

Suffolk's Suicide Prevention Strategy

'**Suffolk Lives Matter**' is the name of Suffolk's Suicide Prevention Strategy and it was launched at the Health and Wellbeing Board's annual conference in October 2016.

It has 5 themes:

Reducing Suicide Risk: We will reduce suicide risk for everyone in Suffolk, particularly among social groups at higher risk, including: men, particularly those in mid-life and who are less well-off, people who are known to be depressed, people who misuse drugs, and/or alcohol and people who were born in Eastern Europe.

Supporting People at Greatest Risk: A small number of people are at greater risk of suicide due to severe mental distress and are in touch with mental health services. We will work together to make changes designed to prevent suicides among this group as they are at greater risk.

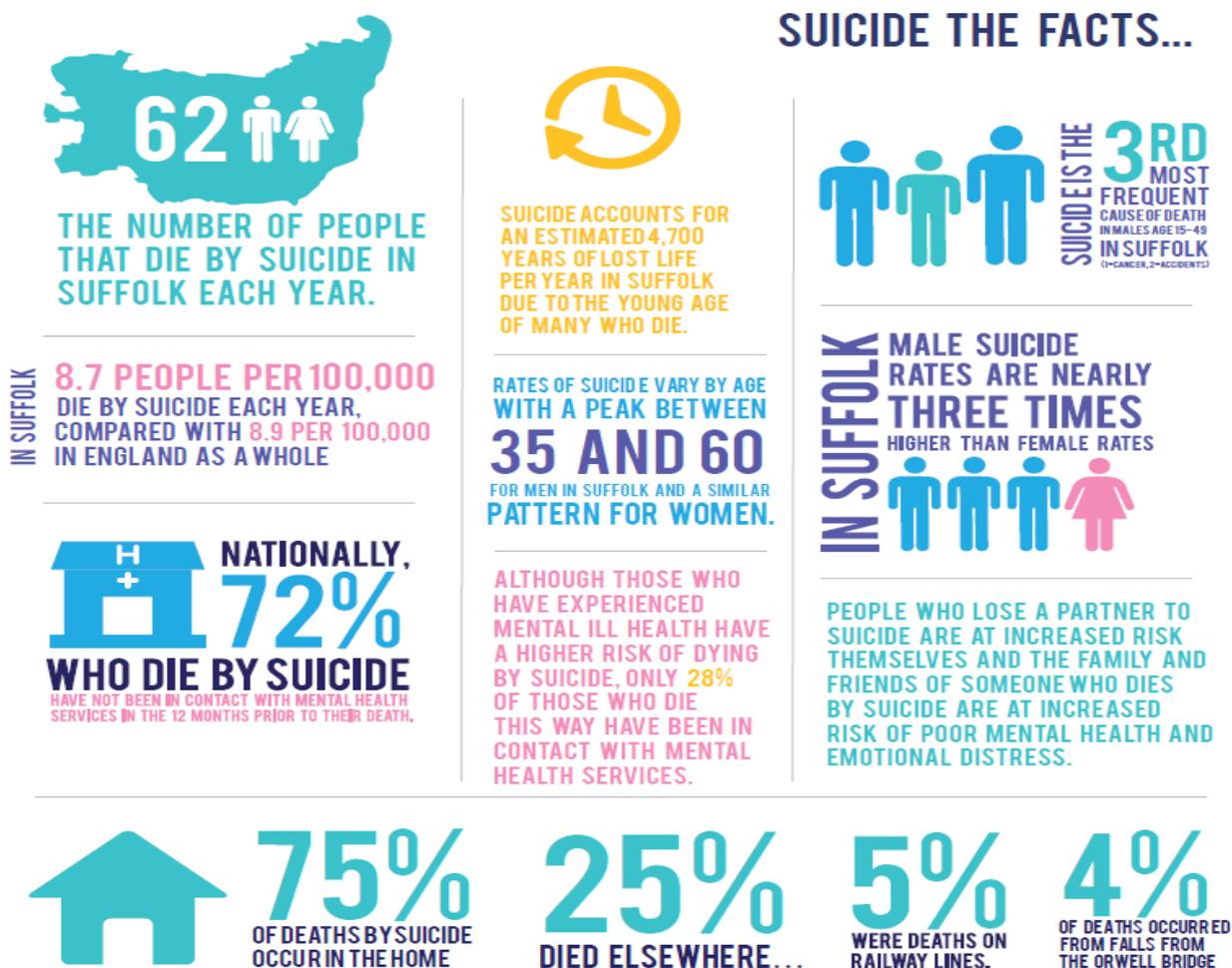
Taking Action Together: We have set up a suicide prevention task group with representatives from organisations that will influence suicide prevention across Suffolk. The group will agree a medium-term target for reducing the suicide rate and will produce an action plan to achieve this.

Improving How We Collect and Interpret Information: We will improve the way we collect and analyse information so that we understand more about suicide deaths and can use this information to inform our actions.

Working with People in Suffolk: We will work with key stakeholder organisations, service users and people bereaved by suicide to make sure that the action plan is realistic and is truly effective.

<https://www.healthysuffolk.org.uk/projects/suffolk-lives-matter>

Some Facts about Suicide in Suffolk



There are many factors which increase an individual's risk of suicide these include: a history of self-harm; trauma in childhood; being in contact with the criminal justice system; drug and alcohol misuse; unemployment and/or socioeconomic deprivation; being in contact with mental health services; being male; being Lesbian, Gay, Bisexual, Transgender or Queer and certain occupations (nurses, doctors, farmers/agricultural workers, veterinary workers and builders).

Progress to Date

Since the launch of the strategy there has been progress against each of the key themes and the aim to achieve the national target of a 10% reduction in the number of recorded suicides over the next five years. The work is complex and overlaps with other areas of mental health, physical health and wellbeing. Some of the achievements to date are:

- 1. Effective Partnerships:** By agreeing a series of priority actions, a partnership comprising Public Health, Norfolk and Suffolk Foundation Trust (NSFT), clinical commissioning groups (CCGs), police, Suffolk Coroner, Survivors of Bereavement by Suicide (SOBS), HealthWatch, Suffolk Mind and others we are working collectively to put the strategy into practice. Specific partnership initiatives include work with The Samaritans to support schools and colleges, influencing the work of the Highways Agency to reduce risk at the Orwell Bridge and work with the British

Transport Police to learn from their effective approach to decrease rail deaths by suicide.

2. **Data Surveillance System:** A key element of the strategy is to build effective means of sharing information and taking targeted action based on deaths by suicide and suicide attempts. We are collecting a significant amount of information from colleagues at Suffolk Police, NSFT, A&E departments and others and improving the procedures to share this information in a secure way. A database is being developed which will collate attempted suicide incidents as well as providing early warning about potential suicide risks. Once in place the information collected and recorded will be used to target efforts at specific hotspots in Suffolk: areas with a greater prevalence of suicide. Two such areas are Lowestoft and Newmarket. The database is likely to go live in early summer 2018.
3. **Suicide Prevention Training:** By the end of March 2018 nearly 500 frontline professionals from a range of organisations – from housing to health and Suffolk Fire and Rescue – across the county will have been trained in the world class Applied Suicide Intervention Skills Training (ASIST). This is a crucial part of our aim to equip professionals, and those in the community who have regular contact with the public, such as faith organisations and charities, with the necessary skills to prevent suicide. More than one individual has reported putting their training into practice, in one case actively talking someone down from a suicide attempt.
4. **Suffolk Life Savers Campaign:** In February 2017, Public Health, alongside its partners, launched a countywide campaign to encourage people to speak more openly about suicide and to raise awareness of the support available. Suffolk Life Savers invites people to pledge their support with a commitment to play their part. In return, they receive an information pack and regular updates to share with friends and colleagues. To date, over 200 people have signed up to the scheme. The first stages focused on men aged 40-60 as the group at single greatest risk, and it is envisaged that this will continue to include other at risk groups over the coming months, including children and young people and Eastern European men.
5. **Launch of 5 Ways to Wellbeing Resources:** Part of any strategy to support a reduction in suicide requires efforts to reduce the overall risk of suicide for the whole community. As it is sometimes extremely difficult to know for sure who is at greatest risk of suicide, an environment that is sensitive to mental health issues and that supports good mental health is essential.

Five Ways to Wellbeing is an evidence-based set of principles which individually and cumulatively improve general wellbeing for individuals and the communities in which they live. The five principles: Connect; Give; Keep Learning; Be Active; Take Notice; provide many opportunities to de-escalate low level mental health and wellbeing concerns and can together create a wealth of resource to keep individuals safe.

On 25th February 2018 a bundle of '5 ways to Wellbeing' tools were launched in Suffolk and are available on the Healthy Suffolk website: [Fives Ways to Wellbeing](#)

These tools are for all to use; individuals, statutory sector, voluntary and charity sector, businesses and workplaces. Many organisations use some elements of the model already, but the promotion aims to increase the amount of use. An audit in 12 months time will determine how widely the resources and principles are being implemented and like '5 fruit and vegetables a day' we would look forward to everybody in Suffolk understanding the principles and enacting them when they

can. Together we could develop a mutually beneficial system of support that covers the whole county.

- 6. Suicide Liaison Service Pilot:** Currently Suffolk has around 62 deaths by suicide each year, it is estimated that for each suicide death, around 10 people will suffer a severe impact as a result; which would suggest that at least 620 people in the county are affected each year. People bereaved by suicide are at high risk of taking their own lives both in the short term and the long term.

A suicide liaison service aims to alleviate the distress of those bereaved, prevent copycat suicides, reduce the economic cost and support a community response to any suicide clusters/ contagion.

Currently resources are being identified to commission a suicide liaison service pilot that would operate seven days a week in partnership with key stakeholders.

It would identify people who have been bereaved by suicide as soon as possible after the death and would provide accessible information and timely support to all those bereaved by suicide.

The service would aim to contact the bereaved family by telephone within 24 hours of the initial notification and this first contact would introduce the service and arrange a time to visit in person as soon as possible. The first face to face visit would typically be before the funeral, with a second visit after the funeral and then a third and final visit to link the family with local services. The liaison worker would continue to stay in touch with the family for up to a year afterwards via telephone and would be able to support them up to and through the inquest process if there was no other suitable support in place.

The service would be informed about suspected suicide deaths and bereavement by the police and by NHS staff, and would also accept self-referrals.

Using the service would of course be optional and people who decline would be informed that they can re-contact the service in the future if they feel they could benefit.

Similar services already exist in Cheshire and Merseyside (the 'Amparo' service provided by the charity Listening Ear) and in Cambridgeshire and Peterborough (provided by Lifecraft) and have shown benefit within 12 months.

Report Author:

Lynda Bradford

Head of Health Improvement (Prevention, Healthy Lifestyles and Quality) Public Health,
Suffolk County Council