The Kent and Medway experience

Suicide Prevention Transformation

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1) The suicide prevention context in Kent and Medway
2) The development and content of our funded programme
3) Evaluation measures
4) Lessons learnt (positive and otherwise)
1) The suicide prevention context in Kent and Medway
The Suicide Prevention Steering Group in Kent and Medway is a collection of over 110 individuals representing these organisations (and many more)
The Steering Group developed and owns our 2015-2020 multi-agency suicide prevention strategy and action plan which follows the national priorities:

1. Reduce the risk of suicide in key high-risk groups
2. Tailor approaches to improve mental health and wellbeing in Kent
3. Reduce access to the means of suicide
4. Provide better information and support to those bereaved by suicide
5. Support the media in delivering sensitive approaches to suicide
6. Support research, data collection and monitoring
Kent and Medway have higher than national suicide rates

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Period</th>
<th>England</th>
<th>South East region</th>
<th>Kent</th>
<th>Medway</th>
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<tbody>
<tr>
<td>Suicide: age-standardised rate per 100,000 population (3 year average) (Persons)</td>
<td>2015 - 17</td>
<td>9.6</td>
<td>9.4</td>
<td>10.5</td>
<td>9.7</td>
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<tr>
<td>Suicide: age-standardised rate per 100,000 population (3 year average) (Male)</td>
<td>2015 - 17</td>
<td>14.7</td>
<td>14.3</td>
<td>15.9</td>
<td>16.9</td>
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<tr>
<td>Suicide: age-standardised rate per 100,000 population (3 year average) (Female)</td>
<td>2015 - 17</td>
<td>4.7</td>
<td>4.8</td>
<td>5.5</td>
<td>3.0</td>
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</table>

But numbers have fallen in recent years

<table>
<thead>
<tr>
<th>Area resident</th>
<th>Gender</th>
<th>2010</th>
<th>2011</th>
<th>2012</th>
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<th>2014</th>
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<tbody>
<tr>
<td>Kent</td>
<td>Male</td>
<td>73</td>
<td>85</td>
<td>97</td>
<td>119</td>
<td>130</td>
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<tr>
<td></td>
<td>Total</td>
<td>100</td>
<td>119</td>
<td>123</td>
<td>150</td>
<td>165</td>
<td>152</td>
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<tr>
<td>Medway</td>
<td>Male</td>
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<td>9</td>
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<td>24</td>
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<td>15</td>
</tr>
<tr>
<td></td>
<td>Female</td>
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<td>5</td>
<td>5</td>
<td>7</td>
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<td>6</td>
<td>2</td>
<td>3</td>
</tr>
<tr>
<td></td>
<td>Total</td>
<td>14</td>
<td>14</td>
<td>20</td>
<td>31</td>
<td>30</td>
<td>22</td>
<td>27</td>
<td>18</td>
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<tr>
<td>Kent &amp; Medway</td>
<td>Male</td>
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<td>112</td>
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<td>152</td>
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<tr>
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<tr>
<td></td>
<td>Total</td>
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<td>174</td>
<td>167</td>
<td>141</td>
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</tbody>
</table>

Source: Primary Care Mortality database, KPHO (JB); Medway Public Health

Numbers of people dying by suicide and events of undetermined intent, 2010-2017 registrations, aged 15+, Kent and Medway residents, by gender
Middle aged men are most at risk (but note the gender gap closes at 75+)

Average annual numbers of deaths from suicide and events of undetermined cause, 2014/15 - 20016/17, Kent residents by age band and gender

Source: PCMD, ONS, KPHO (JB)

Source - KMPHO
What else do we know?

67% of people who died by suicide in Kent and Medway were NOT known to secondary mental health services*

*Based on 2017 coroner registrations in Kent and Medway. Source KPHO and KMPT
Because of our high rates, Kent and Medway were selected to be amongst 8 STP areas to receive additional suicide prevention funding in 2018/19 from NHE England and PHE

The funding looks likely to continue in 2019/20
2) The development and content of the funded programme
AIM
In order to;

PRIMARY DRIVERS
We need to reduce suicides amongst;

1. People not known to primary or secondary MH services (including high risk groups: middle aged men, CYP and students)
2. People not known to secondary MH services but known to primary care
3. People known to secondary MH services

SECONDARY DRIVERS
We will do this by;

1. Raising awareness of available support through social marketing
2. Training over 1000 individuals in suicide awareness & prevention
3. Reducing access to means
4. Understanding more about why people want to die
5. Improving awareness and knowledge of appropriate interventions amongst primary care teams
6. Better identification and support for people with previous suicide attempts
7. Strengthening services at three high risk points
8. Developing a Zero-suicide plan for in-patient settings
9. Increasing knowledge and skills amongst secondary MH staff

CHARGE IDEAS
Examples of how this will be delivered include;

- Release the pressure
- Commission a package of Suicide Awareness and Prevention training
- Review high risk locations
- Suicide Safer Universities Project
- Coroners’ Audit
- GP training pilots (including bespoke training for receptionists)
- “Quality Lab” workshop about primary care innovation
- Enhanced 7 day follow up after discharge from psychiatric ward
- Strengthened support for patients discharged from CMHT
- Enhanced follow up & support for people presenting with self harm at A&E
- Mandatory Suicide Prevention training for all KMPT staff

Reduce suicide rates in Kent and Medway by 10% by 2021

Our driver diagram helped focus our activity
We conducted research to test our theories and to help target our interventions

**In-depth interviews with men who have attempted suicide**
Suicide prevention 18/19 highlights

1) Release the Pressure
A major boost to the campaign resulting in thousands of additional web visits and helpline calls

2) Strengthening secondary MH services
*KMPT working on 5 key projects to improve safety including high risk points*

3) Supporting those bereaved by suicide
*5 key recommendations produced after workshop in Aug*

4) Suicide Awareness & Prevention Training
*Over 1500 free places on Suicide Prevention training being delivered. E-learning being developed*

5) Innovation fund
*Funding awarded to 27 imaginative community projects*

6) Suicide Safer Universities
*An action plan between the Universities and local partners has been agreed and implemented*

7) Workplace interventions
*High risk industries targeted through tradeshows, exhibitions and support to individual businesses*

8) Qualitative research
*Public Health and the Coroner reviewing 150 inquests and interviewing men who have attempted suicide to ensure lessons are learnt*

9) Children and Young People
*Action plan agreed including KSCB and Public Health undertaking thematic review*
Release the Pressure

• A social marketing campaign designed to:
  o Increase awareness of a 24/7 support-line
  o Increase men’s willingness to call the helpline
• The campaign highlights real life events, rather than mental illness as the potential trigger

• The campaign is promoted with advertising in service stations, pubs, on radio, tv and online
• Google adverts are used to ensure that when people search for “how to kill myself” and similar terms, Release the Pressure is the first link they see

https://www.youtube.com/watch?v=nnWjPIAK_Sg
Release the Pressure – Advertising and materials
Stay Alive App
Essential suicide prevention for everyday life.

GET IT ON Google play
Download on the App Store
Examples from the 27 Innovation fund projects

Mentoring Dads through family breakdowns and the suicidal ideation that can follow

Partnering with a local haulage firm to reach drivers and logistics staff with suicide prevention messages

A film inspired by the death of a best friend, exploring ways men can overcome stigma and seek help

Research regarding the impact debt has on mental health

by Ben Akers
Training menu

3hr Suicide Awareness and Prevention workshops

Children and Young People Suicide Prevention workshops
Provided in partnership by West Kent Mind and Kent Safeguarding Children’s Board. To register your interest please email kscbtraining@kent.gov.uk

E-learning
To be provided by Kent Safeguarding Children’s Board. Currently being developed, due to be ready Jan 2019
Over 100 presentations to events, team meetings, boards, forums and exhibitions
4) Evaluation measures
The wide range of evaluation metrics we are using include

- Number and rate of suicides (broken by age, gender, location, method, known to services etc)
  - Number of callers to our 24/7 helpline
    - Individual feedback to helpline
      - Website visitors
      - Media coverage
  - Number of people at training / events / presentations
    - Pre / post and 3 month post training evaluations
- Case studies and bespoke evaluations from Innovation Fund
  - Stakeholder surveys
  - Support from the national evaluation partners NICHE
One piece of feedback from a delegate on one of our commissioned training courses is particularly noteworthy

“Incidentally the training you provided came in useful on Friday evening when I spent an hour persuading a young man not to throw himself in front of a train at Maidstone East station. I managed to convince that he needs to give the meds longer to work and did signposting for where he can gain some assistance and someone to talk to.”
5) Lessons learnt (positive and otherwise!)
Lesson 1 – make sure your programme is realistic

1) Release the Pressure
A major boost to the campaign resulting in thousands of additional web visits and helpline calls

4) Suicide Awareness
Prevention
Over 1500 free places delivered. E-learning developed

7) Workplace interventions
High risk industries targeted through tradeshows, exhibitions and support to individual businesses

2) Strengthening secondary MH services
KMPT working on 5 key projects to improve safety

3) Supporting those bereaved by suicide

Young People
Mental Health
Diagnosis
Research

Workshop in Aug
Universities
Lesson 2 – in the right hands a small amount of funding goes a long way

Saving Lives Innovation Showcase – Dec 17th 2018
Lesson 3 – but don’t forget that the best way of sustaining change is system leadership rather than funding projects
19/20 funded proposals include

1) Release the Pressure
Further roll out of campaign with new high profile partnerships helping to reach target audiences

2) Suicide Awareness & Prevention Training
Continued roll out to the public, voluntary sector, health and social care organisations

3) Workplace interventions
High risk industries targeted through tradeshows, exhibitions and support to individual businesses

4) Strengthening secondary MH services KMPT to deliver on 5 key projects based on NCI evidence

5) Innovation fund
An enhanced Innovation Fund to continue unearthing evidence about effective community support interventions

6) Qualitative research
Detailed research using mixed methodologies to understand more about the lives of men who attempt suicide and possible intervention points

System leadership proposals (which may include funded elements where appropriate)

A) Multi-agency pathway review and redesign (depression, self-harm, crisis care and co-occurring conditions)

B) Options appraisal for bereavement support and real time surveillance

C) Implement recommendations from CYP Thematic Review

D) Primary and Local Care Quality Hub – ensuring high risk individuals are identified and supported