Suicide Prevention Programme – Wave 4 Workshop 14

14 June 2023 13:45-15:00

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| **Details** | **Link/Resources** |
| **Welcome and introduction**  Matt Milarski  *National Collaborating Centre for Mental Health*   * The aim of these monthly workshops is to bring a learning community together to support each other, discuss issues and share some of our work around suicide prevention. They provide an opportunity to learn from the community, make connections and share resources. * Housekeeping was covered. * Session is recorded for note-taking purposes but not going online | Please get in touch with NCCMH at [Suicide.Prevention@rcpsych.ac.uk](mailto:Suicide.Prevention@rcpsych.ac.uk) if you would like to contact any workshop participants. |
| **Topic 1:**  **Kate Bazley**  **Halton Health Improvement Team**  **Question/ topic:** How are schools and the local authorities able to respond to disclosure of suicide attempts? And how can the dangers of misusing over the counter medications be communicated to students effectively and safely?   * Might be worth speaking to local CAMHS teams, CAMHS teams in Lincolnshire go into local schools to provide education. They may be able to provide some help. * In Devon there is a response between CAMHS and educational psychology service. This has allowed a joined-up response, so schools find it easy to engage with the response instead of lots of communications from different agencies. * Currently lacking information on people who attempt suicide and how do we respond to vulnerable people. * Re over counter medications, it is how we create a safe environment at the home re accessibility of medications. This is tricky, we don’t want to scare parents or raise awareness among students. * In Cumbria the local council has adapted cluster and contagion response from adults to young people. They are also running a project with Every Life Matters, and another with Barnados about suicide prevention in schools. * The Three Dad’s walking campaign is trying to get suicide prevention on the curriculum at schools. | * [3 Dads Walking](https://www.3dadswalking.uk/) |
| **Topic 2:**  **Nikki Glassbrook**  **Devon Public Health**  **Question/ topic:** There has been a rise in suicide with a diagnosis of personality disorder, there people often live complex lives and have challenges around homelessness, drug use and mental health, has anyone done any work around this cohort of people and suicide prevention?  When thinking about people who have personality disorder some of this group may also use drugs and be ambivalent towards life, so has anyone carried out some work that might help us look at suicides and drug related deaths in a most meaningful way, and how we look at our real time surveillance data. We also want to know as a system how we respond better to non-fatal attempts.   * Essex has a programme called changing futures. Link in right hand column * Calderdale have been doing some work on this and have published a thematic review relating to the deaths of homeless men. * In Bath and North East Somerset they have a real time surveillance system which they have worked on with North Somerset and S Gloucestershire. They are using QES as the management system, they have 3 modules that look at suicides, homeless deaths and drug related deaths. They then have a panel that looks at the overlap of these deaths and reviews them to help make improvements across the system. | * [Changing Futures - GOV.UK (www.gov.uk)](https://www.gov.uk/government/collections/changing-futures) * [Homelessness and Rough Sleeping Review and Strategy 2021-2024 (calderdale.gov.uk)](https://new.calderdale.gov.uk/sites/default/files/2023-02/Homelessness-and-Rough-Sleeping-Strategy.pdf) |
| **Topic 3:**  **Louise McNally**  **Network Rail**  **Question/Topic:** Recently in the rail network it has been noticed when responding to a suicide there has been an increasing level of accountability being placed on the train operators by coroners at inquests following rail suicides, are any of the group noticing the shift of accountability from coroners and if so how have they been impacted and is anyone aware of any policy change or change in approach by coroners?   * In Lincolnshire, 18 months ago the trust started to have more accountability placed on them by the trust, this was due to a change in coroner. So the trust needed to build up confidence with the new coroner and give assurances. There has now been an improvement. Might be worth seeing if there is a change in coroners in the affected areas. * Network rail have lowered threshold in putting in physical barriers at stations that have frequent occurrences of suicide. New coroner in the area and a change in the way they are engaging with rail suicide is now different, this is likely because now there are things that can be done to prevent suicide on the railway. Increased accountability is a positive as it means that there is now an awareness that there is now evidence-based interventions that can help stop rail suicide. * There is more targeted work going across the network regarding more interventions being used. * Work could be done to build relationships with coroners in high risk locations. |  |
| **Topic 4:**  **Georgina Tennent**  **Cumberland County Council**  **Question/Topic:** There has been an increase in suicides, particularly older people (over 65). These people seem to have two things in common, the recent loss of a partner and/or significant health issues. These individuals had it planned and came out of the blue to family members. Are any other areas seeing this changing demographic?   * Bereavement and or health condition is a factor in other areas for suicide in old people. Needs to start being assessment for suicide risk of partner of someone on palliative care. * These themes can be seen historically, particularly physical health, chronic pain and health anxiety. When caring role for partner comes to an end there is also a heightened risk for suicide * This increase has been seen in Cheshire East, Cheshire West and Chester for the 65 plus group. Conversations are being had with the DWP to support people after retirement age, in this area they are trying to understand more about why this has been occurring. |  |