

Health and Wellbeing Board

Report title: Lewisham Suicide Prevention Strategy and Action Plan

Date: 14th December 2022

Key decision: No

Class: Part 1

Ward(s) affected: All

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Outline and recommendations

The purpose of this report is to update the Lewisham Health and Wellbeing Board on the work that has been completed to create the Lewisham suicide prevention strategy.

The Health and Wellbeing Board are recommended to:

- Note the contents of the report
- Note the findings from the Suicide Audit
- Agree the strategy and action plan for the borough from 2022-2025

Timeline of engagement and decision-making

Initial meeting of the suicide prevention task and finish group - 4th November 2021

Public consultation with Lewisham residents of knowledge of suicide prevention approaches -9^{th} May -10^{th} June 2022

Final meeting of the suicide prevention working group and sign off of action plan and audit – July 2022 (virtual)

1. Recommendations

- 1.1. The purpose of this report is to update the Lewisham Health and Wellbeing Board on the work that has been completed to create the Lewisham suicide prevention strategy.
- 1.2. The Health and Wellbeing Board are recommended to:

- Note the contents of the report
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2. Summary

- 2.1. In 2019, Lewisham Council launched its two year suicide prevention strategy, to lead a system-wide approach to reducing suicide by working collaboratively with partners.
- 2.2. The COVID-19 pandemic interrupted activity related to this public health crisis.
- 2.3. Late in 2021, the suicide prevention task and finish group were convened to consider progress against the 2019 strategy, oversee a suicide audit and develop a strategy and action plan.
- 2.4. The task and finish group consulted the local community to understand their experiences of suicide prevention, held focus groups to seek the views of those who have experienced the services and support around suicide and suicide prevention, and considered and interpreted the data that was presented in a suicide audit.
- 2.5. The task and finish group were able to produce an action plan and strategy based on the feedback gained from the activities described in section 2.4.

3. Background

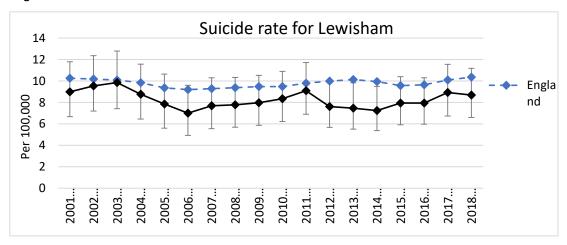
- 3.1. In 2019, the Health and Wellbeing Board agreed the Lewisham Suicide Prevention Strategy 2019-2021. It was approved with a drive for collective action to:
 - Contribute to a national 10% reduction in the suicide rate by 2021
 - Provide better support for those affected by suicide in Lewisham
 - Raise awareness of suicide prevention in Lewisham among the frontline workforce and wider community
- 3.2. Progress since the 2019 strategy and action plan has been slower than planned, but has seen important developments:
 - The Council's public health team has access to anonymised data from the Police and Thrive London on those who are recently bereaved by suicide – the real time surveillance system (RTSS). This allows partners to respond rapidly to support those who may be at risk of suicide themselves after suffering bereavement.
 - The rates of suicide declined as a result of the pandemic, although the reasons for this remain unclear.
 - The importance of mental health and responding to poor mental health as a risk factor for suicide has become a priority for the government since the pandemic.
 - University Hospital Lewisham's emergency department has a RedThread youth worker embedded in the setting as a link for those young people who are attending for a range of reasons, including self-harm which is a risk factor for suicide in younger people.

4. Findings from the Lewisham Suicide Audit 2022

- 4.1. A suicide audit was performed to inform the development of the Lewisham Suicide Prevention Strategy for the next four years. The audit looked at data from 2019 to 2021 (where available) from the primary care mortality database (PCMD and real time surveillance system (RTSS). The findings of the audit are summarised as follows:
- 4.2. Lewisham has lower suicide rates in comparison to rates for England. Although lower

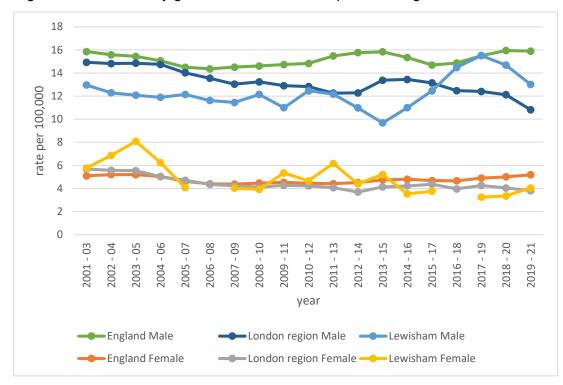
overall, since 2014/16 the rate has been steadily increasing, with a minor decline during 2020/21 which may be as a direct impact of COVID.

4.3. Figure 1: Suicide rate for Lewisham



Source: PHE Fingertips

- 4.4. Suicide rates by gender in Lewisham follow the same pattern as London and England patterns. Males experience a higher rate of death from suicide in comparison to females (see Figure 2).
- 4.5. Figure 2 Suicide rate by gender in Lewisham compared to England



*please note gaps in Lewisham female data relate to gaps in data from the source (i.e. figure not know)

Source: PHE Fingertips

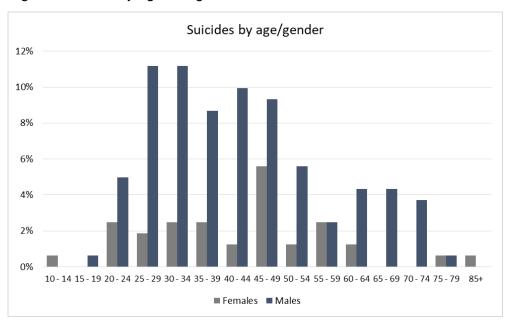
4.6. The national strategy identifies middle aged men and children and young people as

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having the highest risk of death by suicide. In Lewisham, the highest rates are in males aged between 25 and 49 years old.

4.7. Figure 3 Suicide by age and gender in Lewisham



Source: PCMD

4.8. Further detailed information can be found in the Suicide Audit attached at Appendix 1.

5. Suicide Prevention Strategy 2022-25

- 5.1. The strategy was developed with key stakeholders who were part of a task and finish group. The group discussed findings from the most recent suicide audit, evidence based practice and expert feedback from those working locally with Lewisham communities. A public consultation and focus group were conducted over the summer of 2022 to enrich and enhance the evidence and data gathered.
- 5.2. Every death by suicide in Lewisham is one too many. Suicide is a preventable cause of death with devastating impacts. The vision for the strategy is that no one in Lewisham takes their own life.
- 5.3. During the spring of 2022 (9th May to 10th June 2022) the Council ran an online consultation for the residents asking questions about knowledge of suicide prevention interventions and training. The consultation received a total of 89 responses, two thirds of respondents were female (66%), and the majority self-reported as white ethnicity (84%).
- 5.4. Respondents felt we could do more by having promotional material available, and by running prevention sessions in community spaces, free of charge, for residents to attend. There was a feeling that in order to create more open discussion about suicide in the community, there needed to be more mental health support, including recruiting and training allies, faster access to services, early identification of escalating mental health concerns, and removing stigma to have the conversations.
- 5.5. During a focus group with those who have been bereaved by suicide, there were a number of times when they could see that their family member needed help and support, but didn't feel there was a strong and impactful intervention that really helped to tackle the underlying reasons.

5.6. The full strategy can be read at Appendix 2.

6. Suicide Prevention Action Plan

- 6.1. The vision that no one in Lewisham will take their own life is ambitious but underpinned by an action plan with a series of objectives:
- 6.2. **Objective 1**: Borough wide leadership for suicide prevention establishing a multiagency strategic group to oversee delivery of the strategy and linked action plan, advocating for everyone to play their part in reducing rates of self-harm and death by suicide.
- 6.3. **Objective 2**: Reduce the risk of suicide in key high-risk groups data and evidence tell us there are common factors that put people at risk of dying by suicide. It's important to recognise the risk to these groups and to offer them additional support to tackle the underlying reasons for the risk.
- 6.4. **Objective 3**: Increasing the availability and importance of protective factors to improve mental health and reducing social isolation it's important to ensure that partner organisations and the health system embed approaches to improve resilience and contributions to improved mental health within their offers and services.
- 6.5. **Objective 4**: Removing the access to means of suicide our ambition of zero suicide has to be supported by partners and organisations who will work with us to reduce and remove access to the means people use to attempt suicide in the borough.
- 6.6. **Objective 5**: Support research, data collection and monitoring we should continue to build on and learn from existing research evidence, reinforcing the relevance by using and applying local data and learning.
- 6.7. **Objective 6**: Provide information and support to those bereaved or affected by suicide we know from our focus group with service users that those who have experienced the trauma of losing a loved one to suicide find it difficult to reach out, and may not know who to reach out to. Using real time data and feedback in the borough will link the right service to those in need at the right time.
- 6.8. Further details can be found in the action plan at appendix 3.

7. Governance, Monitoring, Delivery and Evaluation

- 7.1. The Suicide Prevention task and finish group reports into the Lewisham Crisis Collaborative, which is a sub group of the Mental Health Alliance. The Alliance brings together those working across mental health services in the borough to tackle issues within the system.
- 7.2. In the future, the task and finish group will become the Suicide Prevention Operational Group with strategic oversight provided by the Crisis Collaborative.
- 7.3. The Council's Health and Wellbeing Board will have final sign off for the Strategy, Action Plan and Audit. Annual updates and audits will be shared with the Health and Wellbeing Board to ensure local councillors are kept up to date on progress against the objectives and vision of zero suicide set out in the strategy and action plan.
- 7.4. A South East London (SEL) suicide prevention group coordinates activity across the six SEL boroughs, ensuring consistency and cooperation between boroughs and organisations to tackle similar and overarching issues. The work of the Lewisham operational group will be shared with the SEL group by operational and alliance group members.

7.5. Residents are an important element of the suicide prevention group. The consultation across May and June 2022 will be followed up with a You Said, We Did update which will give detail on how the consultation feedback has been incorporated into the action plan. This will be published when agreement has been given by the Health and Wellbeing Board.

8. Financial implications

8.1. Resourcing of suicide prevention activity within Lewisham will be met from existing public health budgets.

9. Legal implications

9.1. There are no legal implications arising for Lewisham Council from this report.

10. Equalities implications

10.1. The differences in the impact of death by suicide for population groups in Lewisham have been highlighted in the suicide audit report in Appendix 1.

11. Climate change and environmental implications

11.1. There are no significant climate change and environmental implications of this report.

12. Crime and disorder implications

12.1. There are no significant crime and disorder implications of this report.

13. Health and wellbeing implications

13.1. The health and wellbeing implications for this report are outlined in the main body of text.

14. Report author and contact

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