

SET Strategy Implementation Workstreams

Summary

The scale of avoidable loss of life from suicide is unacceptable. In 2015, 4820 people were recorded as having died by suicide in England with a suggestion that the true figure is likely to be even higher.

Suicide disproportionately affects men, accounting for around three quarters of all suicides, but rates are rising in women. It remains the biggest killer of men under 49 and the leading cause of death in people aged 15-24.

SET are committed to reduce suicide rates by 10% against the 2016-17 baseline by 2020-21 in line with the national ambition set out in NHS England's Five Year Forward View for Mental Health

Suicide Prevention

Programme Working Group:
 Alfie Bandakpara-Taylor *BBCCG*
 Olabisi Williams *Mid Essex CCG*
 Maggie Pacini Public Health *ECC*

Suicide Prevention

Outcomes

- Reduce the risk of suicide in high risk groups
- Tailor approaches to improve mental health in specific groups.
- Reduce access to the means of suicide
- Provide better information and support to those bereaved or affected by suicide
- Support the media in delivering sensitive approaches to suicide and suicidal behaviours
- Support research, data collection and monitoring

Strategic Approach to Suicide Prevention

Outcomes

- SET strategic approach to suicide prevention follows the six areas for action in the national "Preventing Suicide in England" (HM Government, 2012) strategy.

Engagement:

CCGs
 Essex County Council
 Providers
 Clinicians
 GPs
 British Transport Police
 Voluntary Sector
 MH Ambassadors
 Service users

P'ship working between services for data collection /mapping exercise

Focus on services to support people who are vulnerable to suicide

Models of care with prevention strategies

SET Strategy Implementation Workstreams



Confirmed Projects

Suicide Prevention
Generic:

- Each of the workstreams to undertake impact assessment of their projects for impact on suicide specific risk groups
- Communications and social marketing – to include suicide prevention
- FU of CQC re ligature risk management – ongoing performance not project? Could be part of the adult acute / crisis or secure group agenda.

Suicide prevention specific

- Intelligence TFG
 - Audit – Funmi Worrel
 - Explore real time surveillance and performance metrics – Funmi Worrel
- Bereavement TFG
 - Explore support for professionals – Liesel Parks
 - Explore support for family & friends – Leisel Parks
- Media – main partner organisations communications leads to be contacted re guidance – Maggie Pacini
- Training TFG – explore suicide prevention training options - within general risk assessment/safeguarding but ideally to wider, non health workforce also – Maggie Pacini with Safeguarding leads

Barriers or support required

Other generic MH workstreams to consider impact assessment for higher risk characteristics within their proposed projects.

Commissioning delivery support from Gemma Andrews to above actions and leads.

Immediate Priorities & Enablers

Suicide Prevention

Clinical champion for suicide prevention in each workstream supported by the Suicide Prevention working group

Milestones

Generic

- Each workstream to complete SP impact assessments for each project (as per project milestones)
- Communications and social marketing – as per their milestones

Suicide prevention specific

- Audit – completed by end of July 2017
- Intelligence TFG – exploratory meeting by end of June 2017; further milestones tbd as agreed by that group
- Bereavement – exploratory meeting by end of June 2017; further milestones tbd as agreed by that group
- Media – main partner communications leads contacted by June 2017
- Training TFG – exploratory meeting with safeguarding leads May; further actions tbd as agreed at that meeting