

North Somerset Council

REPORT TO THE HEALTH OVERVIEW AND SCRUTINY PANEL

DATE OF MEETING: 7/6/2018

SUBJECT OF REPORT: SUICIDE PREVENTION ACTION PLAN

TOWN OR PARISH:

OFFICER/MEMBER PRESENTING: ANDREW BURNETT

KEY DECISION: NO

RECOMMENDATIONS

Members are asked to note the content of the Suicide Prevention Action Plan and consider the role of HOSP in overseeing its implementation. |

1. SUMMARY OF REPORT

This report offers an update on the suicide prevention work that has been undertaken over the last 12 months. Key achievements are:

- The rise in suicides appear to have been halted with rates continuing to be similar to England.
- The suicide prevention plan has been refreshed to reflect new guidance and areas of concern
- Over 300 frontline staff trained in suicide prevention and mental health awareness
- The setting up of the Warriors of Wellbeing bringing in additional funding to local charities
- New areas of work including a project tackling the financial difficulties experience by those who attend Weston A&E for self-harm injuries.

2. POLICY

Nationally there is an ambition to reduce the suicide rate by 10% by 2020/21. This is to be achieved by a wide range of initiatives but one of the key arms of delivery is the development of local suicide prevention plans.

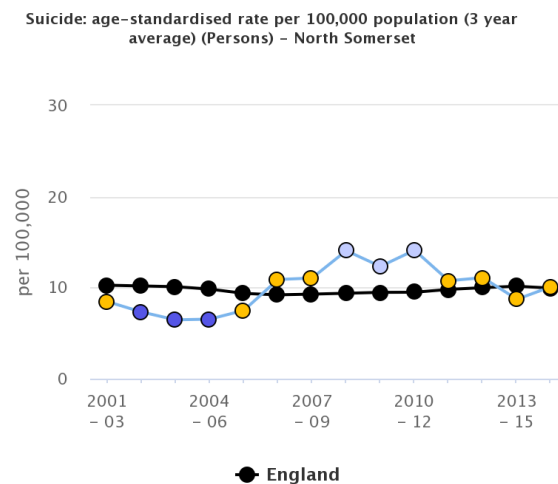
Councils have been working on the area of suicide prevention for many years. The Secretary of State for Health stated that by 2017 all local authorities should have a multi-agency suicide prevention plan in place. Here in North Somerset we have been ahead of the game and produced our first plan in 2015.

3. DETAILS

This report offers an update on the work we have done and an introduction into new areas of suicide prevention work that are planned.

Overall the suicide rate in North Somerset has reduced from a high of 14 per 100,000 (74 deaths and statistically higher than England) in 2008-2010 to 10 per 100,000 (55 deaths,

not different to England) in 2014-2016. See graph below tracking the changes in suicide rates overtime in North Somerset and England.



National data provides limited information on suicides so locally we undertake an audit using information from the Coroner Office. The latest data shows someone who has died from suicide is most likely male, single, living alone and have had contact with mental health services recently. If they are male they are more likely to be aged 45-59 years old and working. If they are female they are more likely to be younger (aged 30-44 years) and have had a history of self-harm.

In line with the national Suicide Prevention Strategy and guidance our local action plan has nine clear areas of action including; reducing the risk of suicide in high risk groups tackling the stigma around mental health and supporting the local workforce.

The Suicide Prevention Steering group by working together has achieved progress in the following areas:

- Development of a Public Mental Health training package delivering evidence based training to over 330 frontline staff in North Somerset
- Development of a local group called the Warriors of Wellbeing (WoW) to tackle mental health stigma. WoW have run three public events and raised over £2,000 for local charities including a magic table for the Dementia ward in Weston Hospital.
- Launch Control Room triage project, which places experienced mental health professionals into police call centre to offer real time mental health advice to police officers.
- Producing a West of England suicide audit offering timely and robust information at the local area which guides the work of the action plan.

We are looking to build on these successes in our current strategy. There are many new areas of development including the roll out of the HOPE project into Weston Accident and Emergency Department¹, the consolidation of findings from various death reviews and the development of a crisis card for mental health service users.

¹ The project works with people who have attended A&E for self-harm and who have money, employment or benefit problems, offering up to six psychosocial sessions with a trained mental health practitioner.

4. CONSULTATION

The development of the Suicide Prevention Action has been undertaken with reference to best practice in the area and consultation with key groups within North Somerset.

- North Somerset Suicide Prevention Steering group.
- North Somerset LGBT Forum.
- Community groups in areas with high levels of mental health needs.
- North Somerset Men's Health Forum.
- North Somerset Mental Health Care Forum.
- North Somerset Children's Future in Mind Strategy Group.

5. FINANCIAL IMPLICATIONS

Costs

Until recently there was no dedicated funding streams for suicide prevention so work has largely been delivered within the existing budgets of organisations.

Funding

In May 2018 NHS England announced that Bristol, North Somerset and South Gloucestershire were amongst one of eight areas receiving funding to for suicide prevention work. The middle-aged men, where rates were high.

6. LEGAL POWERS AND IMPLICATIONS

Not applicable.

7. RISK MANAGEMENT

Currently suicide rates in North Somerset are similar to rates in England, but we are not complacent and in our view one suicide is too many. By not developing a cross agency action plan we feel that we risk a number of potentially avoidable deaths.

8. EQUALITY IMPLICATIONS

[Have you undertaken an Equality Impact Assessment? Yes/No No.

But one will be developed when plans for extending the HOPE project to Weston Accident and Emergency Department are developed further.

The work programme has considered diversity and equality issues by consulting with key groups. Through the review of existing provision (see attached document), it became evident that a key at risk group for suicide is the lesbian, gay bisexual and transgender community. We have therefore worked closely with them and offered some small seed funding to develop their work in North Somerset.

9. CORPORATE IMPLICATIONS

An effective work programme around suicide prevention will assist the council and its partners to address the challenges in the areas of mental health and deliver its public health outcomes.

10. OPTIONS CONSIDERED

Not applicable

**AUTHOR HELEN YEO (ADVANCED HEALTH IMPROVEMENT SPECIALIST)
AND ANDREW BURNETT (INTERIM DIRECTOR OF PUBLIC HEALTH)**

BACKGROUND PAPERS

Suicide Prevention: Developing a local Action plan. Public Health England 2016.

<https://www.gov.uk/government/publications/suicide-prevention-developing-a-local-action-plan>

House of Commons Health Committee. 'Suicide Prevention'. Sixth Report of Session 2016/17.

<https://www.publications.parliament.uk/pa/cm201617/cmselect/cmhealth/1087/1087.pdf>

Preventing suicide in England: Third progress report of the cross-government outcomes strategy to save lives.

https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/582117/Suicide_report_2016_A.pdf