JOINT CAMBRIDGESHIRE AND PETERBOROUGH SUICIDE PREVENTION STRATEGY

То:	Health Committee	
Meeting Date:	11 th September 2014	
From:	Director of Public Health	
Electoral division(s):	All	
Forward Plan ref:	For key decisions Key decision: No	
Purpose:	To present to the Committee the joint Cambridgeshire and Peterborough suicide prevention strategy and accompanying three year action plan detailing public health recommendations to reduce suicide in the local area, and specific actions to be taken by individual agencies	
Recommendation:	The Committee is asked to review and approve the strategy on behalf of Cambridgeshire County Council	

	Officer contact:
Name:	Kathy Hartley
Post:	Specialist Registrar – Public Health
Email:	Kathy.hartley@cambridgeshire.gov.uk
Tel:	

1. BACKGROUND

- 1.1 Suicide is a major public health issue. As suicide marks the ultimate loss of hope, meaning and purpose to life it has a wide ranging impact on families, communities and society. Suicides more frequently occur in a younger age group and account for a larger proportion of years of life lost than similar numbers of deaths due to other causes. However, the National Suicide Prevention Strategy Preventing Suicide in England¹ states that suicides are not inevitable and many can be prevented, thus supporting a call for action to reduce suicide and the impact of suicide both at the national and local level.
- 1.2 There are around 40-50 suicides in Cambridgeshire annually although this number fluctuates from year to year. The Public Health Outcomes Framework² includes 'suicide rate' as a national indicator. The suicide rate in Cambridgeshire has shown a general decrease since 2001. Data for 2010-2012 show that the suicide rate in Cambridgeshire is below both the England and East of England rates. However, there are differences in suicide rates between the local authority areas within Cambridgeshire with Fenland and Cambridge City showing higher rates of suicides in some recent years.
- 1.3 The Cambridgeshire and Peterborough Suicide Prevention Strategy³ is the response to the following recent developments:
 - The publication of the document 'Preventing suicide in England'¹ a crossgovernment outcomes strategy to save lives
 - The priority identified in the Joint Commissioning Strategy for Adult Mental Health Services 2013-16⁴ agreed by the Cambridgeshire and Peterborough Clinical Commissioning Group, Cambridgeshire County Council, and Peterborough City Council "to reduce the suicide rate in the general population in Cambridgeshire and Peterborough"
 - Feedback consistently received from local agencies that there is a need for better support for those bereaved or affected by suicide and clearer guidance where to seek help and advice for people who are worried that someone they know might commit suicide, or are presented with somebody threatening to commit suicide.
- 1.4 In line with national guidelines on preventing suicide, and in understanding that an effective local public health approach is fundamental to suicide prevention, a multi-agency local suicide prevention strategic group was established to develop the suicide prevention strategy and three year action plan, chaired by a specialist public health registrar. The strategic group includes members from public and third sector organisations including:
 - Cambridgeshire County Council Public Health Directorate
 - Peterborough City Council
 - Cambridgeshire and Peterborough Clinical Commissioning Group (CCG)including CCG GP leads for mental health and commissioning support
 - Coroners
 - Cambridgeshire and Peterborough Foundation Trust
 - Service User Engagement Network (SUN)
 - Police
 - Youth Offender service
 - Local Voluntary Organisations including Lifecraft, MIND, Samaritans, Richmond Fellowship and Rethink Carers.

- 1.5 It was recognised that the suicide prevention strategy would not operate in isolation, but would support and complement other relevant strategies including:
 - The Cambridgeshire and Peterborough Joint Commissioning Strategy for Adult Mental Health Services 2013-16⁴
 - The Cambridgeshire Emotional well-being and mental health strategy for children and young people 2014-2016⁵
 - The Cambridgeshire Public Mental Health Strategy, which will be developed during 2014/15
 - The Cambridgeshire and Peterborough Clinical Commissioning Group 5 year Mental Health Strategy, which will be developed in 2014/15

2. THE STRATEGY AND RECOMMENDATIONS

- 2.1 The key purpose of the Cambridgeshire and Peterborough suicide prevention strategy is to ensure that there is co-ordinated and integrated multi-agency agreement on the delivery of suicide prevention services that is tailored appropriately to local need and is driven by the involvement and feedback from service users.
- 2.2 The recommendations for actions to reduce suicides in Cambridgeshire and Peterborough are set out in the strategy and accompanying action plan (Appendix 1 and 2) and were developed by the Cambridgeshire and Peterborough suicide prevention strategic group. The recommendations are based on six national priority areas for reducing suicide as well as local intelligence on suicides and risk of suicide gathered from coroner data and upon consultation with partner organisations and service users.

The six priority areas for tackling suicide are:

- 1. Reduce the risk of suicide in key high-risk groups
- 2. Tailor approaches to improve mental health in specific groups
- 3. Reduce access to the means of suicide
- 4. Provide better information and support to those bereaved or affected by suicide
- 5. Support the media in delivering sensitive approaches to suicide and suicidal behaviour
- 6. Support research, data collection and monitoring.
- 2.3 In developing recommendations and action plans for each priority area, evidence and information is drawn from national guidance and publications on what is effective in preventing suicide and an emphasis is placed on local needs assessments that identified groups at higher risk of suicide and gaps in service provision^{4,5,6,7}.
- 2.4 Implementation of the recommendations and action plan will be managed by a joint Cambridgeshire and Peterborough suicide prevention implementation group and overseen by the strategic group from September 2014. Multi-agency working across all sectors from NHS and mental health professionals to voluntary organisations will be encouraged in order to utilise expertise from these organisations to implement the proposed initiatives. Continuing engagement with service users and their carers is expected for the successful development, implementation and delivery of initiatives in each priority area.

2.5 The evidence base for suicide prevention highlights particular interventions that have been shown as effective in reducing risk or raising awareness of suicide. The best suicide prevention strategies use a combination of tools and interventions ^{1,9,10,11}.

Based on the evidence of what is effective in preventing suicide, the following advice has been developed to aid the development of the suicide prevention strategy:

- Provide solutions for self-help
- Emphasise that suicide is preventable. There are preventative actions individuals can take if they are having thoughts of suicide or know others who are at risk of suicide.
- The impact of mental illness and substance abuse as risk factors for suicide can be reduced by access to effective treatments and strengthened social support.
- Suicide or people who have died by suicide should not be glorified or romanticised. Vulnerable people, especially young people, may identify with the attention and sympathy garnered by someone who has died by suicide.
- Teach people how to tell if they or someone they know may be thinking of harming themselves and how to protect them from this harm.
- 2.6 Funding for some of the suicide prevention initiatives recommended in the strategy was obtained after a successful bid to the NHS Strategic Clinical Network Pathfinder programme. This funding is non-recurrent, for one year only from April 2014 and has supported the development of a local 'STOP SUICIDE' campaign for Cambridgeshire and Peterborough to be launched in September 2014. The funding is enabling the roll-out of suicide prevention training for people within groups or organisations most likely to be in contact with those at greatest risk of suicide. It is also supporting the development of suicide prevention self-help and professional resources, an awareness raising campaign and will contribute to suicide prevention pathway development.

3. ALIGNMENT WITH CORPORATE PRIORITIES

3.1 Developing the local economy for the benefit of all

There are no significant implications for this priority.

3.2 Helping people live healthy and independent lives

The recommendations proposed in the strategy will, when implemented support people in Cambridgeshire and Peterborough to achieve mental wellbeing and prevent mental health crisis by promoting self-help, suicide awareness and how to help others. A joined up approach by services, professionals and partner organisations to support and care for individuals at risk of suicide will better enable people to live healthy and independent lives.

3.3 Supporting and protecting vulnerable people

Risk of suicide is higher in some vulnerable groups, for example, people with existing mental health problems, people with drug and alcohol problems, homeless people, unemployed people and migrant workers. The

recommendations in the strategy focus on delivering interventions to those with greatest risk, for instance training in suicide prevention will be offered to people within organisations such as job-centre plus or Citizens advice who are most likely to be in contact with vulnerable people in high-risk groups. By establishing firm links between partner organisations and strengthening suicide prevention pathways across the system, people in vulnerable groups at risk of suicide will be better supported during crisis and to prevent and recover from crisis.

4. SIGNIFICANT IMPLICATIONS

4.1 **Resource Implications**

Delivering the recommendations outlined in the strategy depends on good partnership working between all listed organisations including Cambridgeshire County Council.

There are implications for Cambridgeshire County Council to ensure ongoing support for the suicide prevention strategy by providing public health resources in the form of staff time committed to this agenda:

- To chair the Cambridgeshire and Peterborough Suicide Prevention strategic group
- To work with coroners to collate local suicide data on a quarterly basis
- To produce an annual suicide audit in line with national guidance
- To provide public health advice to the group on strengthening suicide prevention pathways and the effectiveness and evaluation of suicide prevention initiatives
- To further work across public health and Children Families and Adults directorate in ensuring a joined-up approach and partnership working to support mental health promotion and self-harm prevention initiatives for children, young people and adults

4.2 Statutory, Risk and Legal Implications

There are reputational implications for CCC not to own a suicide prevention strategy as this is expected although not a statutory requirement as outlined in the National suicide prevention strategy – 'Preventing suicide in England, Dept of Health 2012'¹.

Suicide prevention contributes to the council's general duty to improve the health of the public.

4.3 Equality and Diversity Implications

Several vulnerable groups are at higher risk of suicide as outlined in paragraph 3.3

4.4 Engagement and Consultation Implications

The recommendations and action plan outlined in the strategy were developed by the Cambridgeshire and Peterborough suicide prevention strategic group. Consultation was carried out with the partner organisations listed in 1.4. Service user consultation on the strategy was obtained through a combination of a workshop with service users and consultation through the HealthWatch and Cambridgeshire County Council websites. The strategy was revised according to the feedback obtained.

Views on the strategy were obtained from the Health Committee mental health task group in August 2014 and the document has been adjusted to include the task group's feedback.

4.5 Localism and Local Member Involvement

The recommendation to provide suicide prevention training to various local organisations including voluntary sector groups and those in contact with vulnerable people will help to empower communities to help themselves. In addition, the suicide prevention pledge and self-help resources will help build community cohesiveness by raising awareness to help others at risk of suicide.

The Cambridgeshire and Peterborough suicide prevention implementation group is a partnership group that includes voluntary community organisations as well as health organisations and the local authority and will enable and strengthen links between these organisations during implementation of the initiatives.

4.6 Public Health Implications

The purpose of the strategy is to reduce suicides in Cambridgeshire and Peterborough. The inclusion of suicide as an indicator within the Public Health Outcomes Framework - 4.10 will help to track national and local progress against the overall objective to reduce the suicide rate.

As several vulnerable groups have higher risk of suicide (section 3.3), the recommendations proposed in the strategy will focus on reducing suicide risk in these groups directly and indirectly.

Source Documents	Location
 National Strategy: Preventing Suicide in England, 2012: 	<u>http://www.dh.gov.uk/health/files/2012/0</u> <u>9/Preventing-Suicide-in-England-A-</u> <u>cross-government-outcomes-strategy-</u> <u>to-save-lives.pdf</u>
2. Public Health Outcomes Framework	<u>https://www.gov.uk/government/uploads</u> /system/uploads/attachment_data/file/21 6159/dh_132362.pdf
3. The Joint Cambridgeshire and Peterborough Suicide Prevention Strategy	<u>http://www2.cambridgeshire.gov.uk/Com</u> <u>mitteeMinutes/Committees/Committee.a</u> <u>spx?committeeID=76</u>
4. Cambridgeshire and Peterborough Clinical Commissioning Group Commissioning Strategy for the	http://www.cpft.nhs.uk/Downloads/rod% 20files/2013_08- 16_CCG_Adult_MH_Commissioning_St

SOURCE DOCUMENTS

Mental Health and Well-Being of Adults of Working Age 2013 – 2016	<u>rategy_2013_FINAL.pdf</u>
 Emotional well-being and mental health strategy for children and young people 2014-2016 	<u>http://www.cambridgeshire.gov.uk/info/2</u> 0076/children and families practitioner <u>s and providers information/370/provid</u> <u>ing children and families services/5</u>
6. Cambridgeshire Health and Wellbeing Strategy	<u>http://www.cambridgeshire.gov.uk/downloads/id/359/cambridgeshire_h</u> ealth_wellbeing_strategy_2012-2017
7. JSNA Peterborough Mental Health	<u>http://www.peterborough.gov.uk/pdf/Hea</u> <u>IthAndSocialCare-JSNA-</u> <u>Mental%20Health.pdf</u>
8. Cox et al 2013; Interventions to reduce suicides at suicide hotspots: a systematic review BMC Public Health 2013, 13:214	http://www.ncbi.nlm.nih.gov/pmc/articles /PMC3606606/pdf/1471-2458-13- 214.pdf
9. Mann et al, 2005 Suicide Prevention Strategies: A systematic Review.	JAMA. 2005;294(16):2064-2074 http://jama.jamanetwork.com/collection. aspx?categoryID=5922&page=3
10. WHO For which strategies of suicide prevention is there evidence of effectiveness	http://www.euro.who.int/data/assets/p df_file/0010/74692/E83583.pdf
11. Knapp et al 2011, Mental health promotion and prevention: The economic case.	<u>http://www.lse.ac.uk/businessAndConsu</u> <u>Itancy/LSEEnterprise/pdf/PSSRUfeb201</u> <u>1.pdf</u>