

Improving Lives Together Ambition | Compassion | Integrity

Appendix 1

ECS Suicide Prevention and Mental Health Work

1. Introduction

This report describes the current activity and plans for mental health work and suicide prevention activity for Education and Children's Services. Mental health activity within ECS, which incorporates all schools and social work, is guided by the Health and Wellbeing strategy and the 'Connected Tayside' Emotional Wellbeing strategy. Recent activity has focussed on the development of a 'Nurturing Relationships' framework to best support evidenced based practice in schools. Work over time has included the embedding of the whole school resilience programme 'Bounce Back', work on a local mental health pathway and the setting up, through a Tayside framework of the Scottish Government 'Counselling in Schools' programme. During the Covid-19 pandemic the work shifted necessarily to a more dynamic phase of responding to presenting need. As this happened it was agreed by the Steering Group of the Community Mental Health Fund, to fund a Suicide Prevention and Mental Health Co-ordinator post, dedicated to ECS. The post holder links with the Adult Suicide Prevention Co-ordinator with a steering group for joint pieces of work being set up through the Health and Social Care Partnership.

Work is currently underway to draw up an ECS mental health action plan, from the Health and Wellbeing strategy, Connected Tayside strategy and current activities, including the Nurturing Relationships drive. This work aims to identify gaps requiring multi-agency liaison and is being undertaken by the Mental Health and Wellbeing group, a sub-group of the Children Young People and Families Planning Partnership.

Suicide prevention commences with a smile and stopping to check-in with someone in a corridor. Within ECS we embed suicide prevention therefore in our wider relationships and mental health work. The introduction of the new post has provided

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a particular focus on suicide prevention activity and this report focuses on the specific area of suicide prevention. The work has taken place alongside and in collaboration with, a two-year multi-agency project looking at best practice, guidance and training concerning children & young people who self-harm. This work is led by the Educational Psychology Service.

A summary of activity in three categories is given, outlining the actions and outcomes to date, followed by a summary of next steps.

2. Suicide Prevention and Mental Health activity

2.1 Understanding and analysing our context.

Gathering information on the general mental health needs of children and young people, is identified through quality assurance work with schools, school level self-evaluation work, analysis by the Inclusion Service and Educational Psychology and has been augmented this session by the national Health and Wellbeing census. For the specific area of suicide prevention, this knowledge has been enhanced through the conducting of a survey of school staff and reviewing some high tariff cases.

A survey was devised for school guidance staff to complete based upon their knowledge of children and young people where there was a concern around suicide ideation. The survey was distributed to all schools in Perth and Kinross in May 2022. It was based on staff judgement and therefore their subjective judgements and so requires to be treated with caution. It did however provide a useful analysis of the issues. The aim of the survey was to ascertain the situation in respect of children and young people experiencing suicide ideation who staff were aware of, as well as those who required a medical intervention as a result of suicide related behaviour. The survey found that there are numbers of children and young people whose suicidal ideation behaviours require support and robust systems around them. It found that a sub-set of these young people had experienced medical intervention. The feedback around medical interventions and what source the school were informed that such an event occurred (parent/carers, children and young people, peers, Health, Police, Social Work) indicated more work is required to understand and establish clearer protocols for information sharing. Staff considered that suicide prevention in our schools could benefit from work on clear processes, support for risk analysis and management, further training and support for staff to feel that others are 'alongside' them. They also wished to see greater support for young people at a 'tier 3' level, that is, at the level just below the need for clinical intervention.

With a baseline understanding established, a response has been mobilised to provide staff in schools with tools and a framework to apply a system of risk management in relation to suicide prevention. The system requires that staff apply a greater level of analysis to the information and circumstances of the child or young person which then informs identifying an appropriate staged level of intervention.

The survey has identified that the risk inherent within the system requires closer multiagency collaboration, to ensure joint risk management and appropriate information sharing around medical intervention and safety plans for young people. Relevant actions are underway and described in sections 3 and 4. Reviewing circumstances around some particularly high tariff cases, from the education perspective, further supported the above work. It highlighted the need for shared risk management and information sharing along with multi-agency child/young person's planning, coordination and recording. In addition, it demonstrated that attention needs to be given to the availability and effectiveness of skilled support, beneath the clinical level, for young people in the community for the prevention of escalation.

2.2 Recent and on-going actions for mental health

2.2.1 Universal Approaches

- Considerable development work is currently going into to the development of the PKC Nurturing Relationships framework for schools to promote and develop skills in relationships across a school and support evidenced based relational approaches such as the use of nurture principles. The framework includes an intensive whole school programme, a universal foundational professional learning programme for 2023/24 and guidance on school-based policy development. All relationships work is presented as being an integral part of supporting mental health in children and young people.
- The Educational Psychology Service continue to support the whole school resilience programme Bounce Back across our Primary Schools and are working with four Secondary Schools to pilot Secondary materials.
- The Educational Psychology Service has also led on a staged approach to emotionally based absence from school, the professional learning materials for this include anxiety management and graded exposure inputs, developed during the covid 19 pandemic.
- Child and Adolescent Mental Health Services (CAMHS) are rolling out 'Decider Skills' training across Tayside. The training is available for both staff, and groups of parents on a rolling 4 week programme. The training is based on Cognitive Behavioural Therapy to support skills that help recognition, understanding and management of emotions and mental health.

2.2.2 National programmes

- Since the full launch of the Scottish Government's 'Counselling in Schools' programme, 1,072 PKC children and young people have accessed one to one counselling between January 2021 to Dec 2022. Themes have included anxiety, self-esteem and family-based concerns.
- Through the Counselling in Schools programme ECS has been able to provide funding for crisis support work in our schools, which, following a full procurement exercise, was awarded to The Light House organisation, a local non-profit service for young people at risk of self-harm or suicide. This is also enabling the support to be further embedded within school systems and helping to support the roll out of the Mental Health Ambassadors programme.

- To enhance accessibility of counselling there is a further pilot to trial groupbased counselling.
- Support for staff through Counselling in Schools provider sessions is currently going through procurement processes.
- The Scottish Government Community Mental Health fund has committed to ensuring that 'Every child and young person (5-24 or 26 for young people with care experience) in Scotland will be able to access local community services which support and improve their mental health and emotional wellbeing'. This funding has been used in PKC to procure several supports and services which help promote positive mental wellbeing. One such example is the recruitment of three Mental Wellbeing Support Workers. These workers are embedded within Youth Services and Child Protection Duty Team. The workers have a range of skills and can help children and young people identify, understand and regulate their emotions.

2.2.3. Targeted ECS led actions

- Work across Secondary Schools has created five more Guidance Teacher posts and therefore capped the case load for any one Guidance Teacher.
- A short life working group is being set up to create good practice guidance for support and supervision of key support staff.
- The critical incident guidance for staff was reviewed with Headteachers and adaptations were made. Further work to develop the guidance is being planned for in collaboration with the Child Protection Committee learning review guidance.
- A two-year multi-agency project led by Educational Psychology on supporting school staff to manage children and young people who self-harm, has developed focus groups with young people to support developments in training, professional inputs developed between Educational Psychology and The Light House, the clarification of referral pathways delineating who to turn to when and the writing of clear guidance for schools.
- Work with Tayside NHS Public Health colleagues on suicide prevention systems and needs, with the Suicide Prevention and Mental Health Co-ordinator leading a sub-group to look at information sharing processes.
- The Community Link Worker service, with consultation from Educational Psychology, has piloted a 'Wellbeing Workshop' for P7 pupils with parents, targeting anxiety prevention and management. The materials were adapted following feedback and the workshops are being rolled out this session.

2.2.4 Youth Services

• Youth Services are currently developing a wellbeing offer to schools. This involves offering a safe place to meet and engage with a Youth worker in school, one to one work with identified young people around risk taking

behaviours and some thematic group work as identified by the schools and the youth worker.

- The service has secured funding to continue with a mental wellbeing worker, a post developed through Covid 19 pandemic funding. Working alongside services for young people the post-holder is offering supports to young people with low mood, high anxiety and at times some crisis support. There is also development of groups in Wellbank for care experienced young people along with targeted one to one work.
- Scott Street offers a drop in for young people on a Monday and Friday where they can access support from youth services and partners. From this, identified young people requiring additional support around their mental wellbeing can be supported through one-to-ones or thematic groupwork such as the young girl's group with Youth Services and Willowgate.

The self-harm work, and the suicide prevention work with Public Health and The Light House, has received national and Scottish Government interest and is viewed as sector leading.

2.3 Suicide prevention - supporting staff - containment and confidence

Following on from the survey, each Secondary School and impacted Primary Schools have been approached to review the needs in their school. In addition to this, and the above work outlined from 2.2, a Mental Health Delivery Group was set up with full representation from multi-agency partners. The group operates as a sub-group of the Mental Health and Wellbeing Overview group, which sits under the Children, Young People and families Planning Partnership.

The aim of the work undertaken by the group has been to analyse the situation, agree actions and to ensure that any gaps are addressed. This has included undertaking action research with two school communities, to best understand the details around suicide prevention and mental health promotion at a school level. This work will inform actions for all schools. Two specific areas of activity to date have been the production of guidance and devising training inputs to provide the structures to give staff a sense of safety and containment, as the basis for greater confidence and capacity in this area.

Guidance

Activity has focused on giving clarity of understanding around processes and roles and specific supports. This has included being clear over who is available to support education staff in their decision making, and at what point. The outcomes to date are draft guidance out for consultation with all high school guidance teams which includes:

- A flow chart for decision making about suicide risk, what steps to take and who to contact when for advice and support,
- A risk categorisation format to support staff to prioritise levels of need,
- A risk management framework that details the likely presentation, the expectations for action and the supports available.

Training

The aim for a training framework is to support guidance and pupil support teams to feel confident about what to do when in this area. At the same time, feedback from this work has supported planning for meeting needs going forward.

Outcomes are that schools involved in the action research have had significant support assigned to their guidance teams to build capacity and confidence and ways of working in the area of suicide prevention. A professional learning plan has been devised for 2023-2024 containing both universal (all staff) inputs and targeted inputs for support staff through a framework that brings together mental health, suicide prevention and trauma informed practice, providing opportunities for whole team reflective practice facilitated sessions. These inputs are promoted alongside of the Nurturing Relationships framework.

2.4 Suicide Prevention -systems change

Child protection

On 21 September 2021, the Scottish Government published their refreshed <u>National</u> <u>Guidance for Child Protection in Scotland</u>, which they asked Child Protection Committees to fully implement by 21 September 2023. This work is well underway via the CPC and at present the CPC's existing <u>Child Protection Inter-Agency Guidelines</u> <u>2017</u> are being similarly refreshed, in compliance with the national guidance. The refreshed national guidance continues to include self-harm and suicide as a child protection concern, and this will be highlighted in the refreshed local guidelines. The CPC Lead Officer and the ECS Wellbeing and Inclusion Officer are working closely together on the refresh the CPC Child Protection Inter-Agency Guidelines and the ECS Child Protection Procedures respectively; to ensure the necessary synergy and once both are refreshed, will be rolled out to key staff in Education; supported by learning and development opportunities.

In addition, the national guidance advises that support and supervision should be considered for all relevant staff. As noted above, a Short Life Working Group on this matter, led by the Principal Educational Psychologist and Inclusion and Wellbeing Officer, who represents PKC on a national working group on this topic, is planned to be undertaken during term 4.

Multi-agency processes for medical interventions and safety plans

There is currently no agreed multi-agency protocol of how and by whom schools will be informed when pupils have required a medical intervention after suicide related behaviour. This can lead to heightened concern about the safety and wellbeing of pupils returning to school when there has been no contact with health colleagues, and therefore also no consultation, advice, or involvement in safety planning. It also makes it more challenging for a school to manage any related peer issues, if they are not being informed, by parents or professionals, of incidents. Neither is there clarity of processes around a shared ownership of risk and safety planning for the young person in situations of suicide ideation with intent.

These issues have been reviewed by the Tayside Suicide Prevention Young People's group and the partnership agreed to assign multi-agency strategic leads to progress this work, which will remain led by Public Health.

A whole systems approach to identifying and meeting need

There is not yet an effective, strategic forum that is working to bring data from across partners together to identify gaps jointly and then collaboratively plan to meet need. Currently services meet to discuss activity and work is underway, commenced through a workshop in December '22, to try to identify need that can be jointly agreed. More joint and collaborative strategic planning with health however would ensure greater cohesion for staff along with more sustainability and effectiveness of interventions and training.

The approach and continuum of mental health support in schools

As the action research progresses thorough the Mental Health Delivery Group and guidance teams become more confident in the area of suicide prevention the focus will turn to reviewing the continuum of mental health support in schools. As The Light House crisis work becomes embedded within systems in schools', attention will turn to the theme mentioned above arising from the need for more skilled support in schools beneath the clinical or crisis level. The Mental Health Delivery Group will work on refining an analysis of need and possible interventions at this level.

Schools in PKC have long had a focus on the promotion of resilience and coping skills. The need to augment and further promote this work this clear. Adopting a whole school approach to a system that doesn't just respond effectively to poor health but can teach and bolster good mental health has never been more important. The Mental Health Delivery Group and Educational Psychology Service will work together and alongside the Quality Improvement Officer (QIO) teams, utilising the Scottish Government resources such as the whole-school self-evaluation materials have been disseminated and publicised. Doing this will be part of bringing together the 'Nurturing Relationships' and mental health agenda into a coherent whole.

3. Summary and on-going actions

Work has been undertaken to best understand the current mental health context as it pertains to suicide risk for children and young people. The analysis has been informed by a survey undertaken with school staff and reviewing the circumstances around

particularly high tariff situations for young people. From this analysis it was clear that there has been a need to provide a sense of safety within the school system and enhance confidence of staff.

Systems have been set up to provide a risk management framework for ECS staff, to listen to guidance teams and devise appropriate training plans. This work is iterative and on-going and led by the Suicide Prevention and Mental Health Co-ordinator through the multi-agency Mental Health Delivery Group.

Work across the system has included supporting the community around schools through the Community Mental Health programme, augmenting the supports to schools through increasing Guidance Teacher numbers and training and through the Counselling in Schools programme funding the piloting of crisis supports and group-based counselling. Work is underway to enhance support to staff, critical incident guidance has been reviewed, multi-agency work on managing self-harm is now being developed for roll out and the wider 'Nurturing Relationships' agenda is expanding the whole school programme and developing a foundational professional learning input.

In addition, systems level work is underway to:

- update child protection guidance giving more prominence to guidance for staff on responding to suicide ideation,
- continue to work with health colleagues and other partners to review agency information sharing guidance to ensure timely information is given to support planning where there have been medical interventions and where coherence around a young person's led safety plan is in their best interests,
- consider how best to engage partners in coming together to identify gaps and agree appropriate plans, and
- adopt a whole school approach to support resilience and coping skills.

4. Conclusion

The instatement of a Suicide Prevention and Mental Health Co-ordinator has augmented and increased significantly the pace of ECS work in respect of suicide prevention. The survey undertaken with school staff has increased understanding of the issues and clarified where to focus improvement actions. As a result, schools are now better informed and supported and work in reducing the risks within the system and increasing confidence of staff continues to be implemented. There is a plan to work towards better, appropriate information sharing from and with health that will improve multi-agency responses and the sharing of risk. Work with Public Health and the third sector on this and on actions to address self-harm has been nationally recognised as sector leading. ECS will continue to work closely with Public Health and health colleagues to further this by completing multiagency work to best enhance safety structures for our most vulnerable young people.