

Health, Social Care & Sport Committee - Everybody's Business
Welsh Government Status report on recommendations
[Everybody's Business, a report on suicide prevention in Wales, December 2018](#)

June 2023 Update

	Recommendation	Welsh Government Update August 2022	Welsh Government Update June 2023
1	<p>We recommend that a suicide prevention training framework should be adopted and implemented across all public services in a similar way to the framework for domestic violence, where training requirements are specified depending on the role. In particular, GPs would be one of the groups of professionals with greater training / skills requirements, and it is important that they and their practice staff have confidence to ask the right questions and respond compassionately and effectively when dealing with patients who may be at risk of suicide. We believe that the National Advisory Group should take this forward as an immediate priority, particularly given that a training framework</p>	<p>The work around universal suicide prevention training continues to evolve</p> <p>A digital platform is currently in development providing a 'suicide and self harm (SSH) Cymru training hub' to help front line workers to navigate what is a crowded market of training products and programmes in an informed way. It will also provide short-cuts to free on-line training videos and e-learning resources available across the UK</p> <p>There are also training frameworks available on the ACES AWARE Hub, and another being developed through Traumatic Stress Wales.</p> <p>It is possible that the digital training hub will expose gaps in training provision, as people seek products to suit their particular development needs. The National Coordinator is liaising with AGORED and Adult Learning Wales to look at developing specific units (curricular and learning outcomes) and potentially a national qualification.</p>	<p>We have now launched a digital HUB <u>Welcome to the Suicide and self-harm Prevention Cymru Training Hub (sshp.wales)</u> to assist workers from all sectors in accessing free and costed training and development offers relating to suicide and self harm prevention.</p> <p>We will now focus on raising awareness of the digital hub and identifying gaps in training provision.</p> <p>The future approach to training across all groups will be set out in the successors to Talk to Me 2 and Together for Mental Health</p> <p>This recommendation is now closed.</p>

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	has already been developed and is being launched in England		
2	We recommend that the Welsh Government should take the lead in promoting existing materials, such as the “See. Say. Signpost.” training resource as part of a campaign to raise public awareness and embed the message that suicide is everybody’s business and can happen in any community at any time.	<p>In addition to the update provided in February 2021, please see the update to the previous recommendation.</p> <p>This work will continue in the course of ‘business as usual’ and further activity will be included within the routine National Co-ordinator updates made available to stakeholders. We will also continue discussions on how best to raise awareness through the work of the Cross Government Group on Suicide Prevention and through the work programme of the National Co-ordinator on Suicide and Self Harm.</p>	<p>Since the publication of Everybody’s Business new chief officers have been appointed to lead agencies (Samaritans, MIND, POPYRUS), and we continue to work with them around key messaging and engagement, and they all attend the National Advisory Group for suicide and self harm prevention.</p> <p>More recently, Samaritans have recruited a community engagement worker who now attends all three regional forums supporting this collaboration at a regional level.</p> <p>The coordinator team has produced a QR code to assist local teams and front-line workers in providing a link to the 2016 version of Help is at Hand Cymru on Dewis Cymru in both English and Welsh</p> <p>The document has also been uploaded onto the digital platform Help is at Hand Pages - NHS SSHP. This will enable the information to be continually updated, and to improve accessibility across different groups.</p> <p>This recommendation is now closed.</p>
5	We recommend that the Welsh Government take urgent action to ensure that all	NICE is currently consulting on new guidance on self harm. Welsh Government will issue a Welsh Health Circular on decisions about	The NICE guidance on self harm was published on 7 th September 2022: Overview Self-harm: assessment, management and

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	<p>GPs in Wales are aware of and understand the GMC guidelines on sharing information and the consensus statement agreed by the UK Department of Health, Royal Colleges and other partners. We support the campaign by Papyrus to encourage chief executives of NHS bodies to provide assurance that they will support staff who make a best interest decision to break patient confidentiality in order to protect life</p>	<p>confidentiality rights when supporting patients who are considered at risk of suicide or self-harm following the publication of the NICE guidance later this year.</p>	<p>preventing recurrence Guidance NICE. Officials have recently issued a Welsh Health Circular to draw attention and raise awareness of the guidance across NHS, including primary care.</p> <p>Officials have also recently issued a Welsh Health Circular on Information disclosure in relation to confidentiality rights.</p> <p>This recommendation is now closed.</p>
6	<p>We recommend that the Welsh Government must take all necessary steps to ensure parity between mental and physical health services. This should be tied to “A Healthier Wales”, and the Welsh Government must ensure that its plans for the development of health and social care services give the same priority to mental health and wellbeing as to physical health. This includes ensuring the allocation of appropriate resources, and that patient outcomes, in terms of improved mental health, are</p>	<p>Ensuring parity between physical and mental health is firmly embedded in health strategies in Wales and the Programme for Government makes a commitment to continue to prioritise investment in mental health. On this basis, this element of the recommendation is closed.</p> <p>In terms of outcome measures for mental health, training and resources to embed the use of patient reported outcome and experience measures in all mental health teams in Wales began in June 2021 and this work will continue to be supported until March 2023.</p> <p>This work is now being taken through the Mental Health Data and Outcomes Measures Board which reports to the Together for Mental Health Ministerial Oversight Board.</p>	<p>Representatives of over 80% of the mental health and learning disability teams in Wales have now received training in how to embed patient reported outcome and experience measures into day to day practice. Significant resources have been developed to support the outcomes work and these are all available on the Outcome Measures</p> <p>The feedback on the training has been very positive, however the impact of the pandemic on capacity to translate training into consistent practice has been variable. As a result, we are extending the project by a further year to provide additional support to health boards. Enabling service users to describe what is important to them, having</p>

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	measured and reported. If the Welsh Government is serious about achieving parity between mental and physical health, it must consider whether the introduction of meaningful targets would ensure health boards give sufficient focus to improving mental health services and patients' experience of care		goals and aspirations is key to providing effective, safe and compassionate care. This work continues to be taken through the Mental Health Data and Outcomes Measures Board which reports to the Together for Mental Health Ministerial Oversight Board.
8	<p>We recommend that the Welsh Government develops an all-Wales triage model which would see community psychiatric nurses based in police control rooms. We believe this work should be carried out in line with the six month timescale set out in the Children, Young People and Education Committee's Mind Over Matter report (its recommendation 15):</p> <ul style="list-style-type: none"> ▪ That the Welsh Government, within six months of this report's publication, in relation to crisis and out-of-hours care: <ul style="list-style-type: none"> ▪ work with Welsh police forces to scope an all-Wales triage model which would see mental health practitioners situated in 	<p>As previously referenced, we committed £6million to improve crisis services in 2021/22 and we are making good progress in rolling out 24/7 access to urgent mental health support via 111. Our planned implementation for April has been impacted by the pandemic and challenges remain for health boards in the recruitment of key staff. Health boards are at different phases of implementation and we are aiming for 24/7 coverage across Wales by the end of the year – with some health board on track to have the service in place before the summer. Once fully implemented, the service will provide a direct line for police officers to call to request advice. Health boards are working locally with police forces where there are existing triage models in place.</p> <p>Continuing the transformation of crisis services is a priority for the additional mental health funding that we have secured for 2022/23. Funding will be directed to support the</p>	<p>The roll-out of 111 press 2 for Urgent Mental Health continues and six health boards have implemented the service on a 24/7 basis. Powys Teaching Health Board has implemented the service and it working towards 24/7 coverage by June.</p> <p>The service will also provide a contact line for professionals to call if they need to access advice and support for an individual that they are concerned about. This service has been welcomed by a number of groups that already using it, for instance the police and social workers.</p>

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	<p>police control rooms to provide advice when children and young people (and other age groups, if appropriate) present in crisis;</p> <ul style="list-style-type: none"> ▪ outline how resources could be directed towards enabling crisis teams in all health boards to provide training and cascade expertise to other frontline services, particularly colleagues in A&E, in border areas (to improve cross-border relations with those centres most often accessed by Welsh domiciled patients), and in schools (to normalise conversations about suicide and self-harm in particular); ▪ ensure that follow-up support is being provided by health boards after discharge, provide information on how health boards monitor this provision, and commit to making this information publicly available to ensure transparency and accountability ensure that all health boards are adhering to the requirement to hold designated beds that could be staffed adequately for unders- 	<p>improvements recommending by the NHS Delivery Unit following its review of crisis care. Health boards submitted plans for this funding at the end of May and officials are considering the bids.</p> <p>We also continue to pilot the mental health conveyance service with St John Cymru. This pilot has received positive feedback from stakeholders, particularly from Approved Mental Health Practitioners and the Police. Plans are in place to roll-out the service following the successful pilot period</p> <p>Welsh Government commissioned the NCCU to undertake a review of designated bed usage in 2021. The NCCU and the NHS Delivery Unit are now developing updated guidance with more regular data capture to support improvements.</p> <p>Guidance on the delivery of liaison psychiatry services (LPS) in Wales was published in December 2021. This document provides guidance on the functions of Liaison Psychiatry Services (LPS) in Wales. It has been developed in conjunction with key stakeholders throughout Wales and all professional groups have been represented. This guidance applies across the age range and whilst differentiation may be needed, no age range should receive services of a lesser quality. Service user and carers' voices have been sought and are reflected in this document. It contains eight standards to</p>	

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	<p>18s in crises, indicating how this will be monitored and reported in future, and what steps will be taken if such beds are not available;</p> <ul style="list-style-type: none"> ▪ implement with pace and in a uniform way across health boards the single point of access approach to specialist services, to ensure timely and appropriate access to support, urgent or otherwise; and ▪ reflecting on the results of the review of crisis care, outline what more needs to be done to deliver a safe and cost-effective 24/7 crisis care service in all areas of Wales, how that will be done, and by when. 	<p>support equitable access to and provision of LPS in Wales and reflect both The National Institute for Health and Care Excellence (NICE) and professional body standards. Collecting information in relation to the standards will assist health boards to develop a clear picture of service demand, uptake and delivery. It is expected that both qualitative and quantitative information will become available as services develop and mature. Auditing information about the LPS should enable health boards to make evidenced-based decisions about the future provision of that service. Psychiatric Liaison Services has also been made a priority within this years' service improvement funding.</p>	

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9	We recommend that the Welsh Government takes urgent action to establish to what extent those discharged from inpatient care are currently receiving follow-up care within the targeted timescale and provide an update to the Committee within three months. This should include steps to ensure that IT systems can identify whether this is happening	<p>This continues to be progressed through the work of the Mental Health Data and Outcomes Measures Board.</p> <p>The draft core mental health dataset has been circulated to health boards to impact test and to understand which elements are already recorded by health boards and which elements would need to be added. This has helped identify any elements which would be difficult to record. The report on this impact testing has now been received by the NHS Collaborative. The core data was submitted to the Welsh Information Standards Board in July as part of the approval process.</p>	<p>To further support this work a Technical Group has been set up and reports to the Mental Health Outcome and Measures Board. This group comprises of health board digital/performance leads and is focusing on the practicalities of collecting and sharing data.</p> <p>It is recognised that establishing a full dataset is complex and we are prioritising specific data items at each stage to ensure that any data collected is robust and fit for purpose, with the initial focus being on referrals and admissions data. We will also be prioritising demographic data, such as age, gender and ethnicity which will support our ability to plan services based on the needs and demands of our population.</p>
10	We recommend that the Welsh Government introduces six monthly monitoring and reporting of the target in the Together for Mental Health Delivery Plan that all patients discharged from inpatient care receive follow up care within the specified timescale	<p>Alongside the outcomes training referenced in recommendation 6, the University of South Wales has been commissioned to work with health boards and other stakeholders to develop outcome measures for mental health services. The initial mapping work report is due by Summer 2022.</p>	<p>We understand the need to have data publicly available as soon as practicable and we are working towards having an initial national dashboard on mental health activity available by September, we will then broaden this available data incrementally as the core</p>
11	We recommend that, in light of the evidence that suicide risk		

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	<p>is greatest on the third day after discharge, the target for patients discharged from inpatient mental health care to receive a first follow-up appointment should be changed to ensure that patients are followed up within 48 hours</p>		<p>dataset evolves. By December, we will also collect an agreed set of patient experience measures nationally</p> <p>This work is informed by the University of South Wales commissioned work that aimed to understand what is important to people in relation to outcomes from mental health services. The work stream is currently linking with other NHS programmes that will support the publication of national mental health outcomes and with colleagues in the Nursing Directorate to support the development of experience measures.</p> <p>As part of the NHS Executive remit letter, we have confirmed that the Executive will deliver a national safety programme for mental health services. This will have an initial focus on inpatient settings and will include discharge arrangements.</p>
12	<p>We recommend that a target be introduced for waiting times for psychological therapies to ensure that those in need receive this support within a suitable timescale. Accessing appropriate therapy early can provide the intervention that's needed and prevent someone from requiring crisis care at a later stage</p>	<p>We remain committed to publish waiting time data on specialist psychological therapies, but this work has been delayed during the pandemic.</p> <p>Whilst the data is not yet robust enough to publish, operational data is reported by all health boards and used by the Welsh Government to hold services to account. The NHS Delivery Unit has been commissioned to undertake a review of psychological therapies to understand the consistency and variation in services and data reporting across health boards.</p>	<p>We continue to use the operational data that is reported by all health boards to hold services to account through monthly Improvement, Quality, Performance and Delivery meetings.</p> <p>The NHS Delivery Unit's review of psychological therapies is due for completion in May and we will use this work to inform the publication of the data thereafter. This work will also inform the development work for the mental health core dataset that will ensure that we are able to reflect a fuller picture of provision across Wales.</p>

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		<p>The waiting time data that will be published only reflects one element of access to psychological therapies – the specialist services. Data is already published for Local Primary Mental Health Services, which includes psychological therapies and we have strengthened low level support, for instance through the introduction of online Cognitive Behavioural Therapy – another form of psychological therapy.</p> <p>The work to develop the mental health core dataset will ensure that we are able to reflect a fuller picture of provision across Wales.</p> <p>We are working with HEIW and Improvement Cymru to continue to develop the infrastructure to support health boards to improve access to psychological therapies. This work will ensure that we have a robust process to consider the evidence base of interventions that underpin Matrics Cymru and Matrics Plant.</p> <p>Matrics Plant Implementation Plan was published in September 2021. This plan has been designed to support the implementation of Matrics Plant: Guidance on the Delivery of Psychological Interventions for Children and Young People in Wales. It is anticipated that it will assist health boards and partners in ensuring that both the spirit and detail of Matrics Plant are transferred into action.</p>	<p>The first revision of the <u>Evidence tables</u> published in 2021 to ensure psychological interventions are safe and effective has been further revised and it is anticipated a second revision will be published by spring 2023. Guidance for improving access to, and the effectiveness of psychological interventions for people from Black, Asian and minority ethnic communities has been commissioned and will be published in spring/summer 2023.</p> <p>A review of the evidence for psychological approaches aimed at reducing emotional regulation difficulties in adults and children and young people accessing help for their mental health is also underway.</p> <p>We continue to work with HEIW to develop the infrastructure around psychological therapies in Wales. This includes funding a professional lead post to drive this work forward. It is envisaged that this post will shortly be out to recruitment.</p>
13	We recommend that the Welsh Government accepts	Informed by the insights gained from the listening exercise conducted in 2020/21 with	The Real Time Suicide Surveillance System in Wales, launched in April 2022, continues to

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	<p>the call made in the mid-point review of Talk to me 2 to develop and implement a Wales-wide postvention strategy for suicide, and that this work should be taken forward as an immediate priority. This should include details of follow up support for individuals bereaved by suicide, and in organisational settings. It should incorporate the recommendation in Mind over matter that guidance should be issued to all schools on talking about suicide (and as a priority, to schools where there has been a suicide or suspected suicide). The Welsh Government should ensure that sufficient ring-fenced resource is available to implement this postvention strategy.</p>	<p>those living with bereavement by suicide, a multi-agency task and finish group has been meeting to set out guidance for a Wales-wide response to those exposed, affected or bereaved by a sudden death that could be a possible suicide (rapid response would mean pre-inquest). This has included mortuary staff, coroners office, funeral directors, primary care, suicide bereavement support agencies, blue-light and rescue services.</p> <p>The Real Time Surveillance System will provide information to help services to ensure that those bereaved by suicide are offered timely and appropriate support.</p> <p>A draft guidance document is now out for wider review. A key recommendation of this work is the provision of a National Bereavement Liaison Service to make a proactive offer of support following a suspected suicide. Officials are exploring options to develop or commission this support.</p> <p>Guidance on talking about suicide was provided to all schools following publication in September 2019. Officials in the Welsh Government are in the process of developing proposals to review awareness in schools and are considering what further support is needed in this space.</p>	<p>provide crucial information to help strengthen our preventative work, to ensure support is made available quickly and to identify trends or clusters.</p> <p>We launched our draft consultation guidance document ‘Responding to people bereaved or affected by suicide in Wales on 28th October 2022. The consultation ended on 20th January 2023 and 38 responses were received. Officials are currently reviewing the responses.</p> <p>The Guidance will be supported by a new Suicide Bereavement Liaison Service later this year. The Service will aim to ensure a consistent, timely, and proactive offer of support to people affected by sudden deaths that are unexplained or a suspected suicide.</p> <p>As part of a review of our published guidance on suicide and self-harm awareness in schools (2019), officials are in the process of organising an event and other focused research to take the view of educators on how to facilitate safe communication around suicide and self-harm prevention and postvention in education settings. This will inform research for updating the guidance for schools, and will assist with identifying what support schools need when they encounter issues of suicide and self-harm in the classroom.</p>

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14	<p>We recommend that the Welsh Government and Public Health Wales actively promote the availability of the Help is at Hand Cymru resource. This should include proactively engaging with third sector support groups and ensuring that frontline staff, particularly emergency services, who have contact with those bereaved by suicide are not only fully aware of Help is at Hand Cymru but, crucially, have access to copies of the resource so that this can be distributed to those bereaved at the point of need. As this resource is already available, this should be implemented within 3 months</p>	<p>The digital supplier developing the training hub will be supporting the development of a digital version of Help is at Hand, which will provide an opportunity to review the content, update the signposting to services and resources in Wales, and to consider other ways of making the content available. This will be available in Autumn 2022.</p> <p>While this is being developed a ‘business card’ with a QR Code to the current version on the Dewis Cymru website is being printed to make available to front-line responders across Wales</p> <p>The same QR Code will be able to take people to the new digital version when it becomes available</p>	<p>The National and Regional Suicide and Self-Harm Co-ordinators have produced a QR code to assist local teams and front-line workers to easily access the Help is at Hand resources in Dewis Cymru in both English and Welsh</p> <p>The document has also now been uploaded onto a digital platform Help is at Hand Pages - NHS SSHP</p> <p>Additionally, as referenced in Recommendation 13, our draft guidance document ‘Responding to people bereaved or affected by suicide in Wales’ will be supported by a new Suicide Bereavement Liaison Service later this year. The Service will aim to ensure a consistent, timely, and proactive offer of support to people affected by sudden deaths that are unexplained or a suspected suicide.</p> <p>This recommendation is now closed.</p>
15	<p>We recommend that the Welsh Government should, as part of an all-Wales postvention pathway, give active consideration to providing funding for support</p>	<p>See ‘National Bereavement Liaison Service’ information in recommendation 13. Is this correct – did we say this last time.</p>	<p>See ‘National Bereavement Liaison Service’ information in recommendation 13.</p>

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	groups for those bereaved by suicide, so that people across Wales are able to access much-needed support. We believe such groups can play a key role in supporting the mental health and wellbeing of those bereaved through suicide. This could in turn lead to reduced demand for NHS services		
17	We recommend that the Welsh Government works with NHS employers in Wales to ensure that all employees who have dealt with cases of suicide/attempted suicide are able to access appropriate support	<p>We expect all health boards to provide appropriate support to all staff following traumatic events.</p> <p>Health for Health Professionals has been renamed ‘Canopi’ and provides mental health support to health and social care staff. This includes support for post-traumatic stress.</p> <p>This work is ongoing, and the National Coordinator is in conversation with the Royal College of Psychiatrists regarding the management of vicarious trauma, but also how we can prepare staff for inquests, for example.</p> <p>We are also signposting to the First Hand resource Home - First Hand (first-hand.org.uk) that supports those affected by the suicide of someone they didn’t know</p>	<p>The National Suicide and Self-Harm Coordinator has linked with Canopi and presented at their national symposium at Cardiff University. Further engagement will continue to raise awareness of the suicide and self harm prevention support and information that is available.</p> <p>We continue to expect all health boards to provide appropriate support to all staff following traumatic events.</p> <p>This recommendation is now closed.</p>

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18	<p>We recommend that the Welsh Government recognise male suicide as a national priority and allocate appropriate funding to identify and implement new approaches to reducing the stigma associated with mental health to encourage men to talk about and seek help. This should include scope to roll out existing projects more widely</p>	<p>Preventing Suicide is a priority for the Welsh Government and a new cross-Government Group has been established to strengthen the approach. We have also committed additional funding for suicide prevention in 2022-23.</p> <p>We have recently established the Real Time Suicide Surveillance system in Wales, This will provide more timely access to information from all probable suicides (including male suicides) to identify opportunities for prevention and to ensure appropriate support is provided.</p> <p>As part of our programme to review and develop a successor strategy to Talk to Me too, we will be engaging with key stakeholders and reviewing the evidence to ensure new actions are evidenced based. Given the prevalence of suicide for middle aged men, we would expect this to be a key area of focus.</p> <p>We are also working with our National Suicide Coordinator to agree a programme of work to review the evidence of suicide prevention programmes and intervention with a focus on middle aged men.</p> <p>This work will continue in the course of 'business as usual'.</p>	<p>Preventing suicide remains a priority and the additional funding for suicide prevention in 2022-23 has been made available to the programme on a recurring basis.</p> <p>The Real Time Suicide Surveillance System in Wales, launched in April 2022, will provide crucial information to help strengthen our preventative work, to ensure support is made available quickly and to identify trends or clusters.</p> <p>As per the previous update, as part of our programme to review and develop a successor strategy to Talk to Me too, we will be engaging with key stakeholders and reviewing the evidence to ensure new actions are evidenced based. Given the prevalence of suicide for middle aged men, we would expect this to be a key area of focus.</p> <p>To ensure the approach is targeted, we will be analysing ONS data and data from the Real Time Suicide Surveillance System to identify at risk groups.</p> <p>This work will continue in the course of 'business as usual' and through the development of the new strategies.</p>

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19	We endorse the recommendation of the mid-point review of Talk to me 2 that the implementation of NICE guidance on self-harm be a priority for the Welsh Government. This should be implemented within 6 months of the publication of this report	<p>A workshop was held in February 2022 to raise the profile of the new NICE Guidance for the assessment and management of self-harm that was out for consultation at that time.</p> <p>The Guidance is expected to be published later this year when a further workshop will be held for those identified as key agencies for implementation, to explore opportunities and barriers and to inform how we support front-line workers to work to the guidance</p>	<p>The revised NICE guidance (assessment, management, and preventing recurrent for children, young people, and adults who have self harmed) was published in September 2022. A workshop on the guidance took place at the National Conference for suicide and self harm prevention on 2nd March 2023, with Prof Nav Kapoor who was on the NICE committee, in attendance.</p> <p>Headlines from the conference will be shared on the digital hub for suicide and self harm prevention in Wales</p> <p>The revised guidance reaches out to professionals beyond the health service or mental health (eg: staff in education settings, third sector organisations, and the criminal justice system) and further work is required to determine how NICE compliance can be supported across multi-agency pathways for people affected by self harm</p>
24	We recommend that the Welsh Government ensures that the Children, Young People and Education Committee's Mind Over Matter recommendations are implemented in order to improve and protect the mental health and wellbeing of children and young people in	Further activity in response to this action will be reported in updates against the Mind Over Matter recommendations.	Further activity in response to this action will be reported in updates against the Mind Over Matter recommendations.

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	<p>Wales. On suicide specifically, we recommend that the Mind Over Matter recommendation on guidance to schools (its recommendation 16) should be taken forward as an immediate priority: That the Welsh Government, in relation to suicide specifically, work with expert organisations to:</p> <ul style="list-style-type: none"> ▪ provide, within three months of this report’s publication, guidance to schools on talking about suicide and self-harm, to dispel the myth that any discussion will lead to “contagion”; ▪ work with expert organisations to prioritise the issuing of guidance to schools where there has been a suicide or suspected suicide; and ▪ ensure that basic mental health training, including how to talk about suicide, becomes part of initial teacher training and continuous professional development, so that all teachers are equipped to talk about it 		
31	We recommend that the Welsh Government / other	A new, cross-Government Suicide Prevention Strategic Group has been convened to	The additional and recurrent funding for suicide prevention has significantly

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	<p>public bodies (LHBs / LAs) make specific funding available for suicide prevention to ensure that it is sustainable in the long term. The Welsh Government should work with the National Advisory Group to ascertain how much funding is needed to ensure this sustainability, and ring-fence the appropriate amount</p>	<p>strengthen the programme management arrangements for the suicide prevention work programme. This will include driving work across Government and prioritising investment to support this approach.</p> <p>Additional, recurrent funding has been allocated to the suicide prevention work programme in 2022/23. In particular, the new funding will support the newly established Real Time Suicide Surveillance System in Wales launched in April 2022 and to improve suicide bereavement support.</p> <p>Additionally, the wider service transformation also has a focus on preventing suicide – for instance the work to improve crisis care and the establishment of the 111 mental health single points of contact.</p> <p>Talk to me 2 is currently being externally evaluated and the findings from which will inform any appropriate next steps.</p>	<p>strengthened the infrastructure in Wales. This includes the National Suicide and Self-Harm Prevention Co-ordinator and Regional Co-ordinators, the establishment of the Real Time Surveillance System with analytical resource and the soon to be commissioned National Suicide Bereavement Family Liaison Service.</p> <p>This will ensure dedicated resource and stability for suicide and self-harm going forwards.</p> <p>This recommendation is now closed.</p>