

HEALTH OVERVIEW AND SCRUTINY COMMITTEE: 8 NOVEMBER 2017

REPORT OF DIRECTOR OF PUBLIC HEALTH

SUICIDE PREVENTION

Purpose of report

1. The purpose of this report is to appraise the committee of recent actions carried out by Public Health and wider partners in Leicestershire aimed at preventing suicide. The actions sit under the 2017-20 Leicester, Leicestershire and Rutland Suicide Prevention Strategy and Action Plan (Appendices 1 and 2). The report provides an overview of what is known about suicide, including factors that impact on levels of suicide, identification of those who may be at higher risk and the evidence for effective prevention.

Policy Framework and Previous Decisions

- 2. The cross-Government National Suicide Prevention Strategy for England was published in 2012 and was refreshed in January 2017. The strategy has highlighted six key areas for action:
 - Reducing the risk of suicide in high risk groups;
 - Tailoring approaches to improve mental health in specific groups:
 - · Reducing access to means of suicide;
 - Providing better information and support to those bereaved or affected by suicide;
 - Supporting the media in delivering sensitive approaches to suicide and suicidal behaviour:
 - · Supporting research, data collection and monitoring; and
 - Reducing rates of self-harm as a key indicator of suicide risk.
- 3. In April 2013 when Public Health transferred from the NHS into local government, suicide prevention became a local authority led initiative working closely with the police, clinical commissioning groups (CCGs), NHS England, coroners and the voluntary sectors.
- 4. In December, 2016 the Health Select Committee on Suicide Prevention recommended that health overview and scrutiny committees should be directly involved in ensuring effective implementation of local authorities' suicide prevention plans.
- 5. The NHS Operational Planning and Contracting Guidance 2017-2019 requires local areas to reduce suicide rates by **10**% against the 2016/17 baseline.

6. The Leicestershire Health and Wellbeing Strategy (2017-20) includes a key outcome focusing on giving equal priority to mental health and wellbeing and access to the right support for mental health issues across the life course.

Background

- 7. Suicide is a devastating and tragic event which, though comparatively rare, affects a large number of people each time it occurs, sending ripples through families and communities.
- 8. Between 2001 and 2008 suicide rates in England had been steadily falling but the rates have shown a small upward trend since 2008. The most recent local rate for 2013-15 was 9.3 suicides per 100,000 population which roughly equates **60** people per year across Leicestershire.
- 9. Around three quarters of all suicides occur in men, but rates are rising in women. It remains the biggest killer of men under 50 and the leading cause of death in people aged 15–24. Suicides account for a disproportionate amount of years of life lost to premature death.
- 10. Specific groups at increased risk of suicide include looked after children, care leavers, offenders; survivors of abuse or violence, including sexual abuse; veterans; people living with long-term physical health conditions; lesbian, gay, bisexual and transgender people; and people from black and minority ethnic groups and asylum seekers.
- 11. Tackling social factors linked to mental ill-health is critical in reducing suicide. These factors include unemployment, debt, social isolation, family breakdown and bereavement. Reducing alcohol and drug dependence are also critical.
- 12. Suicides are not inevitable. They are often the end point of a complex history of risk factors and distressing events. This complexity requires concerted action and collaboration amongst services, communities, individuals and across society as a whole, underpinned by clear local plans and actions.

Actions taken in Leicester, Leicestershire and Rutland

- 13. Public Health play a leading role in the Leicester, Leicestershire and Rutland Suicide Audit and Prevention Group (LLR SAPG). This group exists to bring together key partners across the health and care systems with the purpose of tackling the causes and the impact of suicide locally.
- 14. The LLR SAPG is a sub-group of the LLR Sustainability and Transformation Partnership (STP) Mental Health Partnership Group and it also feeds into the LLR Crisis Concordat. The LLR SAPG also reports to Unified Prevention Board of the Leicestershire Health and Wellbeing Board (HWBB) and its neighbouring HWBBs in Leicester and Rutland.
- 15. The LLR Suicide Audit and Prevention Group has devised the 2017-20 LLR Suicide Prevention Strategy and Action Plan (published March, 2017) (**Appendix 1**) which

targets a number of key outcomes which are reported through the governance mechanisms described above. The outcomes are:

- Promote better mental health in LLR
- Support people bereaved by suicide
- Offer suicide prevention training
- Prevent suicide in care settings
- Raise awareness of suicide prevention through use of improved data
- Support people in prison and in contact with the criminal justice system
- Protect people with a history of self-harm
- Target support at key high risk groups

Progress so far in 2017against the actions in the Suicide Prevention Strategy and Action Plan:

16. The LLR Suicide Audit Prevention Group has overseen delivery of:

Awareness Raising:

- Suicide Prevention Awareness events:
 - (1) In Leicestershire County Council as part of International Men's Day Mental Health & Wellbeing, November, 2016 and a session on health & wellbeing & resilience in the workplace, January, 2017
 - (2) World Suicide Prevention Day event, 10th September, 2017
- 2. Wider mental health awareness events and activities:
 - a. Leicestershire Mental Health First Aid (MHFA) Training programme, for front line staff on a multi-partnership basis. A standard 2 day training programme as developed by MHFA England but tailored to local needs. The programme brings together partners from across the health and wider systems to learn more about mental health in an environment of mutual support and cooperation:
 - b. 'RU OK today? 'events at High Cross Shopping Centre, Leicester, 11 February 2017 to mark World Mental Health Week and at Leicester Railway Station, 12th October 2017. These events involved reaching out to those members of the public who would not normally think that mental health issues impact on them. These are the people who have had little cause to worry about their personal mental health or have not made the connection between mood and mental health. They may know people who have had issues, but are not sure what to do or think, they would struggle if they came across someone with a mental health problem. They are likely to have more mental health skills and talent than they realise.

Joint working:

- 3. There are numerous joint/cross partner initiatives led by Public Health and the Samaritans working with other partners from local schools, universities, prisons, Youth Offending Teams, Victim First etc to raise awareness of suicide, tackling risks, and highlighting support for people who are struggling
- 4. Specific joint working and support for people bereaved by suicide working with the LLR Suicide of Bereavement by Suicide (SOBS) Group
- 5. Strong links established with local coroners offices to learn lessons from suicides and to support those who have been bereaved by suicide.
- 6. Close working with local Clinical Commissioning Groups to support their management of Serious Incidents involving suicides in patients.
- 7. Co-development of 'Stay Alive': Grassroots Suicide Prevention App (with Leicestershire Partnership Trust) https://uksobs.org/we-can-help/local-support-groups/. The app is free to patients and carers and offers help and support both to people with thoughts of suicide and to people concerned about someone else. Most of the content is viewable offline, and parts of the app can be customised by the user to suit their personal needs.

Case study which demonstrates the effectiveness of the SAPG:

- 17. The following is an example of a local suicide prevention action that involved leadership from and co-ordination by the LLR Suicide Audit and Prevention Group (SAPG) and required close working with wider partners and the local community involved.
- 18. In March, 2017 the LLR SAPG responded to concerned staff at a location in Leicestershire where there had been four suspected deaths by suicide in 3 years (all males). The means and causes all differed and the individuals were not known to each other. Brief evaluation showed that many local residents experience debt, relationship difficulties and depression. Temporary occupants in the community had problems accessing local services. The SAPG considered this to be a local suicide 'hotspot' and offered support and guidance to staff and local community members based on best practice and specific expertise within the group.
- 19. Information was provided for future residents and carers as part of 'Welcome Packs', to cover Samaritan Support, local GPs, self-referral to drug and alcohol services, and psychological therapy. The local council agreed to provide access to debt advice. Staff were offered suicide awareness training and access to prevention materials. While third party referral to Samaritans is difficult because of confidentiality issues the local community policing support was felt to be best placed to gain permission from residents to contact the Samaritans in the future should this prove necessary.
- 20. The SAPG aims to use learning from this initiative to support other high risk and excluded communities in the future.

Proposals/Options

21. The Health Overview and Scrutiny Committee is asked to note the contents of this report to recognise the important role of the committee in overseeing and supporting efforts to reduce the burden of suicide in Leicestershire.

Resource Implications

22. Members of the LLR SAPG invest their professional time and expertise into the group. Wider partner organisations also need to ensure that tackling suicide is prioritised within their commissioning plans in response to local needs

Conclusions

- 23. Suicides are not inevitable. They are often the end point of a complex history of risk factors and distressing events. The prevention of suicide has to address this complexity through concerted action and collaboration amongst services, communities, individuals and across society as a whole.
- 24. The LLR Suicide Audit and Prevention Group leads on and co-ordinates strategies and actions to reduce the risks and burden of suicide locally. The Group's work and remit are captured in the LLR Suicide Prevention Strategy and Action Plan (2017-2020).
- 25. The Health Overview and Scrutiny Committee has an important role in overseeing and supporting efforts to reduce the burden of suicide in Leicestershire.

Background papers

- Preventing Suicide in England: A cross government strategy to save lives (2012)
- Five Year Forward View for Mental Health (2016)
- House of Commons Health Committee Suicide prevention: interim report (2016)
- Preventing suicide in England: Third progress report of the cross-government outcomes strategy to save lives (2016)
- Local Suicide Prevention Planning: a Practice Resource Public Health England (2016)
- The Leicestershire Health and Wellbeing Strategy (2017-20)
- The NHS Operational Planning and Contracting Guidance (2017-2019)

<u>Circulation under the Local Issues Alert Procedure</u>

None. The issue is County wide.

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List of Appendices

LLR Suicide Prevention Strategy and Action Plan (2017-20)

Relevant Impact Assessments

Equality and Human Rights Implications

26. Suicide disproportionately impacts on socially excluded groups and overall approaches to suicide prevention must ensure that this health inequality is targeted and addressed.

Crime and Disorder Implications

27. People and groups who experience social disadvantage are more likely to be victims of suicide and of crime. This reinforces the need to address social inequality across society.

Environmental Implications

28. None of significance

Partnership Working and associated issues

29. Tackling suicide requires concerted action and collaboration amongst services, communities, individuals and across society as a whole.

Appendices

Appendix 1 - 2017-20 Leicester, Leicestershire and Rutland Suicide Prevention Strategy Appendix 2 - 2017-20 Leicester, Leicestershire and Rutland Suicide Prevention Action Plan