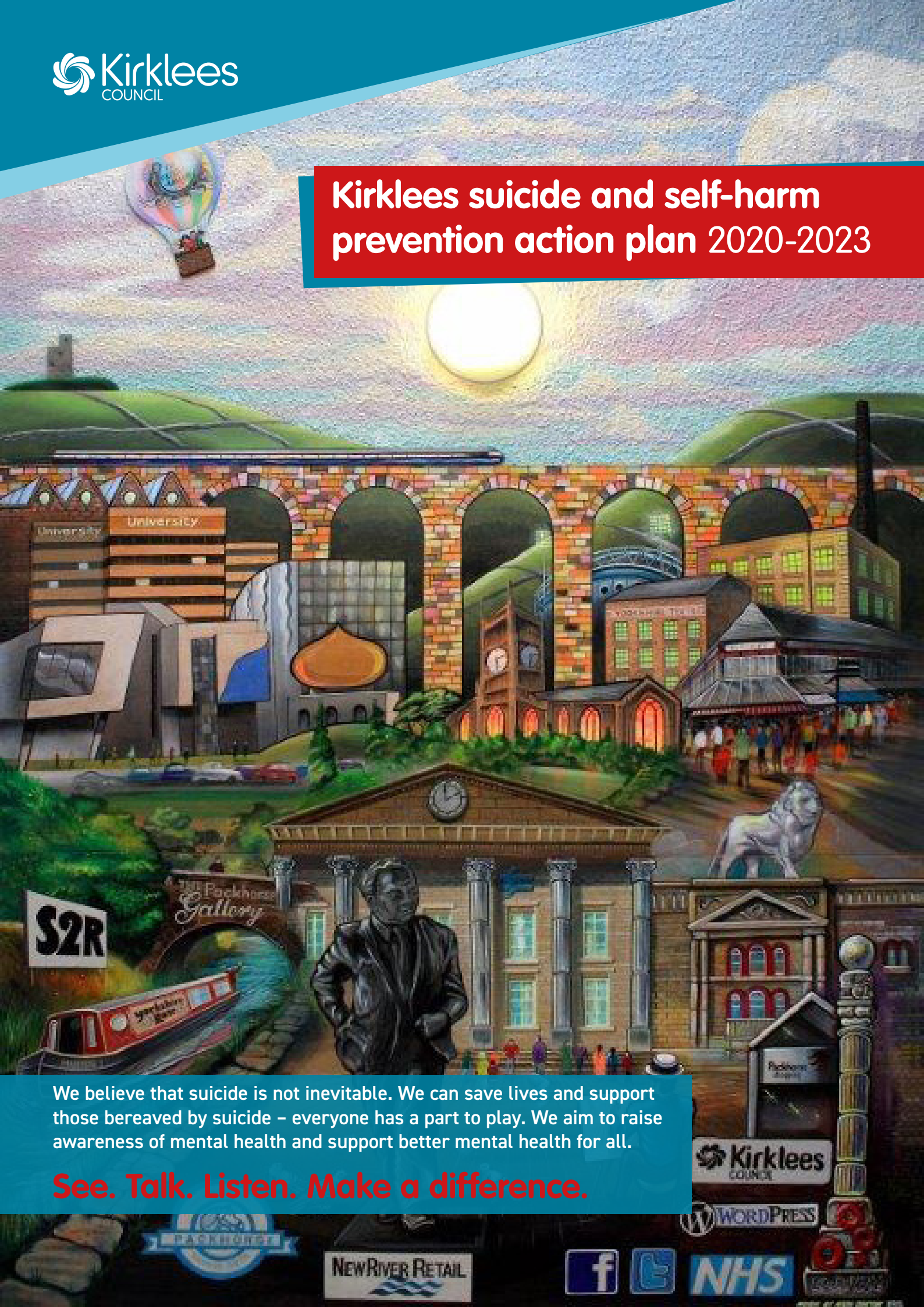
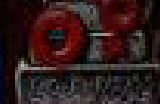
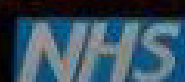


Kirklees suicide and self-harm prevention action plan 2020-2023

We believe that suicide is not inevitable. We can save lives and support those bereaved by suicide – everyone has a part to play. We aim to raise awareness of mental health and support better mental health for all.

See. Talk. Listen. Make a difference.



Purpose

The purpose of this framework is to set out the priorities for the Kirklees suicide prevention agenda for 2020-2023. This framework is to guide local action and activity across our system.

Every suicide is a tragedy and we must continue to work collaboratively. Suicide marks the ultimate loss of hope, meaning and purpose to life and it has a wide-ranging impact on families, communities and society. The factors leading to someone taking their own life are complex. No one organisation is able to directly influence them all. Suicide is often the end point of a complex history of risk factors and distressing events; the prevention of suicide has to address this complexity. The priorities are driven by the most recent Kirklees Suicide Audit (2016 – 2018) findings, local intelligence and real time surveillance data. Included in this is the importance of encompassing the needs of family members; carers and friends of people who display self-harm and suicidal ideation behaviours

Scope

The suicide prevention action plan sits within the public mental health programme that aims to improve mental health and wellbeing across the life course at a population level, focusing on the protective factors for positive mental health and reducing the risk factors for poor mental health. The key ambitions of this action plan are to reduce suicide via a joined-up approach across Kirklees.

The scope of this action plan is informed by priorities relating to local need, some of which are highlighted below in tables 1 and 2 in the 'local picture' section.

Suicide continues to be a major public health issue. Last year, the UK saw a significant increase in the rate of deaths registered as suicide, which has changed a trend of continuous decline since 2013.

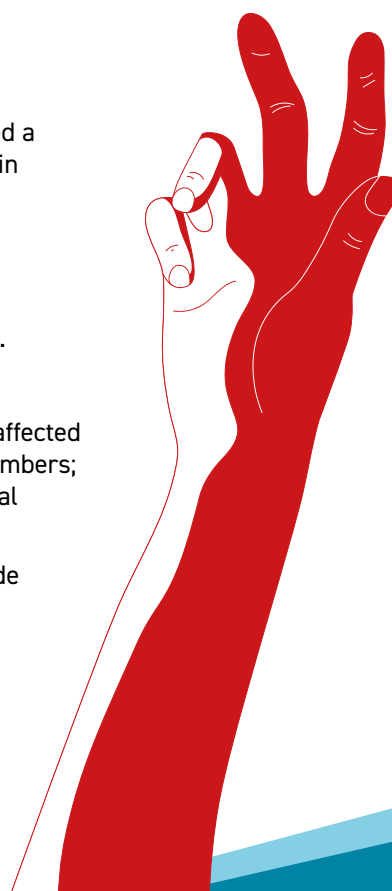
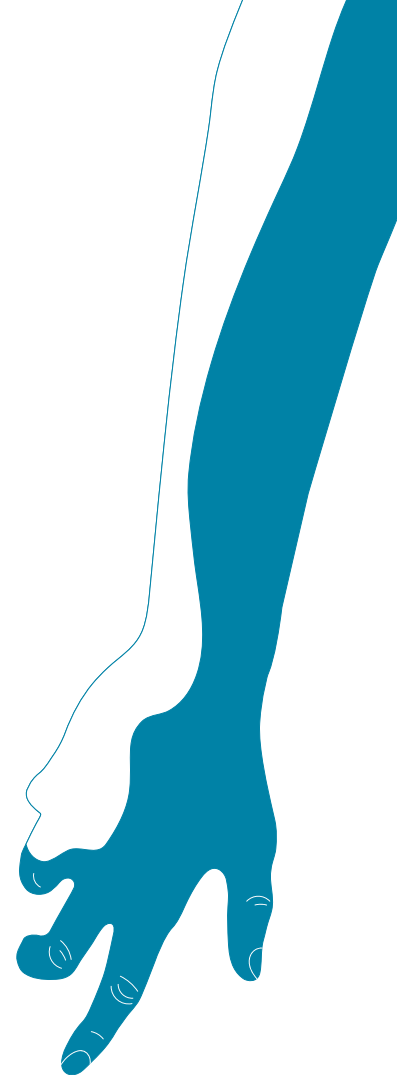
In 2018, there were 6,507 suicides registered in the UK, an age-standardised rate of 11.2 deaths per 100,000 population; this latest rate is significantly higher than that in 2017 and represents the first increase since 2013. Three-quarters of registered suicide deaths in the UK in 2018 were among men (4,903 deaths), which has been the case since the mid-1990s.

Background

Her Majesty's Government / Department of Health (DH) published a national suicide prevention strategy in 2012: Preventing Suicide in England: A cross-government outcomes strategy to save lives.

This highlighted six key areas for action:

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 or self-harm, encompassing the needs of family members; carers and friends of people who display self-harm and suicidal ideation behaviours.
5. Support the media in delivering sensitive approaches to suicide and suicidal behaviour.
6. Support research, data collection and monitoring.



National updates

In January 2019 the national suicide prevention strategy was refreshed in the form of the **Fourth Annual Progress Report**.

Alongside the key areas for action, the refreshed strategy (2019) has also prioritised:

1. Working in partnership with local government to embed their local suicide prevention plans in every community.
2. Delivering our ambition for zero suicide in mental health inpatients and improving safety across mental health wards and extending this to whole community approaches.
3. Addressing the highest risk groups including middle-aged men and other vulnerable groups such as people with autism and learning disabilities, and people who have experienced trauma by sexual assault and abuse.
4. Tackling the societal drivers of suicide such as indebtedness, gambling addiction and substance misuse and the impact of harmful suicide and self-harm content online.
5. Addressing increasing suicides and self-harming in young people; and
6. Improving support for those bereaved by suicide.

The following key documents inform the content of the current action plan:

National

- [Preventing suicide in public places](#) (Public Health England, 2015)
- [Identifying and responding to suicide clusters and contagion](#) (Public Health England, 2015)
- [Suicide Prevention](#) (House of Commons Health Committee, 2016).
- [Government response to the Health Select Committee's Inquiry into Suicide Prevention](#) (Department of Health, 2017)
- [National Confidential Inquiry into Suicide and Safety in Mental Health](#) (Healthcare Quality Improvement Partnership, 2019)
- [Prevention concordat for better mental health](#) (Public Health England, 2020)
- [Support after a suicide: A guide to providing local services](#) (Public Health England, 2016)
- [Suicide Prevention, Resources and Guidance](#) (Public Health England, 2019)
- [Suicide Prevention, Cross Government Plan](#) (Public Health England, 2019)
- [Five Year Forward View for Mental Health – One year on](#) (NHS England, 2017)
- [Preventing Suicide in England: Fourth Progress Report of the Cross-Government Outcomes Strategy to Save Lives](#) (Public Health England, 2019)
- [Suicide prevention: A guide for local authorities](#) (Local Government Association, 2014)
- [Local Suicide Prevention Resources: Case Studies & Information Sheets](#) (National Suicide Prevention Alliance in association with Public Health England, 2017)
- [Local Suicide Prevention Planning in England](#) (Samaritans and University of Exeter, 2019)

Regional

- [West Yorkshire and Harrogate Suicide Prevention Plan](#) (WYHHCP, 2017-2022)
- [West Yorkshire and Harrogate Suicide Bereavement Service](#) (WYHSBS, 2019)

Local

- [Kirklees Mental Health and Wellbeing Assessment](#) (Kirklees Council, 2018)
- [Kirklees Health and Wellbeing Plan](#) (2018 – 2023)

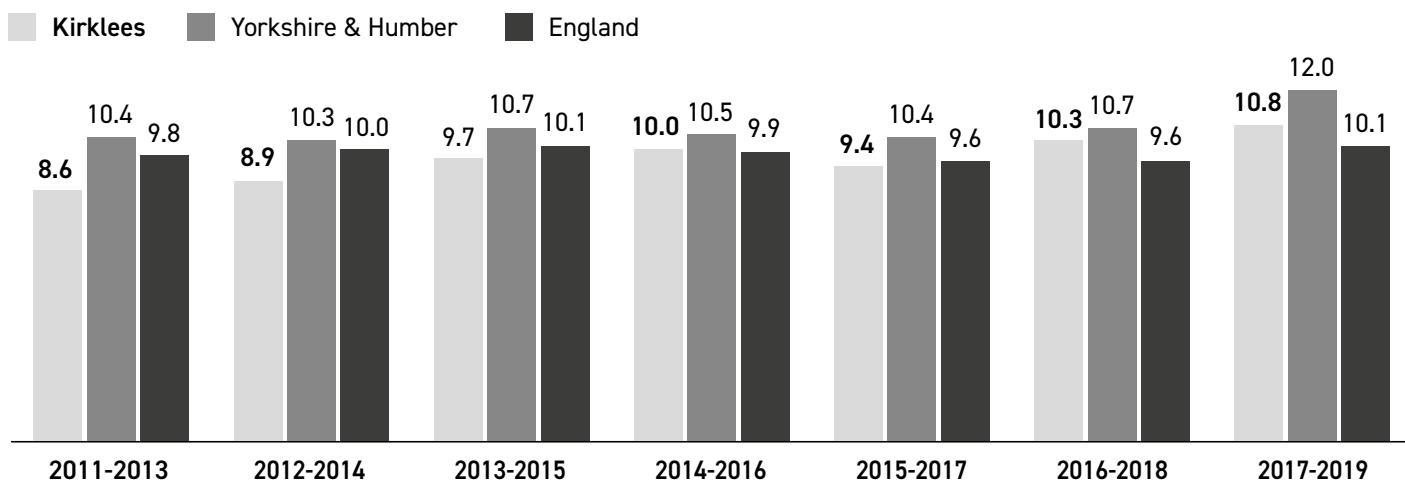


Local picture

There is a similar picture in Kirklees to the national picture, where there is a much higher rate of suicide in males than females. Figure two also highlights the increase in the rate of suicide in males since 2013, whereas there has been a decline in the rate of suicide for females (highlighted in figure 2 on the following page).

Figure 1: Suicide Rates (per 100,000) – Kirklees

Year	Kirklees	Yorkshire & Humber	England
2011-2013	8.6	10.4	9.8
2012 -2014	8.9	10.3	10.0
2013-2015	9.7	10.7	10.1
2014 -2016	10.0	10.5	9.9
2015-2017	9.4	10.4	9.6
2016 - 2018	10.3	10.7	9.6
2017-2019	10.8	12.0	10.1

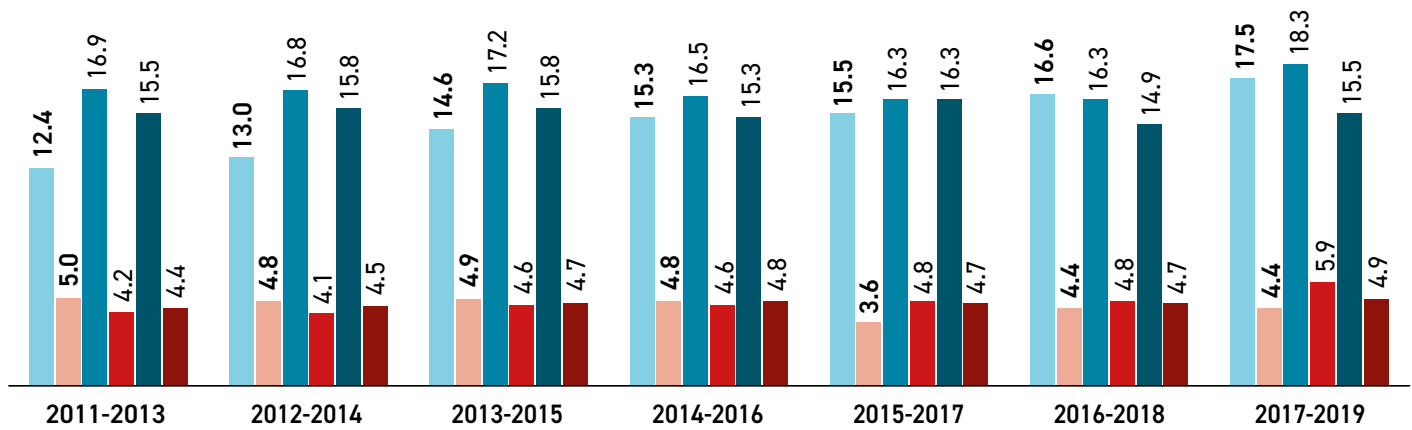


Source: Public Health England (PHE) Fingertips

Figure 2: Suicide Rates (per 100,000) – Kirklees (by gender)

Year	Kirklees - males	Yorkshire & Humber - males	England - males	Kirklees - females	Yorkshire & Humber - females	England - females
2011-2013	12.4	16.9	15.5	5.0	4.2	4.4
2012 -2014	13.0	16.8	15.8	4.8	4.1	4.5
2013-2015	14.6	17.2	15.8	4.9	4.6	4.7
2014 -2016	15.3	16.5	15.3	4.8	4.6	4.8
2015-2017	15.5	16.3	16.3	3.6	4.8	4.7
2016 - 2018	16.6	16.3	14.9	4.4	4.8	4.7
2017-2019	17.5	18.3	15.5	4.4	5.9	4.9

MALES: ■ Kirklees ■ Yorkshire & Humber ■ England
FEMALES: ■ Kirklees ■ Yorkshire & Humber ■ England



Source: Public Health England (PHE) Fingertips

Kirklees Suicide and Self-Harm Prevention Action Group

The local suicide and self-harm prevention group (Suicide Prevention Action Group – SPAG) is a multi-agency group involving Kirklees Council, NHS, statutory and voluntary sector partners. The key purpose of the SPAG group is to ensure that there is a co-ordinated and integrated multi-agency agreement on the delivery of this plan and that it is tailored appropriately to meet local need. The aims are to contribute to a reduction in the numbers of people that take their own life by suicide, and to improve the emotional health and wellbeing of our most vulnerable groups.

Kirklees Suicide Audit

Development of the action plan

Six priority areas for suicide prevention in Kirklees (in line with the national strategy) are set out along with a priority for leadership. The action plan strives for a partnership approach; ensuring all agencies are adopting a consistency in tackling suicide.

The seven priority areas for suicide prevention in Kirklees are as follows:

1. [Leadership for suicide prevention](#)
2. [Reducing the risk of suicide in key high-risk groups](#)
3. [Tailoring approaches to improve mental health across settings in Kirklees](#)
4. [Reduce access to the means of suicide](#)
5. [Provide better information and support to those bereaved or affected by suicide or self-harm, encompassing the needs of family members; carers and friends of people who display self-harm and suicidal ideation behaviours](#)
6. [Support the local media in delivering sensitive approaches to suicide and suicidal behaviour](#)
7. [Support research, data approaches and monitoring](#)

The plan contributes to actions within the [Kirklees Mental Health Strategy 2017 – 2021](#) and reports to the Mental Health Partnership Board and Mental Health Alliance who are both accountable to the Health and Wellbeing Board. It also contributes to and complements the [West Yorkshire and Harrogate Health Care Partnership, Suicide Prevention Five Year Strategy 2017-2022](#).

There is also an additional section within this document which considers [COVID-19 support and recovery](#).

Outcome Measures for Suicide Prevention

- A reduction in the rate of suicides in Kirklees
- A reduction in the rate of intentional self-harm in Kirklees
- An increase in the numbers of people accessing support for suicide bereavement
- A reduction in sensationalist media reporting around suicide in Kirklees
- More people in Kirklees feeling satisfied with life

For the Kirklees Suicide Audit (2016-2018) findings, please see [Appendix A](#).



1. Leadership for suicide prevention

Local leadership

Action/intervention	Lead organisation	Expected outcomes	Timeline
Chair and support an effective multi-agency strategic suicide prevention group overseeing the delivery of the action plan	Kirklees Council Public Health	Quarterly meetings with agendas and action notes	Ongoing
Identify a local elected member with responsibility for suicide prevention	Kirklees Council Public Health	Ensure this person is kept informed of action plan and champions the work	Year 1
Identify a local mental health clinical lead to support the SPAG action plan	Clinical Commissioning Group	Action plan reflects this group	Year 1
Ensure that the SPAG has representation from those affected by suicide	Kirklees Suicide Prevention Action Group	Actions are fit for purpose/ sense checked	Ongoing
Links with Safeguarding Boards	Kirklees Council Public Health	Mental health and suicide prevention agendas raised in other forums	Ongoing

Kirklees-wide

Action/intervention	Lead organisation	Expected outcomes	Timeline
Ensure that SPAG members advocate on behalf of suicide prevention approach and have targeted activity in their local work plans including world suicide prevention day	Kirklees Suicide Prevention Action Group	Annual activity takes place around world suicide prevention day (10th September)	Ongoing
Identify funding streams, commissioning and opportunities for suicide prevention related activity and insight	Kirklees Suicide Prevention Action Group	To increase suicide prevention activity locally	Ongoing
Maintain strong links with the Mental Health Partnership Board, Health and Wellbeing Board and PCN's	Kirklees Council Public Health	To ensure a joined up approach across the life course	Ongoing
The Kirklees SPAG is underpinned by the PHE approved 'Better mental health for all pledge'	Kirklees Council Public Health	The suicide prevention action plan is included within the pledge	Year 1

Regionally

Action/intervention	Lead organisation	Expected outcomes	Timeline
To contribute and influence the regional group: Mental Health and Suicide Prevention Regional Community Of Improvement	Kirklees Council Public Health	To ensure best practice is shared across the region	Ongoing
To contribute and influence the regional group: West Yorkshire & Harrogate Suicide Prevention Advisory Network (SPAN)	Kirklees Council Public Health	To influence strategic priorities and actions	Ongoing

Nationally

Action/intervention	Lead organisation	Expected outcomes	Timeline
Proactively contribute toward national policy and debate on suicide prevention	Kirklees Council Public Health	To reflect emerging evidence base at a local level	Ongoing
Attend annual national conferences to keep local area up to date	Kirklees Suicide Prevention Action Group	To reflect emerging evidence base at a local level	Ongoing

2. Reduce risk of suicide in key high-risk groups

Middle-Aged Men

Action/intervention	Lead organisation	Expected outcomes	Timeline
Use the risk factors for middle aged men (identified locally) to develop a targeted action plan across Kirklees	Kirklees Suicide Prevention Action Group Clinical Commissioning Group Mental Health Alliance	System wide engagement Allocation of funding/resource to target middle aged men	Year 1 and ongoing

Those receiving care from mental health services

Action/intervention	Lead organisation	Expected outcomes	Timeline
Ensure our plan is reflective of the local mental health trusts suicide prevention improvement plan	Kirklees Suicide Prevention Action Group	Improved system wide approach	Year 1
Ensure all partners know what to do when someone is in mental health crisis in Kirklees	Kirklees Suicide Prevention Action Group	People get the right support at the right time	Ongoing
Ensure that mental health support for those with dual diagnosis takes an effective harm reduction approach	South West Yorkshire Foundation Trust CHART Community Links	Those with coexisting conditions are facilitated to access specialist dual diagnosis support in a timely manner and supported to engage in treatment to meet and address their mental health needs	Year 2
Use Serious Incident Reviews to seek out opportunities to improve care	South West Yorkshire Foundation Trust	Improving early intervention and prevention approaches to build better mental health. Improved ability to learn from past incidents	Ongoing
Ensure staff working within addiction services for alcohol and substances are trained in mental health support	Public Health	Increased mental health workforce capacity	Ongoing
Ensure that those being discharged from mental health services are being supported with their social care needs	Kirklees Mental Health Support Service Social Care Hub	Housing and/or social care needs are identified earlier	Year 2

Those with a history of self-harm (including previous suicide attempt)

Action/intervention	Lead organisation	Expected outcomes	Timeline
Take a preventative approach to self-harm awareness; encourage conversations to reduce myths and stigma around self-harm with all stakeholders that work with young people	Kirklees Suicide Prevention Action Group Northorpe Hall Learning Partners	Earlier help seeking behaviour	Year 1

Action/intervention	Lead organisation	Expected outcomes	Timeline
Promote the self-harm prevention resources for young people and adults as part of the support package offered by Northorpe Hall	Kirklees Suicide Prevention Action Group Northorpe Hall Learning Partners	Destigmatise conversations around self-harm	Year 1

Those in contact with the criminal justice system

Action/intervention	Lead organisation	Expected outcomes	Timeline
Raise awareness of the increasing risk of those found guilty of high stigma crimes	Public Health West Yorkshire Police Domestic Violence agenda	Improved awareness of signs and symptoms of suicide in high risk groups	Year 2
Work with those agencies involved where parents have custody of children removed	Social Services, Looked After Children, Family Support and Child Protection, Safeguarding Probation Liaison and Diversion	Strengthen emotional support offer for parents in this situation	Year 2
Strengthening support for those released from prison	Social Services, Looked After Children, Family Support and Child Protection, Safeguarding Probation Liaison and Diversion	Safe transition to community, stable community setting (housing/finance), decrease vulnerabilities, improve health and emotional well-being, reduce risk of harm, reduce risk of offending	Year 2

Relationship and living status

Action/intervention	Lead organisation	Expected outcomes	Timeline
Ensure suicide prevention is included in the loneliness strategy; those living alone, single or socially isolated	Public Health Loneliness strategic working group	Improved social connections for people in Kirklees	Years 1 & 2
Develop a targeted action plan for those experiencing relationship breakdown in Kirklees	Public Health Kirklees Suicide Prevention action group Housing colleagues	Improved emotional support at the right time	Years 1 & 2

Occupation

Action/intervention	Lead organisation	Expected outcomes	Timeline
Work with agencies such as the DWP who work with the unemployed, to ensure mental health support is integrated	Mental Health Employment Service (Richmond Fellowship) Dept. Work and Pensions Works Better Programme	Strengthen referral pathways for mental health support Improved readiness for work	Year 1
Provide support to carers in Kirklees, particularly those who are caring for someone who has attempted suicide in the past	Cloverleaf Advocacy Carers Count	Improved resilience to cope	Year 2

Ex-service personnel

Action/intervention	Lead organisation	Expected outcomes	Timeline
Promote local support for ex-service personnel	Community Links Soldiers Sailors Airmen & Family Association	Improved peer support	Year 2
Review the Kirklees Armed Forces Covenant and link to suicide prevention agenda	Kirklees Council Public Health	Increased awareness of the agenda in other forums in Kirklees	Year 1

Long-term physical conditions

Action/intervention	Lead organisation	Expected outcomes	Timeline
Support those struggling with chronic pain	Wellbeing Service Primary Care Networks	Support is holistic	Year 2
Support those with serious mental illness (bi-polar and personality disorders) to manage their condition, including physical health	Community Mental Health Teams CCG's	Physical health support is integrated into mental health pathways	Year 2
Support the emotional health of those	Cancer Alliance and Macmillan	Mental health support is integrated into physical health pathways	Year 2

Untreated depression

Action/intervention	Lead organisation	Expected outcomes	Timeline
Review the pathway of support for those with untreated depression	Primary Care Networks Clinical Lead for mental health Social Prescribing Link Workers	Increased awareness of signs and symptoms of untreated depression Strengthening of signposting to services that can help	Year 1

Economically vulnerable

Action/intervention	Lead organisation	Expected outcomes	Timeline
Ensure that local welfare support and support for those seeking work is appropriately linked to the mental health system in Kirklees	Kirklees Suicide Prevention Action Group Dept. Work and Pensions Local Welfare Provision Citizens Advice	Staff feel equipped to respond to low level mental health need Staff feel knowledgeable in appropriate signposting	Years 1 & 2
Link the mental health agenda with the Kirklees poverty action plan to address wider determinants of health	Tackling Poverty Partnership	Fewer people reach mental health crisis due to financial concerns More people are able to find work because their mental health is supported	Year 1

BAME communities, including young migrant Eastern/Central European men

Action/intervention	Lead organisation	Expected outcomes	Timeline
Understand the stigma associated with mental health in minority ethnic groups	Kirklees Suicide Prevention Action Group Time to Change HUB Faith leaders	Actions to reduce inequalities are co-produced	Year 1
Reduce mental health inequalities in BAME communities	Public Health	Access to support is inclusive and proportionate	Year 1

Domestic violence

Action/intervention	Lead organisation	Expected outcomes	Timeline
Ensure the action plan is complementary of the local Domestic Abuse strategy from a suicide prevention perspective	Kirklees Council Public Health Domestic Abuse Strategy action plan KRASAC	Victims of DA and perpetrators are supported effectively	Year 2

Young people

Action/intervention	Lead organisation	Expected outcomes	Timeline
Support the local delivery of the Rugby League World Cup 'Ahead of the Game' programme with 12-18-year olds in Kirklees	Kirklees Council Public Health	Improved awareness of mental health with target population	Year 1
Liaise with the Mental Health in Schools Teams to gain insights into emerging themes (risk and protective factors)	Northorpe Hall	Improved awareness of emerging themes for children and young people	Years 1 & 2
Understand the themes emerging from platforms such as Kooth and Chat Health to inform preventative action	Kirklees Council Public Health Thriving Kirklees	Improved awareness of emerging themes for children and young people	Year 1

LGBTQ+

Action/intervention	Lead organisation	Expected outcomes	Timeline
Liaise with LGBTQ+ services and groups to ensure support and identify emerging needs	Brunswick Centre School nursing Thriving Kirklees	To develop a clear understanding of gaps and areas of focus	Year 2

3. Tailor approaches to improve mental health across settings in Kirklees

Workplaces

Action/intervention	Lead organisation	Expected outcomes	Timeline
Encourage sign up to the 'Better mental health for all' pledge across key anchor organisations across Kirklees e.g. schools, colleges, universities and workplaces	Kirklees Council Public Health	Strategic approach/consistency in improving mental health	Year 2

Primary Care

Action/intervention	Lead organisation	Expected outcomes	Timeline
Develop and pilot the Artificial Intelligence Suicide Prevention risk assessment project in an identified PCN	Huddersfield University Clinical Commissioning Group Kirklees Council Public Health	Make those at risk of suicide easier to identify in primary care	Year 1
Embed mental health within PCN's across Kirklees	Kirklees Council Public Health Clinical Commissioning Group	Development of action plan for suicide prevention and mental health within primary care	Year 2
Increase recognition of those at risk of poor mental health and suicide within primary care (those with LTC's, untreated depression)	Clinical Commissioning Group Kirklees wellness service Kirklees Suicide Prevention Action Group	Increased awareness and opportunities for suicide awareness training with non-clinical staff	Year 1

Schools and young people settings

Action/intervention	Lead organisation	Expected outcomes	Timeline
Work with Northorpe Hall to support their offer to schools around whole school approaches	Kirklees Suicide Prevention Action Group	Proactive offer using local intelligence	Ongoing
Develop a post-suicide offer of support to schools	Prevention Action Group Samaritans Schools link West Yorkshire & Harrogate Suicide Bereavement service	Postvention support in place for all those connected and impacted	Year 1

Communities

Action/intervention	Lead organisation	Expected outcomes	Timeline
Embed mental health and suicide prevention approaches within communities	Kirklees Suicide Prevention Action Group Community Plus Primary Care Networks Social Prescribing Link workers	Increase mental health workforce capacity	Year 1
Reduce mental health stigma across Kirklees, but particularly in men and BAME groups	Time to Change HUB Working Together Better Partnership	Earlier help seeking behaviour	Year 1

Mental health training/promotion

Action/intervention	Lead organisation	Expected outcomes	Timeline
Develop a mental health training options package for Kirklees	Kirklees Council Public Health Mental Health & Suicide Prevention Community Of Improvement West Yorkshire & Harrogate Integrated Care System	Increase the mental health capacity across Kirklees	Year 1
Roll out the MH Support Card to all front-line workers	Public Health		Annually
Develop a suicide prevention support guide for front line workers and volunteers	Kirklees Suicide Prevention Action Group Communications Team Kirklees Suicide Prevention Action Group		Year 1

Housing

Action/intervention	Lead organisation	Expected outcomes	Timeline
Embed Mental Health and suicide prevention approaches within housing services and homeless support services.	Kirklees Suicide Prevention Action Group Kirklees Neighbourhood Housing Mears	Proactive offers based on intelligence	Year 1

4. Reduce access to the means of suicide

Review methods and locations being used for suicide in Kirklees

Action/intervention	Lead organisation	Expected outcomes	Timeline
<p>Public places: Identify local public places that are frequently used for suicide and scope opportunities to reduce access to these places for suicide use</p>	<p>Kirklees Council Public Health</p> <p>Kirklees Suicide Prevention Action Group</p> <p>Highways England</p> <p>Kirklees Highways</p> <p>Network Rail</p> <p>Samaritans</p> <p>GP Clinical Lead</p>	<p>Reduction in use of frequently used locations</p> <p>Improved public perception of area</p> <p>Reduced access</p>	Year 1 and ongoing
<p>Mechanism: for those at high risk of suicide, access to improvised ligatures should be removed as well as ligature points.</p>	<p>South West Yorkshire Foundation Trust</p> <p>Kirklees Suicide Prevention Action Group</p>	Reduced access	Ongoing
<p>Pharmaceuticals: consider the possibilities of further limiting the acquisition or stockpiling of large amounts of medication for people who may be at risk of suicide (analgesics, antipsychotics, anti-epileptics, antidepressants, and beta-blockers).</p>	<p>Clinical Commissioning Group</p> <p>Primary Care Networks</p> <p>Primary Care</p>	Improved safety plans	Ongoing
<p>Catalysts: drug and alcohol use and the potential for it to influence decision making in high risk individuals.</p>	<p>Primary Care</p> <p>Mental health services</p> <p>Addiction Services</p>	Improved safety plans	Ongoing

5. Provide better information and support to those bereaved or affected by suicide

Support for adults, children and young people, and families

Action/intervention	Lead organisation	Expected outcomes	Timeline
Continue to support and commission effective, peer led postvention support for adults in Kirklees	Kirklees Council Public Health Leeds Mind	Early identification and support for those bereaved by suicide	Years 1, 2 & 3
Commission suicide bereavement support for children and families in Kirklees	West Yorkshire & Harrogate Integrated Care System Kirklees Council Public Health	Early identification and support for children and families bereaved by suicide	Years 1, 2 & 3, ongoing
Ensure all partners connected to the SPAG are aware of the risk factors associated with suicide bereavement and actively signposting to timely postvention support	Kirklees Suicide Prevention Action Group	Support in place for those experiencing loss and grief during the pandemic	Year 1 and then review
Commission support for those bereaved during Covid-19 (from any cause)	Kirklees Council Public Health West Yorkshire & Harrogate Integrated Care System	Stigma around impact of bereavement is reduced	Year 1 and then review

6. Support the local media in delivering sensitive approaches to suicide and suicidal behaviour

Work with local media

Action/intervention	Lead organisation	Expected outcomes	Timeline
Promote responsible reporting in the media of suicide and suicidal behaviour, using the national reporting guidelines	Kirklees Council Public Health Kirklees Council Communications Samaritans	Evidence of sensitive media reporting being used	Ongoing
Work with local and regional newspapers and other media outlets to encourage them to provide information about sources of support and helplines when reporting suicide and suicidal behaviour	Kirklees Council Public Health South West Yorkshire Foundation Trust Communications Kirklees Council Communications	Evidence of appropriate messages being used based on target populations	Ongoing

Develop anti-stigma messages

Action/intervention	Lead organisation	Expected outcomes	Timeline
Develop shared anti-stigma messages and work across Kirklees to embed these	Kirklees Time to Change Hub Mental Health Provider Forum	Targeted anti-stigma messages developed for vulnerable groups	Year 1

National

Action/intervention	Lead organisation	Expected outcomes	Timeline
Support national mental health activity around digital messages	Kirklees Council Public Health Kirklees Council Communications	Demonstrate links with national campaigns e.g. Every Mind Matters	Ongoing
Lobby national government in relation to impact of social media and internet use that are being used by people contemplating suicide	Mental Health and Suicide Prevention Community of Improvement	Improved safeguarding	Year 1

Develop opportunities

Action/intervention	Lead organisation	Expected outcomes	Timeline
Scope the opportunities to develop locally based reporting guidelines in partnership with Huddersfield University	Kirklees Council Public Health Huddersfield University	Demonstrate use of guidelines and greater awareness of impact	Year 2

7. Support research, data approaches and monitoring

Share and keep up-to-date with local intelligence on suicide

Action/intervention	Lead organisation	Expected outcomes	Timeline
Promote and share the findings of the most recent suicide audit for Kirklees (2016-2018)	Kirklees Council Public Health	Audit findings disseminated across Kirklees	Year 1
Establish a Kirklees Real time surveillance group	Kirklees Council Public Health	Partners are able to respond to suicide clusters and contagion and respond accordingly through community action plans	Year 1
Expand and improve the systematic collection of and access to data on suicides through partnership working with: <ul style="list-style-type: none"> • BTP • Samaritans • Network Rail • Coroner's office • West Yorkshire Police • Child Death Overview Panel • Safeguarding Boards 	Kirklees Suicide Prevention Action Group	Improved local intelligence and place-based working	Ongoing

8. COVID-19 support and recovery

Ensuring 24/7 access lines and mental health support is inclusive to all that need it

Action/intervention	Lead organisation	Expected outcomes	Timeline
Single Point Access (SPA) self-referral and open to people not known to mental health services	Calderdale and Kirklees Single Point of Access Primary Care Networks Third Sector	SPA crisis line is widely promoted across all services/networks/partners and to the public	Year 1
IAPT – Improved access to psychological therapies. Self-referral and open to adults seeking mental health support	PCNs, SWYT	IAPT is widely promoted across all services/networks/partners and to the public, especially to those population groups that are underrepresented in take up	Year 1
A 24 Hour Mental Health Helpline-providing support, advice, information and guidance	CCG's PH and PCNs	To provide a confidential helpline for anyone with mental health needs and their carers Promoted widely across all networks/agencies including public	Year 1

Developing a multi-agency working and real-time surveillance systems as preventative measures, not just post-suicide processes

Action/intervention	Lead organisation	Expected outcomes	Timeline
To continually monitor the existing RTS so as to monitor impact of COVID-19 on potential suicide deaths	Kirklees Public Health West Yorkshire Police West Yorkshire and Harrogate ICS	To inform a Local Suicide Cluster Response Plan in line with PHE Guidance To be able to respond to areas of high suspected suicide and respond accordingly	Year 1

Supporting staff who are working in front-line organisations across health and social care

Action/intervention	Lead organisation	Expected outcomes	Timeline
Supporting staff who are working with people during COVID-19. Potential need for post-trauma support	IAPT, WY&H ICS Occupational health departments	Increased psychological support for all	Year 1

Planning for the suicide risk factors arising from the financial hardships and socio-economic changes, and other vulnerable groups

Action/intervention	Lead organisation	Expected outcomes	Timeline
Front line workers/first responders are aware of suicide risk and how to respond appropriately	Kirklees Public Health	MH support cards has been produced and shared with frontline services A briefing for front line workers across the system being produced, includes pathway and signposting	Year 1
Suicide and self-harm awareness information is available to the public	Thriving Kirklees Kirklees Public Health Education	Less stigma around self-harm Increased conversations	Year 1
Support for those bereaved during COVID-19 (from any cause of death)	WYH ICS Bereavement charities	Early help seeking behaviour	Year 1
Supporting the Mental health of those population groups that are disproportionately affected by covid, such as: <ul style="list-style-type: none"> • Young adults and women • Students • Adults with pre-existing mental health conditions • Low household income or socioeconomic position • Unemployed • Key workers • People with long term physical health conditions e.g. those shielding in quarantine • BAME • Older adults living alone 	Kirklees Council Public Health Partner organisations Third sector MH support organisations MH Provider Forums IAPT SWFT	Develop mini support and recovery plans for each group	Year 1

Key Suicide Statistics in Kirklees

119
deaths by suicide
between 2016 and 2018

Demographics



46-55 years

was the most common age group for males and females

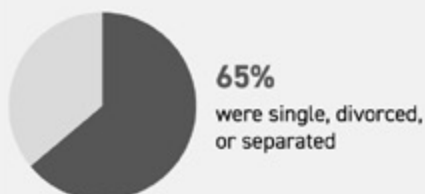


82%
White British



53%
born in Kirklees
14%
born outside the UK

Relationships



65%
were single, divorced,
or separated

49%
of people lived alone

40%
of people were **struggling with relationship difficulties** prior to their suicide

12%
of people were **struggling with social isolation** prior to suicide

Employment



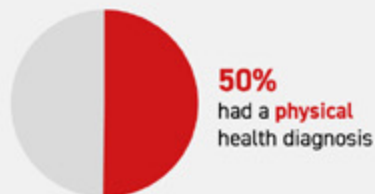
32%
were unemployed
40%
were employed full-time

23%
worked with a skilled trade

20%
of people were **struggling with debt** prior to their suicide

19%
of people were **struggling with work difficulties** prior to their suicide

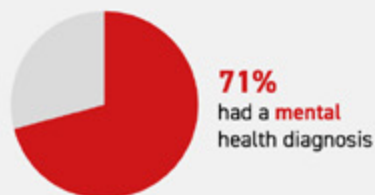
Health



50%
had a **physical** health diagnosis

31%
of people were **struggling with illness** prior to their suicide

50%
of people had seen their GP in the 3 months prior to their suicide



71%
had a **mental** health diagnosis

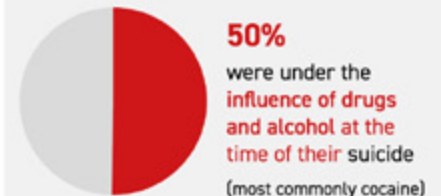
29%
of people had seen **Mental Health Services** in the 3 months prior to their suicide

22%
of people **told someone of their intentions** prior to suicide

27%
of suicides were preceded by at least one episode of **self harm**

38%
of suicides were preceded by at least one **attempted suicide**

Drugs & Alcohol

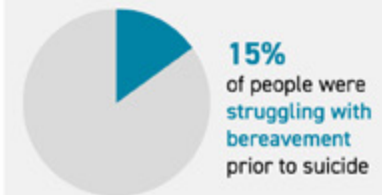


50%
were under the **influence of drugs and alcohol** at the time of their suicide (most commonly cocaine)

24%
of people had a **recent history of alcohol misuse**

29%
of people had a **recent history of drug misuse** (most commonly cannabis)

Bereavement

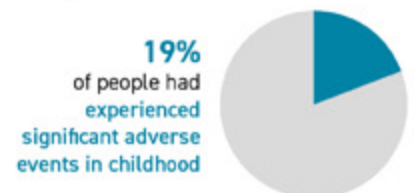


15%
of people were **struggling with bereavement** prior to suicide

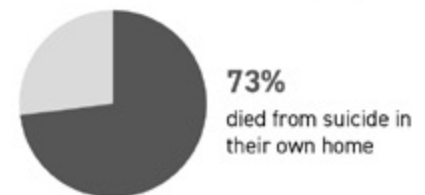
1/3
of bereavements were through suicide



11%
of people were **struggling with forensic involvement** prior to suicide



19%
of people had **experienced significant adverse events in childhood**



73%
died from suicide in their own home