

**UPDATE ON THE PROGRESS OF THE SUICIDE PREVENTION ACTION PLAN
AND ZERO SUICIDE AMBITION**

To: **Health and Wellbeing Board**

Meeting Date: **31 January 2019**

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

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

- a) Note and comment on the progress of the suicide prevention implementation plan
- b) Comment on the commitment of Health and Wellbeing Board member organisations to the zero suicide ambition
- c) Continue to support the implementation of the suicide prevention implementation plan through partnership and network links, awareness raising and developing a learning culture.

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1. PURPOSE

- 1.1 The purpose of this paper is to provide a brief update on the progress of the work by all partners on the multi-agency Suicide Prevention implementation board and to review partner organisations plans towards the zero suicide ambition.

2. BACKGROUND

- 2.1 Cambridgeshire and Peterborough have had a joint suicide prevention strategy since 2014. This is accompanied by an action plan that cuts across partner organisations to ensure participation by key players along the pathway of care from early prevention through to post discharge after crisis, and/or learning from case studies post-suicide. The suicide prevention strategy was refreshed last year and covers the period 2017-2020 and has been approved by both Peterborough and Cambridgeshire Health and Wellbeing Boards.
- 2.2 The strategy builds on and supports the National suicide prevention strategy 'Preventing suicide in England, Dept. of Health 2012'¹ but also includes a drive to aim for ZERO suicide, based on the National Zero Suicide Alliance. 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.
- 2.3 The six priority areas for suicide prevention and the key work assigned to each

Priority is as follows:

1. Reduce the risk of suicide in high risk groups
 - Implement the STOP Suicide local awareness raising campaign, website and pledge
 - Provide training in suicide prevention - ASIST, MHFA
 - Continue to implement Lifeline - provides listening support and information to someone experiencing mental distress
 - Work with partners to support the continuation of 111(2) FRS and Sanctuaries for people in mental health crisis
2. Tailor approaches to improve mental health in specific groups
 - Work with partners delivering the 'Emotional wellbeing and mental health strategy for children and young people, particularly around reducing stigma, resilience building, tackling self-harm and support after bereavement
 - Support GP training in suicide prevention
 - Focussed work to improve mental wellbeing in harder to reach groups such as middle aged men
3. Reduce access to the means of suicide

- Monitor hotspots for suicides and work with police, BTP, highways England to reduce access to means via bridges, high buildings and railway tracks
4. Provide better information and support to those bereaved or affected by suicide
 - Implement a bereavement support service and pathway for those affected by suicide
 5. Support the media in delivering sensitive approaches to suicide and suicidal behaviour
 - Continue to work with local media to encourage reference to and use of guidelines for the reporting of suicide
 6. Support research, data collection and monitoring
 - Monitor real-time information on suspected suicides as they occur
 - annual audit of local suicides
- 2.4 The Zero Suicide Ambition is an overarching theme that covers all priority areas. Key to this ambition is the commitment of partner organisations to sign up to the Zero Suicide Alliance and promotion of the free online ZSA training to all employees.
- 2.5 The Cambridgeshire HWB members received an updated report on the Suicide Prevention Strategy at the meeting on 1st February 2018. Board members supported the current progress reported in the action plan. Further support was given to taking the action plan forward at an organisational level. Board members agreed to report back at a future meeting the individual organisational responses to the Suicide Prevention action plan.

3. MAIN ISSUES

- 3.1 Progress over the six priority areas for suicide prevention in the last year by all partners on the Suicide Prevention implementation board include the following:
- STOP Suicide awareness raising campaign re-launched in May 2018 with support from the private sector 'Jagex'. This included the creation and roll-out of a short suicide prevention film (I'd ask) as well as public events and adverts on buses and through social media. The campaign is being evaluated but resulted in a large increase in visits to the STOP suicide website, increasing numbers of pledges. World suicide prevention day saw 40,000 impressions on Twitter and more than 20,000 on Facebook & Instagram
 - Implementing GP training in suicide prevention - As of the end of December 2018, the total number of GPs trained is 75. Four further workshops are arranged for early 2019. Funding has been secured to continue GP training for another year - until November 2019.
 - A postvention (intervention conducted after a suicide) support service for people bereaved as a result of suicide. This has been set up with STP funding and employs a family liaison officer, working through Lifecraft in Cambridge. Next of kin 'consent to be contacted' is shared between the police and the

bereavement support officer in the immediate days post suspected suicide. In the twelve months since the start of the service, support has been provided to 39 families. Case studies are collected to monitor the impact of the service and these demonstrate the value to clients in preventing mental health crisis. Funding is continuing into year 2 for this service.

- Real-time suicide surveillance was set up 18 months ago - Cambridgeshire and Peterborough being one of only a few areas in the country who collect and monitor this information. This is being used to identify any areas of concern that would need to be escalated. Protocols are being developed to cover a range of possible scenarios for escalation. Learning from cases studies is beginning to be implemented - for example, recent suspected suicides using firearms.
- An annual suicide audit was completed for suicides that occurred during 2016. This highlighted the need to raise awareness of mental health in middle-aged men, improve resilience in this group and to work towards addressing loneliness in the general population.
- A suicide prevention and awareness event was organised for schools, and received positive feedback. A protocol is now in place to support schools in the event of a pupil suicide.
- Crisis care - 111(2), FRS and Sanctuaries are an essential part of the suicide prevention plan. Work is underway to look at what support is available post-contact with these services, depending on evidence review and funding. A children and young person crisis service is being developed.
- The Cambridgeshire and Peterborough NHS Foundation Trust (CPFT) zero suicide strategy and action plan is being implemented and is a major part of the overarching suicide prevention strategy. Progress is being made on all workstreams within the CPFT strategy; carer support and data sharing, risk assessment and care plans, inpatient care to ensure zero suicides in this group, substance misuse, children and young people and research and data.
- The zero suicide ambition has been built in to the suicide prevention plan and a core to this is ensuring that the partnership for suicide prevention is all inclusive across public sector and voluntary sector organisations. It aims to utilise all partner's expertise and experience to join together across the pathway of care. Data sharing is key to this as well as developing a learning culture that looks at both positive and negative outcomes of cases and/or people's experience of services. In addition, the partnership group endorses the sign-up to the national Zero Suicide Alliance (ZSA), by the partner organisations as a sign of organisational commitment to reducing suicide. As part of the sign-up, the partner organisation would be expected to promote or mandate the free online training in suicide prevention to all employees. CPFT, the CCG and both upper tier Local Authorities have signed-up to the ZSA, along with other partners, for example, CPSELMIND.

3.2 The attached appendix provides some detail from our HWB partners who are not members of the suicide prevention implementation board on progress they are making to support the suicide prevention work and the zero suicide ambition. More work is required to ensure engagement across the county with all districts to promote and embed this work at the organisational level. The appendix also includes more detail from Cambridgeshire and Peterborough Foundation Trust on the suicide prevention work they are doing.

4. **ALIGNMENT WITH THE CAMBRIDGESHIRE HEALTH AND WELLBEING STRATEGY**

4.1 The suicide prevention work is most relevant to priorities 4 and 6 of the Health and Wellbeing Strategy:

- Priority 4: Create a safe environment and help to build strong communities, wellbeing and mental health.
- Priority 6: Work together effectively.

5. **SOURCES**

Source Documents	Location
Joint Cambridgeshire and Peterborough Suicide Prevention Strategy and action plan	Cambridgeshire Insight