



Llywodraeth Cymru
Welsh Government

Understanding

The Suicide Prevention and Self-harm Strategy for Wales

Outcomes Framework

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Part 1: Background

The **Outcomes Framework** is a structured approach used to measure and demonstrate the impact of the Suicide Prevention and Self-harm Strategy for Wales by identifying and tracking specific, measurable outcomes. It will enable us to understand what works, what doesn't, and what we need to do to achieve our desired results.

The central intention of the Outcomes Framework is to help deliver the objectives of the Strategy and to monitor and assess its progress.

Introduction

In April 2025 Welsh Government published [Understanding – the Suicide Prevention and Self-harm Strategy for Wales](#), and the accompanying [delivery plan for 2025-2028](#). The Strategy aims to reduce the number and rates of suicide deaths that have endured over recent years. It also aims to establish a pathway to support people who self-harm and improve support for those bereaved by suicide.

The strategy sets out our overarching vision for suicide prevention and self-harm in Wales, alongside sixteen core principles, and six strategic objectives.

The Strategy's objectives

The Strategy's six objectives are as follows.

Objective 1: Listening & Learning

We will have streamlined processes for the collection, analysis, and interpretation of data, evidence and lived experience testimony; and robust infrastructure to ensure the intelligence gathered is used to develop policies, support, and services.

Objective 2: Preventing

We will have a co-ordinated cross-Government and multi-agency response to:

- tackle the risk factors linked with self-harm and suicide
- restrict access or exposure to harmful information online and in the media
- limit access to methods which can be used to cause harm
- identify and manage locations of concern.

Objective 3: Empowering

Everyone will be empowered with the knowledge and awareness to recognise those in need, offer kind and compassionate support; and help them access services if needed.

Objective 4: Supporting

People who have suicidal ideation or self-harm, or those supporting them, will have access to timely and person-centred support, intervention and treatment from all relevant services including primary care, mental health, urgent and emergency care, and third sector services.

Objective 5: Equipping

Services that support people with challenges which increase their risk of suicide and self-harm are equipped to identify people at risk and work with partner agencies to offer holistic, person-centred and compassionate support.

Objective 6: Responding

We will have timely responses to suicides and compassionate and person-centred support is available to all those affected.

More detailed explanations of the objectives, alongside definitions of key terms, can be found in the Strategy document.

Part 2: Developing the Outcomes Framework

The purpose of a government strategy is to provide a broad vision and framework for achieving long-term goals and addressing complex challenges. Outcomes are the end result of the implementation of a strategy and ultimately, the things that matter most to people. Outcomes measure the whole system's success as a result of strategy implementation.

However, it will take several years to significantly achieve the strategy's long-term outcomes. As we're in the first year of strategy implementation, this Outcomes Framework focuses on developing indicators to measure the short-term outputs. Outputs are the direct deliverables which result from the Strategy's activities. As can be seen from our [Theory of Change](#) (ToC), the short-term outputs are connected to the long-term outcomes and the overall impact of the strategy. We envisage the short-term outputs are things that can be achieved within the period of the first Delivery Plan (the next three years).

The ToC, upon which this Outcomes Framework is based, was developed following extensive engagement with stakeholders (further detail on stakeholder engagement is covered in the ToC report). The ToC model aims to depict how and why the Strategy is intended to bring about its long-term goal by indicating the activities that may contribute to various outcomes through change pathways. It demonstrates how changes could unfold and clarifies the early and mid-term changes that need to happen in order for a longer-term outcome to be reached.

When developing this Outcomes Framework, we also reviewed outcomes frameworks developed to monitor suicide prevention strategies in other parts of the UK and recently developed outcomes frameworks for other Welsh Government policies and strategies.

Over the course of the ten-year strategy, we plan to keep developing the Framework with input from key stakeholders and in accordance with further information, such as emerging data and evidence, and in conjunction with societal developments. As part of this, we will review relevant existing data sources, for example, Welsh Ambulance Service Trust (WAST) data and the Welsh Emergency Care Data Set (WECDS), to collate a list of potential outcomes and measures.

Part 3: Reporting

The proposed annual reporting cycle for the Strategy is as follows:

- An annual report will be produced by the Suicide Prevention and Self-harm Policy Team within Welsh Government evidencing progress in implementing the actions in the Delivery Plan as well as evidencing changes to outcomes (initially focusing on the short-term outcomes only).
- The report will be submitted to, and considered by, the Suicide and Self Harm Strategy Board, and then the Joint Ministerial Mental Health and Wellbeing and Suicide and Self-harm Strategy Assurance Board.
- The annual report will be published online by Welsh Government.

In addition, the Suicide and Self Harm Strategy Board, and the Joint Ministerial Mental Health and Wellbeing and Suicide and Self-harm Strategy Assurance Board, will receive regular updates from the Policy Team and key stakeholders on strategic delivery, including any identified risks and issues.

Part 4: Next steps

The Outcomes Framework, in addition to the ToC, will be used to develop a Monitoring and Evaluation Framework which will guide the evaluation process. Our understanding of the linkages and interdependencies between the Strategy's objectives and key drivers enables us to determine which areas to review, which questions to ask and identify the sources that will provide answers to these questions.

This in turn will inform us of the extent to which the strategy is making progress towards the overall vision.

Part 5: The Outcomes Framework

Objective 1: Listening and Learning

We will have streamlined processes for the collection, analysis, and interpretation of data, evidence and lived experience testimony; and robust infrastructure to ensure the intelligence gathered is used to develop policies, support, and services.

Long-Term Outcomes	Short-Term Outcome	Example Indicators and Measures
<p>Systematic structures and processes for collection, analysis and dissemination of data and research relating to suicide and self-harm within Wales are developed.</p> <p>A robust evidence base for suicide and self-harm is developed in Wales through collaboration with organisations and professionals at a national, regional and local level.</p> <p>High-quality suicide and self-harm data is routinely collected in Wales to inform policy and service provisions.</p>	The National Centre for Suicide Prevention and Self-harm Research in Wales will be a central repository for suicide and self-harm data and evidence in Wales.	Delivery against these actions will be published in an annual progress report by the National Centre.
	A research prioritisation exercise will be completed, and research will be undertaken to fill evidence gaps.	
	Key stakeholders, including those with lived experience, will be involved in research design to ensure the aims are meeting community need.	
	Data sharing protocols/agreements for the collection of national, regional and local suicide and self-harm data and evidence are developed and implemented.	
	The National Centre will be appointed as an advisory body for Welsh Government.	This will be evidenced via a signed appointment letter which sets out the terms of the appointment.

Long-Term Outcomes	Short-Term Outcome	Example Indicators and Measures
	<p>Systems and processes are developed to enable consistent recording of suicide and self-harm occurrences, and address data gaps. This will include a review of suicide and self-harm coding in key settings, and the development of a central data matrix.</p>	<p>Confirmation of this will be published in an annual progress report by the National Centre.</p> <p>In key settings where new suicide and self-harm coding has been implemented, we will collaborate with key stakeholders to scope the possibility of conducting project-level evaluations to measure success.</p> <p>We will collect evidence of work undertaken to improve data, such as from the Real Time Suspected Suicide Surveillance (RTSSS) system and the Office for National Statistics (ONS), and this will be reported in Welsh Government’s annual report.</p> <p>We will also collect evidence of work undertaken to improve data collection in population-based surveys, for example, the School Health Research Network (SHRN), and this will be reported in Welsh Government’s annual report.</p>
	<p>Clear data metrics will be identified to monitor progress and impact of the strategy.</p>	<p>This will be evidenced through the publication of a Monitoring and Evaluation Framework with clear data metrics.</p>

Objective 2: Preventing

We will have a co-ordinated cross-Government and multi-agency response to:

- tackle the risk factors linked with self-harm and suicide
- restrict access or exposure to harmful information online and in the media
- limit access to methods which can be used to cause harm
- identify and manage locations of concern.

Long-Term Outcomes	Short-Term Outcome	Example Indicators and Measures
<p>Increased awareness of suicide and self-harm amongst Government Officials and relevant public bodies.</p> <p>Improved capability to effectively mitigate suicide and self-harm risk.</p> <p>The impact of policy/intervention development on suicide and self-harm is routinely considered by Government Officials and public sector services.</p> <p>We will see a reduction in access to methods of suicide.</p>	<p>Government Officials and public sector workers take up suicide and self-harm learning and training opportunities to further develop knowledge and understanding of self-harm and suicide.</p>	<p>We will measure and track the uptake of training products on the Suicide and Self-harm Prevention Cymru Training Hub and any future platforms which promote the training modules.</p> <p>We will undertake a sample survey with public sector staff, and work to include questions in an existing annual survey of Welsh Government officials, to gain an understanding of staff's awareness of suicide and self-harm; and their capability and capacity to integrate suicide prevention and response to self-harm into their day-to-day activities. This will be a repeated measures survey so we can monitor change over time.</p>

Long-Term Outcomes	Short-Term Outcome	Example Indicators and Measures
There are reductions in harmful media content about suicide and self-harm.	Public sector services have staff responsible for suicide and self-harm prevention.	We will obtain information regarding public sector staffing from meetings with the Suicide and Self-harm Programme Team within the NHS Wales Executive.
	Established and operational structures and processes for identifying and mitigating suicide and self-harm risk have been developed and are being utilised by Welsh Government staff and public sector staff.	<p>Every three years we will use a random sampling method to review the health impact assessment process to ensure that suicide and self-harm is being considered in policy development.</p> <p>We will also assess how well policy commitments are being implemented; this will consider the content and implementation of policies (plus evidence of impact wherever possible).</p>
	The media consistently follow best practice guidance when reporting, discussing or portraying self-harm and suicide.	We will regularly monitor the media by undertaking qualitative and quantitative analysis of a sample of media outputs connected to self-harm and suicide and use this to direct further guidance and support based upon evidence and data.

Objective 3: Empowering

Everyone will be empowered with the knowledge and awareness to recognise those in need, offer kind and compassionate support; and help them access services if needed.

Long-Term Outcomes	Short-Term Outcome	Example Indicators and Measures
<p>People in Wales have a better understanding of suicide and self-harm.</p> <p>Discussing suicide and self-harm is normalised throughout society, with widely understood vocabulary.</p> <p>People in Wales have increased capacity and capability to respond to someone who discloses self-harm behaviours/ suicide ideation, including knowledge of where to signpost for support.</p>	<p>A communication and engagement plan for suicide and self-harm is developed and implemented in Wales to raise awareness of suicide and self-harm and how to offer support.</p>	<p>Delivery against the action to develop a communication and engagement plan will be published in an annual progress report by Welsh Government.</p>
	<p>There is enhanced promotion of resources and support already available.</p>	<p>We will explore the possibility of monitoring website traffic and social media engagement metrics to evaluate the reach and impact of the communication and engagement plan. We will analyse data such as page views, click-through rates, and social media interactions. We will measure and track the uptake of training and support products.</p>

Long-Term Outcomes	Short-Term Outcome	Example Indicators and Measures
	<p>Where gaps in training and resources are identified, universally accessible training and support products are developed to equip people with the knowledge and understanding to confidently offer support and signpost to services.</p>	<p>We will assess the public's knowledge and attitudes towards suicide and self-harm, their knowledge of current support options and their confidence and capability to respond to someone who is self-harming or experiencing suicidal ideation. To do this we will undertake a sample survey of the general population, at an individual, family and population level. A repeated measure survey will be run every three years to assess changes over time.</p> <p>We will also explore the opportunity to collect qualitative data through semi-structured interviews with members of the public, exploring the same themes as above.</p> <p>The development of new training and support products will be published on the Suicide and Self-harm Prevention Cymru Training Hub and reported in Welsh Government's annual progress report.</p>

Objective 4: Supporting

People who have suicidal ideation or self-harm, or those supporting them, will have access to timely and person-centred support, intervention and treatment from all relevant services including primary care, mental health, urgent and emergency care, and third sector services.

Long-Term Outcomes	Short-Term Outcome	Example Indicators and Measures
<p>More people who self-harm/have suicidal ideation receive timely and compassionate support.</p> <p>People who self-harm/have suicidal ideation can easily access a pathway of support at the point of need.</p> <p>More people who self-harm/have suicidal ideation receive a psychosocial assessment and are discharged with an effective safety plan.</p> <p>More people who self-harm/have suicidal ideation receive appropriate follow-up support, including referrals to other services when necessary.</p>	<p>An integrated health and social care quality statement for self-harm is developed based on the identified need and demand.</p> <p>A national pathway for self-harm support in Primary Care is developed based on the identified need and demand.</p>	<p>Delivery against the action to develop a quality statement and national pathway will be published in an annual progress report by Welsh Government.</p> <p>As part of the monitoring, we will work with stakeholders to scope the potential of conducting a series of qualitative and quantitative engagement processes to seek feedback from those accessing the pathway and the support specified through the quality statement.</p> <p>A working group of professionals involved in the design and delivery of the self-harm response, consisting of staff from the NHS Wales Executive, primary care, secondary mental health care, crisis support, and A&E, will be established to review the efficacy of the pathway and support received.</p>
	<p>Increased understanding of suicide and self-harm amongst relevant service staff.</p> <p>Increased capacity and capability within service settings to meet the needs of those who present with self-harm and/or are at risk of suicide.</p>	<p>Through a staff skills survey, we will routinely collate data on the knowledge, skills and awareness of professionals and agencies within this area and will use this to monitor change over time.</p>

Objective 5: Equipping

Services that support people with challenges which increase their risk of suicide and self-harm are equipped to identify people at risk and work with partner agencies to offer holistic, person-centred and compassionate support.

Long-Term Outcomes	Short-Term Outcome	Example Indicators and Measures
Increased capacity and capability amongst professionals who work with people at risk of suicide and self-harm to meet the needs of those at risk, including knowledge of which other agencies to work with/refer to ensure holistic support.	Service delivery plans are developed or updated to reflect the identified need.	<p>We will use a random sampling method to review service delivery plans.</p> <p>We will also collect this information through a survey of service staff who support people at-risk of suicide and self-harm, and feedback via the Suicide and Self-harm Programme within the NHS Wales Executive.</p>
More people who self-harm/ have suicidal ideation receive person-centred, compassionate and holistic support.	A training plan for suicide and self-harm in Wales aimed at addressing staff need is developed and promoted.	Confirmation of the development of a training plan will be published in an annual progress report published by Welsh Government.
Increased understanding of suicide and self-harm amongst professionals and agencies who work with people at risk of suicide and self-harm.	Resources to facilitate awareness, knowledge and understanding, along with the use of widely understood vocabulary, are developed and promoted.	Confirmation of the development of resources will be published in an annual progress report published by Welsh Government and resources will be published on the Suicide and Self-harm Prevention Cymru Training Hub.
	Staff are taking up the training offer and engaging with the resources.	Through a staff skills survey, we will routinely collate data on the knowledge, skills and awareness of professionals and agencies within this area and will use this to monitor change over time. We will monitor training participation levels via service type and track the usage of resources by monitoring the number of visits, downloads, and searches conducted within the hub.

Objective 6: Responding

We will have timely responses to suicides and compassionate and person-centred support is available to all those affected.

Long-Term Outcomes	Short-Term Outcome	Example Indicators and Measures
More people who are bereaved or affected by suicide access timely, compassionate and person-centred support.	Clear pathways and protocols in the event of a suicide or suspected suicide are implemented nationally.	Confirmation of the development of pathways and protocols will be published in Welsh Government's annual progress report. We will collect information regarding the efficacy of the protocols and pathways through feedback via the Suicide and Self-harm Programme within the NHS Wales Executive (which will include support providers).
	The National Advisory Liaison Service (NALS) is established as a formalised pathway of support for those bereaved or affected by suicide.	Information regarding the efficacy of the NALS pathway and support will be regularly reviewed by an externally commissioned progress evaluation. Through this we will also monitor any adaptations required and made to the service.
	Adaptions are made to the NALS when necessary to ensure it is meeting demand and need.	
	More people who are bereaved by suicide access specialist bereavement support.	The number of people bereaved by suicide accessing support through NALS will be assessed through the evaluation.
	More people who are bereaved or affected by suicide access the relevant resources.	We will utilise analytics from the Suicide and Self-harm Prevention Cymru Training Hub website, including, click through/conversion rates, reach, shares, engagement rate, and views.