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Dear Member

## **HEALTH AND WELLBEING BOARD - THURSDAY, 18 MARCH 2021**

I am now able to enclose, for consideration at the Thursday, 18 March 2021 meeting of the Health and Wellbeing Board, the following reports that were unavailable when the agenda was printed.

| <b>Agenda No</b> | <b>Item</b>                                     | <b>Page</b>    |
|------------------|---|----------------|
| 7.               | <b>Mental Health Update (3.05 pm - 3.35 pm)</b> | (Pages 2 - 17) |

Yours sincerely

Lisa Antrobus  
Clerk

# Torbay Suicide and Self-harm Prevention Plan

**2021-2022**



**MARCH 10 2021**

**Torbay Mental Health and Suicide Prevention Alliance**  
**Authored by: Rachel Bell**



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# Background

## 1.1 National Context

The government's national strategy for England, [Preventing suicide in England: Third progress report of the cross-government outcomes strategy to save lives](#) recommends that local areas should develop multi-agency suicide prevention strategies and action plans in order to help reduce local suicides. In England, responsibility for the suicide prevention strategy and action plan usually lies with local government through health and wellbeing boards<sup>1</sup>. Every local area has a multi-agency suicide prevention plan in place or in development with STP areas across the country receiving part of the £25 million investment in suicide prevention.

***"Suicide prevention is everybody's business."***

The national strategy outlines two principle objectives: reduce the suicide rate in the general population and provide better support for those bereaved or affected by suicide. The following are the seven areas of 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
5. Support the media in delivering sensitive approaches to suicide and suicidal behaviour
6. Support research, data collection and monitoring
7. Reducing rates of self-harm as a key indicator of suicide risk

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<sup>1</sup> [PHE LA Guidance 25 Nov.pdf \(publishing.service.gov.uk\)](#)

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[Local Suicide Prevention Planning](#) from Public Health England recommends that local areas should aim to tackle all seven areas of the national strategy in the long-term, with the following priorities for short-term action with a coordinated system approach set out by Professor Louis Appleby, Chair of the Suicide Prevention Strategy Advisory Group outlined below:

1. Reducing risk in men, especially middle age with a focus on economic factors
2. Preventing and responding to self-harm with a range of service for adults and young people in crisis, and psychosocial assessment for self-harm patients
3. Mental health of children and young people with joint working between health and social care, schools and youth justice, and plans to reduce drastic increase in suicide risk 15-19 years
4. Treatment of depression in primary care with safe prescribing of painkillers and antidepressants
5. Acute mental health care with safer wards and hospital discharge, adequate bed numbers and no out of area admissions
6. Tackling high frequency locations including working with local media to prevent imitative suicides
7. Reducing social isolation, for example through community based supports, transport links and working with third sector
8. Bereavement support, especially for people bereaved by suicide

The [Samaritans and University of Exeter independent progress report](#) on local suicide prevention planning in England recommended that local areas should consider the following when refreshing or redeveloping their Suicide Prevention Plans:

1. LGA and ADPH should **encourage local authorities to consider working with other local authorities** to achieve economies of scale and maximise resources.
2. **LAs and multi-agency groups should avoid spreading their resources too thinly by trying to cover all areas of the national strategy too soon.** Those at the earlier stages of their response may benefit from embedding and improving the quality of activity already taking place rather than implementing multiple new activities. Similarly, it may be helpful to begin by playing to local strengths and focusing efforts on strategy areas where there is already effective partnership working before tackling national strategy areas that prove more difficult to implement in the local context.
3. LGA and ADPH should support local areas to **move past the preparatory stage of building partnerships and planning actions, and into delivery of actions themselves** where this is not already happening.

## 1.2 Local Context

In wider Devon our **Suicide Prevention Strategy** is a collaborative document produced and shared by Devon County Council, Plymouth City Council and Torbay Council: *Devon-wide Suicide Prevention Strategic Statement* [\[Link to be included once updated\]](#). This aligns to the Devon Sustainability

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Transformation Partnership (STP) geography area. **Suicide Prevention Plans** are produced by each local authority area and will be co-owned by a range of respective statutory and CVSE agencies. Plans will be made available on each local authority's website and will undergo annual review. Where appropriate, work will be undertaken on a Devon-wide level to take advantage of economies of scale and maximise finite resource.

Previously the Torbay Suicide and Self-harm Prevention Plan (2018-19) was co-owned and monitored via the **Devon and Torbay Suicide Prevention Strategic Partnership Group**. This inspired greater collaborative working with Devon Local Authority, however, it was felt that the Torbay plan would benefit from greater local ownership. To address this, the new plan will be owned and monitored via the newly established **Torbay Mental Health and Suicide Prevention Alliance** (statutory and CVSE membership), with a multi-agency Task & Finish group formed to identify priorities for the year and to co-produce interventions in line with priorities. The plan will again be endorsed by the **Torbay Health and Wellbeing Board** and ratified through **Torbay Council**.

In the light of the national recommendations above, it was felt by the Suicide Prevention Plan Task & Finish group that the Torbay Suicide and Self-harm Prevention Plan should:

- Focus on a few, critical local priorities that lend themselves to multi-agency collaborative working;
- Provisionally steer away from targeting by sex and age-group until further exploration of local data could justify such an approach;
- Recognise that needs are greater in more deprived communities;
- Embed and improve the quality of existing activity and systems that are already taking place before implementing new initiatives;
- Wherever possible, play to local strengths and build upon partnership working that is already working well;
- Work alongside and complement new models of care such as the redesign of the Community Mental Health Framework; and
- Where possible, develop, implement and monitor initiatives in collaboration with Devon and Plymouth Local Authorities.

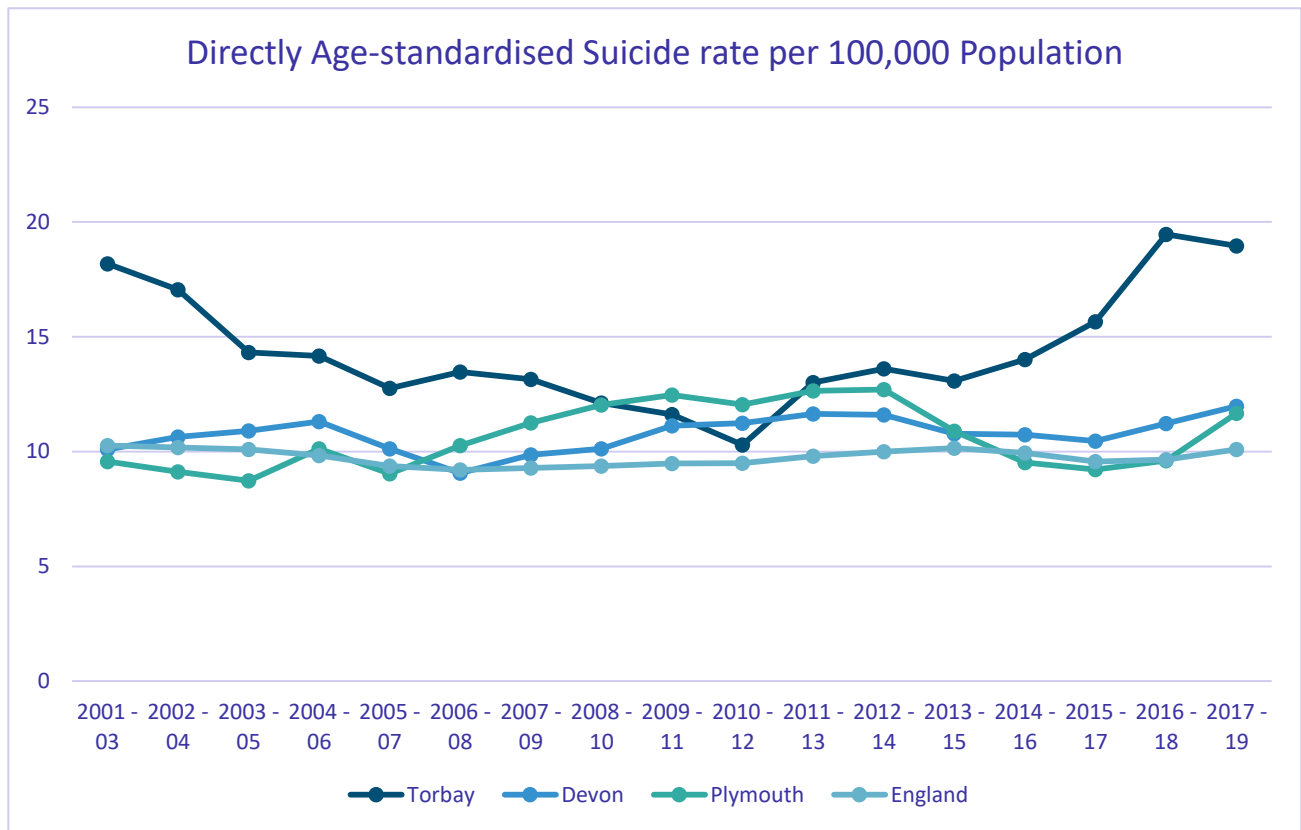
### 1.3 Aim

There is no acceptable number of suicides in Torbay – the aim should be an aspiration of zero suicides. In Torbay we are still in the midst of a global Covid-19 pandemic and have had a significantly<sup>2</sup> high suicide rate since 2014-16. This couples with a general upward trend in suicides since 2010-12 (see

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<sup>2</sup> Statistically based on the overlap of 95% confidence intervals

Figure 1). In recognition of this, this plan aims for **no increase** in the suicide rate from its current position, however it aspires for a consistent downward trajectory which will bring it closer to the average rate of its nearest statistical neighbours<sup>3</sup>. This would be a reduction from the current baseline suicide rate of 19.0 suicides (2017-2019) to around 12.3 suicides per 100,000. It is likely to take more than a few years to see this shift in rate.



Source: PHE Public Health Outcomes Framework

<sup>3</sup> CIPFA Nearest Statistical Neighbours



## 1.4 Strategic Outcome Measures

| Indicator  | Count  | Statistic | CIPFA average | Trend (if available)  | Date period |
|--|--------|-----------|---------------|---|-------------|
| <b>Mortality data</b>  |        |           |               |   |             |
| Suicide rate (DSR) per 100,000 - Persons   | 64     | 19.0      | 12.3          |    | 2017-19     |
| Suicide rate (DSR) per 100,000 – Male  | 45     | 27.3      | 19.6          |    | 2017-19     |
| Suicide rate (DSR) per 100,000 – Female  | 19     | 11.1      | 5.6           |    | 2017-19     |
| Year of life lost due to suicide (YLL*) – Persons  | 60     | 72.3yrs   | 42.1yrs       |    | 2017-19     |
| YLL* due to suicide - Male   | 43     | 101.1yrs  | 67.6yrs       |    | 2017-19     |
| YLL* of life lost due to suicide - Female  | 17     | 44.2yrs   | 19.6yrs       |    | 2017-19     |
| <b>Risk factor data</b>  |        |           |               |   |             |
| Long-term health problem or disability - % of pop  | 31,451 | 24.0%     | 20.6%         | NA  | 2011        |
| Marital breakup - % of adults  | 16,207 | 14.8%     | 12.4%         | NA  | 2011        |
| People living alone - % in single person households                                      | 20,192 | 15.8%     | 13.9%         | NA  | 2011        |
| Homelessness** — rate per 1,000 households   | 1,119  | 17.9      | Not available | NA  | 2019/20     |
| ESA claimants for mental and behavioural disorders – rate per 1,000 working pop          | 3,810  | 50.0      | 33.8          |  | 2018        |
| <b>Hospital admissions data</b>  |        |           |               |   |             |
| Hospital admissions as a result of self-harm rate (DSR) per 100,000 – 10-24y             | 155    | 784.6     | Not available |  | 2018/19     |
| Emergency hospital admission for intentional self-harm rate (DSR) per 100,000 – all ages | 360    | 305.9     | Not available |  | 2018/19     |
| Hospital admissions for mental health conditions (DSR) – all ages                        | 40     | 157.3     | 105.0         |  | 2018/19     |

Source: PHE Suicide Prevention Profile, \*15-74years, \*\* Households owed a duty under the Homelessness Reduction Act

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## 1.5 Priorities for action

### Priorities for Torbay are:

- Reduce social isolation and loneliness
- Promote a 'culture of curiosity' both publically and professionally
- Build upon and grow peer-support within the mental health system
- Better understand Torbay's high suicide and self-harm rates
- Monitor and evaluate Torbay's secondary school based, self-harm prevention pilot (in the context of the pandemic)
- Address system gaps for people with severe mental illness (in partnership with the Community Mental Health Framework redesign)
- Tackle high frequency locations

### Priorities being taken wide on a Devonwide basis are:

- Devon-wide postvention suicide bereavement support service
- Devon-wide real-time suicide surveillance
- Devon-wide suicide prevention training (public, professionals and primary care)
- Devonwide men's mental health promotion campaign
- Devonwide media and communications programme
- Devon & Torbay – Embedding NCISH '10 ways to improve patient safety' into acute and community mental health provision
- Devon & Torbay suicide prevention for people with a history of domestic abuse and sexual violence

These are detailed in the action plan below. Where the programme of work has already commenced, progress is RAG rated.



## Torbay Priorities

|   | Action required | Target date  | Progress measure | Status (RAG)  | Comments | Leads  | Partners                       |  |
|---|-----------------|--|------------------|---|----------|--|--------------------------------|--|
| <b>1. Reduce social isolation and loneliness</b>  |                 |  |                  |   |          |  |                                |  |
| Aligns to the following national priorities: Government Strategy p2; Prof Louis Appleby p3, p7; Samaritans & Exeter University p2 |                 |  |                  |   |          |  |                                |  |
| Page 9  | 1.1             | Identify and promote existing befriending services using a range of accessible communication methods based on target audience                    | May 2021         | Provision mapped<br><br>Communication channels used and estimated reach | X        | To be actioned by Suicide Prevention Plan Task & Finish group. Some Covid-19 funding secured. Seeking advice regarding procurement process required. | Torbay CDT & Torbay Age UK     | Torbay Council, Brixham Does Care, Torbay Healthwatch, Brixham YES |
|   | 1.2             | Provide resilience and sustainability to mental health and befriending element of Torbay Community Helpline                                      | June 2021        | TBC   | Y        | Covid-19 funding secured. Seeking advice regarding procurement process required.   | Torbay Council & Torbay Age UK | Torbay CDT, Counselling training providers, Devon Clinic           |
|   | 1.3             | Co-design an initiative to help people who are anxious about leaving their homes (as a result of the Covid-19 pandemic) to mix back into society | June 2021        | TBC   | Y        | Covid-19 funding secured. Seeking advice regarding procurement process required.   | Torbay Council                 | Torbay CDT, Torbay Age UK, DPT, Torbay Healthwatch                 |

## Torbay Priorities

|   | Action required  | Target date             | Progress measure                     | Status (RAG) | Comments   | Leads                          | Partners   |
|---|--|-------------------------|--------------------------------------|--------------|--|--------------------------------|--|
| <b>2. Promote a 'culture of curiosity' both publically and professionally</b>   |  |                         |                                      |              |  |                                |  |
| Aligns to the following national priorities: Government Strategy p1, p2; Prof Louis Appleby p1, p3; Samaritans & Exeter University p2 |  |                         |                                      |              |  |                                |  |
| 2.1   | Co-design a campaign to raise awareness of: 'suicide prevention is everybody's business'; highlight warning signs to watch out for publically and professionally, e.g. uncharacteristic behavior and not attending appointments; and link to training (aligns to Devon-wide priority 8 below) and support. | Sep 2021                | TBC                                  |              | To be actioned by Suicide Prevention Plan Task & Finish group  | DPT & Torbay Council           | TSDFT Hospital, Devon CCG, Torbay CDT, Torbay Age UK, Torbay Healthwatch |
| <b>3. Build upon and grow peer-support within the mental health system</b>  |  |                         |                                      |              |  |                                |  |
| Aligns to the following national priorities: Government Strategy p1, p2; Prof Louis Appleby p2, p3; Samaritans & Exeter University p2 |  |                         |                                      |              |  |                                |  |
| 3.1   | Map current peer support projects and offers in Torbay and identify gaps in reference to local mental health need  | April 2021              | Provision mapped and gaps identified |              | To be actioned by Suicide Prevention Plan Task & Finish group  | Torbay Council                 | Step One, Torbay CDT, Torbay Age UK                                      |
| 3.2   | Where required (based on above action) co-design new peer-support offers that target the main risk factors for suicide including self-harm   | March 2022              | TBC                                  |              | To be actioned by Suicide Prevention Plan Task & Finish group  | Torbay Council & Torbay Age UK | Step One   |
| 3.3   | Support peer support provision via local community based mental health networks once established.  | Sep 2021 (for networks) | TBC                                  |              | To be actioned by Networks Task & Finish group. Mental Health Practitioner post recruited and awaiting start date. | Torbay CDT & Torbay Council    |  |

## Torbay Priorities

|  | Action required  | Target date          | Progress measure                                      | Status (RAG) | Comments   | Leads          | Partners                                  |
|--|--|----------------------|---|--------------|--|----------------|---|
| <b>4. Better understand Torbay's high suicide and self-harm rate</b><br>Aligns to the following national priorities: Government Strategy p2, p6, p7; Prof Louis Appleby p2, p3   |  |                      |   |              |  |                |   |
| 4.1  | Commission qualitative research to explore the drivers for Torbay's high suicide and self-harm rates. Particularly exploring the higher female suicide rate compared to other areas. | TBC based on funding | TBC   | ↓            | NHS 3 <sup>rd</sup> Wave funding secured. Awaiting release of funding. Mental Health Practitioner post recruited and awaiting start date.  | Torbay Council | Academic Institution                      |
| <b>5. Monitor and evaluate Torbay's secondary school based, self-harm prevention pilot (in the context of the pandemic)</b><br>Aligns to the following national priorities: Government Strategy p2, p6, p7; Prof Louis Appleby p2, p3) |  |                      |   |              |  |                |   |
| 4.1  | Commission a secondary school and family-based self-harm prevention intervention   | April 2020-22        | Service in place.<br><br>Contract monitoring measures | ↑            | NHS 2 <sup>nd</sup> Wave funding secured. Procurement complete and awarded to Checkpoint. Summary of current status required from CCG with Torbay Council to support contract monitoring and evaluation. | Devon CCG      | Torbay Council, Checkpoint Spires Academy |

## Torbay Priorities

|  | Action required   | Target date | Progress measure                                | Status (RAG) | Comments   | Leads                | Partners                   |
|--|---|-------------|---|--------------|--|----------------------|----------------------------|
| <b>6. Address system gaps for people with severe mental illness (in partnership with Community Mental Health Framework redesign)</b> |   |             |   |              |  |                      |                            |
| Aligns to the following national priorities: Government Strategy p1; Samaritans & Exeter University p2)                              |   |             |   |              |  |                      |                            |
| 6.1  | Support Community Mental Health Service Provision where required in the interim of CMHF re-design. Suggested initiatives to support may include support for/with: personality disorders, financial hardship, accommodation providers of clients with complex needs, keeping people out of hospital/ED ('positive clinical risk management')                         | TBC         | TBC   |              | Covid-19 funding secured. Seeking advice regarding procurement process required. Scoping meeting to be established   | DPT & Torbay Council | TBC                        |
| <b>7. Tackle high frequency locations</b>  |   |             |   |              |  |                      |                            |
| 7.1  | Local community action group Brixham Bee Well working with partners to reduce suicides in the area including in local high frequency locations (locations not identified to avoid potential imitative behaviour). Actions include: reducing means where possible, signposting to support and providing suicide prevention training to people who frequent the area. | Ongoing     | Interventions in place.<br><br>Numbers trained. |              | Signage in area. Data collected from a range of data sources to identify need and help ascertain if reducing means would be effective. Actions agreed March 2020 but delivery delayed due to Covid-19. | Brixham Bee Well     | Torbay Council, TSDFT, PHE |

## Devon-wide priorities

|   | Action required  | Target date             | Progress measure                                    | Status (RAG) | Comments  | Leads                          | Partners  |
|---|--|-------------------------|---|--------------|---|--------------------------------|---|
| <b>8. Devon-wide postvention suicide bereavement support service</b>  |  |                         |   |              |   |                                |   |
| Aligns to the following national priorities: Government Strategy p4; Prof Louis Appleby p8, Samaritans & Exeter University p1)    |  |                         |   |              |   |                                |   |
| 8.1   | Commission a postvention bereavement support service in Torbay and Plymouth to complement current provision in Devon   | April 2021              | Service in place<br><br>Contact monitoring measures |              | Procurement process almost complete. Devon CCG to finalise.   | Devon Council & Devon CCG      | Torbay Council, Plymouth Council                          |
| <b>9. Devon-wide real-time suicide surveillance</b>   |  |                         |   |              |   |                                |   |
| Aligns to the following national priorities: Government Strategy p4, 6; Prof Louis Appleby p8, Samaritans & Exeter University p1) |  |                         |   |              |   |                                |   |
| 9.1   | Co-design a real-time suicide surveillance system to help identify the following: suicide clusters, support for those bereaved by suicide and timely preventative intervention if possible | Oct 2020<br><br>Ongoing | System in place<br><br>Action based on system       |              | Data analyst recruited. Regular data flow from police and monthly meetings to review data in place, 6-month review planned. DSA being scoped. | Devon Council & Pete's Dragons | Torbay Council, Plymouth Council, DPT, Safeguarding teams |

## Devon-wide priorities

|  | Action required | Target date   | Progress measure     | Status (RAG)  | Comments | Leads  | Partners                       |   |
|--|-----------------|---|----------------------|---|----------|--|--------------------------------|---|
| <b>10. Devon-wide suicide prevention training (public, professionals and primary care)</b>   |                 |   |                      |   |          |  |                                |   |
| Aligns to the following national priorities: Government Strategy p1, p2; Prof Louis Appleby p1, p3; Samaritans & Exeter University p1) |                 |   |                      |   |          |  |                                |   |
| Page 14  | 10.1            | Commission suicide prevention training (which can be delivered virtually) to be targeted to public and professionals who are likely to come into contact with individuals in need of support. | April 2021           | Trainers in place and training available.<br><br>Numbers trained (including key target audiences) |          | NHS 3rd Wave funding secured. Awaiting release of funding to recruit Mental Health Practitioner (based in Plymouth). Specialist, targeted and universal offers scoped. Alignment agreed with CMHF. | Devon Council & Torbay Council | Plymouth Council, DPT   |
|  | 10.2            | Commission suicide prevention training for primary care based on what's worked well previously  | TBC based on funding | Training available<br><br>Numbers trained   |          | NHS 3rd Wave funding secured. Awaiting release of funding to recruit Mental Health Practitioner (based in Plymouth).   | Devon Council & Torbay Council | Plymouth Council, Devon PCNs, Devon CCG                           |
|  | 10.3            | Promote suicide prevention, mental health and mental wellbeing training offers on a centralised web platform.   | TBC based on funding | Training offers accessible to right audience  |          | System wide meeting to be established via CMHF Programme   | Devon Council & Torbay Council | Plymouth Council, Devon PCNs, Devon CCG, local training providers |

## Devon-wide priorities

|  | Action required  | Target date          | Progress measure   | Status (RAG) | Comments  | Leads            | Partners                            |
|--|--|----------------------|--|--------------|---|------------------|-------------------------------------|
| <b>11. Devon-wide media and communications programme</b>   |  |                      |  |              |   |                  |                                     |
| Aligns to the following national priorities: Government Strategy p5; Prof Louis Appleby p6; Samaritans & Exeter University p1) |  |                      |  |              |   |                  |                                     |
| 11.1   | Co-design an initiative to improve local media reporting of suicides in line with media recommendations by the Samaritans.                                     | TBC based on funding | TBC  |              | NHS 3rd Wave funding secured. Awaiting release of funding to recruit Mental Health Practitioner (based in Plymouth).  | DPT              | Devon, Torbay and Plymouth Councils |
| <b>12. Devon-wide men's mental health promotion campaign</b>   |  |                      |  |              |   |                  |                                     |
| Aligns to the following national priorities: Government Strategy p1; Prof Louis Appleby p1; Samaritans & Exeter University p1) |  |                      |  |              |   |                  |                                     |
| 12.1   | Delivery of Men's Mental Health Promotion campaign including BarberTalk training to hair students and hair professionals; and Pop-up Barbers in male-settings. | April 2020 - 21      | Numbers trained: students & hair professionals<br><br>Qualitative feedback from above and males (at pop-ups) |              | STP funding secured and awarded to Lions Barbers Collective. Delivered BarberTalk training to all final year college students across Devon, delivered BarberTalk training events to barbers across Devon, Pop-up events on hold due to lock-down. | Plymouth Council | Torbay Council, Devon Council       |



## Devon-wide priorities

|  | Action required   | Target date                              | Progress measure                          | Status (RAG) | Comments  | Leads         | Partners  |
|--|---|--|---|--------------|---|---------------|---|
| <b>13. Devon &amp; Torbay – Embedding NCISH '10 ways to improve patient safety' into acute and community mental health provision</b> |   |  |   |              |   |               |   |
| Aligns to the following national priorities: Government Strategy p1, 3; Prof Louis Appleby p1, 5; Samaritans & Exeter University p2) |   |  |   |              |   |               |   |
| Page 16  | 13.1 Embedding National Confidential Inquiry into Suicide and Safety in Mental Health (NCISH) 10 key elements for safer care into DPT organisational process, policies and culture. | Ongoing. Continuous cycle of improvement | NCISH 10 key elements indicator dashboard |              | DPT suicide prevention plan remains valid. DPT Safe from Suicide Programme Board provides effective monitoring and assurance that the plan is on schedule and concordant with related Trust programme boards. | DPT           | Torbay & Devon Council, Devon & Cornwall Police, VCSE, Devon CCG, NHS England, Primary Care, Pete's Dragons, Drug and Alcohol Services, Devon-wide hospitals, SWAST |
| <b>14. Devon &amp; Torbay suicide prevention for people with a history of domestic abuse and sexual violence</b>                     |   |  |   |              |   |               |   |
| Aligns to the following national priorities: Government Strategy p1; Samaritans & Exeter University p1)                              |   |  |   |              |   |               |   |
| 14.1   | Action to be agreed by DASV Task & Finish group.  | TBC                                      | TBC                                       |              | Agreed priority of Devon and will follow and support their project plan from a Torbay perspective.  | Devon Council | Torbay Council, PCC, SARCS  |

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