

CHECK-IN **QUARTER ONE** **EVALUATION REPORT**

April 2021

staffcheck-in.co.uk



Looking after each other to prevent staff suicide

CONTENTS

03 Introduction

Why this campaign and why now?

Campaign objectives

05 Campaign engagement

Engagement with partner organisation leads

Engagement with staff

09 Campaign effectiveness

Campaign launch

Inspiring action

Embedding Check-In

13 Campaign impact

The campaign journey

16 Future recommendations

Key learnings

Campaign improvements and recommendations

What's next

19 Appendices

Appendix one. Survey responses: Launching Check-In on Time to Talk day

Appendix two. Survey responses: Launching Check-In after Time to Talk day

Appendix three. Survey responses: Organisations yet to launch Check-In

Appendix four. Survey responses: Additional campaign support

Appendix Five. Survey responses: Embedding Check-In



INTRODUCTION

Check-In is a long-term suicide prevention campaign and although led and promoted by the West Yorkshire and Harrogate Health and Care Partnership it is to be adopted and embedded at a hyperlocal level, with individual organisations determining how best to embed Check-In and support their colleagues, volunteers and staff.

To support a Quarter One Evaluation, information has been gathered through web stats and sign up data, social media reach and engagement data, case studies gathered from steering group meetings and emails and, a survey sent to all those who have signed up to the Check-In campaign.

The survey was open for seven weeks (from 22nd February to 12th April 2021) and gathered 51 responses, from 46 different organisations. This represents 23% of the 198 organisations signed up. Of the 51 responses, 33 launched Check-In on 'Time to Talk Day' (4th February 2021) and 18 have not yet launched.

This evaluation report is the first of four, the next evaluation phase will take place over June 2021 and a Quarter Two Evaluation report ready in July 2021.

Why this campaign and why now?

Suicide is the biggest killer of people under the age of 35 and the biggest killer of men under the age of 50. Suicide has a major impact on families, friends, workplaces and whole communities. The impact of one death can contribute to relationship breakdowns, loss of job, financial difficulties and can increase a risk of suicide in those left behind.

Check-In aims to prevent staff suicide and promote a wellbeing culture by normalising the conversation around suicide and mental health as well as providing training, resources and signposting for support.

'Staff' includes all colleagues, working and volunteering, in organisations, across the West Yorkshire and Harrogate Health and Care Partnership. It aligns to the [Partnership's Mental Health and Wellbeing Hub](#) and the [Partnership's suicide prevention strategy](#).

Organisations from across West Yorkshire and Harrogate have joined forces to raise awareness on the risk of suicide and to help ensure people are signposted to the right support at the right time. By working together organisations across the Partnership are supporting the ambition of suicide prevention.

[Lippy people](#) are a charity who believe video storytelling has the power to help people achieve positive personal and social change. They have given permission to share some of the stories they have gathered which highlight why Check-In is an important campaign [Steve's story](#), [Darrell's story](#), [Paul's story](#), [Julie's story](#), [Melanie's story](#), [Hanka's story](#) and [Tracy's story](#).

Campaign objectives

The Check-In campaign was co-produced with a project team made up of public health, council, NHS, voluntary community colleagues as well as suicide prevention specialists, psychologists and people with direct experience of suicide. The objectives were co-created through a series of staff workshops. They were challenged and amended to ensure future stakeholders were connected to, and invested in the project. The final objectives were:



1. Every organisation across the Partnership will embed a campaign to save more lives and improve staff mental health.



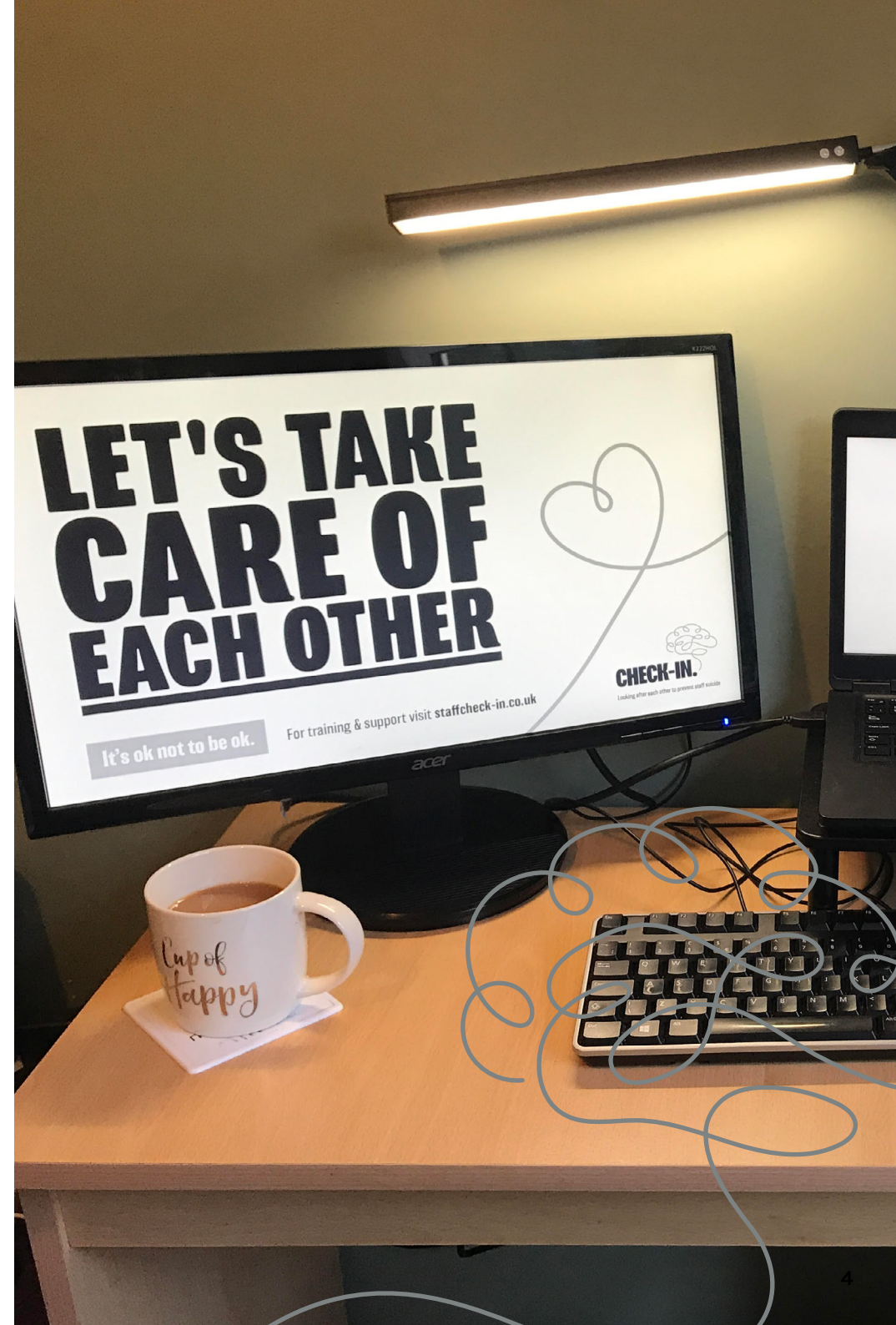
2. This campaign will help normalise the conversation and increase confidence so suicide and mental health can be discussed (without stigma or judgement) as part of everyday workplace conversation.



3. We will work together, to identify and support staff that may be at risk of taking their life and/or struggling to cope with life.



4. Tools, resources and signposting will be made available for those needing support and those doing supporting.



CAMPAIGN ENGAGEMENT

Engagement with partner organisation leads

The early Check-In campaign focused on mobilising HR managers and communication leads to sign up and agree to embed the work and roll out Check-In across their organisation.

Campaign sign ups

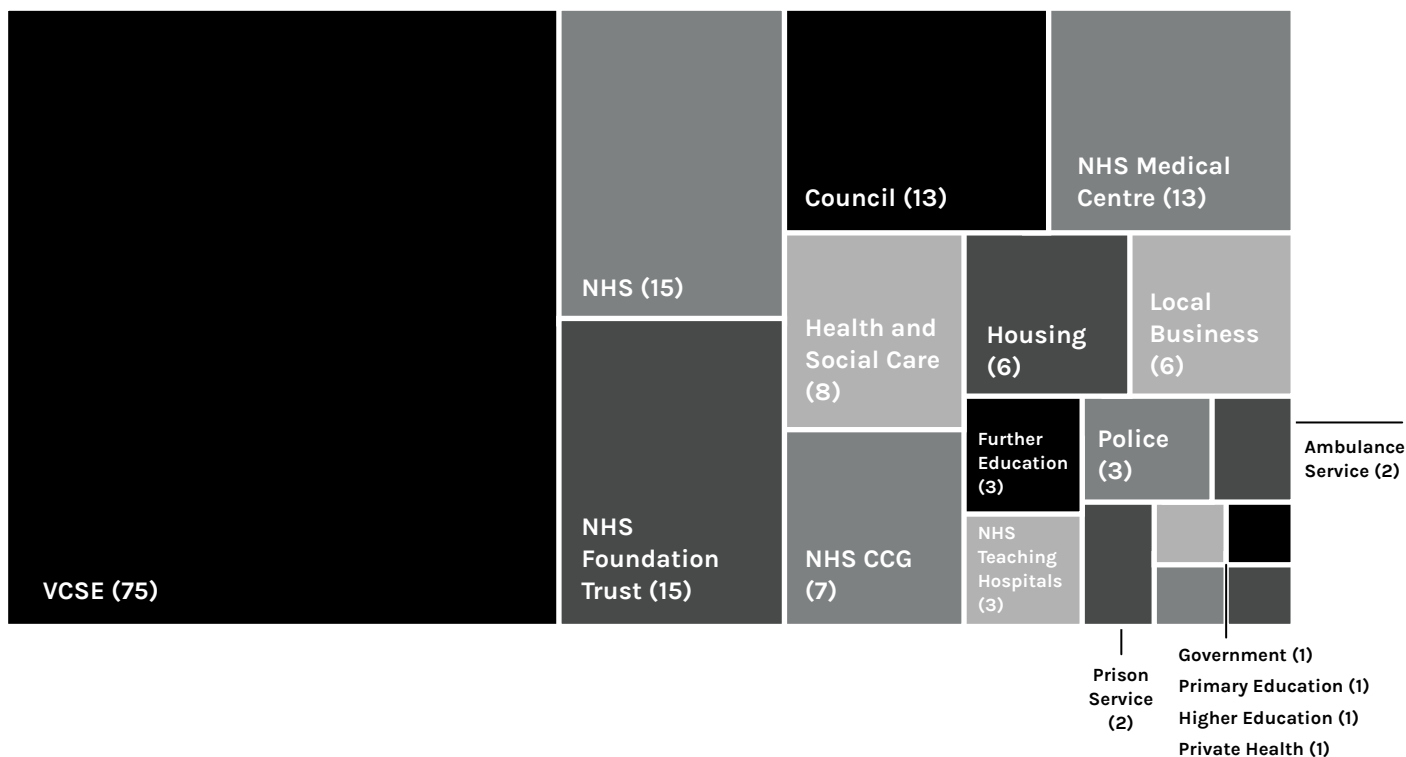
On 14th December 2021 Check-In became open to organisations to sign up to the campaign. By signing up they were committing to be part of the campaign and were on the list to be sent details of the Check-In toolkit. **Within the first week 66 people, from 54 organisations were signed up.**

On 2nd February 2021, when organisations were able to access the toolkit there were 355 people from 172 different organisations signed up and by the date of this evaluation, there are **a total of 417 people from 174 organisations signed up.** These organisations are working together to support an ambition of suicide prevention.

The 174 organisations have been split up by sectors:

Ambulance Service	Housing	NHS Teaching Hospital
Council	Local Business	Police
Further Education	NHS	Primary Education
Government	NHS CCG	Prison Service
Health and Social Care	NHS Foundation Trust	Private Health
Higher Education	NHS Medical Centre	VCSE

Number of organisations split by sector:



The next step for Check-In is to target sectors who are not yet engaging with the campaign.

These sectors and organisations are:

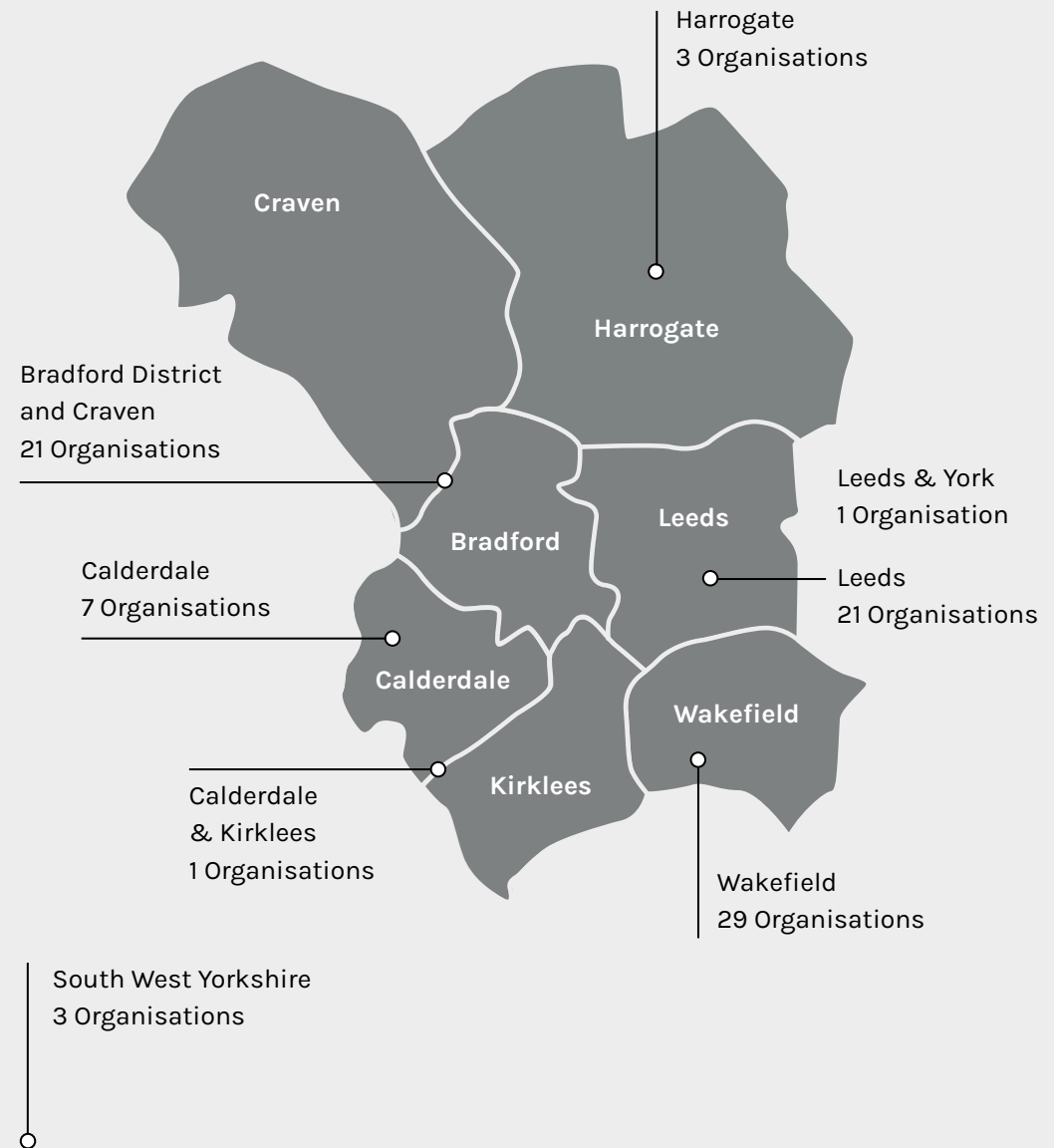
- Care homes, nursing homes and domiciliary care providers.
- GP's, primary care networks and medical centres. Although there are 12 organisations signed up from NHS medical centres this is a very small percentage from the number of GP surgeries and medical centres from across the West Yorkshire and Harrogate area.
- Primary and secondary education settings.
- Low paid/low skilled roles across the Partnership who may be contractors for example porters, cleaners, refuse collectors and grounds people.

Geographical spread

There has been a good geographical spread of organisations signed up to Check-In from across West Yorkshire and Harrogate, and the campaign has spread across the UK with 18 organisations covering the whole of the UK, Five organisations for the rest of Yorkshire and even organisations as far as the Welsh Ambulance Service and Dorset HealthCare Foundation Trust signing up and downloading assets.

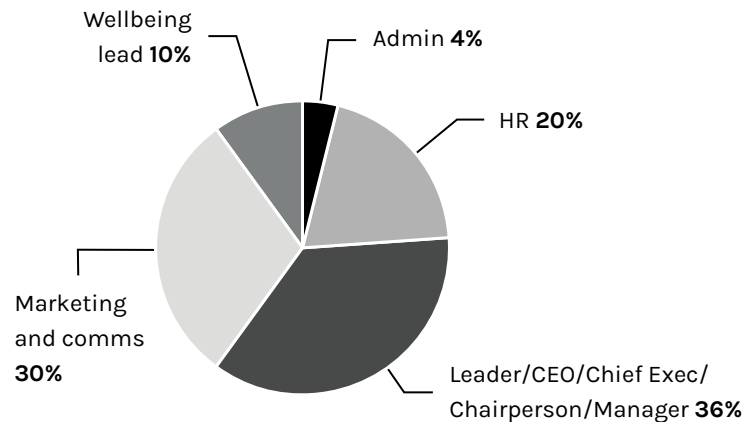
29 of the organisations signed up cover the whole of West Yorkshire and Harrogate with a good split of organisations representing the six areas of the Partnership.

Spread of organisations across West Yorkshire and Harrogate:

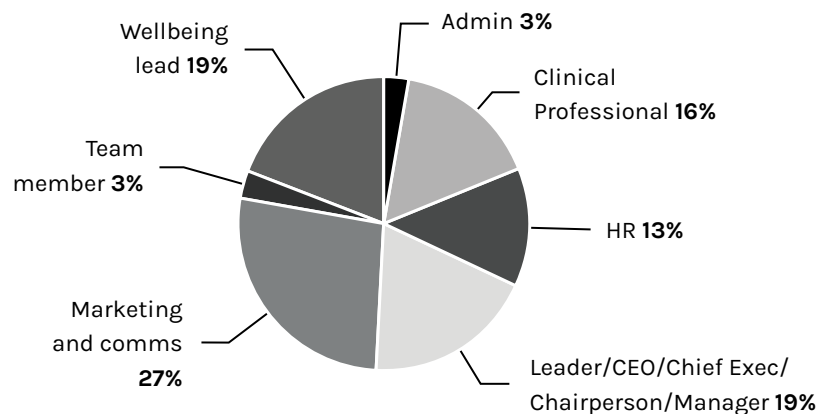


Campaign lead

The survey told us that the Campaign is being led by those in a leadership role or a marketing and communications role.



Looking at the data of those signed up to the campaign and who have downloaded assets the marketing and communication leads look to be taking on the role, closely followed by leaders and the wellbeing lead. Future communications to involve more organisations in Check-In should look to focus working direct with the marketing and communications team, decision makers and the wellbeing lead.



Check-In toolkit

Check-In follows a behaviour change framework and the toolkit provided for organisations mirrored phasing which would support the campaign objectives. These phases are:

- Educate. Signposting to resources, support and training for staff at all levels.
- Raise awareness. A campaign pack centred around starting the conversation about mental health and suicide.
- Promote lived-experiences. A campaign pack and rich content (stories) helping to normalise the conversation around suicide.
- Remind and encourage. A campaign pack that helps maintain the conversation around suicide prevention.

In the first three months of the campaign 50% of all downloads were of the educate campaign assets, which shows that organisations are following the behaviour change framework. Speaking with organisations we have been able to understand that in most cases when the framework fits they are following the steps, however they also feel empowered to use the correct phase for their organisation at the right time. Kirklees Clinical Commissioning Group have particularly used the framework as a basis for their communications but where necessary have used content from across the phases to meet their needs.



In total there have been **382 individual downloads** of the assets this is **by 81 people** from **53 different organisations**.

Downloads have taken place from across many of the sectors, but with **prison service, NHS Foundation Trusts engaging most in the downloads.**

Sector	Number of organisations signed up	Percentage of organisations signed up who have downloaded assets from the toolkit
Ambulance Service	3	33%
Council	13	46%
Further Education	3	0%
Government	1	0%
Health and Social Care	8	50%
Higher Education	1	0%
Housing	6	0%
Local Business	6	33%
NHS	15	27%
NHS Clinical Commissioning Groups (CCGs)	9	22%
NHS Foundation Trust	18	61%
NHS Medical Centres	12	0%
NHS Teaching Hospitals	3	67%
Police	3	33%
Primary Education	1	0%
Prison Service	2	100%
Private Health	1	0%
VCSE	75	23%

Engagement with staff

Organisations were asked to launch Check-In staff on 4th February 2021, Time to Talk day.

On this day there were:



69 unique clicks through to [Zero Suicide Alliance](#) suicide awareness training and a further **148 uses** of the other help and support resources

To date there have now been:



A total of **474 unique clicks** through to the training and **370 uses** of the help and support resources

Across February 2021 and March 2021 visits to [staffcheck-in.co.uk](#) **peaked on a Monday. On average 25% of the weeks visits took place on this day**, however this trend can no-longer be seen in April but will be monitored going forward as understanding when people are accessing the website will help when looking at when organisations should target their communications.



72% of all visits to [staffcheck-in.co.uk](#) take place on a laptop or desktop



69% of the visits come direct (meaning users are directly typing in the website address).

This could mean, that for the majority, visiting the website is a conscious decision rather than a quick look on a mobile device. When visitors come through to the website from an organisations intranet, on average, they spend 5mins on [staffcheck-in.co.uk](#) compared to 30 seconds when linking through from a social media post.

CAMPAIGN EFFECTIVENESS

Campaign launch

Through the survey responses it can be seen there were three ways in which an organisation successfully launched Check-In. Organisations focused on either a digital launch, a face-to-face staff engagement launch or created a programme of different activity.

For those organisations who focused on a digital launch they **promoted staffcheck-in.co.uk**:



On their intranet



Across social media



In newsletters and emails

Organisations who opted for a **face-to-face launch** created activity such as:



Check-In and chat sessions



All **virtual meetings** introduced with a **five minute conversation** around mental health



Staff meeting for a **virtual coffee** or **'Catch up with a Cuppa'** where the session was focused on the Check-In campaign



The majority of organisations who launched Check-In adopted a full programme of activity including activity such as:

- Leadership teams launching through **virtual staff briefings** and **sharing information over email and across social media.**
- **Chief officers speaking about the campaign** prior to Time to Talk day and following this up with an email, directing staff to staffcheck-in.co.uk.
- **Using backgrounds to virtual meetings**, adding articles to intranets, hosting a series of talks showing the impact of small acts.
- **Giving an overview of Check-In to all staff.** Encouraging staff to check in on each other and asking managers to talk to staff about their wellbeing and getting them to let their staff know what they appreciate most about them.
- **Emailing materials, links and toolkit information to all staff (including Trustees and Directors).** Setting up a new check in scheme encouraging every member of staff to take time to contact at least one other member of the team for a chat, at least once a week, with instructions to contact a different person every time.

See appendix one and two for all the survey responses highlighting how the launch took place across different organisations.

Website analytics show us that of the **174 organisations signed up** **52 have downloaded assets to launch Check-In**, this leaves **70% of organisations signed up but not yet using the assets**, this doesn't however mean that they haven't launched Check-In.

Focusing on the survey data, **17 organisations told us they had signed up but not yet launched**. The main reason for this was that they felt they didn't have enough time and resource or that the timing wasn't right to launch. Some organisations had signed up post the 4th February 2021 launch date and were still in the planning phase.

Inspiring action

Through the evaluation responses we were able to understand how effective the campaign has been in inspiring action. Due to the Check-In campaign many new initiatives have been adopted such as:



- **Launching a new staff e-newsletter called Wellbeing Wednesday** in which the first edition included a link to the suicide prevention training and a case study from the team who run wellbeing sessions.
- **Encouraging one to one discussions** to take place where needed.
- **Rolling out the suicide prevention training** to the whole workforce.
- **A staff virtual social with quizzes** and displays of lock-down crafts with a focus on improving and talking openly about wellbeing.
- **Setting up a new check in scheme** which encourages every member of the team to take time to contact at least one other member of the team for a chat, at least once a week. Everyone was asked to contact a different person every time.

For more examples of other areas and organisation activity please see the appendices.

Embedding Check-In

Organisations have found four ways to embed Check-In.

- 1. They are regularly promoting the campaign.**
- 2. They are embedding Check-In in their company's strategy.**
- 3. They are embedding Check-In in their team engagement processes such as team meetings and one to ones.**
- 4. Encouraging regular training.**



Case Study: Healthwatch Kirklees, launching Check-In with face to face action

Each year, on Time to Talk day, Healthwatch Kirklees reminds their staff that it's important to talk. On 4th February 2021 they visited care homes with their gift bags which included information on the Check-In campaign.



Case Study: NHS Kirklees Clinical Commissioning Group (CCG), embedding Check-In

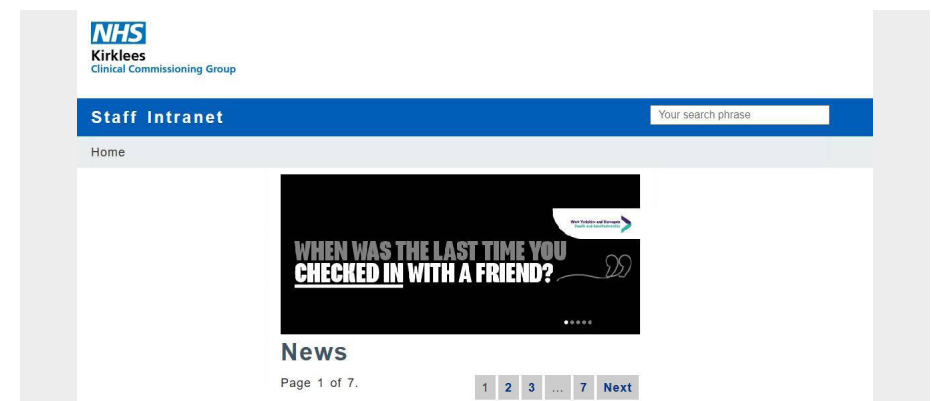
The NHS Kirklees CCG has worked hard to embed the Check-In campaign. Their launch and ongoing commitment to promote a wellbeing culture has utilised the Check-In toolkit as the launch pad to activate their own knowledge of how to talk to and engage their own staff and create a campaign which works for them. Since campaign launch NHS Kirklees CCG has:

- Utilised its weekly staff briefings to talk about Check-In (average attendance of 60% of the workforce).
- Ensured Check-In has been communicated through their Chief Officer as a key campaign and therefore allowing all staff the opportunity to engage.
- Worked with their Mental Health First aiders to develop a 12 month plan to embed Check-In.
- Built meaningful and human connections to suicide by supporting their own staff to tell their stories of how they have been impacted by suicide. These stories were told at the weekly staff briefing and the impact was immediate with resources shared and everyone who listened to the stories showing support; not only for those who spoke but everyone they work with. By creating a shared experience, NHS Kirklees CCG has created a bonding exercise that will unite everyone in working together on the Check-In campaign.
- Anecdotally, across NHS Kirklees CCG, there is now much more open conversation around mental wellbeing and suicide.

- Individuals in the organisation are taking it upon themselves to reach out and support others, an example of this is a person who is now holding a regular (virtual) coffee break, a time for everyone to Check-In.
- Following launch, through face to face initiatives, campaign assets have been rolled out and a small hub of assets created to allow staff to download email footers and video call backgrounds.
- Moving forward the weekly briefing will support mindfulness sessions, face to face suicide awareness training and more virtual coffee mornings.

The activity taking place at NHS Kirklees CCG highlights an approach which creates the best environment for allowing and generating conversations about suicide and mental health:

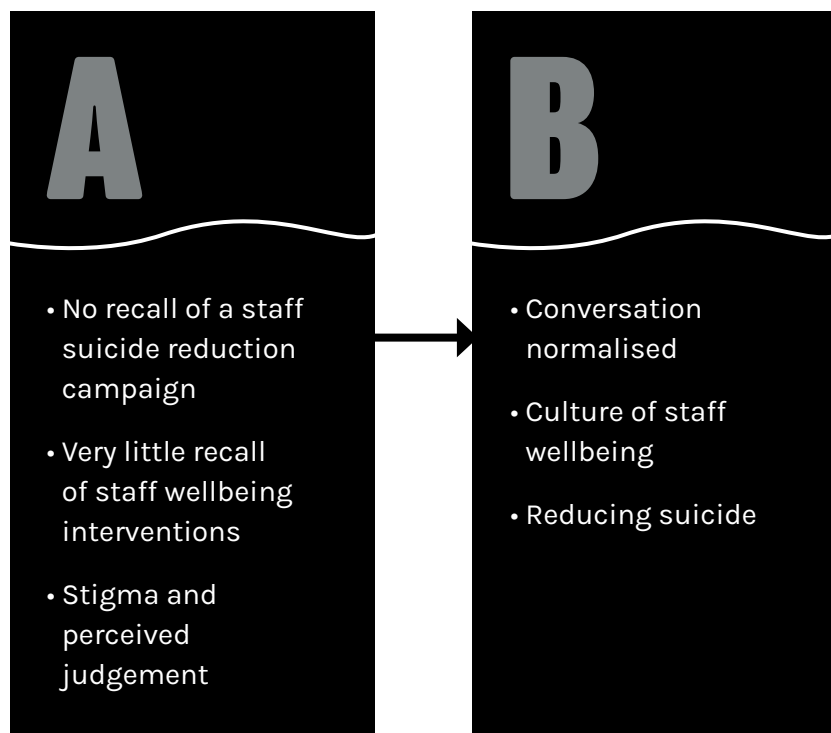
1. The leaders of an organisation are giving permission to all staff to get involved and are acknowledging that it's ok not to be ok.
2. Colleagues and wellbeing champions taking on the campaign to roll out as their own.



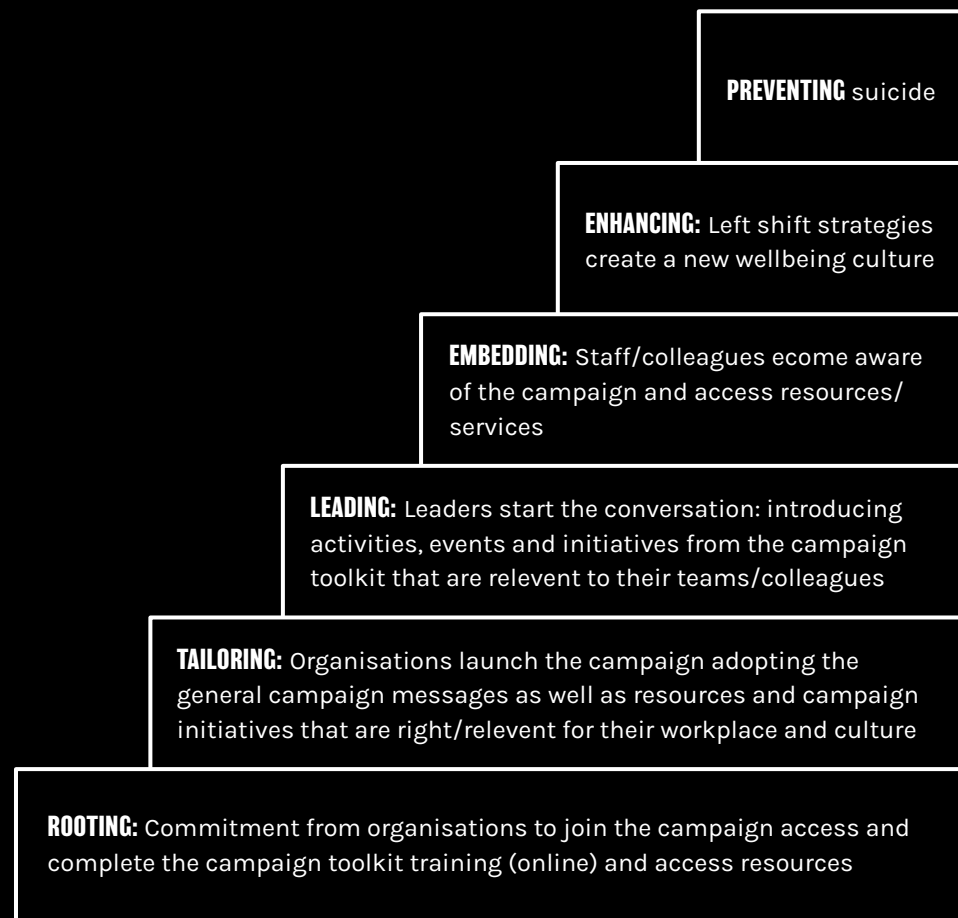
CAMPAIGN IMPACT

The campaign journey

Insight recommended that organisations would need go on a long-term journey with Check-In, rolling out the campaign at their pace. It was agreed that an effective campaign, of this kind, would be one that is present all year round. The journey was set out as movement from point A to point B.



For organisations and their staff to move along the journey the campaign followed a framework with organisations utilising the toolkit to move through the steps of **Rooting, Tailoring, Leading, Embedding, Enhancing and finally Preventing**.



Through the evaluation responses we are able to ascertain that the majority of organisations consider themselves to be at the Rooting and Tailoring stage. They have signed up to the campaign, accessed the toolkit and are beginning to tailor messages and initiatives that meet the needs of their own organisation.

After three months since campaign launch this is the stage we would expect organisations to be at.

The Organisations who considered themselves to be at the enhancing stage said they were **“running fortnightly resilience sessions and wellbeing 121 with all staff”** and that **“any member of the team can access a wellbeing action plan. We have invested in increased wellbeing services”**.

Case Study: Jim Barwick, Chief Executive of Leeds GP Confederation, Check-In supporting others to tell their stories

Across the Partnership colleagues have been sharing their own personal experiences of suicide. Supporting staff, especially those in leadership roles, to tell their stories is helping to normalise the conversation around suicide, helping others to open up and promoting the message that everyone across the Partnership should be checking in on themselves and their colleagues.

Jim Barwick, Chief Executive of Leeds GP Confederation, lost his brother Alistair, to suicide. Jim has shared his experience in a bid to encourage colleagues to look out for their own, and each other's, mental wellbeing.

“I lost my 44-year-old brother Alistair in 2007. I remember that day as if it was yesterday...”

I vividly remember my dad calling me. I can picture it in my mind. My phone ringing, looking at my phone, seeing it was ‘dad’, answering it. I was on the platform in Leeds - I had just got off the train from London. He told me. It was as if someone was trying to push me down onto the floor.

Alistair decided to end his life on his 44th birthday; in one of the letters he left behind, he described how debilitating his depression was. Like ‘walking a tightrope over a deep gorge, just managing to get to the end, only then having to turn back and do it all over again’.

He just said he couldn’t do it again.

I didn’t think of him as being selfish for feeling that way; I just felt sympathy. It made me think about if there was anything I could have done - to protect him.

That questioning of myself was torture for me. I happened to be in London that day to give a talk, I chose to return home and I regret not seeing him that day - I could have saved his life. I still carry the tube ticket from that day with me, a reminder to do things that are important - to see people; speak to them.

Whenever you talk to anyone about suicide, it’s generally a really difficult thing to talk about but the important thing is that we do talk about it.

You hear lots of stories about people who take their own life and often, in response, people say: “But they had everything going for them” but I think, well no, perhaps that’s not what they thought. The truth is you just don’t know sometimes. That’s why it’s important to remain open and available to talk to one another.



Not just relatives but also your colleagues; that person in your team, or in the tea room, who just doesn't seem themselves. In any group you interact with there might be someone who needs to open up and speak to someone they know. They may seem absolutely fine on the surface but deep down they might not be. You don't have to go around questioning everyone, but you can be more aware. Knowing that a person can sometimes become so low that they may even consider not being here at all might change your behaviour with that person.

The pandemic and its enforced isolation has made it harder for us all - to keep conversations going and to nurture our own personal mental health. The situation has meant many are struggling with jobs, family, security - it's likely to be affecting how many of us are coping with our mental wellbeing and it's making it harder for us to reach out to one another.

We need to have more conversations about our mental health and Suicide Prevention Week; the Partnership's Check-In campaign is a great opportunity, a reminder to us all to do that. I'm not suggesting that everyone's circumstances are as extreme as the one my family experienced but I do want to highlight the importance of checking in with ourselves, our colleagues or friends and family. It's a timely reminder to ask people how they are and then make sure we really listen to what they say in return.

We can't meet up as we might normally do, but we can still check in and, when we do, we should talk about how we're feeling. These conversations have perhaps never been as important as they are now, as we all navigate uncertainty and change during these unprecedented times.



If this article has struck a chord with you and you are someone who has been feeling distressed or you are someone who has noticed someone else who may need some help, please reach out to ask for, or to offer, that help.

Whatever you do, please don't remain silent.

Jim



Thank you to Jim for allowing us to share his story.

Visit **staffcheck-in.co.uk** for help and support, there are links to many different services able to support you with your own mental wellbeing or if you're looking to support colleague, friend or family member.

FUTURE RECOMMENDATIONS

Key learnings

The organisations who have launched Check-In and began to make the greatest impact and therefore improving staff mental health have focused on two key elements:

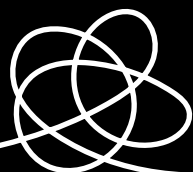


Ensuring Check-In has been adopted and communicated by their leadership team.



Allowing wellbeing champions, team members and those affected by suicide to adopt the Check-In campaign as their own and create their own initiatives.

The campaign toolkit has supported organisations in communicating the Check-In message however the organisations making the most impact have used the assets as a springboard to think about their wellbeing strategy and team engagement processes (such as team meetings and one to ones) they are embedding the core messages and objectives of Check-In: to normalise the conversation around suicide and mental health so it can be discussed in the workplace without stigma or judgement.



Campaign improvement and recommendations

The following recommendations have been pulled together to help further embed the Check-In campaign across West Yorkshire and Harrogate, to support organisations in making greater impact and to ensure the Check-In campaign objectives are achieved.

Campaign implementation support:

Not all organisations have felt they have had the time to launch Check-In and some have felt unsure on how to embed the campaign further, more support is needed for these organisations in how to roll out the campaign within their time and resource restrictions.



Recommendation: Create a standardised, how to guide, utilising content from the evaluation, that organisations can follow to launch the Check-In campaign.

Improve organisation sign-ups:

Post campaign sign up some organisations and sectors has failed to engage with the campaign, they haven't accessed the campaign toolkit



Recommendation: Use the evaluation report to highlight the success Check-In is having in the organisations that have signed up. Create targeted communications to those who have signed up but haven't downloaded any assets or launched and offer help and support to roll out Check-In.



Recommendation: Target future communications at the marketing and communications team, decision makers and wellbeing leads.

Improve campaign engagement:

There are some organisations across the West Yorkshire and Harrogate Health and Care Partnership who have yet to engage fully with the campaign at all. These include social care services, GP's and primary care networks, and primary and secondary education settings.



Recommendation: Target these organisations direct, focus on gathering insight from those sectors and highlight the mental health concerns that fall within that sector. Highlight the impact Check-In is having in other organisations and show the breadth of organisations signed up.



Recommendation: Ensure the right person at the organisation has signed up, it is proven that when the marketing and communications team, decision makers or the wellbeing lead have signed up to the campaign there is more roll out and engagement with Check-In.

Targeted campaign messages:

There are particular people within organisations who will need more support than others. These include men on low paid/low skilled jobs and staff who find/witness/support people who have died by suicide.



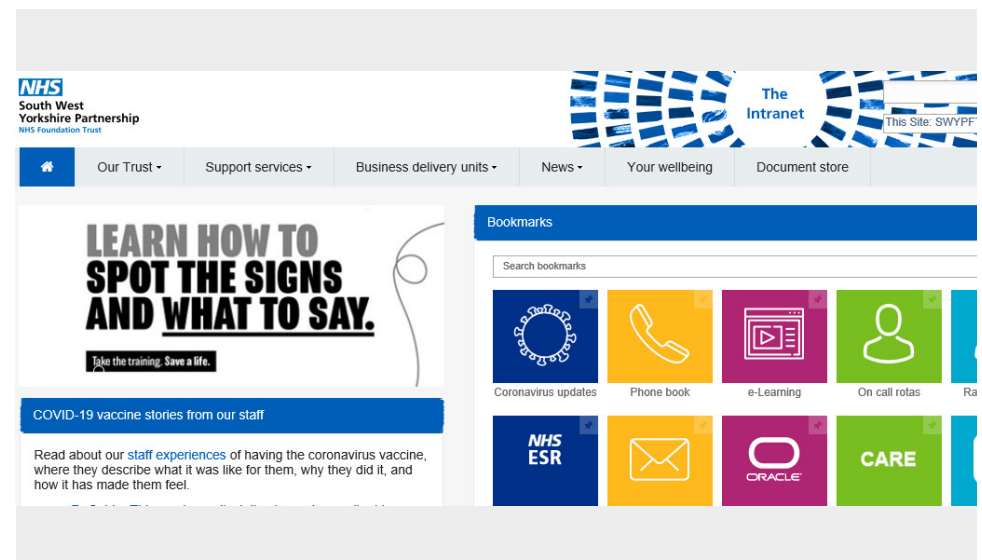
Recommendation: Target these organisations direct, focus on gathering insight from those sectors and highlight the mental health concerns that fall within that sector. Highlight the impact Check-In is having in other organisations and show the breadth of organisations signed up.

What's next...

The Quarter One Evaluation has focused on how organisations have launched and began to embed Check-In. Next steps are to gain an understanding of the impact Check-In is having on people's lives.

This report will feature on **staffcheck-in.co.uk** under a new evaluation section. Within this section there will be an explanation video helping organisations to begin measuring the difference that Check-In is having in their organisation and we will ask for case studies and feedback.

Quarter Two Evaluation will take place in June and July 2021 with regular stats and data updates continuing to be sent to the Check-In steering group.



APPENDICES

Appendix one

Survey responses: How did organisations launch Check-In on Time to Talk day (4th February 2021).

Full programme of activity

- Activity included a dedicated talk at the staff briefing (NHS Wakefield CCG) prior to the launch, content in the CCG staff update, primary care update and intranet. Content was uploaded to the CCG website and promoted across social media channels. There has been ongoing promotion, including encouraging staff to complete the 20 minute Zero Suicide Alliance training.
- Director of HR and organisational development launched Check-In via virtual staff briefing that day; shared via email and across all social media platforms.
- Chief officer spoke about the campaign at the staff briefing on 2nd February and told staff information would be sent out on 4th February. On the 4th February Chief officer sent an email to all staff about the campaign and why it was important to take part. Staff were signposted to the website and encouraged people to check-in with ideas from the toolkit. Provided a similar story in the staff bulletin during February using the toolkit copy. Dedicating a full staff briefing every month to talking about suicide and topics for the next 12 months have been set. The first session is on 9th March. There is good attendance at the briefings, around 140-150 people each time (out of 200 staff).
- Ran a whole series of events for staff and volunteers. Promoted being part of the campaign. Shared links to the suicide prevention courses with the family support team.
- Used logos as backgrounds to meetings, put sign posting and articles on the intranet and did a series of small talks - showing the impact from small acts.
- Gave an overview of the campaign to all staff. Encouraged staff to check in on each other and asked managers to talk to staff about their wellbeing or for them to let them know what they appreciate about most about their staff.

- Email, materials, links and toolkit information was sent to all members of the team as well as trustees and directors. Set up a new check in scheme encouraging every member of the team to take time to contact at least one other member of the team for a chat, at least once a week, with instructions to contact a different person every time.
- Chief executive promoted this through the organisation's communication brief as a priority news item. The article promoted "Time to Talk Day" and launched the Check-In campaign, with an explanation of what it is, including some stats. It also reminded staff that we signed the Time to Change Employer Pledge, the previous year on 6th February 2020, which demonstrates our commitment to focus on supporting mental health inside and outside of the workplace.

The article referred to suicide being the biggest killer of people under the age of 35 and the biggest killer of men under the age of 50 and our chief executive urged staff to take a minute to read Jim's story, who is the CEO of the GP confederation, and a person they work closely with. Jim shares his first-hand experience so openly, and his courage may just give us all the strength to talk to each other more about this difficult topic.

Staff were then signposted to the staff Check-In website for more information and to access tools and resources to support with their own mental wellbeing or to enable them to support a colleague, and also asked to take the Zero Suicide Alliance 20-minute training.

Staff were reminded of the range of HWB support staff they can access, which included MHFA, listening support line and Employee Assistance Programme.

- Launched on 2nd February with a staff intranet article about the new campaign and encouraged staff to start from the 4th February with wellbeing Check-Ins - either team or one to ones. Shared on the staff email bulletin, Chief executive staff zoom call, all staff Covid response emails, staff Facebook group and external social media pages which staff follow. Update the messaging to include the different key messages from the Educate phase e.g. regular Check-Ins, zero suicide alliance training.
- Recommended the campaign to a nurse from the south west who was looking for examples of staff suicide prevention campaigns on Twitter - they were encouraged to sign up for updates and info.

- This week on Wed 17th March launching a new staff e-newsletter called Wellbeing Wednesday. Included in this first edition a link to the suicide prevention training and a case study from one of the teams who run monthly wellbeing sessions with their staff as an example of good practice.
- Supported the campaign internally with an intranet banner, campaign intranet page with all the resources, in the Trust communication channels (Trust-wide newsletter, CEX blog, Team Brief cascade). Promoted the campaign with an internet web story and social media messages. Asked all of managers to dedicate ten minutes of their team meetings to discuss the campaign and the support available. Encouraged one to one discussion to take place where needed.

Digital focus

- Social media, public facing and internal facing bulletins.
- Email was distributed to all team members explaining the campaign, with the relevant launch pack assets attached, and with links to various websites (including the Check-In website, zero suicide alliance training, and NSPA, amongst others).
- Published comms using the branding on the intranet with an outline of the campaign and a link to resources. Encouraged line managers to ensure their staff knew of the details - particularly those managers in manual/dispersed workforce areas/care homes/refuse collection etc who do not have easy access to IT. Sent a newsletter to all the wellbeing champions asking them to ensure they circulate/use the information.
- Shared information on Twitter and re-tweeted other organisations posts.
- Shared the information with Trustees.
- Intranet news items.
- Promoted Check-In on all social media channels.
- Shared information with colleagues and encouraged colleagues to take part in the suggested activities.
- Launched it internally with communications via the usual channels and asked everyone to reach out and check in.

- Used a soft launch approach by promoting via the intranet and wellbeing champions.
- Promoted internally via all communications channels and externally on social media and the website.
- Shared social media assets, uploaded an article to the staff intranet, included a piece in the weekly staff update and discussed it at the monthly all staff briefing.

Staff meetings / Engagement

- Rolled out the suicide prevention training to the whole workforce. Held all meetings via video link, introducing a five minute chat to incorporate a discussion around mental health. HR did drop in checks to all managers to discuss their needs, off support etc.
- Held a Staff Virtual Social with quizzes and displays of lock-down crafts, with a focus on improving and talking openly about wellbeing. Staff were encouraged to buddy up and make contact with another staff member during that day. 11 staff members attended, and a recurring event was proposed and adopted a result.
- Hosted a staff meeting for a virtual coffee.
- Dedicated one of the regular all-staff 'Catch up with a Cuppa' sessions and discussed the campaign led by the mental health first aiders.
- Visits to care homes in Kirklees to promote the campaign.
- Talked about it at the senior leaders meeting which included the executive giving them details of the website and available training.
- All staff were encouraged to check in on each other and only focus on their wellbeing, not work. Managers were encouraged to check in on each other and contact all staff. If staff were not comfortable in doing this, then they were to use the opportunity of letting staff know what it is they appreciate about them.
- One minute un-silence across the company.
- Organised a check in and chat session for the team based on speed dating, have since decided to make this a regular activity. Staff were invited so attended voluntarily.

Appendix two

Survey responses: How did organisations launch Check-In after Time to Talk day.

Full programme of activity

- Social media, staff presentations, signpost to training.

Digital focus

- Promoted the event over our intranet.
- Put up some Facebook posts/status and put it on the Bulletin. Looking to do more in the future.

Staff meetings / Engagement

- Dedicated a staff briefing to check-in. Two members of staff with lived experience shared their stories as part of the session.
 - Shared with staff and asked them to check in with others.
 - One minute un-silence monthly occurrence.
 - Sign posted people to the mental health champions and professional groups.
-

Appendix three

Survey results: Why have some organisations not yet launched Check-In

Not enough time or resource / It's the wrong time

- The centre is closed due to the Covid-19 restrictions and not all the members/ service users have access to or the know how to pick things up on social media. The Board has been busy with a major fundraising application.
- Have not had the chance to discuss at a Board meeting.
- Have been overwhelmed with vaccination support requirements.
- Apologies but we haven't managed to launch this yet as we are struggling with staff capacity due to some of the team being furloughed and other

members of staff being off sick. This is resulting in the limited staff that are present having to carry the load of the service, leaving insufficient time to carry out additional tasks such as this.

- Mostly working from home and it proves difficult to launch.
- Time!
- Don't have the capacity nor is it central to our remit to actively help implement campaigns, there are so many too! However, we do help promote where we can via social media. It is important to us that we keep a close eye on all of these campaigns, be aware of the prevailing pressures and understand how this helps shape our work.
- Launching it with our Wellbeing Champions and have not had a chance to meet yet.
- The surgery is involved in covid vaccinations off site so not participated at this time.
- Not had chance to do anything with it, too busy.

Still at the planning phase

- Talked about time to talk on the 4th February but felt we needed a more sensitive approach to Check-In. It didn't feel right to have a two minute silence or put things on email footers. We plan to host the suicide awareness training link and add this to the staff wellbeing training package
- Shared on social media, but have shared as something that you are launching not us.
- Haven't launched it, as such, but have used the material to raise awareness amongst staff of how to discuss suspicions of suicide. Used the Teams background and am using the email signature. Watched the video and shared with the service how useful this was in approaching such conversations both inside and outside of work.
- I have just taken on this as part of a larger role as Crisis Lead. I do check in on staff every week and ask the question "are you ok?" are you really ok? Some colleagues had a push on this by delivering a time to talk about the "power of the small" this was filmed between two workers having a conversation "checking in" asking "are you ok" provoking different answers and questioning to enable other staff to ask but confident in supporting if needed.

Appendix four

Survey responses: What extra support is needed?

- More little snippet support throughout the year would be good.
 - A recorded webinar to access for staff this would be helpful.
 - Can you create any time?
 - I was put off having to download. Surgery time is very demanding at the moment.
 - None thank you. The resources were really helpful. The links to the suicide awareness training was user friendly and engaging.
 - None - the materials have been very useful and comprehensive.
 - None, the resources are very thorough and accessible.
 - 23 comments saying “no extra support needed”.
-

Appendix five

Survey responses: How will Check-In become embedded?

Regular promotion

- Committed to a staff briefing every month (scheduled for the next 12 months) to talk about suicide; colleagues with lived experience, training, support groups. In between this corporate commitment, each team is encouraged to utilise their toolkit how they want to.
- Re-Promoted Check-In as part of March’s ‘Sleep Campaign’ using the resources in the toolkit. Each month will ensure Check-In is integrated into all wellbeing comms.
- Through mental health champions and events to promote more understanding.
- Plan being created to continually promote Check-In alongside the mental health messaging that is done generally. Paid for an online live event aimed especially at men, run by two ex professional sportsmen to discuss mental health and suicide.

- Another round of emails and activities is planned for ‘Stress Awareness Month’ in April.
- Continue to raise awareness around the different issues around mental health.
- Additional information given to staff on the appropriate day e.g. self-harm, sleep etc
- Rotating posters and encouraging staff to use the email signatures.
- Continued promotion - screensavers, intranet, encouraging all staff to take the training.

Embedded in a company’s strategy

- Will be incorporated within our health and wellbeing strategy.
- Ensured the campaign is included in our forward plan of activity for the foreseeable future and will ensure it has a high profile throughout our Trust communications.
- Discuss at a forthcoming trustee meeting.
- Dedicated wellbeing teams’ channel where information is shared each day and people participate in chat discussions. Our performance process has a wellbeing element for line managers to discuss with staff and mental health is a regular feature of weekly all-staff meetings.
- At present the comms plan for staff health and wellbeing is being done on a monthly basis. New Head of Wellbeing joins the Trust this week and a longer term HWB action plan will follow once she is in role properly. The suicide prevention strand will form part of that more strategic work.
- Mental health and wellbeing is at the forefront in our Organisation. We have strong leadership from our SMT who have confidently ensured that this has remained a priority previous too, throughout lockdown and beyond. I am confident that we will embed this in our existing strategy and may come back to the team for support if required.
- We have an action plan for how we will promote each phase of the campaign and what local initiatives we will promote as part of the campaign, i.e. as part of the raise awareness phase we will be promoting the work of our mental health first aiders and promoting our new post incident care process.

Embedded in employee meetings and team meetings

- In induction conversations, regular updates to all colleagues as standard briefing agenda.
- Focusing more around wellbeing than suicide specifically. We run fortnightly resilience sessions and run wellbeing one to one with all staff. Any member of the team can access a wellbeing action plan. We have invested in increased wellbeing services.
- Check-In is part of supervision, team meetings and one to one support is offered from line manager/and or Mental Health First Aider.
- Regular sessions.

Regular training

- [There] is already a culture of open conversation already [at our organisation] and the Campaign helps provide a framework to encourage this to happen more. All staff have been offered to online suicide prevention courses signposted by the project and the information on having difficult conversations. Our outdoor team has received further internal training on Mental health awareness and developing resilience specifically tailored to the people we work with and for the wellbeing of the staff involved.
- Part of a 'my wellbeing journey' training package.
- The next step will be provision of additional training.

A large, abstract line drawing of a hand, rendered in a light gray color, occupies the left side of the page. The lines are fluid and organic, suggesting a sketch or a calligraphic style. The hand is positioned with the fingers slightly curled, as if holding or gesturing towards the text on the right.

THANK YOU FOR TAKING THE TIME TO READ THIS DOCUMENT.

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