

DRAFT SUICIDE PREVENTION STRATEGY 2017-2020

To: **Health and Wellbeing Board**

Meeting Date: **1 February 2017**

From: **Katharine Hartley, Consultant in Public Health**

Recommendations: **The Health and Wellbeing Board is asked to:**

- a) Approve the Draft Suicide Prevention Strategy 2017 - 2020 attached at Appendix 1**

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1. PURPOSE

1.1 The purpose of this paper is to:

- a) ensure continuation of suicide prevention work to 2020 through the refresh of the joint Cambridgeshire and Peterborough Suicide Prevention Strategy;
- b) review the progress to date from the Suicide Prevention Strategy, 2014 – 2017.

2 BACKGROUND

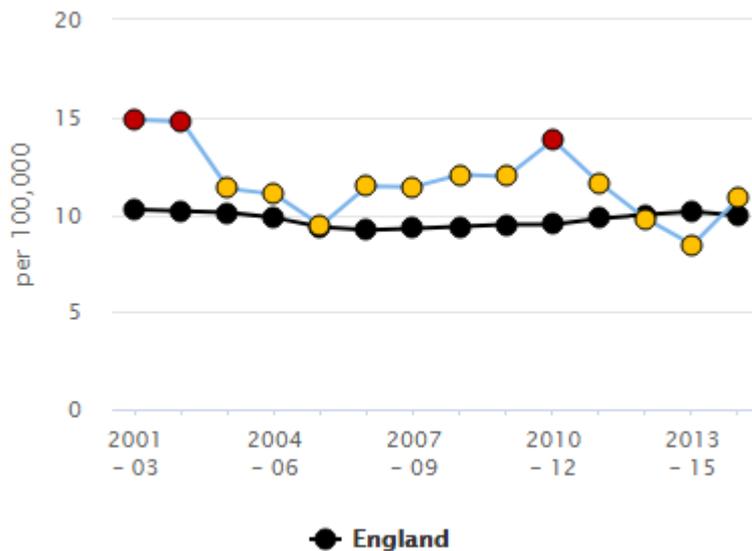
- 2.1 Suicide is a major public health issue as it marks the ultimate loss of hope, meaning and purpose to life and has a wide ranging impact on families, communities and society. Suicide is the leading cause of death for younger adults. However, the National Suicide Prevention Strategy – Preventing Suicide in England, 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 national and local level.
- 2.2 This report proposes a refresh of the joint Peterborough and Cambridgeshire Suicide Prevention strategy (2017-2020) (copy attached at Appendix 1) and includes updates on national and local suicide statistics, initiatives, evidence and forward planning. Incorporated as a main thread throughout the strategy is an ambition towards ZERO Suicide, as agreed through the multi-partner suicide prevention implementation board in 2017. The strategy builds on and supports the National Suicide Prevention Strategy – ‘Preventing suicide in England’, Dept. of Health 2012.
- 2.3 The key purpose 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. With a focus on Zero suicide, the strategy emphasises the requirement for senior level engagement with all relevant organisations to ensure quality improvement across the pathways of care for suicide prevention.

3. MAIN ISSUES

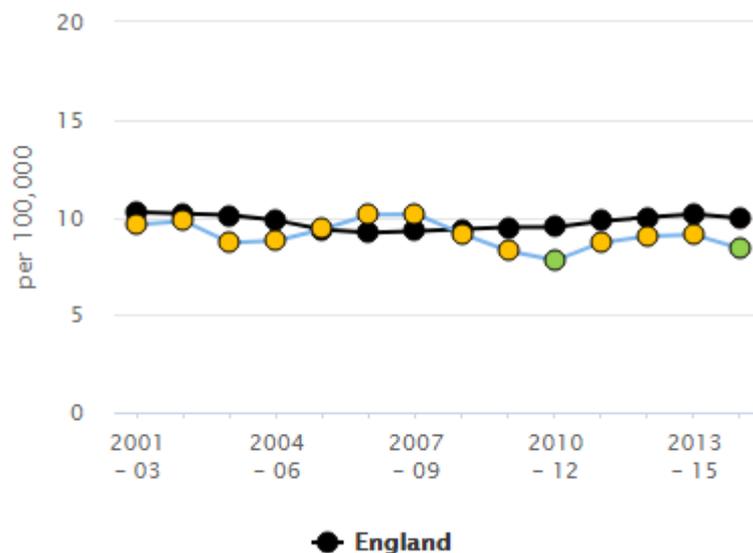
- 3.1 The six priority areas for suicide prevention in Cambridgeshire and Peterborough with recommendations for actions are set out in the Suicide Prevention Action Plan, developed by the Joint Cambridgeshire and Peterborough Suicide Prevention Implementation Group. This comprises of a partnership of multiple organisations involved in mental health (details at Appendix 2).
- 3.2 Key points of progress seen since the launch of the 2014 - 2017 suicide prevention implementation plan:
 - The suicide rates in Peterborough has decreased since 2010-2012 when the rate was significantly above both the England and East of England rates and is now similar to the England average. The suicide rate in Cambridgeshire has remained similar to or slightly below the England average for the last five time periods.

Suicide rate for Peterborough (top figure) and Cambridgeshire (bottom figure) compared with England – three year rolling averages shown from 2001/03 to 2014/16

Peterborough suicide rate



Cambridgeshire suicide rate



- Development and roll-out of 'STOP Suicide' across Peterborough and Cambridgeshire, including a local suicide prevention website, pledge, training in suicide prevention and campaigns to increase awareness of mental health issues and how to access support.
- Implementation of a 111(2) mental health crisis telephone triage and First Response Service (FRS) that includes a Cambridge 'sanctuary' as a place to feel safe and supported during mental health crisis.
- The construction of safety barriers on Peterborough car parks to prevent suicide
- Community based youth 'face to face' counselling services including a 'drop in' service for young people. The Kooth online counselling service for young people was commissioned in September 2016 to broaden the mental health support available for young people.
- The Stress LESS campaign launched in April 2016, supports young people to manage stress through the exam period.
- Lifeline continued to provide telephone listening support and information to people with mental health concerns 365 days of the year from 7pm -11pm
- Annual audit of suicides with shared learning across the partnership to help focus preventative work
- Keep Your Head (Childrens and Young People's mental health website) has been developed; www.keep-your-head.com This includes a page designed with, and for, GPs. Crisis information and preventive suicide and self-harm information.

3.3 Key new multi-agency initiatives to enhance suicide prevention from 2017:

- The development of a multi-partnership 24 hour Mental health crisis response for children and young people.
- Cambridgeshire and Peterborough NHS Foundation Trust (CPFT) Zero Suicide strategy and action plan, including the following actions:
 - Care planning to ensure that carers, families and significant others are always involved
 - Ensure that every patient has a comprehensive flexible risk management strategy
 - A pathway for the care of patients with drug and alcohol problems that explicitly manages their risk of suicide
 - Ensure that learning from suicide results in sustained improvement
 - Post suicide support by CPFT for families of those who have died due to suicide while under CPFT care
 - CPFT will become the local system leader in the provision of accessible, relevant and up to date information about suicide
 - CPFT will take part in or initiate at least two suicide related research projects a year.
- GP training in suicide prevention. Funding has been secured through the Sustainability and Transformation Plan (STP) for training of GPs across Cambridgeshire and Peterborough in suicide prevention, which will focus on the patient/GP interaction, risk identification, compassion and empathy as well as safety plans and follow-through care.
- Real-time suicide surveillance and enhanced suicide data monitoring. Public health analysts are receiving information on suspected suicides from the police as they occur. This allows information to be assessed for any potential factors that could require action - for example clusters or new methods of suicide. In addition, data is being collated to review suicides, attempted suicides and mental health crisis for the purpose of sharing between agencies and review/monitoring as part of the development towards a learning culture to prevent suicide
- Bereavement support for people affected by suicide - STP funding to set up a reactive support service for people who have been bereaved as a result of suicide. The service is now up and running and is managed by a family liaison officer working with Lifecraft, who offers support to families in the first weeks after bereavement. They also signpost people to follow-up services and peer support groups. Part of this work will be to link with or set-up new peer support groups in Cambridge and Peterborough to support people bereaved due to suicide.
- A new youth counselling service (CHUMS) to support children's mental health and wellbeing
- The development of an adult version of the 'Keep Your Head' website with information on how to access services, self-help resources and information for professionals on mental health issues and illness.
- Zero suicide initiative - This is the overarching ambition for suicide prevention locally and aims to bring all partners together to support the development of a learning culture to drive up quality so that suicide prevention is a priority for each organisation, across the system.

4 ALIGNMENT WITH THE CAMBRIDGESHIRE HEALTH AND WELLBEING STRATEGY

4.1 The Suicide Prevention Strategy 2017-2020 is relevant to priorities 4 and 6 of the Health and Wellbeing Strategy:

- Priority 1: Ensure a positive start to life for children, young people and their families.
- Priority 2: Support older people to be independent, safe and well.
- Priority 3: Encourage healthy lifestyles and behaviours in all actions and activities while respecting people's personal choices.

- Priority 4: Create a safe environment and help to build strong communities, wellbeing and mental health.
- Priority 5: Create a sustainable environment in which communities can flourish.
- Priority 6: Work together effectively.

5 SOURCES

Source Documents	Location
1. <i>National Strategy: Preventing Suicide in England, 2012:</i>	http://www.dh.gov.uk/health/files/2012/09/Preventing-Suicide-in-England-A-crossgovernment-outcomes-strategy-to-save-lives.pdf
2. <i>Preventing suicide in England: Third progress report of the cross-government outcomes strategy to save lives:</i>	https://www.gov.uk/government/publications/suicide-prevention-thirdannual-report
3. <i>Cambridgeshire and Peterborough Clinical Commissioning Group Commissioning Strategy for the Mental Health and Well-Being of Adults of Working Age 2013 – 2016</i>	http://www.cpft.nhs.uk/Downloads/rod%20files/2013_0816_CCG_Adult_MH_Commissioning_Strategy_2013_FINAL.pdf
4. <i>JSNA Cambridgeshire – health and wellbeing strategy see:</i>	http://www.cambridgeshire.gov.uk/info/2016/health_and_wellbeing_board
5. <i>JSNA Peterborough Mental Health</i>	http://www.peterborough.gov.uk/pdf/HealthAndSocialCare-JSNA-Mental%20Health.pdf
6. <i>Suicide Prevention Strategy CPFT 2013-2016 (closed document) – for details please contact author or CPFT</i>	
7. <i>Emotional well-being and mental health strategy for children and young people 2014-2016</i>	
8. <i>Suicides in students</i>	http://www.ons.gov.uk/ons/about-ons/what-we-do/publicationscheme/published-ad-hoc-data/health-and-social-care/november-2012/index.html
9. <i>National Confidential Enquiry into Suicide and homicide by people with Mental Health illness – Annual report 2013</i>	http://www.bbmh.manchester.ac.uk/cmhr/centreforsuicideprevention/nci/reports/AnnualReport2013_UK.pdf
10. <i>Samaritans report –men suicide and society:</i>	http://www.samaritans.org/sites/default/files/kcfinder/files/Men%20and%20Suicide%20Research%20Report%20210912.pdf
11. <i>No health without mental health:</i>	https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/215811/dh_124057.pdf
12. <i>Public Health Outcomes Framework</i>	https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/216159/dh_132362.pdf
13. <i>Mental Health Crisis Concordat – Improving outcomes for people experiencing mental health crisis, February 2014.</i>	https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/28124

<p>Department of Health</p> <p>14. Annual Report of the Chief Medical officer 2013 – Public Mental Health Priorities: Investing in the Evidence</p> <p>15. Saving Lives: Our Healthier Nation; Department of Health, 1999:</p> <p>16. Detroit model for suicide prevention:</p> <p>17. ASIST suicide prevention training:</p> <p>18. Mental Health First Aid training England:</p> <p>19. Suicide in primary care in England 2002-2011</p> <p>20. Knapp et al 2011, Mental health promotion and prevention: The economic case.</p> <p>21. The Use and Impact of Applied Suicide Intervention Skills Training (ASIST) in Scotland: An Evaluation Social research: The Scottish Government,</p> <p>22. Bickley, H et al 2013; Suicide within two weeks of discharge from psychiatric inpatient care. A case control study Psychiatric Services 2013</p> <p>23. Cox et al 2013; Interventions to reduce suicides at suicide hotspots: a systematic review BMC Public Health 2013, 13:214</p> <p>24. Mann et al, 2005 Suicide Prevention Strategies: A systematic Review.</p> <p>25. Support after a suicide: A guide to providing local services</p> <p>26. We are in your corner – Samaritans:</p> <p>27. MHRA – Best practice for the sale of medicines for pain relief -</p> <p>28. Hawton K, Bergen H, Simkin S et al (2010) Toxicity of antidepressants: rates of suicide relative to prescribing and non-fatal overdose.</p> <p>29. 'Help is at hand' a resource for people bereaved by suicide and other sudden, traumatic death</p> <p>30. Preventing Suicide - A Resource for Media Professionals: A resource guide produced by the Department of Mental Health at the World Health Organization in 2000.</p>	<p>2/36353 _Mental_Health_Crisis_accessible.pdf</p> <p>https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/351629/Annual_report_2013_1.pdf</p> <p>https://www.gov.uk/government/publications/saving-lives-our-healthier-nation</p> <p>http://zerosuicide.actionallianceforsuicideprevention.org/sites/zerosuicide.actionallianceforsuicideprevention.org/files/PerfectDepressionCarearticles.pdf</p> <p>http://www.chooselife.net/Training/asist.aspx</p> <p>http://mhfaengland.org/</p> <p>http://www.bbmh.manchester.ac.uk/cmhr/research/centreforsuicideprevention/nci/reports/SuicideinPrimaryCare2014.pdf</p> <p>http://www.lse.ac.uk/businessAndConsultancy/LSEEnterprise/pdf/PSSRUfeb2011.pdf</p> <p>http://www.chooselife.net/uploads/documents/19-ASISTEvaluationFullReport.pdf</p> <p>http://ps.psychiatryonline.org/article.aspx?articleID=1673604</p> <p>http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3606606/pdf/1471-2458-13-214.pdf</p> <p>JAMA. 2005;294(16):2064-2074</p> <p>https://www.gov.uk/government/publications/support-after-a-suicide-a-guide-to-providinglocal-services</p> <p>http://www.samaritans.org/media-centre/ourcampaigns/were-your-corner</p> <p>http://www.mhra.gov.uk/home/groups/plp/documents/websiteresources/con065560.pdf</p> <p>British Journal of Psychiatry 196: 354-358</p> <p>http://www.nhs.uk/Livewell/Suicide/Documents/Help%20is%20at%20Hand.pdf</p> <p>http://www.who.int/mental_health/media/en/426.pdf</p>
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<p>31. <i>Media guidelines for reporting suicide – Samaritans:</i></p> <p>32. <i>NHS England and Public Health England ‘A call for Action: Commissioning for Prevention’ November 2013.</i></p> <p>33. <i>WHO For which strategies of suicide prevention is there evidence of effectiveness</i></p>	<p><i>http://www.samaritans.org/sites/default/files/kcfinder/files/press/Samaritans%20Media%20Guidelines%202013%20UK.pdf</i> <i>Available at: www.england.nhs.uk</i></p> <p><i>http://www.euro.who.int/_data/assets/pdf_file/0010/74692/E83583.pdf</i></p>
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