

DERBYSHIRE COUNTY COUNCIL

MEETING WITH CABINET MEMBER, HEALTH AND COMMUNITIES

22 December 2014

Report of the Director of Public Health

SUICIDE PREVENTION

1. Purpose of the report:

To inform members of the requirement for Public Health to take responsibility for co-ordinating suicide prevention work across Derbyshire, and the plans to undertake this responsibility

To gain approval for the procurement of Suicide Prevention Awareness Training, for a period of three years commencing from the financial year 2015/16.

2. Information and analysis:

In England, one person dies every two hours as a result of suicide, and the impact on family, friends and local communities can be devastating. The factors that cause an individual to contemplate suicide are complex, but suicides are not inevitable. Contributions to address suicide rates can be made by all sectors of communities, and adopting a community-based approach will require organisations and individuals to recognise the contribution they can make, in addition to the roles of statutory services provided by the NHS and local government.

The national Suicide Prevention strategy highlights six areas to support the aims of delivering a reduction in the suicide rate in England, and providing better support for those bereaved or affected by suicide:

- reduce the risk of suicide in key 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 behaviour
- support research, data collection and monitoring

2.1 Local information

The Derbyshire suicide rate has been significantly lower than the England rate for a number of years. In 2012, there were 52 suicides within Derbyshire (this figure excludes deaths from suicide in Glossop and does not include Derby City), and there has been a small increase in the number of deaths from suicide locally since 2008. Suicides are more common in males compared to females, and are a significant cause of death amongst young men. In 2012, the highest rate of deaths from suicide in Derbyshire was amongst those aged 70-79 years old. Most individuals who complete suicide do so in their own homes, and the most common method amongst males is hanging, and for females are hanging and drug overdose.

National research has shown an association between the areas of England worst affected by unemployment during the recent financial crisis and increased suicide rates. Numbers of suicides locally are too small to determine whether a similar association occurs in Derbyshire, but work is required to support those that continue to be affected by unemployment or welfare changes.

2.2 Responsibility for suicide prevention

Following the transfer of public health from the NHS to local government in April 2013, responsibility for co-ordination of suicide prevention lies with local authorities. The One Year On report called on local authorities to:

- develop a suicide prevention action plan
- monitor data, trends and hot spots
- engage with local media
- work with transport to map hot spots
- work on local priorities to improve mental health

Development of a local suicide prevention plan requires local authorities to work with key stakeholders. To work most effectively, local areas are recommended to map current practice and service provision and identify gaps.

2.3 Current position in Derbyshire

To explore the development of a community approach to suicide prevention work in Derbyshire, a Stakeholder Event was held on 8 October 2014. Approximately 80 individuals from a range of statutory, voluntary and community organisations attended the event, which was opened by Cllr Dave Allen, Cabinet Member for Health and Communities. Presentations followed by Keith Waters, Honorary Research Fellow in

Suicide Prevention and Self-harm, Derbyshire Healthcare NHS Foundation Trust and Rosie Ellis, National Suicide Prevention Alliance. The remainder of the event was dedicated to discussing the following key themes, with specific reference to identifying current local work, and gaps in current service provision:

- interventions to support vulnerable groups
- reducing self-harm behaviour
- supporting those experiencing distress and despair
- suicide prevention awareness raising and training
- building community and individual resilience

Representatives from the Public Health teams at Derbyshire County and Derby City committed at the event to provide strategic co-ordination for taking forward the suicide prevention agenda. This will include working with stakeholders to co-produce a joint Suicide Prevention Plan for Derbyshire (covering both Derbyshire County and Derby City).

The Plan will outline how different organisations across Derbyshire can contribute towards reducing the numbers of suicides. The Plan will identify interventions that have proven to be effective and should be considered locally, and will also be informed by the information gathered at the Stakeholder Event.

2.4 Suicide Awareness and Prevention Training

Suicide awareness training plays an important role in suicide prevention work, through challenging the myths and attitudes around suicide, and increasing the knowledge and skills of individuals to identify vulnerable individuals who may be at risk of suicide and signpost them to support.

Suicide Awareness and Prevention Training (SAPT) is currently commissioned by Derbyshire Clinical Commissioning Groups. With the transfer of responsibility for suicide prevention from the NHS to local authorities, commissioning has become the responsibility of Derbyshire County Council.

Training is currently provided by Rural Action Derbyshire (RAD) at a cost of £16,000 per year. The funding employs a project worker, and allows for delivery of training courses across Derbyshire. In 2013, ten half-day courses were attended by 229 attendees. Courses are delivered by RAD in conjunction with an experienced mental health clinician. Evaluation of the courses demonstrated an increase in knowledge amongst attendees, and also high levels of agreement that attendees were better able to identify likely suicidal behaviour and had an increased confidence in being able to support others having attended the training.

It is proposed that Derbyshire County Council continue to fund SAPT for an additional three years, and that a tendering process is undertaken to identify a provider.

3. Financial considerations:

Within the public health grant, there is a recurrent budget of £2,000 that will be used to support stakeholder engagement in developing and implementing the Suicide Prevention Plan for Derbyshire.

Additional funding of £16,000 per annum for a period of three years to procure SAPT will be supported from the existing public health grant.

4. Other considerations:

In preparing this report the relevance of the following factors has been considered: legal, prevention of crime and disorder, equality of opportunity, human resources, environmental, health, property and transport considerations.

5. Background papers:

Preventing suicide in England: A Cross-government outcomes strategy to save lives

Preventing suicide in England: One year on. First annual report on the cross-government outcomes strategy to save lives

Guidance for developing a local suicide prevention action plan: Information for public health staff in local authorities

Derbyshire Adult Mental Health strategy

6. Key Decision:

No

7. Call-in:

Is it required that call-in be waived for any decision on this report?

No

8. Officer's recommendation:

To note the responsibility for Public Health to co-ordinate suicide prevention work across Derbyshire

To agree to procure Suicide Awareness and Prevention Training, for a period of three years, at a cost of £16,000 per annum, commencing from the financial year 2015/16.

Elaine Michel
Director of Public Health