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Leeds Suicide Prevention Action Plan 2024 - 27 and Leeds Suicide Audit 2019 – 21

Date: 13 February 2024

Report of: The Director of Public Health

Report to: Scrutiny Board (Adults, Health and Active Lifestyles)

Will the decision be open for call in? ☐ Yes ☒ No

Does the report contain confidential or exempt information? ☐ Yes ⋈ No

Brief summary

- This report and supporting documents provide the Adults, Health and Active Lifestyles
 Scrutiny Board with an update and overview of the Leeds Suicide Prevention Action Plan
 (2024 27). This includes the approaches taken in developing the plan as well as updated
 national and local evidence base, data and guidance reports.
- The Leeds Suicide Prevention Action Plan (2024 27) sets out the direction and priorities for the city's suicide prevention agenda. This is a working document, used as a framework to guide local action and activity, citywide. It is overseen by the Leeds Strategic Suicide Prevention Group and reports to the Health and Wellbeing Board.

Recommendations

- a) To note the headlines of the report which includes the most recent data on suicide, references to the evidence base of what works to prevent suicide and findings from the latest Leeds Suicide Audit 2019 21.
- b) Have assurance on the Leeds Suicide Prevention Action Plan (2024 27), the collaborative approach taken in developing it and plans for delivery.
- c) Support Priority 6 of the Leeds Suicide Prevention Action Plan that Suicide Prevention is everybody's business whereby actions can be taken across all organisations in Leeds. These include a commitment to staff and volunteer suicide prevention training, becoming a West Yorkshire Suicide Prevention Champion and supporting suicide prevention campaigns.

What is this report about?

- 1 Leeds is committed to reducing the number of lives lost to suicide and every death is tragic, leaving a lasting devastating impact on families, friends and whole communities. Factors leading to someone taking their own life are complex, this is why no one organisation is able to directly influence them.
- 2 The Leeds Suicide Prevention Action Plan has been collaboratively developed by the Leeds Strategic Suicide Prevention Group. The group meets quarterly and brings together key strategic stakeholders from the city to oversee the delivery of the suicide prevention action plan for Leeds. The overarching principles of the group are to employ a whole-systems, life-course and evidence-based approach to leading the work. Organisations are represented due to their influence and impact on reducing the suicide rate in Leeds.
- 3 The Leeds Strategic Suicide Prevention Group has overseen several action plans, the most recent being 2018 21. This included;
 - Ensuring commissioned community health development services target men at risk of suicide including work with men living in tower blocks.
 - Providing suicide prevention training targeting those working with those most at risk.
 - Development and dissemination of help seeking support resources focussing on the wider determinants that can impact on mental wellbeing, including Crisis Cards stocked and distributed by the Public Health Resource Centre.
 - Securing recurrent funding for the Leeds Suicide Bereavement Service to offer postvention support.
 - Building capacity in the third sector by launching a small grants programme enabling third sector organisations to develop and deliver projects aimed at reducing risk of suicide in key groups. Between 2018 and 2021, £244,164 was allocated to third sector organisations delivering projects to prevent suicide.
 - Contributing and supporting the West Yorkshire Health & Care Partnership Suicide Preventions Strategy, including development and embedding of the Real-Time Suspected Suicide Surveillance work in Leeds.
 - Participating in national policy and debate on suicide prevention through making representations to the All Party Parliamentary Group (APPG) on Suicide Prevention.

Experience and outcomes from delivery to date and through connections across the region ensure we are continuing to build upon evidence-based programmes of work.

- 4 On 11th September 2023, the Government published the National Suicide Prevention in England 5 year cross sector Strategy with the overall ambitions to:
 - reduce the suicide rate over the next 5 years with initial reductions observed within half this time or sooner
 - continue to improve support for people who self-harm
 - continue to improve support for people who have been bereaved by suicide

This Strategy highlights the following 8 key priorities for action;

 Improving data and evidence to ensure that effective, evidence-informed and timely interventions continue to be developed and adapted.

- Tailored, targeted support to priority groups, including those at higher risk, to ensure there is bespoke action and that interventions are effective and accessible for everyone.
- Addressing common risk factors linked to suicide at a population level to provide early intervention and tailored support.
- Promoting online safety and responsible media content to reduce harms, improve support and signposting, and provide helpful messages about suicide and self-harm.
- Providing effective crisis support across sectors for those who reach crisis point.
- Reducing access to means and methods of suicide where this is appropriate and necessary as an intervention to prevent suicides.
- Providing effective bereavement support to those affected by suicide.
- Making suicide everybody's business so that we can maximise our collective impact and support to prevent suicides.
- 5 The national plan and national data are used alongside other key guidance documents. The Leeds Suicide Prevention action plan will remain live to ensure ongoing updates and newly released guidance can be used to support effective actions to prevent suicide in Leeds. These include;
 - Preventing Suicide in Public Places (Public Health England (PHE) 2015)
 - Identifying and Responding to Suicide Clusters and Contagion (PHE 2015)
 - Local Suicide Prevention Planning Guide (PHE 2016)
 - Suicide Prevention: a guide for local authorities (Local Government Association 2017)
 - Annual report 2023: UK patient and general population data 2010-2020 (National Confidential Enquiry into suicide and safety in mental health 2023)
 - West Yorkshire Integrated Care Board Suicide Prevention Strategy (2022 27)
 - Local Suicide Prevention Resources: Case Studies & Information sheets (National Suicide Prevention Alliance)
 - The NHS Long Term Plan (NHS, 2019)
 - Suicide Prevention Quality Standard (NICE, 2019)
- The most recent data (published by the Office for National Statistics in December 2023) shows that the Leeds suicide rate for 2020-2021 is 11.9 deaths by suicide per 100,000 population (down from 13.3 in 2019-2021). This new rate is lower than the West Yorkshire rate of 12.5 but higher than the England rate of 10.3 per 100,000.
- Our local action plan also uses local data to ensure actions and priorities are targeted and based on common risk factors and target populations in Leeds. These include the Leeds Suicide Audit (2019 21) published by Leeds City Council Public Health in November 2023 <u>Leeds Suicide Audit 2019 21</u> (also attached as appendix 3) and real time suspected suicide surveillance data supplied through partnership working with West Yorkshire Police.
- The Office for Health Improvement and Disparities (OHID) recommends every local authority carries out a Suicide Audit with the local Coroner's Office to understand common risk factors, demographics, access to services and methods for a local population who have taken their own life. The data also allows deep dives and further interrogation to help understand trends and help with targeting prevention activity. The Leeds Suicide Audit 2019 21 was published on the West Yorkshire Observatory in November 2023 and has been used to help shape the action plan. The Leeds Suicide Audit 2019 21 included;
 - 66% of the audit population were male
 - 72% of the audit population were either single, divorced, separated or widowed

- Considering age group population sizes, the 40 49 and 60 69 age groups had the same (highest) rates of suicide
- 26% of all suicides in Leeds occurred amongst people whose home postcode was in the 10% most deprived decile (using the Index of Multiple Deprivation and England deciles).
- 41% of the audit population lived alone
- 36% of the audit population had a recent or significant bereavement
- 43% of the audit population had a recorded previous suicide attempt
- 47% of the audit population had recorded misuse of either drugs and/or alcohol (with most being within the last 12 months)
- 11% of the audit population had contact with primary care a week prior to their death.
- 9 Real time suspected suicide surveillance data is shared from West Yorkshire Police on a weekly basis and ensures we are able to:
 - Offer timely postvention support and proactive outreach to those bereaved and/or affected by a suicide;
 - Monitor trends, locations and/or new and emerging methods;
 - Identify and respond appropriately to potential clusters in preventing contagion.
- 10 The Leeds Suicide Prevention action plan recognises the need to continue to monitor and respond appropriately to the suspected suicide surveillance data with the development of a community response plan (including cluster responses) that will be developed, tested and implemented where necessary by the Leeds Strategic Suicide Prevention Group.
- 11 In responding to the complexities of suicide and suicide prevention and to the wealth of evidence and data outlined above, it was imperative that a multiagency approach was taken so the action plan was developed in collaboration with a wide range of partners. An action plan template (using the national plan) was taken to the Leeds Suicide Prevention Network and a workshop was held on 24th October 2023, with a variety of organisations represented including the third sector, prisons and the criminal justice system, West Yorkshire ICB and NHS providers, Leeds City Council, the Coroners Office and those with lived experience of being bereaved by suicide. Colleagues presented data and group discussions were facilitated to understand priorities, what currently works well and what else could be developed to prevent suicide in Leeds.
- 12 This approach was replicated with members of the Leeds Strategic Suicide Prevention Group on 27th November 2023 which included Leeds City Council (Public health Public Mental Health and Children and Families, Communications, Highways and Safeguarding), West Yorkshire ICB, Primary Care, Third Sector, Coroner's Office, LYPFT and Universities.
- 13 A multiagency and cross sector approach allows us to remain focussed and ensure that data continues to be used to inform actions. This enables us to collectively maximise our finite resources to prevent future deaths.
- 14 The plan also contains actions and programmes of work that have been delivered in Leeds or other local authority areas with positive outcomes. This includes; the commissioning of postvention support linked to regional suspected suicide surveillance monitoring through the Leeds Suicide Bereavement service; and the annual third sector grants programme enabling local projects to be developed and delivered.

15 The Leeds Suicide Prevention Action Plan includes the following priorities:

I. Provide Effective Strategic, Citywide Leadership to Prevent Suicide

Including overseeing coordinated citywide approaches to communications, the facilitation of a suicide prevention network and influencing regional strategic work programmes.

II. Reduce the risk of suicide in key high-risk groups

Including working on community and ward level footprints to develop work programmes, taking settings-based approaches to identify and provide appropriate support to those who may be most at risk and providing a third sector grants programme to provide community led, prevention activities.

III. Provide evidence-based information and support to those bereaved or affected by suicide

Including the re-commissioning of the Leeds Suicide Bereavement Service, influencing the commissioning of and delivery of the West Yorkshire Suicide Bereavement Service and the development and implementation of a community response plan if and when a potential cluster is identified.

IV. Reduce Access to the Means of Suicide

Including the development of principles, guidelines and policy to minimise harm by the safe and sensitive removal of memorials and work programmes to be explored and developed with providers around safe storage for drugs and clinical assessment for supervised consumption.

V. Support the media in delivering sensitive approaches to suicide and suicidal behaviour

Including the monitoring and challenge of irresponsible media reporting and the continued development and sharing of appropriate language guidance and support for any organisation working on communications and with the media.

VI. Make suicide prevention everybody's business

Including ongoing development and delivery of campaigns, promotion of the West Yorkshire suicide prevention champions programme (<u>WY Suicide Prevention Champions</u>) and supporting a training offer targeting those who may work and/or volunteer with those at highest risk.

The Leeds Strategic Suicide Prevention action plan remains a live document and dates and actions may be subject to change at any point to respond to ongoing needs and/or capacity changes within lead organisations.

What impact will this proposal have?

16 The Leeds Suicide Prevention Action Plan takes an evidence-based approach to preventing suicide in Leeds. It recognises the wider determinants and co-existing common risk factors where action needs to be taken to prevent future deaths. The plan remains live and aims to prevent suicide in Leeds and of Leeds residents.

How does this proposal impact the th	nree pillars of the Best Cit	y Ambition?
	\square Inclusive Growth	□ Zero Carbon

- 17 Delivery of the Leeds Suicide Prevention Action Plan will support the delivery of key Public Health priorities, which will help deliver:
 - Leeds Health and Wellbeing Strategy (2023 -2030)
 - Leeds Mental Health Strategy.
 - Best City Ambition
 - Leeds being a Child-Friendly City by improving children's social, emotional and mental and wellbeing and supporting families to give the best start in life.
 - Leeds being an Age Friendly City to grow old in and a place where people age well

What consultation and engagement has taken place?

Wards affected: All			
Have ward members been consulted?	⊠ Yes	□ No	

- 18 Councillor Arif, Executive Member for Adults Social Care, Public Health and Active Lifestyles, was briefed on 12.1.24 and Elected Members attend the Leeds Suicide Prevention Network.
- 19 Engagement through the Leeds Suicide Prevention Network and Strategic groups ensures the development of the plan includes the voices of those with lived experience of being bereaved and affected by suicide as well as those who work directly with people who may be at higher risk of suicide.

What are the resource implications?

- 20 Suicide prevention is complex in its nature and requires capacity and engagement across partners. The Public Health team in Leeds City Council has the lead role in the strategic elements of action planning and data analysis in supporting the prevention of suicide.
- 21 The Leeds Public Health team also facilitates and provides capacity and resource to implement aspects of the plan including suicide prevention grants, the commissioning of postvention support, the commissioning of suicide prevention training and the leadership in delivering community responses. This is met through the Public Health grant.
- 22 Leeds City Council and partners take proactive approaches to prevent suicide focussing on the wider determinants of health, the built environment, communications and the delivery of specialist services.
- 23 Additional funds, resource and capacity would lead to increased activity and the opportunities to further prevent suicide.

What are the key risks and how are they being managed?

24 Changes in capacity and engagement from partners, either within the Strategic Suicide Prevention Group or the Suicide Prevention Network, could impact on the delivery of the Suicide Prevention Action Plan and prevention activities. Leeds Public Health continue to facilitate the Strategic Suicide Prevention Group and offer support to partners to ensure up to date data sources and the latest evidence base is shared, alongside the facilitation of further partnership working.

25 The conditions in which we are born, grow, live, work and age are shaped by our social and physical contexts and health, care and third sector services. These, in turn, are affected by the distribution of money, power and resources at global, national and local levels. The Leeds Suicide Prevention Action Plan aims to prevent suicides locally but cannot fully mitigate the impact of broader national or global incidents or policy.

What are the legal implications?

26 The Leeds Suicide Prevention Action Plan does not raise any legal implications. However, there is a need to ensure that legal compliance is in-built into relevant areas of activity supported or delivered by the programme and it is the responsibility of the lead organisation(s).

Options, timescales and measuring success

What other options were considered?

27 A collaborative approach using evidence and data from a variety of sources is deemed the most appropriate action as suicide prevention is everyone's business and to do otherwise risks future suicides.

How will success be measured?

- The Leeds Strategic Suicide Prevention Group will lead the plan and provide assurance to the Health and Wellbeing Board as required, escalating to them any concerns or issues that the group consider appropriate. Measuring impact in suicide prevention is complex and challenging and we may never know about suicides prevented.
- The ONS reported rate and annual numbers in Leeds (through suspected suicide surveillance data) provide the best indicators and will be used longitudinally. Other local indicators and outputs will be used to demonstrate impact of elements of the plan and they are included in the Suicide Prevention Action Plan.
- The number of suicides, suicide rates and median registration delays are reported by the Office of National Statistics (ONS) on an annual basis by local authority in England and Wales. Data was published in December 2023 for 2020 2022. Suicide mortality rates are shown as a three-year rolling average and are calculated using the number of deaths and mid-year population estimates provided by the ONS Population Estimates Unit.
- There are a number of caveats that need to be considered when using suicide data and rates including;
 - Data is based on the date of registration not the date of death. Changes in delays in registrations may show a higher or lower number of deaths in a period of time. Suicide rates are based on the year of death registration. Because of registration delays, 41% of deaths registered in 2022 had a date of death in the same year, 50% occurred in 2021 and the remaining deaths occurred in 2020 or earlier.
 - In July 2018, the standard of proof used to determine whether a death was caused by suicide was lowered to the "civil standard"; balance of probabilities. Previously a "criminal standard" was applied; beyond all reasonable doubt. Comparisons of before and after these dates should therefore be used with caution.
 - Comparisons are also difficult to make across different areas and local authorities due to differing infrastructures and populations. It is also difficult to understand changes in rates over time due to external factors beyond the influence of the local authority and partners

that impact risk and protective factors for suicide and mental health (eg COVID-19, war, cost of living etc).

What is the timetable and who will be responsible for implementation?

Timescales for implementation and delivery of different elements are included in the Suicide Prevention Action Plan

Appendices

- 1. Creating Hope through Language Helpful language guide (WY ICB)
- 2. The Leeds Suicide Prevention Action Plan 2024 27
- 3. Leeds Suicide Audit: 2019-2021

Background papers

N/A