



Tees Suicide Prevention Strategic Plan 2024 - 2029

How we have developed this strategy in Teesside.

Using feedback from November 2023's suicide prevention awareness conference, supported from analysis of the real time surveillance data and following the framework set out by the national strategy, Teesside has, in collaboration, developed a local plan which sets out our key areas for action and how we aim to achieve our vision of reducing the rates of suicide.

The strategy has been developed with and endorsed by key local partners, organisations, services, and communities who contribute to suicide prevention, postvention and supporting vulnerable groups. Where possible and appropriate we have sought the voice of lived experience.



To contribute to a year-on-year reduction in local suicides within Teesside and ensure that those bereaved or affected by suicide receive the best available support.



Key area for action 1

Supporting practice through local data collection, research, and intelligence

- Utilise the Real Time Surveillance System to provide up to date trend analysis and identification, effective postvention support for bereaved families and communities, and support NECS in regional data collection and analysis
- Use real time data to identify multiple or linked suspected suicides (MOLSS) and work with local services and communities to prevent further deaths using MOLSS guidance (Appendix 3)
- Explore and develop existing attempted suicide data collection and analysis system with support from Cleveland Police.
- Support the regional and national 'near miss' data collection systems.
- Pilot VCSE data collection in Hartlepool to address gaps within data reporting for those individuals supported by the voluntary sector and not accessing statutory services at crisis point, with possible further roll out across Teesside
- Work with Teesside University to explore areas for research to support our ongoing plans and strategies and gain a better understanding of suicide rates in groups such as LGBTQIA+, refugees and asylum seekers, ethnic minority groups and people affected by domestic abuse




Key area for action 2

Provide tailored, targeted support to key priority groups

- Dynamic identification of Tees priority groups through ongoing local data analysis
- Work with the statutory, commissioned, and voluntary sector organisations who support the identified priority groups
- Aim to develop link with NEAS, ICB and Acute trusts to gain a better understanding of the rates and impacts of self-harm
- Aim to develop a post 16 education forum to link Teesside colleges together to support each other around death by suicide, attempts and suicidal behaviours as well as sharing good practice.
- Improve postvention pathways in schools/colleges to local support services and postvention providers
- Embed suicide prevention and wellbeing initiatives in workplaces, especially traditionally male dominated occupations, through engagement and training
- Continue close and effective partnership with TEWV mental health trust
- Work with police, probation, and prison services to seek continuing care for prison leavers and those in contact with the criminal justice system through the RECONNECT programme and Samaritans listening mentor programme
- Work with Job Centre plus and DWP to develop skills and training when working with those who are not in education, employment, or training and are at risk of suicidality
- Engage with older persons services to explore themes of loneliness, bereavement, and physical illness as triggers to suicidality

Key area for action 2

Provide tailored, targeted support to key priority groups



Through real time surveillance demographic and needs analysis, in Teesside we have identified the need for a more focused support approach for the following key priority groups;

- children and young people
- middle-aged men
- people who have self-harmed
- people in contact with mental health services
- people in contact with the justice system
- people diagnosed with autism
- pregnant women and new mothers
- Over 65 age group
- Those not in Education, Employment or Training


Key area for action 3

Identifying and addressing common risk factors linked to suicide

- Engage with GPs to ensure mental health is considered alongside physical health and that suicide risk associated with long term physical ill health is acknowledged in the patient pathway. Recognising many groups, such as middle-aged men, are more likely to present with a physical problem when they are struggling with mental health
- Continue to improve access and signposting to debt management and support and ensure those supporting organisations identify opportunities to review and strengthen its guidance for staff to support customers that disclose that they are experiencing suicidal thoughts or feelings, with training to support staff to do this and with consideration to the role of financial difficulty
- Work with clinicians and support staff working in alcohol treatment services on identifying and managing immediate risk of suicide or self-harm in the upcoming UK clinical guidelines for alcohol treatment
- Encouraging suicide and mental health helplines to signpost interventions that tackle loneliness and prioritise community-based schemes that tackle loneliness within national signposting tools through social prescribers.
- Further develop work with Cleveland police and VCSE organisations to explore the link between domestic abuse and suicide to establish more robust and timely support.
- Work closely with drug and alcohol leads to tackle the link between drug and alcohol use and suicide. Using data systems to identify drug or alcohol use in recent deaths can help us identify areas of specific need and further work
- Work with OHID gambling harms team to identify and progress joint work in this area

Key area for action 3

Identifying and addressing common risk factors linked to suicide



The wider determinants of health such as housing, poverty, education, employment etc have shown to have a significant impact on mental health and ultimately suicide risk, however the national strategy identified some, although not all, specific factors that lead to increased risk.

These are;

- physical illness
- financial difficulty and economic adversity
- harmful gambling
- substance misuse
- domestic abuse
- social isolation and loneliness

Key area for action 4

Promoting online safety and responsible media content



- Promote the use of the Samaritan's media guidelines for reporting suicide and self-harm
- Work with local authority comms to ensure all internal and external correspondence meets standards
- Promote positive promotional materials that
 - encourage help-seeking behaviour;
 - encourage support, understanding and recognition of those at risk
 - Promote access to services offering support
- Continuing to support the internet industry to remove content that encourages suicide and provide ready access to suicide prevention services
- Offer support to schools to deliver training to students around media/online safety via Tees training hub

Key area for action 5

Identifying and supporting crisis pathways across sectors

- Continue working with TEWV to ensure pathways between services and sectors are stronger, and uphold a person-centred, joined-up approach to crisis prevention and response, including through timely follow-up and aftercare processes
- Using local data to ensure areas of high frequency used by people in crisis are managed correctly including increasing CCTV, footfall, signage etc to increase the opportunity for intervention
- Support and promote local directory of services so people are able to access crisis support in the most appropriate environment for them, when they need it, whether that is through statutory health, VCSE or social care services
- Encourage local and regional collaboration to ensure pathways between services and sectors are stronger, and uphold a person-centred, joined-up approach to crisis prevention and response, including through timely follow-up and aftercare processes

Key area for action 6

Reducing access to the means and methods of suicide

- Identify local high frequency locations through real time surveillance and attempted suicide data system to ensure effective and timely responses to safety in those locations
- Continue working with Teesside Samaritans to audit locations and signage
- Continue to engage with Network Rail and Samaritans to reduce deaths on the rail network and expand current working group to include all rail bridges in Teesside
- Engage with local planning departments, architects, and design consultants to ensure we are encouraging suicide safety considerations in all levels of town planning
- Work with local authorities, police and VCSE organisations to explore collaborative work in areas of high frequency or high risk
- Develop a Tees River and bridges pilot project in conjunction with Cleveland Fire and Rescue and local voluntary organisations.

Key area for action 7

Providing effective bereavement support to those affected by suicide

- Manage performance of local support services for those bereaved or affected by suicide including commissioned and voluntary services
- Provide information of local, regional, and national services/resources for those bereaved or affected by suicide
- Work with Cleveland police on their development of sudden and traumatic death signposting resource for use 'on scene'
- Continue to use RTS to provide postvention support to families and communities bereaved by suicide
- Effectively and sensitively manage shrines and memorials to ensure public places do not become areas synonymous with suicidal behaviour
- Engage with lived experience groups to ensure available bereavement support, both commissioned and through the voluntary sector, is comprehensive and varied to account for the differences in the way people grieve

Key area for action 8

Making suicide everybody's business

- Improving skills and knowledge by encouraging training such as ASK, ASSIST and Mental Health first aid through the Tees training hub and via our VCSE organisation and online training provided by Samaritans, zero suicide alliance and papyrus.
- Encourage and enable conversation around suicide and mental health to help reduce the stigma around the subjects
- Engage with workplaces, social groups, vcse organisations and others to facilitate constructive conversations and empower people to check in on their friends, colleagues, and those around them.
- Work with the regions large employers to raise awareness of suicide in sectors such as routine and manual workers, health care staff and agricultural workers



The strategic plan includes;

- Children and young people appendix inc. School support offer
- Public health high frequency location guidance
- Multiple or linked suspected suicide guidance

The governance structure that supports this strategy is;

