

ZSA

Resources

Evidence Review 2b

Suicide Core Key Facts

Introduction to the ZSA Resources and the Evidence Reviews developed by the Health Innovation Network

The Zero Suicide Alliance (ZSA) secured funding from the Department of Health and Social Care to develop a world leading 'ZSA Resources' digital suicide prevention resource for its members that work across all sectors engaged with or influenced by suicide prevention.

The ZSA Resources are based on our core belief that everyone, everywhere, in every population can take action to promote good mental health, and prevent mental ill health and suicide.

The content of the ZSA Resources has therefore a very practical focus: to constantly seek out the needs of our membership, and to provide members with the resources and implementation tools they tell us they need, to turn their ambition into action. These resources include easy access evidence briefings, new accessible data, visualised into maps of their local area, live examples of implementation solutions in practice, peer learning and support networks, 'help' clinics, virtual conferences and webinars, and links to international communities of practice, research, innovation, and more.

To develop our resource, the ZSA initially commissioned our ZSA Alliance partner, the Health Innovation Network, to undertake a stakeholder consultation of people from each of our membership sectors to identify their needs. This report is available here:

www.zerosuicidealliance.com/ZSA-Resources/introduction/zsa-evidence-briefings

The Health Innovation Network (HIN) is the Academic Health Science Network (AHSN) for south London, one of 15 AHSNs across England. As the bodies that connect NHS and academic organisations, local authorities, the third sector and industry, they are catalysts that create the right conditions to facilitate change across whole health and social care economies, with a clear focus on improving outcomes for patients. The HIN is therefore perfectly placed to identify and spread health innovation at pace and scale; driving the adoption and spread of innovative ideas and technologies across large populations.

At the request of our members, ZSA commissioned the HIN to undertake research, bring together experts, and produce a series of evidence briefings on the state of knowledge in a number of key suicide prevention areas. Rigorous desk top research took place over a period of 10.5 weeks mid May 2019 – 2 August 2019. All sections were subsequently reviewed by relevant Virtual Steering Group members. The information sources in this report are correct at time of research.

The Evidence Reviews will be continuously updated as new knowledge becomes available, and to include the impacts of COVID-19. We will reach out to our members and Alliance partners to secure feedback on how the resources are used, how they can be updated and how they can be improved to support action.

We very much hope you find these briefings useful. Please continue to tell us how we can help you save lives, to get in touch please visit: www.zerosuicidealliance.com/get-involved/contact-us

Demographic Information

Introduction

The HIN has undertaken an analysis of the main national demographic databases related to suicide numbers/rates and/or risk factors. The aim of this scoping exercise was to understand where and how to find reliable local information to facilitate suicide prevention at the local level.

This chapter is divided into two sections:

- Methodology
- Findings
 - PHE Suicide Prevention Profile
 - Data omissions and potential solutions
 - Gaps
 - Work in development.

Methodology

The selection of the databases for inspection was based on stakeholder engagement, input from HIN's Evaluation Lead and the Joint Strategic Needs Assessment around the prevention of self harm and suicide by Southwark Council (Southwark Council, 2017), which provides recommendations about the data sources that are useful in designing suicide prevention strategies.

The following databases were inspected:

- Public Health England: Suicide Prevention Profile (also known as "fingertips")
- Office for National Statistics: Suicides in the UK 2018, Suicide by occupation, England: 2011 to 2015, Suicides-Extra analysis (2017), Estimating suicide among higher education students, England and Wales (2017)
- NHSD: NHS Outcomes Framework (May 2019), Clinical Commissioning Group Outcomes Indicator Set (CCG OIS; May 2019), Mental Health Services Monthly Statistics (May 2019), Adult Psychiatric Morbidity Survey (2016)
- Samaritans: Samaritans Suicide Statistics Report 2018
- Department for Communities and Local Government: Index of Multiple Deprivation (2015)
- Ministry of Justice's "Safe in custody statistics" was also inspected as the data bases listed above do not include data relating to the prisoner population.

Findings

PHE Suicide Prevention Profile

The [Suicide Prevention Profile](#) developed by Public health England (also known as "fingertips") is the most comprehensive source of data on suicide.

This site contains local suicide data (overall rates as well as a breakdown by age and gender and information on years lost to suicide), related risk factors (e.g. depression, mental health problems, long term health conditions/disabilities, substance/alcohol abuse, self-reported wellbeing, prisoner

population, domestic abuse, marital breakup, unemployment, social isolation, loneliness, homelessness, child in care/youth justice system) and related service contacts (hospital admissions for self harm and data on treatment for alcohol and drug addiction).

Information can be filtered by counties and districts within regions (North East, North West, South West, South East, London, West Midlands, East Midlands, East of England, Yorkshire and the Humber) and by STPs. The option to filter indicators by CCG and GP practice per CCG does not appear to work (last checked 02/07/2019).

Local indicators can be compared with England's average and also with the average of the region to which the county belongs. For some indicators, trends over time (increases, decreases, improvement, deterioration, lack of significant change) are also shown.

A complete list of all the variables included in this website can be found in appendix 1 (note that this list of variables is only available when filtering by county, fewer indicators are available when using other filters: eg. districts and STPs).

Appendix 2 contains a table showing the suicide or suicide related information that is provided by each of the databases listed above. Specifically, it shows whether it provides information relating to the groups highlighted in the National Plan for Suicide Prevention.

The National Confidential Inquiry into Suicide and Safety in Mental Health (NCISH)

The NCISH database is a national case series of suicide, homicide and sudden unexpected death (SUD) by mental health patients over 20 years. This allows NCISH to examine the circumstances leading up to and surrounding these incidents and make recommendations for clinical practice and policy. The NCISH publish their key findings and recommendations in annual reports (see link in appendix 3).

Data Omissions and Potential Solutions

The list below enumerates several ways of increasing the amount of local information included in the Suicide Prevention Profile ("fingertips") developed by Public Health England (which over the review period has incorporated several new indicators; this suggests that engaging with PHE and incorporating additional data might be feasible).

- The Suicide Prevention Profile does not contain information on the ethnicity of residents of counties.
- The ONS publishes data on the ethnic breakdown of local authorities in England and the CCG Outcomes Indicator Set provides the following information:
 - 2.9 Access to community mental health services by people from Black and Minority Ethnic (BME) groups- by CCG
 - 2.10 Access to psychological therapies services by people from black and minority ethnic (BME) groups- by CCG
- The Suicide Prevention Profile does not contain information on the situation of people with disabilities:
 - The NHS outcomes framework provides local authority - level information on quality of life of people living with 3 or more long-term conditions (this is obtained from the health domain of the index of multiple deprivation, which contains data on mental health condition).
- Fingertips does not provide information on Social deprivation specifically among people with severe mental health illnesses. The following indicators could be of interest:
 - 2.5i – Employment of people with mental illness (NHS outcomes framework)- broken down by Local Authority
 - 3.17 – Percentage of adults in contact with secondary mental health services in

employment (CCG Outcomes Indicator Set)

- Index of multiple deprivation: local information at the local authority and the CCG level
- NHSD-Mental Health Services Monthly Statistics also contain a variety of indicators around the housing and employment situation of people in contact with different mental health services
- In relation to people with a history of self harm, Fingertips currently includes data on self harm hospital admissions. Although not specifically around self harm but about crisis service provision, NHSD-Mental Health Services Monthly Statistics have a variety of indicators around the number of people with a crisis plan in place, contact with crisis services (with breakdown by age), new referrals to crisis teams (with a breakdown by age) and referrals to crisis teams with face to face appointment (with an age breakdown).
- The Suicide Prevention Profile does not include information on suicides by professional groups within each county/ borough. Currently the ONS reports on suicide by profession at the England level but not at the regional or local authority level.
- The Suicide Prevention Profile does not provide a breakdown by sex for all of the indicators. Given the higher rates of suicides among males and different patterns in males and females, the HIN recommends that, separate information for males and females is provided
- In relation to suicide among people in contact with the criminal system, the Ministry of Justice's "Safe in custody statistics" reports on national figures, (without a local breakdown by age), new referrals to crisis teams (with a breakdown by age) and referrals to crisis teams with face to face appointment (with an age breakdown). This is important because Between 2008-2016, male prisoners were 3.7 times more likely to die by suicide than men in the general population – 2019 ONS report now available [here](#).

It is also important to note that integration of certain data sources into fingertips might be complicated by the level at which data are broken down (CCG for some NHSD statistics vs. local authority on fingertips as CCG filters do not seem to work) (see appendix 2. Appendices 4 and 5 include the relevant variables of two databases; Clinical Commissioning Group Outcomes Indicator Set and NHS Digital Outcome Framework.

Gaps

The ONS does not provide data on the number of people who attempted or completed suicide or that self harm in each prison (see [here](#)). The HIN could not find databases specifically dedicated to suicide data among LGBT+ populations, veterans, inpatients, bereaved, postintervention services or about reduction in means of suicide. Verbal engagement suggested that suicides averted by the Metropolitan Police are not recorded.

Developing work

The HIN also engaged with Healthy London Partnership, Thrive London who are working in partnership with QES data solutions company to develop a heatmap of real time suicide and suspected suicides with local information on bereavement support and other mental health services.

Thrive LDN is a city wide movement to improve the mental health and wellbeing of all Londoners. It is supported by the Mayor of London and led by the London Health Board partners.

Appendices

Appendix 1: Variables included in PHE's Suicide Prevention Profile

Variables included in the Suicide Prevention Atlas ("fingertips") website. Available at: <https://fingertips.phe.org.uk/profile-group/mental-health/profile/suicide/>

Suicide Data

- Suicide: age-standardised rate per 100,000 population (3-year average from 2015-2017) with a breakdown for males and females
- Years of life lost due to suicide, age standardised rate 15-74 years: per 10,000 population (3-year average from 2012-2014) with a breakdown for males and females
- Suicide crude rate 10-34 years/35-64 years/65+ years: per 100,000 (5-year average from 2013-2017)

Related risk factors

- Depression recorded prevalence (aged 18+) from 2017/18
- Mental Health: QOF prevalence (all ages) from 2017/18
- Estimated prevalence of opiates and/or crack cocaine use: rate per 1,000 population 15-64 from 2016/17
- Long term health problems or disability: % of people whose day to day activities are limited by their health and disability from 2011
- Self reported wellbeing: % of people with low worthwhile, happiness or satisfaction scores or high anxiety scores from 2017/18
- Prisoner population: count sept 2018
- Children leaving care: rate per 10,000 children aged under 18 from 2015/16
- Children in the youth justice system (10-18 years) 2016/2017
- Marital breakup: % of adults from 2011
- Domestic abuse historic method 2014/1015
- Older people living alone: % of households occupied by a single person (for any age or over 65) from 2011
- Social isolation: percentage of adult social care users who have as much social contact as they would like 2017/2018
- Social isolation: percentage of adult carers who have as much social contact as they would like 2017/2018
- People living alone: % of all usual residents in households occupied by a single person
- Unemployment: % of working age population from 2017
- Statutory homelessness: Eligible homelessness people not in priority need from 2017/18
- Statutory homelessness: Households in temporary accommodation from 2017/18
- Domestic abuse related incidents and crimes from 2017/18
- Long term claimants of jobseeker's allowance from 2017
- Children in care from 2018
- Admission episodes for alcohol related conditions from 2017/18 with a breakdown for males and females

Related Service Contacts

- Adults in treatment at specialist drug misuse services: rate per 1000 population from 2014/15
- Successful completion of drug treatment for opiate or non-opiate users: % who do not represent within 6 months from 2017
- Adults in treatment at specialist alcohol misuse services: rate per 1000 population from 2014/15
- Successful completion of alcohol treatment: % who do not re-present to treatment within 6 months from 2017
- Emergency Hospital Admissions for intentional self harm: Directly age sex standardised rate per 100,000 from 2017/18.

Appendix 2: Databases

Groups/areas highlighted by the National Suicide Prevention Plan											Other						
	Men	Mental Health inpatients	People in contact with the criminal system	Specific occupational groups	People with a history of self ham	Veterans	LGBTQ+/ gender diversity	Children and Young Adults	Bereaved	Reduction in access to means	Social disadvantage	Substance abuse	Ethnic/ religious minority	Older adults	Disability	Pregnancy/maternity	Family/house hold composition
PHE- Suicide Prevention atlas	Not for all indicators.	No	Yes	No	Only hospital admissions	No	No	Only data on children in social care/ leaving care and breakdown of rate for 10-34year olds.	No	No	Homelessness and unemployment	Only alcohol and drug rehabilitation programmes and alcohol related hospital admissions	No	Only breakdown of suicide rates for +65	No	No	Yes- info on marital breakup
ONS- Suicides in the UK	Yes	No	No	No	No	No	No	Yes- breakdown by age	No	No	Only a breakdown by regions	No	No	Yes- breakdown by age	No	No	No
NHSD- NHS outcomes framework	Yes	No	No	No	No	No	No	Yes	No	No	Yes	No	No	No	Yes	Yes	No
NHSD- CCG OIS	No	Yes	No	No	?	No	No	No	No	No	yes	No	yes	No	?	No	No
NHSD- Mental Health Services Monthly Statistics	No	Yes	No	No	Maybe- information on crisis	No	No	Yes	No	No	Yes - information on accommodation and employment	No	No	Yes	Yes- learning disabilities and autism	No- referrals to perinatal services	No
Samaritans Suicide Statistics Report	Yes	No	No	No	No	No	No	Yes	No	No	No	No	No	Yes- breakdown by age	No	No	No
ONS- Adult Psychiatry Morbidity Survey	Yes	Yes-	No	No	Yes	No	No	No	No	No	Yes	No	Yes	Yes	?	No	Yes- inform on household composition
ONS- Suicide by occupation	Yes	No	No	Yes	No	No	No	No	No	No	? (occupational group as proxy?)	No	No	No	No	No	No

Groups/areas highlighted by the National Suicide Prevention Plan											Other						
	Men	Mental Health inpatients	People in contact with the criminal system	Specific occupational groups	People with a history of self harm	Veterans	LGBTQ+/gender diversity	Children and Young Adults	Bereaved	Reduction in access to means	Social disadvantage	Substance abuse	Ethnic/religious minority	Older adults	Disability	Pregnancy/maternity	Family/household composition
ONS- Suicides extra analysis	Yes	No	No	No	No	No	No	No	No	No	Yes	No	No	No	No	No	Yes
ONS- estimating suicides among higher education students	Yes	No	No	No	No	No	No	Yes	No	No	No	No	Yes	No	No	No	No
Index of multiple deprivation	No	No	They provide information on whether the person has committed a crime	No	No	No	No	Yes	No	No	Yes	No	Yes	Yes- age breakdown	Yes	No	No
Ministry of Justice- Safe in custody statistics	Yes	No	Yes	No	No	No	No	No	No	No	No	No	No	No	No	No	No

Smallest geographical breakdown by dataset:

PHE- Suicide Prevention Atlas: County level ONS-Suicides in the UK (English Regions)

NHSD- NHS outcomes framework (Local authority) NHSD-CCG OIS (CCG)

NHSD-Mental Health Services Monthly Statistics (Local Authority) Samaritans Suicide Statistics Report (National)

ONS-Adult Psychiatry Morbidity Survey (English Region) ONS- Suicide by occupation (National)

ONS- Suicides extra analysis (National)

ONS- estimating suicides among higher education students (National) Index of multiple deprivation (Local authority and neighbourhood) Ministry of Justice- Safe in custody statistics (National)

Appendix 3: NCISH Annual Report

<https://www.hqip.org.uk/resource/national-confidential-inquiry-into-suicide-and-safety-annual-report-2018/#.XUvThe>

Appendix 4: Clinical Commissioning Group Outcomes Indicator Set

NHS Digital reports quarterly updated figures for an array of comparative indicators for all CCG's and Health and Wellbeing Boards. Many of these indicators can be deemed relevant to suicide prevention as follows:

- 1.8 – Emergency admissions for alcohol related liver disease
- 1.12 – People with serious mental illness who have received the complete list of physical checks
- 2.2 - Proportion of people who are feeling supported to manage their condition
- 2.9 - Access to community mental health services by people of black and minority ethnic groups
- 2.10 - Access to psychological therapies by people of black and minority ethnic groups
- 2.11a - Percentage of referrals to Improving Access to Psychological Therapies (IAPT) services which indicated a reliable recovery following completion of treatment
- 2.11b - Percentage of referrals to Improving Access to Psychological Therapies (IAPT) services which indicated a reliable improvement following completion of treatment
- 2.11c - Percentage of referrals to Improving Access to Psychological Therapies (IAPT) services which indicated a reliable deterioration following completion of treatment
- 2.16 – Health related quality of life for people with a mental health condition
- 3.14 – Alcohol specific hospital admissions
- 3.15 – Emergency alcohol specific readmission to a hospital within 30 days of discharge following an alcohol specific admission
- 3.16 – Unplanned readmission to mental health services within 30 days of a mental health patient discharge in people aged 17 and over
- 3.17 – Percentage of adults in contact with secondary mental health services in employment

Appendix 5: NHS Outcomes Framework

The NHS Outcomes Framework is a set of indicators that provide an overview of how the NHS is performing by monitoring the health outcomes of children and adults in England. Within the indicators there are a few that are relevant to suicide prevention (Southwark Council, 2017). These indicators are:

- 1.5i – Excess under 75 mortality rate in adults with serious mental illness.

Date range: 1 April 2008 – 31 March 2015; data filters: age, sex, year, country, local authority, condition

- 2.5i – Employment of people with mental illness

Date range: 1 July 2006 – 30 September 2018; data filters: age, sex, year, quarter, country, local authority, regions, socio-economic condition, religion, ethnicity, condition

- 4.7 – Patient experience of community mental health services Date range: 1st July 2010 – 30th September 2013

Data filters: Trusts In addition to the indicators above, there are other indicators which might be of relevance as well (infant and neonatal mortality - due to the emphasis of the national suicide prevention plan on the perinatal period) and quality of life of people living with three or more long term conditions (this is obtained from the health domain of the index of multiple deprivation, which contains data on mental health condition).

Appendix 6: CRIS Project Participating Trusts

- Avon and Wiltshire Mental Health Partnership NHS Trust
- Birmingham and Solihull Mental Health Foundation Trust
- Devon Partnership NHS Trust
- Kent and Medway NHS and Social Care Partnership Trust
- Mersey Care NHS Foundation Trust
- North East London Foundation Trust
- Nottinghamshire Healthcare NHS Foundation Trust
- Northumberland, Tyne and Wear NHS Foundation Trust
- Oxford Health NHS Foundation Trust
- Southern Health NHS Foundation Trust
- South West London and St George's Mental Health NHS Trust
- West London Mental Health NHS Trust

References

- Ministry of Housing, Communities and Local Government (2015). English Indices of Multiple Deprivation. Available at: <https://www.gov.uk/government/statistics/english-indices-of-deprivation-2015> (accessed 4 August 2019)
- Ministry of Justice and her Majesty's Prison and Probation Service (2019). Safety in Custody quarterly: update to March 2019. Available at : <https://www.gov.uk/government/statistics/safety-in-custody-quarterly-update-to-march-2019> (accessed 4 August 2019)
- NHSD (2016). Adult Psychiatric Morbidity Survey: Survey of Mental Health and Wellbeing, England, 2014. Available at: <https://digital.nhs.uk/data-and-information/publications/statistical/adult-psychiatric-morbidity-survey/adult-psychiatric-morbidity-survey-survey-of-mental-health-and-wellbeing-england-2014>(accessed 4 August 2019)
- NHSD (2019). Clinical Commissioning Group Outcomes Indicator Sets (CCG-OIS). Available at: <https://digital.nhs.uk/data-and-information/publications/ci-hub/ccg-outcomes-indicator-set> (accessed 2 August 2019).
- NHSD (2019). Mental Health Services Monthly Statistics. Available from: <https://digital.nhs.uk/data-and-information/publications/statistical/mental-health-services-monthly-statistics> (accessed 3 August 2019)
- NHSD (2019). NHS Outcomes Framework Indicators. Available at: <https://digital.nhs.uk/data-and-information/publications/clinical-indicators/nhs-outcomes-framework/current> (accessed 29 July 2019).
- ONS (2018). Estimating suicide among higher education students, England and Wales: Experimental Statistics. Available at: <https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/articles/estimating-suicide-among-higher-education-students-england-and-wales-experimental-statistics/2018-06-25> (accessed 4 August 2019)
- ONS (2017). Suicide by Occupation in England 2011-2015. Available at: <https://www.ons.gov.uk/releases/suicides-by-occupation-england-2011-to-2015> (accessed 6 August 2019)
- ONS (2017). Suicide: Extra Analysis. Available at: <https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/datasets/suicide-extra-analysis> (accessed 4 August 2019)
- ONS (2018). Suicides in the UK 2017. Available at: <https://www.ons.gov.uk/peoplepopulationandcommunity/birthsdeathsandmarriages/deaths/bulletins/suicides-in-the-united-kingdom/2018-registrations> (accessed 6 August 2019)
- Public Health England (2019). Suicide Prevention Profile. Available at: <https://fingertips.phe.org.uk/profile-group/mental-health/profile/suicide> (accessed 6 August 2019)
- Samaritans (2018). Samaritans Suicide Statistics Report. Available at: <https://www.samaritans.org/documents/18/samaritans-suicide-statistics-report-2018.pdf> (accessed 4 August 2019)
- Southwark Council. (2017). Suicide and Self Harm JSNA 2017. London: Southwark Council. Available at: <https://www.southwark.gov.uk/assets/attach/5714/JSNA-2017-Suicide-Self-Harm-20171130.pdf> (accessed 6 August 2019)