

**Report for:** Adults and Health Scrutiny Panel, 20<sup>th</sup> June 2019

**Title:** Haringey Suicide Prevention Action Plan Update

**Report authorised by:** Dr Will Maimaris, Interim Director of Public Health

**Lead Officer:** Dr Chantelle Fatania, Consultant in Public Health  
[Chantelle.fatania@haringey.gov.uk](mailto:Chantelle.fatania@haringey.gov.uk)

**Ward(s) affected:** All

**Report for Key / Non Key Decision:** Non Key Decision

## 1. Describe the issue under consideration

- 1.1 The death of someone by suicide has a devastating effect on families, friends, workplaces, schools and communities, as well as an economic cost. Each death from suicide seriously affects at least 10 people.
- 1.2 A paper was presented to the Adults and Health Scrutiny Panel in November 2018. This paper provides a further update on key successes over the past 6 months.
- 1.3 The Haringey Suicide Prevention Group (HSPG) is an inter-agency partnership that has been established to guide the Borough's suicide prevention strategy. It aims to shape and strengthen community-based suicide prevention planning and implementation. The Group, which is chaired by Mind in Haringey, meets on a quarterly basis and has broad membership from statutory and non-statutory organisations including: Haringey Public Health, the Clinical Commissioning Group, Metropolitan Police, Barnet Enfield Haringey Mental Health Trust, British Transport Police and local charities.
- 1.4 The HSPG annually reviews the Haringey Suicide Prevention Action Plan and identifies areas on which to focus, using the Preventing Suicide in England, Public Health England and National Institute for Health and Care Excellence guidelines as frameworks for best practice. The Plan identifies targeted actions of specific agencies to deliver priority areas of intervention, which are:
  - Reduce the risk of suicide in key high-risk groups
  - Tailor approaches to improve mental health in specific population groups
  - Reduce access to the means of suicide
  - Expand and improve the systematic collection of and access to data and research on suicide

## Key successes for suicide prevention over the past 6 months

Table 1 summarises Haringey's Suicide Prevention Actions over the last 6 months. The HSPG has actively contributed to existing work streams and implemented actions that correspond to pertinent issues that need to be tackled.

**Table 1: Actions over the last 6 months**

Area for action	Description
Post Vention Service Across North Central London	A business plan for a 5-borough Suicide Liaison Service was submitted to the NCL STP and was endorsed by the board on 25 July 2018. The service would make available immediate practical and emotional support to the 100 or so families/social networks affected by suicide each year in NCL. Directors of Public Health have all contributed funding and other partners – notably Barnet, Enfield and Haringey Mental Health Trust have agreed in-kind support will be provided for this initiative. A bid has been made via the North London Partners for funding from NHS England's suicide prevention funding, and we are currently awaiting a decision from them as to whether they will provide the additional funding needed.
Archway Bridge	Haringey Council has obtained Listed Building Consent for erection of stainless-steel anti-suicide fencing along the bridge in front of the existing fence and in front of the bridge parapets, and removal of the previously installed wire mesh along the bridge fence and spikes on the end and central plinths. These have been fabricated and work on the installation of these measures will start on 11th June 2019. Interim measures including cameras have supported the prevention of two potential deaths.
Adult Mental Health And Wellbeing Support	The Haringey Wellbeing Network was launched in 2018 and is a service providing mental health and wellbeing support services for adults in Haringey. Led by Mind in Haringey, the service aims to empower people towards better self-care in their mental and physical health.

Area for action	Description
Adult Mental Health And Wellbeing Support	<p>By alleviating issues such as stress, anxiety, low mood, loneliness and isolation the service enables individuals to build resilience and reduce or prevent the onset of mental health problems.</p> <p>Designed as a single point of access to support services, the network's key partners are Mind in Haringey, Bridge Renewal Trust and Tempo. Each of these specialist organisations provides a different part of the service and has a wealth of expertise in working with Haringey's different communities.</p> <p>People aged 18 and over, a resident of Haringey or registered with a Haringey GP can access the Haringey Wellbeing Network. The service accepts self-referrals, referrals from healthcare professionals, friends and family members. Referrals are also accepted from young people aged 16-17 who are transitioning from children's care or health services.</p>
Prevention And Raising Awareness Amongst Construction Workers	<p>The chair of the HSPG attended the construction partnership meeting in April 2019. Discussion centred on suicide, the work of the HSPG, the range of initiatives which are available across the borough to support suicide and collaborative working with partners.</p> <p>Currently there are several initiatives present for construction workers around mental health awareness and suicide prevention, however delivery and uptake is varied and it is unclear what the overall picture is. The construction partnership is working with the HSPG and will feedback regarding future initiatives.</p>
Good Thinking Digital Wellbeing Service	<p>Good Thinking is a digital wellbeing service designed to support Londoners who are looking for personalised new ways to improve how they feel every day. It is funded by public health. It offers safe, proactive, early intervention tools to help with the four most common wellbeing concerns: anxiety, depression, stress, sleep.</p>

Area for action	Description
<p>Good Thinking Digital Wellbeing Service</p>	<p>There are over 120 resources available including mobile apps, websites, downloadable guides and more information about health services to consider.</p> <p>Most resources are free, some have a small charge, and some are made free if they are accessed via Good Thinking. Good Thinking is anonymous and all resources have been reviewed by a Consultant Psychiatrist.</p> <p>Good Thinking began its test phase in November 2017 and is now being widely promoted across London. It is made possible by London's boroughs, the NHS, and Public Health England. It has based its approach on substantial user testing and an evaluation is underway.</p>
<p>Increase Membership From Key Groups</p>	<p>Over the last 6 months several community organisations have joined the HSPG, there is now representation from LGBTQ, Turkish, Kurdish and Jewish communities. Members regularly report new initiatives.</p>
<p>Maternal Mental Health</p>	<p>All Health Visitors in Haringey use the Hospital, Anxiety and Depression scale (HADS) tool to assess maternal mental mood. HADS facilitates the early identification of both anxiety and depression simultaneously, whilst giving a separate score for each – helping aid the referral to appropriate services. The pathway the person follows depends on their score.</p> <p>The HADs assessment is completed with clients at pregnancy visit 5 and repeated at 6 weeks post-delivery. This assessment is, 'as reported by self'. The limitation of using this tool in isolation is recognised so the Family Nurses (FN) will often, through observation of and in discussion with clients, and other professionals, identify low mood and anxiety, despite the client having a low HADs scores.</p>
<p>Maternal Mental Health</p>	

Area for action	Description
	A copy of all completed HADs, irrespective of the score, is sent to the clients GP. Where high scores are noted, then additional information, to the GP, is included on planned interventions, such as; referral to talking therapies, support to access GP for further assessment, and follow up plans.
Mental Health First Aid Training	Mental Health First Aid (MHFA) is an internationally recognised training course, designed to teach people how to spot the signs and symptoms of mental ill health and provide assistance. As part of the Mayor of London's Young Londoners Fund, Haringey Council has had the opportunity to train staff and partners to deliver the Youth MHFA course to schools in the borough. Four professionals were identified and trained from Haringey Council and Whittington NHS Health Trust in early 2019, who will roll out the training offer to schools from June 2019. The course covers information about mental health, depression, anxiety, suicide, psychosis, self-harm and eating disorders. This work builds on existing work already occurring across the borough.

In the next 12 months the HSPG will continue its role as a forum for sharing experience and knowledge on suicide prevention. It will broaden participation, especially to representatives of different communities in the borough, as well as to relevant agencies not currently involved. HSPG will work to increase awareness of the issue of suicide locally, and actively seek to contribute to initiatives to improve mental health and wellbeing in the general population and within high risk groups.

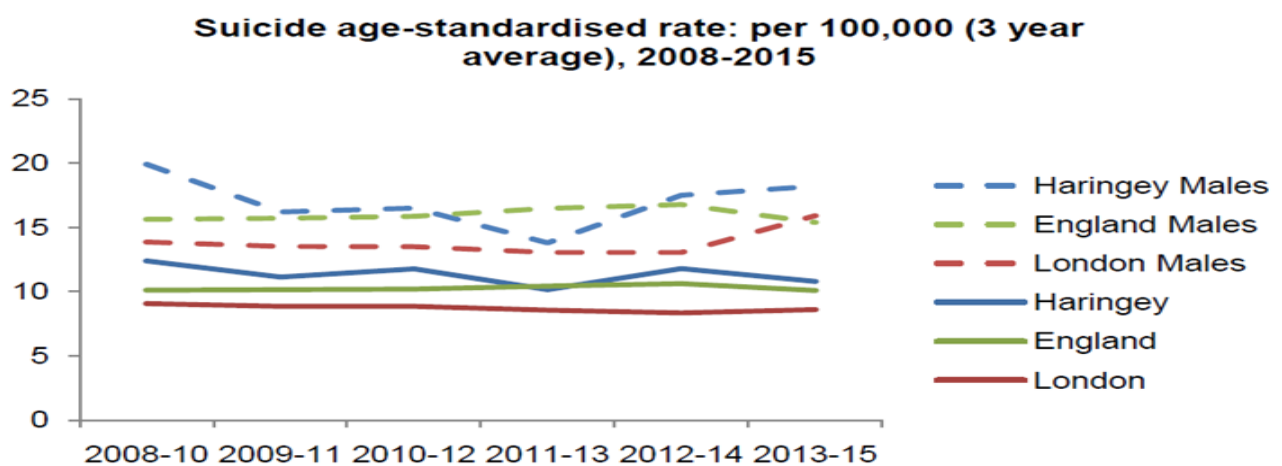
In partnership with Public Health, the group will prepare the next suicide prevention plan to start from April 2020, when the current plan expires.

## 2. Background information

2.1 In 2014-2016, 55 people died by suicide in Haringey. The age-standardised suicide rate in Haringey was 10.3 per 100,000 people. This was the fifth highest in London, and higher than the England rate of 9.9 per 100,000. For Haringey's comparator boroughs in 2014-2016, the age-standardised suicide rate per 100,000 in Hackney was 8.1, Lambeth 10.2, Lewisham 7.2 and Southwark 10.6.

2.2 Figure 1 highlights the trend in age-standardised suicide rates from 2008-2015. In 2013-15 the Haringey rate was higher than both London and England. The male suicide rate in Haringey is also higher than in both London and England.

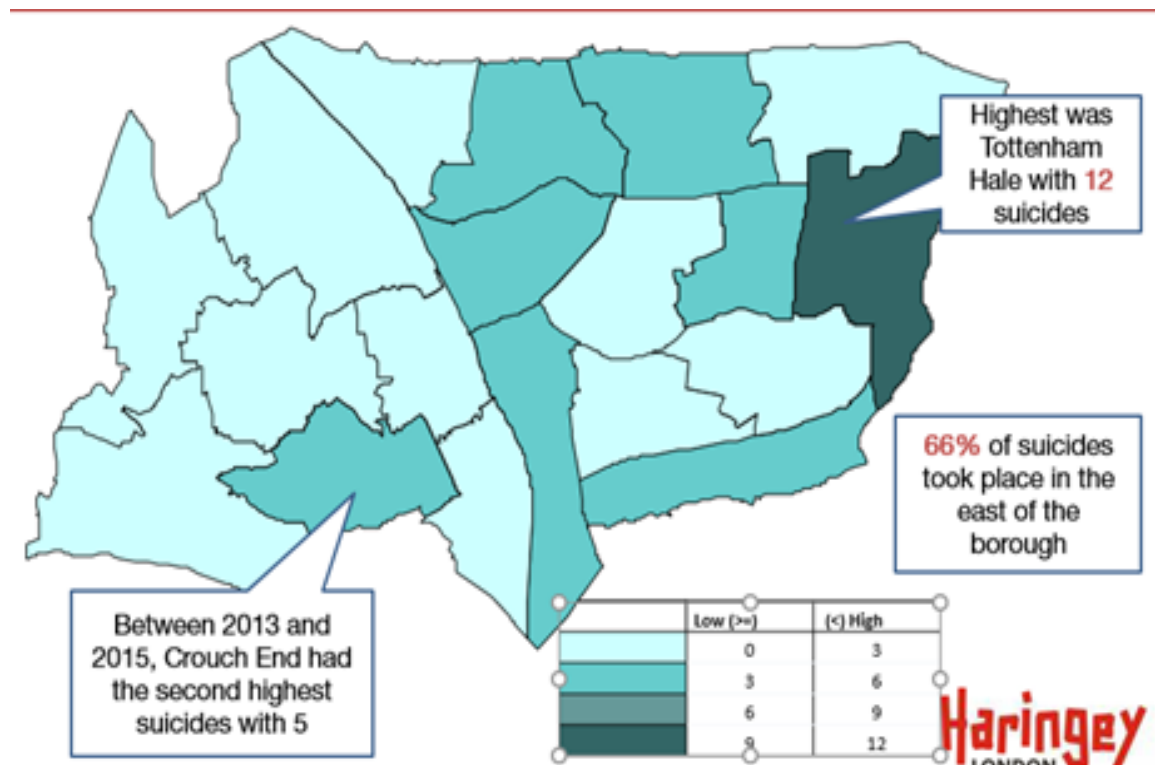
**Figure 1: Age- standardised suicide rate 2008-2015 (ONS, 2016)**



2.3 The Haringey 2016 suicide audit found several salient features of deaths by suicide including:

- 75% of deaths were men, the highest rate being among men aged 25-44 years
- Only half of those who died by suicide had a record of employment. Of those, 35% were amongst those in “higher managerial, administrator and professional occupations” e.g. financial advisor or head-teacher, followed by 24% in routine and manual employment
- 18% of people completing suicide were retired and a further 12% were students
- 66% of suicides in 2013-15 took place in the east of the Borough (Figure 2)
- The main method of suicide was hanging. The main places where people died from suicide were homes, followed by train stations
- Between 2013 and 2015, 36% of people who died from suicide were born abroad. Recording of ethnicity and nationality was very limited and not consistent. Despite this there was a noticeable prevalence of Eastern European migrants, Black African and Black Caribbean in the coroner's data.

**Figure 2 Suicide rate 2013-15 by ward**



2.4 Risk factors for suicide include previous suicide attempt(s), mental health problems and disorders (diagnosed or undiagnosed), problematic substance use, loss (relationship breakdown, job or financial loss, debt, housing), trauma or abuse, and chronic pain or illness. Mental ill health is one of the most important risk factors for suicide. The early identification and prompt, effective treatment of mental ill health has a major role to play in preventing suicide across the whole population.

### 3 Recommendations

3.1 That the Adults and Health Scrutiny Panel notes progress on the Suicide Prevention Action Plan and the ongoing progress made through multiagency working led by HSPG in Haringey.

### 4 Reasons for decision

4.1 N/A

## **5 Contribution to strategic outcomes**

The Borough Plan 2019-2023, NHS Long Term Plan, Haringey's Community Strategy and the Better Care Fund.

## **6 Statutory Officers comments (Chief Finance Officer (including procurement), Assistant Director of Corporate Governance, Equalities)**

### **6.1 Finance and Procurement**

This is an update report for noting and as such there are no direct financial implications associated with this report.

### **6.2 Legal**

This is an update report for noting and as such there are no recommendations for action that have a direct legal implication.

### **6.3 Equality**

The Haringey Suicide Prevention Action Plan uses a multi stranded, multi-sectorial approach and will allow inequalities and isolation issues related to protected characteristics to be addressed. The implementation of the Action Plan will have a prevention-based approach to proactively identify high risk and hard-to-reach communities, in particular older people, those living with disabilities and people with long-term health conditions. A range of activities are occurring across the borough and in areas with high deprivation, health inequality and poor life expectancy.

## **7 Use of Appendices**

N/A

## **8 Local Government (Access to Information) Act 1985**

N/A