

Suicide Prevention Task Group

Monday 3rd March

14.00 – 16.00

HAS Conference Room, NYCC County Hall

Present:

Louise Barker – Vale of York CCG **(LBa)**

Abigail Barron – Delivery and Implementation Manager, Hambleton, Richmondshire and Whitby CCG **(AB)**

Lisa Brain – Partnership Intelligence Analyst, North Yorkshire Police **(LBr)**

John Clare – Partnership Commissioning Unit **(JC)**

Denise Colmer – TEWV NHS Foundation Trust **(DC)**

Dallas Frank – Safeguarding Children Board Manager, NYCC **(DF)**

Victoria Marshall – Projects Assistant, NYCC **(VM)**

Shane Mullen – Public Health Intelligence Specialist, NYCC **(SM)**

Kevin Pratt – Leeds and York Partnership NHS Trust **(KP)**

Claire Robinson – Health Improvement Manager, NYCC **(CR)**

Bill Scott – North Yorkshire Police **(BS)**

Apologies:

Sally Anderson – Safeguarding Adults Policy Officer, NYCC

Rachael Foxevans – Ryedale District Council

Susanne James – Coroner's Office, North Yorkshire Police

Alan Jenks -

Harvey Morgan – TEWV Crisis Team

Heather Pearson – North Yorkshire Police

1. Welcome and introductions

Welcome and introductions were given around the room.

2. Minutes and matters arising

The minutes from the previous meeting were agreed. Issues surrounding capacity were briefly discussed.

Action: CR to circulate CCG data.

The group discussed drug-related deaths and how data is co-ordinated in North Yorkshire. CR confirmed that the suicide prevention strategy/plan will sit under the wider mental health work being undertaken within Public Health, and would feed into both safeguarding and the Health and Wellbeing Board.

Action: CR to chase suicide audit in York

Action: DF to share relevant children and young people's suicide audit information covering the last three years

DC outlined that in TEWV they established the baseline and subsequently monitored activity levels, and it was agreed that the NYCC data needs to be collated to establish a baseline. The importance of building a good relationship with the coroner was also underlined.

3. Actions (identify leads for each area and develop an action plan/timeframe)

- a. Meeting with coroner's office – data sharing agreement**
- b. Co-ordinator post**
- c. Data in terms of need**
- d. Pathways**
- e. Training for frontline staff**
- f. Gaps in provision**
- g. Developing strategy and implementation plan**
- h. Timescales for implementation**

The next coroner's meeting is in May and Heather Pearson is to attend and raise the data sharing protocols in relation to the suicide prevention task group.

Action: DC to forward data sharing agreement to CR

JC agreed to pursue the co-ordinator post. In TEWV there is a band 7 and a band 4 post. It was highlighted that in order to support the posts, the CCGs would need to understand the outcomes.

Action: DC to share job role/descriptions for both bands

Regarding the project plan, the first stage is to look at the data and establish the audit tool. It was suggested that the group consider the CSIP (Care Services Improvement Partnership) national audit tool as a baseline. The importance of establishing data sharing agreements between various agencies was underlined. BS has spoken with Deputy Chief Constable Tim Madgwick, who recognises that at present data sharing is either all or nothing, and a balance needs to be reached. Everyone has agreed in principle that they need to share data, but the group acknowledged that issues relating to audit trails, accountability and assurances of how the data will be used need to be addressed.

Action: DC to forward data sharing agreement to CR

A query was raised regarding where the suicide prevention work sits in relation to the adult safeguarding board, as it sounds like a multi-agency audit is required. CR confirmed that it was previously decided that the group/work sits outside the board.

Action: CR to raise the involvement of the adult safeguarding board

The group agreed that a lot of the required work can't move forward until the co-ordinator is in post. The group also agreed that it is important to focus on prevention, specifically better communication with people and making information re access to services more widely available. In line with prevention, self-harm would need to be looked at.

Re training, the group discussed the provision of training for frontline staff once a need has been identified, with a multi-agency group to co-ordinate the training.

The need for a map of services currently available was underlined.

Action: CR to map public health/social care services and circulate template for completion.

The group discussed ASIST (Applied Suicide Intervention Skills Training), a two day suicide prevention training course. There is a range of providers, but it can be costly to get trained.

Action: DF to talk to CYPS workforce development to see if any of their budget could be put towards training

It was suggested that Mental Health First Aid is considered as part of the wider mental health work as it was well-received.

Action DC to forward audit tool to SM

The group discussed DC's role in more detail. She has become more involved with/known to the third sector. With the post there must be the capacity for data collection but also networking.

No date was set for the next meeting, and will be scheduled once the co-ordinator post has been confirmed.

Action: AB/LBa to raise co-ordinator post with their CCGs

Action: SM to send data to LBa/AB