Suicide Prevention Action Plan for Leeds 2024 – 2027

Suicide is a complex and devastating event and leaves lasting impacts on families, friends and entire communities. Each life lost to suicide represents a profound and heart-breaking tragedy. The Leeds Suicide Prevention Action Plan demonstrates the long-term commitment to suicide prevention in Leeds.

The action plan takes a public health approach to identify who might be at highest risk of suicide and takes a partnership approach to develop and deliver evidence-based initiatives to prevent suicide.

Working on and reading about suicide may feel upsetting and distressing.

The Leeds Strategic Suicide Prevention strategic group would like to remind readers of the support available through the Leeds Suicide Bereavement Service and Mindwell; a directory of support around mental health and wellbeing.

All details can be found at the bottom of this action plan.

Purpose

The Suicide Prevention Action Plan for Leeds sets out the direction and priorities for the city's suicide prevention agenda for the period 2024 – 2027. This is a working document, used as a framework to guide local action and activity, citywide.

This plan demonstrates citywide investment, ambitions and actions matched to key areas of action in line with national strategy and policy, the evidence base, the most recent Leeds Suicide Audit (2019 - 2021) and ongoing surveillance and insight.

The Suicide Prevention Action Plan is overseen by the Leeds Strategic Suicide Prevention Group (LSSPG). This is a citywide multi-agency group chaired by Public Health, Leeds City Council (PH LCC). The terms of reference (ToR) are reviewed annually to reflect the current work of the action plan, city priorities and emerging needs. The Leeds Strategic Suicide Prevention Group reports into the Leeds Health and Wellbeing Board.

Scope

The scope of this action plan is informed by priorities relating to local needs and recommendations from the National Suicide Prevention in England: 5-year Cross Sector Strategy published 11th September 2023 <u>Suicide prevention in England: 5-year cross-sector strategy – GOV.UK (www.gov.uk)</u>

The plan takes a life course approach to encompass work with children and families, working age adults and older people.

The plan ensures we coordinate proactive approaches to prevent suicide and minimise harm using data-led targeted approaches focussing on geographies, methods, demographics, protective factors and risk factors for suicide.

National Context

The National Suicide Prevention in England: 5-year Cross Sector Strategy 2023 – 28 highlights the continued need for national government effort, as well as continued action across the NHS, local government, the voluntary, community and social enterprise (VCSE) sectors, employers and individuals. The cross-government strategy aims to bring everybody together around common priorities and set out actions that can be taken to:

- reduce the suicide rate over the next 5 years with initial reductions observed within half this time or sooner
- improve support for people who have self-harmed
- improve support for people bereaved by suicide

Data, evidence and engagement with experts (including those with personal experience) has identified the following priority areas for action to achieve these aims. These are to:

- improve data and evidence to ensure that effective, evidence-informed and timely interventions continue to be adapted
- provide tailored, targeted support to priority groups, including those at higher risk. At a national level, this includes:
 - children and young people
 - middle-aged men
 - people who have self-harmed
 - people in contact with mental health services
 - people in contact with the justice system
 - autistic people
 - pregnant women and new mothers
- address common risk factors linked to suicide at a population level by providing early intervention and tailored support. These are:
 - physical illness
 - financial difficulty and economic adversity
 - gambling
 - alcohol and drug misuse
 - social isolation and loneliness
 - domestic abuse
- promote online safety and responsible media content to reduce harms, improve support and signposting, and provide helpful messages about suicide and self-harm
- provide effective crisis support across sectors for those who reach crisis point
- reduce access to means and methods of suicide where this is appropriate and necessary as an intervention to prevent suicides
- provide effective bereavement support to those affected by suicide
- make suicide everybody's business so that we can maximise our collective impact and support to prevent suicides

The National Strategy sets out over 100 actions led by government departments, the NHS, the voluntary sector and other national partners to make progress against these areas, particularly over the next 2 years.

The action plan for Leeds also draws upon this and other key guidance documents and will remain live to ensure ongoing updates and newly released guidance can be used to support effective action. These include;

- Preventing Suicide in Public Places (PHE 2015)
- Identifying and Responding to Suicide Clusters and Contagion (PHE 2015)
- <u>Local Suicide Prevention Planning Guide</u> (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
- <u>Local Suicide Prevention Resources: Case Studies & Information sheets</u> (National Suicide Prevention Alliance)
- The NHS Long Term Plan (NHS, 2019)
- <u>Suicide Prevention Quality Standard</u> (NICE, 2019)

Local Context

The Best City Ambition is the overall vision for the future of Leeds. At its heart is the mission to tackle poverty and inequality and improve quality of life for everyone who calls Leeds home. This will be achieved by focusing on improving outcomes across the 3 Pillars of the Best City Ambition; Health and wellbeing; inclusive growth; and zero carbon.

The health and wellbeing ambition is that by 2030 Leeds will be a healthy and caring city for everyone: where those who are most likely to experience poverty improve their mental and physical health the fastest, people are living healthy lives for longer, and are supported to thrive from early years to later life.

To realise this ambition, Team Leeds will focus on;

- investing to ensure better and more equal access to essential services in health and learning, developed with and accessible for every community across Leeds
- ensuring children in all areas of the city have the best start in life and enjoy a healthy, happy and friendly childhood
- delivering a safe and welcoming city for people of all ages and from all communities in which residents feel more secure and have good friends
- enabling every community in the city to have safe connected spaces, streets and
 paths to access a local park or green space, providing somewhere to be active and to
 play, helping to improve mental and physical health across all ages
- working with housing providers, landlords, tenants and communities to improve poor quality housing, so everyone can have a home which supports good health, wellbeing and educational outcomes

By its very nature and complexity, suicide prevention work cuts across each of these priorities and must take a city wide and system wide, Team Leeds approach.

Three drivers that have contributed intelligence and guidance in the development of this action plan are the national strategy, the findings from the Leeds Suicide Audit (2019 - 21) and real time suspected suicide surveillance data which is shared by West Yorkshire Police on a weekly basis.

The Leeds Suicide Audit 2019 - 21 provided information to ensure a targeted approach was taken. The full report can be found <u>Leeds Suicide Audit 2019 - 21</u> and the following was highlighted;

- 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 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.

Some populations and common risk factors will rely on wider drivers and local insight from partners. For example, for work with children and young people, the National Child Mortality Database report, <u>Suicide in Children & Young People is</u> a key driver, as low numbers of deaths of under 18s in Leeds means that it is not possible to use the local data sources to inform work.

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.

| | Priority One – Provide Effective Strategic, Citywide Leadership to Prevent Suicide in Leeds | | | | | |
|----------|--|--------------------------------|--|-------------------------------------|--|--|
| Overview | Action/Intervention | Lead Organisation | Progress (outcomes/milestones) | Timeline | | |
| Citywide | Lead an effective, citywide multi- agency strategic suicide prevention group (LSSPG) overseeing the delivery of the action plan. | LCC PH Leeds SSPG members | The Leeds Suicide prevention action plan reflects evidence based and innovative activity across the group from all (and wider) partners. | | | |
| | | | Quarterly meetings with minutes and actions from LSSPG and task groups. | Quarterly | | |
| | | | Annual review of the Suicide Prevention Action Plan for Leeds. | Annual | | |
| | | | The action plan and progress reported to the Leeds Health and Wellbeing Board and Leeds City Council Health Scrutiny Board when called to provide assurance on outcomes. | February 2024 and when called | | |
| | Lead the suicide prevention network (LSPN) providing opportunities to network, share best practice and embed evidence into work programmes across Leeds. | Leeds MIND LSPN members LCC PH | Quarterly meetings with guest speakers, sharing of best practice and local/national evidence-based interventions. Attendance and action log recorded and reported | Quarterly | | |

| Identify and influence funding opportunities, commissioning intentions and resources to prevent suicide in Leeds. | Leeds SSPG members | Successful applications, projects and services delivered in Leeds with outcome aims of improving wellbeing and preventing suicide | Ongoing |
|--|---|--|---------|
| | Leeds ICB Leeds City Council | Appropriate commissioned services support people in crisis and identify, address or signpost those at risk of suicide effectively | Ongoing |
| | Leeds SSPG members | SSPG members, elected members, system leaders and influencers advocate on behalf of suicide prevention approaches and have targeted activity in their local work plans. | |
| Oversee coordinated city and system- wide communication plans to raise awareness of suicide prevention messages | Leeds SSPG members via organisation communication leads | Delivery of campaigns and sharing of key messages through appropriate channels, to include; - World suicide prevention day - World mental health day - University Mental Health Day | Annual |
| | WY ICB Leeds ICB | Increased access to relevant support resources (e.g. West Yorkshire Suicide Prevention Web pages and Mindwell) | |

| | Oversee the implementation of appropriate suicide prevention subgroups including; • Children and Young People | LCC PH children and families team and The Samaritans | Develop partnership approach and deliver programmes of work to prevent suicide in children and young people. | Annual update |
|----------|---|--|--|---------------|
| | cimaren and roding reopie | | Advocate for Suicide Prevention work within CYP strategic partnerships (Future in Mind Board, Children's Population Board; Child Death Overview Panel; Leeds Safeguarding Children's Board) | |
| Regional | Contribute and influence regional strategic group and work programme development including: OHID Y&H Communities of Interest (COI) West Yorkshire Suicide Prevention Advisory Network (SPAN) West Yorkshire Suicide Prevention OG (SPOG) West Yorkshire Children and Young People Suicide Prevention meeting | LCC PH and VCFS reps | Ensure best practice is shared across local authority areas Influence strategic priorities and actions across West Yorkshire Maintain strong working relationships with regional colleagues and develop cross boundary work programmes where appropriate to maximise resource. | Ongoing |
| National | Proactively contribute to national policy and debate and attend relevant conferences, webinars and | Leeds SSPG members | Ensure local work reflects the national picture Ensure local data, intelligence, insight and best practice is shared with wider colleagues. | Ongoing |

| learning/sharing opportunities to prevent suicide. | | Lobby for data collection to enhance local priority setting e.g. Coroner collection of ethnicity data. | March 2024 |
|--|---|--|------------|
| Advocate for national funding to support place-based suicide prevention initiatives. | SSPG members LCC PH via executive members | Secure additional funding for suicide prevention activities regionally and locally. | Ongoing |

| Overview | Action/Intervention | Lead Organisation | Progress (outcomes/milestones) | Timeline |
|---|---|--|--|--------------------------------------|
| Identify high risk groups and understand common risk factors for suicide in Leeds. Monitor and provide appropriate responses where | influences local work programmes by identifying target/key high-risk groups | Leeds SSPG members LCC PH WY Police | Share findings through relevant channels to include: Publish audit on Leeds observatory and make available at PHRC Share audit with Suicide prevention network members Share audit with elected members and system wide decision makers | January 24 January 24 March 24 |
| suicide may have greater impact on others. | | LCC PH Leeds SSPG members | Complete and sign off SSS community response protocol and test with Leeds SPSG members. | March 24 |

| | | LCC PH | | |
|--|--|--------------------------------|--|---------|
| | | Leeds SSPG members | Implement appropriate and proportionate actions based on SSS response protocol. | Ongoing |
| | | LCC PH | Report high level report on an annual basis to LSPG members or sooner if cluster or high negative impact incidents occur. | Annual |
| | | LCCPH Leeds SSPG members | Provide additional relevant data to settings, teams or work programmes leads to ensure targeted interventions are developed and delivered. | Ongoing |
| Develop and deliver targeted work programmes to prevent suicide in | Ensure services working with those in high-risk groups promote help seeking and crisis support services and are confident in signposting and | Leeds ICB VCFS LYPFT | Develop and disseminate safe and effective help seeking support resources with frontline services including Mindwell, Mindmate and Crisis Cards. | Ongoing |
| groups identified as being at high risk and to mitigate risk associated with common risk factors | referring. | Primary Care All | Provide advice and consistent messaging to those working in frontline services to identify, prevent and support if and where appropriate – e.g. foodbanks and contact centres. | Ongoing |
| for suicide. | | | Work with Local Care Partnerships, Primary Care Networks and elected members in wards and communities where rates are higher, to deliver localised, targeted approaches. | Ongoing |
| | | | The delivery of targeted interventions in Leeds with outcome measures reported | |

| | =" | Annual report of Leeds grants provided to the SPSG highlighting the delivery of agreed outcomes towards the reduction of suicide rates in high-risk groups, as agreed with Leeds Community Foundation. | Annual |
|--|------------------------------|--|---------|
| To include; Leeds Suicide prevention grants Government Suicide prevention third sector grants | VCFS | | |
| Ensure tailored, settings-based approaches are taken to identifying those at risk and providing appropriate support and | Primary Care | Localised PCN activity developed and delivered. | Ongoing |
| interventions. | LYPFT | LYPFT Suicide and Self-harm prevention plan developed and implemented. | ТВС |
| High quality suicide prevention policies and staff training are in place and implemented in the health and care sector across Leeds. | LTHT/LCH | Connections made with LTHT and LCH to better understand opportunities for suicide prevention in the workplace and for patients. | Ongoing |
| | Higher Education Settings | Encourage and support all Higher Education Providers in Leeds to meet the principles of good practice within the University Mental Health Charter, and to achieve a Charter award. | |

| | | Prison and Criminal Justice Settings | Improve connections with prison and criminal justice settings in local area to understand suicide prevention approach, policies and training and identify opportunities for suicide prevention across the criminal justice pathway. | | | |
|---------------------------------|---|---|---|-------------------------|--|--|
| | | Leeds SSPG members | Suicide Prevention policies signed off and implemented. | | | |
| | | WY ICB | Health and Care staff are identified and receive appropriate, sensitive and relevant training to prevent suicide | | | |
| | Specific High-risk Groups Identified for 2024/25 | | | | | |
| a) Men aged 40- 49 and 60-69 | Ensure ongoing support and resource for organisations and services to directly target and engage men who may be at higher risk. | LCC PH VCFS (MHU) | Review impact of Suicide Prevention Grant projects targeted at men and share intelligence to inform future work focused on men. | Annually – September | | |
| | | | Scope work across the city that is targeted at men and explore how to amplify and target further resource. | | | |

| b) People with mental health problems and/or those in care of mental health | Suicide and self-harm prevention plan(s) developed and in place with partners who engage with and support people with both common mental health problems and those living with a serious mental illness | SSPG members | Partners to be identified and supported to develop plans inline with national and local evidence base and data Maintain links with Crisis services and community mental health transformation to ensure Suicide Prevention is considered in future model development and service delivery | Jan 24 – Jan 25 |
|---|---|-----------------------------|---|---|
| c) People experiencing relationship breakdown and loss | Ensure suicide prevention support is built into existing work programmes and services to support those going through a relationship breakdown and/or loss. | | Develop and deliver work programmes to support people going through relationship breakdown and/or loss. This may include (gender specific) peer support groups with counselling and legal support available. Awareness raising of issues faced by fathers also important in order for court agencies, schools, police, GPs to have greater awareness of needs and risks. | Ongoing |
| d) People with a previous suicide attempt or a history of self-harm | Develop a citywide self-harm group to identify and minimise harm and reduce stigma. | LCC PH and partners LCC PH | Develop action plan and report actions. Actions for Year 1 include: Conduct work to better understand current prevalence and demographics across the city. | June 2024 and ongoing Jan – June 24 Jan – Mar 24 |

| | | LCC PH | Conduct insight to capture lived experience of those who self-harm to inform future action plan and interventions. Develop or consider existing offers and deliver training on self-harm for frontline workers across Leeds. | Apr 24 – Mar 27 |
|------------------------------|--|--------|---|---|
| e) children and young people | Suicide Prevention plan developed and agreed by CYP SP Sub Group | LCC PH | develop skills to support those in crisis. Includes support for reviewing policies, staff training and promotion of crisis support offer. | 3 year funded programme – Oct 23 - Sep 26 |
| | | | Creating and promoting guide for schools who experience a death by suspected suicide of a pupil. | March 2024 |

| | | | Agreeing position statement regarding approach to suicide prevention within education settings. | October 2024 |
|---|---|---|--|-------------------------------|
| f) those with drugs, alcohol, gambling addiction(s) | Develop relationships with gambling and drugs and alcohol services to better understand existing processes and opportunities for service improvement. | LCC PH | Named representative of relevant services to sit on the LSSPG. Provision of deep dive / profiles for people with a history of drug and alcohol use who took/take their own life to be shared with services to map against existing processes and understand gaps. | March 2024 |
| Develop and deliver targeted work programmes and/or raise awareness of risk and support to prevent suicide in groups where local data does not identify higher risk but national evidence and research shows under-representation and greater | Provide support and opportunities to develop and deliver work programmes aimed at but no limited to; LGBTQ+ people, transgender and non binary people, those from culturally diverse backgrounds, carers, veterans, people in the perinatal period, separated fathers, older people and autistic people. | SSPG members VCFS VCFS and LCC PH WYICB and LCC PH | reflects Leeds population data • Suicide prevention training and/or | Ongoing March 2024 2024 |

| isolation/poor wellbeing. | ity Three - Provide evidence-based inform | ation and suppor | t to those bereaved or affected by suicide | |
|--|--|--|--|---|
| Overview | Action/Intervention | Lead | Progress | Timeline |
| | | Organisation | (outcomes/milestones) | |
| Use ongoing surveillance to identify areas for proactive outreach and intervention | Ensure pathways are set up and deliver proportionate actions through the Leeds Suicide Community Response Plan to those affected by suicide. | LCC PH, West Yorkshire Police and wider partners where identified | Implement plan and collate postvention support actions. Cluster identification processes in place, tested and cluster response led if identified. | March 24 Ongoing March 2024 Ongoing |
| Provide a suicide bereavement service for those affected by suicide | Ensure the Leeds suicide bereavement service continues to meet the needs of those bereaved by suicide and delivers effective postvention peer support, including a focus on family approaches. | Leeds MIND and LCC PH | Quarterly monitoring demonstrating effective outcomes and KPIs met. Review and recommission the suicide bereavement service from Jan 2025 in line with the West Yorkshire funded service. | Quarterly - Reported to Leeds SPSG annually January 2025 |

| | Influence the West Yorkshire commissioned suicide bereavement service and ensure Leeds residents are supported. | Quarterly monitoring – annual report shared with SSPG |
|---|---|--|
| Support partners, such as Higher Education Providers, to have in place a strategic approach to suicide prevention, which includes clear guidance to mitigate the impact of a suicide. | To include knowledge and awareness of appropriate services and referral and signposting pathways set up | Ongoing |

| Overview | Action/Intervention | | Progress (outcomes/milestones) | Timeline |
|---------------|---|-----------------------------|---|------------|
| Public places | Ensure high risk locations are identified and appropriate actions are taken to prevent future suicides. | The Samaritans and partners | Consider the development of a high-risk locations suicide prevention sub-group with noted actions reported and fed back. | March 2024 |
| | | LCC PH and SSPG members | Lead ongoing deep dive and action planning to prevent future deaths if a location is noted in the suspected suicide surveillance data and/or if West Yorkshire Police share suicide attempt data. | Ongoing |

| | Work in partnership with settings and organisations with ownership of highrisk locations to continue to monitor and implement actions to mitigate risk | LCC PH and SSPG members The Samaritans | Maintain relationships with British Transport Police, Network Rail, National Highways and Prisons. Provide support to audit and action evidence-based initiatives to mitigate risk. | Ongoing – annual report to the LSSP Group |
|--------------------------------|--|--|---|---|
| | Develop principles, guidelines and policy(s) to minimise harm by the safe and sensitive removal of memorials across LCC and partners. | LCC – PH and SSPG members | Current work includes mapping and delivery of interventions and opportunities at known high risk locations. | Jan – March 2024 |
| | | | Connections to be strengthened and continued with Highways, British transport Police and LCC City centre and Regulatory services. | Ongoing |
| | | | Principles and Guidelines or Policy to be tested, adopted and implemented | March – September 2024 |
| Mechanisms (e.g. ligatures) | Work in partnership with settings and organisations to reduce access to mechanisms e.g. ligatures. | SSPG Members | Continue to review mechanism risk management policies and share learning across relevant organisations. | Ongoing |
| _ | Work with partners to reduce access to pharmacological means of suicide. | | Explore opportunities to prevent medicines stockpiling and promote staff | Ongoing |

| | | LTHT | training on specific risks i.e. risks of helium use to end life. | |
|--|---|--------------|---|-----------------|
| | | Primary Care | Explore and develop opportunities to reduce access to pharmacological means of suicide, by following safe prescribing practices for pain killers and antidepressants. | Ongoing |
| Catalysts e.g. drugs and alcohol | Understand profiles of those who have used drugs and alcohol as part of their suicide and work in partnership with services to understand opportunities to mitigate risk further. | LCC PH | Work with Substance Misuse Services to implement action to reduce suicide risk for those in contact with services. | Jan 24 – Jan 25 |

| Priority Five – support the media in delivering sensitive approaches to suicide and suicidal behaviour | | | | | |
|--|---|-----------------------------|---|-----------------------------------|--|
| Overview | Action/Intervention | Lead Organisation | Progress (outcomes/milestones) | Timeline | |
| Promote sensitive and appropriate reporting | Ensure system wide comms leads are confident, knowledgeable and skilled in sensitively reporting. | LCC Comms The Samaritans | Resources shared and promoted with comms leads and media outlets for sensitive reporting. | January 2024 and Annual Review | |

| | | Sensitive language guide used as a reminder to anyone taking about Suicide. Creating Hope through Language | Ongoing |
|--|---|--|--|
| | | • • | March 2024 and repeated as need identified |
| | | | |
| Reduce the impact of negative, stigmatising or harmful reporting on suicide across all platforms including | The Samaritans and OHID | Report negative or insensitive reporting to the Samaritans. | Ongoing |
| online | National Union of Journalists and LCC PH | Launch and promote guidance for journalists developed by LCC PH and the National Union of Journalists | March 2024 |

| Overview | Action/Intervention | Lead Organisation | Progress (outcomes/milestones) | Timeline |
|-----------------------|---|-------------------|---|-------------------------------|
| Suicide Prevention | Provide and promote relevant and targeted suicide prevention training to front line staff to ensure | WY ICB | Deliver Papyrus SPOT, SPEAK and ASIST to those working with high risk groups | Contract until Summer 2024 |
| Training | confidence and skills in identifying and supporting those at risk | LCC PH | Monitor and support the Being You Leeds service to include the delivery of relevant training to those working with high risk groups Support other providers of training to be aware of Leeds resources and support Work with Leeds Survivor Led Crisis Service to implement commissioned training focussed on skilling up CYP workforce and improving understanding | Ongoing |
| | | | of crisis support. Promote uptake of other relevant training opportunities for frontline workers. | |

| Suicide Prevention Champions | Promote the West Yorkshire Suicide Prevention Champions campaign to create a network of individuals across different sectors and communities in Leeds with knowledge and skills around suicide prevention. | WY ICB LCC PH and partners | Support (a minimum of or an annual target of) 194 people in Leeds to become suicide prevention champions, one for every life lost reported in the 2019-21 suicide audit; each having completed the Zero Suicide Alliance suicide prevention training. | March 2024 |
|------------------------------------|--|-------------------------------|---|-------------------|
| Comms | Work with partners from across Leeds and West Yorkshire to promote relevant and appropriate suicide prevention campaigns, particularly targeting groups at the highest risk of suicide. | LCC comms and LSPN | Ensure targeted and system-wide delivery of the West Yorkshire ICB 'Check In With Your Mate' campaign in September (World Suicide Prevention Day). Promote additional campaigns where appropriate | Sept 2024 Ongoing |

There are many sources of support for anyone with concerns around Suicide

- Mindwell provides information on support available on mental health and wellbeing Home-MindWell (mindwell-leeds.org.uk)
- Leeds Suicide Bereavement Service provides support for anyone affected or bereaved by suicide <u>Suicide Bereavement Services Leeds</u> <u>and West Yorkshire Leeds Mind</u>

Leeds Suicide Prevention Action Plan 2024 - 2027