

Group Suicide Prevention Framework



Sources of Support

We understand that the content in this framework may contain information that could be upsetting or emotionally impact those reading it. The framework provides details of the terminology used, prevalence of suicide within Scotland and our approach towards suicide prevention.

There is a wide range of support available, and you may find the following useful:

Group Protection can provide you with support and signpost you to external agencies using their knowledge and experience of these services. Please contact the inbox at #Group Protection – otherwise please see link to the most up to date contact details for the team [here](#).

PAM ASSIST is Wheatley Group's Employee Assistance Programme offering counselling, information, and support for all types of work and personal issues. Support is available 24 hours per day on **0800 882 4102** or via the portal [here](#) using the code WGWEILLBEING.

Breathing Space is Scotland's mental health helpline for individuals experiencing symptoms of low mood, depression, or anxiety and offers free and confidential advice for individuals over the age of 18. They can be contacted on **0800 83 85 87**, 6pm to 2am Monday to Thursday; and from 6pm Friday throughout the weekend to 6am Monday. Please visit their website [here](#).

Samaritans provide confidential, non-judgemental emotional support 24 hours a day for people who are experiencing feelings of distress or despair. You can contact Samaritans free on **116 123** or via email on jo@samaritans.org. Please visit their website [here](#).

NHS24 Mental Health Hub Telephone advice and support on healthcare can be obtained from NHS24 on the short code **111**; the Mental Health Hub is open 24 hours per day.

Cruse Bereavement Care Scotland offer free bereavement support for anyone struggling with the loss of someone close (face to face, group phone and email). You can contact Cruse Monday to Friday 9am to 8pm and Saturday to Sunday 10am to 2pm on **0808 802 6161**. Please visit their website [here](#).

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1. Purpose

- 1.1 Suicide is an issue which affects all communities in Scotland. From the National Records in Scotland, (2022), in 2021 there were 753 probable suicides registered in Scotland. There is a well-known link between deprivation and suicide. The suicide rate is three times higher in the most deprived areas of the country compared to areas in the least deprived. The reasons are varied and complex, however we do know that they centre on socio-economic issues such as disempowerment, social exclusion, poverty, poor mental health, trauma, adverse childhood experiences and more. In 2021, three quarters of people who died by suicide were males and the age group with the highest number of probable suicides was among the 45–54-year-olds for both males and females. The average age of those who died by suicide was 46.
- 1.2 Wheatley Group is Scotland's leading housing, care and property management group and hold housing stock within some of the most deprived areas in Scotland, where almost two thirds live in the lowest ranked Scottish Index of Multiple Deprivation (SIMD) data zones. Many of our customers have vulnerabilities which place them at increased risk of suicide. A study revealed that suicide can have a huge impact on communities and that one suicide can impact up to 135 people. Therefore, our Suicide Prevention Framework clearly demonstrates to customers, staff and partners the importance we place on making communities suicide safer and being sector leading in suicide prevention.
- 1.3 The strategic and operational responsibility for suicide prevention lies within the remit of the Group Protection Team, part of our wraparound support services division - Wheatley 360 – however **Suicide Prevention is everyone's responsibility** and all staff across Group must be responsive to any incidents of an individual being at risk of suicide.
- 1.4 Our operating model assures that Wheatley Group staff interact with customers daily. These interactions can include:
 - Contact through our 24/7 Customer First Centre;
 - Liaising with customers whilst working within our communities – e.g NETs colleagues, housing officers out in patches, Wheatley Care.
 - Undertaking visits to customers' homes – e.g repairs, planned improvements, new tenant visits, customer conversations, antisocial behaviour investigations, rent arrears;
 - Telephone conversations to customers to deliver our services – e.g Group Debt Recovery, Welfare Benefits/Fuel Advice and;
 - Online interaction through social media or completion of our online forms
- 1.5 Our Group Suicide Prevention Framework provides information on how to support an individual at risk of suicide through the provision of information on suicide prevention and support available. It details customer segments who are potentially at most risk of suicide, which is based on the national evidence provided through ongoing analysis of trends.
- 1.6 Suicide has a huge impact on our communities. The Scottish Government has recently released its 2022 – 2032 Suicide Prevention Strategy – [Creating Hope Together](#) due to the numbers of suicides remaining consistent and high. This strategy is supported by an initial 3-year action plan which sets out the actions required to achieve the vision. Wheatley has recognised the need for a Suicide Prevention Framework in line with our values and purpose of making homes and lives better.

2. Definitions and Terms

2.1 **Suicide** – the act of intentionally ending one’s own life.

Attempted Suicide – an act of self-harm where death does not occur, but the intention of the person was to cause a fatal outcome.

Threatened Suicide – where a person has disclosed to someone their intentions of ending their life, but at present have not carried out the action. They may have a plan in place and have considered where, when, and how they are going to do this.

Suicidal Ideation/Thoughts – where a person is thinking about ending their life but have made no physical attempts to do this.

Probable Suicide – refers to death from intentional self-harm and events of undetermined intent. The statistics used throughout this framework are taken as probable suicides which includes cases where it is not clear whether death is a suicide, but it is understood that more often than not these cases are found to be suicide.

Commit Suicide – this term is a historical term and should not be used to describe suicide because it suggests wrongdoing. This term can increase stigma and have a negative effect on bereaved families. The correct phrase to use is death by suicide.

Self-Harm – any deliberate act of self-poisoning or self-injury without suicidal intent.

Suicide Safer Communities – this is a ground up approach to changing public attitudes about suicide by reducing stigma, increasing understanding of risk, raising awareness of how to support, and increasing knowledge of help and resources available.

3. Framework Vision

3.1 In line with Wheatley’s overall vision as set out in our 2021-2026 strategy – Your Home, Your Community, Your Future - we want our customers to have increased control and awareness of the supports available in relation to suicide prevention and how to access them from within their communities. We want to continue to create opportunities for building skills and resilience.

3.2 Our vision for this framework is for Wheatley communities to be supported; conversations about suicide normalised; and for the rate of suicides to decrease. Suicide is preventable and avoidable; therefore, we aspire to be proactive in supporting our customers access any support or assistance they require.

3.3 Our aim is that Wheatley Group staff are confident in assessing risk and having conversations around suicide and mental health. Suicide can affect anyone, we therefore want to ensure that staff are aware of the support available to them, and how they can support each other as well as our customers.

3.4 We want our customers to reach their potential for a brighter future for themselves and their families. We recognise the challenges our customers have faced and continue to face post pandemic and currently as we navigate through the ongoing cost of living crisis, and we believe we are ideally placed, working alongside our partners, to support them and play a strong role in fair and socially just economic recovery.

- 3.5 Wheatley’s strategy will deliver an unprecedented shift in the balance of power and control towards our customers, empowering them to make their own choices about the services they want, ensuring they are properly equipped to do things for themselves and involving them in the design of products and services from start to finish.
- 3.6 We will continue to make significant social impact by investing in our communities, supporting the lifelong health and wellbeing of our customers, creating job and apprenticeship opportunities, and reducing the inequalities experienced by many of those living in our communities. We will deliver an ambitious Wheatley Green Investment Plan to accelerate our transition to net zero carbon, enhance our role in combatting the effects of deprivation and strengthen our role in tackling homelessness across Scotland.

4. National Records of Scotland – Suicide

4.1 Scotland has the largest number of suicides when compared with the rest of the UK. In 2021, there were 753 probable suicides in Scotland and just under three-quarters of these were men. This is a 6% decrease in suicides compared with 2020, where there were 52 more. This decrease is due to a reduction in the rate of female suicides, which went down by 18%.

- The rate of suicides in males has been consistently higher compared to females, and this finding goes back to 1994.
- The age range of 45-54 has the largest number of probable suicides in Scotland in 2021, however suicides remain high within the age groups of 25-44 and 45-64. The average age for suicide in 2021 was 46.
- In local authority areas across Scotland, the local authorities which were identified as having more suicides than the average rate for Scotland were: Glasgow City, Highland, Dundee City, and East Ayrshire.
- Those living in the most socio-economically deprived areas compared to those living in the least deprived areas, are three times more likely to die by suicide.
- Two thirds of people were in employment at the time of their death, of those who were of working age.
- For those who died by suicide, only 31% had contact with mental health services in the 12 months prior to suicide.

While anyone can be affected by suicide, these statistics inform us of which groups are at increased risk such as:

- middle-aged males;
- those who live in areas of high deprivation;
- those who have not been in contact with mental health services recently.

4.2 Wheatley Group Data

The Group Protection team conduct statistical analysis to better understand suicide risk factors within our Wheatley communities and whether they mirror the national picture and trends as outlined above.

Between April 2020 to March 2023, the Group Protection team supported in 236 cases relating to suicide and self-harming behaviours, which included 81 cases of attempted suicide and 23 cases of death by suicide. The breakdown of this activity is as follows:

Year	Death By Suicide	Attempted Suicide	Threatened Suicide	Suicidal Ideation	Self-Harm
2020/21	7	42	2	40	2
2021/22	7	18	18	13	0
2022/23	9	21	28	29	0
Total	23	81	48	82	2

From the 23 suicides recorded since 2020, 21 were males. From the 81 cases of attempted suicides recorded since 2020, 62% were males and 38% females. These statistics are supportive of the findings shared for Scotland as a whole, in that males are three times more likely to be affected by suicide than females.

We know that the figures above do not capture the full picture and that not all suicides or attempted suicides are reported to the Group Protection Team for inclusion in our statistical analysis. It is hoped that the implementation of the framework will support better recording of data, where staff are routinely reporting incidents to the team for better analysis and more importantly, better outcomes for our customers and the people we work for.

5. Policy context and landscape

5.1 In September 2022, the Scottish Government and the Convention of Scottish Local Authorities (COSLA) published a new Suicide Prevention Strategy – [Creating Hope Together](#). This 10-year strategy has been designed to tackle factors and inequalities that can lead to suicide. This approach aims to help people at the earliest possible opportunity, to reduce the number of suicides. It also looks to tackle issues such as poverty, debt, and addiction. The Scottish Government have provided funding to the Scottish Recovery Network as part of the initial 3-year action plan from the strategy, which will boost community peer-support groups to encourage conversations around suicide. The strategy will continue to build on the work of the National Suicide Prevention Leadership Group and the work delivered in the action plan - [Suicide Prevention Action Plan: Every Life Matters](#) which was published in 2018.

5.2 The strategy outlines new approaches to prevent suicide including:

- Widening support to anyone affected by suicide – that includes families, friends, and carers.
- Investing in peer support as a way of giving people the chance to meet with peers to help guide their wellbeing and recovery.
- Focussing on safety planning to support people to stay safe if they have suicidal thoughts.
- Improving the way services identify, assess, and care for someone who is suicidal. This includes in primary care, mental health and in unscheduled care settings.
- Prioritising work on reaching people with heightened risk of suicide – which includes working in key settings and communities, and with key parts of the workforce and trusted partners.
- Bringing insights on poverty and marginalised groups into work.
- Focussing on the particular needs of children and young people, and working alongside them to meet their needs.
- Working with the media to support responsible media reporting.
(The Scottish Government, 2022)

5.3 [Creating Hope Together: Scotland's Suicide Prevention Action Plan](#) covering the period from 2022 to 2025 aims to reduce the number of suicide deaths in Scotland, whilst tackling the inequalities which contribute to suicide. There are 4 long term outcomes for this action plan which are:

- 1 The environment we live in promotes conditions which protect against suicide risk - this includes our psychological, social, cultural, economic and physical environment
- 2 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.
- 3 Everyone affected by suicide is able to access high quality, compassionate, appropriate and timely support - which promotes wellbeing and recovery. This applies to children, young people and adults who experience suicidal thoughts and behaviour, anyone who cares for them, and anyone affected by suicide in other ways.
- 4 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.

5.4 The actions in this plan are designed to support delivery of the four long term outcomes and are built around 4 priority areas as set out below.

- Priority 1
 - Build a whole of Government and whole society approach to address the social determinants which have the greatest link to suicide risk
- Priority 2
 - Strengthen Scotland's awareness and responsiveness to suicide and people who are suicidal
- Priority 3
 - Promote & provide effective, timely, compassionate support - that promotes wellbeing and recovery
- Priority 4
 - Embed a coordinated, collaborative, and integrated approach

5.5 Samaritans

The Samaritans provide confidential, non-judgemental support 24 hours a day, 7 days per week for people who are experiencing feelings of distress or despair. Samaritans are committed to working in partnership with the government, public services, the third and voluntary sector and people with lived experience of suicide. Samaritans share the vision for a Scotland where people get the right support and fewer lives are lost to suicide.

Sharing their views on the Scottish Governments and COSLA new strategy, the Samaritans have commented on progression in suicide prevention to date, improving early intervention, transforming crisis support, progress to date of postvention talking, stigma and raising awareness.

The Samaritans have released their own suicide prevention strategy for 2022-2027, [Tackling Suicide Together: providing a safe space in uncertain times](#). It includes awareness that issues such as discrimination, climate change, impact of social media, Covid-19 aftermath and the cost-of-living crisis have added new burdens. The ripple effects that many of these issues have can increase the risk of suicide, owing to poorer mental and physical wellbeing, bereavement, isolation, and economic hardship. Samaritans' vision is that fewer people die by suicide and their purpose is to be there for people who are struggling to cope and in times of crisis. The strategic priorities identified in this strategy clearly align with the outcomes and priority areas identified within Creating Hope Together, in that it is crucial those with feelings of suicide know where and how to access support and that suicide prevention is prioritised at every level.

5.6 Scottish Association for Mental Health (SAMH)

Scottish Association for Mental Health (SAMH) is Scotland's Mental Health Charity, and they work with adults and young people providing mental health social care support.

SAMH's strategy [We Won't Wait](#) includes:

- The launch of a toolkit for every school, workplace and community affected by suicide.
- Increased resources to deliver a suite of suicide intervention training across Scotland.
- Developing their work on a 14-day therapeutic service for people in distress.
- Creating an exemplar local suicide prevention programme through increased knowledge, understanding and support tailored to the local environment.
- Informed by people who have been affected by suicide, produce a refreshed suite of information resources.
- Bringing together organisations working on men's mental health to collaborate and share good practice.

5.7 Having awareness of what other organisations are doing to prevent suicide, can support our communities to work together and know the best places in which support can be given. As suicide is everyone's business, we want to ensure that we have a positive working relationship with our partners to offer support and guidance to make stronger more resilient communities.

6. Group Suicide Prevention Framework

6.1 To achieve our vision of suicide prevention within Wheatley communities, where our customers are fully supported, conversations about suicide are normalised, and suicides are prevented; we have set out five key priorities to help us achieve this vision:

- 1 Reduce the number of suicides in our communities through awareness raising and an early intervention preventative approach
- 2 Provision of appropriate services to tackle inequalities and address the needs of individuals identified as at risk of suicide
- 3 Suicide prevention training is available to all staff and tailored to their job role
- 4 Establish effective strategic partnerships in relation to suicide prevention
- 5 Develop effective data collection and analysis measures and work to develop information sharing pathways on suicide related activity

6.2 Key priorities

Priority 1	
Reduce the number of suicides in our communities through awareness raising and an early intervention preventative approach.	
Outcome	Through increased awareness of those customer segments most impacted, reduce the number of suicides within our communities through early intervention activity and raising awareness of the support services available.
Strategic Theme	Changing Lives and Communities
Strategic Outcome	Developing Peaceful and Connected Neighbourhoods

It is important to identify which customers are at greater risk of suicide, to ensure communications are targeted and prioritised to raise awareness and ensure supports are known and available.

6.3 Middle-Aged Men in Higher Areas of Deprivation

All groups may be impacted by suicide; however, some Wheatley communities are at a higher risk. This includes middle aged men who are impacted by deprivation. Understanding this gives us the ability to focus this group for direct support and raise awareness of suicide prevention.

Risk factors for middle-aged men can be exacerbated by higher stress levels linked to money worries and uncertainty over employment. The stress associated with these issues may have physical and mental implications such as higher levels of anxiety, poorer sleep, and increased alcohol consumption. Nearly a third of men in Scotland reported that they had started drinking alcohol or increased their alcohol consumption to cope emotionally, (The Mental Health Foundation, 2018). Alcohol can often intensify underlying emotional difficulties, making individuals feel less resilient. Men are considered to struggle more to talk about their feelings and are susceptible to social isolation. Relationship breakdowns and the bereavement of a supportive figure are also considered to have particularly adverse effects on male mental health.

6.4 Young People

A recent [report](#) from the Scottish Suicide Information Database compared data from 2011-2020 for the age group 5-24, with those aged 25 and over. Findings reveal that 25.7% of deaths for 5–24-year-olds were by suicide. For those aged 25 and over, the figure was 1.2%. Statistics show a significant increasing linear trend for the age group 5-24 over the 10-year period with an increase each year in deaths by suicide.

Findings from a recent [study](#) from the University of Stirling revealed that children in Scotland have the highest rates of suicide in the UK. One in four children in Scotland who were referred to mental health services had been thinking about or had attempted suicide. It was also found that children face a postcode lottery as to whether they will receive an assessment or treatment.

Childline (a counselling service available for children), reported that 67 children a day called their helpline in 2018/19 for help with suicidal feelings. They witnessed an 87% increase in calls from the previous year of children under 11 seeking help with suicidal thoughts and behaviour.

It is important that Wheatley acknowledges the increasing numbers of young people experiencing suicidal risk in our communities and ensures awareness of the appropriate supports available to young people and children. Front line staff should be knowledgeable about the role of suicide prevention for children and young people in addition to adults.

6.5 Other groups who are considered at a greater risk of suicide include:

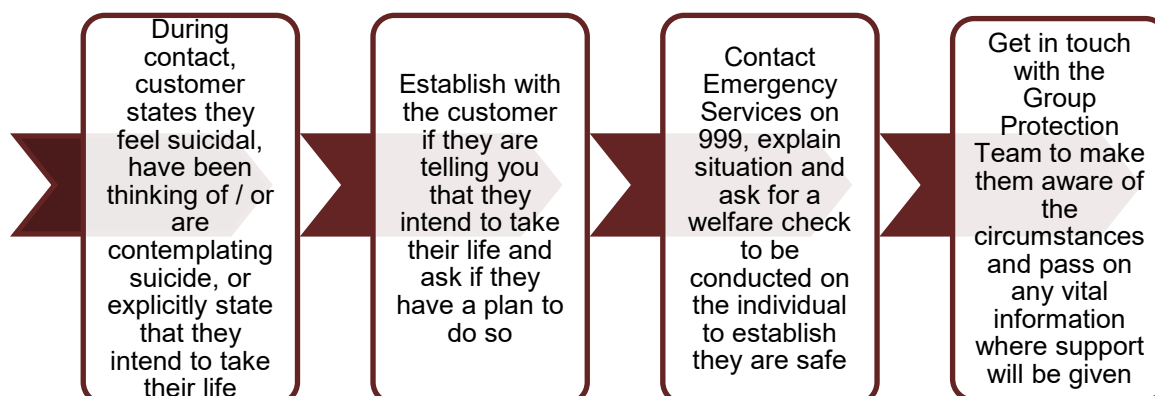
- **Those who have attempted suicide before** – it is known that those who have tried to die by suicide before are more likely to attempt or die by suicide in the future. It is therefore important that post suicide attempt, support is put in place to keep the person safe in the long term.
- **Alcohol/Substance misuse** – those with alcohol or drug addictions are known to be at higher risk of suicide. Intoxication can negatively impact mood and may increase feelings of depression and hopelessness.
- **Mental health difficulties** – those with a diagnosis of depression, anxiety, schizophrenia, borderline personality disorder, anorexia, or other mental health presentations.
- **Those Engaging in Self-Harming Behaviours** – more commonly found in young people in response to feelings of stress or trauma and who do not have the intention of dying. Self-harming can escalate over time and become suicidal behaviour.

- **People under Adult Support and Protection (ASP)** – those under ASP are considered vulnerable adults who are at risk of harm. This includes those who are at risk of harm to themselves, have a mental disorder or physical disability.
- **History of trauma, abuse, violence, and neglect** – it is known that negative childhood experiences and trauma can have long lasting effects on mental health and can increase suicidal risk.
- **Victims of domestic abuse** – domestic abuse can cause victims to feel unsafe, hopeless, fearful, and powerless. Victims may think about suicide as an escape from the abuse they are experiencing.
- **MAPPA offenders** – offenders managed under Multi Agency Public Protection Arrangements (MAPPA) consists predominantly of those within the Registered Sex Offender (RS) category. If an RSO's status becomes known to the public, community unrest can occur in response, leading an offender to feel overwhelmed, scared, and unsafe. This can in turn increase their suicidal risk.
- **People within the criminal justice system** – those with an offending history and with experience of imprisonment can become overwhelmed when liberated and living independently. Offenders may experience poor mental health and isolation which can lead to suicidal risk.
- **Long term physical health diagnosis** – those struggling to cope with a physical health diagnosis, including medical conditions which involve dependence on pain medication and limitations to mobility and living independently.
- **Rough sleepers/People experiencing homelessness** – there is strong evidence of a correlation between suicide and homelessness. Supports should be offered to Wheatley customers with a background of homelessness from the first point of contact.
- **LGBT Community** –The LGBT community has an increasing number of people being affected by suicide due to negative experiences around how they chose to identify. Many experience abuse and trauma.
- **Victims of Hate Crime** – those who have experienced hate due to their race, transgender status, sexuality, disability, or religion.
- **Victims of illegal money lending and Loan sharks** –those financially disadvantaged can become victims to loan sharks. They are known to threaten, scare, intimidate, and cause high levels of stress and financially exploit victims.
- **Care leavers** – It can be difficult for care leavers to live independently and hold responsibility for a tenancy at a young age. Loneliness and feelings of abandonment can be common and contribute to suicidal risk if the correct supports are not in place.
- **Asylum Seekers** – surviving peril and trauma before encountering issues associated with settling in a new country, encountering language barriers, a lack of community and hostility from local people can be very isolating and difficult experiences.
- **Bereavement by Suicide** – those who are bereaved due to someone dying by suicide are at increased risk of taking their own life.
- **Bullying** – findings have revealed that in many of the cases, young people known to have died by suicide were experiencing bullying. Bullying is difficult to escape due to the use of social media and is not restricted to school/college days as it may have been in the past.
- **Unstable Employment** – those working zero hours contracts or temporary contracts can experience increased risk of suicide due to the financial stresses caused by the instability of work and income.
- **Those in Debt/Rent Arrears** – the financial stress of being in debt, potentially losing a tenancy and having regular phone calls from debt recovery services can be very stressful and increase suicidal risk.

This list is not exhaustive, and anyone can be at risk of suicide irrespective of gender, race, religion, age and/or socio-economic status.

Risk Reduction

- 6.6 We can reduce the risk of our customers being affected by suicide by ensuring that we offer support when it is most needed and at as early a stage as possible. It is important for our customers to be aware of the support available to them as standard and importantly before they are at crisis point.
- 6.7 Staff members working directly with our customers should be mindful of those who are at higher risk of suicide. Wheatley provides homes to some of the most vulnerable people in society and it is critical that our staff are confident to identify their needs and have conversations about suicide risk and safety. Having knowledge of the customers at higher risk will improve the practice of frontline staff by increasing conversations around suicide, reducing stigma, and getting the right support to those who need it before they are at crisis point. This will allow us to mitigate against potential suicidal risk factors.
- 6.8 It is crucial that front line staff make the Group Protection team aware of any active suicidal behaviours/intent or customers who have expressed suicidal ideation. Improving information sharing processes will allow Group Protection to actively recognise areas of concern, share data with partners, and inform Wheatley of customers at risk, as well as supports available. This is not in lieu of contacting the emergency services if staff are dealing with someone who is expressing intent to end their life, this is in addition to this.
- 6.9 In cases where there is an immediate threat or risk of harm to the customer, person we work for, or others (e.g they have advised a member of staff they intend taking their life and have a plan to do so), staff must contact the relevant emergency services (e.g Police Scotland, NHS 24 or Scottish Ambulance Service) immediately, for an urgent welfare check to be undertaken. They must liaise with the emergency services during this time and ensure to take the appropriate action throughout as instructed. Follow up assistance will be offered to our customer, and appropriate referrals for support will be progressed by staff (e.g submission of an adult protection concern form) once the immediate threat of risk to life has been addressed. As above, contact should always be made with the Group Protection Team for further advice, support, and guidance once all appropriate action has been taken and it is safe to do so.



Full process flows outlining the steps that should be taken when dealing with cases of attempted suicide and death by suicide can be found at **Appendix 1** and **Appendix 2**.

- 6.10 The Group Protection team support frontline teams with complex cases across their workstreams of Suicide Prevention, Domestic Abuse, New Scots, Adult Support and Protection (ASP), Child Protection, Illegal Money Lending and the MAPPA. All these workstreams can be identified as supporting vulnerable customers who are at greater risk of being affected by suicide. Group Protection are specialised in all these areas and have awareness of the available organisations which customers can be signposted to. Group Protection work closely with partners such as Police Scotland and Samaritans to share information and best practice and develop processes to safeguard our customers.

To get in touch with the Group Protection Team, please do so by using the following contact details [here](#).

- 6.11 The Adult Support and Protection (Scotland) Act 2007 is designed to protect adults who are unable to safeguard themselves from harm because they are affected by:

- Mental disorder
- Disability
- Illness
- Physical or mental infirmity

Harm is also described as including self-harm and neglect.

The Act requires that local authorities and public bodies work together to protect adults who are unable to safeguard themselves, their property, and their rights. Wheatley has a responsibility to our customers to work with partners to reduce the risk of harm and a duty of care to protect those under the act.

The Group Adult Support and Protection Policy provides full details on this [here](#).

Wheatley Care Staff have a duty of care which is a legal and professional obligation to safeguard the people we support who are in our care, this requires Wheatley Care staff to promote the safety and wellbeing of individuals and prevent them from coming to harm, however we must also uphold their right to make their own informed choices.

Raising Awareness

- 6.12 We will raise awareness of suicide prevention supports and the importance of having conversations about suicide through our Wheatley Communities. All tools available such as blogs, vlogs, bitesize sessions, training, and social media will be utilised to upskill and promote our message with staff, customers, and stakeholders that we are here to help.
- 6.13 We have placed posters at high traffic areas including our multi storey properties and sites across Group providing information around where to go if someone is feeling suicidal and needs help. Exploring further opportunities to provide information which encourages conversations and removes stigma will be outlined within the supporting action plan, such as providing details at customer contacts including sign ups and customer conversations.

- 6.14 As we increase the occurrence of face-to-face community events, direct customer engagement will be incorporated for suicide prevention activity and built into organised events such as ‘meet in your street’. We need to ensure that Wheatley attends these events with our partners to raise awareness of suicide prevention.
- 6.15 We will adhere to Samaritan’s media guidelines for reporting suicide. This offers practical advice on how to reduce the risk of media coverage negatively impacting on people who may be vulnerable. Our communications colleagues who lead on our media coverage have attended training with Samaritan’s, to further develop skills in the appropriate use of language and understanding the positive effects good media coverage can have.
- 6.16 We will ensure that our Group and all subsidiary websites have relevant suicide and mental health content for customers to easily access. We will continue to attend relevant forums and working groups including Communities of Excellences, VMBs, Team Meetings and events to promote our work and provide updates.
- 6.17 We will continue to work closely with our partners to promote campaigns, such as “See me” and Samaritan’s “Small Talk Saves Lives.” Samaritans have given Wheatley the ability to order our own posters, business cards, information leaflets to promote their campaigns and continue raising awareness throughout our communities.

6.18

Priority 2	
Provision of appropriate services to tackle inequalities and address the needs of individuals identified as at risk of suicide	
Outcome	A range of support services are available for individuals to access to help address the ongoing issues they face
Strategic Theme	Delivering Exceptional Customer Experience
Strategic Outcome	Progressing from Excellent to Outstanding

6.19 It is important that support pathways for those at risk of suicide are clear and accessible to all. Our staff should be familiar with all wraparound supports available to customers and how to make referrals appropriately. Customers should also be aware of the supports and how to access them, which is in line with Wheatley’s vision to empower our customers. Our customers can access any of the following supports:

- **Housing Officers** - can visit customers within their own homes and offer a wide range of supports or signpost to places where they can get the most suitable support. Housing Officers can make referrals and ensure customers are aware of all the available supports to them by being a customer of Wheatley Group.
- **Customer First Centre** – Our CFC offer support 24 hours a day, 7 days per week. The experienced housing professionals are contactable using everything from webchat, telephone, and email, all at a time that best suits the customers circumstances. We aim to offer one-and-done solutions to customer service requests and enquiries.

- **Welfare Benefits Advisors** – we have Welfare Benefit Advisors across our localities to ensure that our customers are in receipt of all benefits they are entitled too, our housing officers are aware about new benefits, and they share their knowledge of any government grants and funding available for our customers. Our advisers can support our customers to apply for benefits, request mandatory reconsideration of a decision and appeal for any benefit claims.
- **Fuel Advisors** – offer recommendations and guidance for our customers to save money on their gas and electricity bills. Fuel poverty is a real concern for our customers and our advisors can offer guidance on being more energy efficient and help customers access any financial support available to them.
- **Wheatley Care Services** – to provide individualised support to suit our customers needs to achieve positive outcomes and help them to lead fulfilled lives. The services provided by Wheatley Care are wide ranging and include older people, young people, people and families experiencing/at risk of homelessness and people with learning difficulties, addictions, mental health issues or alcohol brain related damage.
- **Wheatley Foundation** - Established in 2016 with the aim of supporting vulnerable and disadvantaged people, the Foundation helps thousands of people every year within Wheatley communities across Central and Southern Scotland. Services such as Wheatley Works were developed with the aim of maximising access to employment, training and learning opportunities for customers of all ages. The Foundation supports customers by tackling social exclusion and alleviating the impacts of poverty.
- **Handyperson service** – For any customers over the age of 60 or disabled, where our Handyperson service can assist with odd jobs around the home.
- **NETs** – depending on property type, the local environmental team will be onsite in multi-storey buildings and can be seen around our communities doing jobs such as close cleaning, grass cutting and conducting block patrols.
- **Fire Safety Team** - Fire Safety Officers are available to support customers across all aspects of fire safety within their property and provide support as required.
- **Community Improvement Partnership (CIP)** - Our CIP team are on hand to deal with more serious types and persistent cases of antisocial behaviour and tenant vulnerability. The team work in partnership Police Scotland and our legal team to deal with these types of cases and offer any holistic and ongoing support to those impacted by antisocial behaviour and those involved in this.
- **Stronger Voices** – these officers have great local knowledge of our communities and have awareness of local community events and supports offered within community groups and build relationships with customers within our communities.

6.20 Wheatley launched our “Here for You” campaign, which enhances the range of wraparound support services already in place, to support some of our most vulnerable customers. The campaign directs people to services to support with food/fuel poverty, mental health, debt advice, as well as supporting them directly with financial assistance via fuel/food vouchers or supporting with rent.

6.21 Customers contact Wheatley Group through the Customer First Centre, via their Housing Officer or using their online account. It is key that we use all these methods to promote our services and ensure that they can access supports easily and as required. Customer-facing websites will feature the information required by customers to access relevant support.

6.22 It is imperative that our partners are aware of the wraparound services we offer our customers. This ensures we can cascade relevant information through these positive relationships with a view to improving our partners’ awareness of services we can offer,

facilitating customer's access to supports and increasing the uptake of supports we are offering.

- 6.23 We will participate in national campaigns such as Suicide Prevention Week and use other national and local public awareness campaigns to promote support services available to customers.

Support available for staff

- 6.24 For staff members who aren't sure how to approach a situation where suicide could be present, they can contact the Group Protection team for specialised support. Advice can be provided to any staff supporting a customer, to a staff member or manager who has concerns regarding a colleague, or indeed if a staff member themselves require support. There are staff within Group Protection who are trained in suicide first aid and have extensive knowledge of the support services available externally.
- 6.25 The Employee Assistance Program (EAP) available to all staff members is called PAM assist. EAP is a professional service that offers counselling, information, and support for all types of work and personal related issues and problems. Its available 24 hours a day, seven days a week by calling a freephone number set up. The service offers 8 sessions with structured counselling individuals, psychological assessment, and referral for additional therapy, i.e., cognitive behaviour therapy.
- 6.26 Financial challenges such as the cost-of-living crisis are not restricted to our customers, and we recognise that our staff members could also face financial difficulties. Staff have access to W.E. benefits, which allows Wheatley staff to claim back money for health care, join the cycle to work scheme, save money on shopping with discounts, receive money towards driving lessons, bursaries for further education and many more opportunities to save money.
- 6.27 We understand that dealing with cases such as suicide can impact staff members tasked to do so, therefore as an organisation we have explored enhanced ways of supporting our people over and above the support already in place. We have introduced vicarious trauma support for staff to access to ensure that awareness of the impact of vicarious trauma exists, as well as the appropriate support measures to mitigate against it and further support our people.

6.28

Priority 3	
Suicide prevention training is available to all staff and tailored to their job role	
Outcome	Our staff are confident and well trained in responding to customers affected by suicide/mental health and know how to tailor their approach to support them
Strategic Theme	Developing our Shared Capability
Strategic Outcome	W.E. Work – strengthening the skills and agility of our staff

- 6.29 To reduce risk and identify the signs of our customers being affected by suicide, we have made a commitment to ensure that all frontline staff will have access to suicide prevention awareness training. Staff will be able to identify the signs of customers affected by suicide and mitigate risk. This training will be tailored to the staff members

role, as we recognise that we have a wide-ranging workforce with different learning requirements based on the level of interaction they have with our customers. This training will be delivered through a mixture of face to face, virtual, e-learning, toolbox talks, and/or bitesize sessions.

- 6.30 Our training sessions will give our staff the confidence to have conversations with our customers about suicide and know what to do if they're in the situation of requiring to support someone feeling this way. Staff will be able to make informed decisions in risk assessing a situation and be familiar with the support agencies and organisations in place to signpost the individual to for specialised support.
- 6.31 This issue of suicide can come up across all roles within the business, including through calls taken by the Customer First Centre or Group Debt Recovery Team, interactions by housing officers with their customers, or NETs colleagues reporting an ongoing incident of suicide at one of our sites across Group. Welfare Benefit Advisors and Fuel Advisors may experience challenging conversations with customers who could be thinking about suicide linked to financial difficulties they are experiencing and this will undoubtedly continue to remain difficult under the economic circumstances being faced. It is crucial that no matter which member of staff a customer interacts with, that they are equipped to be able to support them in relation to suicide prevention.
- 6.32 Wheatley Group Academy Staff and the Group Protection team will work together to identify and design the best suited training suite to meet the needs of staff members across Group. They will work alongside partners in specialist agencies and organisations in the field of suicide prevention to collaborate on the development of this suite of training and in identifying best practice and assurance in relation to the materials.
- 6.33 Our Group Protection and Academy staff will be trained in Applied Suicide Intervention Skills Training (ASIST). This training allows staff to better understand the needs of a person at risk of suicide and learning how to use suicide first aid to meet those needs. Having this accredited level of training also allows us to explore possibilities around participating in further training to be able to deliver the other training products in this suite - suicideTALK and safeTALK – in house to our staff on a much wider scale.
- 6.34 The Suicide Prevention Coordinator is mental health first aid trained and can share this knowledge and experience with staff to support their customers. The coordinator attends the Suicide prevention training subgroup within Glasgow, which is attended by external partners in the sector and is a valuable arena to receive information and updates on new training opportunities available for staff. An example is Wave After Wave, which is a new course being developed to learn how to provide a compassionate response after suicide bereavement, which was announced at this forum and ensures our involvement in the roll out of the training once available.
- 6.35 There are a wide range of resources available in relation to suicide prevention, including information on having the conversation with someone you suspect or who tells you they are feeling suicidal and dealing with family members bereaved by suicide. On the Protecting People page of WE Connect, there is a specific section designated to suicide prevention, where you will find lots of information and guidance documents to support [here](#).

6.36

Priority 4	
Establish effective strategic partnerships in relation to suicide prevention	
Outcome	Continue to develop strategic partnerships with relevant partners and key organisations to ensure we deliver an innovative response to suicide prevention
Strategic Theme	Enabling our Ambitions
Strategic Outcome	Influencing Locally and Nationally to benefit our communities

6.37 Suicide prevention is not something that can be tackled by one organisation alone. A collective and collaborative multi agency approach and response is required by statutory and non-statutory organisations operating within this arena to achieve effective results. This allows the whole picture to be viewed and tailored support provided by the correct organisation with the specialist skills or services to support the specific needs of the individual.

6.38 As an organisation, we are well connected and have established effective strategic partnerships across our areas of operation, to achieve the most effective outcomes for our customers. Within the Group Protection Team, this is evident in the partnerships we have established across the geographical areas we have a stock footprint to help support our customers at risk of suicide. These partnerships include Local Authority, Health and Social Care Partnerships, Police Scotland, Public Health Scotland, and organisations such as the Samaritans.

6.39 Involvement in Multi Agency forums also plays a huge role in ensuring we have in place the required partnerships and have developed connections to best support our customers. An example of some of the forums we attend within the Group Protection Team to achieve this is:

- Adult Support and Protection Committees;
- Suicide Locations of Concern Forum (where partners come together to identify areas of concern for suicide and develop action plans to prevent further suicides from occurring there);
- Strategic Suicide Prevention Forums;
- Suicide Prevention and Adult Support and Protection Training subgroup meetings (subgroups sitting off the main forums);
- Domestic Abuse multi-agency forums including the Multi Agency Risk Assessment Conferences (MARAC) and Multi Agency Tasking And Coordination meetings (MATAC).

6.40 Being part of this established network of multi-agency forums allows our organisation to be at the forefront of discussing issues including trends/patterns, local action planning, areas of concern, available training and resources, communications & messaging and National and Local campaigns in relation to suicide prevention. This allows us to enhance our knowledge, build our resource directory and be involved in the action planning to address suicide prevention within our communities across Group.

6.41 We will seek to build new relationships with partners and organisations where Wheatley Group has a geographical footprint. This will ensure that no matter where a Wheatley Group customer resides, they will receive the same outstanding service.

These key contacts will allow us to streamline processes and ensure information is being shared timeously.

6.42 Part of the role of the Group Suicide Prevention and Mental Health Awareness Coordinator is to continue to identify and develop connections and establish partnerships in relation to suicide prevention. They will also continue to engage locally with frontline colleagues, including Stronger Voices Officers, around understanding what support exists at a local level and ensure to share this information wider across the network. They will use attendance at Group events to share information from partners around suicide prevention to staff and customers to reach as many people as possible, to ensure they're aware of support available.

6.43 Within the Group Protection team exists a communications strategy for each area of operation. In terms of the suicide prevention strategy, a planned approach towards sharing partners campaigns is inbuilt to this and activity will take place throughout the year to get this messaging out to our customers to ensure they are aware of the information, services, and support on offer.

6.44

Priority 5	
Develop effective data collection and analysis measures and work to develop information sharing pathways on suicide related activity	
Outcome	Possession of a richer picture of suicide activity across Group allowing for tailored activity and engagement based on accurate information
Strategic Theme	Enabling our Ambitions
Strategic Outcome	Influencing Locally and Nationally to benefit our communities

6.45 As Scotland's leading housing, care, and property management organisation, we are not always made aware when a suicide related incident takes place within one of our properties, communities, or by one of our customers. Sometimes we are made aware well after the event and are not notified directly about this. This impacts our ability to record and manage incidents occurring within our properties, but crucially also has an impact on our ability to provide the appropriate support to either the individual, their family, or the wider community, after an event or incident relating to suicide has occurred.

6.46 The Group Protection Team collate and analyse information around suicide for the group, however as noted above, are limited to the information received in terms of reports of suicidal ideation, attempts or deaths, to ensure accuracy of the full picture of suicide across our communities.

6.47 For the information received into the team, they collate and record this to build a picture of suicide across Group. Information around suicide comes predominantly from internal colleagues (incident reports from NETs colleagues or calls/emails from frontline colleagues); and via information shared at attendance across the various multi agency meetings attended by the team (e.g MARAC). There is no formal information sharing protocol or practice in place to receive this information directly from Police Scotland and it is not covered under the existing information sharing agreement within the Community Improvement Partnership.

6.48 The information received on suicide incidents/activity is built into the Group Protection Performance Management Framework, which contains information on number of suicide attempts/deaths, method, gender, age range, comparison from previous year

and year to date figures. This information helps to build the picture of suicide within our communities and allows the team, in partnership with frontline and wider wraparound support colleagues, to target resources around suicide prevention activity and support. Where a spike or trend is witnessed in an area or property type, the team are responsive to this and assess whether there is any further training or focus required.

- 6.49 If staff are dealing with any incident related to suicide, including thoughts of suicide/suicidal ideation, attempted suicide and/or death by suicide, they should report this to the Group Protection team to allow the appropriate action to be taken to support those involved. This also allows the team to record the case and continue to help support building an accurate picture of the issue of suicide within our communities. As noted at point 6.9 above, this contact should only ever be after the individual is safe and contact has been made with the emergency services if this is an ongoing incident and an emergency response is required.
- 6.50 The Group Protection team will continue to analyse statistical data received from frontline staff and via multi agency forum attendance. This continuation will allow us to be aware of our customers in higher risk categories and look for trends in locations, property types and customer demographics. This intelligence and customer segmentation data will allow us to continue to strengthen our preventative work and our service offering to these customers.
- 6.51 We will continue to work in partnership with key stakeholders, including Police Scotland, to attempt to establish information sharing pathways in relation to suicide incidents to strengthen the support we are able to provide to our customers and communities. This will also enhance our awareness around locations of concern to support our ability to implement preventative measures of support.
- 6.52 Having high quality suicide data from the frontline and our partners will help us to make informed decisions about how we develop services to our customers. Using this information, we can work with our internal and external stakeholders to build on our existing work to develop innovative ideas for suicide safer communities.

Suicide Prevention – Action Plan

- 6.53 In order to achieve the outcomes set out across the five identified priority areas, a corresponding action plan has been developed to set out the activity that will be undertaken, the owner and intermediaries required to deliver the action, and timescales for completion. This Suicide Prevention Action Plan will be owned by the Group Protection Liaison Manager and overseen by the Directorate for Communities.

7. Framework Outcomes

- 7.1 We have considered external stakeholders' strategies and defined outcomes, as well as Wheatley's vision from our current strategy – Your Home, Your Community, Your Future - when developing our Group Suicide Prevention Framework and associated outcomes.
- 7.2 We have identified five key outcomes that we believe we can achieve through application of this framework and the activity set out within, into practice across our organisation:

1. Reduce the number of suicides within our communities by using our enhanced awareness of customer segments most at risk and applying early intervention activity and raising awareness of the support services available.
2. A sector leading response to suicide prevention and mental health through the services we design and deliver for our customers which will reflect their needs and ensure they are clear and confident on how to access these.
3. Increase staff confidence to respond to customers affected by suicide/mental health through delivery of a tailored training programme which enhances their knowledge around dealing with these issues.
4. Strong strategic partnerships with relevant partners and key organisations around suicide prevention activity, to ensure we deliver an innovative and collaborative response to deliver the best outcomes for our customers and the people we work for.
5. Improved fuller picture of suicide within our communities by strengthening our data sources and availability of information both internally and externally.

8. Information Sharing, Confidentiality and Data Protection

- 8.1 It is important that if anyone intimates they intend to take their life, that an appropriate response is applied to ensure the safeguarding of the individual involved and that the data in relation to this is treated in a sensitive manner. All information is held and processed in line with our safe information practices embedded within the Group and in line with General Data Protection Regulations.

In certain circumstances (and subject strictly to conditions set out in the Data Protection Act 2018, General Data Protection Regulations, and any other applicable data protection legislation) personal information may be shared by the Group with other organisations and partners. Before the Group can share personal information, it must consider all legal implications of doing so, not simply the terms of applicable legislative requirements. Appendix 2 of Wheatley Group Data Protection Policy must be considered. Once a decision has been made as to whether information should be shared, that decision must be recorded, together with the reasoning behind that decision. Where a decision was taken to share the information, this will be on a “need to know” basis and an audit trail must be kept.

Staff members must consult the Wheatley Group Data Protection Policy and if in doubt will seek advice from the Group Information Governance Team.

9. Review and consultation

- 9.1 We will review this framework every three years. Reviews will consider good practice changes and developments made within the sector to support activity and outcomes around suicide prevention. More regular reviews may be considered where, for example, there is a need to respond to new strategies or policy guidance. We have developed this framework in consultation with internal stakeholders. Similar consultation will take place for all proposed framework reviews

10. Engagement and Communication

- 10.1 We will engage with staff on this framework through our internal communications channels where we will publish and raise awareness of the document and content within using forums including, WE Connect and Talk Together. We will utilise our

strong relationships with colleagues across the business to promote the document at team meetings, VMBs and attendance at specific sessions to go through the content to support staff. We will arrange formal briefing sessions for frontline staff who directly support our customers and go through the framework and open discussion for staff on how best to utilise the document to support those who require this when the document is launched.

- 10.2 This document has been taken through the Protecting People and Communities Community of Excellence as part of the engagement process and the work involved to deliver the activity outlined in the framework as contained on the supporting suicide prevention action plan, will routinely be taken through this forum for ongoing continued internal stakeholder feedback. This Community of Excellent has wide representation from across the business including colleagues from Wheatley Solutions, NETs, Wheatley Care, Frontline Teams and our Customer First Centre.

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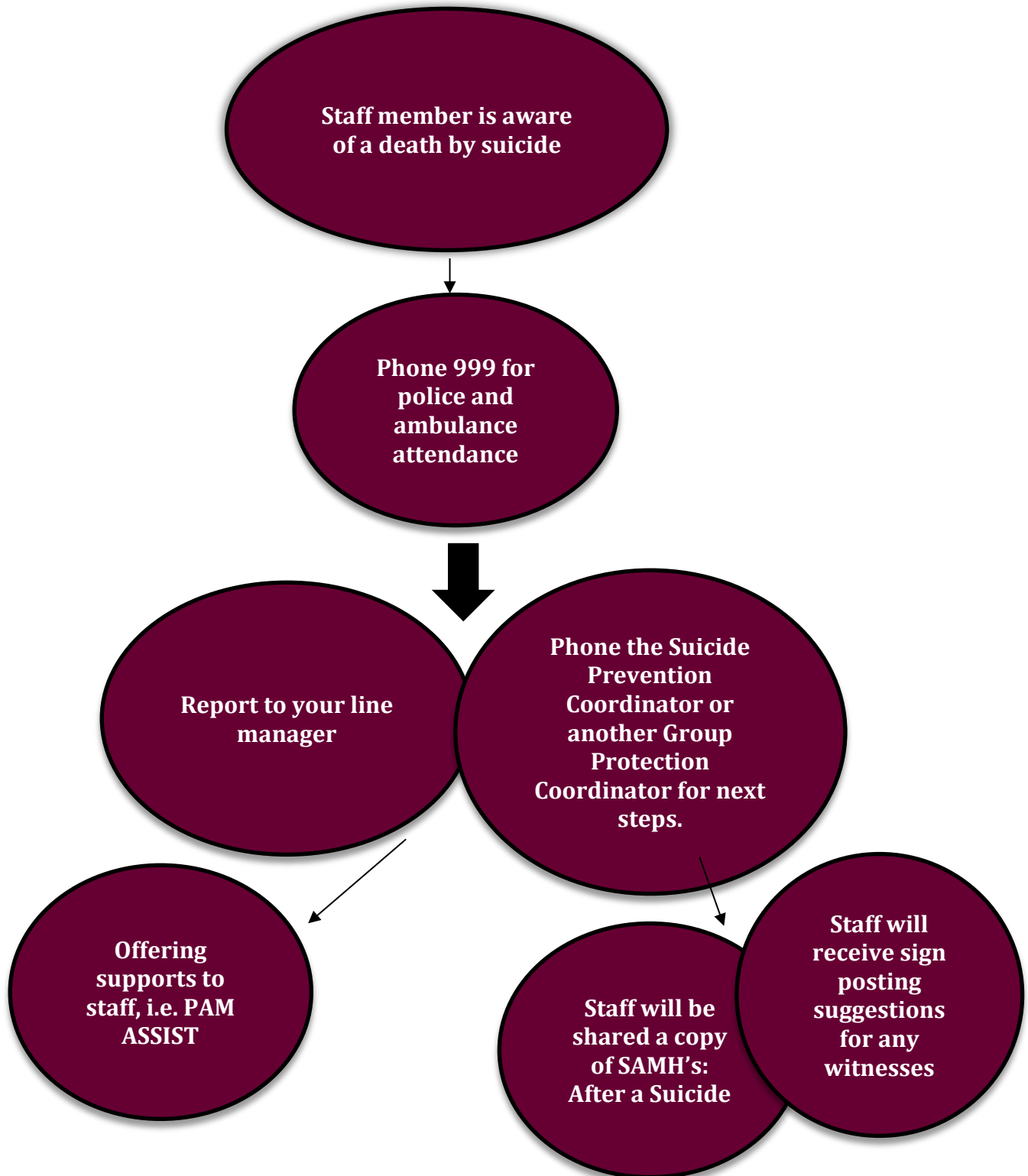
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Appendix 1:
Staff Process in reporting a death by suicide



**Appendix 2:
Staff Process in supporting a customer who has attempted suicide**

