

Suicide Prevention in Nottingham City Update for the Nottingham City Health and Wellbeing Board, January 2022

Purpose of the Report

The purpose of this report is to update on progress made on the approach to suicide prevention in Nottingham City, engage with partners on the Stakeholder Network, and seek approval for the refreshed suicide prevention action plan.

Recommendations

The Health and Wellbeing Board is asked to:

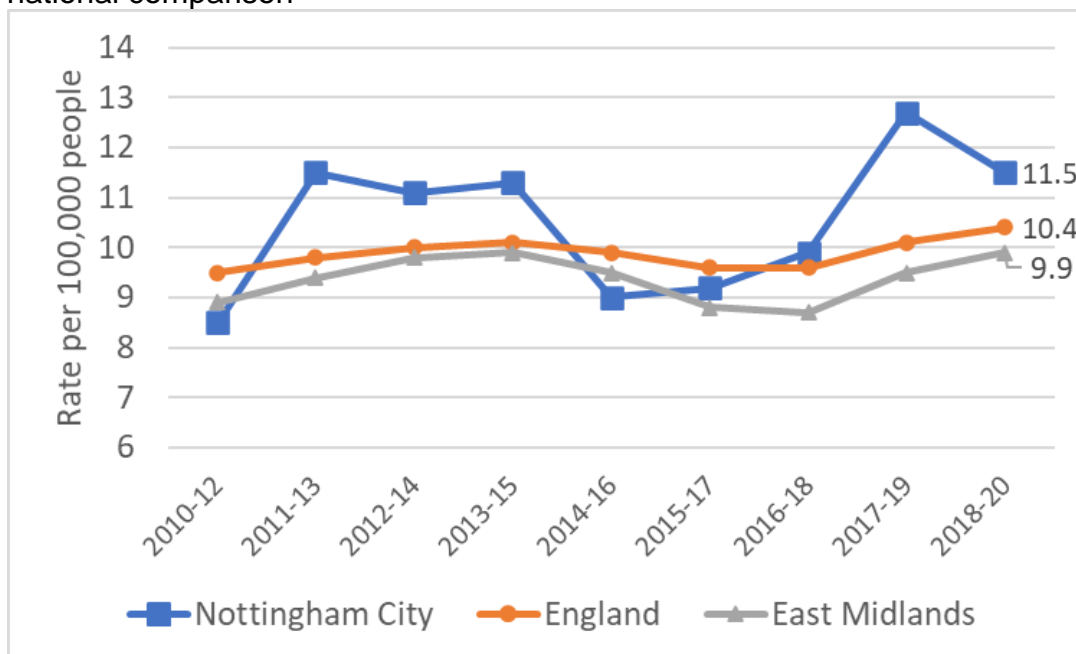
- 1) endorse the refreshed Suicide Prevention Action Plan; and
- 2) identify a named Mental Health Champion within each partner organisation who can assist with co-ordinating engagement with the Suicide Prevention Stakeholder Network, facilitate participation in the mental health and suicide prevention training needs assessment, and support embedding the suicide prevention activities across the system.

Background

1. Suicide has a significant, lasting, and often devastating impact – economically, psychologically and emotionally – on individuals, families, communities, and the wider society. Suicide is preventable and suicide prevention remains a national and local priority. Our aim is to reduce the rate of suicide and self-harm in Nottingham City by proactively improving population mental health and wellbeing, and by responding to known risk for suicide.
2. Suicide occurs within every population and across every demographic, but certain groups of people are known to be at a higher risk of suicide than the general population, including:
 - men aged 35-59 years;
 - people in the care of mental health services, particularly those recently discharged from inpatient care;
 - people with a history of self-harm and/or suicide ideation;
 - people in contact with the criminal justice system;
 - people who have experienced social pressures such as financial hardship, or breakdown of relationship;
 - people who use drugs and/or alcohol; and
 - those who experience abuse or discrimination, such as people who identify as Lesbian, Gay, Bisexual and/or Transgender (LGBT+); Black, Asian and Minority Ethnic (BAME) communities, and those with long-term health conditions and or disabilities.

3. There is a strong relationship between suicide and socio-economic deprivation. Those in the poorest socio-economic group are 10 times more at risk of suicide than those in the most affluent group.
4. Suicide rates are reported as 3-year rolling averages, as annual rates can fluctuate widely. **Figure 1** shows the 3-year average suicide rate per 100,000 people between 2010 and 2020 for Nottingham City, with a regional (East Midlands) and national (England) comparison. In Nottingham City, average suicide rates for 2018-2020 were slightly lower than 2017-2019, reducing to 11.5 from 12.7 per 100,000 people. The number of deaths by suicide in Nottingham City reduced from 99 in 2017-19 to 91 in 2018-20. By comparison, during this period, the England average rate marginally increased from 10.1 to 10.4 per 100,000 people. There is notable fluctuation of suicide rates across the time periods, and deviation from the national and regional rates in most years.

Figure 1: suicide rate per 100,000 people in Nottingham City with regional and national comparison



Source: Public Health England. Suicide Prevention Profile (2021)

5. The Office for National Statistics report annually on deaths by suicide. Due to the lengthy process with which these deaths are confirmed, a national real-time surveillance set up by University of Manchester (NCISH) allows for more current observation of suicide rates. This has provided some data for England from recent months, i.e., during the COVID-19 pandemic. According to NCISH preliminary figures, there has been no rise in suicides or self-harm incidents during or post-lockdown (April-August 2020) compared with pre-lockdown figures (January-March 2020). There was an increase of 7.3% of deaths from April-August 2019 to April-August 2020, which was in line with the overall increase in recent years and the development of real-time surveillance systems across the country.

6. The number of self-harm incidents is more difficult to quantify as these are mostly recorded through presentations to Emergency Department and other health services, some of which do not have a reliable mechanism for monitoring self-harm. Levels of self-harm have been closely monitored throughout the pandemic. It is believed that there has been a reduction in self-harm presentations to health services. The reasons for this are multifaceted, including changes to provision of healthcare, isolation due to COVID, lockdown and discouragement from attending Emergency Department.

Real-Time Surveillance (RTS)

7. In addition to nationally collected data, Nottingham City is part of the Nottinghamshire RTS system, established in February 2019, which enables Public Health to monitor and respond to suspected suicides and clusters, with the aim of preventing further suicides. The local Suicide Cluster Response Plan Guidance was developed to ensure the system is able to respond swiftly if any potential clusters are identified.
8. Currently, Nottinghamshire Police and the British Transport Police report potential suicide deaths to Public Health, who conduct a fortnightly review. A RTS Information System is being tendered for, due to be awarded in January 2022. This will enable easier production of routine and bespoke reports, reducing reliance on manual data analysis for real-time reporting of potential suicide deaths.

Suicide Prevention Strategic Steering Group (SPSSG)

9. The SPSSG has been constituted by the Nottingham City and Nottinghamshire County Integrated Care System (ICS) Mental Health Board, and the Health and Wellbeing Boards (Nottinghamshire County and Nottingham City). The SPSSG is responsible for the development and implementation of a suicide prevention strategy and plans across Nottingham City and Nottinghamshire. The SPSSG leads the joint Nottingham City and Nottinghamshire County suicide prevention strategy and monitors delivery of system wide suicide prevention activity, trends and patterns.
10. A key component of suicide prevention is to influence and inform populations, professionals, organisations and local businesses. Suicide prevention is everyone's business and effective delivery of the Suicide Prevention Action Plan requires a whole system approach. A Suicide Prevention Stakeholder Network is being developed with the aim of furthering the reach of the strategy and widening the opportunities to deliver on outcomes from the Action Plan. The Stakeholder Network will combine a range of statutory, voluntary and community sector and private sector organisations. The Network will provide access to front-line services and enable partners to shape the Suicide Prevention strategic direction and the progress and roll out of the Wave 4 programme. The first Network meeting is intended for February 2022.
11. A Further Education and Higher Education suicide prevention network has been established to share learning and best practice for suicide prevention among

students. The group owns an action plan which feeds into the SPSSG action plan, where appropriate.

Wave 4 Suicide Prevention Programme

12. The Suicide Prevention Strategy Group were successful in obtaining funding from NHS England Wave 4 Suicide Prevention Funding in November 2020. The Wave 4 suicide prevention programme is a three-year programme of NHSE funding. A Public Health and Commissioning Manager within Nottinghamshire County Council is coordinating this programme, working alongside Nottingham City Public Health officers. The programme will be underpinned by a clear evaluation framework, and co-production and participation of people with lived experience.

13. The Wave 4 programme is grouped into four themes aligned with the priorities within the Nottingham and Nottinghamshire Suicide Prevention Strategy (2019-23): competency, compassion, knowledge and skills; communications and public awareness; prevention support for high risk groups; and real-time surveillance.

Competency, Compassion, Knowledge and Skills

14. Design, development, and delivery of suicide prevention training is a clear focus to enable sustainability within the wider workforce. Nottingham City Public Health officers will be supporting the procurement and implementation of a mental health and suicide prevention training needs assessment which will engage with organisations across all sectors, people with lived experience and community champions.

15. Based on the findings from the training needs assessment, it is anticipated that some training will be commissioned via procurement of a Framework Agreement contract. Training may also be commissioned for the wider community and to support the development of a network of community champions for suicide prevention.

Communications and public awareness

16. As part of the Wave 4 programme, there is ongoing work to develop a recognisable brand and campaign with the whole population and targeted approaches to raise awareness and reduce the stigma around suicide. Communications will be developed with co-production groups to ensure service users, people with lived experience and service providers work together to produce effective resources and campaigns. Nottingham City Council's Communication and Marketing Team are leading on the design of this set of communications. The designs have been shared at the SPSSG and will be shared with the Stakeholder Network. Once the materials are at a suitable point, people with lived experience, and co-production groups will have the opportunity to give feedback.

Prevention Support for High Risk Groups

17. There is ongoing targeted delivery of support to people at risk of suicide including crisis and wider suicide prevention services. The 24/7 Mental Health Crisis Line offers immediate help to people of all ages experiencing a mental health crisis across Nottingham and Nottinghamshire. The Crisis Line is available 24 hours a day, seven days a week and ensures that people get the help they need when they need it most.
18. Nottinghamshire Crisis Sanctuaries provide mental health crisis support to communities across Nottinghamshire. The sanctuaries were developed after extensive consultation and engagement with a wide range of stakeholders, partners, and people with lived experience. The Crisis Sanctuaries are delivered through a partnership of Framework, Harmless, Turning Point and Mind. The Crisis Sanctuaries are open to anyone over 18 who are near or at a mental health crisis who need a safe space to talk. Each Crisis Sanctuary has 3 trained Crisis Intervention Workers who provide recovery-focused crisis support in a trusted and consistent space for people who require out of hours mental health support. Support can be provided in person, or if preferred via telephone or through video calling platforms.
19. Funding within the Wave 4 programme has been set aside for the provision of specialist and targeted suicide prevention and crisis support and also self-harm. A self-harm pathway mapping exercise and a suicide crisis pathway mapping exercise are being finalised and will inform the model for support, as will engagement with people with lived experience.
20. The local postvention suicide bereavement service continues to work with people who are affected by a suicide. This service was evaluated in July 2021.
21. The first wave of a small grants process will be launched before March 2022 to support community groups with small scale but high impact. It is hoped that grassroots organisations and community projects will be encouraged to apply for this funding to increase provision for people who may not engage with mainstream services, with the aim of reducing suicides within these communities and populations.

Suicide Prevention Action Plan Refresh 2021

22. The Suicide Prevention Action Plan has been refreshed. The refresh has been informed by a progress review against the current plan, in addition with the review of recently published documents and reports on suicide prevention at both local and national levels. The key updates to the action plan include actions related to governance and equality, Real Time Surveillance, service delivery and populations. The full Suicide Prevention Action Plan refresh is included in **Appendix 1.**

Priorities for 2021/22

23. The suicide prevention priorities for the partnership are:

- **Action 1: To support a consistent approach to suicide prevention, including endorsing the Suicide Prevention Action Plan refresh**
- **Action 2: To support the continued delivery of the Wave 4 suicide prevention programme and suicide prevention activities**
- **Action 3: To commit to further improving the knowledge, competencies and skills of the workforce in relation to suicide prevention**

Background Papers

NHS Long Term Plan, 2019

<https://www.longtermplan.nhs.uk/publication/nhs-long-term-plan/>

Nottingham City Council Suicide Joint Strategic Needs Assessment, 2018

<https://www.nottinghaminsight.org.uk/themes/health-and-wellbeing/joint-strategic-needs-assessment/adults/suicide-2018/>

Public Health Profiles: Suicide Prevention Profile, Public Health England

<https://fingertips.phe.org.uk/profile-group/mental-health/profile/suicide>

Nottingham City and Nottinghamshire Suicide Prevention Strategy 2019-23

<https://committee.nottinghamcity.gov.uk/documents/s98367/Suicide%20Prevention%20Strategy.pdf>

University of Manchester National Confidential Inquiry into Suicide and Safety in Mental Health – Suicide in England since the COVID-19 pandemic

<https://documents.manchester.ac.uk/display.aspx?DocID=51861>