



Darlington Suicide Prevention Plan 2017-2022

This plan builds on the *Darlington Suicide Prevention Plan 2016* and makes reference to previous actions building on the learning and achievements made. The development and implementation of the prevention plan is delivered and overseen by the local Darlington Suicide Prevention Group. This group is a multi-agency group led by public health and includes NHS Darlington, TEWV, Durham Constabulary and a strong VCS representation; it reports into the Darlington Mental Health Network.

The group was set up in response to the government's *Preventing suicide in England a cross-government outcomes strategy to save lives 2012* and the following document *Preventing Suicide in England: three year on annual report 2017*.

There is no universally accepted definition of suicide, as there are difficulties in determining the exact intent of a person who dies. However, a broad definition is that it is:

'..a fatal act of self-harm with a conscious intent to end life.'

Suicides are not inevitable, in most cases they can be prevented. Suicide rates in England have increased since 2007, making suicide the biggest killer of men under 50 as well as a leading cause of death in young people and new mothers. On average, 13 people kill themselves every day in England.

The overarching aim of the plan is to:

- To facilitate a reduction in the suicide rate in Darlington
- To provide better support for those bereaved or affected by suicide in Darlington

National Policy

Preventing suicide in England; a cross government outcomes strategy to save lives (2012) is a national all age prevention strategy.

The overall objectives of the National Strategy are:

- A reduction in the suicide rate in the general population in England; and
- Better support for those bereaved or affected by suicide

The Strategy identifies six key areas for action to support delivery of these objectives:

- 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**

Epidemiological Assessment of Need

Suicide figures are compiled over a 3 year period as the use of 3-year rolling averages counteracts the effect of fluctuations over time. There is a delay in receiving the data due to awaiting the verdict of a coroner investigation on each case.

Summary of Darlington Suicide figures 2014 - 2016

- There were 36 deaths by suicide or undetermined injury in Darlington between 2014 and 2016
- This is a reduction of 3 deaths from the previous year's audit (i.e.2013 -2015)
- Of the 36 deaths 78% were male (28) and 22% were female (8)

The last full Darlington Suicide Audit was completed in 2016 using data from 2012 - 2014. Information from this audit showed:

- The greatest number of cases of deaths by suicide was in males age 50-59
- 52% (16) of all cases were men under the age of 50.
- In 35% (11) of cases the person was unemployed at time of death.
- In 48% (15) of cases the person lived alone at the time of death.
- 61% of deaths (19) occurred in the home.
- Hanging/strangulation was the most common method of suicide and occurred in 74% (23) of cases.
- Toxicology reports indicate that 39% (12) cases had alcohol in the blood at the time of death.
- 42% (13) of cases were known to the police prior to their death, 46% (6) had been in contact with the police in the 3 months preceding their death.
- 5 cases died in less than a year of being released from prison.
- A date of last contact with a GP was known for 22 cases, of which 7 (32%) had been seen by a GP within three months of their death.
- 10 (32%) of cases were recorded as being known to mental health services at some point prior to their death.
- Themes were identified for 26 of the 31 cases. The most common single theme was relationship problems/breakdown which features solely in 5 of the cases. This also featured in a further 5 cases where there were multiple themes.

Darlington Trends

- The most recent figures (2014 - 2016) show that Darlington has a suicide rate that is higher than the rate for England and the North East average rate. It is 13.1 in Darlington and 11.6 and 9.9 respectively for the North East region and England. Please note this is a rate per 100,000 of the population not actual numbers of deaths.
- The suicide rate for males in Darlington is higher than the both the regional and national rate. It is 21.2 in Darlington and 18.1 and 15.3 respectively for the North East region and England. Please note this is a rate per 100,000 of the population not actual numbers of deaths.
- There has been a decrease of 3 deaths by suicide and undetermined injury in Darlington from the previous figures (2013-2015).
- Prior to this decline there had been an increase at each 3 year rolling average measurement stage in the Borough since 2010.

Figure 1: Suicide: age-standardised rate per 100,000 population (3 year average) (Persons). Darlington compared to England 2001 - 2015

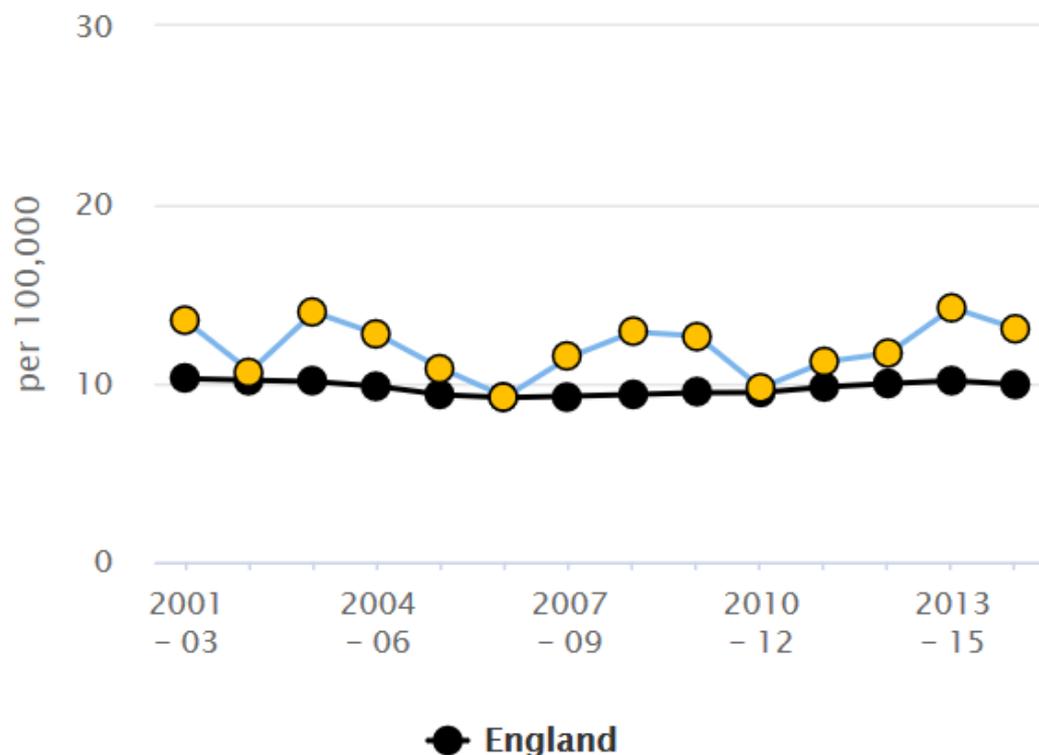


Figure 2: Suicide: age-standardised rate per 100,000 population (3 year average) (Persons) 2014 – 2016. CIPFA Nearest Neighbours to Darlington

Area	Value	Lower CI	Upper CI
England	9.9	9.8	10.1
Dudley	9.5	7.5	11.8
Derby	9.8	7.5	12.6
Telford and Wrekin	9.9	7.2	13.3
Doncaster	10.1	8.0	12.6
Wakefield	10.4	8.4	12.8
Barnsley	10.8	8.4	13.6
Bolton	10.9	8.7	13.6
Medway	11.1	8.8	13.9
Calderdale	11.3	8.7	14.5
Bury	11.6	8.7	15.0
North Tyneside	12.8	9.9	16.2
Darlington	13.1	9.1	18.1
Tameside	13.6	10.8	17.0
Stockton-on-Tees	13.8	10.7	17.4
Rotherham	13.9	11.2	17.1
St. Helens	15.8	12.4	19.9

Source: Public Health England (based on ONS source data)

Compared with benchmark ■ Lower ■ Similar ■ Higher ■ Not compared

Darlington Suicide Prevention Action Plan

1. Reduce the risk of suicide in key high risk groups					
	Key Area of Action	Desired Outputs	Co-ordinators/ Leads	Timescale	Resource
1a	Men are a high risk group in Darlington. Reducing risk in men, especially in middle age by developing treatment and support settings that men are prepared to use	Scoping and delivery of, programmes which provide opportunities for men to create networks of support e.g. 'Men's Sheds' Delivery of regional Mental Health Resilience through Football project. This programme works with football clubs to engage men in mental health improvement through sport.	Darlington Suicide Prevention Group Public Health England & NEMHDU	September 2018 planning workshop 2018 -2019 with quarterly review	Within existing resource NHS England priority funding
1b	Mental Health Service Users are a high risk group in Darlington	Scoping and delivery to a commitment to a, 'zero suicide ambition' across public sectors. Increasing Access to Psychological Therapies (IAPT) & Crisis Review Suicide Rapid Response Service	Darlington Suicide Prevention Group Including CCG and TEWV NECS MIND/Insight	September planning workshop 2018 Update in May 2018 In place currently,	Within existing resource

				quarterly reviews.	
2. Tailor Approaches to improve mental health in specific groups					
	Key Area of Action	Desired Outputs	Co-ordinators/ Leads	Timescale	Resource
2a	There is a national and local focus on improving the mental health of children and young people (CYP) through the national <i>Future in Mind</i> (FIM) strategy and local CYP mental health transformation plan as well as mental health being a focus of the Darlington Children & Young People's Plan (CYPP)	<p>Delivery of mental anti-stigma campaign to CYP Mindful Schools delivery Mental Health First Aid Training to school staff and school nurses.</p> <p>Samaritans, 'Step by Step Service' Distribution and delivery of <i>Help When We Needed It Most: How To Prepare For And Respond To Suicide In Schools And Colleges</i></p> <p>Darlington Mind Self-Harm Prevention Project for Children and Young People</p>	<p>Darlington Suicide Prevention Group</p> <p>Samaritans</p> <p>MIND Tees Valley YMCA</p>	<p>May & October 2017 - 2022</p> <p>2016-2017</p> <p>In place currently, quarterly review</p> <p>In place currently, quarterly reviews</p>	<p>Future in Mind Funding</p> <p>Within existing resource</p> <p>Big lottery funding</p>
2b	Improving mental health in those who are vulnerable due to economic circumstances eg. unemployed, in financial hardship, homeless	Awareness raising of mental health in local businesses to reduce stigma and support individuals back into work and within the workplace e.g. Mental Health First Aid (MFHA) and Applied Suicide Intervention Skills Training (ASIST)	Darlington Partnership, Darlington Cares, Public Health	September 2018	Within existing resource

		<p>Liaise with statutory and voluntary organisations who work with those affected to ensure signposting of support</p> <p>Raise Awareness of resources & training Promote reducing the risk of suicide: a toolkit for employers</p>			
2c	People who misuse alcohol and/or drugs are an important group to target interventions towards due to increased risk.	<p>Work with local treatment services provider to offer awareness training in order to increase knowledge of staff. Including ASIST, safeTALK, MHFA</p> <p>Link with drug related death group to facilitate any shared learning.</p>	<p>NECA & Public Health</p> <p>Public Health</p>	<p>September 2018-20</p> <p>In place currently, quarterly reviews</p>	NHS England priority funding
2d	Explore the roll out of the GP and Primary Care Suicide prevention awareness e-learning programme	Increased awareness of mental health and reducing stigma	NHS England, Darlington CCG, LA Leads	September 2018	Within existing resource

3. Reduce access to means of suicide

	Key Area of Action	Desired Outputs	Co-ordinators/ Leads	Timescale	Resource
3a	The majority of suicides in Darlington happen within the home but Darlington has a	Support & learn from the Rail Industry Suicide Prevention Programme (Samaritans, British Transport Police &	Darlington Suicide Prevention Group	September 2018	Within existing funding

	busy railway station where prevention work is very important.	Network Rail) to reduce suicide on the railways.			
3b	Suicide Prevention to be considered at design stage	Encourage local authority planning to include health and safety consideration Reference to prevention work in strategies and master plans	DBC Planning department	September 2018 with quarterly reviews	Within existing resource
4. Provide better information and support to those bereaved or affected by suicide					
4a	Recently bereaved to suicide are a high risk vulnerable group.	Support for those recently bereaved or affected by suicide with advice and guidance Promotion use of PHE guidance 'Help Is At Hand'	VCS Coroner's Office Public Health	September – December 2018 with quarterly reviews	Indicative Cost
5. Support the media in delivering sensitive approaches to suicide and suicidal behaviour					
5a	There are important issues to consider when covering suicide in the media. Inappropriate reporting of suicide may lead to imitative or 'imitational' behaviour.	Promotion of Samaritans, ' <i>Media Guidelines for Reporting Suicide</i> ' to all partners Increase positive mental health attitudes in the media and promote help seeking behaviour	Darlington Suicide Prevention Group DBC Communications Team	July 2018 with quarterly reviews	Within existing resource

6. Support Research, Data Collection and Monitoring

	Key Area of Action	Desired Outputs	Co-ordinators/ Leads	Timescale	Resource
6a	Production of timely annual Darlington suicide audit	Identification of high risk groups, patterns and areas locally	Public Health, Police & Coroner's office	September 2018 & then annually.	NHS England priority funding
6b	Ensure local suicide early alert system for potential suicides	<p>Identification of and timely intervention for potential clusters</p> <p>Robust intelligence and recording system to learn from attempted suicides</p>	GPs, NECS & Public Health	<p>In place currently, quarterly reviews</p> <p>2018 onwards as part of prevention group.</p>	
6c	Mental Health Service Users are a high risk group in Darlington	Work with Darlington MHN to understand and improve the physical health improvement opportunities for those with mental health conditions	Darlington Mental Health Network (MHN)	January 2019	Within existing resource

