Creating Hope Together – Year 1 Delivery plan (2023-24)



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Description

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This delivery plan covers the intended activity for the first year of the Creating Hope Together strategy and action plan. It sets out the plans to ensure progress towards achieving the short-term outcomes identified in the Outcomes Framework and the priorities set out for year one. We recognise that as we begin to implement and develop work to achieve the outcomes, we may need to adapt our approach to address any barriers or challenges faced. The horizon scanning function built into the action plan may also bring to light issues which we had not foreseen which may require change to be made. The plan will be reviewed through the monthly meeting schedule and advice will be sought from National Suicide Prevention Advisory Group (NSPAG), Academic Advisory Group (AAG), Lived Experience Panel (LEP), Youth Advisory Group (YAG) and Practice Experts to help make recommendations about any changes required. Any amendments to actions or timescales will be agreed with Scottish Government and COSLA.

Governance and delivery

Responsibility for delivery of this plan lies jointly with Scottish Government and COSLA. To support this, the NSPAG (membership detailed in Appendix 2) will provide advice and guidance to SG & COSLA and to Suicide Prevention Scotland, (a full description of which is available in Appendix 1). The National Delivery Lead (NDL) will lead Suicide Prevention Scotland and be accountable for delivering the action plan which underpins *Creating Hope Together* on behalf of Scottish Government and COSLA. The NDL will work with the Strategic Outcome Leads (details of lead organisations is contained in Appendix 3) and together they will form the Suicide Prevention Scotland leadership team. The leadership team will lead implementation of the action plan to achieve the outcomes set out in the Outcomes Framework. This group will also make decisions about effective deployment of the existing staffing and financial resources to ensure the year one priority actions are delivered and short-term outcomes achieved. Opportunities to develop new delivery partnerships beyond the outcome lead organisations will also be sought.

National partner organisations will also play an important role in delivery of the actions. Over the first six months of this delivery plan, we will engage with senior leaders in organisations such as NES, HIS, PHS, Police Scotland, Scottish Ambulance Service, Scottish Fire and Rescue Service, Education Scotland, Social Work Scotland, NHS 24 etc to ensure they are involved with the actions which are relevant to their settings and sectors and ensure they are connected to areas of work where there are the greatest opportunities to target inequalities and address the determinants of suicide risk. Relationships with policy leads across Scottish Government and COSLA will also be strengthened to ensure we build the conditions required to support delivery of the whole of Government actions identified in the action plan and support the development of new actions.

We know that work cannot just happen at a national level and that work across our communities is essential to achieving the vision of reducing the number of deaths by suicide, while tackling the inequalities which contribute to suicide. Community Planning Partnerships have a key role in supporting and delivering local suicide prevention activity with local leadership provided by Chief Officers in their role as leads for Public Protection. Building on the work undertaken over many years, the local suicide prevention leads across Scotland will continue to review, develop and implement local action plans, which help address the needs of their communities, these will also contribute to delivery of the long-term outcomes set out in Creating Hope Together. They will be supported by the SG funded Implementation Leads hosted in Public Health Scotland (PHS) who will build connections across areas, sharing good practice and building capacity, ensure learning from local work is shared at a national level, and that local leads are able to influence the direction of national action. We know there is a lot we can learn from each other.

We will strive to ensure that suicide prevention really is everyone's business and we will create opportunities for all sectors to work towards achieving this. Through Suicide Prevention Scotland, we will establish a welcoming and engaging suicide prevention community, where everyone can contribute and learn. In the first six months of this delivery plan, we will engage with existing networks such as local suicide prevention leads and third sector organisations to establish what they need to support delivery of suicide prevention. We will also build connections through trusted organisations to explore new networks and sectors, including those working with communities of interest, to ensure they are also part of Suicide Prevention Scotland and they have what is needed to support suicide prevention activity.

As we work to deliver the actions, we will ensure all the guiding principles set out in the strategy are embedded in the work and that there is a focus on addressing inequalities. We will also continue the commitment of involving lived and living experience in all the work we do. We will look to create opportunities for this to happen, by building on the learning from the Lived Experience Panel and Youth Advisory Group. We will re-establish a Lived and Living Experience Steering Group who will ensure we are creating the best conditions for lived experience to have the greatest impact on our work, this will also draw on the evaluation of the LEP carried out in 2023. We will also continue to develop our

understanding of suicide through the work of the Academic Advisory Group and build on this by creating opportunities to learn from practice informed evidence. We will also build connections with trusted organisations who are working with people facing inequalities to ensure their voices help to shape development and delivery of the work.

The outcomes framework will also help us measure, evaluate and report on delivery. Over year one we will establish reporting frameworks and proportionate evaluation for the strategy overall and for each area of work. This framework will also capture how we are addressing inequalities and ensure we are embedding the guiding principles. We will develop an annual report which will provide details of impact against each outcome. This will be reviewed by NSPAG in May each year and in turn NSPAG will provide advice to Scottish Government and COSLA on progress. This report will be published in June each year.

Priority actions and year one work

At the beginning of 2023, sessions were held with members of the NSPLG, delivery leads, implementation leads and wider stakeholders. Additional sessions were held with the Lived Experience Panel members and Youth Advisory Group. The aim of these sessions was to gather views on which actions from the wider action plan should be prioritised for year one.

All actions will involve lived experience, academic advice and practice evidence as standard. As part of the development of work under each action, a plan of engagement will be developed to ensure we make most effective use of these valuable resources and ensure an even spread of work across the year. This engagement may lead to changes to the delivery of actions which will be reviewed on an ongoing basis

The prioritised actions and detail about how these will be implemented and delivered over year one, are set out in the table below. For some of these, there will be a continuation of existing work and for others we will be starting from the beginning and building the foundations required. For ease, each action is summarised, full details of the actions can be found in Creating Hope Together Action Plan – 2022-2025.

While we have focussed on the prioritised actions for this year one delivery plan, it does not mean the other actions will not be taken forward. For some of these, it will mean action over years two and three, however, we will also take action where opportunities arise. This may mean enacting parts of the action plan earlier than intended but where there is capacity and infrastructure in place to do this.

In delivering the actions, we will follow the guiding principles set out in the strategy and action plan and ensure that there is a focus on inequalities. Reporting and evaluation frameworks will be developed which help measure impact and effectiveness of the activity in contributing to achieving the outcomes.

The table below sets out the long-term outcomes. Under each are the associated short-term outcomes the relevant priority actions and the individual actions which will be taken forward in this first year. All actions marked with * are either continued actions or ways of working which are continuing from Every Life Matters. Where there is reference to tests of change, we will ensure these combine actions across the outcomes where possible.

Priority Actions for 2023-2024

- 1. We will activate the whole of Government and society policy package so that a wide range of Government policies and their delivery on the ground — are working to prevent suicide. We will make the strongest connections possible with policies which address the social determinants of suicide, such as poverty and homelessness. We will also make sure we use all the touch points that people have with services to proactively be alert to suicide risk and offer compassionate support.
- 2. We will focus on improving safety at key locations of concern for suicide.
- 3. We will build on the Time Space Compassion approach, to keep improving the way people are supported and cared for when they are suicidal. We will focus our work in primary care, unscheduled care, and community settings.
- 4. We will support new peer support groups right across Scotland.
- 5. We will build more understanding of suicide risk and behaviour amongst children and young people and use that to improve responses.
- 6. We will keep raising awareness and improving learning about suicide. We will target our work so we build this understanding in sectors that support groups with a higher risk of suicide. Our current work in West Highlands and Skye will help us build greater understanding of what encourages particular groups to seek help.
- 7. We will develop an online portal which hosts information and advice on suicide, to help people who may be suicidal and anyone worried for someone, as well as professionals.
- 8. We will roll-out suicide reviews and improve data to help redesign the way support is given to people who are suicidal ensuring that support is both timely and effective.
- 9. We will work with partners in high-risk settings for suicide, to build effective and compassionate suicide prevention action plans.
- 10. We will step up our United to Prevent Suicide social movement with a new focus on boosting employer engagement and reaching groups most likely to be affected by suicide. We will continue to be creative, using different mediums, such as sport and social media, to tackle stigma and create ways for people to talk safely about suicide.
- In addition to these priority actions, the work which commenced through the previous action plan *Every Life Matters* will continue and be further developed, this includes rolling out bereavement support for families bereaved by suicide. Please also refer to the theory of change from the outcomes framework in Appendix 4 (Supplementary document)

The environment we live in promotes conditions which protect against suicide risk. This includes our psychological, social, cultural, economic and physical environment.

risk and offer	compassionate support.		
Action Plan Actions	Year one activities	Milestones	Delivery Partners
1.1 – Whole of Government and society approach	Identify priority policy areas where impact of change is greatest and where work is needed to establish foundations for future development – both at Scottish Government and Community Planning Partnership level. Work with colleagues in Scottish Government Mental Health Directorate to agree a process for enabling and reviewing progress of cross- government action on suicide prevention which takes account of policy design, strategy and implementation and covers national and local policy making and delivery. Carry out auditing work focussing on priority areas agreed in partnership with Scottish Government, COSLA and Outcome Leads	 Demonstrate change in policy approach to include action on suicide prevention through: Autumn 2023 Develop discussion paper and host workshop to establish priority actions for focus on year one Engage with leads across Scottish Government and Community Planning Partnerships to build opportunities to progress the Whole of Government and Society actions which includes ongoing review of progress Spring 2024 Framework for prioritisation of actions agreed with partners and advice from NSPAG Include within the annual report how agreed priorities are delivering against commitments Outline a plan for expanding into other policy areas and work with Local Authorities, Strategic Planning Groups, Community Planning Partnerships and Health and Social Care Partnerships 	Scottish Government CoSLA Samaritans
Human rights-based approach*	Continue to take a human rights-based approach and work with trusted organisations working with people with protected characteristics to support all relevant work. Routinely undertake equalities and human rights impact assessment. Consider opportunities through other areas of work across policy areas such as through the Scott Review, MH Quality Standards.	Ongoing throughout the lifespan of the strategy	Strategic Outcome Leads
	n on improving safety at key locations of concern fo	r suicide.	1
Action Plan Actions	Year one activities	Milestones	Partners
2.1 – Access to means – cross sector action plan to address locations of concern	Building on the Reducing Access to Means to Prevent Suicide report produced by PHS. Bring together key partners / voices on locations of concern to present evidence and prioritise actions. Develop an action plan for Locations of Concern with an initial focus on falling/jumping from height to be implemented over the action plan lifespan.	 We will improve safety at locations of concern by: Autumn 2023 Develop draft locations of concern action plan Winter 2023/24 Identify three local areas to test draft action plan and bring local partners together to test the approach 	Samaritans
2.2 – access to means consider priority actions from Delphi study	Utilise learning from Delphi study phase 1 to support work of action 2.1. Following publication of Delphi study phase 2, agree plan of implementation of recommendations where appropriate.	Will be determined by completion of Delphi study due to complete in 2024	Samaritans AAG

Improve knowledge on risk and protective factors*	Continued learning from AAG and practice-based evidence. Provide opportunities to share learning through planned events (see outcome 4).		AAG
3.1 – media reporting Work with the national and local media sector to hold a series of awareness raising events about responsible media reporting (including social media) – drawing on lived experience.	Engage with stakeholders to better understand what would support responsible media reporting. Deliver an initial programme of media guidelines training for journalists, communications professionals and people who talk to the media. Provide a media advisory service to help implement use of the media guidelines.	 We will improve media reporting by: Winter 2023/24 Undertake stakeholder engagement to build understanding Spring 2024 Use information gathered around priority groups to roll out a programme of media training for journalists, communications professionals and people who talk to the media 	Samaritans
Online safety bill*	Work with UKG as the Online Safety Bill completes its passage through Parliament (late 2023). Once the legislation comes into force, seek regular updates on provisions relevant to self-harm and suicide that apply in Scotland, so that we can understand impact.		

Short term outcomes

• Key priority Scottish Government policies (based on Annex A in the Action Plan 2022-2025) increasingly incorporate and deliver actions designed to contribute to both suicide prevention and tackling the inequalities that affect suicidal behaviour

• There is increased multi-agency and cross-sectoral awareness and action nationally and locally to restrict access to means of suicide

• Traditional media (including their online content) increasingly recognises and implements best practice in sensitively reporting, discussing and portraying suicide

Our communities have a clear understanding of suicide, risk factors and its prevention, so that people and organisations are more able to respond in helpful and informed ways when they, or others, need support.

Action Plan	Year one activities	Milestones	Partners
Actions			
4.1 – social movement, campaigns, and anti- stigma	Campaigns Develop an approach to utilise existing campaign materials for young people and FC United campaigns for this year. Movement Maintain digital channels and advertising. Utilise existing evidence to develop an approach for the movement. Host regional events to discuss ideas with UtPS members. Targeted outreach to those with protected characteristics.	 We will improve public knowledge and awareness of suicide and its prevention particularly targeting higher risk groups Winter 2023/24 Engage social movement expertise to agree an approach to develop the social movement which includes a programme of activity set out for next 18 months Draft plan for future campaigns which will consider FC United, Better Tomorrow and workplaces 	SAMH Electrify
groups with a l		ide. We will target our work so we build this understand nlands and Skye will help us build greater understand	
Action Plan Actions	Year one activities	Milestones	Lead
4.2 – suicide prevention learning approach	Complete review of learning approaches and create an implementation action plan. Design test of change approach, including identifying target at-risk groups/settings.	 We will ensure existing learning resources are available to and targeted towards people working with at risk groups and settings through: Spring 2024 Develop an implementation plan to take forward the review's finding Design approach to identify delivery partners and begin implementation Work with identified communities (either geographic or of interest) where there is greater risk of suicide to develop and deliver a test of change using existing learning resources to support a targeted approach 	SAMH Penumbra/Change MH PHS NES
Build learning resources and support local learning*	Launch skilled level resources and continue development of resources to support the Mental Health Improvement and Suicide Prevention Knowledge and Skills Framework.	 Autumn 2023 Launch skilled level facilitator resources to accompany learning resources Spring 2024 Connected to the tests of change from 4.2, coproduce additional learning resources to support the needs of different workforces and communities where there is greater risk of suicide 	NES PHS
4.8 – improve understanding of help- seeking and help giving	Seek input from the AAG on current understanding of help-seeking and help giving. Establish which approaches to suicide prevention are effective and deliverable in Scotland and their relative characteristics in relation to help seeking and help giving. This will include learning from the West Highland and Skye Remote and Isolated Workers project. Engage with the LEP/UtPS/YAG to understand the lived experience of help seeking with particular	 We will create the conditions for help-seeking and help giving through: Winter 2023/24 Use available evidence to establish future plans for help seeking which help to address gaps 	SAMH Samaritans Mental Health Equalities and Human Rights Forum

settings (specifically including rural settings),	
young people, and those with protected	
characteristics.	

Priority action

We will develop an online portal which hosts information and advice on suicide, to help people who may be suicidal and anyone worried for someone, as well as professionals.

Action Plan	Year one activities	Milestones	Partners
Actions			
4.6 – online portal	Develop a brief for the online portal through engagement with intended users.	We will develop a portal which contains appropriate evidence and information to meet the needs of stakeholders; this including the Delivery	SAMH
(this action links to 5.4)	Conduct detailed mapping of currently available resources and advice, the criteria for inclusion in	Collective, NSPAG, people affected by suicide etc	
	the portal, and which resources qualify.	 Autumn 2023 Identify expertise to design brief for online 	
	Conduct research with the target users to understand their needs.	portal	
		Spring 2024	
	Identify exemplar online portals to support the development brief.	Design for portal agreed	

• People are better informed about suicide, and able to respond more confidently and appropriately to people who may be suicidal or affected by suicide; particularly focussed on reducing the inequalities that affect suicidal behaviour.

• People are more confident and able to seek help for themselves or others who may be suicidal or affected by suicide, without experiencing stigma; particularly focussed on reducing the inequalities that affect suicidal behaviour.

There is increased knowledge about, and equitable implementation of, appropriate, high quality, effective support to prevent suicide; particularly • focussed on reducing the inequalities that affect suicidal behaviour.

Everyone affected by suicide is able to access high quality, compassionate, appropriate and timely support - which promotes wellbeing and recovery. This applies to all children, young people and adults who experience suicidal thoughts and behaviour, anyone who cares for them, and anyone affected by suicide in other ways.

Priority action			
-	n the Time Space Compassion approach, to keep im	proving the way people are supported and cared for v	when they are suicidal. We v
	in primary care, unscheduled care, and community		
Action Plan Actions	Year one activities	Milestones	Partners
5.2 – respond to the diverse needs of communities	Design test of change approach which links to action 4.2, including identifying target groups and settings where there is a higher risk of suicide and testing new approaches to provide support and encourage help seeking.	 We will respond to the diverse needs of communities through a targeted approach for at risk groups and settings through: Spring 2024 Work with identified communities (either geographic or of interest) where there is greater risk of suicide to develop and deliver a test of change which connects to action 4.2 using existing learning resources and testing new approaches to support at risk groups/settings 	Penumbra/Change MH SAMH PHS NES
Priority action We will suppor	t new peer support groups right across Scotland.		
Action Plan Actions	Year one activities	Milestones	Partners
5.3 Build new peer support capability	Connect with community based suicide prevention groups to scope the peer support landscape.	We will demonstrate increased availability and quality of peer support through:	Scottish Recovery Network (SRN)
	Establish co-design partners who can codesign and co-deliver training. Co-design bespoke peer support in suicide prevention training.	 Autumn 2023 Develop monitoring/evaluation framework for SRN project Agree approach to capturing information about existing peer support provision 	
		 Spring 2024 Co-design bespoke training on peer support for suicide prevention 	
Priority action	n an online portal which basts information and advi	ce on suicide, to help people who may be suicidal and	d apuana warriad far carros
as well as profe			
Action Plan Actions	Year one activities	Milestones	Partners
5.4 Develop resources to support families,	Map existing national and local resources (eg SAMH, GAMH and emerging work in West Highlands with Samaritans) to identify/explore gaps.	We will improve resources available for families and carers through: Autumn 2023	Penumbra/Change Mental Health Carers organisations / SG carers policy
friends, carers / unpaid carers	Explore existing resources and potential to develop unpaid and young carer specific resources using principles of Time, Space Compassion with	 Hold events to allow engagement with unpaid carers organisations to explore and review existing resources and identify gaps 	

Spring 2024

using principles of Time, Space Compassion with

of Carers, Carers Trust Scotland, Scottish Young

national unpaid carer organisations (e.g. Coalition

Links to 4.6

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• Agree action plan to fill any identified gaps

	Carer Services Alliance Network, Shared Care Scotland etc).	- Agree detion plan to fin any identified gaps	
Priority action We will build r Action Plan Actions		nongst children and young people and use that to im Milestones	prove responses. Partners
5.6 Prevent suicidal behaviour in CYP	Identify areas of highest concern and build understanding of local responses to suicide prevention for CYP, and what works. Explore emerging and existing data and approaches relating to suicidal behaviour in CYP	 Autumn 2023 Utilise existing sources of information and evidence to agree plan to address gaps in knowledge around children and young people Engage with YAG to build understanding of priorities for action 	Penumbra/Change Mental Health Children and Young People's Delivery Lead

Connect to work focussing on CYP mental	including CYP Joint Delivery Board, and Penumbra Self-Harm services for young people.	Ensure suicide prevention is included in the programme of work taken forward by the successor to the CYP Joint Delivery Board
health and wellbeing*		 Winter 2023/24 Agree with YAG and partners a plan for translating priorities into action Agree how delivery and governance of this action is fully aligned to wider SG/ CoSLA work for supporting CYP in distress and crisis

Priority action

We will build on the Time Space Compassion approach, to keep improving the way people are supported and cared for when they are suicidal. We will focus our work in primary care, unscheduled care, and community settings.

Action Plan Actions	Year one activities	Milestones	Partners
5.8 Work in primary care	Using the foundations established through the Time Space Compassion approach, work with Scottish Government MH Primary Care unit, National Delivery Lead, outcome leads/implementation leads/local SP leads etc identify and promote good practice to primary care workforce. This will include consideration of the use of safety planning, referrals to DBI, community support and pro-active case management.	 We will build on work identified through the development of Time Space Compassion Guidance and test in key primary care settings Autumn 2023 Establish connections at national and local level and explore opportunities for TSC in Primary Care Winter 2023/24 Co-design test of change in key primary care settings and implement 	National Delivery Lead Time Space Compassion Delivery Lead
5.9 Work in unscheduled care	 Promote principles of Time Space Compassion across all HSCP/SP partnership areas. Call for and promote examples/models of good practice currently being delivered. Consider potential impact of rollout/referral pathways of DBI. National Delivery Lead to work with colleagues in Scottish Government with a lead for Mental Health Unscheduled Care and with partners to identify national and local leads to take this forward and ensure link to MH quality standards & 5.10. 	 We will build on foundations of Time Space Compassion approach which will include building composite case studies Autumn 2023 Gather information about current practice in unscheduled care settings Establish baseline data through NHS Board meetings Deliver session at MHUC event on Time Space Compassion Winter 2023/24 Explore opportunities to improve referrals to DBI through unscheduled care settings, particularly where people have attended following a suicide attempt or self-harm incident. Based on baseline evidence and feedback from MHUC event, identify two areas to undertake improvement work to include use of psycho-social assessment and care pathways 	National Delivery Lead Time Space Compassion Delivery Lead

Action Plan	Year one activities	Wilestones	Partners
Actions			
5.10 Clinical	Link with work of HQIP (Healthcare Quality	We will improve the quality of clinical care by:	National Delivery Lead
care	Improvement Partnership) and NCISH (The		Time Space Compassion
Work to	National Confidential Inquiry into Suicide and	Autumn 2023	Delivery Lead
support statutory	Safety in Mental Health).	 Engage with NCISH/HQIP to establish areas of good practice 	
services to continuously improve the quality of clinical care	Explore ways to support Health and Social Care Partnerships to embed suicide prevention in clinical care, drawing on NCISH guidelines and expertise.	 Build awareness of and establish baseline of implementation of NCISH recommendations in mental health settings through mental health leads network 	

	Work with SG professional advisors and MH network leads to identify opportunities to embed NCISH recommendations – piloting in at least two health board areas.	 Winter 2023/24 Identify two health boards to pilot implementation of NCISH recommendations and undertake improvement work Create process for local partnerships to update on progress utilising outcome framework Spring 2024 	
Improve crisis response – TSC*	Agree a plan for developing work across communities. Seek opportunities to connect areas of good practice regarding Time, Space, Compassion and build on this to support action.	 Share learning from pilot sites Autumn 2023 Agree plan as part of test of change in communities for 2023/24 with outcome leads Throughout 2023/24 Seek opportunities to build on momentum created through the Time, Space, Compassion Gathering event in Spring 2023 	Time Space Compassion Delivery Lead Penumbra Change Mental Health
Support for people who are suicidal*	Deliver phase 2 of surviving suicidal thoughts through NHS 24.	 Autumn 2023 Create new video resources expanding diversity or experiences Throughout 2023/24 Programme of digital marketing to raise awareness of resources Spring 2024 Produce evaluation of impact of resources 	NHS 24
Action Plan Actions	Year one activities	Milestones	Partners
5.11 Provide	Review recommendations from evaluation of pilot service with National Oversight Group and	Winter 2023/24	NDL
suicide bereavement support across Scotland	Research Advisory Group, to inform roll-out with a focus on the core elements of the support which improve outcomes for those supported. Build understanding of locally delivered support services and their impact through the work of the Implementation Leads to enhance understanding of efficacy of support. Consider options for Wave After Wave training programme to enhance opportunities for bereavement support across communities.	 By December 2023, develop clear plan for roll out of bereavement support 	Penumbra Change MH Implementation Leads

• People are better informed about suicide, and able to respond more confidently and appropriately to people who may be suicidal or affected by

- suicide; particularly focussed on reducing the inequalities that affect suicidal behaviour.
- People who are suicidal or affected by suicide in any way, have more equitable access to appropriate, high quality, effective support to prevent suicide and promote wellbeing and recovery; particularly focussed on reducing the inequalities that affect suicidal behaviour
- There is increased knowledge about, and equitable implementation of, appropriate, high quality, effective support to prevent suicide; particularly focussed on reducing the inequalities that affect suicidal behaviour.

Our approach to suicide prevention is well planned and delivered, through close collaboration between national, local and sectoral partners. Our work is designed with lived experience insight, practice, data, research and intelligence. We improve our approach through regular monitoring, evaluation and review.

Priority action We will work w	Priority action We will work with partners in high-risk settings for suicide, to build effective and compassionate suicide prevention action plans.		
Action Plan Actions	Year one activities	Milestones	Partners
6.1 – suicide action plans in high risk settings	Work with leaders in and across key settings to ensure existing plans are up to date and new plans developed (internal and outward facing), based on current evidence and good practice. Initial focus on criminal justice, first responders, housing/social care, construction, veterinarian (and work with outcome leads where relevant). Support evaluation and monitoring and where appropriate develop and test tools/review Facilitate sharing of learning national to local and vice versa – and across key settings.	 We will improve the use of action plans in high risk settings through: Autumn 2023 Scope out who already have plans; considering development and not yet in place and what support, if any, required Spring 2024 Work with up to two settings e.g. Prisons, occupational sectors where new plans to be developed and others where plans to be updated (number of settings selected will depend on scoping) Develop monitoring and evaluation frameworks that can be used across and within different settings 	PHS

Priority action

We will roll-out suicide reviews and improve data to help redesign the way support is given to people who are suicidal — ensuring that support is both timely and effective.

Action Plan	Year one activities	Milestones	Partners
Actions 6.3 – lived experience model	Continuation of existing lived experience model (Lived Experience Panel, Youth Advisory Group & United to Prevent Suicide) following recommendations from the independent evaluation. Review evidence around lived experience models and develop conversation pieces to share learning. Explore opportunities to further development and input of social movement in national and local activities.	 Autumn 2023 Refreshed lived experience panel in place with changes to delivery as recommended in evaluation & more diverse membership Refreshed YAG in place (new members) Establish independently chaired lived experience steering group to provide ongoing support, guidance and oversight to Suicide Prevention Scotland on the inclusion of voices of lived and living experience Winter 2023/24 Identify where best to include United to Prevent Suicide social movement across all 	PHS SAMH Children in Scotland
6.4 – improve recording of suicide deaths and attempts	Review current systems recording suicide deaths and attempts across different owners to assess gaps and potential solutions towards better integration. Bring together different data sources to provide improved picture of suicide (eg from helplines, assessment processes; routine datasets etc) in order to drive tailored and responsive action.	actions and then activate plan We will improve our understanding of suicide and actions which can support suicide prevention through: Winter 2023/24 • Develop summary of national datasets and gap mapping – building on previous data and intelligence scoping to support delivery and enable reporting	PHS

Explore potential management information on ideation via SPIRE, DBI and CAPTND, and explore value this would add.

Provide more localised and themed analyses of ScotSID datasets, based on delivery needs.

Work with data providers/users/ MHEHRF and other partners to explore how best to provide improved data on inequalities in suicide.

- Establish SLWG to facilitate data sharing across ٠ key stakeholders (for routine and ad hoc data (eg helplines; webchats, suicide reviews; clusters and locations of concern etc)
- Continue to undertake comparison between ٠ NRS confirmed and PS suspected suicide data to ensure accuracy and identify discrepancies

Spring 2024

Work with A&E and inpatient care stakeholders • on methods to identify and record suicidal behaviour (potential to link with self-harm improvement activities)

		 Explore the potential for data sharing between partners in key settings (eg education, police, social work, admission to and from liberation from SPS) on suicidal behaviour among young people Link with the work on locations of concern, work with two local areas to test the use of GIS to record both data on deaths and suicidal behaviour at identified and new locations – to inform local planning Facilitate improved linkages with existing datasets – eg bring together ScotSID, more timely data, NRS, unscheduled care, prescribing with wider inequalities datasets eg GBV, alcohol and drugs (potentially ongoing) 	
6.6 – roll out suicide reviews and learning system	Secure agreement and associated resources on pragmatic solution to develop and implement a national recording and reporting system. Develop mechanisms to share data reported from suicide reviews and link to ScotSID analyses (generic and focused). Undertake test of change and develop a plan to roll out suicide reviews for all deaths by suicide across HSCP/NHS Board areas; involving key local third sector and ADP partners. Share learning and good practice.	 We will improve our understanding of suicide and actions which can support suicide prevention through: Autumn 2023 Agreement secured on resources and system Spring 2024 Completed test of change in at least 3 local areas Learn from test of change of suicide reviews and provide good practice guidance for local use 	PHS
Continue to learn about suicidal behaviour*	Develop programme of events/learning opportunities across the year.	 Autumn 2023 Agree programme of network and learning events for 2023/24 	PHS
Bring together data sources including ScotSID*	Will be built into programme of work around suicide reviews (6.6).		
Support local area action planning*	Ongoing programme of work to support local areas.	Autumn 2023 Undertake audit of work across local areas which takes account of data required to support other	PHS

Short term outcomes

• People who are suicidal or affected by suicide in any way, have more equitable access to appropriate, high quality, effective support – to prevent suicide and promote wellbeing and recovery; particularly focussed on reducing the inequalities that affect suicidal behaviour

• Lived/living experience insight and other sources of data and intelligence are more effectively collected, shared and used in planning, design, implementation and evaluation of suicide prevention interventions.

* actions which continue from Every Life Matters action plan

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Suicide Prevention Scotland – Delivery Collective

In the first year, the National Delivery Lead will engage with stakeholders to establish Suicide Prevention Scotland. Through a series of events and workshops the NDL will establish a framework for Suicide Prevention Scotland which will set out opportunities for engagement, networking, shared learning and will enhance co-ordination and planning of suicide prevention work across national, local and sectoral partners.

Wider Suicide Prevention Image: Community Local Suicide Prevention Image: Community Delivery/Implementation Image: Community Strategic Outcome Leads Image: Community National Delivery Lead Image: Community

Delivery of Creating Hope Together

The above diagram describes the different layers of the Suicide Prevention Scotland (Delivery Collective).

This structure will bring together our delivery partners across Scotland to learn, connect and take a joined up strategic approach to delivery. It will bring together National and Local Suicide prevention leads, National Implementation Leads (who are locally focussed), representatives of third sector partners across mental health, poverty and marginalised groups, first/ emergency responders such as Police Scotland and the Scottish Ambulance Service and representatives from the private and business sectors.

The National Delivery Lead will provide leadership to the Delivery Collective, ensuring collaboration and connection across outcomes. The National Delivery Lead, along with the Strategic Outcome Leads will form the senior leadership team, leading implementation of the action plan, designing and leading an innovative approach to suicide prevention, widening networks, influencing national priorities – both in suicide prevention and beyond and actively participating in a system-wide programme of change. The Delivery Collective will build a strong, unified and cohesive suicide prevention community across Scotland which will create the conditions where everyone can feel suicide prevention is their business.

The existing delivery and implementation leads will support delivery of the actions which will support achieving the outcomes. These roles will support the planning and delivery of national actions and create the platform to ensure national and local actions are well co-ordinated and mutually supportive.

Local Leaders through their Local Suicide Prevention Leads, multi-agency structures and community planning partnerships will ensure suicide prevention is considered in the wider strategic context. Local areas will be supported by the Implementation Leads to create local action plans. The Implementation Leads will also ensure local leads are able to shape the delivery of work at a national level and share learning from work undertaken at a local level.

We know that considerable work happens across Scotland, delivered through the third and private sector which will contribute to suicide prevention. We will ensure a variety of opportunities for this wider suicide prevention community to come together to share and collaborate as we deliver the action plan.

A programme of events will be developed and published on Suicide Prevention Scotland medium page (will move to the online portal when established) which will facilitate learning and networking which helps to meet the needs of the Suicide Prevention Scotland community.

National Suicide Prevention Advisory Group Membership

Rose Fitzpatrick - CBE, QPM - Chair Cath Denholm – Executive Director, EHRC Scotland Dr Linda Findlay – Chair, Royal College of Psychiatrists Scotland Louise Hunter – Chief Executive, Who Cares? Scotland Douglas Hutchison – President, Association of Directors of Education Scotland Peter Kelly – Director, Poverty Alliance Sheriff David Mackie – Board Member, SACRO Catherine McWilliam –Director of Nations - Scotland, Institute of Directors Brendan Rooney –Executive Director, Healthy n Happy Community Development Trust Dr Andrea Williamson – Professor of General Practice and Inclusion Health, University of Glasgow

Strategic Outcome Leads

Haylis Smith – National Delivery Lead

Outcome 1 – Samaritans – Neil Mathers

Outcome 2 – SAMH – Dan Farthing

Outcome 3 – Penumbra & Change Mental Health – Jane Cumming, Coleen Kelly & Isobel Murray

Outcome 4 – Public Health Scotland - Shirley Windsor



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