

Integrated Impact Assessment – Summary Report

Each of the numbered sections below must be completed
Please state if the IIA is interim or final

1. Title of proposal

Suicide Prevention Toolkit

2. What will change as a result of this proposal?

The Council seeks to launch a toolkit for colleagues, designed to help them understand their role in suicide prevention, increase knowledge and skills necessary to support people in distress and crisis, and signpost the support available in the moment and postvention.

3. Briefly describe public involvement in this proposal to date and planned

There has been little public involvement in the development of this toolkit as it is designed to be used to support Council employees only. The Scottish Association for Mental Health has been engaged to support us in identifying areas of development within our organisation, provide training on awareness and prevention to colleagues across the Council and provide feedback on our toolkit. The content of the toolkit has been developed utilising the Scottish Government's Suicide Prevention Strategy, information from leading organisations including SAMH, NHS and Samaritans and feedback from subject matter experts within the Council.

4. Is the proposal considered strategic under the Fairer Scotland Duty?

The proposal does not directly tackle socioeconomic disadvantage so is not considered strategic under the fairer Scotland duty; however, risk factors are noted and will be made available with the toolkit to make colleagues aware of the disproportionate impact of suicide on different groups.

5. Date of IIA

13/10/2023

6. Who was present at the IIA? Identify facilitator, lead officer, report writer and any employee representative present and main stakeholder (e.g. Council, NHS)

Name	Job Title	Date of IIA training
Andrew Burgess	Senior HR Consultant	15/11/2018
Kathy McLauchlan	Lead HR Consultant	15/11/2018
Evie Douglas	HR Consultant	

Name	Job Title	Date of IIA training
Ian Mullen	TU Representative	
Alison Murphy	TU Representative	
Emma Kilpatrick	Lead HR Consultant	
Keith Young	Area Manager	
Ian Davidson	Planning & Commissioning Officer	
Brian Robertson	TU Representative	
Delia Douglas	TU Representative	
Siobhan Murtagh	Senior HR Consultant	28 October 2021
Cat Young	Assistant Programme Manager	

7. Evidence available at the time of the IIA

Evidence	Available – detail source	Comments: what does the evidence tell you with regard to different groups who may be affected and to the environmental impacts of your proposal
Data on populations in need		
Data on service uptake/access		
Data on socio-economic disadvantage e.g. low income, low wealth, material deprivation, area deprivation.	Creating Hope Together; Equalities Impact Assessment for Suicide Prevention Strategy & Action Plan	The Scottish Governments Strategy for Suicide Prevention 2022-2032 was assessed for equalities impacts, and it was concluded that the Strategy has the potential to impact on everyone, so the scope of the assessment was to extend beyond the list of protected characteristics and include wider socio-economic considerations. This provided us with information about a wide range of groups and trends.
Data on equality outcomes	Information concerning risk factors was consolidated into a document and provided to attendees – this incorporated information from the zero-tolerance alliance, public health Scotland and Mental Health UK.	Further information was collected from several recognisable sources and collated - this provided commentary on a number of risk factors including age, gender, bereavement, sexual orientation, gender identity and behaviour. This provided participants with further information when thinking about the potential impacts on different groups.
Research/literature evidence	N/A	N/A
Public/patient/client experience information	N/A	N/A

Evidence	Available – detail source	Comments: what does the evidence tell you with regard to different groups who may be affected and to the environmental impacts of your proposal
Evidence of inclusive engagement of people who use the service and involvement findings	N/A	N/A
Evidence of unmet need	N/A	N/A
Good practice guidelines	N/A	N/A
Carbon emissions generated/reduced data	N/A	N/A
Environmental data	N/A	N/A
Risk from cumulative impacts	N/A	N/A
Other (please specify)	N/A	N/A
Additional evidence required	N/A	N/A

8. In summary, what impacts were identified and which groups will they affect?

Equality, Health and Wellbeing and Human Rights	Affected populations
<p>Positive</p> <p>One topic for discussion amongst the group was whether we engaged with our people and/or subject matter experts in putting together the toolkit. The toolkit was drafted utilising current information and guidance from Scottish Government, NHS, Samaritans and SAMH, furthermore, it will be fully consulted upon with key stakeholders across the organisation, so that it is robust and is fit for purpose in supporting colleagues across the Council.</p> <p>There was some concern around the versatility of the toolkit in supporting colleagues in a variety of situations, including what we would be advising when a service user dies by suicide. The approach both in the moment and</p>	<p>All</p> <p>All</p>

Equality, Health and Wellbeing and Human Rights	Affected populations
<p>postvention can be utilised in a number of situations and the principles can be adapted to a variety of scenarios.</p> <p>Whilst suicide is viewed differently in some religions and cultures, the experience and approach to prevention remains the same. The toolkit provides all colleagues with the tools to have conversations and play a vital role in preventing death by suicide.</p> <p>It was noted that the employee population at CEC contains a diverse demographic and that there could be some culturally engrained attitudes associated with Suicide. Ultimately, it was recognised by the group that although there may be differing attitudes toward Suicide, the experience is tragic across all group, and the toolkit provides clarity and advice in support of colleagues. It is the hope of the group that such attitudes can be challenged and that stigma relating to Suicide can be eradicated.</p> <p>Participants asked how this toolkit could support colleagues with poor mental health, experiencing guilt about suicide. It was noted that the toolkit does go into some depth about the range of emotions that can be experienced following a death by suicide, including physical and emotional reactions, post-traumatic stress, survivor questions and stigma and isolation.</p>	<p>All</p> <p>All</p> <p>All</p>
<p>Negative</p> <p>It was noted that suicide has a disproportionate impact on some groups, and that some may be more resistant to engaging in conversations around suicide due to a perceived taboo or stigma.</p> <p>Ensuring awareness of this toolkit and instilling the skills and information is of paramount importance in our prevention efforts, but there were concerns about how this document will be accessed by colleagues with disabilities and where English is a second language. Consideration should be given to how the toolkit is communicated and the varied methods for engaging with colleagues where there are differing requirements.</p> <p>Again, on the accessibility front, it was advised that we may need to consider how we communicate this toolkit and how we make it available to colleagues, keeping in</p>	<p>All</p> <p>Disabled people/ non-english speakers, refugees & asylum seekers.</p> <p>People with low literacy/numeracy</p>

Equality, Health and Wellbeing and Human Rights	Affected populations
<p>mind there are those who struggle with reading and writing.</p> <p>The likelihood is that there are members of communities throughout Edinburgh that will perhaps struggle to access online and in person support. Consideration needs to be given as to how we signpost local and national services to colleagues, including those with differing delivery models.</p> <p>Furthermore, there are different types of staff that will need to be considered, again when thinking about communication and training, including: frontline workers with limited access to IT, lone workers, night shift workers and those on prolonged leave such as long-term sick or maternity leave.</p> <p>The main theme within the toolkit in terms of in the moment guidance and prevention is to support colleagues through having conversations, the procedures defined and by signposting to relevant services. Some managers may find this difficult, particularly if there is an awareness that different communities can have different perceptions of suicide. This could this mean that some groups with protected characteristics are less supported. Whilst suicide is viewed differently in some religions and cultures, the experience and approach to prevention remains the same. The toolkit provides all colleagues with the tools to have conversations and prevent death by suicide.</p> <p>The toolkit aims to both improve the quality of our approach to suicide prevention and to improve access for colleagues to supportive services. Expanding the list of supportive services will allow us to improve opportunities and provide a broader level access to include more impacted groups.</p> <p>It is hoped that by having robust processes and guidance outlined in this toolkit, it will ultimately prevent deaths by suicide, ensure support is provided for colleagues and that we start a positive dialogue with colleagues so that we can start breaking down barriers to those accessing support, including stigma.</p> <p>The toolkit will support colleagues in building resilience both by helping promote an understanding of suicide and</p>	<p>Geographical Communities</p> <p>Staff</p> <p>All</p> <p>All</p> <p>All</p> <p>All</p>

Equality, Health and Wellbeing and Human Rights	Affected populations
common elements, but by providing supportive tools, such as the support plan, for colleagues to utilise.	

Environment and Sustainability including climate change emissions and impacts	Affected populations
Positive The toolkit echoes the <i>'time, space compassion'</i> approach recommended by the Scottish Government, to improve the experience for those who need help at a time of suicidal crisis. The <i>'space'</i> element refers to how we ensure that we create physical spaces for people who seek support in a suicidal crisis that are accessible, quiet, comfortable, pleasant and take into account psychological needs. It was acknowledged by the group that this is hugely important and welcomed it being cited within the toolkit.	All
Negative The toolkit is informative and supportive, putting a real emphasis on prevention through looking for the signs and meaningful discussion. However, the group noted that there may be some work required to create psychologically safe spaces and time for colleagues who are distressed, in crisis, or where a conversation is required to support someone. Some workplaces are more conducive to the approach outlined in the toolkit, but there was some recognition for the fact that there could be limited availability of space in others.	All - but could be more difficult for staff in different roles, depending on their ability to have conversations during the course of their work

Economic		Affected populations
Positive	N/A	N/A
Negative	N/A	N/A

9. Is any part of this policy/ service to be carried out wholly or partly by contractors and if so how will equality, human rights including children's rights, environmental and sustainability issues be addressed?

Not applicable

- 10. Consider how you will communicate information about this policy/ service change to children and young people and those affected by sensory impairment, speech impairment, low level literacy or numeracy, learning difficulties or English as a second language? Please provide a summary of the communications plan.**

We will undertake normal communication activities, including articles in Newsbeat and Managers News; updating of the HR updates Orb page; and providing updates at service management meetings. Further to these activities, we will ensure that the workshops outline a responsibility for management to lead discussions with their staff to signpost to the toolkit and for them to make the necessary arrangements for colleagues to receive the toolkit in a language or format that they will be able to use.

- 11. Is the plan, programme, strategy or policy likely to result in significant environmental effects, either positive or negative? If yes, it is likely that a Strategic Environmental Assessment (SEA) will be required and the impacts identified in the IIA should be included in this. See section 2.10 in the Guidance for further information.**

Not applicable

- 12. Additional Information and Evidence Required**

If further evidence is required, please note how it will be gathered. If appropriate, mark this report as interim and submit updated final report once further evidence has been gathered.

Not applicable

- 13. Specific to this IIA only, what recommended actions have been, or will be, undertaken and by when? (these should be drawn from 7 – 11 above) Please complete:**

Specific actions (as a result of the IIA which may include financial implications, mitigating actions and risks of cumulative impacts)	Who will take them forward (name and job title)	Deadline for progressing	Review date
The contacts appendix of the toolkit should be expanded to include more services to represent and support different population groups and cultures.	OD Team, Human Resources	17/11/2023	28/6/2024
Consideration should be given as to how this toolkit is communicated, the format of it and	OD Team, Human Resources	17/11/2023	28/6/2024

Specific actions (as a result of the IIA which may include financial implications, mitigating actions and risks of cumulative impacts)	Who will take them forward (name and job title)	Deadline for progressing	Review date
any supporting materials, bearing in mind we have colleagues with different accessibility requirements i.e where English is a second language, disabled colleagues etc.			
Awareness should be built for this toolkit and any supporting training, documents and resources through the ongoing wellbeing focus activity calendar.	OD Team, Human Resources	17/11/2023	30/09/2024* *Suicide Awareness event tbc
Engagement for this toolkit should include the colleague networks, both in terms of the content and the communications plan.	OD Team, Human Resources	17/11/2023	28/6/2024

14. Are there any negative impacts in section 8 for which there are no identified mitigating actions?

Not applicable

15. How will you monitor how this proposal affects different groups, including people with protected characteristics?

A date of 28/6/2024 has been entered as a review date for the actions arising from this assessment. This date coincides with the end of the contracted workshop sessions by SAMH, and 7 months following the proposed implementation of this toolkit, including a mechanism for recording suicide-related incidents. It is proposed to review performance against these actions at this point, collect feedback about the toolkit and processes from key stakeholders and undertake an analysis of the data outputs.

16. Sign off by Head of Service

Name – Nareen Turnbull

Date – 07/12/2023

17. **Publication**

Completed and signed IIAs should be sent to:

integratedimpactassessments@edinburgh.gov.uk to be published on the Council website www.edinburgh.gov.uk/impactassessments

Edinburgh Integration Joint Board/Health and Social Care

sarah.bryson@edinburgh.gov.uk to be published at www.edinburghhsc.scot/the-ijb/integrated-impact-assessments/