

# SCHEMA: An approach to suicide prevention

*A brief overview of the one-day suicide prevention programme delivered by Common Unity and Forward For Life.*

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# SCHEMA

An approach to  
suicide prevention

January 2020

## The Developers:



**Forward For Life (FFL)** was initially set up in 2012 by Terry Rigby who after nearly 20 years of working in Mental Health with 13 years as a Commissioner for Mental Health services decided he wanted to set up an organisation with the key aim of reducing rates of suicide through a range of approaches both strategic and operational in nature.

Terry began working in suicide prevention in 1999 and in 2004 was further determined to make a difference after the loss of a close friend and mentor in the Public Health Sector by suicide. By the time Terry established FFL he was already recognised professionally as someone with a strong knowledge base and strategic ability in the field of suicide prevention having developed strategies and programmes in The West Midlands (Sandwell and Birmingham), and prior to this, Stockport.

In 2012, FFL began delivering the 2 day Applied Suicide Intervention Skills Training (ASIST) and safeTALK, a half day suicide prevention gatekeeper training programme. Forward For Life and their co-facilitating organisation Common Unity delivered these courses as part of the Birmingham contract for Mental Health as well as in Sandwell, Dudley, across Warwickshire and further afield. Classified as Master Trainers in ASIST and safeTALK this approach is standardised and utilising a combination of a solution focussed approach/CBT/Verbal reasoning is proven to support those who are supporting others to have confidence in helping a person at risk stay alive.



**Common Unity** was initially set up by Caron Thompson in 2009. Caron was born and bred in Handsworth, Birmingham who after redundancy as a single mum decided to channel her efforts into developing a company that put communities and their mental health at its heart. With a long professional background in mental health, housing, counselling and with personal experience of family members who had struggled with their own mental health, Common Unity was established to help bridge the gap between traditional health and social care provision and the often unmet needs of communities.

Since their humble beginnings with a single contract to develop a support programme within Barbershops that enabled men to talk about their mental health as well as key partner role in the development and hands on management of the Community Development Worker Service in Birmingham, they have gone from strength to strength delivering both standardised programmes of work as well as a range of bespoke health and wellbeing services across all sectors - public, private and community based. Common Unity has steadily built on its networks and worked alongside a wide range of specialist associate agencies to enable the delivery of forward thinking, innovative and often ground-breaking initiatives in Birmingham and wider ever since.

They currently hold contracts with the NHS and City Council in Birmingham delivering a wide portfolio of programmes that improve mental wellbeing and overall quality of life. This provision is known as Connecting



Community Networks and covers the areas of training and development, peer support and community engagement through social media.

## SCHEMA development



2016 witnessed the start of **SCHEMA: An approach to suicide prevention** training programme. Initially known as SCHEME, this course was delivered across GP practices in Birmingham as a half day course providing GPs with the basic knowledge and skills to support patients who may be at risk of suicide. SCHEMA, as it is now, was further developed into a one-day course as it was recognised that many organisations and communities were finding it difficult to engage with the two-day option due to either cost, organisational cover required or a combination of the two.

The SCHEMA pilot in the UK was initially delivered in July 2018 by the developers of this programme utilising the combined experience of over 40 years in the fields of mental health, counselling, wellbeing and suicide prevention both operationally and strategically.

### Learning Aims:

- To provide delegates with knowledge around suicide and the skills to support an individual who may be thinking of taking their own life.
- Enable participants to learn how to develop a collaborative helping relationship focused on life options for the individual at risk.
- To equip participants with practical tools and a framework for understanding the needs of a person at risk along with a Life Plan Model that features risk assessment and future life planning approaches.
- Provide a safe environment for practice to build confidence and skills.

### Learning Outcome Aspirations for Delegates:



## SCHEMA Delivery:

Since July 2018, Forward For Life and Common Unity have delivered SCHEMA as part of the Birmingham and Solihull CCG NHS commissioned mental health training, as in-house training for the Housing Sector (Trident Reach) and across Coventry and Warwickshire through the Coventry and Warwickshire NHS Partnership Trust as part of their Wave 1 STP for Suicide Prevention to over 400 delegates with an overall average rating of 9.5 out of 10.

## SCHEMA Delegates:

The delegates have hailed from a range of professions and a myriad of backgrounds from both the public and private sectors including the Local Authority, Social Work representatives, the Mental Health Trust, Mental Health charities, Young People's services, Carers Support services, Advocacy services, Public Health teams, Private and retail sector (including IBM, McDonalds, National Express and the construction sector), Homeless Support, the Education Sector, Housing and Floating Support, Autism support services, Work programme representatives, Substance Misuse Services, Later-Life Support services, Domestic Violence Support services, Emergency services, Disability Support Services and many more.



Photo with consent: IBM March 2019

## SCHEMA Evaluation (N=416):

All attendees who completed the one-day course completed the SCHEMA evaluation. It provides the developers with a sense of what works well and what opportunities there might be for further development as well as providing the commissioning body with information as to what needs, or expectations exist in respect of further perceived suicide prevention development across sectors.

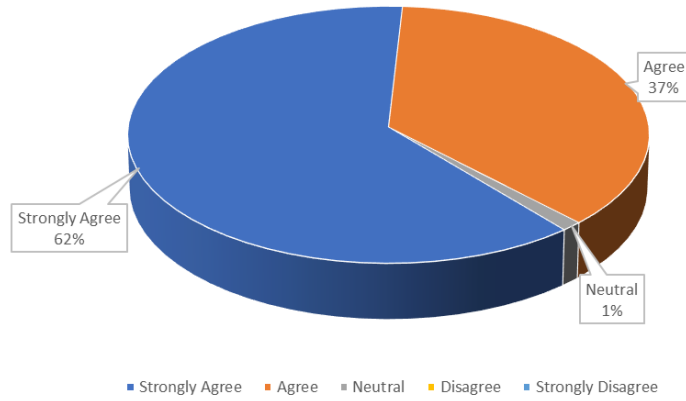
All delegates were first asked to rate the training with the question:

***On a scale of 1 to 10 (1 being "Very Poor" and 10 being "Excellent") how would you rate SCHEMA?***

From the 416 responses the overall average score was **9.5/10**

The evaluation form then requests the delegate to consider specific statements concerning the training and attribute a level of agreement with the statement from "Strongly Disagree" to "Strongly Agree." The responses to these statements are outlined on the following pages.

Now I have completed SCHEMA, I feel more confident to support someone at risk of suicide



Now I have completed SCHEMA, I feel better prepared to ask the question about suicide

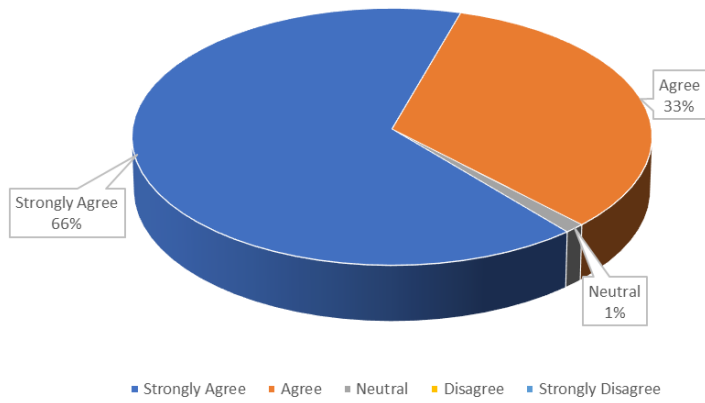
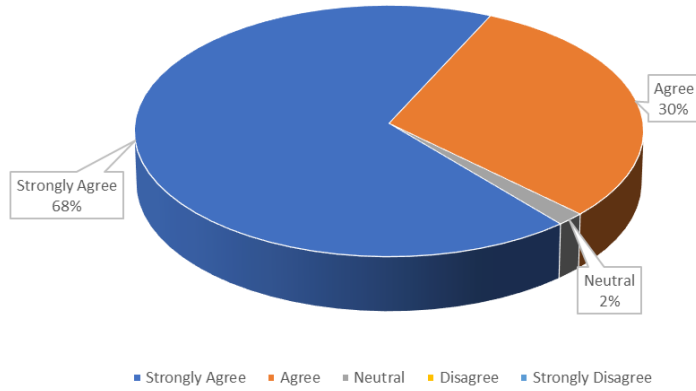


Photo with consent: May 2019

Now I have completed SCHEMA, I feel better prepared to talk directly to a person with thoughts of suicide



The SCHEMA training objectives and my expectations for the day were met.

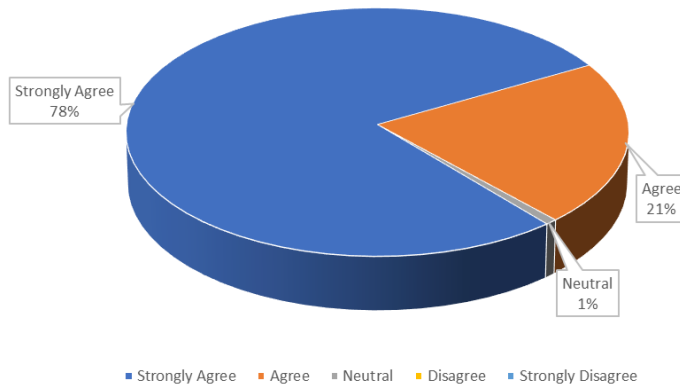


Photo with consent: June 2019

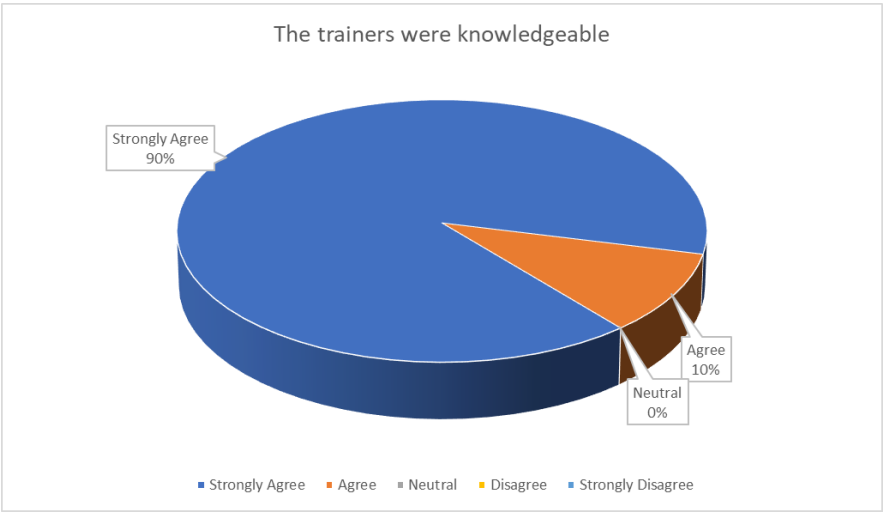
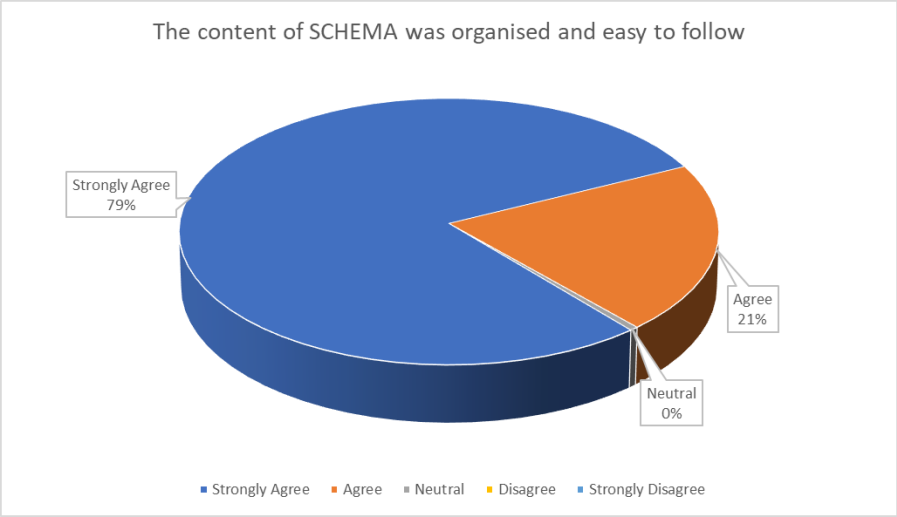


Photo with consent: August 2019

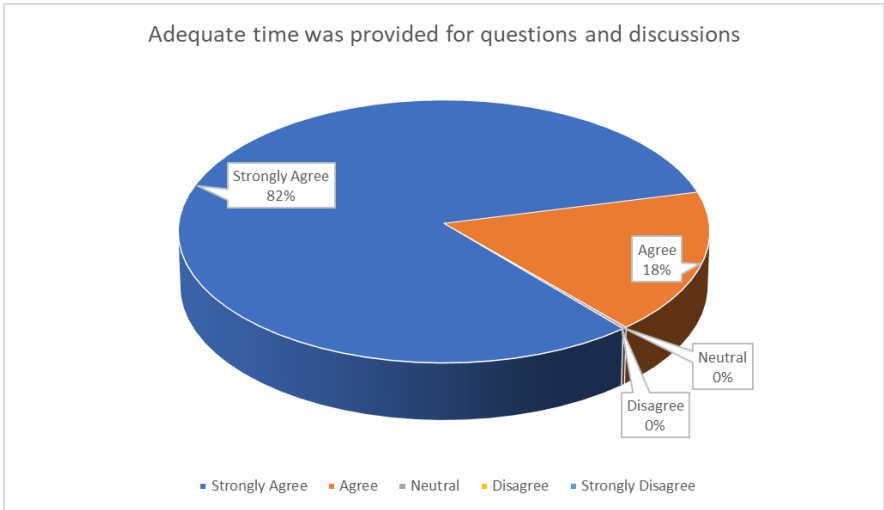
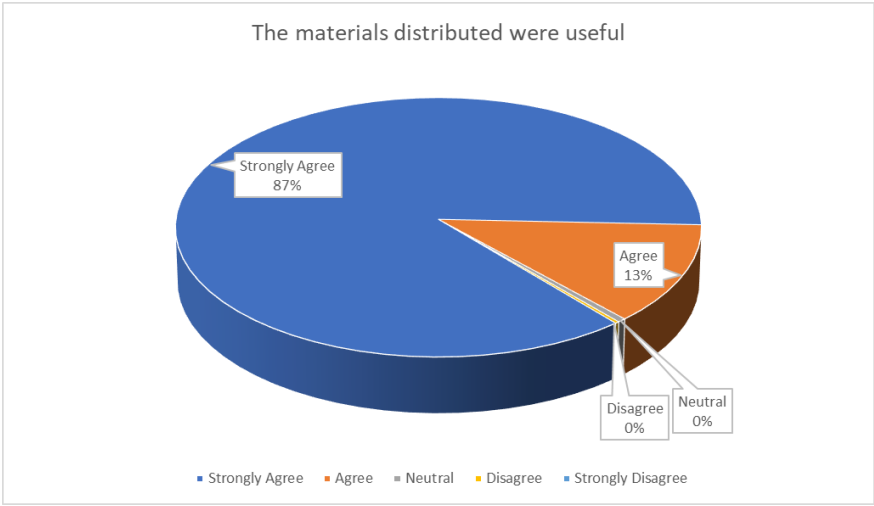
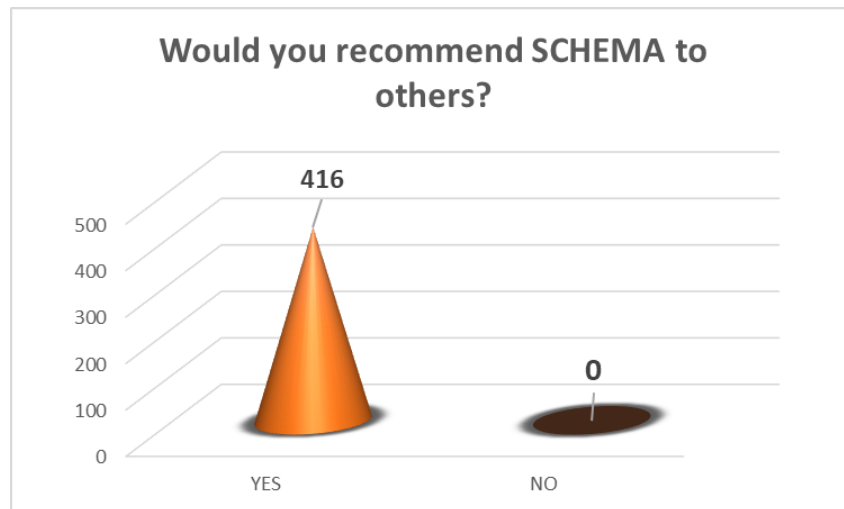


Photo with consent: October 2019



**What the Delegates have said about SCHEMA:**

**Question: How can SCHEMA be improved?**

- 39% of the delegates provided no response to this question
- 28% of the delegates stipulated that nothing could improve SCHEMA.
- 12% of the delegates felt the course may have benefited from the training being over two days or having an additional refresher day later in the year. The developers accept that SCHEMA is highly intensive and requires dedication by all delegates throughout the course but also recognise that 2-day alternatives do exist and readily highlighted these options.

*Maybe more role play, but appreciate only 1 day.*

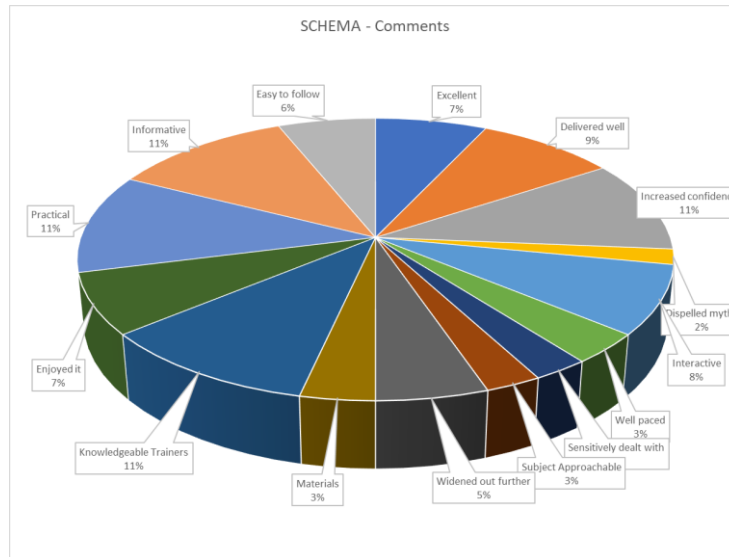
- 4% of the delegates felt that more time should be allocated to role play. This has been taken on board and has been included for future SCHEMA courses.
- 4% of the delegates requested more materials regarding services and local support. This is an area for further consideration by the local commissioners, but the facilitators do provide all delegates with a raft of service information both local and national.
- 3% of the delegates wanted more videos as part of the training. This is something the trainers are already looking into to free up a greater variety of potential scenarios to support specific service areas. This would also support the request by 4 of the delegates regarding more scenarios and more job-based examples though some representatives have taken away the learning from the SCHEMA programme and developed bespoke scenarios related to their area of work as part of the cascade process.
- 2% of the delegates wanted copies of the slides. SCHEMA provides a raft of materials but because of the nature of the training, the slides associated with the training are not for general distribution.

**What aspects of SCHEMA could be improved?**

*Hard to say, this was my first course covering this topic and it was a real eye opener - it blew me away a bit.*

### ***Have you any other comments on SCHEMA?***

Delegates were keen to highlight a range of areas they felt positive about in respect of SCHEMA. These responses represent 235 of the delegates who often made more than one positive statement therefore there were 362 positive statements made overall that were categorised.



These statements included an overall recognition of the standard of the training, the recognition that the training was both practical and useful, provided an opportunity for positive learning or reinforced their confidence in their current practice.

*A Simple Logical & Workable Programme.*

There were many remarks also to be found in respect of the resources available, materials used, the value in the process/structure and overall balance of the training, the interactive aspects of the training as well as the skills of the trainers themselves in respect of delivery, knowledge and their sensitive approach. Several of the delegates felt this training should be more widely disseminated both geographically and in respect of senior management engagement.



Photo with consent: May 2019



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