

DECISION REPORT TO CABINET COMMITTEE

From: Diane Morton, Cabinet Member for Adult Social Care & Public Health
Anjan Ghosh, Director Public Health

To: Adult Social Care & Public Health Cabinet Committee – 21st January 2026

Subject: Suicide & Self-Harm Prevention Strategy 2026-2030

Decision no: 25/00105

Key Decision :

- It affects more than 2 Electoral Divisions

Classification: Unrestricted

Past Pathway of report: N/A

Future Pathway of report: Cabinet Member Decision

Electoral Division: All

Is the decision eligible for call-in? Yes

Summary: The existing Suicide & Self-Harm Prevention Strategy for 2021-2025 is coming to an end. It has contributed to a situation where suicide rates locally are falling slightly, while national rates increase, and led to the work of the Kent & Medway Suicide Prevention Programme being nationally recognised as good practice.

To continue this vital work, a new Suicide & Self-Harm prevention strategy for 2026-2030 (appendix B) has been drafted and undergone public consultation, where it was met with wide approval. Although there will be some small amendments made (currently in progress) the draft strategy reflects the vision, mission, aims and priorities of the final version, which has been based upon the national suicide prevention strategy for England (2023-2028) and developed in conjunction with the Suicide Prevention Network. The Cabinet Member is asked to agree that the proposed strategy is adopted for 2026-2030.

Implementation of this strategy will sit with the Kent and Medway Suicide Prevention

Programme, which sits within Kent County Council's (KCC) Public Health division which is funded through the Kent & Medway Integrated Care Board (ICB) via an open-ended Memorandum of Understanding (MOU).

Recommendation(s):

The Adult Social Care & Public Health Cabinet Committee is asked to **CONSIDER** and **ENDORSE**, or **MAKE RECOMMENDATIONS** to the Cabinet Member for Adult Social Care & Public Health in relation to the proposed decision as detailed in the attached Proposed Record of Decision document (Appendix A).

1. Introduction

- 1.1 Every suicide is a heartbreaking tragedy that profoundly affects the victim's loved ones and reverberates throughout the entire community.
- 1.2 To reduce the number of lives being lost in this devastating way, it is crucial that every area has its own suicide prevention strategy that can reflect the needs of its local area.
- 1.3 In Kent & Medway, the suicide and self-harm prevention strategy is overseen by the Suicide Prevention programme team, which sits within KCC Public Health but is funded by the Kent & Medway Integrated Care Board through an open-ended Memorandum of Understanding.
- 1.4 Since 2021, the work of the programme has been shaped by the existing suicide and self-harm prevention strategy for 2021-2025. This has contributed to a situation whereby local rates are falling slightly whilst national rates increase, and the work of the programme has been nationally recognised as best practice.
- 1.5 There is still, however, much work to be done. Between 2020-2024, 721 individuals died by suicide in Kent and Medway, according to the local Real Time Suicide Surveillance system.
- 1.6 Each of these deaths will have had devastating impacts on the communities around them. Evidence suggests up to 135 people can be impacted by an individual case of suicide (Cerel et al, 2018), and people bereaved by the sudden death of a friend or family member are also 65% more likely to attempt suicide if the deceased died by suicide than if they died by natural or accidental causes (Pitman et al, 2016).
- 1.7 Whilst the financial impact of suicide should not be prioritised above the emotional impact, it is still important to acknowledge that there is a substantial one. Each suicide is estimated to cost £1.46 million, rising to £2.85 million for children aged 10–14 (Samaritans, 2022).

- 1.8 To increase the likelihood of reducing the number of lives lost to suicide in Kent & Medway, it is essential to implement new strategy for 2026-2030 that uses data, evidence and established Networks to shape the future direction of this essential work.

2. Key Considerations

- 2.1 The existing strategy is in operation between 2021-2025. It has contributed to a situation whereby local rates have been falling slightly whilst national ones increase, however there has been a substantial amount of other key outcomes.
- 2.2 These have included the ongoing promotion of the Release the Pressure campaign, a service which supports tens of thousands of people each year, over 100 community grants being distributed to projects directly supporting those with suicidal ideation or who were self-harming, over 8000 individuals being trained in suicide prevention and mental health, and the commissioning of a specialist suicide bereavement support service so that bespoke support has been available to those impacted in this devastating way.
- 2.3 The programme has also developed a Real Time Suicide Surveillance system with Kent Police, which has enabled it to monitor for any patterns or trends as they emerge and intervene accordingly. This has included the identification of the link between domestic abuse and suicide, which led to this being recognised in the national strategy for the first time in 2023, with the research of the Kent & Medway Programme directly cited.
- 2.4 The new strategy for 2026-2030 combines all of the positive examples above and has been shaped and designed alongside key research, local data and evidence, and with the input of our wider stakeholders, including Network members.
- 2.5 It is essential to have a new strategy in place to help inform the effective direction of the programme.

3. Background

- 3.1 The Kent and Medway Suicide and Self-harm Prevention Strategy 2026-30 is the continuation of the work undertaken as a result of the 2021-2025 Kent and Medway Suicide Prevention Strategy and combines local data about who is dying by suicide in Kent and Medway with national research and policy direction.
- 3.2 Unlike the existing Strategy (2021-2025), the Suicide and Self-Harm Prevention Strategy for 2026-2030 encompasses both Adults, and Children and Young People (CYP) as opposed to creating a separate Strategy for both. The new Strategy sets the same eight priorities for both groups, but across two separate action plans, in recognition of the need for a slightly different approach for each.
- 3.3 The draft Suicide Prevention Strategy 2026-30 was developed by the Kent and Medway Suicide Prevention Programme, which is hosted by KCC's Public Health department and funded by the Kent and Medway Integrated Care Board. The strategy group also includes Medway Council Public Health Team and

representatives from the Integrated Care Board and the Kent and Medway Mental Health Trust.

- 3.4 The draft strategy was developed in conjunction with the Suicide Prevention Networks, which are well-established partnerships made up of over 250 agencies, including statutory and voluntary / community sector organisations as well as individuals living with experience of suicidal thoughts, self-harm or being bereaved by suicide. There is a Network focused on supporting adults, and a Network focused on supporting children and young people. These Networks will oversee the action plans set out for each as result of this Strategy.
- 3.5 The vision of the new strategy is that Kent and Medway becomes a place where the number of people dying by suicide is reduced as much as possible. Our aim is for the Kent and Medway suicide rate to be below the national average by 2030 (if not sooner).
- 3.6 The mission of this strategy is to make Kent and Medway a place where hope is always available to anyone, no matter what they are facing. Specifically, we would like to have achieved the following by 2030:
- Children and young people in Kent and Medway to be resilient enough to cope with life's normal ups and downs, but knowledgeable and confident enough to reach out for more support when they need it.
 - Adults in Kent and Medway to know how to look after their own emotional wellbeing but to feel comfortable and able to seek more help when necessary.
 - All agencies (statutory, voluntary, community) to work collectively to ensure support and help is available to those who need it.
 - All agencies to share knowledge and support each other to learn what works in helping people get the support they need.
- 3.7 The draft Strategy went out for public consultation between 23rd July to 6th October 2025. A consultation report (appendix d) was produced and is published on the [Let's Talk Kent](#) website along with the You Said, We Did document (appendix e), which outlines the changes made to the Strategy post consultation, which are minimal, due to the support for the Strategy demonstrated during the consultation.

4. Options considered and dismissed, and associated risk

- 4.1 No other options were considered as the Strategy is necessary to the Kent & Medway Suicide Prevention Programme.

5. Financial Implications

- 5.1 The Suicide Prevention team and programme is funded via the NHS through the Kent and Medway Integrated Care Bboard (ICB), therefore there are minimal financial implications to KCC.
- 5.2 KCC funds the Programme Manager role and occasionally provides financial support to individual projects.

- 5.3 The Samaritans estimate that each individual suicide has associated costs of £1.46 million (consisting of lost employment productivity, healthcare costs and legal and administrative expenses). Suicide prevention activity plays an important role in mitigating these costs.

6. Legal implications

- 6.1 There are no legal implications for KCC, or its partners associated with the development of the strategy

7. Equalities implications

- 7.1 An equalities impact assessment (EqIA) has been completed as part of the strategy development process, the EqIA was reviewed and amended following the consultation. (see appendix c) It identifies that there are some groups at higher risk of suicide, which are reflected in the priorities of the new strategy. However, as this strategy seeks to serve all residents there is no potential for discrimination and all appropriate measures have been taken to advance equality and foster good relations between the protected groups.

8. Data Protection Implications

- 8.1 A Data Protection Impact Assessment (DPIA) is not required for the Strategy as the Programme does not deliver direct support to Kent residents. DPIAs will be implemented across commissioned services where identified as a requirement following screening.

9. Other corporate implications

- 9.1 The new Suicide & Self-Harm Prevention Strategy 2026-2030 clearly aligns with the commitment to work with our partners to hardwire a preventative approach into improving the health of Kent's population and narrowing health inequalities, improving safeguarding and preventing death. It aims to work with partners across the System to improve residents' mental health and reduce the risk of people dying by suicide.
- 9.2 The strategy will be overseen by the Kent & Medway Suicide Prevention Programme, which sits within KCC Public Health but works closely with other areas of the organisation as required, such as Children's & Young People.

10. Governance

- 10.1 Accountability of this strategy sits with the Director of Public Health. The Suicide Prevention Oversight Board which includes the ICB, who fund this programme, are fully supportive of this proposal.

11. Conclusions

- 11.1 Adoption of the 2026-2030 suicide and self-harm prevention strategy will shape the direction of the Kent & Medway Suicide Prevention Programme's work for the next five years.

11.2 The Suicide Prevention Oversight Board, which includes representatives from Medway Council, Kent and Medway Mental Health NHS Trust, and the ICB (who fund this programme) are fully supportive of this proposal.

Recommendation(s):

The Adult Social Care & Public Health Cabinet Committee is asked to **CONSIDER** and **ENDORSE**, or **MAKE RECOMMENDATIONS** to the Cabinet Member for Adult Social Care & Public Health in relation to the proposed decision as detailed in the attached Proposed Record of Decision document (Appendix A).

10. Background Documents

- 10.1 The Draft Suicide & Self-Harm Prevention Strategy 2026-2030 – Post Consultation Version 8
- 10.2 2026-2030 Data & Evidence Pack v7: [Documents | The Kent and Medway Suicide and Self-Harm Prevention Strategy 2026-2030 | Let's Talk Kent](#)
- 10.3 Equality Impact Assessment (pre-consultation):
<https://letstalk.kent.gov.uk/41977/widgets/127040/documents/88213>
- 10.4 Equality Impact Assessment (post-consultation):
- 10.5 Consultation Questionnaire: [Documents | The Kent and Medway Suicide and Self-Harm Prevention Strategy 2026-2030 | Let's Talk Kent](#)
- 10.6 National Suicide Prevention Strategy for England : [Suicide prevention strategy for England: 2023 to 2028 - GOV.UK](#)
- 10.7 Suicide & Self-Harm Prevention Strategy 2026-2030 Consultation Report: **Available to download at:** [The Kent and Medway Suicide and Self-Harm Prevention Strategy 2026-2030 | Let's Talk Kent](#)
- 10.8 Suicide & Self-Harm Prevention Strategy 2026-2030 'You Said, We Did' document: **Available to download at:** [The Kent and Medway Suicide and Self-Harm Prevention Strategy 2026-2030 | Let's Talk Kent](#)

11. Contact details

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