

# DUBLIN 10 STORM TRAINING INITIATIVE

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Evaluation Report  
March 2014

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April 2010 –  
December 2012

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The Dublin 10 Storm Training Initiative would not have been made possible without the valuable support of the following Partners:

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**ESB** ELECTRIC AID  
IRELAND



# Suicide Prevention Training Programme

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## EXECUTIVE SUMMARY

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This executive summary of the STORM® Suicide Prevention Training Programme (set in Dublin 10) evaluation study should be read in the context of the full report. Whilst we have ensured that this report reflects the findings from a comprehensive consultation programme, we have also considered a range of strategic and policy documents to articulate the strategic context. Throughout the course of this study, robust evidence has been collated, to conclude that the Project has delivered significant impacts for stakeholders across the Dublin 10 area and beyond. The most dominant outcome emanating throughout this analysis is in relation to the positive impacts into practice which participants have experienced to such an extent that over 90% of those consulted felt that they now had a structure within which to work when dealing with a suicidal crisis. This has also resulted in a much higher level of confidence among participants when dealing with all scenarios related to suicide.

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**The STORM® Suicide Prevention Training Programme is extremely innovative in the context of using a clinical model of intervention and modelling it to make it relevant to front line workers supporting at risk groups in the Dublin 10 community.**

**Participant Outcomes:** The programme has been effective in developing and formalising the skills needed to assess and manage suicide risk for participant organisations. The Programme has also resulted in a significant and sustained improvement in confidence and attitudes towards suicide prevention within participant organisations.

**Quality of Training:** The levels of satisfaction with the quality and delivery of the training were as follows:

- 100% of the participants felt that the facilitation and delivery of training was excellent or very good.
- 85% felt that the materials and documentation used were excellent.
- 75% felt that the training was excellent in identifying suicidal intent, while 25% felt that it was very good in this area.

**Irish Context:** Although STORM® is not recognised as part of the Irish National Strategy for training in Suicide Prevention, there are a number of areas where STORM® fits in with the “Reach Out” National Strategy for Action on Suicide Prevention including:

- Focusing prevention efforts beyond traditional health service settings.
- Linking Suicide with substance abuse & addiction.

**Translation into Practice Impact:** Since April 2010, when the first tranche of participants underwent the training, STORM® has consistently impacted on the practice of participants in the following areas:

- Increased confidence in dealing with suicide prevention issues in period since undertaking the training.
- Occasions to use the information and skills developed on the STORM® Suicide Prevention Training in their day to day work both involving suicide and non-suicide issues.
- Positive Impact on the practices & knowledge base of the participants' wider team.

**Dublin 10 Community Impact:** The STORM® Programme was developed out of a Needs Analysis carried out by the Ballyfermot Local Drugs Task Force (BLDTF) in 2009<sup>1</sup>. Mental Health & Well Being were two of the key areas highlighted in the Needs Analysis. The consultations for this evaluation clearly identified added value outcomes: Mixed groups and the availability of STORM® to a range of community-based and statutory agencies was identified through the evaluation as an added value outcome in terms of improved networking and partnership working.

1. Ballyfermot Local Drugs Task Force (2008) Research to aid the development of a future strategy for Ballyfermot, Dublin: Ireland.



# 1.0

## INTRODUCTION

In October 2012, Gauge Ireland was commissioned by the Ballyfermot Advance Project to evaluate the STORM® Suicide Prevention Training Programme in Dublin 10 within the following terms of reference.

- Locating the Dublin 10 STORM® Initiative in the Irish Suicide Prevention context.
- Quality of Training Evaluation.
- Impact into Practice Evaluation Impact of STORM® as a community-based model of suicide prevention within the Dublin 10 context

The Dublin 10 STORM® Suicide Prevention Training Programme began in 2010 with the securing of a licence to deliver STORM® Skills-Based Training in Risk Management of Suicide & Self Injury to designated organisations within the Ballyfermot Local Drugs Task Force Area<sup>2</sup>. The need for the STORM® Programme was identified out of a Needs Analysis carried out by the Ballyfermot Local Drugs Task Force (BLDTF) in 2009. The key driver behind the roll out of the training programme was the upskilling of front line workers supporting those impacted by substance misuse and who may be at risk of suicide. Since early 2010 the Dublin 10 STORM® team comprising of staff from the Ballyfermot Advance Project and the Base Youth Project have delivered STORM® Suicide Prevention Training to 105 frontline workers and STORM® Self-Injury Management Training to 55 frontline workers from a broad range of statutory, community and voluntary organisations<sup>3</sup> operating in the Dublin 10 area.

2. The Ballyfermot Advance Project developed the proposal to secure the licence and deliver the training and presented same to BLDTF who subsequently lent their full support to the roll out of the training programme.

## 1.1 Background To Storm® Programme

STORM® began as a research project at the University of Manchester in the mid 1990's in response to the need for skills based self harm risk assessment and management training. STORM® identified that there was a considerable void in the area of skills based training for frontline workers with no guidance around questioning techniques and intervention timelines. Central to the development of the STORM® Programme was the understanding that:

- The didactic lecture format of delivering to professionals had long been recognised as inadequate in terms of improving the skills of front line professionals.<sup>4</sup>
- Factual knowledge about suicide does not improve skills.<sup>5</sup>
- Practice through role-rehearsal with feedback has been shown to lead therapeutic skills acquisition.<sup>6</sup>

The STORM® model of training has been tested in a number of research studies conducted at the University of Manchester. The content of the training is delivered through a skills based model of training underpinned by Adult Learning Theory.

Research<sup>7</sup> found that the model: Increased knowledge and skills.

- Improved attitudes to self-harm mitigation.
- Improved confidence in assessing risk and safety planning.
- Staff rated the training highly, finding it useful and relevant as well as providing invaluable debriefing and networking opportunities.

In 2003 “The STORM Project”, a research group and not for profit venture within the University of Manchester was created to disseminate the training to service providers. Over the last decade STORM® has been disseminated widely to healthcare, social care, education and criminal justice services. There are currently over 500 trained facilitators, delivering training in organisations and partnerships across the UK, Republic of Ireland and Malta.

3. Since 2011 the STORM licence was expanded to enable delivery of training to a wider cross section of organisations in Dublin 10.

4. Goldberg, 1980.

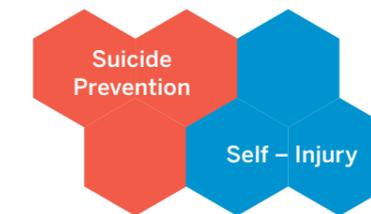
5. Inman et al 1984.

6. Gask et al, 1989; Gask, 1999.

7. Appelby, L., Morris, R., Gask, L., Roland, M., Lewis, B., Perry, A., Battersby, L., Colbert, N., Green, G., Amos, T., Davies, L. & Faragher, B. (2000) An Educational Intervention for Frontline Health Professionals in the Assessment & Management of vSuicidal Patients (The STORM Project). *Psychological Medicine*, 30, 805-812.

## 1.2 Description Of Storm® Programme

### Suicide Prevention Modules



### Storm Combined Risk Assessment Package



STORM® refers to Skills Based Training on Risk Management of Suicide and Self Injury. STORM® training comprises of 2 training packages: Suicide Prevention Training: 2 full-days; Self Injury Management Training: 1 full day. STORM® Suicide Prevention training must first be completed in order to undertake STORM® Self Injury training. STORM® Suicide Prevention Training covers 4 modules: Assessment; Crisis Management; Problem Solving; Crisis Prevention (Appendix 1).

STORM® Training is delivered using a range of media and includes: group work, demonstration of skills, use of video recorded role play and feedback, translation into practice and discussion. (Appendix 2 contains a full description of the STORM® Programme) STORM® templates/worksheets accompany each of the modules and provide a structure by which STORM® can be incorporated into Case Management Systems.

STORM® Suicide Prevention Training focuses on developing, through rehearsal, the skills needed to assess and manage a person at risk of suicide in the short and medium term. STORM® trained workers are equipped to deal with the immediate crisis and also to work longer term with the individual. The aim of the training is to give workers very practical skills to a) make an in-depth assessment of a person's risk of suicide b) to put measures in place to keep them safe in the critical 72 hour period of crisis c) once the crisis has averted to support the person to learn new problem solving skills d) to develop crisis prevention skills and a crisis prevention plan with the person so that the risk of suicide is reduced into the future.

STORM® Self Injury Management Training gives frontline workers key skills in assessing and crisis managing self injury among their clients. The training looks at attitudes to self injury, the relationship of self injury to suicide, exploring emotional and psychological states in lead up to a crisis, skills in harm minimisation, and developing alternative

copied strategies. STORM® training allows frontline workers to give comprehensive support to their clients who may be at risk of suicide or Self – Injury. The potential offered by the STORM® Programme within a community setting was recognised by Ballyfermot Advance and BLDTF in 2009 and resulted in the securing of the licence to deliver STORM® training in Dublin 10.

### 1.3 Dublin 10 Suicide Prevention Training Strategy

The Dublin 10 Suicide Prevention Training Programme forms part of a wider response to the issues of poor mental health, suicide and substance misuse in the general and targeted drug using populations in Dublin 10. In 2009 research carried out by the Ballyfermot Local Drugs Task Force identified poor Mental Health and Wellbeing as priority issues for the area. A number of responses to these issues have been taken since then including highlighting of mental health issues in Drug Task Force publications distributed community wide; Roll out of a Wellbeing Campaign for the general population and targeted client groups; The development of closer cross-sectoral communication and relationships with regard to mental health and substance misuse. Ballyfermot Advance has taken the lead on rolling out the Dublin 10 Suicide Prevention Training Programme. Their approach is focused around a three layered training framework which is designed to train and develop all strands of the Dublin 10 population including general public, targeted client groups & frontline workers. This is a very similar approach to the Scottish National Suicide Prevention Strategy “Choose Life” It can be segmented as follows.



- **STORM® Skills based training in Risk Management of Suicide and Self Injury:** STORM® Training is open to FRONTLINE workers in the Ballyfermot Local Drugs Task Force area. It provides advanced skills in Assessment and Management of Suicide and Self Injury, Problem Solving and Crisis Prevention. It is complementary to ASIST training. It offers frontline workers the additional necessary skills to work with someone throughout a suicidal crisis and beyond into the medium term.



- **ASIST Suicide Prevention Training:** The **ASIST** workshop is a two-day, highly interactive, practical, practice-oriented workshop. It is suitable for people living or working in the area who want to feel more comfortable, confident and competent in helping to prevent the immediate risk of suicide. It provides practical skills in ‘Suicide First Aid’ and can be a follow on to safe TALK training.



- **safe TALK** suicide alertness training is rolled out to the general population and targeted client groups. It provides a sound introduction based around increasing awareness and alertness of suicide issues. A safeTALK session runs for three and a half hours and gives participants very practical skills in noticing, listening to and responding to someone who is in distress and may be at risk of suicide. These skills can be used with family members, clients, friends and neighbours and are a valuable resource for anyone living or working in the area.

### 1.4 Resources Invested In Dublin 10 Storm®

The STORM® Training Initiative has been central to the development of the Dublin 10 Suicide Prevention Training Strategy. A wide range of staff across a number of disciplines and community and Statutory based services have received training in STORM Suicide Prevention and Self Injury Management. To date:105 frontline workers and managers have completed STORM® Suicide Prevention Training and 55 frontline workers and managers have completed STORM® Self Injury Training. These include Youth Workers; Family Support Workers; Community Based Drug Workers; Second Level Teachers; Home School Liaison staff; School Completion Staff; Probation Officers; Community Garda; Mental Health Staff; Counsellors; CAMHS; Community based Child Welfare Staff; Rehabilitation Staff; HSE Addiction Services; Garda Diversion Programme staff; and Community Training Centre Educators.

The following are the human & financial resources invested by stakeholder organisations and funders into the development of the Dublin 10 STORM® Training Initiative.

#### Human Resources:

- 2250 man hours committed by organisations/agencies in Dublin 10 to attend STORM® training since 2010
- 980 man hours committed by Ballyfermot Advance and the Base in direct training delivery and Training for Trainers since 2010.
- The STORM® Team comprises of 3 staff (STORM® is in addition to their original job descriptions and workloads).
- Ballyfermot Advance Project have provided 2 staff: both trainers and in addition one is the STORM® Coordinator.
- The BASE Youth Centre has provided 1 staff member: a Trainer.
- In addition to training delivery the following is also undertaken by the Coordinator and Training team: STORM® initiative planning and development, seeking funding, evaluation and oversight, continuous research and updating resources, project promotion, managing bookings, venues, group planning and structuring etc. are all required to keep the STORM® process alive.

#### Financial Resources:

- Funding: the original STORM® training licence was paid for by the Ballyfermot Advance Project with the approval of the Ballyfermot Local Drugs Task Force.
- Training is provided FREE of CHARGE to all organisations and agencies covered under the licence.

■ ESB Electric Aid has provided the funding required for the actual delivery of STORM® training e.g. venue and materials. Since 2010 ESB Electric Aid has provided in excess of €22,000.

■ The Ballyfermot Local Drugs Task Force also provides occasional funding for the development of the STORM® Programme.

■ Salaries continue to be paid by Ballyfermot Advance Project and Base Youth Centre to cover all STORM® work.

The following organisations have had staff trained in STORM® between April 2010 and November 2012:

- Ballyfermot Advance Project
- Base Youth Centre
- Job Plan
- BSII
- Fusion CPL
- Familiscope
- Cherry Orchard Child & Family Centre
- HSE including Addiction Services, Mental Health & Psychology
- Probation Service
- An Garda Síochána
- Candle
- Kylemore Community Training Centre
- Ballyfermot Youth Service
- Cherry Orchard Integrated Youth Centre (Equine Centre)
- Life Centre
- St. Dominic's Secondary School
- Dublin 10 School Completion Coordinators
- Ballyfermot STAR
- Matt Talbot Community Trust



## 2.0

### LOCATING STORM IN THE THE IRISH SUICIDE PREVENTION CONTEXT

**Suicide is a global public health problem, each year worldwide; approximately 1 million individuals die of suicide, 10-20 million attempt suicide and 50-120 million are profoundly affected by the suicide or attempted suicide of a close relative or friend. Efforts to address the problem have been unsystematic but there is increasing recognition by governments, community members and professional groups of the need to do more. The World Health Organisation (WHO) is at the forefront of a drive to have suicide prevention strategies within each member country.**

## 2.1 Ireland

The National Strategy for Action on Suicide Prevention “Reach Out” 2005-14 produced by the Health Service Executive (HSE), the National Suicide Review Group and the Department of Health & Children is a strategic framework which sets out the actions to be taken in a coordinated way through partnership working between statutory, voluntary & community groups and individuals supported by government. The framework clearly defines suicide prevention as:

*“The science and practice of identifying and reducing the impact of risk factors associated with suicidal behaviour and of identifying and promoting factors that protect against engaging in suicidal behaviour”.*

The strategy is focused around four key areas:

- General Population Approach
- Targeted Approach
- Responding to Suicide
- Information & Research

The general population approach though national in scope is focused on many of the same component community areas that the Dublin 10 Suicide Prevention Strategy has targeted namely:

- The Family
- Schools
- Youth Organisations & Services
- Further Education Settings
- Voluntary & Community Organisations
- Primary Care & General Practice
- Reducing Stigma & Promoting Mental Health

The strategy is explicit in recommending suicide prevention training for primary care and general practice practitioners in addition to volunteers involved in community & religious groups. The targeted approach is designed around specific demographics, risk factors & settings including:

- Mental Health Services
- Alcohol & Substance Abuse
- Marginalised Groups
- Prisons
- An Garda Síochána
- Unemployed People
- People who have experienced Abuse
- Young Men
- Older People

It is important to stress that the general population approach to suicide prevention and targeting those who are most at risk should be complementary approaches. Through increasing awareness and tackling stigma in the general population, it is more likely that those at risk will engage with health or community professionals. This broad based approach to suicide prevention is the approach advocated by the

“Many of those who take their own life do not come into regular contact with the health service this underlies the need to focus prevention efforts beyond traditional health service settings”.  
Reach Out (Pg. 16)

“The most common diagnoses in those who die by suicide is an effective disorder (including major depression) followed by a substance abuse disorder, personality disorders and psychotic disorders... comorbidity of a psychiatric disorder and alcohol or substance abuse greatly increase the risk of suicide”.  
Reach Out (Pg. 34)

“The on-going increase in DSH requires prioritising effective interventions at multiple levels including: Early identification of people at risk of self harm by implementing evidence based depression/self harm/suicide awareness and skills training for professionals working in health care and community based services”.  
National Registry of Deliberate Self Harm (DSH) 2010: Recommendations  
(Pg. 111)

World Health Organisation and the International Association for Suicide Prevention (IASP). WHO recommends that member states should develop national prevention strategies that are linked where possible to other public health bodies. The role of governments in developing general population strategies has been further endorsed by the United Nations. In Ireland, the National Health Strategy “Quality & Fairness” commits to the principles of promoting, protecting and improving health, reducing premature mortality and intensifying suicide prevention programmes.

Amongst the key recommendations of the “Reach Out” Strategy was the establishment of a National Office for Suicide Prevention (NOSP) which would be tasked with the priority of developing a National Suicide Prevention Training Programme. The NOSP was established in 2005 and has embraced the Living Works Programme ASIST as the National Suicide Prevention Training Programme, the office holds the licence for the delivery of ASIST and training has been rolled out nationally to a range of audiences including care givers in the general community and, statutory and voluntary services. Although STORM® is not recognised as part of the Irish National Strategy, there are a number of areas where STORM® fits in with the “Reach Out” National Strategy for Action on Suicide Prevention, including:



# 3.0

## QUALITY OF TRAINING EVALUATION

The research methodology adopted by Gauge Ireland to evaluate the quality of training included three phases:

- Analysing the results from an Interim Evaluation carried out in July 2011 by the Ballyfermot Advance Project which focused on "Translation into Practice".
- Analysis of the STORM® Suicide Prevention & Risk Management Review & the STORM® Self Injury Review. These reviews were conducted by STORM® participants completing a questionnaire at the end of both elements of the training.
- Analysis of the results from the Impact into Practice Questionnaire which was circulated to the 74 professionals who had been STORM® trained and who are still working in the Dublin 10 area.

### 3.1 Translation Into Practice Evaluation

In July 2011, Ballyfermot Advance Project carried out an Interim Evaluation of the STORM® Suicide Prevention & Risk Management Training 15 months after it was first piloted. The focus of the evaluation was "Translation into Practice" (Appendix 2) with the emphasis on:

- Trends emerging that would indicate an increase in confidence in dealing with suicide issues since undertaking the STORM® training.
- Trends around the frequency of using the information & skills gained

- on the STORM® training in their work
- How useful participants found the STORM® training.
- The extent to which participants have used the skills developed from the STORM® training in situations that have not involved suicidal crisis.
- Trends emerging that would indicate that the STORM® training has influenced the practice of the team that participants are working in.

### 3.1.1 Translation Into Practice Evaluation Results

The following points outline the results from a sample of 23 participants:

- 100% of respondents reported that their confidence in dealing with suicide had increased since undertaking STORM® training.
- 75% of respondents indicated that since undertaking the training they have had occasion to use the information and skills developed on the STORM® Suicide Prevention Training Course in their work.
- 100% of those respondents who had used the information and skills found them useful
- 88% of respondents since undertaking the training had used the skills developed in situations that had not involved suicide crisis.
- 65% of respondents indicated that the STORM® training had influenced the practices of the wider team that they worked in.
- 100% of respondents would recommend STORM® training to a colleague.

## 3.2 Storm® Suicide Prevention & Risk Management Review

During the Period April 2010 to December 2012, 105 professionals were trained in STORM® Suicide Prevention & Risk Management, at the end of each training module participants were asked to complete a questionnaire to evaluate the quality of training (Appendix 4). There was a 100% response rate to the completion of the questionnaire. The following areas were covered:

- Module 1: Assessment
- Module 2: Crisis Management
- Module 3: Problem Solving
- Module 4: Crisis Prevention

The results of the evaluation are outlined in the following sections below:

#### Module 1: Assessment

	Poor	Fair	Good	Very Good	Excellent
Identifying suicidal intent (asking the death question)	0	0	2	24	69
Identifying seriousness of intent – plan (where, when, how)	0	0	3	23	69
Exploring background	0	0	0	22	73

#### Module 2: Crisis Management

	Poor	Fair	Good	Very Good	Excellent
Identifying safety appropriate to risk	0	0	4	24	67
Identifying network of support	0	0	4	28	63

#### Module 3: Problem Solving

	Poor	Fair	Good	Very Good	Excellent
Understanding the process	0	0	1	11	83
Teaching the technique	0	0	0	19	76

#### Module 4: Crisis Prevention

	Poor	Fair	Good	Very Good	Excellent
Identifying Problems & Triggers	0	0	2	16	77
Identifying Signs & Symptoms of Pending Crisis	0	0	1	19	75
Identifying a Network of Support	0	0	0	22	73
Developing a Crisis Prevention Plan	0	0	1	17	77

### 3.2.1 Overall Experience Of Storm® Training – A Summary

#### Overall Experience of STORM® Suicide Prevention Training

	Poor	Fair	Good	Very Good	Excellent
STORM® Documentation – Templates, Assessment, Crisis Management, Prevention & Problem Solving	0	0	4	12	79
Introduction to topic of suicide: Envelope exercise discussion and quality of information	0	0	0	6	89
Use of video role playing/discussion	0	0	2	18	75
Venue/Facilities/Food	0	2	8	24	61
Time allocated for modules	0	0	3	12	80
Facilitation/Delivery	0	0	0	4	91

83% of respondents felt that the STORM® documentation was excellent with another 12% indicating that it was very good. A GOOGLE® DOCS facility was set up to allow those who completed STORM® training in Dublin 10 to access STORM® worksheets online and also to download relevant updated Irish & International research and materials relating to suicide, self injury, mental health & young people. The STORM® Programme is delivered using a range of materials and is supported by Module specific worksheets i.e. Assessment, Crisis Management, Problem Solving & Crisis Prevention. These are used to support learning during the training but also impact on a long term basis as tools to record interventions and track problem solving & crisis prevention actions. These can also be built into Case Management Systems and provide a structure within which frontline workers can support clients.

95% of respondents felt that the Introduction to the topic of suicide was excellent: The context in which STORM® is delivered is seen as very important to the absorption and translation of the programme to an area specific audience. Local, national and international research is analysed on an on-going basis by the STORM® Team and is used to inform the training. Relevant research and information is also tailored to match the training group mix and their client groups. This is supported on an on-going basis through Google Docs.

98% of respondents felt that the use of video role playing & discussion was either very good or excellent. Use of role play, video recorded role play and self/group critique is central to the skills based learning aspect of the STORM® training. Role rehearsal scenarios are included in the STORM® Programme and each trainee participates in one video recorded role play which is played back to the group and is followed by structured feedback from the group who have actively watched the role play whilst referring to the relevant module worksheet.

### 3.3 Storm® Self Injury Risk Management - Training Review

During the Period April 2010 to December 2012, 55 professionals were trained in STORM® Self Injury Risk Management, at the end of each training module participants were asked to complete a questionnaire to evaluate the quality of training. This evaluation was able to source 47 responses. The following areas were covered:

Module 5: Self injury

	Poor	Fair	Good	Very Good	Excellent
Understanding/explaining self injury	0	0	2	8	37
Understanding & acknowledging personal attitudes to self injury and applying a more positive approach	0	0	1	9	37
Demonstrating the skills to assess self injury and its associated risk to health	0	0	1	17	29

Module 6: Self Injury Crisis Management

	Poor	Fair	Good	Very Good	Excellent
Ensuring appropriate wound treatment if needed	0	0	2	12	27
Ensuring safety appropriate to the risk	0	0	1	16	28
Providing immediate support appropriate to risk	0	0	1	18	28
Identifying self-help coping strategies	0	0	2	11	34

Overall Experience of Self Injury Risk Management Training

	Poor	Fair	Good	Very Good	Excellent
STORM® Documentation – Self Injury Templates, Assessment, Crisis Management	0	0	0	5	42
Use of video role playing/discussion	0	0	2	10	35
Venue/facilities/food	0	0	5	12	30
Facilitation/delivery	0	0	0	7	40

As with the Suicide Prevention Risk Management section, participants expressed very high levels of satisfaction with the STORM® documentation used in Self Injury Risk Management Training (100% felt it was either Excellent or Very Good) and the use of video role playing/discussion. (98% felt that it was either Excellent or Very Good). 100% of respondents felt that that the facilitation & delivery of both elements of the training was either Excellent or Very Good

**Next Steps:**  
See **Recommendations** Section (Pg. 38).

### 3.4 Storm® Impact Into Practice Evaluation

In November 2012, as part of this evaluation, questionnaires were circulated to 74 professionals who had been STORM® trained since April 2010 and who were still working in the professional sector in the Dublin 10 area. The theme of the questionnaire was Impact into Practice (Appendix 5) and it focused on the following areas:

- Confidence in dealing with suicide issues.
- Using the skills acquired in their day to day work.
- Added value in terms of using the skills in non-suicide situations.
- Direct impact on practice.
- Direct impact on practice for team working.
- Extent to which you now work more closely with other professionals when dealing with suicidal issues.
- Seeking the support of family/friends when carrying out an intervention.
- Extent to which STORM® has created a structure within which to work when dealing with a suicidal crisis.

30 of the 74 professionals still working in Dublin 10 responded either through questionnaire, focus groups or telephone interview with the following results:

#### Level of Previous Training?

This question was designed to establish the level of previous suicide related training participants had undergone:

- 50% of respondents had undertaken ASIST training prior to participating in STORM® training.
- 27% had undertaken Safe TALK training.
- 23% had undertaken no previous suicide prevention training.

#### Increased confidence in dealing with suicide?

- 100% of respondents indicated that confidence levels in dealing with suicide interventions had increased as a result of undertaking STORM® training.

#### Using skills acquired in your work?

- 87% of respondents indicated that since completing the training, they have had occasion to carry out an intervention in their work using the skills acquired in STORM®.

#### Most useful skills learned in STORM®?

- All of the respondents who indicated that they had occasion to carry out an intervention using the skills acquired in STORM® felt that

all 4 modules covered in the Risk Management section were equally useful.

- 87% of organisations indicated that since completing the training, they had used the skills acquired in areas that had not involved suicidal crisis.
- 100% of respondents indicated that the STORM® training had a direct impact on their work practice
- 80% of respondents indicated that the STORM® training had impacted upon the practice of the work of their team and the wider organisation within which they work.
- 87% of respondents indicated that since undertaking the STORM® training, they now work more closely with other professionals both based inside & outside Dublin 10 when dealing with suicidal crisis.
- 100% of respondents indicated that they were now much more confident when looking for the support of family/friends of the suicidal person when carrying out an intervention.
- 100% of respondents indicated that since undertaking the STORM training, they felt that they now had a structure within which to work when dealing with a suicidal crisis.

Using skills in non-suicidal interventions?

Impact into practice?

Working more closely with other professionals?

Confidence in seeking support from family/friends? Structure within which to deal with a suicidal crisis?

### 3.4.1 Centre Based Approach Focus Groups

The STORM® training has been delivered within different environments namely:

- Where a group of professionals from different organisations undertake the training together at a locally based venue in Dublin 10.
- Centre based approach where the training is delivered exclusively to staff within an organisation or Centre. In the context of the STORM® training, this has occurred mainly across four Centres:
  - Cherry Orchard Child & Family Centre
  - Kylemore Training Centre
  - St. Dominic's Secondary School
  - Ballyfermot Youth Service<sup>8</sup>

It was agreed with the commissioner that this evaluation would explore the impact of the STORM® training using the centre-based approach through Focus Group discussions with staff from each of the Centres. Consulting with the staff from each of the Centres revealed a consistent recurring theme around the rationale for having a centre-based approach.

“Everybody where possible within the organisation should be trained in the area of suicide prevention rather than a token few”.

<sup>8</sup> This group were the most recently trained, having undertaken the training in November 2012.

This would ensure that there would not be one identified staff member who would be a specialist in the area rather it would be a centre-based approach where all staff would have the capacity to deliver suicide interventions.

All four Centres highlighted that the learning and development of their staff is based on a team approach and that they needed to feel confident that whichever staff member is confronted with a suicide related issue that they could deal with it in a professional and sensitive manner. All of the Centres were comfortable with highlighting their STORM® training certification. This openness and transparency, they felt encouraged clients, learners and students to be more open with staff and teachers about suicide related issues.

Across each of the Centres, at any time there might be as many as 15% of the service, student or learner population experiencing some form of crisis and some did not have access to a full time counsellor. It was therefore deemed to be imperative within the Centres that they should build the capacity of their staff to deal with suicide related issues. Prior to this the Centres would have been reliant on community-based services for advice and guidance which they found very useful but in the words of one of the professionals trained:

“Access to statutory and community support was telephone or referral based but it could not provide us with support and assistance at the crisis moment. It was therefore essential that we built our own capacity in-house”.

The impact of the training across all of the Centres continues to be evident across many aspects of their work, since completing the training:

- In excess of 80% of Centre based staff have had occasion to use the skills acquired through STORM® in their work around suicide prevention. Staff indicated with considerable certainty that the interventions that they delivered as a result of their STORM® had prevented suicides.
- The schools & training based Centres have customised the STORM® learning to meet the learning needs of their students & trainees in Social Science & Social Development based classes and courses.
- The on-going impact and application of the STORM® training continues to be monitored & discussed at staff meetings.
- STORM® has reshaped Board of Management thinking around re-evaluating policies & procedures and it is now part of the continuous professional development of staff & teachers.

The non-monetary resources that Centres invested to ensure that all of their staff were trained cannot be underestimated as in some cases the Centres had to close their operations for the two days to enable their staff to be trained. Conversely the investment of some individuals within the Schools is noteworthy as due to staff shortages it was not possible to release the teachers from their classes to participate in the training; hence the teachers did the training during holidays.

This all-encompassing Centre based approach is supported by policy developments in the relevant government departments, speaking at the recent joint launch by the Department of Health & the Department of Education of new national mental health guidelines for schools, Minister of State for Mental Health Kathleen Lynch said

*“Suicide Prevention & Mental Health in schools “...Is not about going to one person anymore, whether it’s the caretaker, the person serving the food, the guidance counsellor, the principal, the teacher or the classroom assistant, the mental health issues of pupils was the business of everyone in the school.”<sup>9</sup>*



## 4.0

### IMPACT OF STORM® AS A COMMUNITY-BASED MODEL OF SUICIDE PREVENTION WITHIN THE DUBLIN 10 CONTEXT

The terms of reference for this evaluation included impact into practice in the context of how the training has shaped working practices for participants and the impact of STORM® as a community-based model of suicide prevention within Dublin 10. Impact is about change and stakeholders are defined as “people or organisations that experience change, whether positive or negative, as a result of the activity being analysed”. A stakeholder is effectively a person or organisation who has something to gain or lose through the outcomes of a process or project. In a case where there are a significant number of stakeholders, it may not be feasible to measure the impact for all, hence such groupings can be streamlined further by posing the question “*Who experiences the most change?*”

9. Joanne Hunt article in the Irish Times January 31st 2013.

## 4.1 Identifying Stakeholders

Through their analysis of the STORM® project material and experience of evaluating similar community-based projects Gauge Ireland compiled the following list of preliminary stakeholders:

- Organisations trained in STORM®
- Professionals trained in STORM®
- Ballyfermot Advance Project
- Ballyfermot Local Drugs Task Force
- Dublin 10 Community
- Individuals at Risk of Suicide 4.2 Stakeholder Analysis

## 4.2 Stakeholder Analysis

During the consultations, it became evident that there was some overlap across the stakeholder agencies in terms of experiencing impact. For example, improving the health and well-being of people in the community across the Dublin 10 area is a desired outcome for practically all of the stakeholders on the stakeholder list. However, we must be careful not to measure the same impact for different stakeholders. Ultimately it will be among the individuals experiencing the service provision where this impact is felt the most. Hence the key question determining inclusion as a stakeholder was which of these groups experienced the most change as a result of STORM® during the evaluation period. As a result, a rationale for the inclusion and exclusion of stakeholders was subsequently redrafted during the evaluation phase to determine which of these groups experiences the most measurable change

These stakeholders are summarised in Table 1 below.

Stakeholder	Included	Rationale for Inclusion / Exclusion
1. Organisations trained in STORM®	Yes	The group most likely to experience change as they are the direct recipients of the service through their staff.
2. Professionals trained in STORM®	Yes	Group likely to experience change as they are the direct recipients of the service through their staff.
3. Ballyfermot Advance Project	Yes	Delivery agent for the STORM® training in Dublin 10 and a provider of support projects for drug users. Project will experience change due to the link between addiction and suicide.
4. Ballyfermot Local Drugs Task Force	Yes	Main funder of the Ballyfermot Advance Project and instrumental in securing the license for STORM® training. Task Force funded projects and partners were the initial target for STORM® training.
5. BASE Youth Centre	Yes	Key delivery agent with one of the Centre staff being part of the STORM® training team.
6. Dublin 10 Community	No	Impact in terms of a more skilled and aware community in the context of suicide and improved health & well-being. However, this impact will be measured through the agencies involved in the direct delivery and receipt of the services.
7. Individuals at Risk of Suicide	No	As above, the impact will be measured through the frontline agencies.

Table 1 – STORM® Stakeholder List

### 4.3 INVOLVING STAKEHOLDERS

Stakeholder	Consultation Methods
Organisations trained in STORM® <sup>10</sup>	Focus Group discussions held with Cherry Orchard Child & Family Centre <sup>11</sup> (6 participants). Focus Group discussions held with Managers Group <sup>12</sup> . Focus Group discussions held with 9 staff from St. Dominic's Secondary School on November 22. Completed questionnaire evaluations from 14 other organisations who were trained in STORM®. Telephone Interviews,
Professionals trained in STORM® <sup>13</sup>	23 Professionals completed the Translation into Practice Evaluation in July 2011. From the 74 professionals who were STORM® trained and still working in this professional area in Dublin 10 in December 2012, 30 were consulted with either through questionnaire, focus group or telephone interview. <sup>14</sup>
Ballyfermot Advance Project	Meeting with the Director of Projects on 27th November 2012. Meeting with 3 members of the STORM® training team.
Ballyfermot Local Drugs Task Force	Ballyfermot Local Drugs Task Force Meeting with the Ballyfermot Local Drugs Task Force Coordinator on 22nd November 2012.
Base Youth Centre	Meeting with STORM® training team which included Base Centre Youth Officer

Table 2 – STORM® Stakeholder Consultation List

10. See Section 3 for Organisational Impact Analysis.

11. Conducted on 22nd November 2012.

12. Conducted with Garda, Probation, HSE, Ballyfermot STAR, Child & Family Centre, Life Centre and St. Louise's on 22nd November 2012.

13. See Section 3 for Impact Analysis.

14. See Appendix 5.

### 4.4 Ballyfermot Advance Project

Ballyfermot has a population of 23,870 as recorded by the census in 2006. Deprivation indices recognise Ballyfermot as amongst the most disadvantaged communities in the country; (Trutz Hasse & Jonathan Pratschke Deprivation Index and the SAHRU Deprivation Index.) In February 2013, the live register figures for Ballyfermot showed 3443 unemployed or in receipt of benefits (CSO 2013). This was a significant proportion of the population within the working age group. The latest Census figures available highlight a history of educational disadvantage in the area. The proportion of adults who have ceased education at a young age is significantly higher in Ballyfermot (26%) than in Dublin City (14%) or the State as a whole (11%). Additionally, the proportion of people with a primary degree or higher is much lower in Ballyfermot (5%) than for Dublin City (25%). Drug misuse is an on-going challenge for Dublin 10. Ballyfermot is a Local Drugs Task Force area and has amongst the highest numbers in the country receiving methadone treatment. Changing drug using trends means that young people are not moving on to opiates as in the past, but are turning to poly drug use using high THC content herbal cannabis, alcohol and Benzodiazepene's in differing combinations instead.<sup>15</sup> It is within this social & economic context that the Ballyfermot Advance Project has evolved and positioned its service delivery.

The Ballyfermot Advance project oversees a number of initiatives within the Ballyfermot area. These initiatives were set up to address different needs within the Ballyfermot area in relation to drugs and drug use and include: Dublin 10 Suicide Prevention Training Strategy; Ballyfermot Advance Community Drug Team; Community Development Worker; Community Support Worker; Administrative Supports; Community Grants Scheme; Support for Childcare; Residential Options. The context of the emergence and development of the Ballyfermot Advance Project is linked to the social & economic demographics of the area.

There exists a strong community development aspect linked to the roll out of the STORM training as it is being targeted at people working within the communities of Ballyfermot and Dublin 10. The Ballyfermot Advance Community Support worker is the STORM® Coordinator and this dual purpose role has worked well ensuring that the design and roll out of the training is always relevant to the community. The role also involves rolling out other mental health & suicide prevention training initiatives and campaigns. This role has also ensured a synergy between services, making it easier for people to get the services that they need while building capacity within the community. The STORM® Programme has:

- Provided The Community Drug Team with a mechanism to support a very high risk client group whilst in suicidal crisis and beyond.
- Increased the span and capacity of the reach of Ballyfermot Advance in the community that they work.

15. Ballyfermot Local Drugs Task Force, Report on 2011 to DPU, April 2012).

- It has also enabled Ballyfermot Advance to forge closer working links with organisations throughout Dublin 10 and beyond.
- Positioned Ballyfermot Advance as a leading innovator in the field of suicide prevention and substance misuse.
- Effective partnership working is also evidenced by the composition of the STORM® training team which is comprised of professionals from:
  - Ballyfermot Advance Community Drugs Team.
  - Base Youth Team.

The link between addiction and suicide is at the fulcrum of the work of BLDTF and Ballyfermot Advance and rollout of STORM®.

#### 4.5 Ballyfermot Local Drugs Taskforce

The Ballyfermot Local Drugs Taskforce is a partnership of Statutory Agencies, Voluntary Organisations and Community Representatives set up to respond to the drugs problem in Ballyfermot. It was established under Ministerial order in 1997 and since then it has played a central role in the start-up, development, and coordination of drug services and initiatives in Ballyfermot to address local needs. The projects it funds directly are

- Ballyfermot Advance & Ballyfermot Community Drug Team
- Ballyfermot STAR Project
- FUSION CPL
- The Base Youth & Child Care Facility
- BYS Peer Education Programme
- Familiscope
- BSII Job Plan

The BLDTF is responsible for researching, planning and implementing local drug strategies in the Ballyfermot area in line with the National Drugs Strategy. The BLDTF works to ensure that the effects of drugs on individuals, families and the community is minimised, and that all organisations and service providers are capable of dealing with the drugs issue on their normal daily work. It is this context that they fund the Ballyfermot Advance Project and the roll out of the STORM training. The positive impact of the STORM training on a range of stakeholder participants across Dublin 10 has delivered a number of key outcomes which are critical to the mission of BLDTF:

- Strategy now in place to reduce the risk of suicide to drug users, their families and the wider community.
- Improved networking and partnership working within their member agencies.
- Improved working between professionals, e.g. teachers and community workers.
- Recognition that professionals working in the community should be competent in dealing with day to day suicide related issues.
- An increased reach into the community of Ballyfermot.



#### 4.6 Base Youth Project

The Base Ballyfermot Youth Centre was established to work with the most disadvantaged children & young people living in Ballyfermot. The Base was developed under the URBAN II programme in Ballyfermot as a flagship project, supported by the Ballyfermot Drugs Task Force, the Young People's Facilities & Services Fund, Dublin City Council and Health Service Executive. The Base provides exciting new initiatives working in partnership with the community from its unique facility where all children, young people, staff and the wider community are respected, accepted, listened to and cared for. Through innovative and inter-active programmes, services and activities it works towards providing a way for people to grow and develop in a safe, enjoyable and fun environment. The Base seeks to bring about positive individual, collective and community change.

Their mission to bring about positive community change is the context with which the Base Project is linked with the STORM® initiative. The Base Youth Officer is a one of the three STORM® trainers and their work with young people presents them with many suicidal situations. In terms of organisational impact the Base's involvement with the STORM® programme has delivered:

- Improved networking & partnership with other agencies in Dublin 10.
- Enhanced service provision for the Young People of Dublin 10
- Enhanced understanding of suicide issues among the young people across Dublin 10.

An increased reach into the community of Dublin 10.

The majority of the Base staff are STORM® trained and their participation in the training ensured that a youth specific slant was applied in addition to the issues around Child Protection and working with those under the age of 18. The involvement of the Base as a key stakeholder has built the capacity of STORM® to address suicidal issues across all age ranges. The youth specific service portfolio of the Base combined with the adult services focus of Ballyfermot Advance and BLDTF provides a robust continuum of reach across the community of Dublin 10.

# 5.0

## Conclusions

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- STORM® training is an intensive programme which is delivered in a user-friendly way and is pitched at a level that suited all participants whether centre-based or from a mix of community organisations and agencies. It is practical and participative and allows for each individuals professional knowledge, experience and background. It effectively combines visual, participative and role play scenarios. It is community focused and meets a real need in the context of on-going statutory cuts in preventative services.
- STORM® training is sufficiently flexible to meet the suicide prevention training requirements for a range of agencies & professionals. It has been delivered to centre-based staff and a mix of community and statutory professionals including HSE, Probation, An Garda Síochána and Community-based drug services. The mixed group scenario worked well which triggered effective subsequent networking and inter-agency working.
- Participants who had undertaken suicide prevention training prior to undertaking STORM® felt that the STORM® training combined the best elements of suicide first aid (ASIST) with a longer term therapeutic training programme which is more sustainable within the community of Dublin 10. In the current economic climate the community is now much more vulnerable as preventative services are being removed as are the additional supports that were available through teachers and after school supports.
- The training has impacted on the subsequent working practice of participants on a number of levels:
  - 87% of participants surveyed, since undertaking the training, have had occasion to carry out an intervention using the skills acquired in STORM®
  - Participants indicated that they were now much more aware of possible indicators of suicide tendencies among their client group.
  - 100% of participants indicated that they were now much more positive when dealing with any aspect of suicide prevention.
  - 87% of participants have used the skills acquired through STORM® in aspects of their work which has not involved suicide prevention. Centre based staff rated the training as excellent in terms of assessment & crisis intervention.
  - 87% of trainees said they now worked more closely with other professionals when dealing with suicidal crisis.
  - 100% of trainees felt that since undertaking the training, they now had a structure within which to work around suicide prevention.
  - 100% of trainees indicated that STORM® had a direct impact on their practice.

- Robust evidence of added value emerged during the consultations with all of the stakeholder agencies. Centre based staff indicated that the STORM® learning has prompted the amendment of their organisational policies & procedures, the introduction of suicide/self harm policies and the continuous professional development of their staff. The design & delivery of the four models of the suicide prevention training has enabled frontline workers to apply the learning when dealing with aspects of a client's/students life other than suicide prevention
- STORM® training gave participants a structure to work within when dealing with suicide prevention; equipping them with the additional confidence to ask those at risk the pertinent questions to determine the extent of the risk and the appropriate next steps. The training is designed around an evidence-based approach which has brought a new dimension to professionals working in the area.
- Strong empirical evidence, however, is lacking for all of the single measures mentioned (education and awareness programs, training programmes improved treatment of psychiatric disorders, media guidelines for suicide reporting, screening high risk populations, and restriction of access to lethal means.
- STORM® is a clinical training tool made relevant to the community of Dublin 10. This was made possible by trainers using their own experience in the community and designing examples relevant to the training group and ensuring the content reflected what was happening in current research. The training is designed and delivered in a holistic way which places considerable value in involving non clinicians to develop their skills in the community. There are 588 STORM® facilitators who have been trained worldwide and they have delivered to in excess of 200,000 people, many of whom are working in large organisations with over 1,000 staff. STORM® has been piloted in Ireland, United Kingdom, Malta, and Channel Islands and Australia.
- In the context of the Irish National Strategy on Suicide Prevention “Reach Out” this evaluation concludes that there are a number of areas where STORM® has the capacity to meet the requirements of the Strategy particularly in the areas of provision beyond traditional healthcare settings & the provision of advanced level training for frontline staff in suicide prevention.
- Involvement in the design & delivery of STORM® has delivered positive impacts for all stakeholders. The focus on community is part of the underlying philosophy & ethos of Ballyfermot Local Drugs Task Force and its member organisations. The link between suicide and addiction has been addressed through the composition of the training team and the content of the training.

– There were very high levels of participant satisfaction with the training, those who took part were asked to complete a questionnaire based around the four suicide prevention models and the two self harm models. 95% of those surveyed felt that the facilitation and delivery was excellent, 85% felt that the documentation and materials used in the training were excellent, 75% felt that the training was excellent in identifying suicidal intent, whilst 25% felt it was very good on this area.

– The Centre based approach adopted by St. Dominic's represents best practice in the context of suicide prevention training and guidelines within secondary schools across the Republic of Ireland. The Department of Education & Department of Health recently launched new mental health guidelines in schools which promote training & awareness raising across all of the staff in schools as a preventative measure.

# 6.0

## Recommendations

– The need for a refresher course was highlighted throughout the consultations. It was evident that the impact of the training was greater for those participants who had undertaken the training most recently. However a pragmatic approach is required in relation to this matter. During the past two years the priority has been to train new people within organisations rather than refresh those front line workers already trained within those same organisations. This approach was driven by the participating organisations. While this evaluation would recommend based on the evidence presented, that participants should participate in a refresher course within two years of undertaking the initial training, this needs to be balanced with the on-going requirement to train new frontline workers in Dublin 10 in order to continue to build the capacity of the area in suicide prevention.

– The Quality of Training Evaluation conducted at the end of the STORM® training programme provided a sound indication of possible next steps subsequent to the training. In excess of 75% of the participants indicated that they would like to see the setting up of:

- Bi-monthly/Quarterly suicide/self injury focus/strategy group; and
- Bi-monthly/Quarterly suicide/self injury support for workers group.

– It may not be feasible to set up both a strategy group and a support for workers group, however the informal network of professionals who have been trained in STORM® are well positioned to set up a group which would promote the expansion of STORM®, the continuing lobbying of statutory agencies and address both operational and strategic issues in the context of suicide prevention in Dublin 10.

– This evaluation would recommend the continuation of exploring the possibility with the University of Manchester of rolling the training out to areas other than Dublin 10. Many of the participants who have been trained work with agencies who operate both inside & outside of Dublin 10 and many of the clients live in areas outside of Dublin 10. Hence the learning and impact has already been felt outside the STORM® licensed area. Expansion into other geographic areas would also test the impact of the training in different economic & social conditions.

– The ASIST Programme is the nationally recognised Suicide Prevention Programme by the National Office for Suicide Prevention. However this should not deter STORM® stakeholders in lobbying statutory agencies around the impact of STORM® since 2010. This evaluation should represent the beginning of a lobbying campaign highlighting the niche impact delivered by STORM® in areas with a high incidence of substance

abuse and targeting the areas within the “Reach Out” National Strategy for Action on Suicide Prevention where STORM® clearly meets wider policy & service delivery need.

– Expansion into a national model will require investment in marketing and brand awareness. STORM® has the potential to become a strong brand. Initial work in this area could include ensuring that the network of services who are STORM® trained in the area should carry a logo. This would raise awareness of both the STORM® programme and suicide prevention generally.

– This evaluation has highlighted impact on all stakeholder groups and professional practice. We have sought to measure this impact through standard consultation. Overall we would deem this impact to be substantial in the context of the monetary investment and there are many examples of this throughout this report. However it is also our view that there remains significant impact which has been highlighted but not measured particularly in relation to the Dublin 10 community. We would recommend at some stage in the future applying the Social Return on Investment (SROI) Methodology to more forensically capture and value the impact for the community. This could be the prelude to a business case for expansion across Ireland.

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## APPENDICES 1-6



# APPENDIX 1:

## STORM® PROGRAMME

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### STORM® Training Modules:

#### Suicide Risk Assessment

This is the largest of the modules in terms of its content. The module concentrates on risk assessment covering:

- Interview technique
- Suicide Intent (asking the 'death' question; hopelessness)
- Degree and seriousness (asking about a plan; background)
- Risk and protective factors
- Risk level guideline (also to help manage crisis – discussed more in Crisis Management)
- A brief overview of symptoms of depression
- Summary of self-injury risk assessment

#### Crisis Management

This module concentrates on crisis management covering:

- Ensuring safety (removing or restricting the means of lethality appropriate to the risk)
- Building a network of support appropriate to the risk
- Identifying coping mechanisms/strategies

#### Crisis Prevention

This module concentrates on building a future plan covering:

- Identifying signs, symptoms and triggers
- Identifying self-help techniques
- Ultimately building on what is known from Assessment and Crisis Management

#### Self-Injury Risk Assessment

This is the largest of the modules in terms of its content. The module concentrates on risk assessment covering:

- Addressing attitudes towards self-injury
- Interview skills
- Definition of self-injury
- Understanding self-injury (risk and vulnerability factors)
- Assessing self-injury (preceding events, current intention and seriousness; physical)
- Assessment of injury
- Summary of suicide risk assessment

#### Crisis Management

This module concentrates on crisis management covering:

- Ensuring safety (removing or restricting the means of lethality appropriate to the risk)
- Building a network of support
- Identifying coping mechanisms/strategies

#### Self-help Strategies

This module is offered in both the suicide and self-injury risk assessment and management packages covering:

#### Problem Solving

- A brief self-help technique to teach clients coming out of crisis.

#### Breathing Exercises

- Breathing techniques to teach clients to remain calm and in control.

## APPENDIX 2:

### DESCRIPTION OF STORM® PROGRAMME

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- STORM® refers to Skills Based Training on Risk Management of Suicide and Self Injury. STORM® training comprises of 2 training packages: Suicide Prevention Training: 2 full-days: Self Injury Management Training: 1 full-day.
- STORM® Suicide Prevention training must first be completed in order to undertake STORM® Self Injury training.
- STORM® Suicide Prevention Training covers 4 modules: Assessment; Crisis Management; Problem Solving; Crisis Prevention (see attached sheet for content of modules).
- Over two days trainees learn, develop and practice key skills in: assessing and managing suicidal crisis; problem solving; and suicide crisis prevention.
- Problem Solving and, to a lesser degree, Crisis Prevention modules are transferrable skills that can be used outside suicidal crisis situations.
- STORM® Training in Dublin 10 is delivered using a range of media and includes: group work, demonstration of skills, use of video recorded role play and feedback, Translation into practice and discussion. The context is set using local, national and international research on suicide which is constantly updated by the Training Team. Resources and information on service provision and pathways available to workers in the Dublin 10 area are disseminated throughout the training, and updated through the Dublin 10 Google Docs Facility which is open to staff once they have completed STORM® training.
- Formal and informal Networking among services is facilitated through targeted group work and refreshment breaks.
- STORM® Templates/Worksheets accompany each of the modules and provide a structure through which STORM® can be incorporated into Case Management systems.
- STORM® Handbook encompassing the entire programme and extra information is provided to trainees.
- Self Injury Training comprises of 2 modules: Self Injury Assessment and Crisis Management.
- Training Format is as above.
- Certification of Attendance is provided post training on full completion of course.

## APPENDIX 3:

### TRANSLATION INTO PRACTICE

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#### Translation into Practice Evaluation – 23 Evaluations completed July 2011

- Q.1 Has your confidence in dealing with suicide increased since undertaking STORM® training?
- Yes 23/23 No
- Q.2 Have you had occasion to use the information and skills developed on the STORM® Suicide Prevention Training Course in your work?
- Yes 16/23 No 7/23
- Q.3 If yes were the skills learned on STORM® training useful?
- Yes 16/16 No 0
- Q.4 Have you used some of the skills developed at STORM training in situations that have not involved suicidal crisis?
- Yes 20/23 No 3/23
- Q.5 Has STORM® training had any influence on the practices of the wider team you work within?
- Yes 15/23 No 8/23
- Q.6 Would you recommend STORM® training to a colleague?
- Yes 23/23 No 0

# APPENDIX 4:

## QUALITY OF TRAINING EVALUATION

Module 1- Assesment	How do you rate this module?	Comments
Identifying Suicidal Intent (Asking the death Question)	1 2 3 4 5	
Identifying Seriousness of Intent – Plan (Where, when, how)	1 2 3 4 5	
Exploring Background	1 2 3 4 5	
<b>Overall impression of Module 1 – Assessment:</b>		

Module 2- Crisis Manage	How do you rate this module?	Comments
Identifying Suicidal Intent (Asking the death Question)	1 2 3 4 5	
Identifying Seriousness of Intent – Plan (Where, when, how)	1 2 3 4 5	
Exploring Background	1 2 3 4 5	
<b>Overall impression of Module 2 – Assessment:</b>		

Module 3- Problem Solving	How do you rate this module?	Comments
Understanding The Process	1 2 3 4 5	
Teaching the Technique	1 2 3 4 5	
<b>Overall impression of Module 3 – Assessment:</b>		
Module 4 - Crisis Prevention	How do you rate this module?	Comments
Understanding The Process	1 2 3 4 5	
Teaching the Technique	1 2 3 4 5	
<b>Overall impression of Module 4 – Assessment:</b>		

**Overall Experience of Training;**                      **How do you rate this module? Comments**

STORM® Documentation -  
Templates Assessment, Crisis  
Management/Prevention &  
Problem Solving                      1    2    3    4    5

Use of Video Role Playing/  
Discussion                      1    2    3    4    5

Venue/Facilities/Food                      1    2    3    4    5

Facilitation/Delivery                      1    2    3    4    5

**Overall impression of Storm Training:**

**1 = Poor**

**2 = Fair**

**3 = Good**

**4 = Very good**

**5 = Excellent**

*Thank you for taking the time to complete this review of training.*

## APPENDIX 5:

### IMPACT INTO PRACTICE EVALUATION - COVER LETTER / INTRODUCTORY EMAIL

#### Gauge Ireland Evaluation of the STORM® Training Programme CONFIDENTIAL

The Ballyfermot Advance Project have commissioned Gauge Ireland to undertake an external evaluation of the Dublin 10 STORM® Suicide Prevention Training Initiative. This questionnaire has been designed to obtain information important to this task. As a participant in the training programme, we would be grateful if you take some time to complete this questionnaire

All information you provide will be treated in the strictest confidence. No individual or group will be identified in the final report that we will produce for the Ballyfermot Advance Project. Though we have asked you to include your name and that of your organisation on this questionnaire, we will ensure that any information you provide to us is treated in the strictest confidence. I would appreciate it if you would complete and return this questionnaire to me by email or post (see details below) by Friday 14th December 2012.

*Thank you in advance.*

Finbarr Fitzpatrick  
Gauge Ireland  
1-3 Whitehall Enterprise Centre  
Ballymun  
Dublin 11 Tel: 01-891600  
E-mail: [finbarr.fitzpatrick@gaugeireland.ie](mailto:finbarr.fitzpatrick@gaugeireland.ie)

Questionnaire Number \_\_\_\_\_  
(This will be completed by Gauge).

# APPENDIX 6:

## EVALUATION OF IMPACT INTO PRACTICE - STORM® SKILLS-BASED TRAINING

1) When did you undertake STORM® Suicide Prevention Training?  
Date & Location

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2) Why did you participate in the training?

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3) What level of suicide prevention training did you have before undertaking STORM

Safe TALK   ASIST   Other   None

4) What is your position within your organisation

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5) Has your confidence in dealing with suicide increased since undertaking STORM® training?

Yes  
No

Please circle

6) Since completing the course, have you had occasion to carry out an intervention using the skills acquired in the STORM® Suicide Prevention Training in your work?

Yes  
No

Please circle

7) If yes which of the skills learned in the STORM® training were most useful and why?

Assessment  
Crisis  
Management  
Problem Solving  
Crisis Prevention

Please explain

---

---

8) Have you used some of the skills developed at STORM® training in situations that have not involved suicidal crisis?

Yes  
No

Please explain

---

---

9) Has STORM® training had a direct impact on your practice

Yes  
No

Please explain

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10) Has STORM® training had a direct impact on the practices of the wider team you work within?

Yes  
No

Please explain

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11) Since undertaking STORM® training do you work more closely with other professionals when dealing with suicidal issues?

Please circle which of the options below is most relevant

Professionals/agencies based Inside Dublin 10

Professionals/agencies based Outside Dublin 10 Both

Please give examples:

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12) Since undertaking STORM® do you feel more confident looking for the support of family/friends of the suicidal person when carrying out an intervention?

Yes  
No

Please explain

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13) Since undertaking STORM® training do you feel that you have a structure within which to work when dealing with a suicidal crisis?

Yes  
No

Please explain

---

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14) Would you recommend STORM® training to a colleague?

Yes  
No

Anything else you would like to add:

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Ballyfermot Advance Project  
Unit 3B, Le Fanu House,  
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Ballyfermot, Dublin 10.

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ESB ELECTRIC AID  
IRELAND

An Roinn Sláinte  
DEPARTMENT OF HEALTH

HE  
Inbhearsacht agus Inbhearsú  
Build Skills Build Futures



BALLYFERMOT  
ADVANCE  
Project

An Roinn Coimrce Sóisialaí  
Department of Social Protection  
[www.welfare.ie](http://www.welfare.ie)



NDP  
National Development Plan  
Transforming Ireland