



## READING HEALTH AND WELLBEING BOARD

DATE OF MEETING:	15 July 2022		
REPORT TITLE:	Suicide Prevention Strategy Update		
REPORT AUTHOR:	Tracy Daszkiewicz	TEL:	
JOB TITLE:	Director of Public Health	E-MAIL:	<a href="mailto:Tracy.daszkiewicz@reading.gov.uk">Tracy.daszkiewicz@reading.gov.uk</a>
ORGANISATION:	Reading Borough Council		

### 1. PURPOSE OF REPORT AND EXECUTIVE SUMMARY

- 1.1 This report is to provide the Reading health and Wellbeing Board with an update on the Suicide Prevention Strategy, previously presented to the Board on October 8 2021. The development of a local Suicide Prevention strategy is to deliver the ambition of the national suicide prevention strategy; Preventing suicide in England: A Cross Government Outcomes Strategy to Save Lives.
- 1.2 In addition to gain the boards approval for the change in approach and endorsement for the timeframe to make the amendments to the existing strategy, and to agree the approach of putting in place a principles document to ensure work continues to deliver this agenda and can be monitored whilst the amendments are made.

### 2. RECOMMENDED ACTION

- 2.1 For the Health & Wellbeing to agree.
  - to refresh the Suicide Prevention Strategy.
  - for the Suicide Prevention Partnership to arrange a summit for the Autumn to launch a full consultation process into Suicide Prevention to further inform the Strategy refresh.

### 3. POLICY CONTEXT

- 3.1 In 2012 the government published Preventing Suicide in England: A Cross Government Outcomes Strategy to Save Lives. The strategy recommended that local authorities conduct a suicide audit, produce a suicide prevention action plan and set up a multiagency suicide prevention group.
- 3.2 A Suicide Prevention Strategy was presented to the Health & Wellbeing board in October 2021 and this Strategy was endorsed by the board. Since its adoption, new data profiles are available and there is a new policy landscape that has led to a review of the local strategy. This is to consider a greater emphasis on patterns of risk and also linked to the focus on health inequalities and the Health & Care Act 2022.

### 4. THE PROPOSAL

- 4.1 The current Suicide Prevention Strategy is in place and has been endorsed by the Health & Wellbeing Board. Since its endorsement, there is a different policy position and greater access to real time surveillance data.

## 4.2 Options Proposed

- That a review of the existing strategy is undertaken
- The Suicide Prevention partnership is reformed and strengthened
- A Suicide Prevention Ten Point Plan is put in place to progress work against priorities whilst development of the strategy is underway,
  - **Introduce suicide prevention across all policy**
  - **Improve methods to tackle root cause vulnerability**
  - **Establish a trauma informed approach**
  - **Assess and strengthen ways of tackling inequalities**
  - **Establish focus on debt and cost of living**
  - **Improve focus on children and young people**
  - **Establish means to address female suicide rates**
  - **Strengthen focus on links between mental health, self-harm and suicide**
  - **Continue to develop and establish support for people bereaved by suicide**
  - **Develop means for family support to ensure individual wellbeing**
- to progress priorities so there is no delay in delivery whilst the strategy is developed
- A Suicide Prevention Summit is held in the Autumn to state the ambition and gain wider partner engagement
- A draft document will be presented to health & Wellbeing board in Jan 2023 and launch the consultation process
- Final Strategy and Impact Assessment to come to Health & Wellbeing board in March 2023 for agreement and endorsement.

## 5. CONTRIBUTION TO READING'S HEALTH AND WELLBEING STRATEGIC AIMS

5.1 Suicide touches all aspects health and wellbeing and the impacts on individuals, families and communities are devastating. 1 in 100 deaths worldwide is by Suicide. In Reading the figures are increasing year on years with 17 deaths in 2018 compared to 5 the previous year. There is also evidence to suggest that female deaths by suicide is increasing at a faster rate than male suicide. The Suicide Prevention Strategy will deliver across the priorities of the Berkshire West Health and Wellbeing Strategy;

### 1. Reduce the differences in health between different groups of people

We know suicide disproportionately affects people in certain jobs or professions, we also know that age and gender play a part is risk factors.

### 2. Support individuals at high risk of bad health outcomes to live healthy lives

Understanding the patterns of suicide and who is most at risk and when harm is most likely to occur, we can build prevention and early intervention strategies with partners to mitigate risk.

### 3. Help children and families in early years

### 4. Promote good mental health and wellbeing for all children and young people

### 5. Promote good mental health and wellbeing for all adults

For priorities 3-5 we need to understand better how risk occurs. Only 28% of people who die by suicide are known to services, we therefore need to work with schools and employers to recognise early signs of people needing support and have services in place to signpost people to.

## 6. ENVIRONMENTAL AND CLIMATE IMPLICATIONS

6.1 None

## 7. COMMUNITY & STAKEHOLDER ENGAGEMENT

7.1 We will undertake public consultation under Section 138 of the Local Government and Public Involvement in Health Act 2007. This will be both in the development of the strategy, agreeing priorities and delivery objectives.

## **8. EQUALITY IMPACT ASSESSMENT**

8.1 An Equality Impact Assessment will be conducted alongside the development of the strategy.

## **9. LEGAL IMPLICATIONS**

9.1 Not applicable

## **10. FINANCIAL IMPLICATIONS**

10.1 Currently Suicide Prevention is a noted public health priority, there is no current allocation of the Public Health Grant specifically to deliver this programme of work,

## **11. BACKGROUND PAPERS**

11.1 None