From: Dr Anjan Ghosh, Director of Public Health

To: Jamie Henderson, Cabinet Member for Environment, Coastal Regeneration and Public Health

Subject: Suicide Prevention Services

Decision no: 26/00037

Key Decision: Yes - Affects more than 2 Electoral Divisions

Classification: Unrestricted

Past Pathway of report: Adult Social Care and Public Health Cabinet Committee – 8 July 2026

Future Pathway of report: Cabinet Member Decision

Electoral Division: All

Is the decision eligible for call-in? Yes

Summary:
Existing Suicide Prevention Services are due to end on 31 March 2027. Approval is sought to procure and award new contracts to ensure the continued delivery of high-quality suicide prevention and bereavement support services across Kent and Medway from 1 April 2027. Competitive procurement processes are proposed to secure the most suitable providers, ensure continuity of provision, and maintain alignment with national and local strategic priorities.

While formal ICB budget confirmation is pending, funding is anticipated and will be formalised prior to procurement commencing. Contract award and mobilisation will not proceed until funding is confirmed. Early approval is required to allow sufficient time for procurement and mobilisation, avoiding delays that could risk service disruption.

Recommendation(s):

As Cabinet Member for Environment, Coastal Regeneration and Public Health, I agree to:

a. **APPROVE** the procurement of Suicide Prevention Services from 1 April 2027:

- Specialist Suicide Bereavement Support Service, CN260672 - Three-year contract (1 April 2027 – 31 March 2030) with an optional extension, up to 24 months.
- Suicide Prevention Training Workshops (CN260673) - Three-year contract (1 April 2027 – 31 March 2030) with an optional extension, up to 24 months.

b. **APPROVE** the continuation of partnership working arrangements with the Integrated Care Board (ICB), including the review and refresh of the Memorandum of Understanding (MoU) to support the delivery of the Suicide Prevention Programme;

c. **DELEGATE** authority to the Director of Public Health to commission the relevant services and enter into contracts or other legal agreements, including a refreshed Memorandum of Understanding (MoU) with relevant partners, to deliver Suicide Prevention Services;

d. **DELEGATE** authority to the Director of Public Health, to exercise relevant contract extensions

e. **DELEGATE** authority to the Director of Public Health, to take all other relevant actions, including but not limited to, negotiating, finalising the terms of, and entering into the required contracts or other legal agreements, as necessary, to implement the decision

---

1. Introduction

1.1 In 2019, the NHS committed £36 million over a period of 10 years to support the roll-out of suicide bereavement support services across England. This funding is received by Kent and Medway Integrated Care Board (ICB) to deliver the core Kent and Medway Suicide Prevention Programme. A Memorandum of Understanding (MoU) sets out the financial relationship between KCC and the ICB for this programme, which is hosted by KCC. This means that the outputs of the Programme, including commissioned services must align not only with the priorities and requirements of KCC, but also with those of the NHS and deliver against the multi-agency Suicide Prevention Strategy.

1.2 Between 2022-2024, there was an average of 144 suspected suicides in Kent and Medway, according to the Real Time Suicide Surveillance System (RTSS) with Kent Police.

1.3 Evidence suggests that up to 135 people can be impacted by an individual case of suicide (Cerel et al, 2018). 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).

2. Key Considerations

2.1 The Suicide & Self-Harm Prevention Strategy for 2026-2030 was approved and published in January 2026 (25/00105). The 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.

2.2 To support delivery of the strategy, the council commissions suicide prevention services across Kent and Medway including:
- Amparo (Contract SC20060), delivering specialist support to individuals who have been bereaved by suicide.
- Mid Kent MIND (Contract SC21041), delivering Suicide Prevention Training.

2.3 Both of these services have an end date of 31 March 2027.

2.4 National Suicide Prevention Strategy for England (2023–2028) specifies that Local Authorities, through their Public Health teams, are expected to lead multi-agency suicide prevention partnerships, develop local suicide prevention strategies, and coordinate delivery across the system. Therefore, KCC leads the suicide prevention programme, including commissioning services, even though the funding originates from NHS budgets. KCC's established relationships with voluntary and community sector providers enable a collaborative approach that avoids duplication and ensures alignment with the Kent and Medway Suicide Prevention Strategy.

2.5 Maintaining continuity and stability of provision is critical, and Commissioners have been undertaking recommissioning activity since July 2025 to inform the next iteration of services, required to commence 1 April 2027.

3. Options considered

3.1 Four options have been considered for the future of suicide prevention services in Kent and Medway as the current contracts approach expiry, with Option 3identified as the option to be progressed;

Option	Summary
Option 1: Do nothing - allow the existing suicide prevention services in Kent and Medway to come to an end 31 March 2027.	Not recommended, as it would leave bereaved individuals without access to essential support, risk higher long-term costs and contradict national and local strategic priorities including: • National Suicide Prevention Strategy for England (2023–2028) • NHS Long Term Plan • NICE Quality Standard QS189 • Kent & Medway Suicide and Self-Harm Prevention Strategy 2026–2030 • Kent County Council Reforming Kent Priorities
Option 2: Extend current suicide prevention services in Kent and Medway.	Not preferred at this time. While this would maintain continuity, it may limit opportunities for innovation, market testing, and securing longer-term value for money.
Option 3: Recommission suicide prevention services in Kent and Medway via open procurement.	Preferred option. Recommissioning the services through a competitive procurement process will ensure transparency, allow for market engagement, and support the identification of the most suitable provider. This approach enables service improvement, innovation, and alignment with the NHS Long Term Plan and the Kent & Medway Suicide and Self-Harm Prevention Strategy 2026–2030, while supporting continuity and minimising

	disruption through robust mobilisation and transition arrangements.
Option 4: Bring suicide prevention services in Kent and Medway service in-house.	Not preferred due to potential service disruption and lack of specialist expertise; may be revisited in future commissioning cycles.

3.2 The recommended approach is to recommission suicide prevention services via open procurement, ensuring continuity and stability for service users and partners, and supporting alignment with strategic priorities and partnership commitments.

3.3 At an early stage, consideration was given to commissioning a single contract encompassing both the Specialist Bereavement Support Service and separate Suicide Prevention Training Workshops, recognising that both services sit within the wider Suicide Prevention Programme funded by the Integrated Care Board (ICB). However, following further consideration, this approach has been deemed not feasible due to differing regulatory requirements governing each service.

3.4 The Specialist Bereavement Support Service must be commissioned in accordance with the Provider Selection Regime (PSR), whereas the Suicide Prevention Training Workshop service falls under the Procurement Act (PA). As a result, the two services will be commissioned separately to ensure compliance with the relevant legislation.

4. Kent & Medway Suicide and Self-Harm Prevention Strategy 2026–2030

4.1 Key aims of the Kent & Medway Suicide and Self-Harm Prevention Strategy 2026–2030 are to:

- Significantly reduce suicide rates across Kent & Medway by 2030
- Support children and young people to become resilient enough to cope with life's challenges, and confident to seek help when needed.
- Help adults to understand and manage their own emotional wellbeing and feel comfortable accessing support.
- Foster a system-wide collaborative approach, with statutory, voluntary and community agencies working collectively to ensure support is available and effective.
- Promote mutual learning across organisations so that the system can identify and implement what works in helping individuals access support.

4.2 To maintain services and support delivery of the strategy it is proposed that the following services are procured and awarded to replace existing contracts:

- Specialist Suicide Bereavement Support Service (Contract Number CN260672)
- Suicide Prevention Training Workshops (Contract Number CN260673)

5. Service Development

5.1 A comprehensive programme of activity has underpinned the development of the new Suicide Prevention Services.
This includes:

- A full review of both existing services, incorporating analysis of referral patterns, outcomes, and user feedback.
- Reviewing national best practice, including the Support After Suicide Partnership (SASP) Core Standards.
- Analysis of feedback received as part of a public consultation for the development of the Kent and Medway Suicide and Self-Harm Prevention Strategy (2026–2030).
- Facilitating stakeholder engagement including workshops attended by over 50 participants from across the system, including professionals, lived experience representatives, and partners.
- Delivering market engagement session with nine organisations to further inform the service specifications.
- Consideration of feedback from those with lived experience, collected through regular surveys and evaluation activity.

5.2 This collaborative approach ensures the recommissioned services are evidence-based, locally responsive, and aligned with both national standards and the needs of those they are designed to support.

6. Contract Lengths

6.1 It is proposed that the contracts for both new services will be awarded for an initial fixed term of three years, commencing on 1 April 2027 and concluding on 31 March 2030. The proposed contracts will include the option to extend for up to an additional two years, in one-year increments, subject to satisfactory performance and the continued availability of funding.

6.2 Break clauses will be incorporated to ensure appropriate flexibility in the event of changes to funding arrangements, service demand, or wider system priorities. The contract will be managed in accordance with Kent County Council's standard terms and conditions, with minimum service levels, performance expectations and Key Performance Indicators (KPIs) clearly defined within service specifications.

6.3 The proposed contract durations align with the lifecycle of the Kent and Medway Suicide and Self-Harm Prevention Strategy (2026–2030), ensuring that the service is commissioned to support delivery of the Strategy over its full implementation period. This provides a clear line of sight between commissioning intentions, service delivery, and strategic outcomes.

7. Specialist Suicide Bereavement Support Service (CN260672)

7.1 The proposal is to procure a single provider to deliver a Specialist Suicide Bereavement Support Service for people living in Kent and Medway, with the new contract commencing delivery on 1 April 2027 for an initial term of three years, with the option to extend for up to two further one-year periods (3+1+1).

7.2 The Specialist Suicide Bereavement Support Service will continue to ensure timely, accessible, and high-quality support is available to those affected by suicide, helping to mitigate the longer-term emotional, social and health impacts of bereavement, and contributing to wider suicide prevention priorities.

7.3 Key principles of the service are to:

- Be available countywide in Kent and Medway
- Be free at the point of access.
- Be accessible and inclusive to all who may benefit.
- Be delivered in a trauma-informed way at all times.

7.4 The service will support:

- Close family members of the individual who died.
- Friends, colleagues, witnesses, and other people affected by a suicide.
- Professionals or individuals who are supporting, or in contact with, people bereaved by suicide.

7.5 The service will:

- Provide support to up to 250 people per year.
- Deliver tailored emotional support.
- Provide practical guidance, including support to navigate processes such as engagement with police and coronial services.
- Enable access to wider support services through effective signposting and referral.

7.6 The service will support the following key outcomes:

- Improved resilience and capacity to cope with the impact of suicide bereavement.
- Improved mental wellbeing.
- Reduction in stigma associated with suicide bereavement and increased confidence in seeking support.

7.7 The procurement of the Specialist Bereavement Support Service will be in accordance with the Provider Selection Regime (PSR). Key milestones are as follows:

Milestone	**Date**
Invitation to Tender (ITT) issued	August 2026
Tender Evaluation Period	October 2026
Contract Award	October 2026
Mobilisation	December 2026 – March 2027
Service start date	1 April 2027

8. Suicide Prevention Training Workshops (CN260673)

8.1 The proposal is to procure a single provider to deliver a programme of Suicide Prevention Training Workshops for people living in Kent and Medway, with the new contract commencing on 1 April 2027 for an initial term of three years, with the option to extend for up to two further one-year periods (3+1+1).

8.2 Suicide prevention training is a life-saving intervention that empowers individuals with the confidence, knowledge, and skills to recognise warning signs, intervene effectively, and signpost individuals to appropriate local support. The ultimate goal of suicide prevention training is to reduce lives lost by suicide.

8.3 Key principles of the service are to:

- Be available countywide in Kent and Medway
- Be free at the point of access.
- Be accessible and inclusive to all who may benefit.

8.4 The service will provide training to a minimum of 1700 people per year delivered both face to face and virtually.

8.5 Key outcomes and objectives for the service are for delegates who participate in training to have increased;
- Awareness of suicide prevention issues and techniques
- Confidence and knowledge of how to speak to someone who may be at risk of suicide and signpost appropriately
- Awareness of the available services within Kent and Medway

8.6 The procurement of the Suicide Prevention Training Workshop Service will be in accordance with the Procurement Act (PA). Key milestones are as follows:

Milestone	**Date**
Invitation to Tender (ITT) issued	November 2026
Tender Evaluation Period	December 2026
Contract Award	February 2027
Mobilisation	March 2027
Service start date	1 April 2027

9. How the proposed decision supports the Council's Strategic Statement

9.1 The recommissioning of Suicide Prevention Services supports delivery of Kent County Council's Reforming Kent strategic priorities by contributing to improved health outcomes, reducing inequalities, and strengthening preventative approaches across the system.

9.2 The proposed decision enables the continuation of preventative, person-centred, and integrated services, which align with the council's ambition to intervene early and reduce demand on higher-cost services. By providing timely support to individuals affected by suicide, the service helps mitigate longer-term mental health and social impacts, contributing to improved population wellbeing.

9.3 The recommissioning approach supports key priorities by:
- Improving health and wellbeing: ensuring continued access to high-quality, specialist support for individuals affected by suicide
- Focusing on prevention and early intervention: reducing the risk of escalation into crisis or further harm through timely bereavement support
- Reducing inequalities: delivering an inclusive, accessible service that reaches individuals across all communities, including underserved groups.
- Supporting independence and resilience: enabling individuals to manage grief, build coping strategies and access wider support where needed.
- Strengthening partnership working maintaining a coordinated, system-wide response across health, local authority, and voluntary sector partners
- Delivering value for money: commissioning a targeted service that reduces demand on acute health and crisis services.

10. Local Government Reorganisation (LGR)

10.1 Given the proximity of Local Government Reorganisation (LGR), with a decision from the Secretary of State anticipated in July 2026 at the time of writing, consideration was given to a 'do nothing' option. This option is not recommended, as it would place the continuity of critical suicide prevention and bereavement support services at risk, potentially leaving vulnerable individuals without access to timely support and undermining delivery of local and national suicide prevention priorities.

10.2 Based on the current national timetable, it is anticipated that the council will continue to operate in its existing form until at least April 2028. This provides a defined transition period during which the council must continue to deliver essential public health functions, including suicide prevention activity, while preparing for future structural change.

10.3 Recommissioning suicide prevention services through new contracts commencing 1 April 2027 represents a stable and proportionate response within this context. This approach:

- Ensures continuity of critical suicide prevention and bereavement support services throughout the LGR transition period.
- Avoids the risks associated with short-term or fragmented commissioning decisions immediately prior to reorganisation.
- Enables a planned and structured recommissioning process aligned to future governance and system arrangements.
- Supports market stability and workforce retention during a period of organisational uncertainty.

10.4 Wider system pressures, including financial constraints and uncertainty regarding future organisational structures, further reinforce the need for stability in frontline service delivery. Establishing clear and sustainable contractual arrangements reduces the risk of disruption, supports continuity of care for service users, and ensures that suicide prevention activity remains aligned with both current and emerging system priorities during the transition period.

11. Financial Implications

11.1 A Memorandum of Understanding (MoU) is currently in place between KCC and the ICB for the Suicide Prevention Programme, outlining ongoing arrangements including financial contributions from the ICB.

11.2 The total value of the new services, including all extension options, is £940,000.00 over a maximum five-year period, broken down as follows:

- **Bereavement Support Service (CN260672):** £130,000.00 per annum, equating to a maximum of £650,000.00 over five years (including all potential extensions)
- **Suicide Prevention Training (CN260673):** £58,000.00 per annum, equating to a maximum of £290,000.00 over five years (including all potential extensions)

11.3 The figures presented above represent the maximum anticipated spend. Actual contract values will be confirmed following completion of the procurement

process and may vary depending on the outcome of competitive tendering and final agreed service delivery requirements.

11.4 While formal budget confirmation is pending due to ongoing organisational redesign within the ICB, funding for the procurement of Suicide Prevention services is anticipated and the MoU will be refreshed prior to procurement activity commencing. Procurement activity will not commence until funding is secured.

11.5 It is essential that the Key Decision and governance processes are undertaken now. Delaying the Key Decision until ICB funding is confirmed would mean the next available opportunity to bring this to Cabinet Committee is 22 September 2026, due to the summer recess. This would not allow sufficient time to undertake procurement, contract award, and the required mobilisation period (approximately four months) ahead of the planned go-live date for services of 1 April 2027. Such delays would risk service disruption and loss of continuity for service users.

11.6 By progressing governance and procurement activity in parallel with funding confirmation, the council can ensure timely recommissioning and a smooth transition to new contracts, while maintaining robust financial assurance by only proceeding to contract award and mobilisation once funding is formally secured.

12. Legal implications

12.1 Commissioners will follow the relevant regulatory frameworks (PSR and PA and Spending the Council's Money guidance) in relation to the procurement undertaken.

13. Equalities implications

13.1 An Equalities Impact Assessment (EqIA) has been undertaken for this activity and indicates that the recommissioning of Suicide Prevention Services is unlikely to have any negative impact on staff or service users. The services are designed to be inclusive, accessible, and free at the point of use, supporting equitable access across all communities. Delivery models incorporate reasonable adjustments and a flexible approach to ensure the needs of individuals with protected characteristics are met.

14. Data Protection Implications

14.1 Data Protection Impact Assessment (DPIA) are in place for the existing services and will be refreshed prior to the new services going live.

15. Other corporate implications

15.1 Maintaining a support offer for individuals bereaved by suicide supports KCC's Reforming Kent 2025-28 commitments through the delivery of preventative well-being support. This can avoid escalation into more intensive, expensive care and foster stronger, more resilient communities.

15.2 The management and implementation of the proposed contract extension will be delivered by KCC Public Health and Public Health Commissioning teams with input from other internal business partners such as Legal and Commercial and Procurement. Progress will be monitored through internal governance arrangements.

16. Governance

16.1 Accountability for these services and contracts sits with the Director of Public Health. The Suicide Prevention Steering group which includes the ICB, who fund this service, are fully supportive of this proposal.

16.2 Delegated authority will be granted to the Director of Public Health to take all necessary steps to enter into any required contracts and legal agreements to give effect to the decision, including entering into a refreshed Memorandum of Understanding (MoU) with the Kent and Medway Integrated Care Board.

17. Conclusions

17.1 Suicide prevention and bereavement support services in Kent and Medway are a critical component of the wider public health system, contributing directly to improved mental wellbeing, reduced inequalities, and prevention of further harm. Evidence demonstrates a clear and ongoing need for these services, alongside the positive impact of current provision.

17.2 Contracts for existing services are due to expire on 31 March 2027. Without timely recommissioning, there is a significant risk of disruption to these essential services supporting individuals and communities affected by suicide.

17.3 A comprehensive programme of review, engagement and co-design has been undertaken to inform the future service models, ensuring they are evidence-based, aligned with national best practice, and responsive to local needs. The proposed recommissioning approaches will build on the strengths of existing services while enabling innovation, improved accessibility, and enhanced outcomes.

17.4 The recommended option to recommission services through competitive procurement processes provides a compliant, transparent, and value-for-money approach. It enables the identification of the most suitable providers while ensuring continuity of provision through robust mobilisation and transition arrangements.

17.5 Although formal funding confirmation from the ICB is pending, this is anticipated and appropriate assurances are in place. Early KCC approval is required to enable procurement and mobilisation activity to proceed in a timely manner, reducing the risk of service disruption and ensuring seamless transition to new contracts commencing from 1 April 2027. Procurement activity will not commence until funding is secured.

17.6 The recommissioning of Suicide Prevention Services supports delivery of both national policy and local strategic priorities, including the Kent and Medway Suicide and Self-Harm Prevention Strategy (2026–2030) and KCC's Reforming

Kent agenda, ensuring continued provision of high-quality, accessible, and effective support for those affected by suicide.

---

18. Recommendation(s):

As Cabinet Member for Environment, Coastal Regeneration and Public Health, I agree to:

a. **APPROVE** the procurement of Suicide Prevention Services from 1 April 2027:

- Specialist Suicide Bereavement Support Service, CN260672 - Three-year contract (1 April 2027 – 31 March 2030) with an optional extension, up to 24 months.
- Suicide Prevention Training Workshops (CN260673) - Three-year contract (1 April 2027 – 31 March 2030) with an optional extension, up to 24 months.

b. **APPROVE** the continuation of partnership working arrangements with the Integrated Care Board (ICB), including the review and refresh of the Memorandum of Understanding (MoU) to support the delivery of the Suicide Prevention Programme;

c. **DELEGATE** authority to the Director of Public Health to commission the relevant services and enter into contracts or other legal agreements, including a refreshed Memorandum of Understanding (MoU) with relevant partners, to deliver Suicide Prevention Services;

d. **DELEGATE** authority to the Director of Public Health, to exercise relevant contract extensions

e. **DELEGATE** authority to the Director of Public Health, to take all other relevant actions, including but not limited to, negotiating, finalising the terms of, and entering into the required contracts or other legal agreements, as necessary, to implement the decision

---

19. Appendices

- Appendix A – Equality Impact Assessment

20. Contact details

Report Author: Rachel Westlake **Job title:** Senior Commissioner **Telephone number:** 03000 413106 **Email address:** Rachel.westlake@kent.gov.uk **Name:** Vicky Tovey **Job title:** Assistant Director Public Health Commissioning **Telephone number:** 03000 416779 **Email address:** victoria.tovey@kent.gov.uk	**Director:** Dr Anjan Ghosh **Job title:** Director of Public Health **Telephone number:** 03000 412633 **Email address :** anjan.ghosh@kent.gov.uk

Name: Jess Mookherjee **Job title:** Consultant in Public Health **Telephone number:** 03000 416493 **Email address :** jessica.mookherjee@kent.gov.uk	