

Walsall Multi-Agency Suicide Prevention Strategy 2018-2023

1. Purpose

- 1.1 The purpose of this report is to present the draft Walsall Multi-Agency Suicide Prevention Strategy 2018-2023, to consult the Health and Wellbeing board and sign off the draft strategy.

2. Recommendations

- 2.1 That the HWBB note and sign off the draft Walsall Multi-Agency Suicide Prevention Strategy 2018-2023.
- 2.2 That the HWBB identify mental health champions from the committee to drive forward the prioritisation of mental health and suicide prevention.

3. Report detail

- 3.1 The Walsall Multi-Agency Suicide Prevention Strategy 2018-2023 supersedes the 2013 -2016 Walsall Suicide Prevention Strategy refresh. This strategy has been produced by the joint efforts of a wide range of partners who either contributed to the writing and design or provided data and information.
- 3.2 A Multi-Agency consultation workshop was held involving a wide range of stakeholders in January 2018. Further consultation has been ongoing, with Multi-Agency partners contributing throughout the development of the strategy.
- 3.3 Members of the partnership are from a range of diverse statutory, non-profit and private bodies. This group is to be further expanded to facilitate coordination of effective partnerships in suicide prevention across sectors, including statutory, third sector and for-profit organisations. These will include any local organisation whose remit includes activity relevant to suicide prevention or with information pertinent to local deaths by suicide.
- 3.4 Walsall Multi-Agency Suicide Prevention Strategy takes a broad approach to improving the mental health and wellbeing of people living in the borough. It seeks to raise awareness of suicide, encourage help-seeking behaviour amongst high-risk groups and tackle the social, health and economic factors that increase suicide risk.
- 3.5 The vision is that: individually and collectively Walsall's stakeholders will aspire to prevent all deaths by suicide in Walsall; offering hope, support and recovery to those experiencing mental distress. The vision will be achieved when:
 - A continuing decrease in the number of suicides in Walsall is seen
 - Every person in Walsall understands how to protect their own mental health

- Every individual sees suicide prevention as their business and are skilled to respond appropriately
- Information and data are time relevant and sufficiently detailed to inform prevention
- Those affected by suicide have access to timely and appropriate local information and support
- The access to the means of suicide are dramatically reduced
- Those supporting the bereaved are equipped to provide preventative suicide support
- The local media delivers messages sensitively

3.6 At the 11th June Health and Wellbeing board meeting a number of questions were posed and are responded to as follows:

- *Trend data – What was done differently between 2005 and 2013 to achieve a significant reduction in suicide?* - The reason for the significant reduction and then significant increase above the national average has not been determined, however it is likely to be multifactorial including the economic impact on communities and on service provision.
- *A & E attendances suicide and self-harm by ethnicity – Why is 18% of ethnicity data unknown?* - Data on ethnicity is generally not consistently captured across services within the health and social care sector resulting in patchy data (Iqbal et al, 2012). This is replicated locally across services.
- *Has evidence of best practice been sought?* -The strategy has been developed drawing on the evidence base of what works (See strategy references). The detail of delivery is to be taken forward by the steering group.

4. Implications for Joint Working arrangements:

4.1 Suicide prevention is most effective when it comprises part of wider work addressing the social and other determinants of poor health, wellbeing or illness. This strategy seeks to tackle and address the 'risk factors' for suicide and encourage and support the 'protective factors'.

4.2 Aligning this strategy with the broader mental health agenda, mental health commissioning vision and financial plans is a real challenge. The success of this strategy is reliant on the prioritisation of suicide prevention by all stakeholders in Walsall.

- Financial implications: This strategy will require resourcing to develop targeted initiatives, support services and suicide prevention training.
- Other resource implications (e.g. staffing): This strategy requires resourcing i.e. intelligence and project support officer time and programme coordination

Health and Wellbeing Priorities:

The strategy contributes to *Maximising People's Health, Wellbeing and Safety by seeking to:*

- Improve emotional health and wellbeing of children and young people

- Enable and empower individuals to improve their physical and mental health; thus maximising emotional wellbeing and resilience of adults;
- Enable those at risk of poor health to access appropriate health and care, with informed choices
- Keep vulnerable people safe through prevention and early intervention
- Ensure services recognise cultural barriers, and are inclusive and accessible for existing, new and emerging communities

It also contributes to creating *Healthy and Sustainable Places and Communities* by seeking to:

- Tackle health inequalities:
- Empower connected, inclusive and resilient communities
- Deliver prevention and intervention through locality delivery models

And *Increasing Economic Prosperity through Increased Growth* by increasing appropriate skills and training and opportunities for taking up volunteering

- Safeguarding: Endorsement of this strategy and support to take it forward allows only for favourable outcomes and no implications for the most vulnerable sectors in the community

Background papers

Walsall Multi-Agency Suicide Prevention Strategy 2018-2023

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