

Appendix 2

Leicester, Leicestershire and Rutland Suicide Audit and Prevention Group

Draft Suicide Prevention Strategy Action Plan 2017-2020

The table below highlights our 8 key actions:

Aim	Objective	Specific outcome	Milestones	Monitoring data
(1) Promote better mental health in LLR				
<p>To influence health and social care commissioners to promote better mental health and wellbeing in LLR.</p>	<p>To take every opportunity to raise awareness of the links between mental illness and risk of suicide and by promoting better mental health in LLR.</p>	<p>There will be measurable increase in awareness of stigma and discrimination linked to mental health problems through local health education programmes, including Resilience and Recovery Service, Future in Mind and Mental Health First Aid.</p>	<p>2017-18: Establish link between suicide prevention work and Future in Mind, Recovery and Resilience Hubs and all local public mental health promotion campaigns.</p>	<p>There will be an improvement in mental wellbeing across LLR communities using the WEMWBS tool.</p> <p>The number of LLR schools and workplaces pledged to challenge stigma and discrimination linked to mental illness.</p> <p>Local reports to CCG commissioners.</p>
(2) Support people bereaved or affected by suicide				
<p>To encourage local partners to work together to develop a culture of support for people bereaved or affected by suicide.</p>	<p>To give effective and timely help to people bereaved by suicide, with key local organisations such as the Police and Coroners' Offices delivering best practice and offering advice in collaboration with voluntary organisations such as Samaritans and SOBs.</p>	<p>Key organisations will share best practice through the LLR Suicide Audit and Prevention Group.</p> <p>Statutory and voluntary organisations will form a support network through which they will signpost bereaved people to appropriate, timely help.</p>	<p>2017-18: SAPG community group members will link with Coroners' Offices and Leicestershire Police to establish a process by which they work together to offer information and signposting to everyone bereaved by suicide.</p>	<p>Evaluation of real time surveillance data as evidence that people have been offered support and guidance.</p> <p>Reported annually preparatory to World Suicide Prevention Day.</p>

(3) Suicide Awareness Training				
<p>To raise awareness about suicide risk.</p> <p>To help people to feel more confident in talking about suicide.</p> <p>To challenge stigmatising attitudes to suicide.</p>	<p>To empower course attendees to challenge attitudes about suicide.</p> <p>To help attendees to make an initial response to support someone who has expressed suicidal thoughts.</p>	<p>There will be a number of courses held in LLR to raise awareness in local areas and among people in other high risk categories.</p> <p>The course attendees will be evaluated to assess their knowledge of the topic immediately before and after the course with an additional evaluation 6 months afterwards.</p>	<p>2017-18: 12 Courses of suicide awareness training with 300 delegates.</p>	<p>Course evaluation data.</p> <p>Reported regularly to commissioners.</p>
(4) Prevent suicide in health care settings				
<p>To do everything possible to prevent death by suicide in people known to mental health services.</p>	<p>To assess suicide risk of everyone known to mental health services.</p> <p>To undertake a further assessment where risk of suicide is high, reviewing individual factors and patient motivation.</p> <p>Best practice management of individuals at high risk of death from suicide.</p>	<p>Everyone known to mental health services will have an assessment of risk of death by suicide.</p> <p>Appropriate further assessment and management of all people at high risk known to mental health services and appropriate care plan drawn up.</p> <p>Training of mental health staff in assessment and best practice care management.</p>	<p>2017-18: work with Leicestershire Partnership Trust to implement risk assessment training to help therapists to recognise suicide risk, judge those risks and follow appropriate guidance to mitigate them.</p>	<p>Proportion of people known to mental health services with a suicide prevention care plan.</p> <p>Reduction of number of deaths by suicide in people known to mental health services.</p> <p>Reported routinely to CCGs.</p>
(5) Raise awareness with better data				
<p>To improve and use information about death by suicide in LLR.</p>	<p>To use information about death by suicide as a way of providing timely appropriate support for people at risk of suicide, suicide hot spots and clusters.</p>	<p>An annual audit of deaths by suicide in LLR, informed by Coroners' Offices data, Public Health England Fingertips evidence and real time surveillance.</p> <p>Ongoing support of real time</p>	<p>Formalise reporting of Real Time data in 2017</p>	<p>Annual audit reports to SAPG preparatory to World Suicide Prevention Day.</p> <p>Quarterly reports to LLR SAPG and LLR Mental Health Crisis Care Concordat.</p>

		surveillance data with Leicestershire Police, with regular reports to the SAPG and extraordinary reports in response to circumstances such as high risk hot spots, clusters and institutions.		Regular reports to Mental Health Partnership Boards and Health and Wellbeing Boards.
(6) Supporting people in prison and those in contact with criminal justice				
To work with prisons and criminal justice system to develop support networks as a way of preventing suicide and self-harm.	<p>To raise awareness of high risk sub-groups to support people in prison and those in contact with criminal justice system.</p> <p>To work with key partners to develop peer support networks in local prisons, young offender institutions and probationary services.</p>	Regular reports to the LLR SAPG which will cover the number of deaths by suicide, assessments of people at high risk and development of supportive best practice.	<p>Invite representatives from local criminal justice to join the SAPG in 2017.</p> <p>Establish formal links between SAPG and local prisons and probation services in 2017</p>	Quarterly reports to the SAPG, outlining progress towards supportive networks, ease of access to training and response to deaths by suicide.
(7) Protecting people with a history of self-harm				
To encourage an evidence-based response to protect people who self-harm. This response will ensure best practice in health care commissioner and provider services and highlight key messages from supportive community groups, such as the Samaritans.	<p>To implement NICE guidance on the treatment of self-harm.</p> <p>To improve local monitoring of people who present with self-harm.</p> <p>To promote key messages which are supportive of people who self-harm and sensitively highlights the risk of suicide in people who self-harm.</p>	<p>There will be psychosocial assessments followed by appropriate support at UHL Emergency Care department for people who self-harm in line with NICE guidance.</p> <p>CCG commissioners will collect evidence towards the Public Health Outcome Framework measurement of people who self-harm.</p>	Align work of SAPG with Acute Vanguard during 2017	<p>Annual report on the number of people who self-harm.</p> <p>Report on the number of people who are trained in best practice response to self-harm in health care services.</p> <p>Report to SAPG by support groups about the local perceived need of people who self-harm in LLR.</p>
(8) Target support at key high risk groups				

<p>To raise awareness of death by suicide in high risk groups.</p>	<p>To promote a clear response to protect people at an increased risk of suicide, by peer communicators and community out-reach.</p> <p>To develop holistic responses to encourage help seeking, effective treatment for depression and measures to reduce social isolation or vulnerability to economic circumstances.</p>	<p>There will be timely access to appropriate mental health care, including resilience and recovery services and IAPT, and other changes under the Sustainability and Transformation Plan.</p> <p>Development of cross-cutting and co-ordinated approaches will include signposting to broad support, such as tackling unemployment, debt, stigma and discrimination.</p>	<p>Create a task and finish group of SAPG in 2017 looking specifically at high risk groups</p>	<p>Local reports to CCG commissioners on access to mental health services to sustain resilience to mental illness and provide support to people with anxiety and depression.</p> <p>Number of people who are signposted to wider support networks by health and social care services.</p>
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