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Consultation on Scottish Government's new Suicide Prevention Action Plan

The Royal College of Nursing (RCN) is the UK's largest professional association and union for nurses with more than 435,000 members, of which over 40,000 are in Scotland. Nurses and health care support workers make up the majority of those working in health and care services and their contribution is vital to the delivery of the Scottish Government's health and care policy objectives. RCN Scotland welcomes the opportunity to respond to the Scottish Government's engagement paper on a new Suicide Prevention Action Plan.

RCN Scotland supports the broad themes presented in the engagement paper around improving the use of evidence, data and guidance on suicide prevention; modernising the content and accessibility of training; maximising the impact of national and local suicide prevention activity; and developing the use of social media and online resources. Our key points are broader than the questions in the engagement plan, so we have outlined these below instead of responding to specific questions.

RCN Scotland believes that the following issues are important to the successful delivery of the next iteration of the Scottish Government's Suicide Prevention Action Plan:

Maximising the contribution of nursing by ensuring there is a robust and sustainable nursing workforce

Nurses and healthcare support workers make an invaluable contribution to identifying and caring for individuals experiencing mental health crises, especially those at risk of, or experiencing suicidal thoughts across many health, social care and custodial settings. In particular, nursing roles within mental health services, primary and community care, A&E, criminal justice settings, health visiting and school nursing all have a significant contribution to make. We must ensure that there is a resourced and sustainable nursing workforce with the capacity, skill mix and knowledge to support suicide awareness and prevention.

Suicide rates are strongly linked to deprivation, with latest figures showing that the suicide rate was more than two-and-a-half times higher in the most deprived part of

the Scottish population compared to the least deprived. Nursing staff can often reach people who may not engage with other services and have a key role in reducing health inequalities.

The Scottish Government's Mental Health Strategy 2017 – 27 committed to increasing investment to £35 million for 800 additional mental health workers, to give access to dedicated mental health professionals in all A&Es, GP practices, police station custody suites and prisons. However the strategy does not make clear what professionals these mental health workers will be, and whether this includes nursing. An increasing proportion of the mental health nursing workforce is over 50 and approaching retirement age. This has implications for the sustainability of the future mental health workforce. It is also likely that many of the retirees will be the most experienced and skilled senior nurses.

Health visitors make a significant contribution to the health and wellbeing of families and local communities. They play a key role in identifying issues and providing support to families in times of crisis, for example women experiencing perinatal and postnatal depression. Health visitors can enable parents in the most need to develop parenting skills and confidence and connect them to further sources of support and monitor and assess the development, health and wellbeing of all infants and young children, detecting early any issues which require further action. As a result, health visiting interventions, when well planned and co-ordinated can reduce problems in later childhood; promote self-care and resilience; and prevent poor mental health throughout life. While there has been investment in health visiting by the Scottish Government in recent years, health visiting currently has a vacancy rate of 7.6% (ISD figures, as at December 2017).

School nurses can have an equally significant impact on early identification. They are in a unique position to develop relationships with education colleagues to raise awareness and help young people talk about their emotional wellbeing and mental health. The school nursing role in Scotland is being redefined to focus on nine priority areas, one of which is mental health and wellbeing. An evaluation of the early adoption of the refocused role in NHS Dumfries and Galloway and Tayside found that additional training on mental health and wellbeing was required. To date, the Scottish Government has not committed any additional funding to support the training of school nurses. The RCN has also called for all children's nurses to have the knowledge, skills and competencies in respect of children and young people's mental health, including promotion of emotional and psychological wellbeing.

Strengthening education and training of health and care professionals

High-quality training with respect to mental health awareness, suicide prevention and self-harm should be mandatory for professionals working with key at risk groups across health, social care and criminal justice settings. We note that a central commitment of the Scottish Government's Mental Health Strategy is parity of esteem between mental and physical health. This parity of esteem extends to *"equal status within healthcare education and practice demonstrated by supporting core skills and competencies in mental health for a variety of staff"*. Parity of esteem is a key priority area for the RCN across the UK and we are carrying out work, with practitioners and service users, looking at the contribution that nursing can make in delivering parity of esteem between physical and mental health.

All graduate nurses must meet certain criteria to gain entry onto the Nursing and Midwifery Council (NMC) register. Minimising risk of harm, including attempted suicide, is a core skill for a newly qualified mental health nurse. However suicide awareness and prevention needs to be addressed in all undergraduate nursing programmes. The RCN has been working with the NMC to ensure that suicide awareness will be included as a key proficiency for all fields of nursing, not just mental health nursing, in pre-

registration competencies. This provides an excellent opportunity for Scotland to develop a competency and evidence-based approach to suicide prevention and care that will influence the future workforce and provide alignment across education.

The engagement paper refers to developing new training programmes in mental health and suicide prevention. We recommend that the development of any new programmes is based on a full evaluation and analysis of feedback from the high numbers of individuals who have received training under the existing programme. For example, following-up with participants 6-12 months post-training will help identify ongoing needs of participants. This data is rarely collected and published in research pertaining to suicide awareness and prevention. Improved analysis of evidence and data on suicide prevention, as outlined in the engagement paper, may also inform further training needs.

Improved inter-agency co-ordination and leadership

The landscape since the last Suicide Prevention Strategy was published has changed dramatically, with the introduction of health and social care integration, increased regional planning of health and social care services and increased collaboration between national health boards. There needs to be clarity over how services are planned, delivered and co-ordinated at a local, regional and national level. Links between third sector organisations and representatives from social work, health, the police, housing, employment, criminal justice and education should be clear, with inter-agency working embedded and IT systems integrated and information shared, where appropriate.

Failure to do this can have a clear impact on someone's mental and physical wellbeing. For example, RCN Scotland raised, in our 2016 report on prison healthcare *Five Years On*, the issue of how people leaving prison often faced challenges registering with a GP in the community and how this made it difficult for them to receive access to healthcare, benefits and other services. The Scottish Prison Service's Prevention of Suicide in Prison Strategy 2016-2021 also emphasises the importance of multi-agency and multi-disciplinary partnership working, and support on release and reintegration.

We support the proposal to establish a Suicide Prevention Confederation of public, private and voluntary organisations to maximise impact and good practice in suicide prevention nationally and locally, providing that this is embedded and aligned with existing structures to plan and deliver services. There also needs to be clear leadership around suicide prevention at a local, regional and national level. We note that there has been a two year gap between the end of the last suicide prevention strategy and this engagement plan. We feel it is important that there is leadership at a strategic level for suicide prevention and a clear vision for how it integrates into other Scottish Government work, notably the Mental Health Strategy, Justice Vision, Policing 2026, the future Child and Adolescent Health and Wellbeing Plan and the Strategy on Social Isolation and Loneliness. In addition, we are aware that there will be a new public health body in Scotland and there is current work developing what its priorities will be.

Improving the use of evidence and data on suicide prevention

We support the ambitions in the engagement paper to improve the use of evidence and data across the different aspects of suicide prevention. It is important that we are able to act on and implement what the evidence shows us. We agree that the Scottish Government should establish a 'knowledge into action' group for suicide prevention. Data collection and sharing can play a vital role in early identification and prevention of suicide. Tracking emerging evidence bases and effective interventions will allow timely analysis to drive implementation of both local and national strategies on suicide prevention.

As part of this, it is important that we evaluate the impact of the previous Suicide Prevention Strategy and ensure we have effective monitoring and evaluation of the future Suicide Prevention Action Plan. We are pleased that there has been a downward trend in suicide rates in Scotland, with the five year rolling average decreasing by 17% between 2002–06 and 2012-16. However we would like to see more detailed evaluation of the interventions that have been successful so that this knowledge can be shared and applied. Similarly, there is no published evaluation or report on the implementation of the previous Scottish Government mental health strategy and it is not clear how the impact of the current strategy will be measured.

Although we understand that the evidence base for suicide is gathering pace, we would welcome a similar focus on developing the evidence base for self-harm. It would be particularly helpful to understand who self-harms, how they can be reached and what interventions are effective, although we acknowledge the difficulties of reaching what is often a hidden population.

Developing the use of social media and online resources

We support the focus in the engagement plan on developing the use of social media and building on existing work to develop an online suicide prevention presence across Scotland in collaboration with NHS24, NHS Health Scotland and other partners. It may be of interest, that the RCN were partners in developing MindED (www.minded.org.uk/), a free online educational resource on children and young people's mental health for all adults.

It is also important to think about online resources and decision-making support for professionals delivering care and planning services. The RCN, for example, has collaborated with Public Health England to produce a toolkit to support and develop the role of nursing in the prevention of suicide among lesbian, gay and bisexual young people¹.

For further information or to discuss any of the points raised please contact Helen Malo or Lisa Mackenzie, Policy Officers (job share) on sharedpolicy@rcn.org.uk.

Yours sincerely,



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¹Royal College of Nursing and Public Health England (2015) *Preventing suicide among lesbian, gay and bisexual young people: A toolkit for nurses*