



safeTALK
suicide alertness for everyone

Glasgow City
HSCP
Health and Social Care Partnership

Impact Evaluation Report 2022/2023

**Glasgow City Suicide
Prevention Partnership
Training Subgroup
September 2024**

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safeTALK Impact Evaluation Report – February 2024

Report Summary

This report discusses the impact that completing safeTALK training has had on respondent's practice.

LivingWorks safeTALK is a 3.5 hour training course that equips people to be more alert to someone thinking of suicide and better able to connect them with further help. Further information about safeTALK can be found here [LivingWorks safeTALK - LivingWorks](#)

Key findings include:

- 100% of respondents would recommend participating in safeTALK training
- Respondents recognise the positive impact that ASIST training has had on them, both personally and professionally

Background

safeTALK is delivered as part of the Glasgow City Suicide Prevention Partnership (GCSP) Training Calendar. The GCSP Training Subgroup is responsible for the delivery of a suite of suicide prevention training courses across the city.

The safe part of safeTALK stands for suicide alertness for everyone whilst the TALK part has two meanings. TALK stands for the idea that direct and open talk about suicide is the key to preventing suicide. In another and more specific way, TALK says Tell, Ask, Listen and KeepSafe. These are the steps that a suicide alert helper does and are taught within this programme.

The impact evaluation of safeTALK was commissioned by this training subgroup. The agreed timeframe for the evaluation was March 2022 (resumption of training following global pandemic) to November 2023. A copy of the survey can be found in **Appendix 1**.

Respondents across multi-agencies are offered the opportunity to access safeTALK training via a booking system and it is offered twice on a monthly basis. It is a part of the main training programme supported by Public Health Scotland as part of the national Suicide Prevention Strategy and Action Plan, 'Creating Hope Together (2022-2025)'.

Aim

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

Methodology

Process

An online Webropol survey was sent to all who participated in safeTALK 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 348 attendees.

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 safeTALK skills, how many times, and in what capacity. Qualitative data was used to provide more context to capture specific examples of impact.

Limitations of the survey

The researchers identified some limitations with the evaluation.

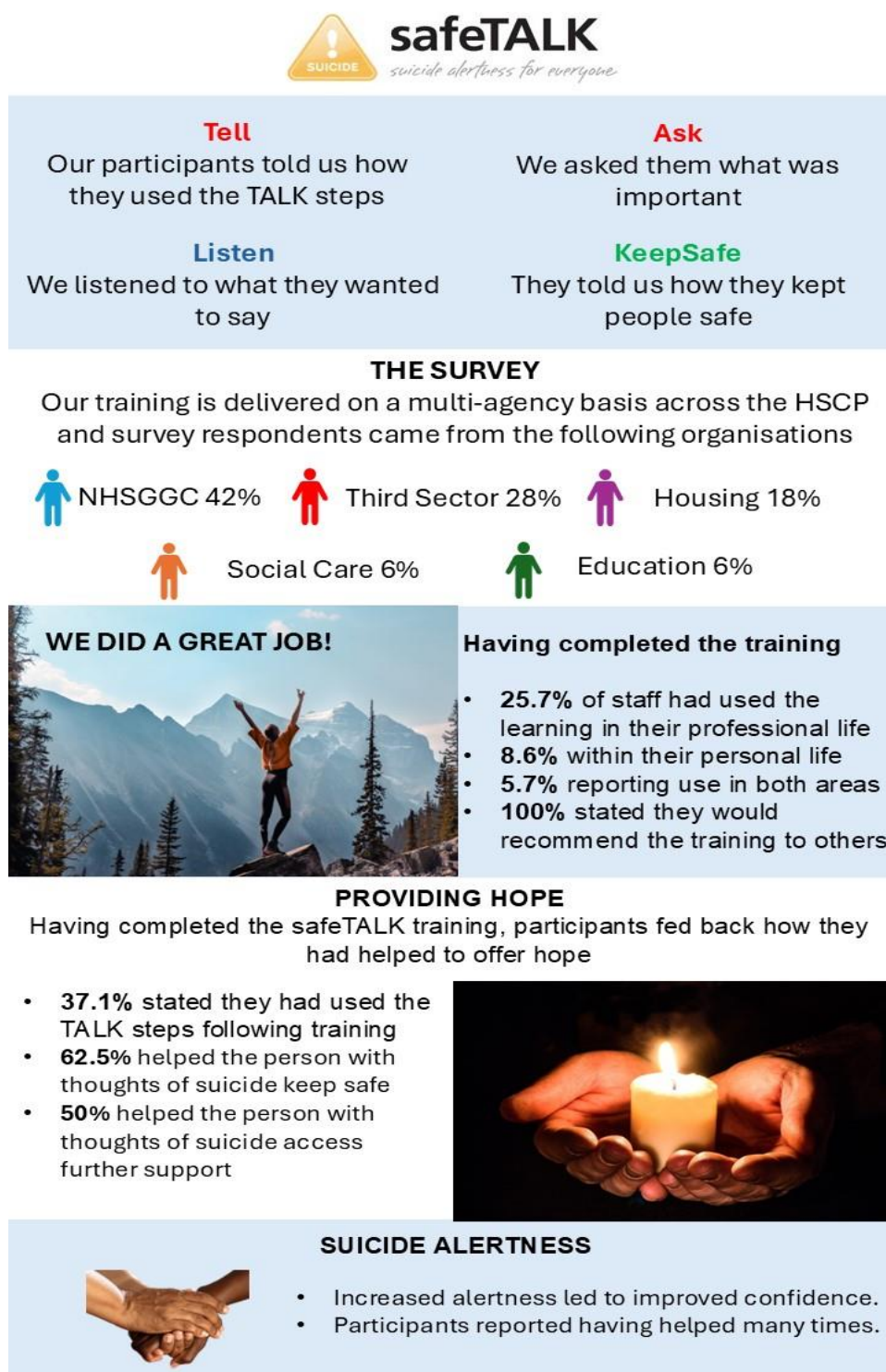
1. The time frame for the survey spanned 20 months. This long timeframe may have impacted on the response rate as respondents may have struggled to recall a profusion of information from training completed, (for some, almost two years prior to the survey).
2. A Webropol survey, sent by email, was used 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 bounce backs were received.
3. In addition to limitation number 2. The method used was limited to an online survey and no interviews/focus groups took place.

4. 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.
5. 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.
6. The survey undertaken didn't address representation of the population group as there were no questions related to age group, gender or ethnicity.
7. There was no previous survey undertaken where data could have been compared.

Findings

Quantitative

A total of 70 completions were received, providing a response rate of 20.1%. The following infographic illustrates the quantitative responses from respondents:



Qualitative

Respondents were asked '*If you have used the learning from safeTALK since your training, please provide one brief example of a situation when you used the TALK steps*'.

Respondents highlighted a range of situations where they used the TALK steps in a variety of settings including:

<i>Service Users</i>	<i>Family members</i>	<i>Friends</i>
<i>Young persons</i>	<i>Colleagues</i>	<i>Patients</i>
<i>Helplines</i>		

Respondents also provided information around the way in which they used the TALK steps and gave examples of the impact from using the steps.

- *Asked about suicide in workplace with service users*
- *Talked openly about suicide with service users*
- *Confident discussing suicide with colleagues/management/family/friends*
- *Able to use the card provided to help decide best course of action*
- *Confident now to keep a person with thoughts of suicide, safe*
- *Confident to speak to service users to then signpost to colleagues who are ASIST trained.*
- *Used the steps in both professional and personal life*
- *TALK steps have provided useful language for discussions with colleagues around suicide.*
- *Haven't used the TALK steps but have shared learning with colleagues and discussed what was covered during the training.*

Respondents were then asked to provide additional comments based on the above question and the general theme of responses were below:

1. *Enhanced awareness and knowledge*
2. *More confident to speak about, and deal with, suicide*
3. *Better equipped now as a team/staff group*

At the end of the survey, respondents were then asked for any further comments and the responses were:

- Now aware of invitations
- More confident
- Would recommend the training to colleagues
- Course was informative
- Well equipped to deal with suicide now
- Excellent training delivery

Recommendations

Having analysed and reviewed the data from the safeTALK survey, the GCSP Training sub-group would like to highlight the following recommendations:

- The survey illustrates the positive impact that safeTALK has on people and it should continue to be delivered as part of the GCSP City training calendar.
- Moving forward, focus groups/interviews should be undertaken as part of the impact evaluation as a survey was the only method adopted for data collection. This would provide a breadth of qualitative and quantitative data.
- Going forward, demographics and equalities data should be captured as part of the impact evaluation to demonstrate the diverse reach of participants and/or organisations.
- In future, impact evaluations should be undertaken by the GCSP Training sub-group on an annual basis as this survey spanned a 20-month timeframe. More regular measures would provide consistency and an opportunity to compare data, on the overall impact of training.

Further Information

This report was prepared on behalf of the Glasgow City Suicide Prevention Partnership: Training Subgroup, by:

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Appendix Section

Appendix 1

Glasgow City Suicide Prevention Partnership safeTALK Evaluation 2022/23

What organisation did you represent when attending safeTALK training?

NHSGGC	
Social Work	
Third/Voluntary Sector	
Education	
Housing	
Other	

Have you used the TALK steps since completing the training?

Yes	
No	

In what capacity did you use the TALK steps?

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 the TALK steps?

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

If you have used the learning from safeTALK since your training, please provide one brief example of a situation when you used the TALK steps.

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

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

Has your safeTALK 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 safeTALK training to others?

Yes	
No	

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