One is Too Many

Annex A: Workbook

One is Too Many': Veteran Suicide Understand-

Identify-Prevent



The Northern Hub for Veteran and Military Families Research Northumbria University







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Self-Assessment Tool Exercise 1: Military Specific Journey to Suicide

Levels of Matur	ity across FIVE domains -Each description	can be scored on a scale of 1 to 4 where 1 indicates emerging maturity and 4 indicates embedded and sustainable maturity.
No.	Level of Maturity	Description of Maturity
1	Emerging	Strategic plans and processes are under discussion but not formalised or adopted. Delivery is mostly ad hoc and is not co-ordinated across the system or sectors
2	Developing	Strategic plans and processes are in active development. Some delivery is aligned to strategy and supported by cross sector partnerships
3	Maturing	Strategic plans and processes are adopted, enabling effective cross sector partnership, and providing governance. Delivery is co-ordinated in most localities of the system
4	Embedded	Strategic plans and processes are fully adopted, embedded, and governed. Delivery is sustainably commissioned and integrated throughout the system

No.	Description	Maturity	Actions
1	Military history and pre-enlistment history - cumulative sources of		
	vulnerability experienced by veterans in both civilian and military life.		
	It is essential that all assessment reflects the veterans' life experiences		
	along a timeline – please consider your current approach to assessment		
	and reflect on how well it captures a veterans' military history and pre-		
	enlistment history as described in Pre-enlistment history.		
	Those working with veterans also need to understand pre-enlistment		
	history and adverse events throughout their life course, as well as the		
	issues that can arise during and after transition from military service to		
	civilian life. Both can lead to an increase in vulnerability and service		
	providers should ensure that all staff are educated so that they can		
	confidently discuss each area of assessment highlighted in Table 10 and		
	Table 11. These are essential components of understanding as		
	described in the pre-motivational phase for suicide in the Integrated		

No.	Description	Maturity	Actions
	Motivational Volitional (IMV) Model of Suicidal Behaviour and enhance the findings of the accumulative factors for suicide.		
2.	Positive factors are reasons for living that protect against the experience of cumulative vulnerability. It is essential that all interactions with veterans in your organisation focus on identifying protective factors such as reasons for living as described in Table 12, please consider your current approach to assessment and reflect on how well care delivery staff understand this approach.		
3.	Complex presentations —The presentation of cumulative vulnerability, in terms of comorbid trauma related presentations. It is essential that assessment reflects life experiences, and that care delivery staff understand what is meant by complex, how to assess for it and how to seek supervision and advice when a veteran has a complex presentation. Considering the information in Table 13 and Table 14, please reflect on how well your organisation understands complex needs and complex presentations, how to identify for them and how those multiple needs are met.		

No.	Description	Maturity	Actions
4.	Understanding the imminent warnings signs of suicidality.		
	How well does your organisation understand the imminent risk of		
	suicidality, and is there policy, procedure or education in place so that		
	all staff are confident in how they should respond to someone that displays signs of imminent suicidality as outlined in Table 15.		
	displays signs of imminent suicidality as outlined in Table 15.		
	Understanding concealed and unconcealed pathways to suicide as		
	highlighted in Table 16		
	Zero tolerance policies can be problematic when manging veterans with		
	behaviour that is challenging to care staff. Please reflect on your		
	approach, policy, or education program on how you manage and work		
	with veterans whose behaviour is problematic and challenging to staff		
	and consider if care staff can distinguish between vulnerability and malevolence.		
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Self-Assessment Tool Exercise 2: Challenging Stigma

Levels of Matur	ity across FIVE domains -Each description	can be scored on a scale of 1 to 4 where 1 indicates emerging maturity and 4 indicates embedded and sustainable maturity.
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3	Maturing	Strategic plans and processes are adopted, enabling effective cross sector partnership, and providing governance. Delivery is co-ordinated in most localities of the system
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No.	Description	Maturity	Actions
	Reflecting on the preventative measures, please consider how mature		
	your organisation is in relation to present policy, process, and psychoeducation with regard the following areas:		
	psychoeducation with regard the following areas.		
1.	Improved access to support		
2.	Padusing barriers to support		
۷.	Reducing barriers to support		

No.	Description	Maturity	Actions
3.	Improved inter agency/service cooperation.		
4.	Efficient management of information and information sharing.		
5.	Shared accountability.		
6.	Active safeguarding.		
7.	Being responsive to signs of vulnerability.		
8.	Clear agreements of accountability at all levels of service provision to prevent fragmentation of care.		
9.	Accountability for overall care governance and worker wellbeing to address compassion fatigue.		

Self-Assessment Tool Exercise 3: Accessibility and Engagement

Levels of Matur	ity across FIVE domains -Each description	can be scored on a scale of 1 to 4 where 1 indicates emerging maturity and 4 indicates embedded and sustainable maturity.
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No.	Description	Maturity	Actions
	Reflecting on the best practice outlined in Table 19, please consider how mature your organisation is in relation to policy, process, and		
	service delivery with regards the following:		
	carried delivery many egands and renorming.		
1.	Transitional support: ensuring there is an established care coordinator		
	to act as a single point of contact to oversee an individual's care and any onward referrals.		
	any onward referrals.		
2.	Safeguarding: measures are in place for records and support to ensure		
	individuals are never without support at any stage of the referral, treatment, support or discharge process.		
	treatment, support of discharge process.		

No.	Description	Maturity	Actions
3.	A safeguarding alert system is in place in line with local and national safeguarding legislation.		
4.	An integrated care approach is in place to build rapport and trust with individuals and their family members as part of a person-centred, compassionate delivery of care.		
5.	Veterans with lived experience are integrated into the planning and development of services.		
6.	Widened eligibility to ensure services and support are inclusive for those with potentially unique needs and experiences.		

Self-Assessment Tool Exercise 4: Families

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No.	Description	Maturity	Actions
	Reflecting on the best practice outlined in Table 19, please consider how mature your organisation is in relation to policy, process and service delivery with regards the following:		
1.	A policy in place to agree with the service user how and when to communicate with family members and enable informed consent to share information.		
2.	An approach of openness where the service user and their family feel comfortable sharing information with service providers.		

No.	Description	Maturity	Actions
3.	Facilitating and encouraging family to sit in on sessions as a source of support.		
4.	Support to family care providers – listening to concerns.		
5.	Acknowledge and emphasise shared caregiving responsibility.		

Self-Assessment Tool Exercise 5: Collaboration and Coordination of Care

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N	No. Description	Maturity	Actions
	Holistic Care		
	Using Table 21, consider how your current services address the following:		
	- Provides 24-hour availability of support, ensuring that the individual and their family are fully aware of.		
	 Provides a strength-based approach to care which includes exploring expectations, resilience building, positive goal setting and instilling hope. 		
	- A time or funds limited approach should be avoided at all costs.		
	- An adaptive approach to care delivery and discharge.		

No.	Description	Maturity	Actions
	 Maintains a proactive regular contact with the individual and their support network. 		
1.	Shared Communication		
	Using Table 21, consider how your current services address the following:		
	 Transparent data sharing agreements with the individual, and their family. 		
	 clear assessment and record management of medical and military history, treatment plan and progress. 		
	- Re-affirm consent and explore confidentiality at every contact.		
	 Reading, understanding, and updating records to prevent story retelling and re-traumatisation. 		
2.	Care Co-ordination		
2.	Using Table 21, consider how your current services address the following:		
	 Provides a single point of contact to navigate the referral process and access to different service providers and oversee all aspects of their care. 		
	Ensure individuals and their families feel listened to.		
	Ensure individuals and families are able to quickly gain access to the appropriate service provision.		

No	Description	Maturity	Actions
	Provides a consistent individual or set of individuals within team with appropriate supervision, training, and awareness of clear clinical boundaries.		
	Ensure succession planning is in place to maintain continuity during annual leave or sick leave absences.		