

TITLE OF REPORT: **Integrated Care Partnership (ICP) Suicide Prevention Developments**

Purpose of the Report

- 1.1 The purpose of this report is to provide an update to the Gateshead Health and Wellbeing Board on the Public Mental Health approach to Suicide Prevention planning across Northumberland Tyne and Wear and outline the positive benefits for Gateshead from this partnership approach.

Background

- 2.1 Suicide prevention policy in the UK has, in recent decades, developed and expanded considerably as concerns around suicide rates have intensified. In 2012 the Government launched their integrated Government strategy “Preventing Suicide in England: a cross-government outcomes strategy to save lives”.¹ Since 2017 it has included a commitment to reduce the rate of suicides by 10% in 2020/21 nationally, as compared to 2016/17 levels.²
- 2.2 Since 2012-2014 suicide rates per 100,000 of the population nationally have been showing a downward trend. In 2015-2017 the rate for all persons in England was 9.6 deaths per 100,000 population, which is one of the lowest rates observed since the suicide data series began in 1981. However, findings for 2016-2018, released in October 2019, identify a slight increase in Males, up from 14.7 deaths per 100,000 population to 14.9 per 100,000.
- 2.3 Suicide is the leading cause of death among young people aged 20-34 years in the UK and it is considerably higher in men, with around three times as many men dying as a result of suicide compared to women. It is the leading cause of death for men under 50 in the UK. Those at highest risk are men aged between 40 and 44 years who have a rate of 24.1 deaths per 100,000 population.³
- 2.4 Gateshead has lower than Regional rates of Suicide and similar rates to England.

¹ Preventing Suicide in England: a cross-government outcomes strategy to save lives.

² Briefing Paper Number CBP 08221: Suicide Prevention: Policy and Strategy: House of Commons Library: 10 September 2018

³ Office for National Statistics (2017). Suicides in the UK: 2016 registrations. Available at: <https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarri...> [Accessed on 21/08/18].

- 2.5 Suicide rates in Gateshead had increased from 2010 – 2012 up until the reporting period of 2015 – 17 when there was a plateau for All Persons and a decrease for Women. The latest data release ⁴(October 2019) of 2016 - 2018 shows a positive downward pattern with rates per 100,000 population falling for the three categories; Persons, Males and Females (See **Appendix 1**).
- 2.6 In October 2018, the Public Mental Health Leads from Gateshead and Newcastle, attended the Integrated Care System (ICS) Zero Suicide Ambition Steering group. (one of the seven workstreams of the ICS Mental Health group). During this meeting Wave 2 NHS England Transformation Funding was discussed and the North ICP (Geography covering; Northumberland, Newcastle, North Tyneside, Gateshead, South Tyneside and Sunderland) was eligible to apply.
- 2.7 Part of the eligibility for funding was the existence and functioning of a multi-agency suicide prevention partnership. As Gateshead and Newcastle City Councils were represented at the meeting from the ICP locality, both Public Mental Health Leads agreed to take on the role of joint chairs and reform the former Northumberland, Tyne and Wear Suicide Prevention Partnership.

Progress to date

- 3.1. The first meeting of the partnership was convened on 14th December 2018 at Gateshead Civic Centre. Terms of Reference were developed alongside an Action Plan, detailing priority areas for funding identified by the group. The North ICP benefitted from the South ICP (Durham and Teesside) having successfully applied for Wave 1 funding and so had peer support to guide the developments. A number of workstreams were then identified including workstream leads to progress each area of work.
- 3.2. The bid was submitted at the end of March 2019 and confirmation of funding given in July/ August 2019.

- 3.3. Workstream updates:

3.3.1. Recruitment

- Suicide Prevention Coordinator recruited (Monday 7 October 2019). Post is hosted by Northumbria Police and jointly managed by Police and the two public health mental health leads. The post oversees the delivery of the Transformation Funding Action Plan and other areas for development around Suicide Prevention at the ICP geography.
- Suicide Prevention Data Analyst recruited (08/11/2019). Post is hosted and managed by Newcastle City Council Public Health team. This post is developing the real time data surveillance system.

3.3.2. Real time data surveillance system

- Discussions have been held around the process for a Real time data surveillance system so that suicide data can be collated in real time. The proposed data surveillance system can be found in **Appendix 2**. The

⁴ <http://fingertips.phe.org.uk/search/suicide>

decision taken to adapt this model was influenced by a review of the County Durham Early Alert system which identified areas for improvement in their current model. This model follows a population-based approach as opposed to individual case reviews.

3.3.3. Postvention support

- If U Care Share have been commissioned across Northumberland, Tyne and Wear, to provide bereavement support for family, friends and colleagues of those bereaved by suicide. This has been secured through additional Postvention funding made available by NHS England and topped up through CCG funding. Newcastle & Gateshead CCG are leading on this work.
- Postvention support offer will be a police led process; through the completion of the CID27 form, and then establishing the needs of the families and friends at the point of the First Response. Training will be facilitated by the Suicide Prevention Coordinator who will work with If U Care Share and the Police to establish training programme for First Responders.
- If the bereaved / Next of Kin refuses Postvention support at the time of first response, the Suicide Coordinator will follow up in a set timescale offering support.

3.3.4. Training Hub Development

South Tyneside Public Health Team have led the tendering process for a sub-regional Mental Health Training Hub. The training hub will provide Level 1, 2 & 3 training, and is based on Health Education England Competency framework for self-harm and suicide prevention.

The tender closed on the portal on Friday 17th January 2020. The provider will be notified January/February. It is anticipated that contracts will be signed, and the hub should be available by early April.

In the interim Suicide Prevention Coordinator to work with the Local Authorities to begin to identify the training needs in their areas.

3.3.5 Developing Safer Communities (Football Club development)

Newcastle United Foundation and Sunderland Foundations have been commissioned to develop a joint campaign rolling out the BeAGamechanger campaign.

#BeAGameChanger is a social marketing campaign using the power of Football in the North East as a vehicle for engaging men in conversations around mental health. This is achieved using a population-based approach to promote good mental health and reduce ill health. The aim of the campaign is to promote conversations about emotions and low mood to help improve mental health, and encourage help seeking behaviour where appropriate. Predominant target audiences are men under the age of 50. Using a range of mediums including social media platforms and podcast; traditional press (newspapers, radio, TV); match day activity; community

and workplace events, and a dedicated #BeAGameChanger webpage to encourage men to talk openly about mental health.

3.3.6. Small Grants programme

The panel for the grassroots projects was held in early December 2019. Out of a total of 60 applications, 20 were funded across the North ICP.

It is anticipated that those projects will have a very positive impact on the community. Projects included: podcasts for a radio station; a peer support group for me; a counselling service for visually impaired people; a forest school; a peace garden for veterans; a mental health resilience and intervention hub; a one off community event to help raise awareness of suicide prevention and to reduce the stigma around mental health and a weekend residential for autistic learners.

In the applications organisations were asked to provide details of how they would evaluate their projects. This included case studies from participants.

A meeting was held on 28th January 2020 to go through the contract the organisations will be required to sign, as well the evaluation process.

3.3.7. Self-Harm

Work around Self-Harm is still progressing after initial ideas tabled at Steering Group, around a Safety Planning Train the Trainer proposal, were deemed to be inappropriate use of the funding as this was already part of commissioned core business of the partners who were proposing the work and that the funding should be used to add value.

A decision was taken to review where we were going with this intervention and the Suicide Coordinator is pulling together a group to develop the work.

Next Steps

The next steps for the Steering Group will be:

- 4.1. **Development of an Action Plan for 2020/2021 and 2021/2022 funding.** The work programme outlined above will be reviewed / evaluated and decisions taken on the focus of the work for 2020/2021 with longer term thinking for 2021/2022.
- 4.2. **Development of a Logic Model to guide the Evaluation of the full programme.** Although evaluation has been built in to certain aspects of the delivery a Logic Model will provide a comprehensive approach to monitoring success of the programme.

4.3. Review the Real Time data Alert system and Postvention support. The system was developed to enable data to be available at the time of the incidents to enable action on data capture and support for people affected by the suicides. This will be reviewed and amended as necessary to help identification of prevention efforts.

4.4. Continue working on preventative programmes in the wider community
.Work has already started on developing safer communities through the introduction of a small grants scheme, the commissioning of BeAGameChanger and other initiatives and this preventative work will continue to be the focus of the group.

4.5. Sustainability of the work. Look towards sustainability of the model from 2022/2023.

Recommendations

5. It is recommended that the HWB Board:

- Note the progress on the continuing development of Suicide Prevention work at Northumberland, Tyne & Wear level.
- Note and support the planned next steps in developing this work at Northumberland, Tyne & Wear level;
- Note the benefits to Gateshead residents of working at this level.
- Receive an update report in 6 months time.

For consideration

The Gateshead Health and Wellbeing Board are asked for comments on the contents and the progress made to date, including the added value for the Gateshead area.

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Bibliography

1. Department of Health (2012): Preventing Suicide in England: A Cross Government Outcomes Strategy to Save Lives: London
https://www.gov.uk/government/uploads/system/uploads/attachment_data/file/430720/Preventing-Suicide-.pdf
2. Briefing Paper Number CBP 08221: Suicide Prevention: Policy and Strategy: House of Commons Library: 10 September 2018
3. Office for National Statistics (2017). Suicides in the UK: 2016 registrations. Available at:
<https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarri...>
[Accessed on 21/08/18].
4. Public Health England Fingertips Suicide Prevention Profile
<https://fingertips.phe.org.uk/profile-group/mental-health/profile/suicide>

Appendix 1 - Figure 1, 2 & 3: PHE Fingertips data

Suicide age-standardised rate for persons 15+ years: per 100,000 (3-year average)
Gateshead V's National and Regional data.

Figure 1 - Gateshead Suicide trends 2001 – 2018 (All Persons)

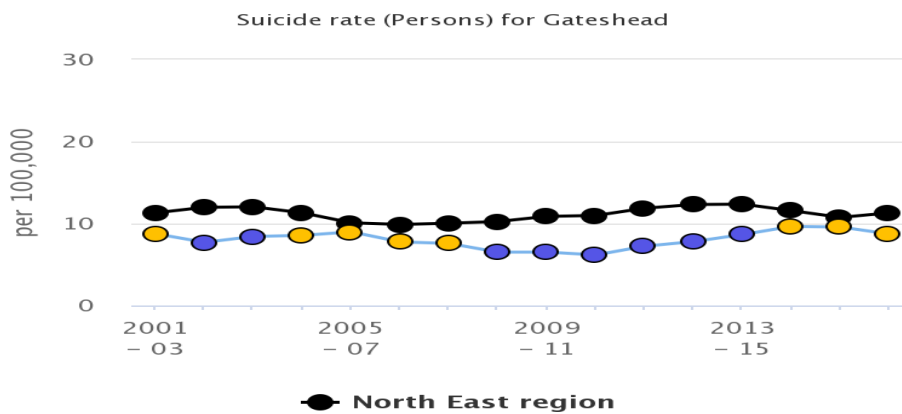


Figure 2 - Gateshead Suicide trends 2001 – 2018 (Male)

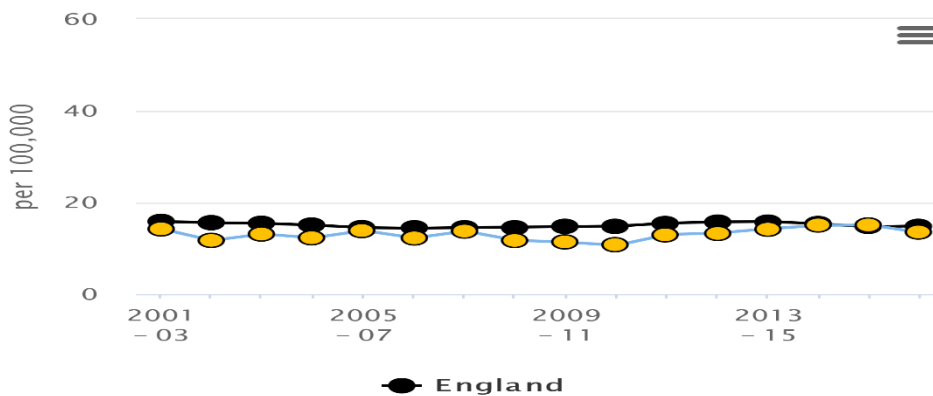
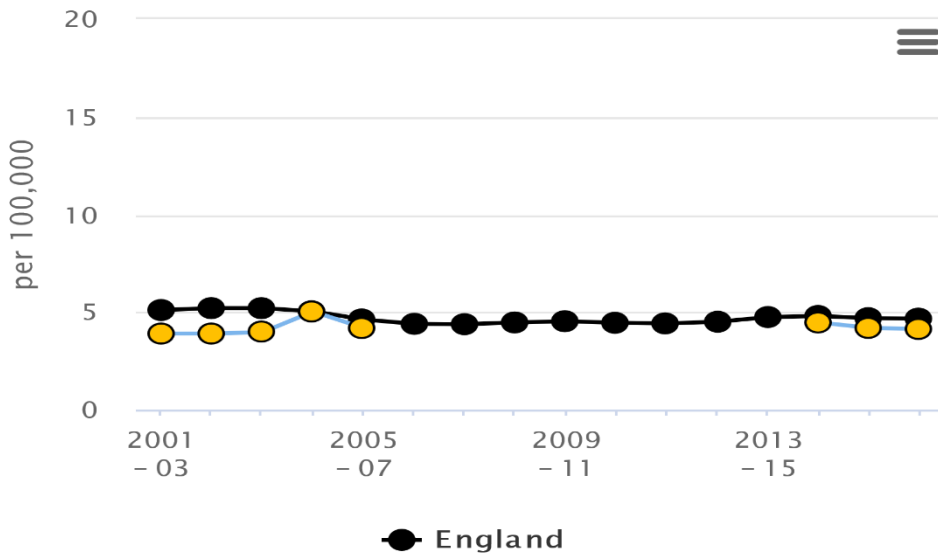


Figure 3 - Gateshead Suicide trends 2001 – 2018 (Female)



Appendix 2 - Northern Sub-regional Suicide Prevention Group's Real Time Surveillance System

See attached sheet