

LINCOLNSHIRE'S SUICIDE PREVENTION ACTION PLAN 2020-2021

The Lincolnshire Suicide Prevention Action Plan has been developed to achieve the vision and priorities set within the Lincolnshire Suicide Prevention Strategy.

It is our intention to review this action plan at each Suicide Prevention Steering Group (SPSG).

The five priorities areas for this action plan stated within the Strategy are indicated below with clearly identified tasks for year one:

RAG Rating Key

	On Plan, no concerns
	On Plan, but concerns or behind plan and no concerns
	Behind plan and concerns

1. Develop a Core Local Offer

ID	Task	How will this be achieved?	Lead	Planned Completion Date	Progress To Date	RAG Rating
1.1	Ensure co-production with those with lived experience throughout the work around Suicide Prevention.	a) Those with lived experience are represented at the SPSG b) Regular engagement sessions are held with those with lived experience to ensure the action plan is updated to reflect the needs of those who need support	Public Health	December 2020	People with lived experience have been engaged with during the development of the Suicide Prevention Strategy and Action Plan. An engagement session with people with lived experience took place on Friday 8 th January 2021 to obtain feedback around supporting males' mental health and suicide prevention. The feedback has been used to feed into the Community Suicide Prevention Innovation Fund that is available to community groups around the county to support male suicide prevention. The event was run by the SHINE Network	

					and Public Health	
1.2	Identify/develop clear pathways of support for both individuals and professionals.	<ul style="list-style-type: none"> a) Produce and publish a visual pathway to services with a "no wrong door" approach linking in with the Mental Health Hub b) Identify any gaps in services c) Promote helplines i.e. Samaritans; 101 d) Identify and promote apps and web-based support 	Public Health	March 2021	<p>The first Pathway Task and Finish group took place on 12th August 2020, which was very productive.</p> <p>As the conversation progressed it became clear that we have a lot of information already produced in different documents and formats and what we need to do is put the information into one document.</p> <p>Due to Public Health resources being redeployed to Covid-19 work, this task is behind schedule and will be delayed by two months. Public Health are aiming to have a draft pathway by May 2021.</p>	
1.3	Identify support available for families and those bereaved by suicide	<ul style="list-style-type: none"> a) Map the current services available to those that have experienced bereavement by suicide including trauma support b) Develop clear pathways to these services c) Talk to those bereaved by Suicide and obtain feedback from their experiences and identify any gaps in provision d) Order and distribute "Help is 	Public Health	May 2021	<p>Under A and B, Public Health are in the process of mapping all the current services available to people in Lincolnshire, both locally and nationally around, generic bereavement support, suicide bereavement support and trauma support. Once gathered, this will be added to the Connect to Support website and developed into an electronic document that will be shared with all partners. All services will state the clear pathways and referral criteria.</p> <p>Under C, Public Health are exploring ways in which to conduct engagement with those that are bereaved through a suicide.</p> <p>Lincolnshire County Council Public</p>	

		<p>at Hand booklet"</p> <p>e) Explore options for commissioning a suicide bereavement support service for those bereaved through suicides</p>			<p>Health now have a contract with an organisation called Harmless/The Tomorrow Project to provide a low level Suicide Bereavement Support Service in Lincolnshire. The contract started 21st December 2020 for 6 months, until 21st June 2021. The following will be provided by Harmless:</p> <p>The aim of the service is to provide an initial Suicide Bereavement response to those bereaved by suicide. The Lincolnshire Coroner's Office, the Public Health Suicide Prevention Lead and Lincolnshire Police can refer into this service only, for those recently bereaved due to a death through a suicide. The service will provide a coordinated response for each deceased household, by offering the following support:</p> <ol style="list-style-type: none"> 1. Provide initial contact within 72 hours of referral 2. Complete an assessment of need 3. Provide information, advise, guidance and sign-posting 4. Send the 'Help is at Hand' booklet to the primary member of the bereaved household (Supports part D of the task) <p>Referrals can be made via Lincolnshire Police, the Lincolnshire Coroner's Office and Public Health only, as this is a temporary, low level support service.</p> <p>Under E, Public Health will start to explore options to commission a suicide</p>	
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					bereavement support service in April based on the Harmless/The Tomorrow Project contract. However funding from NHS England and Improvement for a Postvention service until 2022/23 in Lincolnshire.	
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2. High Risk Groups

ID	Group	How will this be achieved?	Lead	Planned Completion Date	Progress To Date	RAG Rating
2.1	Males	<p>a) Submit a bid to NHSE/I for Suicide Prevention Wave 3 money to support the work around males and suicide prevention</p> <p>b) Once funding has been secured develop an agreed approach to supporting males around suicide prevention</p>	SHINE	February 2021	<p>Task A is complete and funding secured. Lincolnshire were successful in securing Wave 3 Suicide Prevention funding of £151,000 each year for 3 years. This money will be spent on Males.</p> <p>SHINE are taking the lead on Task B. The following is an update on progress since last update:</p> <ol style="list-style-type: none"> 1. Project Brief approved 2. Governance – Multi-Agency Project Board meetings held monthly to oversee development and delivery of projects. 3. Grant Agreement and associated papers approved 4. Recruitment process for SHINE staff - Project Manager interviews on 13 January & deploying resources to support project development and delivery working 	

					<p>with partner agencies through Development Consultant</p> <p>5. Engagement with people with lived experience and organisations underway and will inform investment programme for the development of mutual support groups and awareness raising</p> <p>6. Community Suicide Prevention Innovation Fund engagement has been started with the market and an event took place on 12th January 2021. A lot of interest of the funding in the community.</p>	
2.2	People who self-harm	<p>a) Develop an agreed approach to support people who self-harm</p> <p>b) Implement the "Self-harm and suicide prevention framework" created by Health Education England (HEE) and the National Collaborating Centre for Mental Health (NCCMH)</p> <p>c) Implement good practice based on NICE Guidance CG16 "Self-harm in over 8s: short-term management and prevention of recurrence" and NICE Guidance CG113 "Generalised anxiety</p>	SPSG Task and Finish Group	May 2021	<p>The SPSP Self-Harm Task and Finish group have met up three times and have outlined the work that is required under task 2.2.</p> <p>The draft approach will be ready for March and will be shared with the SPSP for comments.</p>	

		disorder and panic disorder in adults: management "				
2.3	Support towards a safe, decent and secure environment for those in prison to reduce the risk of self-inflicted death amongst prisoners and reduce levels of self-harm in custody	<p>a) Have a comprehensive suicide prevention protocol in place. This will include:</p> <ul style="list-style-type: none"> - Implement effective screening for signs of increased risk self-harm or suicide, particularly during early days in custody, and ensuring interventions are in place to manage and reduce this risk - Providing prisoners with meaningful activities in line with their individual resettlement and criminogenic needs - Support prisoners to develop and maintain pro social support networks including family and community organisations - Ensuring prisoners live in a decent and clean environment - Implement a holistic safety framework for HMP Lincoln in line with national safety framework 	HMP Lincoln	September 2021	<p>The following is an update on progress to date:</p> <ul style="list-style-type: none"> • Risk screening is undertaken via a combination of HMP reception protocols and locally commissioned and funded partnership screening with Lincolnshire Action Trust (LAT) called "SPARC+". SPARC+ screens for signs of finances risk prior to arrival at HMP Lincoln in court custody suites and flags alerts to HMP Lincoln teams so that bespoke support can be given on arrival. This is further enhanced via an induction process (currently 14 days due to Covid-19 cohorting process) which supports those newly into custody in a separate environment and helps them adjust to custodial living/community • All prisoners are offered the opportunity to engage in meaningful activity in custody either in workshops or education. This is allocated as part of their pathway which is designed in consultation with their prison offender manager who manages there sentence plan • HMP Lincoln have in place a families and significant other strategy which set out the actions HMP/YOI Lincoln, and its partners will take to develop and build family 	

					<p>ties and support networks</p> <ul style="list-style-type: none"> • HMP Lincoln delivers a clean environment despite a Victorian setting. This year the governor has secured additional £20m of funding to deliver decency improvement across the site from including heating, windows, showers, flooring etc. HMP and the regional director undertake regular decency checks and positive feedback is received from these sources and also from prisoners during annual measuring the quality of prisoner life (MPQL) survey • Local framework has been created and is undergoing consultation and competitive analysis prior to publishing. • Local framework for suicide and self-harm now in place and providing strategy delivery for HMP/YOI Lincoln • Due to national Covid pandemic (and local outbreak site during December) and HMPPS Covid control regime men in custody at HMP/YOI Lincoln are experiencing extended periods do in cell confinement to limit contact. To limit the effects of this confinement on wellbeing and anxiety related self-harm, HMP/YOI Lincoln has implemented a “1st time fix” programme to identify and resolve issues at the earliest opportunity. 	
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					<ul style="list-style-type: none"> • Activity packs have been created and are given to the men in custody on regular basis to provide in cell distraction activities • Virtual visits via “purple visits” has been implemented at HMP/YOI Lincoln to provide men with the opportunities to keep in contact with their families and support networks during Covid restrictions • Nottingham Healthcare trust (healthcare providers) have gained additional funding to operate a new self-harm pathway which focuses on those men who self-harm and ways to support them and reduce further self-harm taking place. 	
2.4	Reduce suicides of mental health patients within both the community and in-patient settings supporting the zero suicide ambition	<p>a) Work closely with Lincolnshire Partnership NHS Foundation Trust (LPFT). Follow LPFT Suicide Prevention Strategy to support them in:</p> <ul style="list-style-type: none"> - delivering the LPFTs inpatient zero suicide ambition plan year on year aims developing and implementing an LPFT community 	LPFT	March 2021	<p>The Trust launched its 2020 – 2023 Suicide Prevention Strategy in September 2020 setting out its vision for patients and their families/carers who access our services. The Covid-19 pandemic has impacted on some progress of the Inpatient Zero Suicide Ambition Plan as resources needed to focus upon the resilience response. Due to this the Trusts Clinical Advisory Group agreed that the innovative work within the action plan be suspended whilst those actions which had been completed could become more embedded. There does not appear to have been an increase in suicide during the period March 2020 to October 2020 but the Trust remains alert particularly heading towards the</p>	

		zero suicide ambition plan			winter months, on-going pandemic and increasing risk of recession. A key part of meeting the strategy is the development of a the strategy is the Community Zero Suicide Ambition Plan this important piece of work has been progressing with key stakeholders and it is anticipated that a final plan will be formulated during quarter 3 of 2020/21.	
2.5	Those suffering during the COVID-19 pandemic	a) Work with the relevant organisations that support the various groups of people being adversely affected by the COVID-19 pandemic	SPSG	Ongoing	No concerns to report at the moment. Action: All SPSPG members to raise any concerns to Samantha Long MSO to Kakoli Choudhury or during SPSPG meetings.	

3. Children and Young People

ID	Task	How will this be achieved?	Lead	Planned Completion Date	Progress To Date	RAG Rating
3.1	Promote positive mental health and emotional resilience	a) Work with schools, colleges and universities to raise awareness of mental ill health b) Training to early years providers, schools staff, colleges and future teachers/childcare providers on early warning signs,	Children Services/ Academies / Schools/ further and higher education	Ongoing Ongoing Operational from Jan 2021	The following is an update on progress to date for task a: <ul style="list-style-type: none"> CAMHS, Healthy Minds Lincolnshire and MHSTs created online resources, videos and workshops to support CYP's emotional wellbeing and mental health concerns, parents/carers and professionals. Resources available to schools via Kyra Teaching School – Mobilise Project 	

		<p>supporting and signposting of emotional/mental ill health and suicidal behaviours</p> <p>c) Mental Health Support in Schools roll-out in Lincoln and Gainsborough areas</p>		<ul style="list-style-type: none"> Partnership working with Lincoln University re. The Office for Students Project continues with both LCC and LPFT represented on the Steering Group. Children's Commissioning Team in collaboration with CYP and other stakeholders developed the "Here to Help" pocket-sized information leaflet that gives information about CYPMH services including crisis. 6,000 leaflets were distributed to Lincolnshire secondary schools in September 2020. <p>The following is an update on progress to date for task b:</p> <ul style="list-style-type: none"> Wellbeing for Education Return training which is DfE funded project in response to Covid-19 is being rolled out to all state-funded education settings which pupils aged 5 to 18 years, with on-going support for education settings up until end of March 2021. Healthy Minds Lincolnshire is acting as lead on behalf of the Council and training being delivered by Healthy Minds Lincolnshire in partnership with other key LCC and commissioned services. Online workshops, resources and videos created by LPFT (CAMHS, Healthy Minds Lincolnshire and MHSTs) to support CYP's emotional wellbeing and mental health 	
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					<p>concerns. Healthy Minds Lincolnshire utilising workshops and online resources to provide training to education staff on how to use these within their own settings.</p> <ul style="list-style-type: none"> • Healthy Minds Lincolnshire dedicated professionals resource hub is also available. • Kyra Teaching School through Mobilise Project supporting the Recover Lincolnshire initiative, including Recovery Curriculum: Reconnection, Re-engagement and Re-set and Building Resilience. <p>The following is an update on progress to date for task c:</p> <ul style="list-style-type: none"> • MHSTs in Lincoln and Gainsborough continue to work towards becoming fully operational from January 2021. • Education Mental Health Practitioners (EMHPs) completed their training with Derby University at the end of December 2020, with results of final submissions pending (anticipated that outcome of final submissions will be known by March 2021) • Lincolnshire successful in a second bid for MHSTs in Boston and Skegness (and surrounding area). These teams commenced their induction with LPFT 4th January 2021 and will commence their training year with Derby University 	
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					from end of January/beginning of February 2021. Upon successful completion of training it is anticipated that teams will be fully operational from January 2022.	
3.2	Continue to provide and further improve the outstanding mental health support on offer in Lincolnshire	<p>a) Effective contract management of the Healthy Minds Lincolnshire, Kooth online Counselling and CAMHS contracts</p> <p>b) Review of Healthy Minds Lincolnshire and other emotional/behavioural support commissioned by Lincolnshire County Council</p>	Children's Services / LPFT	Ongoing December 2021	<p>The following is an update on progress to date for task a:</p> <ul style="list-style-type: none"> Contract management of Services continues to take place. . <p>The following is an update on progress to date for task b:</p> <ul style="list-style-type: none"> Review has continued during Covid-19 and is still on-going. Covid-19 has impacted on the timescales of the review and these are currently being revisited. 	
3.3	Ensure effective response when children are in crisis	<p>a) Develop more effective mental health risk identification across CAMHS and social care to prevent escalation to point of hospitalisation</p> <p>b) Work with regional and local partners on New Models of Care to provide 'hospital in the home' care to children instead of admission to out of county MH inpatient units</p> <p>c) Develop more responsive 24/7 crisis</p>	Children's Services / CCGs / LPFT / Regional provider collaborative / NHSE	December 2020 March 2021 March 2022	<p>The following is an update on progress to date for task a:</p> <ul style="list-style-type: none"> A more effective tracking spreadsheet is now in place that allows multi-agency discussion about CYP judged at risk of MH inpatient admission by CAMHS colleagues at the monthly joint Complex Case meetings. The next step is to refine and align this with Transforming Care dynamic risk assessment. <p>The following is an update on progress to date for task b:</p> <ul style="list-style-type: none"> The Community Crisis and Enhanced Treatment Team is now fully operational and successfully 	

		response for children as part of the local NHS five-year plan			<p>supporting CYP with intensive treatment in the community to prevent inpatient admission for General Adolescent Unit (GAU) beds. CYP inpatient admissions remains low, they are also supporting eating disorder patients in the community who are recovering but still require nasogastric tube feeding. Continued monitoring of the implementation of these new arrangements is required as contractual responsibility changes from NHS England to the new Provider Collaborative model.</p> <p>The following is an update on progress to date for task c:</p> <ul style="list-style-type: none"> • Complete. Through the implementation of the New Model of Care for CYP Tier 4 crisis and work around 24/7 telephone access in response to Covid, Lincolnshire has an effective and responsive crisis provision in place. 	
3.4	Evaluate the impact of the new assessment form for young people in Lincolnshire Secure Unit that self-harm or are suicidal	<p>a) Task How will this be achieved? Type of Engagement Lead Planned Completion Date</p> <p>b) Evaluate the impact of the new assessment form for young people in Lincolnshire Secure Unit that self-harm or are suicidal</p>	Children Services	September 2021	<p>The following is an update on progress to date:</p> <ul style="list-style-type: none"> • All training completed for staff on the theories behind self-harm and suicide, along with how to complete the new 'Suicide and Self-Harm Keep Safe (yellow) assessment form'. An audit process of the assessment has been finalised. • Staff feedback on the training was 	

		<p>Ensure, following training, that the new assessment (yellow form) is used as required.</p> <p>c) Consistently review the use of the form and capture information and feedback for evaluation.</p> <p>d) Complete evaluation and identify any improvements.</p> <p>e) Make changes and improvements if needed based on lessons learnt.</p>			<p>positive, particularly the additional section for the teachers in school to complete. All further follow up actions complete.</p> <ul style="list-style-type: none"> • Staff want to ensure the young person's voice is considered. A leaflet for young people has been produced to explain the new process and to assist their understanding of how they will be involved in decision making to keep them safe. • The new assessment has been undertaken on two young people. Both had the opportunity to feedback but declined. Further conversations with young people are taking place. • Engagement with school was positive. Agreement that young person should not being automatically excluded from lessons due to self-harm or suicidal thinking and that risk assessment should help inform what activities young people are able to take part in. • Care staff have been thinking more flexibly about helping young people create 'safer room environments' so that instead of removing items from rooms they can keep items that help them soothe. The healthcare team have also been creating self soothe boxes with young people. 	
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4. Intelligence

ID	Task	How will this be achieved?	Lead	Planned Completion Date	Progress To Date	RAG Rating
4.1	Explore alternative data sources to gather intelligence to aid prevention of suicidal behaviours	<ul style="list-style-type: none"> a) Set up Suicide Prevention Data Review sub group b) Determine the different types of data sources available including any interventions and attempted suicides 	Public Health	March 2021	The first Data Task and Finish Group took place on 14 th January 2021, were the group discussed the different types of data they collect and as a group will think about how this information can be used to support the suicide prevention work and will be discussed further at the next Task and Finish group meeting.	
4.2	Develop Real Time Surveillance	<ul style="list-style-type: none"> a) Conduct a pilot through Lincolnshire Police data b) Confirm final protocols and procedures based on the findings from the pilot c) Phased inclusion of data from additional sources with established information sharing agreements with each organisation i.e. EMAS, A&E, British Transport Police d) Use the intelligence to identify themes and where resources need to be targeted 	Public Health	June 2021	<p>The Real Time Surveillance (RTS) project has been up and running since January 2020 with Lincolnshire Police and has been going very well.</p> <p>Information on any deaths that are suspected suicides are sent through to Public Health from Lincolnshire Police on a weekly basis and uploaded to a master database and mapped. The information is then shared with Public Health Suicide Prevention leads.</p> <p>The RTS work will expand to other data sources and organisations in a planned way, yet to be determined by the Data Task and Finish Group.</p> <p>Due to Public Health resources being redeployed to Covid-19 work, this task is behind schedule and no detailed analysis has been conducted from the data received from Lincolnshire Police.</p>	

					Public Health are exploring options for the RTS work to be managed by a third party.	
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5. Awareness and Training

ID	Task	How will this be achieved?	Lead	Planned Completion Date	Progress To Date	RAG Rating
5.1	Develop a communications plan for suicide prevention in Lincolnshire	a) Produce a communications plan for Suicide Prevention in Lincolnshire b) Identify national suicide prevention campaigns i.e. Time to Change c) Agree campaign materials i.e. suicide SAFE material or national material	Public Health	February 2021	<p>The Communication Plan has been drafted and will be discussed at the next SPSG on 3rd February 2021.</p> <p>Information and material already produced are being gathered and will be created into one document.</p>	
5.2	Develop Suicide Prevention Website	a) Work with Connect to Support Lincolnshire to create a Suicide Prevention website for all to recognise suicide signs and provide early intervention, support and signposting resources	SPSG Task and Finish Group	June 2021	<p>Discussions have taken place with Connect to Support Lincolnshire who are happy to develop a dedicated page on Suicide Prevention.</p> <p>Reviews of other websites have been undertaken and material being gathered. This will be shared with the SPSG once recommendations have been made.</p>	
5.3	Identify training available to recognise suicidal signs and provide early	a) Identify the training available, including online training b) Explore delivery options for provision of Suicide Prevention	Public Health	July 2021	<p>The Zero Suicide Alliance (ZSA) provide access to a free online training resource which is accessible and useful for any member of the community. It can be accessed here: https://www.zerosuicidealliance.com/tr</p>	

	<p>intervention, prevention, support and signposting</p>	<p>and Intervention training c) Ensure this links with the countywide Mental Health workforce training programme</p>		<p>aining</p> <p>Covid-19 has prevented face to face training for several months and this looks set to continue into 2021. The ZSA training is online and the MHFA training will also be facilitated via an IT platform until such time as face to face training can safely resume.</p> <p>The roll out of Mental Health First Aid (MHFA) within the county has been affected by Covid-19 since March 2020. A very small number of courses have taken place with reduced numbers of delegates to ensure safety of all. Regrettably we are not undertaking any MHFA courses at the moment.</p> <p>However, during the past couple of months, the MHFA sub group of the MH Crisis Care Concordat put out an Expression of Interest within the county to current MHFA trainer organisations to seek interest to deliver an agreed number of course places to the health and care sector in Lincolnshire between now and June 2021. The contract has been awarded and an announcement will be made on who the successful provider is.</p> <p>With the support of LCC, an online booking and recording system will be used to enable accurate recording and</p>	
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					<p>reporting of activity.</p> <p>The aim of the training is to maximise opportunity for individuals to receive this training and work with confidence within our community, addressing immediate MH needs of individuals, as well as supporting those in the workplace to identify and manage their own and others mental wellbeing.</p> <p>LPFT have also developed an in-house training package for clinicians that cover suicide and self-injury and this has begun to be delivered via TEAMS within the Trust, following a pilot programme within inpatient areas during 2020.</p>	
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