinburgh, EH12 5BH)

Date: 19th June 2019

Time: 10:30 – 15:30

Attendees:

Ms Rose Fitzpatrick (Chair)
Dr David Hall
Mr Nigel Henderson
Mr James Jopling
Ms Lara McDonald
Ms Ruth Moss
Ms Jane O'Donnell
Ms Nicky Reid
Ms Angela Scott (teleconference from 12.45pm)
Dr Michael Smith
Mr Billy Watson

Apologies

Mr George Dodds
Mr Toni Giugliano
Dr Amy Knighton
Chief Superintendent John McKenzie
Dr John Mitchell

In Attendance

Professor Rory O'Connor - Academic Advisory Group

Mr Andy Grierson – Scottish Government
Ms Siobhan Mackay - Scottish Government
Mr Allan Steele - Scottish Government
Ms Shirley Windsor – NHS Health Scotland (for Agenda item 5)

1. Suicide Prevention Animation

- 1.1. The meeting opened with a screening of *Ask, Tell – Save A Life: Every Life Matters*, the suicide prevention animation created by NHS Health Scotland and NHS Education Scotland, which was launched on the 22 May 2019 by the Minister for Mental Health.
- 1.2. The Group noted its sincere thanks to everyone that contributed to this work.

2. Welcome from the Chair

Welcome

- 2.1. The Chair welcomed Members to the ninth meeting of the National Suicide Prevention Leadership Group (NSPLG) (the Group), thanking them for their attendance.

Apologies

- 2.2. Apologies from Mr George Dodds, Mr Toni Giugliano, Dr Amy Knighton, Chief Superintendent John McKenzie, and Dr John Mitchell.
- 2.3. Ms Angela Scott would teleconference into the meeting in the afternoon session.
- 2.4. The Minister for Mental Health, Claire Haughey and Councillor Stuart Currie, COSLA Spokesperson for Health and Social Care, would join the Group for 45 minutes through the morning session.
- 2.5. Ms Shirley Windsor (NHS Health Scotland) would join the Group for Agenda item 5.

Minutes

- 2.6. Para 1.11: Mr Jopling asked when Scottish Government would issue a response to the Expert Review of Mental Health at HMP and YOI Polmont. Ms Mackay confirmed that would happen that day (19 June 2019) and Mr Jopling noted the Group would have an ongoing interest.
- 2.7. Para 2.8: Mr Watson pointed out that the Action 10 (Reviews) included a proposed pilot site in the broader North East.
- 2.8. Pending the above update to para 2.8, the Group approved the minutes from the May meeting for publication.

Action Log

- 2.9. Ms Mackay gave an update on the Action log:
- 2.10. Action 4.5: This remained ongoing. Ms Mackay noted that national suicide statistics would be published on 26 June 2019. Secretariat would update the

Group on that publication once it had issued. The Group requested more information about pre-release access rules and whether this could extend to the Group in the future. Secretariat agreed to provide a response to the Group.

Action 9.1.

- 2.11. Action 5.2: The Chair, Ms O'Donnell and Dr Smith were due to meet with Integrated Joint Board Chief Officers on Friday 21 June 2019.
- 2.12. Actions 6.4/5: The Youth Commission on Mental Health Services had now published its Report. Ms MacDonald spoke about the importance of that work and urged all Members to read it. Mr Watson confirmed that the Scottish Association for Mental Health (SAMH) and Young Scot had jointly written to Scottish Government officials in support of extending the function of the Youth Commission on Mental Health Service. The Group agreed that the Chair should also write in support of this. **Action 9.2.**
- 2.13. Action 7.5: The Group noted that the Children's and Young People's Mental Health Taskforce were expected to be publish recommendations in early July. Scottish Ministers and Cosla were currently considering how to take the work of the Taskforce forward. The Group recorded their thanks and best wishes to Dr Dame Denise Coia for her important contribution as Chair of the Children and Young Peoples Mental Health Task-Force.
- 2.14. 8.3: NHS Health Scotland were finalising a paper on Choose Life which would be circulated to the Group for further discussion at the July meeting. **Action 9.3**
- 2.15. Action 8.12: The Group thanked Ms Gordon (Samaritan's Scotland), Ms Moss and SAMH for their co-ordination of a Leadership Group response to the UK Government Online Harms Whitepaper. A final draft would be circulated to the Group before submission.
- 2.16. Action 8:18: Professor O'Connor (AAG) flagged potential dates for a workshop to explore the development of an evaluability assessment of the Suicide Prevention Action Plan (SPAP).

Lived Experience Engagement

- 2.17. Ms Mackay updated the Group on progress towards a Lived Experience Panel. Scottish Government had run a tender process that closed on 14 June 2019. Bids would now be considered and the Group would be updated on the final outcome in due course.

Forward Look

- 2.18. The Group noted the current Forward Look document of upcoming important dates.

Updates from Members

2.19. The Chair updated the Group on:

- John Scott, QC and Derek Barron, Director of Care, Elskine, had respectively been appointed as Chairs to the independent review of the Mental Health Act and the review of Forensic Mental Health Services. The Chair of the NSPLG has written to the latter with congratulation him on his appointment and to encourage consideration of mental health in court settings.
- The Independent Inquiry into Mental Health Services in Tayside released an interim report on May 22nd. This recommended improvement in – Patient sense of safety; Quality of care; Organisational learning; Leadership; and Governance.
- The Chair noted her positive recent meetings and attendances (including with other members) at the National Rural Mental Health Forum; the Mental Health Strategic Delivery Board; the NHS Scotland Event; and a Lived Experience meeting, hosted by the Health and Social Care Alliance Scotland.

2.20. Mr Jopling updated the Group on the last quarterly meeting of the Scottish Suicide Information Database (ScotSID) Steering Group. This included an item on potential options to develop the database into a more interactive tool which could support local suicide prevention planning. NHS National Services Scotland Information Services Division would be progressing this work which would be informed by consultation.

3. Delivery Plan Progress

3.1. The Group were asked to provide brief updates on their respective actions in relation to the Delivery Plan Highlight Report.

3.2. As Action 1 included proposals for Group discussion and decision, it was agreed to move this to the afternoon session.

Action 2 (Suicide Prevention Training Update)

3.3. Ms Reid informed the Group that the sponsors of Action 2 had seen the Mental Health and Suicide Prevention Workforce Development Plan that NHS Health Scotland and NHS Education for Scotland would publish shortly.

3.4. The suicide prevention awareness animation shown at the beginning of the meeting (*Ask, Tell – Save A Life: Every Life Matters*), along with the two other mental health awareness animations (*Ask, Tell - Look After Your Mental Health* and *Ask, Tell - Have a Healthy Conversation*) created by NHS Health Scotland and NHS Education Scotland will continue to roll out to NHS and Local Authority staff. These will also roll out to the Scottish Professional Football League,

Scottish Football Association, and wider audiences. There are ongoing conversations with Police Scotland, the Scottish Fire and Rescue Service, Rural Forum and Business in the Community about opportunities for further engagement around this. Mr Jopling also noted potential further discussions with Water Safety Scotland.

- 3.5. Ms Mackay confirmed that the Scottish Government Director of Mental Health had written to all NHS Board Chief Executives asking them to include Mental Health and Suicide Prevention Training within local workforce planning. The Knowledge and Skills Framework and forthcoming Workforce Development Plan produced by NHS Health Scotland and NES would support this. Dr Smith queried what more might be done to support Boards and agreed to discuss further with Ms Mackay.
- 3.6. Phase two of NHS Health Scotland and NHS Education for Scotland's work would include a review of existing NHS training resources and an identification of gaps, and opportunities.

Action 3 (Public Awareness)

- 3.7. Mr Watson noted the Choose Life position paper from NHS HS (re action 8.3) would be circulated to the Group members within the next two weeks for discussion and decision at the July meeting. The Chair encouraged detailed reading of this paper and noted that this work could form the basis for recommendations in the September NSPLG Annual Report.

Action 4 (Support for those affected by suicide)

- 3.8. Ms Moss noted the on-going research being carried out by the Mental Health Foundation, and that sponsors have been exploring a number of bereavement support models across the UK with Police and Third Sector.
- 3.9. A focus has been on support for children bereaved by suicide with specific discussion with organisations such as Winston's Wishes. Sponsors had also been in discussion with Scottish Universities and the Academic Advisory Group about developing measures to support this action.

Action 5 (Crisis Support)

- 3.10. Mr Henderson noted the extension of the Distress Brief Intervention programme to 16 and 17 year olds in Lanarkshire and Borders through May, and Aberdeen and Inverness through July 2019.
- 3.11. The sponsors had been working with Professor Steve Platt (AAG) to explore evidence around crisis support. An emerging question was the different ways in which 'crisis' is conceptualised and recorded in different regions of the country. This has made amalgamation of studies difficult.
- 3.12. It was suggested that a formal audit of crisis support available be carried out in order to explore the local nuances, commonalities and effectiveness further. This would be separate to and build on the broader survey carried out under Action 1. **Action 9.4.**

4. Discussion with Minister for Mental Health, Claire Haughey, and Councillor Stuart Currie, COSLA Spokesperson for Health and Social Care

- 4.1. Ms Haughey and Councillor Currie were welcomed to the meeting.
- 4.2. Both acknowledged the work of the Group and recorded their thanks to Members' for their dedication to this. Commenting on the positive reaction to the launch of the new online learning and awareness raising resources, they noted this would help broaden awareness and drive change. Both reinforced the commitment from Scottish Government and COSLA to support collaborative efforts to reduce suicide.
- 4.3. The Chair welcomed their comments, noting that the Group's strength lies in collaboration across national, local, and third sector partners, alongside individuals with lived experience. This enables broad discussion around challenges and solutions. It was noted that the Group would issue its first Annual Report in September which would identify opportunities for further action.
- 4.4. Members outlined the Group's thinking around how to build on the success of Choose Life in preventing suicide. It would be important to involve many partners in this.
- 4.5. Professor O'Connor reminded everyone of Scotland's role as a world leader in suicide prevention. Many countries and regions would be looking to learn from the steps taken in Scotland.
- 4.6. The Minister asked the Group what the biggest challenges were in their work? Members discussed the complexity of why someone takes their own life and the difficulty in identifying when that might happen. Members spoke of the need to drive societal change, noting that organisations, individuals and communities all have a role in that. Members spoke of possible learning from tobacco control in driving culture change. Reference was also made to the CPR 'Save a Life' campaign, which was empowering people to provide critical help to others and improving survival rates after bystander CPR.
- 4.7. Looking to future opportunities, the Group noted that the new Public Health Scotland body would be an ideal hub to champion and support suicide prevention work nationally and locally.

5. Delivery Plan Progress (continued)

Action 1 (Local Plans)

- 5.1. Mr Jopling, Ms O'Donnell and Ms Windsor presented the findings of their survey on local suicide prevention planning. They then outlined how this informed their recommendations to support this activity.
- 5.2. A high level analysis of suicide prevention work across Community Planning Partnerships revealed a mixed picture of activity and funding commitments

(with most under £50k per annum). This made it difficult to produce a definitive comparison across different areas. Members noted the challenge of aligning local activity with a national strategy, measuring impact against outcomes and of how to identify and allocate investment.

- 5.3. From the research and analysis emerging priorities for local suicide prevention planning had been identified;
- There should be an identified lead for suicide prevention activity for both strategic and operational areas of responsibility.
 - An overall multi-agency stakeholder group should be in place to provide strategic and operational support and direction, either standalone or as part of broader group but given sufficient time and space to focus on suicide prevention.
 - A clear outcomes focused framework should be developed, setting out at least a 5 year plan of activities, agreed inputs and outputs with short, medium and long term outcomes that links with national activity/action plan.
 - Clear guidance about resource allocation, whether monetary or manpower linked to outcomes achievement.
 - Involvement of people with lived experience in determining strategic direction and evaluation of impact.
 - Shared local multi agency data sharing and surveillance systems as part of preventive action.
 - Public health and other data intelligence (such as from Police Scotland) should be maximised to support local needs assessment, gap analysis and evaluation methodology.
 - Buddy to buddy support mechanisms (in terms of cross regional learning) and peer to peer evaluation.
 - A public health approach should underpin national and local planning and implementation.
- 5.4. Mr Jopling and Ms O'Donnell set out proposals for:
- To produce best practice guidance to support for local multi-agency planning informed by existing sources (£30k) – commencing in August.
 - To set aside £300k-£500k pa for each of the next two years to pilot an approach to locally based suicide prevention activity in 3-5 local areas.
 - Develop a consistent approach to evaluation (£30k)
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- 5.5. In terms of a timeline for this work, Members discussed the need to balance quick action with engagement of stakeholders.
- 5.6. The Group had a robust discussion about the Action 1 proposal focussing on timeframe, funding, and interdependencies with other Actions.
- 5.7. The Group discussed how the proposed timeframe for developing guidance would take account of any best practice recommendations that would arise from

work on other NSPLG Actions in due course. Mr Jopling and Ms O'Donnell noted that there was a need to produce and test local planning guidance now. However, it would be iterative, ensuring it would evolve to reflect further developments in the NSPLG's work.

- 5.8. With regard to funding, Members discussed the £3 million announced in the Suicide Prevention Action Plan over the term of the current Parliament. Members discussed how this might be split across the needs of all Actions, noting that this funding was time-limited and targeted at supporting implementation of the Action Plan for example in respect of research pilots and tests of change. It should not be taken to represent the entirety of current or future funding of suicide prevention activity. Members noted that all Partners had a responsibility to consider the funding needs of activity in the longer-term. Building on this, Members agreed that they should seek to quickly identify to the secretariat any funding needs across their Actions. **Action 9.5.**
- 5.9. The Group agreed to take a two phase approach to these proposals. Firstly, to support the proposal for development of best practice guidance based on available international evidence in support of standardisation across local areas. Secondly, identify where there are gaps in local planning / services delivery and test new approaches.. Ms Scott reaffirmed that there Local Government leads would be receptive to development of best practice guidance. The Group supported the first phase of this (development of best practice guidance). The Group agreed in principle to phase two, asking that its sponsors reflect the discussion of para 5.8 above in the proposal and recirculate it for agreement by correspondence to enable work to commence quickly. **Action 9.6.**

Action 6 (Digital)

- 5.10. Mr Jopling updated the Group on the first Action 6 workshop which took place on 18th June. This was a productive meeting which focused on existing available evidence around suicide prevention online applications.
- 5.11. The workshop concluded that further evidence should now be gathered on digital accessibility in Scotland and how that interacts with a demographic profile of those that have completed suicide.

Action 7 (At risk groups)

- 5.12. Mr Watson noted that in addition to the highlight report, the sponsors are carrying out a literature review and evidence gathering exercise with the AAG. An engagement process is also being drafted currently focusing on methodology.

Action 8 (Children and Young People)

- 5.13. Ms McDonald referred to her earlier comments about the Youth Commission on Mental Health Services report again encouraging Members to read it.

Action 9 (Evidence)

- 5.14. Professor O'Connor noted that the Academic Advisory Group have submitted a resource proposal to the Scottish Government which is currently under consideration.

Action 10 (Reviews)

- 5.15. Ms Scott outlined recommendations for Action 10 for inclusion in the September Annual Report. The sponsors have identified gaps relating to reviews of suicide in community settings and the need for added resource to support the development of review methodology. Recommendations would be made at local and national level. Ms Scott noted that Local Authority Chief Executives would prefer recommendations concerning specific responsibilities of local government to be made direct to Chief Officers rather than via the Scottish Government.
- 5.16. Ms Moss queried how any recommendations might take account of timescales for Fatal Accident Inquiries. Ms Scott offered to discuss this further with Ms Moss. **Action 9.7.**
- 5.17. There was a discussion about how bereaved families might be involved within the review process; that the development of any review process should be co-designed with people with lived experience and the ultimate goal should be that this should be a therapeutic process for all involved.
- 5.18. The Group agreed that the recommendations in respect of Action 10 be included in the September Annual Report with further discussion on implementation in due course.

Delivery Plan

- 5.19. As discussed at the previous meeting, Mr Grierson confirmed that the Delivery Plan was being updated and would be published on the NSPLG webpage.

6. Group Structure and Resourcing

- 6.1. Further to Group discussions about resourcing its work, Mr Grierson presented options to support delivery of the SPAP Actions.
- Option 1 proposed 'leads' for each of the 10 Actions who would drive progress. These individuals would ideally be subject matter experts.
 - Option 2 proposed grouping Actions into four workstreams, headed by a nominated Chair. This structure would support interdependencies across Actions.
 - Option 3 built on Option 2, identifying four workstreams, each with a dedicated 'Delivery Lead' with responsibility to coordinate activity in support of NSPLG sponsors.

- 6.2. The Group discussed that it was now moving into a delivery phase and its structure needed to support this through greater operational coordination and dedicated delivery resources.
- 6.3. The Group agreed to Option 3 but that Delivery Leads should not sit within the Scottish Government Suicide Prevention Policy Team but ideally be hosted by partner organisations in the spirit of collaborative approach set out in the SPAP and NSPLG Terms of Reference. The Group asked that Mr Grierson to now progress to filling these roles in consultation with sponsors. **Action 9.8.**

7. Annual Report

- 7.1. The Group discussed and agreed the proposed approach to the Annual Report. The Chair thanked those members who had contributed to this and noted that as a result of work done by sponsors and agreed by the work, Action 1, Action 3, and Action 10 were likely to feature recommendations within the Report.

8. Meeting Close

- 8.1. The Chair thanked Members for their attendance and the valuable contributions made.

Summary of Actions from the NSPLG Meeting held on 19 June 2019:

- 9.1 – Secretariat to confirm protocol around pre-release access to national statistics.
- 9.2 – Chair to write to Scottish Government in support of the views of Young Scot and SAMH view to extend Youth Commission on Mental Health Services.
- 9.3 – Action 3 sponsors to circulate the NHS HS paper on Choose Life to Group members by 5th July.
- 9.4 – Action 5 sponsors to carry out mapping exercise of existing crisis prevention services in Scotland.
- 9.5 – Group Members to identify funding needs across their Actions.
- 9.6 – Group Members of all Actions to feed into phase 2 of Action 1 through close communication around best practice guidance.
- 9.7 - Ms Scott and Ms Moss to discuss how any recommendations for Action 10 might take account of timescales for Fatal Accident Inquiries.
- 9.8 – Mr Grierson to progress activity to implement Option 3 to support delivery of the Group (as discussed at section 6).

Future NSPLG meeting dates:

- 31 July – Fettes Police Scotland – 5 Fettes Ave, Edinburgh, EH4 1RB
- 11 September – Venue TBC
- 23 October – Venue TBC
- 4 December – Venue TBC

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- 15 January – Venue TBC