

Healthier Communities and Older People Overview and Scrutiny Panel

Date: 7th February 2023

Subject: Suicide Prevention

Lead officer: Dr Dagmar Zeuner, Director of Public Health

Lead member: Cllr Peter McCabe, Cabinet Member for Health and Social Care

Contact officer: Dan Butler, Senior Public Health Principal and Barry Causer, Public Health Lead for COVID-19 Resilience

Recommendations:

- A. For Overview and Scrutiny to discuss and support the progress of the life-course multi-agency suicide prevention framework and plans to develop an action plan to guide activities in 2023/2024.
 - B. For Overview and Scrutiny members to champion suicide prevention, such as through promoting awareness of support services and by promoting and participating in training e.g. suicide prevention and Mental Health First Aid.
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1 PURPOSE OF REPORT AND EXECUTIVE SUMMARY

- 1.1. This report will provide an update on suicide prevalence, insight and understanding on risk factors for suicide, the multi-agency framework for preventing suicide and actions delivered in 2022/2023, services that support residents of all ages, and our plan to develop a 2023/2024 action plan.

2 BACKGROUND

- 2.1. Alongside the tragic death of an individual the effects of suicide have a devastating impact on family and friends, work colleagues, neighbours and schools. As well as prevention of suicide, it is important that we provide support to those that are bereaved or affected by suicide.
- 2.2. Suicide is not inevitable and suicide prevention activity can help identify and support those at greatest risk, ensure messages of hope to those in crisis, train those working with high-risk groups, address stigma on mental health and suicide and raise awareness amongst residents so that more people know how to signpost to support services. Suicide prevention is not the responsibility of one organisation but requires a multi-agency approach and plan. Action is taking place at Borough/Place level, which is complimented and enhanced by action taking place at South-West London level.

3 DETAILS

- 3.1. National research shows that men make up the majority of those who die by suicide and middle- aged men are particularly at riskⁱ. Key risk factors for middle aged men and suicide include unemployment, debt, mental health issues, deprivation, substance misuse, relationship breakdown and housing insecurity^{ii iii}.

- 3.2. National research show that more women attempt suicide than men but men are more likely to die by suicide. Men may choose more lethal methods of suicide (that do not allow time for others to intervene) and may be less likely to disclose thoughts around suicide or seek help^{iv}.
- 3.3. Whilst risk factors for suicide may be universal to both men and women they may affect genders differently. For example men may be at higher risk of suicide due to relationship breakdown whilst self-harm is more common in women^v.
- 3.4. Nationally people who live in more deprived areas are at greater risk of suicide, with those living in the 10% most deprived areas being twice as likely to die by suicide than the 10% who are least deprived^{vi}.
- 3.5. Young people generally have low rates of suicide but action is important as suicide is one of the leading causes of death amongst young people^{vii}. Common themes / risk factors around suicide and young people (and where prevention activity can be targeted) include mental health issues, self-harm, substance misuse, bullying, academic pressures, abuse/neglect, social isolation and a history of online use around suicide. Research from Manchester University puts forward a model of 'cumulative risk where
- 3.6. *“Suicide by young people was rarely caused by one thing. It usually followed a combination of previous vulnerability, with traumatic experiences in early life, a build-up of adversity and high-risk behaviours in adolescence and early adulthood, and recent stressful events”*.^{viii}
- 3.7. Some groups may also be at greater risk of suicide such as LGBTQ young people^{ix}.
- 3.8. Data on suicide is available from the Office for National Statistics (ONS) on suicide registrations and from the Public Health Outcomes Framework (PHOF) on suicide rates. When talking about suicide data it is important to remember that each statistic refers to a life lost and families and friends grieving for a loved one.
- 3.9. **PREVALENCE**
- 3.10. There were a total of 37 suicides in Merton during 2019–21 (9 in 2019, 18 in 2020, and 10 in 2021). The number of suicides in Merton for the last ten years has ranged from 9 to 20^x.
- 3.11. Rates per 100,000 population are calculated on a three-year rolling aggregate with the latest data available for the period 2019-2021. A three-year period is used because numbers can vary between years and rates are used to compare suicide rates between areas. In 2019-2021, Merton has a rate of 6.5 per 100,000 population which is similar to London (7.2 per 100,000) and significantly lower than for England (10.4 per 100,000)^{xi}. This rate has decreased slightly in Merton since 2015-2017, where the rate was 10.3 per 100,000. Rates have also declined slightly at a London level (8.6 in 2015-17 to 7.2 per 100,000 in 2019-21) but increased slightly in England (9.6 in 2015-17 to 10.4 per 100,000 in 2019-21).
- 3.12. The latest data on gender and suicide in Merton is available for 2018-20 (as a rate could not be calculated for women due to low numbers for 2019-21).

This found a rate for women of 4 per 100,000 compared to 10.2 per 100,000 for men^{xii}.

- 3.13. Earlier research (2017) to inform Merton's Suicide Prevention Framework found men aged 35-64 formed the largest group who died by suicide in Merton^{xiii}.
- 3.14. Nationally there has been concern about the pandemic increasing suicide rates. Although rates did not increase nationally during 2020, it is too early to know if there are any long-term impacts of the pandemic on suicide rates due to risk factors e.g. household employment and finance. We do know that rates of mental health issues went up during 2020, especially for young women^{xiv} and that lockdowns made mental health issues worse for those with pre-existing mental health conditions^{xv}.

Suicide Prevention Plans

- 3.15. England's Suicide Prevention Strategy 2012 requires all local authorities to have plans in place to address suicide. The Government's fifth progress report (2021)^{xvi} highlights the continuing importance of these plans.
- 3.16. Local plans should have two main objectives; to reduce the suicide rate in the general population and to support those bereaved or affected by suicide. Further guidance by Public Health England (now Office for Health Improvement and Disparities) highlights the importance of working to address suicide in high-risk groups including middle aged men and young people.
- 3.17. [Merton's Suicide Prevention Framework](#) provides a strategic overview to our Suicide Prevention Activity, which is then complimented with annual delivery plans. Staff in Adult Social Care, Integrated Care & Public Health work closely with staff in Children, Lifelong Learning and Families to develop plans. Governance is through the Child and Adolescent Mental Health Services (CAMHS) partnership board (young people) and Mental Health Programme Delivery Board (Adults). The Action Plan is led by Merton Council but as part of the multi-agency response includes actions from other local organisations such as South West London Integrated Care Board (SWL ICB).
- 3.18. The Framework takes a life course approach and has five key priorities
- Suicide prevention in high-risk groups
 - Reducing access to the means of suicide
 - Improving the mental health offer for targeted populations
 - Suicide prevention awareness and good mental wellbeing for all
 - Supporting those bereaved or affected by suicide
- 3.19. An annual action plan is developed with around 7-12 high value actions per year. The most recent plan is for 2022/23 (see appendix A), which focused on running a number of suicide prevention and Mental Health First Aid (MHFA) programmes. Whilst there is still some work to do in the last quarter of 2022/23, key achievements for this year include:

- MHFA awareness programme to Council managers and social workers with 121 staff trained
- MHFA awareness programme to community and voluntary sector partners with 64 representatives trained
- Suicide Prevention training to Council staff with 87 staff trained
- Suicide Prevention training programme to community and voluntary sector partners with 86 representatives trained
- Papyrus Suicide Prevention Training promoted to schools and those working with young people across SW London (SWL ICB)
- Extension of the 'Tuned In' music project by Libraries to include an extra evening session. The aim of the sessions is to connect people through a common love of music. Originally aimed at middle aged and older men, sessions are now open to all. The project also includes raising awareness and signposting to services on health issues.
- Awareness raising activity such as for World Suicide Prevention Day (10th September 2022)

SERVICES THAT SUPPORT PEOPLE AT RISK OF SUICIDE

- 3.20. Services can be incredibly important in suicide prevention, in raising awareness amongst our communities and encouraging good mental health and wellbeing; in listening to and supporting our most vulnerable residents and in encouraging hope and resilience to those in need.
- 3.21. Services that support people at risk of suicide can broadly be divided into preventative services at a community level, that may reduce risk factors around suicide such as welfare and benefits advice or services that support general mental wellbeing; services that may support a client or patient who is at greater risk of suicide, such as the work carried out by WDP (Merton's Adult Substance Misuse service) or by CAMHS to support a young person with mental health issues.
- 3.22. Services aimed at those in crisis or focused on suicide prevention such as the South-West London and St Georges Mental Health Trust (SWLSTG MHT) crisis line or Recovery cafes.
- 3.23. More detail on services available in Merton are provided in Appendix B. The support of Overview and Scrutiny members in promoting these services would be helpful.

ACTIVITY DURING THE LAST TWO YEARS ON SUICIDE PREVENTION

Including more detail on the work from the Merton Action Plan but also wider work of partners)

- 3.24. The Council through its local action plan and partners through their action plans (such as SWL ICB and SWLSTG MH NHS Trust) have taken a range of activity during the last two years on suicide prevention. The following provides an overview of activity.
- 3.25. **Mental Health First Aid (MHFA) Activity within the Council** Within the Council's workforce Public Health have worked with Human Resources to

train over 20 Mental Health First Aiders who can support Council staff and signpost to appropriate services. Human Resources have also commissioned training so that 121 Council managers and social workers have completed Mental Health First Aid Awareness training in 2022, to further support staff and those working with vulnerable residents. HR have also promoted suicide awareness training, with 87 Council staff trained during 2022.

- 3.26. **MHFA Activity with statutory, community and voluntary sector partners.** Merton public health have funded MHFA training including MHFA 2-day courses and MHFA awareness training. The latest training round during September to December 2022 saw representatives from 64 organisations trained in [Mental Health First Aid Awareness](#). This included staff from organisations such as AFC Wimbledon, the Community Fridge and local Food Banks, WDP and Faith in Action. SWL ICB and Primary Care have also funded MHFA training for their staff. This training is important as it provides information on mental health conditions, helps address stigma around talking about mental health and includes skills such as active listening for talking to someone who may need support as well as how to signpost to appropriate services.
- 3.27. **Suicide Prevention Training** – Merton Public Health have funded suicide prevention training. Courses took place during September to December 2022 and 86 representatives from Merton partner and community organisations were trained in suicide awareness and prevention. This included staff from Clarion housing association, WDP, YMCA Wimbledon, those working with domestic abuse and the community fridge project. Suicide Prevention training is important as it gives staff information on the risk factors for suicide and gives people the skills to feel confident to talk to and discuss the issue of suicide risk with a vulnerable person, as well as how to signpost to services.
- 3.28. **Rail** - Public Health have engaged with transport networks, such as Network Rail and South-West Rail regarding their suicide prevention strategies, training and measures implemented, especially for stations that historically may have been seen as 'higher risk'. All providers have regional or national suicide prevention strategies, training available for staff as well as partnership working with organisations such as Thrive LDN or Samaritans.
- 3.29. **Substance Misuse Safeguarding Training** on safeguarding and capacity considering suicide risk has taken place with those working with substance misuse clients, a high-risk group for suicide.
- 3.30. **Awareness raising.** World Suicide Prevention Day and [Zero Suicide Alliance training](#) have been promoted both to Council staff as well as to statutory, community and voluntary sector partners in Merton. We have also worked collaboratively with SWL ICB on communications and engagement aimed at middle aged men and suicide risk and raised awareness of Kooth support during summer exam results.
- 3.31. **SWL ICB Suicide Prevention Champions and outreach** – working with [MIND Brent](#), [Wandsworth](#) and [Westminster](#) work has taken place in South West London developing Suicide Prevention Champions and outreach to

raise awareness – with work aimed at middle aged men and more recently younger people.

- 3.32. **SWL ICB – Bereavement Support Activity** - Suicide Bereavement Liaison officer supports individuals and families bereaved by suicide and links them to relevant services. Support for people bereaved by suicide is incredibly important as evidence shows people bereaved by suicide are at greater risk themselves. On a personal level grief and ‘taboos’ around discussing suicide may make grieving difficult for the bereaved and they may feel isolated or not able to talk to family or friends. The Bereavement Support project has more recently included online and face to face peer support groups. Feedback from the worker involved has said this has been helpful for the bereaved, who can speak to and be understood by someone who has been through a similar tragic experience.
- 3.33. **SWLSTG MH Trust** – SWLSTG MH Trust have their own Suicide Prevention Action Plan. Activity on this which supports Merton patients includes;
- Risk Assessment Training (RATE) for all clinicians, ensuring suicide risk is considered and properly managed. This has been refreshed to ensure the voices of patients and carers are included.
 - Suicide awareness training for all service users of the Recovery College and their carers.
 - Ensuring psychosocial assessments (considering how social factors affect health outcomes) for adults who self-harm (as per NICE guidance) and flagging up in A&E of patients who self harm with timely interventions and follow up.
 - 48 hour follow up for those discharged from hospital to the community, with higher risk patients having face to face follow up or phone follow up for lower risk (this relates to risk of suicide being higher on leaving mental health hospitals).
- 3.34. **Westminster Drug Project (WDP)** – have carried out a range of activity around suicide prevention for clients in Merton. This has included
- Suicidal ideation and acts as well as acts of deliberate self-harm (historic/current) forms part of every comprehensive risk assessment and 3 monthly treatment review.
 - My Safety Plan’ templates created for use with service users to develop a safety plan if they experience a MH crisis including thoughts of self-injury or suicide.
 - All frontline staff trained in suicide prevention and Suicide Prevention Champions in team.
 - Mental Health First Aider in team.
 - Co-ordination with Mental Health Services on dual diagnosis.

Suicide Prevention Work Activity around young people

- 3.35. **Supporting young people who self harm or experience suicidal ideation protocol.** As part of the Merton Working Group for Self-Harm and

Suicidal Ideation including CAMHS, SWL ICB, CLLF and Public Health staff, an updated 'Merton supporting young people who self-harm or experience suicidal ideation' protocol following feedback from schools was produced. This includes practical guidance for professionals, as well as resources for sharing with young people and parents. It seeks to provide clear guidance on where to seek advice and steps to follow should a young person share that they have been self-harming or experiencing suicidal ideation.

- 3.36. **Mental Health First Aid (youth) courses** have trained up 16 staff as Mental Health First Aiders working with young people. This included a range of agencies working with young people including Spectra, Catch 22 and Tooting and Mitcham Football Club. Staff from schools included Raynes Park High, Wimbledon College, Ursuline Convent and Goringe also became MHFA's.
- 3.37. **SWL ICB during 2021 and 2022 have commissioned suicide prevention training with Papyrus to all secondary schools in South-West London.** Staff in Children, Schools and Families have helped promote this locally. Training included SP-EAK, a half day training that helps staff recognise the 'signs' that might indicate that someone is having thoughts of suicide, help to talk openly about suicide, how to listen to a young person and how to support safety and safety planning. During 2022 ASIST training from Papyrus was also commissioned for secondary schools, colleges and those working with young people. This is a two-day workshop training around suicide prevention for young people.
- 3.38. As part of their whole school initiative Merton CAMHS are carrying out the following projects.
- 3.39. **Promotion of CAMHS Crisis Line** – promotion activity has taken place including the voices of different services and stakeholders – this project looks to seek ways to promote the SLP CAMHS Crisis Line to young people, families and professionals. This is to reduce young people, families and professionals experiencing delay in accessing advice or guidance or inappropriately attending A&E in circumstances where immediate advice via crisis line would have been sufficient, which may risk detrimental experience as part of the journeys to accessing appropriate support and help.
- 3.40. **Webinars and Workshops.** Merton CAMHS are hosting webinars and workshops for Parents: webinars to parents across schools has included topics on supporting emotional dysregulation in children and adolescents, with discussion around support and resources for self-harm.
- 3.41. **Consultation and Thinking Together with Educational Staff:** weekly consultation and thinking together slots offered to educational staff to think about the needs of young people and families including those who may be self-harming or experiencing suicidal ideation, with guidance and signposting advice available.

4 NEXT STEPS

- 4.1. At the heart of our work we need to consider what we can do to raise awareness with our communities on suicide prevention, how we can reduce risk in those most vulnerable to suicide and how services can contribute to

this and how to support families, friends, schools and colleagues who may have been bereaved by suicide.

- 4.2. Our next steps are to develop a multi-agency Action Plan for 2023/24 to outline activity for the coming year. Merton’s plan will compliment plans across South West London and plans developed by other organisations e.g.SWLSGMHT.
- 4.3. We will set up a multi-agency Suicide Prevention Steering Group to develop our plans for 2023/24, with colleagues from across the Council including CLLF, C&H and Human Resources.
- 4.4. Our training offer e.g. suicide prevention training and mental health first aid is being finalised and will be promoted widely to partners, stakeholders and to all Councillors.
- 4.5. A Youth Mental Health First Aid (MHFA) Project aimed at young people, is being developed, which will target 16-18 year olds and aims firstly to make young people feel more equipped and confident in having conversations with friends/peers/family members about mental health, and signposting to appropriate services. It will also train staff and community members who have the greatest interaction with the young people being trained, so that they are confident in supporting the Youth MHFAs, giving them the confidence and practical skills to support and signpost appropriately. There will be an initial 75 young people, supported by 15 adults trained, followed by another 75 young people and 15 adults trained. Monthly online support for six months will also be provided

5 ALTERNATIVE OPTIONS

All local authorities are required to develop an action plan around suicide prevention. Activity is informed by good practice outlined in Government Guidance such as [‘Suicide Prevention: developing a local action plan’](#).

6 CONSULTATION UNDERTAKEN OR PROPOSED

- 6.1. N/A

7 TIMETABLE

Timetable	Activity
March 23	Set up Action Plan Steering Group
March 23 – April 23	Develop short action plan with partners
May 23 – June 23	Sign off of action plan for 23/24 and report on 22/23 action plan to Mental Health Programme Delivery Board and CAMHS Partnership.
June 23 to March 24	Delivery of Action Plan

8 FINANCIAL, RESOURCE AND PROPERTY IMPLICATIONS

- 8.1. SWL ICB have provided grant funding to all SW London Boroughs of £10,000 for suicide prevention project and £5,000 for youth self-harm project in 2022/23.
- 8.2. SWL ICB have received £323,848 in grant funding during 2022/23 for Suicide Prevention and £69,000 for suicide bereavement support from NHS England for suicide prevention activity, which delivers projects at SW London level such as bereavement support and Papyrus training. Plans are monitored and progressed by SWL ICB with SW London Boroughs through the SW London ICB Suicide Prevention Steering Group.

9 LEGAL AND STATUTORY IMPLICATIONS

- 9.1. The National Suicide Prevention Strategy “Preventing suicide in England: a cross-government outcomes strategy to save lives” (2012) requires all local authorities to develop a suicide awareness strategy or plan. The Office for Health Disparities and Improvement (OHID) London, monitor plans across London annually.

10 HUMAN RIGHTS, EQUALITIES AND COMMUNITY COHESION IMPLICATIONS

- 10.1. Suicide Prevention activity has positive impacts in terms of disability (mental health, long term conditions), gender (most suicides are in men although women are more likely to attempt suicide), age (young people, middle aged) and sexual orientation (LGBT).
- 10.2. People who live in more deprived areas are at greater risk of suicide, with those in the 10% most deprived being twice as likely to die by suicide than the 10% who are least deprived^{xvii}.

11 CRIME AND DISORDER IMPLICATIONS

- 11.1. It is important that we differentiate suicide and suicide prevention from crime and disorder. The language around suicide should also refrain from using ‘commit’ or ‘committed’ as organisations working on suicide prevention highlight this is linked to the historic criminal offence of suicide, which is stigmatising and hurtful for families who have experienced a family member die by suicide.
- 11.2. Both adults and young people known to the criminal justice system are at greater risk of suicide.

12 RISK MANAGEMENT AND HEALTH AND SAFETY IMPLICATIONS

- 12.1. Suicide Prevention training activity can provide awareness on how to listen, intervene appropriately and signpost to appropriate services. It has positive health and safety implications.

- 12.2. Human Resources are working collaboratively with Public Health around mental health training for Council staff and supporting wellbeing resources, which has positive health and safety implications for Council staff and service users.

13 APPENDICES – THE FOLLOWING DOCUMENTS ARE TO BE PUBLISHED WITH THIS REPORT AND FORM PART OF THE REPORT

Appendix A - Suicide Prevention Action Plan 2022-23

Appendix B – Suicide Prevention services

14 BACKGROUND PAPERS

- 14.1. None

ⁱ [Middle-aged men and suicide | Our policy and research | Samaritans](#)

ⁱⁱ [men-suicide-society-samaritans-2012.pdf](#)

ⁱⁱⁱ [NCISH | Suicide by middle-aged men - NCISH \(manchester.ac.uk\)](#)

^{iv} Gender and Suicide, Samaritans website available at [Gender and suicide | Our policy and research \(samaritans.org\)](#)

^v Gender and Suicide, Samaritans website available at [Gender and suicide | Our policy and research \(samaritans.org\)](#)

^{vi} Who is most at risk of suicide?" Office for National Statistics. 2017 [cited 15th Jan 2023]. Available from: <https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/articles/whomostatriskofsuicide/2017-09-07>

^{vii} State of Child Health Report, available at [Adolescent mortality – RCPCH – State of Child Health](#)

^{viii} Suicide by Children and Young People, Appleby et al, (2017) available at [NCISH | Suicide by children and young people - NCISH \(manchester.ac.uk\)](#)

^{ix} [NCISH | Suicide by children and young people in England - NCISH \(manchester.ac.uk\)](#)

^x Suicides in England and Wales by local authority [Internet]. Office for National Statistics. 2022 [cited 29 September 2022]. Available from: <https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/datasets/suicidesbylocalauthority>

^{xi} Suicide Prevention Profile, PHOF available at [Suicide Prevention Profile - OHID \(phe.org.uk\)](#)

^{xii} Suicide Prevention Profile, PHOF available at [Suicide Prevention Profile - OHID \(phe.org.uk\)](#)

^{xiii} Merton JSNA, Suicide and Self Harm in Merton (2017) available at [files \(merton.gov.uk\)](#)

^{xiv} Mental Health of Children and Young People in England 2020, Wave One available at [Mental Health of Children and Young People in England, 2020: Wave 1 follow up to the 2017 survey - NDRS \(digital.nhs.uk\)](#)

^{xv} Coronavirus: the consequences for mental health, MIND available at [the-consequences-of-coronavirus-for-mental-health-final-report.pdf \(mind.org.uk\)](#)

^{xvi} Preventing suicide in England: Fifth progress report of the cross government outcomes strategy to save lives available at https://assets.publishing.service.gov.uk/government/uploads/system/uploads/attachment_data/file/973935/fifth-suicide-prevention-strategy-progress-report.pdf

xvii “Who is most at risk of suicide?” Office for National Statistics. 2017 [cited 15th Jan 2023]. Available from: <https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/articles/whomostatriskofsucide/2017-09-07>

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