

<b>HEALTH AND WELLBEING BOARD</b>		AGENDA ITEM No. 7(a)
<b>11 DECEMBER 2014</b>		<b>PUBLIC REPORT</b>
Contact Officer(s):	Katharine Hartley – Consultant in Public Health	Tel. 01733 207157

## SUICIDE PREVENTION STRATEGY

<b>R E C O M M E N D A T I O N S</b>	
Katharine Hartley – Consultant in Public Health	<b>Deadline date : n/a</b>
The Board is requested to review and approve the strategy on behalf of Peterborough City Council.	

### 1. ORIGIN OF REPORT

- 1.1 The Cambridgeshire and Peterborough Suicide Prevention Strategy (Appendix 1) is the local response to the publication ‘Preventing suicide in England<sup>1</sup>’ - a cross-government outcomes strategy to save lives.
- 1.2 It was recognised that the suicide prevention strategy would not operate in isolation, but would support and complement other relevant strategies and local developments including:
  - The Crisis Concordat Declaration Group work being led by Police commissioners
  - The Cambridgeshire and Peterborough Clinical Commissioning Group Commissioning Strategy for the Mental Health and Well-Being of Adults of Working Age 2013 – 2016<sup>2</sup>
  - The Cambridgeshire and Peterborough ‘Emotional well-being and mental health strategy for children and young people 2014-2016’<sup>3</sup>
  - The Cambridgeshire and Peterborough Clinical Commissioning Group 5 year Mental Health Strategy – to be developed in 2014/15

### 2. PURPOSE AND REASON FOR REPORT

- 2.1 To present to the board the joint Cambridgeshire and Peterborough suicide prevention strategy and accompanying three year action plan (Appendix 1 and 2) detailing public health recommendations to reduce suicide in the local area, and specific actions to be taken in partnership and by individual agencies

### 3. LINKS TO THE HEALTH & WELLBEING BOARD STRATEGY/PLAN

- 3.1 The suicide prevention strategy enforces and helps to address the priority in the health and wellbeing strategy (2012-15) to ‘Enable good child and adult mental health through effective, accessible health promotion and early intervention services’.
- 3.2 There are several recommendations in the strategy that relate to this priority:
  - Suicide prevention training to individuals and people representing organisations likely to be in contact with people at risk of suicide.
  - The development of a locally-focused website for suicide prevention
  - Resources for professionals and individuals to aid self-help
  - Local awareness-raising campaigns - to raise awareness of sources of help, for example, debt management, relationship counselling, housing organisations and parent/children centres.

#### **4. PROPOSED APPROACH TO STRUCTURE AND GOVERNANCE**

- 4.1 Most partner organisations involved in local suicide prevention work across Peterborough and Cambridgeshire, therefore a joint Cambridgeshire and Peterborough suicide prevention implementation group will manage the implementation of the strategy.
- 4.2 The joint implementation group will report progress on an annual basis to the various partner organisations including the Peterborough Adult Mental Health Stakeholder Group, Public Health Board and Health and Wellbeing Board in Peterborough.

#### **5. KEY ISSUES**

- 5.1 There are around 15-20 suicides in Peterborough annually although this number fluctuates from year to year. The Public Health Outcomes Framework<sup>4</sup> includes 'suicide rate' as a national indicator. The suicide rate in Peterborough has increased in recent years. Data for 2010-2012 show that the suicide rate in Peterborough is significantly above both the England and East of England rates.
- 5.2 In line with national guidelines on preventing suicide, a multi-agency local suicide prevention strategic group was established to develop the suicide prevention strategy and three year action plan. The recommendations are based on six national priority areas for reducing suicide as well as local intelligence on suicides and risk of suicide:
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
- 5.3 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. An emphasis is placed on local needs assessments and consultation with partner organisations and service users to identify groups at higher risk of suicide and gaps in service provision.
- 5.4 Some examples of recommendations that address local need include:
- The development of bespoke suicide prevention training programmes for local organisations likely to be in contact with those at greatest risk of suicide
  - Restricting the means to suicide by recommending the erection of physical barriers on multi-storey car parks
  - Working in partnership and with the Crisis Concordat Declaration Group to improve access to support for people before, during and after mental health crisis.
- 5.5 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 - launched in September 2014.

#### **6. IMPLICATIONS**

- *Financial* - None noted
- *Legal* - None noted, however there are reputational implications for PCC not to own a suicide prevention strategy as this is expected as outlined in the national suicide prevention strategy.
- *Discrimination and Equality* - 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 in vulnerable groups with greatest risk

- *Human Resources* - Delivering the recommendations outlined in the strategy depends on good partnership working between all listed organisations including Peterborough City Council. Public health resources and Adult Social Care Communities Directorate resources in the form of personnel time commitment will be required.

## **7. NEXT STEPS**

- 7.1 The strategy and action plan will be circulated for information after sign-off by the Health and Wellbeing Board

## **8. CONSULTATION**

- 8.1 Consultation was made with partner organisations and with the Peterborough suicide prevention implementation group. 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.
- 8.2 The document has been discussed and approved by GP leads, the Governing Body of the CCG, CPFT, Police and Cambridgeshire County Council's Health Committee.

## **9. ANTICIPATED OUTCOMES**

- 9.1 The strategy directly impacts on the Public Health Outcome 4.10 'Suicide Rate'.
- 9.2 A baseline suicide rate (deaths by suicide and injury of undetermined intent) is set for the period 2009-2011 using pooled three year average data. It is expected that each area will report and compare the suicide rate on a yearly basis based upon 3 year pooled data.

## **10. REASONS FOR RECOMMENDATIONS**

- 10.1 The purpose of the strategy is to reduce suicides in Cambridgeshire and Peterborough through a series of recommendations and a three year action plan. Success will depend on partnership working to achieve the goals set out in the strategy and will require ongoing support and endorsement through Peterborough City Council Public Health and Adult Social Care

## **11. SOURCE DOCUMENTS**

1. National Strategy: Preventing Suicide in England, 2012:  
[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/216928/Preventing-Suicide-in-England-A-cross-government-outcomes-strategy-to-save-lives.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/216928/Preventing-Suicide-in-England-A-cross-government-outcomes-strategy-to-save-lives.pdf)
2. Cambridgeshire and Peterborough Clinical Commissioning Group Commissioning Strategy for the Mental Health and Well-Being of Adults of Working Age 2013 – 2016: [http://www.cpft.nhs.uk/Downloads/rod%20files/2013\\_08-16\\_CCG\\_Adult\\_MH\\_Commissioning\\_Strategy\\_2013\\_FINAL.pdf](http://www.cpft.nhs.uk/Downloads/rod%20files/2013_08-16_CCG_Adult_MH_Commissioning_Strategy_2013_FINAL.pdf)
3. Emotional well-being and mental health strategy for children and young people 2014-2016:  
[http://www.cambridgeshire.gov.uk/info/20076/children\\_and\\_families\\_practitioners\\_and\\_providers\\_information/370/providing\\_children\\_and\\_families\\_services/5](http://www.cambridgeshire.gov.uk/info/20076/children_and_families_practitioners_and_providers_information/370/providing_children_and_families_services/5)
4. Public Health Outcomes Framework:  
[https://www.gov.uk/government/uploads/system/uploads/attachment\\_data/file/216159/dh\\_132362.pdf](https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/216159/dh_132362.pdf)

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