

## Winter Members Meeting Minutes 2019

Date	6 <sup>th</sup> February 2019	Time	10 am – 12 noon	Venue	CALM Offices Elizabeth House, 39 York Road, London, SE1 7NQ
Attending	Sarah Bates, Hamish Elvidge, Holly Tolson, Saira Waheed, Fergus Crow, Nafeesa Zulfiqar, Carolyn Bryce, Ann Culley, Anne Embury, Penn from OSW, Adrienne Grove, Karen Lascelles, David Mosse, Richard Brown, Helen Garnham, Steve Mallen, Jason Corbett, Karen Harvey				
Guests	Barney Thorne, Constance Wou				

Item	Description	Lead(s)	Papers	Time
1	Welcome and update NHS funding, coroner's court, guidelines	Hamish	Presentation	10 mins
2	Talk: NHS England	Dr. Constance Wou	Talk	20 mins
3	Outcomes from the Central Hub report	Sarah	Presentation	15 mins
4	Direction of the SASP with time for discussion	Sarah	Verbal	30 mins
5	Talk: Real Time Data in Leicestershire Police	Barney Thorne	Talk	20 mins
6	Developing membership	Holly	Verbal	10 mins
7	Members' Updates	Sarah	Verbal	15 mins
8	AOB	Sarah	Verbal	5 mins

*A list of the attendees can be found at the end of the minutes.*

### 1. Welcome and Update

Hamish welcomed the group and each member introduced themselves. Hamish updated the members on the activities of the SASP since our last meeting, including:

- Our work with NHSE on identifying pilot areas and on the Long Term Plan to implement suicide bereavement support in every area of the country
- Our developing relationship with the Chief Coroner's Office and our input on their updated Guide to Coroners Services
- Our development of a Central Hub of resources, information, and support

Hamish outlined the course of the meeting and invited the members to offer their thoughts and feedback at each stage, emphasising they are at the core of the SASP.

### 2. Talk: Dr. Constance Wou; NHS England, National Medical Director's Clinical Fellow

Constance presented the 5 year plan to reduce suicide, outlining the NHS's goal for a 10% reduction in suicide rates by 2020/2021, supported by a £25 million investment. The NHSE plan to ensure:

- All local areas will have active suicide prevention plans by March 2019, which include a multi-agency approach
- A local and national zero suicide ambition, including a focus on culture diversity and 'preventable' suicides.
- zero suicide in mental health patients across the UK
- Groups considered high risk, such as men, those with mental health difficulties, and those who self-harm, will receive additional support from 2019/2020

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- The development of the National Quality Improvement Programme, which will work with NCISH to provide bespoke data for STPs and knowledge to reduce suicide rates, and deliver templates for safeguarding

Constance also outlined NHSE's work with the SASP on identifying around 10 areas of the UK to receive funding in a pilot scheme to provide proactive suicide bereavement support, improving the quality of mental health support.

Finally, she presented on the wider Long Term Plan, including suicide reduction through a focus on children and young people, improved access to appropriate mental health support, post-crisis (through NHS 111) and bereavement support across the UK. To support this, a 1-year transitional operational plan for local areas is being developed, as is a National implementation framework on how to implement 5-year plan.

The floor was opened for questions, and the group discussed the funding around plans, the system as it stands, the role of education, the need for evidence based interventions, and intentions for suicide prevention from Health Education England.

### 3. Outcomes from the Central Hub report

Sarah presented a summary of the findings of the central hub report, put together by Meadows Communications. The report recommended:

- The hub exists to provide quality evidence, best practice guidance and professional support for all those involved in planning and delivering suicide bereavement and liaison services
- The Hub's target audiences are commissioners, service providers, first responders and those that have the opportunity for early contact making.
- The Central Hub will sit within the SASP, with a 'Hub Manager' role created.
- The Hub should be developed in phases, phase 1 should commence as soon as possible and involve the development of minimum standards, and a packet of support for new services.

A copy of the report accompanies these minutes.

There was general agreement with the recommendations. It was further agreed that the Central Hub will be helpful, and very welcome. Sustainability was discussed, including how long the Central Hub might run for. The need for the Hub to be dynamic and responsive to developments in the field, and the need for key partnership building were highlighted.

Sarah asked the group to comment on the following, including the group's feedback:

*Q: Are there elements of the Central Hub we have missed and could develop further?*

F: It may be helpful for the Central Hub to consider education of a wider community, to increase understanding. It was acknowledged this should come after facilitating proactive support for people bereaved.

*Q: How will the Central Hub represent its brand publically?*

F: The Hub will be public facing primarily online, and the Support after Suicide Partnership website will continue to offer support and information.

*Q: Is there any capacity to support multiple needs, such as drug abuse and bereavement by suicide?*

The SASP has relationships with organisations such as DrugFam, and we will continue to signpost to these sources of support. The SASP will consider developing relationships with other organisations, such as gambling help and debt services, and would signpost to their support.

*Q: The legal process is often very difficult for families, is there capacity for support for this through the Central Hub?*

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We plan to develop strong partnerships with INQUEST, the Chief Coroner's Office, and the Coroners Court Support Service. We will continue to develop our relationships with Funeral Directors.

*Q: (from members): How is SASP and the Central Hub (and will be) funded going forward?*

F: (Sarah): the SASP is funded by CALM, JWSMT, Matthew Elvidge Trust, Monument Trust, the Esmee Fairburn Trust, and NHSE. Going forward we will continue to look for further funding sources.

*Q: (from members): will the SASP have a media presence?*

F: Currently Communications come through CALM's Comms team and our social media presence. We are working with Hanover Communications and Meadows Communications to develop a communications plan going forward.

### 4. Direction of the SASP

This discussion was integrated into item 3, and so has been entered into the minutes as one item.

### 5. Talk: Real Time Data in Leicestershire Police

Barney Thorne, Suicide Prevention Lead for Leicestershire Police, spoke about the development of Real Time Data in Leicestershire, through the Police and local partnerships. The project was initiated by Public Health England and in response to local need. There were some challenges at the outset around ensuring accuracy, compliance, extra workload, and which partner agencies to involve. It was agreed the data should record;

- Area where death happened
- Method of suicide attempt
- Date of the suicide attempt
- Dated of death
- Age, Gender and other demographics of the deceased

This data is recorded by the case officer, and data is then collated to form a picture of suicide activity in the area.

The system has proven to be very helpful in identifying area trends, and to highlight groups of people who may be at higher risk. It has facilitated Leicestershire Police to develop key relationships in response to trends, for example with Islamic faith leaders following a cluster of deaths of young Muslim men, in 2014.

To date, many local services have been contacted by Leicestershire Police to support people, including GPs, local services, Public Health, and Local Authorities. The partnerships have led to the development of a partnership pathway and processes for how to respond to a suicide. These connections have further facilitated a campaign of suicide prevention to raise awareness around roadways in Leicestershire.

The talk was well received and the group discussed the challenges and successes around the project. They discussed data collection from hospitals for deaths in hospital, and for information pathways for children involving schools.

### 6. Developing Membership

As the SASP expands its membership and work, we have reviewed the Membership process, journey, and our mutual commitments of members and the SASP to each other. Holly took the group through these updates, including the new Membership Agreement (Found in Appendix 2 – Membership Agreement).

The general consensus is that formalisation is welcome, and the members are happy to sign a more formal agreement. This will be actioned by Holly, by the end of March 2019.

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The Members raised whether the new agreement would incur a membership fee, which it will not.

### 7. Members' Updates

This item was postponed, and Holly will send a request for information for a news bulletin in March

### 8. Any Other Business

There was no other business and so the meeting was brought to a conclusion, and closed.

#### List of attendees

Hamish Elvidge- (SASP Chair) The Matthew Elvidge Trust

Sarah Bates- Support After Suicide Partnership (SASP)

Saira Waheed- SASP (minute taker)

Holly Tolson- SASP

Steve Mallen- Bereaved parent and MindED Trust

Carolyn Brice- The Compassionate Friends

Fergus Crow- Winston's Wish

Terry Tennans- National Society of Allied and Independent Funeral Directors (SAIF)

Anne Embury- Outlook South West

Anna De Silva- Suicide Support Officer

Penn Petchy - Outlook South West

Ann Culley- Survivors of Bereavement by Suicide (SOBS)

Katie Kohler- Child Bereavement UK (CBUK)

Richard Brown- Listening Ear/AMPARO

Nafeesa Zulfiqar- James' Place

Adrienne Grove- TASC, The Tomorrow Project, The Hope Project

Karen Lascelles- Oxford Health NHS Foundation Trust

David Mosse- Bereaved parent and chair of Mind in Haringey

Helen Garnham- Public Health England

Jason Corbett – If U Care Share

Karen Harvey- Samaritans

Constance Wou - (guest speaker) Mental Health Team NHS England

Barney Thorne- (guest speaker) Leicestershire Police

Halani Foulsham- SOBS

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