

Committee	Dated:
Health and Wellbeing Board	16/09/2022
Subject: Suicide prevention in the City of London Annual Update	Public
Which outcomes in the City Corporation's Corporate Plan does this proposal aim to impact directly?	1,2,12
Does this proposal require extra revenue and/or capital spending?	N
If so, how much?	£
What is the source of Funding?	
Has this Funding Source been agreed with the Chamberlain's Department?	N/A
Report of: Sandra Husbands, Director of Public Health	For Information
Report author: Claire Giraud, Senior Public Health Practitioner	

Summary

In 2017, the City of London Corporation established a multi-agency suicide prevention group, in accordance with best practice recommendations, and published a Suicide Prevention Action Plan containing numerous initiatives aimed at reducing the number of suicides in the Square Mile. This report provides an update on the suicide prevention action plan as well as on the number of attempted suicides and suicides occurring in the City of London.

Suicide figures for the City should be interpreted with caution, as they are extremely low – this means that any variations may not be statistically significant (i.e. the figures may be due to chance fluctuation); and additionally, recording practices have changed during the reporting period, which may impact upon the figures.

Recommendations

Members of the Committee are asked to:

- Note the progress made on the Suicide Prevention Action Plan
- Note the most recent data for suicide in the City of London

Main report

Background

1. Suicide is the act of intentionally ending one's own life. It is often the end result following a complex range of risk factors, mental illness and significant negative life events; however suicide is preventable, rather than an inevitable event. In the UK, suicide is one of the most common causes of death in people under the age of 50, with 5,691 reported people dying in this way in 2019. It is estimated that each suicide further impacts between 6 and 60 people. Within the UK, suicide shows significant gender and social inequalities, and is associated with stigma for families affected by it.
2. Over the last 8 years, a number of key policies and reports have been published to improve suicide prevention nationally and locally. In the City, a local audit, suicide prevention action plan and multi-agency suicide prevention group was established in accordance with best practice recommendations.
3. Public Health England (PHE) recommended several priority action areas to include in local suicide prevention plans:
 - Reducing risk of suicide in men
 - Preventing and responding to self-harm
 - Mental health of children and young people
 - Treatment of depression in primary care
 - Acute mental health care
 - Reduce suicides at known 'high risk' locations
 - Reducing isolation
 - Bereavement support for those affected by suicide

Overview for the City of London

4. Between 1st of April 2021 to 2nd of September 2022, there has been less than 5 suicides, with a total of 193 attempted suicides.
5. Between 1st of April 2021 to 2nd of September 2022, there had been a total of 186 incidents whereby the subject had contemplated suicide or had suicidal

thoughts.¹

6. The Mental Health Street Triage responded to 496 incidents that were potential incarcerations under section 136 from March 2021 to 31st of July 2022. As a result, an estimated 78% of S136 detentions were avoided. From October 3 2022, the new longer core hours of the service 3pm to 3 am will start.

Emerging Trends throughout 2021

Timing and Location

7. Data from the City of London refers to events occurring within its geographic area. The majority of incidents will therefore involve individuals resident elsewhere in London and the country.
8. Over 60% of the attempted suicides occurred during the night and the peak days were Wednesday, Saturday and Sunday. It would appear that there was an increase of attempted suicides during March, June, July and October 2021.
9. Bridges remain the most common location type for suicide attempts within the City, with 87% attempted suicides occurring on bridges. The second most common location was on the street (7%).
10. The qualitative analysis shows that 37% of individuals had a direct journey from their home address to the incident location, meaning it only required one mode of transport and one direct route.
11. The analysis also demonstrated that two of the individuals stated they worked in the City; however for 93% of individuals this was either not known or not recorded.

Demographics at the end of 2021

12. Data from the City of London Police is provided in the table below, and covers the period subsequent to the previous City Suicide Prevention Annual Report in 2021. The data covers both completed and attempted suicides. Please note that the most recent data from the coroner was not available for this report.
13. **Age range:** Unlike in 2018, in 2019, 2020 and 2021 there was a mixed aged range (between 13 and 78), highlighting that there is not a particular age group at risk.
14. **Gender:** Males represented 56% of attempted suicides, females represented 43% and trans represented 1%.
15. **Home Address:** The majority of individuals travelled into the City from their home address where suicide was completed or attempted.

¹ We have yet to achieve consensus on the definitions of these terms, creating a challenge for interpreting these data. The City of London suicide prevention steering group have identified this as an issue and aim to achieve consistency in future.

Summary for Period January 2020- 2 September 2022

Month	Attempt			Contemplating			Complete suicide		
	2020	2021	2022 to date	2020	2021	2022 to date	2020	2021	2022 to date
Jan	6	< 5	8	5	< 5	9	0	< 5	0
Feb	7	< 5	7	7	7	7	0	0	0
Mar	< 5	16	7	5	< 5	14	0	0	0
Apr	11	9	6	< 5	9	5	0	< 5	0
May	8	11	8	< 5	9	10	< 5	0	0
Jun	7	17	13	< 5	19	16	0	< 5	0
Jul	8	17	13	7	15	11	0	0	0
Aug	12	12	18	7	9	16	0	0	0
Sept	9	10	<5	7	15	0	0	< 5	0
Oct	11	13		6	6		0	< 5	
Nov	< 5	11		< 5	11		0	0	
Dec	10	11		5	12		< 5	0	
Total	98	127	>80	56	119	88			

*data up to September 2nd 2022

16. Increases in suicide rate are associated with periods of economic and political uncertainty.² This could explain why the City of London saw a corresponding rise in 2021. However, the impact of national lockdowns may hide the true extent of the issue and we must remain alert to the possibility of unusual levels of activities in the medium to long term. Alongside our immediate response to incidents in the City of London, a preventive approach that recognises the social and economic challenges of the pandemic has been captured by the refreshed suicide action plan.

² De Bruin et al, 2019. *New insights on suicide: uncertainty and political conditions*. Applied Economic Letters. doi.org/10.1080/13504851.2019.1686453

Action Plan Progress Summary

17. Overall, 61 actions have commenced since the launch of the action plan, of which 10 are completed, 51 are in progress.
18. Following a review of the action plan by the Suicide Prevention Steering Group in early 2022, a refresh of the plan has retained the majority of previous actions as they remain relevant to long term prevention efforts. Given the changing context post-pandemic, 8 new actions have been added to the plan and commenced.
19. Some of the new actions added to the plan since the last annual update include:
 - The children and young people's bereavement service at St Joseph's hospice.
 - A study by the University College London on the pattern of movement of suicidal people which should hopefully help us determine why people come to the Square Mile to make attempts.
 - CoLp is exploring the possibility of a network of safe places in the City to take people in mental health crisis.
20. Significant milestones include:
 - Training in Suicide Awareness and Prevention of City workers through the Business Healthy network still sees high uptake, with 126 people trained in the last 3 years, an additional 4 sessions are planned for 2022-23 to empower even more City workers to be the eye and ears of the emergency services.
 - The planning guidance note advising on how to mitigate suicide risk in high location was adopted in June 2022 by the Planning and Transportation committee. The CoL is the second local authority in Great Britain to adopt such guidance and numerous other boroughs in London are wanting to adapt the COL planning guidance note for their area. Planning officers are now requiring developers to demonstrate how suicide prevention has been integrated into the design of new development and how risks are being mitigated. Additional training for planning officers on suicide risk mitigation is currently being developed by the Public Health Team and Environmental Health officers.
 - The Secure City Programme's Vulnerable People workstream, which looks at technological solutions to improve spatial awareness in high risk locations, has made good progress with several solutions commissioned for field trials, this project once again puts the CoL ahead of many other areas in terms of innovation in keeping its residents and visitors safe.

RAG Status Key and Summary

Status of Actions	
Major Problems	0
Minor Problems	6
In Progress/ongoing	44
Completed	10

21. The majority of actions are green, either underway or on track to deliver. One action that has progressed but with delay (thus is amber) is mobilising the Bridge Watch programme patrols by summer 2022. The process to secure funding is taking longer than expected, but several programme development meetings have taken place and both charities leading the project (Royal National Lifeboat institute and Ascension Trust, as well as partner organisations such as Port of London, beachy heads chaplaincy, etc) are working hard to stand everything up should funding be granted.

22. No actions have failed to progress as originally envisaged (aka Red rating)

Conclusion and Recommendations

23. The past year has seen significant progress in the area of suicide prevention across the Corporation and its partners. The action plan has moved forward since its review, new actions have been added and many of the older actions are either complete or in progress.

Appendices

Appendix 1 – Suicide Prevention Action Plan for 2022–25

Report Authors

Claire Giraud

Public Health Senior Practitioner, City of London and Hackney Public Health Team

Andrew Trathen

Consultant in Public Health, City of London and Hackney Public Health Team

Contact: claire.giraud@hackney.gov.uk