

To: • Education Providers for Psychological Professions Training (WT&E commissioned plus apprenticeship providers)
• Members of Psychological Professions Workforce Stakeholder Group

NHS England
Wellington House
133-155 Waterloo Road
London
SE1 8UG

1 June 2023

cc. • Health and Care Professions Council (HCPC); Professional Standards Authority (PSA)

Dear Colleagues

Re: Managing risk and safety planning within mental health services

I am writing to draw your attention to the need to implement fully the [NICE Guideline on Self harm: assessment, management and preventing recurrence](#), and to ask for your help in doing so. We owe this to those bereaved by suicide who have campaigned for this action.

Professor Tim Kendall, National Clinical Director for Mental Health, NHS England wrote to the Chief Medical Officers of NHS Trusts in October 2022 drawing their attention to the new NICE guideline, which was published in September 2022. A copy of his letter is attached. It is important that the psychological professions, whatever sector they work in, take a uniform and up to date approach in this vitally important area. Of the approximately 17 people who take their own lives every day in the UK, five are in contact with mental health services and four of those five as assessed as low or no risk of suicide at their last contact¹. It is therefore vitally important that assessments of risk are not based on stratification into "low, medium or high risk", or the use of scales, but are based on a more comprehensive assessment and risk formulation.

The full implementation of the guidance should be addressed through changes in practice and training, and the elimination of tools which have very poor predictive value.

¹ The assessment of clinical risk in mental health services. National Confidential Inquiry into Suicide and Safety in Mental Health (NCISH). Manchester: The University of Manchester, 2018.

It has been shown that suicide risk assessment tools have a positive predictive value of less than 5%, which means they are wrong over 95% of the time².

I therefore ask you to do the following at your organisation:

1. Write to your members (if a membership organisation) and students (if an education provider) asking them to read and comply with the NICE Guideline, and reminding them of the following content specifically:

- Do not use risk assessment tools and scales to predict future suicide or repetition of self-harm.
- Do not use risk assessment tools and scales to determine who should and should not be offered treatment or who should be discharged.
- Do not use global risk stratification into low, medium or high risk to predict future suicide or repetition of self-harm.
- Do not use global risk stratification into low, medium or high risk to determine who should be offered treatment or who should be discharged.
- Focus the assessment (see [Section 1.7 on principles for assessment and care by healthcare professionals and social care practitioners](#)) on the person's needs and how to support their immediate and long-term psychological and physical safety.
- Mental health professionals should undertake a [risk formulation](#) as part of every psychosocial assessment.

2. Take immediate steps to update any guidance or advice you make available to members and students stating very clearly the above stipulations.

3. Ensure through active and documented investigation that all training courses accredited by or provided by your organisation clearly and explicitly teach the NICE stipulations, which should be included in the relevant curricula, supervised practice and examinations.

4. Alert your members/students to the content of the Chief Coroner's newsletter to all coroners from summer 2022 (attached). This puts coroners on notice that the use of

² Carter G, Milner A, McGill K, Pirkis J, Kapur N, Spittal M. Predicting suicidal behaviours using clinical instruments: systematic review and meta-analysis of positive predictive values for risk scales. *The British Journal of Psychiatry*, 2017; 210: 387-95.

suicide risk assessments which stratify risk and seek to predict suicide is unacceptable practice and may lead to the issuance of Prevention of Future Deaths reports.

Many services have begun work to support the culture and practice change required to move towards more person-centred approaches to safety planning for people with mental health needs.

As many have shared with us, when services focus on formally rating risk, they can often lose sight of the person's sense of safety and therefore miss an opportunity to focus on actions which can meet the person's needs, address their relational context and promote safety to the individual. Patient and family feedback emphasises the importance of: personalised approaches to safety planning (including needs, risks and context); the involvement of the person and their family and carers (where appropriate) and emphasis on sources of support. This is consistent with the position we set out in our Care Programme Approach Position Statement, which was first published in July 2021 and then updated in March 2022.

To support services to adhere to the NICE guidance and to enable a definitive change in clinical practice and culture, NHS England will work with NICE, DHSC and experts in suicide and self-harm prevention to further develop evidence-based best practice in safety planning and the management of needs and risks. This work will be co-produced with experts by experience, local clinical leaders and in line with evidenced based practice.

In the meantime, we are asking services, education providers and professional organisations to review the use of risk assessment tools and scales and develop highly personalised assessment and management of needs, risks, and contexts; what we would like to call safety planning.

I would be grateful if you could **please reply to me at mentalhealth@hee.nhs.uk, FOA Adrian Whittington, by Friday 01 September 2023 stating that you have complied with the above, or give me a detailed timetable by when this will be achieved.**

Thank you very much for your attention to this important matter.

Yours sincerely,

A handwritten signature in black ink, appearing to read 'A Whittington', with a horizontal line extending to the right.

Dr Adrian Whittington

National Clinical Lead for Psychological
Professions

Encs:

Professor Tim Kendall Letter to Chief Medical Officers, October 2022

Extract from Chief Coroner's report, Summer 2022