

From: Graham Gibbens, Cabinet Member for Adult Social Care and Public Health
Andrew Scott-Clark, Interim Director of Public Health

To: Adult Social Care and Health Cabinet Committee

Date: 15 January 2015

Subject: Updating the Kent and Medway Suicide Prevention Strategy

Classification: Unrestricted

Past pathway: This is the first committee by which this issue will be considered.

Future pathway: Key decision by Cabinet Member

Electoral Division: All

Summary:

Kent County Council is a lead partner within the Kent and Medway Multi-Agency Suicide Prevention Strategy Group. The Group is responsible for the oversight and implementation of the current Kent and Medway Suicide Prevention Strategy which runs from 2010-2015.

On the 11th July 2014, this Committee agreed that officers should begin the process of updating the Suicide Prevention Strategy. This paper provides an update on the development of the draft 2015-2020 Strategy and outlines a proposed consultation process.

Recommendation(s):

The Adult Social Care and Health Cabinet Committee is asked to:

1. Note the contents of the draft 2015-2020 Kent and Medway Suicide Prevention Strategy and Action Plan
2. Endorse the proposed consultation process for the Strategy and Action Plan
3. Endorse the proposed consultation questions

1.0 Introduction

1.1 The effect of someone committing suicide is devastating for families and friends of the individual concerned. The impact can be felt across the whole community.

1.2 There were 182 coroner verdicts of suicide or death by undetermined causes¹ relating to deaths in Kent and Medway during 2013. This is an increase from

¹ Undetermined cause is a category of coroner verdict that is counted along with suicide by the Office of National Statistics and is regarded as 'probable suicide'

145 in 2012². Most suicides in Kent are committed by men aged between 30 and 60.

- 1.3 The rate of suicide is a Public Health Outcomes Framework indicator.
 - The national rate is 8.8 suicides per 100,000
 - In Kent the rate is 9.2 suicides per 100,000³
- 1.4 Due to the premature nature of deaths by suicide there is a very high cost in terms of years of life lost (i.e. deaths under the age of 75). Between 2011 and 2013 there were approximately 4,000 years of life lost due to suicides in Kent and Medway.⁴
- 1.5 In July 2014, this Committee agreed that officers should begin the process of updating the Kent and Medway Suicide Prevention Strategy. Since that time there have been a number of developments. These are detailed below:
 - A draft strategy has been written and has been through initial consultation stages with members of the multi-agency Kent and Medway Suicide Prevention Steering Group (see section 3.1 for membership)
 - A draft Action Plan to accompany the 2015-2020 Strategy has been developed
 - A detailed statistical analysis has been carried out including looking at rates of suicide by different occupation groups and by country of birth
 - An Equality Impact Assessment has been undertaken and submitted to the Equality and Diversity Team
 - Due to an increase in suspected suicides in Kent prisons, the issue has been prioritised and discussions with NHS England and the National Offender Management Service have taken place to examine whether additional measures are needed. This will be reflected in the Action Plan accompanying the Strategy
- 1.6 The draft Strategy (containing a summary of the data) and the draft Action Plan are attached as part of this paper. There are six strategic priorities in the Draft Strategy. Most reflect the national approach but local data and need has also shaped the priorities for action. These are summarised below:
 - i. Reduce the risk of suicide in key high-risk groups
 - ii. Tailor approaches to improve mental health and wellbeing in Kent and Medway
 - iii. Reduce access to the means of suicide
 - iiii. Provide better information and support to those bereaved or affected by suicide

² Figures provided by KMPHO, and are higher than previously stated due to the time lag in some cases due to the length of time it takes to reach a coroner's verdict. In complicated cases the inquest process can take years.

³ Suicide rates per 100,000 between 2011-13 <http://www.phoutcomes.info/public-health-outcomes-framework#gid/1000044/pat/6/ati/102/page/0/par/E12000008/are/E10000016> (England, 2004)

⁴ KMPHO, 2014 Suicide Update

- v. Support the media in delivering sensitive approaches to suicide and suicidal behaviour
- vi. Support research, data collection and monitoring

2.0 Current strategic context for mental health and suicide prevention in Kent

- 2.1 Since the development of the 2010-2015 Kent and Medway Suicide Prevention Strategy, the context of mental health service commissioning has changed greatly. CCGs have replaced PCTs and have assumed system leadership of commissioning mental health services, KCC remains the lead for social care and KCC Public Health leads on prevention and wellbeing. Health and Wellbeing Boards have been established and commissioning arrangements in relation to the criminal justice system, and drug and alcohol treatment services have also changed considerably since 2010.
- 2.2 The current strategy for mental health commissioning in Kent is the “Live It Well” strategy which is also due for a refresh in 2015.
- 2.3 When considering the Suicide Prevention Strategy, it is important to note that it forms part of a wider mental health strategy which has the involvement and leadership of many partners.

3.0 Proposed consultation process

- 3.1 The Kent and Medway Suicide Prevention Steering Group contains representatives from KMPT, Kent Police, CCGs, Network Rail, KCC Coroners Team, voluntary support groups, mental health charities and individual carer representatives. The development of the draft Strategy has been led by the Steering Group and it is on the guidance of the Steering Group that Public Health has produced this draft Strategy.
- 3.2 The next stage in the development of the Strategy is to consult with partners and the public.
- 3.3 This paper proposes that the wider public consultation comprises three different elements;
 - i. Publishing the draft strategy on-line and asking for comments (to run from mid-January – end of March 2015) (Draft questionnaire attached to this paper)
 - ii. Holding a consultation event designed to enable survivors, carers and members of bereaved families (and their representatives) to provide their comments in a supportive and open environment (February 2015)
 - iii. Holding a second consultation event designed to examine the prevalence and services relating to self-harm within Kent (March 2015)

Recommendation:

The Adult Social Care and Health Cabinet Committee is asked to:

1. Note the contents of the draft Strategy and Action Plan
2. Endorse the proposed consultation process for the 2015-2020 Kent and Medway Suicide Prevention Strategy and Action Plan
3. Endorse the proposed consultation questions

4. **Background documents** - none

5. **Contact details**

a. Report Authors

- Jess Mookherjee, Public Health Consultant
jessica.mookherjee@kent.gov.uk
- Tim Woodhouse, Public Health Programme Manager
tim.woodhouse@kent.gov.uk

b. Relevant Director

- Andrew Scott-Clark, Interim Director of Public Health
03000 416659
Andrew.scott-clark@kent.gov.uk