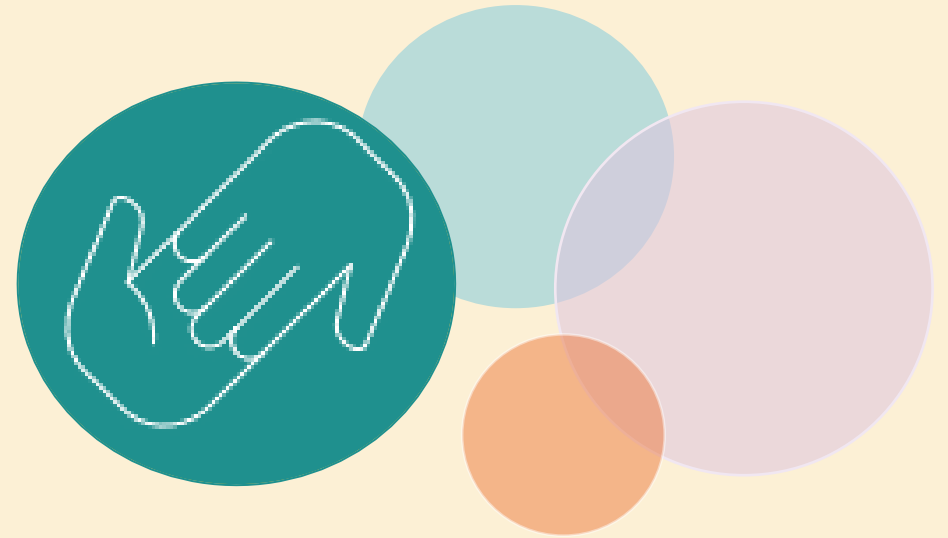


# Hampshire Suicide Prevention Plan

2023-2028



*Ambition: The people of Hampshire will be aware that Suicide Prevention is everybody's business.*

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# Introduction

Between 2014 to 2020 there were a total of 621 deaths with a verdict of suicide (n=560) or suicide-narrative (n=53) in Hampshire.

The impact of suicide on family, friends, workplaces, schools and communities can be devastating; suicide is a major issue for society and a leading cause of years of life lost.

Suicide is often the end point of a complex history of risk factors and distressing events, but there are many ways in which services, communities, individuals and society as a whole can prevent suicides.

The refreshed Hampshire Suicide Prevention Plan outlines our ways of working together locally to support earlier intervention and prevention of suicides.

Our ambition is for the people of Hampshire to be aware that suicide prevention is everybody's business.

# Background

The [Hampshire Mental Wellbeing Strategy 2023-2028](#) sets out our vision for improving outcomes and reducing inequalities in mental wellbeing for local people in Hampshire. The strategy identifies suicide prevention as an area for focused attention, setting out our ambition for Suicide Prevention to be everybody's business. Actions to support this priority are as follows:

1. Develop joined-up place-based signposting to local services & support that promote positive mental health and wellbeing as well as support those at times of distress building on the current No Wrong Door programme.
2. Ensure all organisations have developed internal processes to enable the HIOW System Response following the Suspected Suicide Plan to be implemented in a multi-agency timely manner to respond and prevent further suicides.
3. Map the range of psychological safety support that is available to people working in the field of suicide prevention in Hampshire and share models of good practice such as dedicated mental health support offer by the Police.
4. Ensure the crisis support developments via the NHS Mental Health Transformation workstreams are embedded within all suicide prevention work.
5. Refresh self-harm pathway for all ages to improve early identification and early intervention.
- 6. Embed a life course approach to the prevention of suicide through the refresh of the suicide prevention action plan.**
7. Actively identify funding opportunities that may enable some pilot projects to be designed, implemented, and evaluated to reduce the risk of suicide in key high-risk populations: those who self-harm, high-risk prisoners on release, middle-aged men, isolated older people, victims and perpetrators of domestic abuse.
8. Encourage commissioners and providers of frontline services to consider how prevention and early intervention of suicide and self-harm can be embedded into their service area. Provide advice and expertise on suicide prevention for those re-commissioning services or establishing new offers.

The main mechanism for coordinating and implementing these actions is through the development and implementation of a Suicide Prevention Action Plan for Hampshire.

# Background

In addition to our mental wellbeing local strategy, the national [Preventing Suicide in England Outcomes Strategy](#) has the overall aim of reducing the suicide rate in the general population in England. It identifies six key areas of work that local suicide prevention plans should address:

## **Six Areas for Action Nationally and Locally:**

1. Reduce the risk of suicide in key high-risk groups
2. Tailor approaches to improve mental health in specific groups
3. Reduce access to the means of suicide
4. Provide better information and support to those bereaved or affected by suicide
5. Support the media in delivering sensitive approaches to suicide and suicidal behaviour
6. Support research, data collection and monitoring

This strategy also outlines the responsibilities of local public health teams for developing local all-age suicide prevention action plans and for hosting multi-agency suicide prevention partnerships.

A revised National Strategy is due in Autumn 2023. The Hampshire approach outlined in this document will be reviewed and amended accordingly.

# Governance

To ensure effectiveness and joined-up working across the system, roles, responsibilities, and member organisations has been reviewed as part of the refresh of this plan. The Suicide Prevention Forum will continue to deliver suicide prevention actions across Hampshire moving forward.

## **Hampshire Suicide Prevention Forum Roles & Responsibilities:**

- Brings together key stakeholders from across Hampshire to maintain our strategic commitment to making suicide prevention everybody's business.
- Develops and oversees the implementation of the Hampshire Suicide Prevention Plan in line with National Guidance.
- Oversees evaluation of the Hampshire Suicide Prevention Plan.
- Uses data and insight to inform work planning.
- Facilitates partnership working to ensure system-wide implementation of suicide prevention priorities.
- Provides regular updates on progress to the Hampshire Improving Mental Wellbeing Board

## **Members Include:**

- Hampshire County Council
- Hampshire Voices Collective
- Frimley NHS & Hampshire and Isle of Wight Integrated Care Boards
- Southern Health
- Primary Care
- Hampshire CAMHS
- Probation Service
- University of Winchester
- Inclusion
- Health and Justice Partnership
- British Transport Police
- Network Rail
- Hampshire Constabulary
- Hampshire Coroner's Office
- Hampshire Isle of Wight Fire & Rescue
- Amparo Bereavement Support Service
- Armed Forces & Veterans Representation
- Hampshire CVS

# Our progress so far...


Since the publication of the Hampshire Suicide Prevention Strategy 2019-2021, Hampshire Suicide Prevention Forum members have worked together to improve our approach to suicide prevention and early intervention locally. Below outlines some of the achievements over the last four years, in partnership with the ICS.

**Established a Local Real Time Surveillance System** to strengthen our ability to respond to suspected suicides in a timely manner.

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**Commissioned Amparo Suicide Bereavement Support Service.** Amparo provide practical & emotional support for anyone (all ages) recently or historically affected by suicide. 

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**Supported Hampshire Voices: A Collective of People with Living Experience of Suicide.** Voices work collaboratively with organisations across Hampshire to offer guidance, advice and signposting on suicide-related action. 

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**Rolled-Out Primary Care Suicide Prevention Training** on suicide awareness and suicide intervention to increase knowledge and confidence of primary care staff across Hampshire.

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**Supported Suicide Prevention and Postvention in Schools and Colleges** through the development of a postvention protocol, self-harm support for professionals training, and managing suicidality in students; educational psychology supervision and training pilot.

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**Workforce Development** of frontline staff and volunteers across Hampshire through Suicide First Aid Training; Suicide Prevention Safeguarding webinar, and the Collaborative Assessment and Management of Suicidality Training for clinicians.

# Guiding Principles

To achieve our vision of making suicide prevention everybody's business, we have identified 5 guiding principles that will underpin all actions. These principles compliment those outlined within the Hampshire Mental Wellbeing Strategy.

- 1. Living experiences:** Actions will be co-designed and developed alongside Hampshire Voices: A collective of people with living experiences of suicide.
- 2. Adopt a lifecourse approach:** Consider how all ages and key transitions are managed and supported by actions.
- 3. System Ownership:** Partners recognise their roles and responsibilities in implementing actions identified within this plan; working closely with other suicide prevention forum members.
- 4. Data-led decision making:** Actions must make best use of available insight, intelligence and evidence to maximise effectiveness.
- 5. Language:** All partners and actions promote appropriate and de-stigmatising language when discussing suicide and suicidality.





# Areas for Action

The Hampshire Suicide Prevention Forum has identified the following areas for action for the revised Suicide Prevention Action Plan for Hampshire:

1. Increase awareness and understanding of the economic and social risk factors for suicidality.
2. Tailor approaches to suicide prevention for particular groups.
3. Reduce access of means to suicide by promoting suicide safer communities.
4. Ensure appropriate and sensitive communications of suicide and suicidality across all sectors in Hampshire.
5. Provide the 'right support' at the 'right time' for those individuals and communities affected by a suspected suicide death.
6. Equip people with the knowledge and skills necessary to support children and young people who self-harm.
7. Improve research, data collection and monitoring.

# Timescales, Monitoring & Reviewing

## TIMESCALES

The following slides provide high-level summary of our proposed actions over the lifetime of this plan. Mirroring the Hampshire Mental Wellbeing Strategy, actions are divided into two groups **Now** and **Next**.

- **Now** actions are those that the Suicide Prevent Forum is committed to delivering by June 2024.
- **Next** actions are those that will be completed within the lifetime of this action plan, but will not commence until 2024 and/or beyond.

## MONITORING

The Suicide Prevention Forum will monitor progress and risks on a quarterly basis. An annual update will also be taken to the Hampshire Improving Mental Wellbeing board and form part of the broader update provided to the Hampshire Health and Wellbeing Board on an annual basis.

An approach to evaluation of actions will be agreed with the Suicide Prevention Forum in July 2023.

## REVIEWING

National and local suicide prevention priorities are rapidly changing. Therefore, an iterative approach to action implementation and development is needed.

We expect that a review of key actions will be required following the publication of the revised national strategy (expected Summer 2023).

In the medium/long-term, actions will be reviewed on an annual basis to determine key actions for the upcoming year.

# 1. Economic and Social Risk Factors for Suicidality

Suicidal behaviours are shaped by the social, economic, and physical environments in which we live. In recent years, the impact of financial stress, poor housing, and social isolation on mental ill health and suicidality has been well documented. Effective suicide prevention strategies have a role to play in increasing awareness and advocating for policy and practice changes which allow for earlier intervention and prevention of suicide.

Area	Action	Outputs	Timescales
Debt	Deliver Money and Mental Health Training to frontline staff and volunteers.	Staff completing the training are aware of the relationship between money and mental wellbeing, and know where to signpost for further support.	Now
Debt	Understand the relationship between different types of debt (e.g., gambling/no-pension/high cost loans etc.) and suicide risk locally to tailor support through a rapid needs assessment.	Clear recommendations for specific actions Suicide Prevention Forum members can take.	Next
Financial Education	Improve signposting to financial education resources for all education settings from early years to post-16	Creation of financial education page on HiES website	Now
	Pilot Financial Education project for children experiencing vulnerability	Pilot delivery of Work Out Your Money sessions at targeted HAF programmes/young carers groups/youth services across Hampshire by Citizen's Advice Havant	Next
Housing	Deliver appropriate workforce suicide prevention and intervention development training for housing staff.	Staff completing the training are aware of the signs that someone may be experiencing suicidal thoughts, have the confidence to intervene, and know where to signpost for further support. Learning is reinforced through action learning sets.	Now
Those with Multiple Vulnerabilities	Expand the Collaborative Assessment & Management of Suicidality training to frontline staff from services that work with residents experiencing multiple vulnerabilities.	Staff feel confident supporting and signposting someone experiencing suicidal ideation. Best practice is promoted and supported through clinical supervision of those undertaking CAMS training.	Now
Those with Multiple Vulnerabilities	Work with safeguarding partners to understand how/when it would be suitable for suicide risk to be assessed by frontline staff.	Publish suicide prevention and intervention care pathway(s) and guidance for key frontline services.	Next

# 2. Tailor Approaches For Particular Groups

While everyone is at risk of suicide, that risk is not distributed equally amongst the population. The [2023 NCISH Annual Report \(2010-2020\)](#) highlights some of the population cohorts at greatest risk of suicide and suicide intent in England. Locally, the Hampshire Suicide Audit is used to identify trends amongst particular groups. We will use a combination of local and national insight and intelligence to target interventions at those with the greatest need.

Area	Action	Outputs	Timescales
Insight & Intelligence	Use the 2023 Hampshire Suicide Audit to identify which particular groups to focus interventions and support.	Better understanding of which groups are at the highest risk of suicide in Hampshire.	Now
Those in touch with the criminal justice system	Review probation risk assessments to ensure suicide risk and wider economic and social risk factors are appropriately captured and assessed.	To be identified at a later stage.	Next
Domestic Abuse	Develop and deliver a joint action plan between domestic abuse and suicide prevention.	Publish Joint language guide and delivery of workforce development training on suicide prevention.	Now
Men's Health	Promote awareness and access to training and support to community led men's health groups.	Reduce stigma associated with men's mental ill health & promote men's mental and emotional resilience using the five ways to wellbeing.	Now
Co-occurring conditions	Embed suicide awareness and mental health crisis management into the co-occurring conditions workforce training. Suicide prevention pathway is included in the co-occurring conditions joint working protocol.	Staff have the confidence and skills to: recognise the signs that someone may be experience suicidal ideation, intervene, and signpost to further support.	Now
Public Health Commissioned Services	Ensure suicide prevention is incorporated into commissioned services including; public health nursing, domestic abuse, substance misuse, and sexual health.	To be identified at a later stage.	Next
Tailored support and interventions for other particular groups	Dependent on the findings of local and national insight & intelligence. Decisions on which groups to focus on will made by suicide prevention forum members	To be identified at a later stage.	Next

# 3. Reducing Access of Means to Suicide

Reducing access to suicide means is an important component of suicide prevention. The effectiveness of restricting the availability of pharmaceuticals and chemicals, and restricting access to heights and train stations on suicide rates, has been well documented. The National Institute of Health and Care Excellence published an [evidence review](#) (2018) on soft and hard measures aimed at reducing access of means. It highlights key actions that can be taken both nationally and locally. Local insight into lethal suicide methods will also be used to inform priority actions.

Area	Action	Outputs	Timescales
Rail	Host a task & finish group with rail partners to understand the roles and current actions being taken.	An agreed way of working with rail partners and joint actions.	Now
Signage in Public Places	Review and consult on a formal suicide intervention signage policy for public places for Hampshire.	Hampshire Suicide Prevention and Intervention Policy.	Next
Local Planning	Establish a tall buildings risk assessment taskforce to support facilities management companies and other local organisations to make communities suicide safer.	To be identified at a later stage.	Next
Online Harms	As a proposed theme within the revised national strategy, specific actions will be identified/taken once further guidance is provided.	To be identified at a later stage.	Next

# 4. Appropriate and Sensitive Communication

The topic of suicide should be approached with care and compassion. Irrespective of context (engaging in dialogue, talking to someone with living experience, or writing about the issue in a professional setting) it's important we remain mindful of our language to avoid reinforcing the stigma that prevents people from seeking help. It's also important that frontline staff, volunteers, and members of the public feel confident and equipped to intervene and signpost people to the right support, if they are concerned that someone may be at risk of suicide.

Area	Action	Outputs	Timescales
Workforce Development	Deliver Suicide First Aid Training; Promote Primary Care Training; Expand the Education Suicidality Pilot	Staff completing the training are aware of the signs that someone may be experiencing suicidal thoughts, have the confidence to intervene, and know where to signpost for further support. Learning is reinforced through action learning sets.	Now
Members of the Public	Promote zero suicide alliance training to members of the public; awareness campaign to increase confidence to engage in appropriate conversations about suicide risk and suicide ideation.	Increase in the number of Hampshire residents completing the zero suicide alliance training.	Next
Local Media	Commission a Media Consultancy Service to identify support needed to promote responsible reporting of suicide across sectors.	Improved relationship with local media outlets and responsible reporting; a clear process for reporting on a suspected suicides or serious suicide incidents locally.	Now
Postvention	Commission a Media Consultancy Service to develop a communications postvention response toolkit to support local settings.	Suicide Postvention Response Toolkit to be used in conjunction with postvention protocols and the suicide contagion and cluster response plan.	Now

# 5. Supporting Those Affected by a Suspected Suicide Death

When someone dies by suspected suicide there is an immediate and often devastating effect on the people around them. Suicide has a ripple effect on the community and those affected are 65% more likely to attempt suicide themselves. As a result, providing guidance and support in a timely manner for those navigating this complex grieving process, is an important aspect of local suicide prevention plans.

Area	Action	Outputs	Timescales
Education Postvention Protocol	Refresh existing postvention protocol & promote new postvention protocol.	Increased confidence amongst professionals of the postvention process.  Suicide prevention & postvention policy to be included within annual school safeguarding audit	Now
Amparo Bereavement Support Service	Continue to promote and signpost to amparo support service.	Increased awareness and uptake of Amparo service for those that need it.	Now
Real Time Surveillance System	Review real time surveillance system data on a monthly basis to identify potential suicide contagions and clusters.	Timely communication with partners regarding suspected suicides and clear contagion response process across Hampshire.	Now
Workplace Postvention & Suicide Safety Plans	All Hampshire Suicide Prevention Forum members develop and implement a postvention & suicide safety plan within their organisation; Suicide postvention and safety plan template to be agreed by members.	Organisations have the infrastructure in place to mitigate suicide risk and to provide an appropriate and timely postvention response.	Next
Workplace Postvention	Commission a support package to assist organisations in their response to the suspected suicide of an employee.	Organisations feel supported in their grieving process and potential suicide contagion is prevented.	Next

# 6. Equip people with the knowledge and skills necessary to support children and young people who self-harm.

The [2023 NCISH Annual Report \(2010-2020\)](#) highlights that although suicide rates are declining in England, suicide deaths amongst those <25yrs. are rising, particularly amongst women and girls. Young people are more likely to report suicidal ideation and self-harm than the general population. Furthermore, young people that self-harm are at greater risk of suicide. It's important that parents, carers, professionals, and peers feel equipped to support a young person who is self-harming and/or to prevent a young person from self-harming in the first instance.

Area	Action	Outputs	Timescales
Needs Assessment	Conduct a self-harm needs assessment to understand current gaps/priorities, covering self-harm with suicidal intent and non-suicidal self injury.	Clear recommendations for next steps.	Now
Workforce Development	Provide suicide and self-harm prevention and management training/supervision for education staff through the educational psychology pilot and Solent Mind self-harm support service. Continue to promote HiES e-training and other free, quality assured training offers.	Staff completing the training are aware of the signs that someone may be experiencing suicidal thoughts, have the confidence to intervene, and know where to signpost for further support. For those participating in the ed psych pilot, learning is reinforced through group supervision.	Now
Whole Settings Approaches	Work with mental health support teams to embed self-harm prevention (including wider risk factors such as substance misuse), intervention, and management into Whole School Approach audit tool.  Provide resources for education staff through the Hampshire Health in Education Website.	To be identified at a later stage.	Next
Pathways	Through Hampshire Safeguarding Partnership, embed self-harm prevention into the refresh of the children and young people self-harm pathway.	Professionals have a clear understanding of how a child or young person can access support	Now



# 7. Improve Research, Data Collection, and Monitoring

Since 2013 Hampshire Public Health has conducted a local suicide audit which provides us with valuable insight into local needs. Since 2019, the Real Time Surveillance System has allowed us to identify potential suicide contagions and clusters in a timely manner; improving our ability to provide an appropriate, joined-up postvention response. Ongoing work is needed to enhance our understanding of the patterns of suicide, self-harm, and serious suicide attempts.

Area	Action	Outputs	Timescales
Hampshire Suicide Audit	Conduct bi-annual suicide audits for Hampshire. Share findings with the Hampshire Suicide Prevention Forum to inform decision-making.	Identify emerging patterns and priorities for future suicide prevention action across the system.	Now
Real Time Surveillance System	Review real time surveillance system data on a monthly basis to identify potential suicide contagions and clusters.	Timely communication with partners regarding suspected suicides and clear contagion response process across Hampshire.	Now
Working with those with living experiences	Continue to support and co-develop actions with Hampshire Voices. Support recruitment and promotion of Hampshire Voices	Voices members feel supported, included, and valued as members of the suicide prevention forum and wider workstreams.	Now

