

Applied Suicide Intervention Skills Training (ASIST) Impact Evaluation Report for 2024

**Glasgow City Suicide
Prevention Partnership
Training Subgroup
August 2025**

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ASIST Impact Evaluation Report for 2024

1. Report Summary

This report discusses the impact that completing the Applied Suicide Intervention Skills Training (ASIST) workshop has had on respondents' practice.

ASIST is a two day in-person workshop where participants learn how to recognise when someone has thoughts of suicide, provide a skilled intervention and develop a safety plan with the person to connect them to further support. This workshop increases participants' willingness, confidence and capacity to provide suicide first aid. ASIST has been developed by LivingWorks which is the world's leading intervention skills program and has over 40 years of evidence and research behind it. Further information can be found at the following webpage - [Evidence & Impacts – LivingWorks](#)

Key findings include:

- 98.8% of respondents would recommend participating in ASIST training
- Respondents recognise the positive impact that ASIST training has had on them, both personally and professionally

2. Background

ASIST is delivered as part of the Glasgow City Suicide Prevention Partnership (GCSPP) Training Calendar. The GCSPP Training Subgroup is responsible for the delivery of a suite of suicide prevention training across the city. The impact evaluation of ASIST was commissioned by this training subgroup. The agreed timeframe for the evaluation was January to December 2024. A copy of the survey can be found in Appendix 1.

A similar impact evaluation was undertaken for the period March 2022 (resumption of training following global pandemic) to November 2023 by the GCSPP (Appendix 2) and references to that report will be made during this report.

Respondents across multi-agencies are offered the opportunity to access ASIST training via a booking system and is offered on a monthly basis. It is the main training programme supported by Public Health Scotland as part of the national Suicide Prevention Strategy and Action Plan, Creating Hope Together.

3. Aim

The aim of the evaluation was to understand the impact that ASIST training has had on individuals, both personally and professionally, and their organisations.

4. Methodology

Two methods were used for the evaluation – an online survey and a focus group. The following information illustrates both these methods and the outcomes from both.

4.1 Online Survey

An online Webropol survey was sent to all who participated in ASIST training during the agreed timeframe. Respondents were informed that the feedback gathered would be used to inform an impact evaluation report. The survey was sent to a total of 347 respondents.

The survey used both qualitative and quantitative data to capture information. Quantitative data was used to establish the range of organisations who participated, how many people have used their ASIST skills, how many times, and in what capacity. Qualitative data was used to provide more context to capture specific examples of impact.

The 2022/23 report was delivered in a similar way using a survey to gather feedback. In addition, the following recommendations from that report were:

1. Follow up the survey with a focus group to gather further information
2. Address representation of the population group with additional questions related to equalities data

These were included within this year's evaluation and will be addressed later in the report.

A copy of the survey can be found at **Appendix 1**

Limitations of the survey

The researchers identified some limitations with the evaluation.

1. A Webropol survey, sent by email, was used to gather feedback. It is unclear whether every participant received the survey as they may have a new/different email address from when they participated in their initial training. It should be noted that several email bouncebacks were received.
2. Qualitative data is subjective in nature and is interpretation based. This can lead to researcher bias. The volume of data makes analysis and interpretation time consuming.
3. Quantitative data gives a less detailed picture as only numerical data is captured and gives less insight into thoughts, motivation and drivers for the subject matter.

Findings

Quantitative

A total of 85 completions were received providing a response rate of 24.5%. This was a higher response rate from 2022/23 where 22% of respondents completed the evaluation survey.

The following infographic illustrates the quantitative responses from respondents demonstrating:

- Range of organisations completing ASIST
- Adoption rate of the ASIST model
- Where skills were utilised
- Frequency of use
- Outcomes of interventions made

What organisation did you represent when attending ASIST training?

NHSGGC	36.5%
Third/Voluntary Sector	29.4%
Education	12.9%
Housing	7.1%
Other	7.1%
Social Work	7.0%

Have you used ASIST since completing the training?

Yes	✓	56.5%
No	✗	43.5%

How many times have you used ASIST?

Once	20.0%
2 to 5 times	30.6%
6 to 10 times	2.4%
More than 10 times	3.5%

In what capacity did you use your ASIST training?

Professional Life i.e.in the workplace	41.2%
Personal Life i.e. out with the workplace	3.5%
Both	11.8%

What was the outcome of your intervention(s)? (Select as many that apply)

Helped keep them safe for now	84.0%
Helped them develop a SafePlan	64.0%
Helped them access further support	66.0%
The person injured themselves	0.0%
The person died by suicide	0.0%

Has your ASIST training had any impact on your organisation?

Yes	✓	56.5%
No	✗	5.9%
Don't Know	?	37.6%

Qualitative

Respondents were asked to provide one brief example of a situation where they used ASIST. Respondents highlighted a range of situations where they used ASIST. These included interventions with the following which were very similar to what was recorded in the 2022/23 report:

<i>Client</i>	<i>Colleague</i>	<i>Friend</i>
<i>Telephone Calls</i>	<i>Young Person</i>	<i>Patient</i>
<i>Family</i>	<i>Support Workers</i>	<i>Helpline</i>
<i>Student</i>	<i>Service User</i>	<i>Parent</i>

A total of 42 examples (49.4%) of all responses provided examples of situations. These examples included the following and are illustrated as written by respondents. A full list of responses can be found at **Appendix 2**.

“Virtual contact with patient, change in presentation and mood in particular. Asked if thinking of suicide, initially answered no but explored this further. Later admitted to fleeting thoughts that were increasing in frequency. Explored additional support and methods of staying safe. GP reviewed, support in place”

“Young person in distress and asked about suicide and he said yes, helped develop safe plan to keep safe for now”

“As the Wellbeing Lead Champion for the SFRS Glasgow area I am using the learning to help inform and prepare operational colleagues for both responding to emergency incidents and supporting colleagues struggling in the workplace via welfare support discussions”

“Someone in my partner's family was feeling suicidal, and I was able to offer advice and support my partner to work with them to make a safety plan”

“During planned visit to a patient, identified thoughts of suicide during discussions, implemented learning from ASIST to help the person”

“Supported an employee to complete a safe plan”

Following on from the question, ‘**Has your ASIST training had any impact on your organisation**’, respondents were asked to add additional comments. Some examples are detailed below. A full list of responses can be found at **Appendix 3**.

“It has helped increase our confidence in keeping patients who go through the SARC safe following a recent traumatic experience and do not meet the threshold for mental health crisis teams”

“More police officers now being trained in ASIST”

“It makes us more aware of how to approach the subject of suicide and to support the people we care for”

“Impacted our organisation positively, providing employees with the tools and confidence to support and signpost people with suicidal thoughts and ideation”

“Large organisation - hard to know”

Similar to the 2022/23 survey, respondents were asked if they would recommend ASIST training to others and then provide any additional final comments. 98.8% of respondents would recommend participating in ASIST training with only one participant saying no. A full list of responses can be found at **Appendix 4**.

Some examples of the comments included:

“This course is so valuable and I have recommended to all my colleagues to attend”

“This was an excellent course and the trainers were very professional and down to earth”

“Excellent training that has really stayed with me. Improved my confidence having conversations about suicidal ideation”

“I thought the training was really beneficial. I have experienced the loss of someone close by suicide and put off going to the training for years. I felt as I had lived experience I was scared to attend. The training was very open and so many people had been affected by suicide. I would recommend it to anyone both for professional and personal development”

“Thought the training was great, it can be quite overwhelming when someone expresses suicidal intent and services can jump to calling emergency services straight away however this training provides a clear plan of how best to approach to keep the person safe and to decide what level of further support is required”

“Since completing the ASIST course I have gone on to volunteer with the Samaritans”

“Beneficial in all areas of life. Would highly recommend”

“I have done many courses over the years but I found this one the best and it was taken by the most experienced people”

“Quite simply the best delivered and most impactful training I have attended in probably all my 20 years working in Adult Social Care”

4.2 Focus Group

All respondents were asked, as part of the survey, if they would like to take part in a focus group. From the responses, 16 participants agreed to take part. However, on the day of the meeting, only 4 respondents attended. Despite this, a lot of useful information was gathered as part of the feedback.

The ASIST focus group meeting brought together representatives from various organisations, including the Scottish Fire and Rescue, the University of Glasgow, Social Work, and Right There. Attendees reviewed the Pathway for Assisting Life (PAL) and discussed the effectiveness of ASIST training, supported by last year’s impact evaluation video. Participants agreed the training was highly beneficial and relevant.

Attendees shared personal reflections, noting that the course significantly increased their confidence in addressing suicide-related situations in both professional and personal contexts. The training helped to normalise discussions around suicide, dispelling taboos and providing practical frameworks for responding to those with thoughts of suicide. Participants highlighted the importance of asking direct questions and using clear language, as well as the value of peer learning and scenario practice during training.

Feedback on the structure of the workshop was overwhelmingly positive, with suggestions for even more practice time, smaller group discussions, and making practice scenarios on the afternoon of Day Two, mandatory to further enhance confidence and learning. The need to better track who has completed ASIST training within organisations was also identified.

5. Demographic and equalities information

As detailed earlier in this report, a recommendation from the 2022/23 report was that information around population group and equalities data should be sought and collated. This took place via the online survey and at the focus group.

The data was collected voluntarily and anonymously with 19 respondents providing the information. This provided a response rate of 22.3%. A full list of responses can be found at **Appendix 5**.

From this, the following results were gathered:

Gender Distribution

- Female: 78.0%
- Male: 22.0%

Age Distribution

- 25-30 years: 5.3%
- 31-40 years: 21.1%
- 41-50 years: 31.5%
- 51-60 years: 26.4%
- 61-75 years: 15.7%

Religious Beliefs

- Roman Catholic: 36.8%
- None: 26.4%
- Church of Scotland: 15.8%
- Other Christian: 10.6%
- Atheist: 5.2%

Ethnic Group Identification

- White - Scottish: 63.1%
- White - Other British: 15.7%
- White - Irish: 10.6%
- African: 10.6%

Sexual Orientation

- Heterosexual / Straight: 89.0%
- Gay or Lesbian: 5.5%
- Prefer not to say: 5.5%

Health Conditions (Mental and Physical Health)

- Yes: 10.5%
- No: 84.2%
- Prefer not to say: 5.3%

Daily Activity Limitations Due to Health Conditions

- No, not at all: 75.0%
- Prefer not to answer: 25.0%

The data indicates a predominance of female respondents (78.0%) and a significant portion of the population aged between 41-60 years (57.9%). The predominant religious beliefs are Roman Catholic (36.8%) and a notable proportion of respondents identify as having no religious beliefs (26.4%). Ethnically, the majority identify as White - Scottish (63.1%).

The overwhelming majority of respondents (89.0%) identify as heterosexual/straight, with a small percentage identifying as gay or lesbian (5.5%). In terms of health, most respondents do not have a long-term physical or mental health condition (84.2%), and among those who do, most report that their condition does not affect their daily activities (75.0%).

These findings highlight the diversity within the respondent group while also indicating predominant trends in gender, age, and religious beliefs. The health data suggests that long-term physical or mental health conditions are not common in the group, and those who have such conditions generally do not experience significant limitations in their daily activities.

6. Conclusions

1. The results of the 2024 survey and focus group are very similar to the 2023 report. The content for ASIST has remained unchanged since 2018 and this would indicate that the messages are consistent and that people value the skills they have learned and are able to put them into practice.
2. It is evident from the survey and focus group that respondents demonstrate the skills they have learned and have utilised these either in their practice or personally.
3. Respondents highlighted that they understand the importance of listening to the individual, asking directly about suicide and supporting people to make a safe plan
4. When respondents were asked to provide an example of when they used ASIST, it was remarkable to see that they have recalled the wording that is used specifically within ASIST. This would suggest that respondents are able to recall their learning from ASIST and relate it to their practice.
5. With regards to the impact training has had on the organisation, there was a mixed response as some felt there had been an impact on their organisation, some were very unclear about the impact and some didn't know the answer or were unclear what was being asked. Respondents may have felt that it was a difficult question to respond on behalf of their organisation and were more comfortable talking about the experience from their own perspective.
6. Respondents continued to make reference about the impact the training made on their skills, knowledge and confidence and again this is one of the aims of ASIST training. An expectation of the training is that by the end of Day Two, participants will feel **ready, willing and able** to support someone with thoughts of suicide.
7. At the end of the survey, respondents were asked to add any additional comments and 38 people (44.7%) responded to this final question. The comments were exceptionally positive and help to reflect why 98.8% of respondents would recommend ASIST training.

8. The ASIST training is highly valued by participants, with 98.8% indicating they would recommend the workshop to others.
9. Respondents report that the skills and knowledge gained from ASIST have a positive impact on both personal and professional practices.
10. Participants demonstrate strong recall of specific ASIST concepts and language, showing the training's practical applicability.
11. The training has directly contributed to increased confidence and capacity in supporting individuals experiencing thoughts of suicide.
12. There is evidence of ASIST skills being used across a range of contexts, including interventions with clients, colleagues, friends, and family members.
13. Survey data indicates a predominantly female and middle-aged demographic among respondents, reflecting certain trends in participation.
14. Some organisations have seen a positive impact from ASIST training, such as improved support mechanisms and greater awareness, though not all respondents were able to comment on organisational effects.
15. The evaluation methodology—using both qualitative and quantitative data—provides a rich understanding of the training's impact but also highlights the challenges of subjective feedback and response rates.

7. Recommendations

From the results of this impact evaluation the following recommendations should be considered:

- Continue delivering ASIST training widely, maintaining its current structure and content, given its consistently high value and effectiveness.
- Continue to encourage diverse participation in ASIST training and future Impact Evaluations to ensure that a wide range of demographic groups are represented and supported.
- Ensure follow-up with participants through the Impact Evaluation takes place to gather further qualitative insights and monitor the long-term retention and application of ASIST skills.
- Continue to use both survey and focus group methods for evaluations, while exploring ways to increase response rates and reduce bias in feedback.
- Share positive examples and testimonials from participants to further encourage uptake and organisational buy-in for ASIST training.
- Similar to the 2023 Impact Evaluation, these evaluations should continue on annual basis to build upon the current and future evidence base.

Further Information

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Appendix Section

Appendix 1

Glasgow City Suicide Prevention Partnership Applied Suicide Intervention Skills Training (ASIST) Evaluation 2024

What organisation did you represent when attending ASIST training?

NHSGGC
Social Work
Third/Voluntary Sector
Education
Housing
Other

Have you used ASIST since completing the training?

Yes
No

In what capacity did you use your ASIST training?

Professional Life i.e.in the workplace
Personal Life i.e. out with the workplace
Both
Haven't used

How many times have you used ASIST?

None
Once
2 to 5 times
6 to 10 times
More than 10 times

If you have used ASIST since your training, please provide one brief example of a situation when you used ASIST.

What was the outcome of your intervention(s)? (Select as many that apply)

Helped keep them safe for now
Helped them develop a safe plan
Helped them access further support
The person injured themselves
The person died by suicide
Other

Has your ASIST training had any impact on your organisation?

Yes
No
Don't Know

Please explain your answer to Q7 and add in comments below

Would you recommend ASIST training to others?

Yes
No

Please use the space below for any other comments you would like to include

As part of this impact evaluation, we will be carrying out a Focus Group to further evaluate the impact of ASIST Training. Would you be willing to take part in this group from 10am-12pm on 9th June 2025?

Yes
No

If yes, please provide your name and email address

Appendix 2**Brief examples of situations when respondents used ASIST.**

With patient who was contemplating suicide
As the Wellbeing Lead Champion for the SFRS Glasgow area I am using the learning to help inform and prepare operational colleagues for both responding to emergency incidents and supporting colleagues struggling in the workplace via welfare support discussions
A patient with a history of self-harm and suicide ideation who had recently been sexually assaulted.
Virttual contact with patient, change in presentation and mood in particular. Asked if thinking of suicide, initially answered no but explored this further. Later admitted to fleeting thoughts that were increasing in frequency. Explored additional support and methods of staying safe. GP reviewed, support in place
A young person I support was making comments about hurting herself and killing herself. I carried out an ASIST interview with her following and spent considerable supporting her afterwards. It proved beneficial and allowed me to give more insight to my team thereafter.
Young person in distress and asked about suicide and he said yes, helped develop safe plan to keep safe for now
I was supporting an individual with suicidal thoughts
Someone in my partner's family was feeling suicidal, and I was able to offer advice and support my partner to work with them to make a safety plan
a client who voiced suicidal thoughts
Talking to a colleague and parent and being confident enough to notice certain comments and male sure they weren't at risk.
Make a safety plan with a person experiencing active suicidal ideation.
During planned visit to a patient, identified thoughts of suicide during discussions, implemented learning from ASIST to help the person.
Practical experience aided

I haven't used it personally, but I manage support workers, so when a worker spoke to me about concerns about a mum she works with, I was able to advise her of how to address it and to encourage her to direct her towards someone who was trained properly.
Client feeling suicidal and I used ASIST training.
A colleague was feeling suicidal
Patient disclosed current suicidal ideation, I was able to respond appropriately and set them up with ongoing support
My friends mum has cancer and she was having low moods and was saying she didn't want to be here any more
Friend of my partner feeling suicidal, used the training to establish whether he had a plan to end his life and diverted him from this on 2 occasions.
On our helpline, directly asking about suicide, supported and made safe plan
I asked a student about suicide when I noticed a difference in their mood
Talking about how someone is feeling, if they have any plans for suicide, past suicidal
Several patients opening up to having suicidal thoughts and being able to openly speak to them around this and feel well equipped to do so
Been able to ask questions about suicide openly to young people I work with. Supported a friend who lost her brother to suicide
signposting
I used ASIST when talking to a young person who was distressed and saying that a situation would lead her to take her own life.
Looking at how to ensure people can keep safe for now if they are feeling suicidal i.e. Asking a friend to manage medication
To help someone in a mental health crisis to agree to a Safe Plan before additional help could be obtained.

Family member who turned to me when having suicidal ideation and looking for help on what to do, wellbeing chat and connection with services provided from the training.
Used it on the evening after the training, a client expressing suicidal ideation over the phone however created a safe plan over telephone and person was safe and continues to be.
Supporting a young person who disclosed to me they had a plan to complete suicide
Created a safety plan in collaboration with a client until the CMHT came on board.
I have been more aware of the importance of asking others explicitly about suicide and confident around using the phrase - are you thinking about suicide - but have not yet had to use the full ASIST approach
Assessing suicide risk at assessment
Supported an employee to complete a safe plan
I currently work as part of a team providing a crisis support helpline/drop in service, the ASIST training learning has been invaluable to me, it has provided me with the confidence when speaking to women needing help on the telephone, what questions to ask and I have felt confident in asking women if they have a suicide plan or just ideation.
I have a young person in house with suicidal tendencies
Asking if someone is suicidal when picking up on indicators
I often complete emergency appointments with young people who feel suicidal or at crisis point
Over the phone with a service user who was thinking about suicide.
As a counsellor supporting a client with suicidal ideation
Parent struggling with supporting their child showed suicidal ideation during phone call. Had to take forward SAFE talk and plan for their next steps after the phone call.

Appendix 3**Examples of impact on respondent's organisation.**

I have the confidence to deal with people who are thinking about suicide. This means that I do not have the worry of coming up against these thoughts in my clients.
Haven't had to use ASIST.
As the Wellbeing Lead Champion for the SFRS Glasgow area I am using the learning to help inform and prepare operational colleagues for both responding to emergency incidents and supporting colleagues struggling in the workplace via welfare support discussions. I also lead on Wellbeing matters across the West of Scotland within SFRS and so the increase in my knowledge and awareness is being shared on a large scale to key members of staff in both a workplace setting and also for the large number of crisis incidents we are responding to assist Police Scotland and SAS where we often arrive ahead of them and are the people to interact with those on the wrong side of bridges etc
It has helped increase our confidence in keeping patients who go through the SARC safe following a recent traumatic experience and do not meet the threshold for mental health crisis teams.
Staff confidence when talking about suicide
In my role I am working with an increasing number of young people who display suicidal ideation therefore an ASIST aware workforce is critical in my opinion.
More confidence in staff to ask about thoughts of suicides
Not had the need to use it yet.
The training provided was great and it gives staff confidence and more knowledge on how to deal with a situation like this
I work with people with chronic mental health problems and I now feel much more confident to ask about suicide and work with the person to identify concrete next steps and keep them safe-for-now.

Very good training and gave me more confidence to be able to approach subject directly with client
More informed about how to assist people experiencing suicidal thoughts and behaviours
I think it has made me more aware of colleagues and family members who care for the children's mental health. I have used ASIST to ask two people if they were thinking about suicide. Luckily both of these times the person hadn't been.
Large organisation - hard to know.
Having staff trained in ASIST has positive outcome for organisation, by continuing to remove the stigma of addressing suicide risk and reducing harm, allowing us to offer more immediate support to any clients accessing our service, who are experiencing thoughts/plans of suicide. Also open up support to other staff within team-feel confident to offer support and engage in these conversations with clients and colleagues.
The course was informative and interactive. I particularly enjoyed the practical elements where we put our learning into practice as this helped to solidify what I had learned and will help me if/when I need to use ASIST in the future.
in my professional capacity I was able to share concepts of importance self-care in our team meetings
Some of my staff members have not attended Assist training and therefore not applicable to all of those in my organisation
My workers are working within family homes every day, and you never know when ASIST training might be necessary for the type of intense intervention we do. I may not have used the training myself yet, but I have discussed how beneficial it would be to my team. I've encouraged all of them to sign up for training as soon as possible.
Improved confidence is activity asking about suicide in professional situations.
I am now more confident to take action

I was more confident asking questions and the ASIST training allowed this.
It makes staff more comfortable and confident in supporting a person who is feeling suicidal
All staff members on the team who have attend ASIST feel more confident in handling disclosures
Our Company ensure all staff are taking part in Asist
No impact on wider service as was only one in attendance and have not had cause to use it.
It allows me to have further knowledge and use this with the families I work with; I find it's more parents I am using parts of the ASIST training with.
Useful directly and for me supporting and training volunteers around responding to suicide
I am not sure but I am more aware of signs and asking relevant questions I think
I now use my knowledge gained at ASIST training in my workplace.
Through increased skills and confidence, I have been able to support the young people who access our service and to provide a more comprehensive service to them.
More police officers now being trained in ASIST
I was one of the lucky ones to attend. Not many other colleagues knew about the course
It makes us more aware of how to approach the subject of suicide and to support the people we care for.
The assist training has given me more confidence when distinguishing when to escalate to management
It has better equipped front line staff by providing memorable training.
I work for the Simon community and talk with homeless people every day; ASIST training helps me consistently.

<p>The organisation has another ASIST trained staff member who is confident in dealing with this situation, which can be distressing to others.</p>
<p>2 members of staff attended his training so staff now able to liaise with these staff for support on how to best handle a situation where someone is expressing suicidal intent, this allowing other staff to learn from trained staff until training is available for them.</p>
<p>I use the principles of ASIST weekly in my role as a pastoral care teacher. I have shared some key learning with colleagues, pupils and parents.</p>
<p>I encouraged my colleagues to adopt a transparent and honest attitude when discussing suicide, being sensitive and respectful when having conversations with clients.</p>
<p>Others in my organisation are training in ASIST already and therefore I'm not sure if me attending the training has had an impact on the organisation</p>
<p>Impacted our organisation positively, providing employees with the tools and confidence to support and signpost people with suicidal thoughts and ideation.</p>
<p>Yes as I have fed back to my colleagues of the importance and benefits of the learning on the training and quite a few are looking to sign up, this will support my organisation to help provide the women we support, helping us to recognise when they are unsafe and how to help them develop a safety plan/get access to appropriate support quicker. I put my training into practice recently by supporting a woman who said she felt better after speaking to me and will follow the safety plan we made together over the telephone.</p>
<p>I am more aware and feel better equipped to have these conversations with people. I also encouraged my colleagues to attend.</p>
<p>Really enjoyed the training. It had been several years since I completed it previously.</p>
<p>It has given myself and family with my input on how to approach my foster son when we think he is finding life very difficult</p>
<p>I have not used my training as yet.</p>

My staff team have said they have gained knowledge and confidence since attending training

I am unsure the impact on the organisation other than having another staff member who can utilise the pillars of ASIST.

I'm no longer at the organisation and as I haven't had the opportunity to use the Asist skills there, I can't say what impact it had.

Appendix 4**Other comments respondents included**

I thoroughly recommend the training and have had dialogue with Larry and instructors/HSCP colleagues about the potential to deliver a bespoke training across the 55 groups of staff (5 watches) working across the 11 fire stations providing emergency response cover across the Glasgow area. As the fire station personnel are available for emergency incidents 24/7, we are unable to release them to attend in person, though I have managerial colleagues keen to attend, this delivery would ideally be via MS Teams on 5 occasions to cover the 5 watch colours; green/blue/white/red/amber where station personnel could join from their 11 stations simultaneously. This could help inform on a wider level across SFRS. I am keen to progress this.

I am also delighted to have had the course dates shared last year to enable me and my Wellbeing Deputy Champion to attend. I would appreciate if we could have these on a rolling basis to afford the opportunity to other key staff to assist with widening the awareness and network of trained colleagues to help support our communities across Glasgow.

Thank you

This course is so valuable and I have recommended to all my colleagues to attend

Brilliant training, learned a lot, and found it to be a real eye opener.

This was an excellent course and the trainers were very professional and down to earth

enjoyed training and was good to have with people from various workplaces

I would like to know how to further assist and advise for children who have suicidal thoughts.

Excellent training that has really stayed with me. Improved my confidence having conversations about suicidal ideation.

Training was delivered to a very high standard and great understanding
ASIST is an excellent course and it has increased my confidence and willingness to engage in offering support and engaging in these conversations. As I am often a lone worker in community settings and come across these situations, I know feel more confident in my abilities to address this and reduce risk to the person.
While I haven't yet had to use ASIST, I feel much more confident in knowing how to respond to someone who has suicidal thoughts/intent.
I have found the insight to assist training very helpful in understanding support that suicidal ideation causes vulnerable individuals.
Very interactive and intuitive.
beneficial in all areas of life. Would highly recommend.
The ASIST course is vital to upskill people in helping others who are feeling suicidal
I thoroughly enjoyed my time at Asist training and learned so much
I thought the workshop was amazing & dealt with an issue which not many organisations address. The skills and confidence from the workshop have allowed me to be more aware of people's words, actions and moods.
It's a good way to understand the steps to suicide, and the education so more people can notice it.
ASIST training was great and definitely helped me understand how to respond in a difficult situation.
I am on annual leave and on holiday on the 9th of June so cannot make the focus group unfortunately.
I think the program would be useful to include in our educational institutes and to help make the public aware.
Since completing the ASIST course, I have gone on to volunteer with the Samaritans.

I thought the training was really beneficial. I have experienced the loss of someone close by suicide and put off going to the training for years. I felt as I had lived experience I was scared to attend. The training was very open and so many people had been affected by suicide. I would recommend it to anyone both for professional and personal development.

Assist training was fantastic and would recommend to everyone working in my sector (rape crisis) and beyond

Quite simply the best delivered and most impactful training I have attended in probably all my 20 years working in Adult Social Care.

More organisations should have access to this training on a proactive level. (Shout from the rooftops type of patter)

Thought the training was great, it can be quite overwhelming when someone expresses suicidal intent and services can jump to calling emergency services straight away however this training provides a clear plan of how best to approach to keep the person safe and to decide what level of further support is required.

I am really glad I developed personally as a result of the training as I always felt powerless when discussing suicide with clients and I would avoid open conversations where clients could discuss their feelings honestly.

A fabulous course that has helped give me the confidence to support someone with suicidal thoughts and to keep them safe, while signposting to further support agencies where appropriate.

The training was amazing, thank you. The role play was invaluable in taking people outside their comfort zone, it was a supportive environment for practicing how to have difficult conversations with those we support, to help lower risks of suicide. For me and for our organisation as we all work from a safety 1st viewpoint, this training is an amazing harm reduction/prevention strategy to help us all bring about positive, safe change for those going through great difficulties.

Great training,

I have done many courses over the years but I found this one the best and it was taken by the most experienced people

I feel the training promotes awareness and gives trainees confidence and support to keep others safe. I did feel it was sensitively delivered however it may be useful to let people know how tired/reflective they may feel after training and to allow them to organise the training at a time they can rest afterwards.

It's a great course and very insightful

I found the training very interesting and helpful however the training could be very intense and long.

It was well worthwhile, even for the confidence it gives to be able to handle a suicide intervention if it arises. It's good that I haven't had the opportunity to use the skills, and I do feel more confident and less worried/fearful of having conversations around this issue.

Excellent training that normalises the discussion around suicidal ideation, helps in assessing risk and in providing resources and support.

Appendix 5**GCSPP ASIST Impact Evaluation 2024 Equality Monitoring Form****How do you identify your gender?**

Total number of respondents: 19

	n	Percent
Female	15	78.0%
Male	4	22.0%
Trans Female	0	0.0%
Trans Male	0	0.0%
Non-binary	0	0.0%
Other	0	0.0%
Prefer not to say	0	0.0%

What is your age?

Total number of respondents: 19

	n	Percent
16-24	0	0.0%
25-30	1	5.3%
31-40	4	21.0%
41-50	6	31.5%
51-60	5	26.3%
61-75	3	15.7%
75 and over	0	0.0%
Prefer not to say	0	0.0%

What religion, religious denomination or belief do you identify yourself as?

Total number of respondents: 19

	n	Percent
Atheist	1	5.2%
Jewish	0	0.0%
Muslim	0	0.0%
Buddhist	0	0.0%
Church of Scotland	3	15.7%
Roman Catholic	7	36.8%
Other Christian	2	10.5%
Hindu	0	0.0%
Sikh	0	0.0%
None	5	26.3%
Prefer not to say	0	0.0%
Other	1	5.2%

What ethnic group do you identify as belonging to?

Total number of respondents: 19

	n	Percent
White - Gypsy/Traveller	0	0.0%
White -Irish	2	10.5%
White -Other British	3	15.7%
White -Polish	0	0.0%
White -Scottish	12	63.1%
White - Other	0	0.0%
Asian, Asian Scottish, or Asian British - Bangladeshi, Bangladeshi Scottish or Bangladeshi British	0	0.0%
Asian, Asian Scottish, or Asian British - Chinese, Chinese Scottish or Chinese British	0	0.0%
Asian, Asian Scottish, or Asian British - Indian, Indian Scottish or Indian British	0	0.0%
Asian, Asian Scottish, or Asian British - Pakistani, Pakistani Scottish or Pakistani British	0	0.0%
Asian, Asian Scottish, or Asian British - Asian, Asian Scottish, or Asian British Other	0	0.0%
African - African, African Scottish or African British	2	10.5%
African - Other	0	0.0%
Caribbean or Black - Caribbean, Caribbean Scottish or Caribbean British	0	0.0%
Caribbean or Black - Black, Black Scottish or Black British	0	0.0%
Caribbean or Black - Other	0	0.0%

Which of the following options best describes how you think of yourself?

Total number of respondents: 18

	n	Percent
Bisexual (attracted to same and opposite sex)	0	0.0%
Heterosexual / Straight (attracted to opposite sex only)	16	89.0%
Gay or Lesbian (Attracted to same sex only)	1	5.5%
Other	0	0.0%
Prefer not to say	1	5.5%

Do you have a physical or mental health condition or illness lasting, or expected to last 12 months or more?

Total number of respondents: 16

	n	Percent
Yes	2	10.5%
No	16	84.2%
Prefer not to say	1	5.2%

If yes, does your condition or illness reduce your ability to carry out day-to-day activities?

Total number of respondents: 8

	n	Percent
No, not at all	6	75.0%
Yes, a little	0	0.0%
Yes, a lot	0	0.0%
Prefer not to answer	2	25.0%