



Cheshire & Merseyside Suicide and Self-harm Prevention Action Plan

2023-2027



Cheshire & Merseyside Suicide and Self-harm Prevention Action Plan 2023 – 2027

The purpose of this action plan is to provide a multi-agency framework for action across the life-course to prevent avoidable loss of life through suicide. It draws on local experience research and evidence, aiming to prevent suicide and promote mental health and wellbeing in Cheshire and Merseyside. This action plan will also consider self-harm in relation to suicide risk, recognising that the relationship between the two is complex. We know that many people who die by suicide have a history of self-harm, and we know that self-harm is a significant concern in its own right.

The Cheshire and Merseyside Suicide Prevention Partnership Board will ensure that there is a co-ordinated and integrated multi-agency agreement on the delivery of this action plan, which aims to contribute to a reduction in the numbers of people that take their own life by suicide and to improve the emotional health and wellbeing of our most vulnerable groups. The action plan will support the delivery of the strategy's mission which is to:

- Build individual and community resilience to improve lives and prevent people falling into crisis by tackling the risk factors for suicide.
- Support people who experience a time of personal crisis.
- Create an environment where anyone who needs help knows where to get it and feel able to access that help.
- Continue our commitment to build suicide safer communities in Cheshire and Merseyside.
- Tackle the underlying risk factors for suicide.

The partnership activity outlined in this action plan will complement and support delivery of the over-arching Cheshire and Merseyside Suicide Prevention Strategy (2022-2027), focussing on the following key priorities:

- **Leadership and governance:** ensuring an effective partnership and collaborative approach taking account of lived experience;
- **Prevention:** focussing on awareness, skills, and knowledge, supporting suicide prevention in other strategies, communication and engagement;
- **Intervention:** focussing on training and safety planning across the organisations, working to improve self-harm support and pathways, improving access to mental health and social support, and ensuring implementation of safer care;
- **Postvention:** focussing on bereavement services including specific suicide, postvention support and working with the media;
- **Data, intelligence, evidence, and research:** focussing on better data capture of the risks and intelligence on the local and national picture, collating evidence on interventions that work and supporting research where there are known gaps.



Prevention strategy priorities	Leadership	Prevention	Intervention	Postvention	Data, intelligence, evidence and research
	<p>Effective collaborative suicide prevention partnership</p> <p>Continue actions as a Suicide Safer Community</p> <p>Feedback on action to the Mental Health Oversight Board and Directors of Public Health</p> <p>Support local strategies and plans</p> <p>Audit of local plans against Cheshire and Merseyside priorities</p>	<p>Increase awareness of risks of suicides across the life-course, especially linking with newly identified risks</p> <p>Improve mental health and resilience in children and young people, men and older people by linking to local plans and wider strategies</p> <p>Improve suicide prevention skills and knowledge</p> <p>Develop an effective communications and engagement strategy</p>	<p>Increase suicide prevention training and safety planning in key work groups linked to priorities</p> <p>Improve self-harm support and implement National Institute for Health and Care Excellence (NICE) self-harm guidance</p> <p>Improve crisis care for all ages</p> <p>Continue to improve and implement Safer Care Standards</p> <p>Improve access to social and mental health support for all ages</p>	<p>Improve effective suicide bereavement support for all ages</p> <p>Ensure effective postvention services across Cheshire and Merseyside</p> <p>Ensure deaths by suicide are addressed sensitively in the media</p>	<p>Improve the data sets collated by real-time surveillance and examine capacity to undertake a suicide audit for Cheshire and Merseyside</p> <p>Understand different methods of suicide and highlight issues</p> <p>Use the data to inform community response plans</p> <p>Develop an overarching suicide prevention dashboard to monitor progress of the plan</p>

Ref.	1. LEADERSHIP PRIORITIES	Action(s)	Lead(s)	Timeframe	Success measures / Outcomes / Milestones
1.1	Effective collaborative suicide prevention partnership.	<ul style="list-style-type: none"> • To ensure the Cheshire and Merseyside (C&M) Suicide Prevention Partnership Board is effective by: <ul style="list-style-type: none"> ○ Delivering on the action plan. ○ Reviewing performance against the plan. ○ Revisiting the C&M suicide prevention strategy in-line with the new national suicide prevention plan. ○ Highlighting new and emerging themes and actions required. ○ Reviewing the partnership approach to actions. ○ Oversight and feedback on place-based meetings and actions. • Lived Experience Network (LEN) voice is visible throughout action plans and new initiatives. 	<p>Champs Support Team and lead Director of Public Health.</p> <p>Wirral MIND co-ordinating organisations.</p>	<p>Throughout the life of the strategy.</p> <p>Throughout the life of the strategy.</p>	<p>Overall suicide rate for C&M reducing from the 2019/21 rate.</p> <p>Emergency admissions for self-harm are reducing in all 9 local places.</p> <p>3 Suicide Prevention Partnership Board meetings per year and % of organisations present is monitored.</p> <p>Placed-based suicide prevention meetings are monitored.</p> <p>LEN representation across C&M i.e., number of members, gender, borough mix, experience mix - influencing placed base work.</p> <p>Number of programmes influenced by LEN (case</p>



		<ul style="list-style-type: none"> • Bi-monthly Mental Health Programme meetings are held. • Provide advice and guidance on local place action plan implementation. • Development of our wider partnership including Police and Crime Commissioners and System Quality Group (Integrated Care Board (ICB)) and with Domestic Abuse leads and Community Safety Partnerships (CSP). 	<p>Champs Support Team.</p> <p>Champs Support Team.</p> <p>Champs Support Team.</p>	<p>Bi-monthly.</p> <p>Throughout the life of the strategy.</p> <p>Throughout the life of the strategy.</p>	<p>studies with LEN influence are captured).</p> <p>Meetings completed / alignment of Mental Health, Mental Health & Wellbeing, Suicide Prevention / Suicide Bereavement work and evolving governance arrangements for these work areas, are monitored and recorded.</p> <p>Local place plans are refreshed and dynamic in nature.</p> <p>Domestic Abuse partnership established, CSP partnership established, System Quality Group (ICB) partnership established.</p>
1.2	Continue actions as a Suicide Safer Community.	<ul style="list-style-type: none"> • Audit against the standards at an agreed frequency so we can determine if any action is required. • Promote training available. 	<p>Champs Support Team and Mental Health Trusts.</p> <p>Champs Support Team.</p>	<p>2025-2027.</p> <p>Throughout the life of the strategy.</p>	<p>Audit and review is completed and recorded.</p>



					<p>Number of clicks on website for training framework.</p> <p>Number of communications to promote training.</p> <p>Feedback from local places and other networks on training.</p>
1.3	<p>Feedback on action to the Mental Health Programme Board, Directors of Public Health, and the Population Health Board, Office for Health Improvement and Disparities (OHID), ICB relevant boards / groups.</p>	<ul style="list-style-type: none"> Provide quarterly updates on the action plan, performance and risks associated with the action plan. 	<p>Champs Support Team.</p>	<p>Quarterly throughout the life of the strategy or at an agreed frequency.</p>	<p>Updates received.</p> <p>Comments addressed.</p> <p>Case study on influence.</p> <p>Reports.</p> <p>Presentations.</p>
1.4	<p>Support local strategies and plans.</p>	<ul style="list-style-type: none"> Have an effective support network for local suicide prevention leads. Learning panels are used to support local action and initiatives across C&M. Offer support to local places for their Suicide Prevention groups / locally led initiatives/workshops for local action plan implementation. 	<p>Champs Support Team and Local Place Leads.</p> <p>Champs Support Team and Local Place Leads.</p> <p>Champs Support Team.</p>	<p>Monthly meeting for LASP leads.</p> <p>Bi-monthly Learning Panel meetings.</p> <p>Throughout the life of the strategy.</p>	<p>Number of local place action plans updated.</p> <p>Learning panel case study of action.</p> <p>Record the number and type of local place support sessions and activities provided.</p>

		<ul style="list-style-type: none"> Develop a new C&M Community Response Plan. 	Champs Support Team and Local Place Leads.	2023/24.	A new Community Response Plan is in place.
1.5	Audit of local plans against C&M priorities.	<ul style="list-style-type: none"> Audit action plans against C&M Strategy. 	Champs Support Team and Local Place leads.	2024-2025.	Audit record completed.



Ref.	2. PREVENTION PRIORITIES	Action(s)	Lead(s)	Timeframe	Success measures / Outcomes / Milestones
2.1	Increase awareness of risks of suicides across the life-course, especially linking with newly identified risks.	<ul style="list-style-type: none"> Develop a network to explore the links with Domestic Abuse and suicide risk to highlight the issues and actions to mitigate risks. Champs Support Team to share good practice, highlight current issues, identify funding and commissioning opportunities, and support collaborative work. 	<p>Champs support Team.</p> <p>Champs support Team.</p>	<p>2023/24.</p> <p>Throughout the life of the strategy.</p>	<p>Network established. Case study of actions. New funding and collaborations developed throughout the life of the strategy.</p> <p>Case study of actions.</p>
2.2	Improve mental health and resilience in children and young people (C&YP), men, and older people by linking to local plans and wider strategies.	<ul style="list-style-type: none"> Review of C&YP self-harm practice guides and where appropriate implement changes. Undertake a pilot on safety planning for C&YP in education settings. Develop self-harm practice guide for adults including the specific issues relating to older people. Support for Liverpool John Moores University Multimodal Approach to Preventing Suicide in Schools (MAPSS) 	<p>Champs Support Team/Beyond Programme.</p> <p>Beyond Programme.</p> <p>Mental Health Programme.</p> <p>Champs Support Team.</p>	<p>2023/24.</p> <p>2023/24.</p> <p>2024/25.</p> <p>2023/24.</p>	<p>C&YP self-harm practice guide review complete.</p> <p>C&YP safety planning guidance for education settings developed for testing across C&M.</p> <p>Adult self-harm practice guide is in circulation and reviewed for implementation.</p> <p>Pilot is complete and full evaluation undertaken.</p>



		<p>research pilot supporting suicide prevention in schools.</p> <ul style="list-style-type: none"> • Review male access to services to improve wellbeing. • Review older peoples access to mental wellbeing services. • Promote the Hub of Hope app. • Better mental health concordat action plan delivery and performance management. 	<p>Local Place based leads.</p> <p>Local Place based leads.</p> <p>Suicide Prevention Network.</p> <p>Champs Support Team.</p>	<p>2024/25.</p> <p>2024/25.</p> <p>Throughout the life of the strategy.</p> <p>Throughout the life of the strategy.</p>	<p>Number of males accessing services to improve mental wellbeing.</p> <p>Number of older people and men accessing core services.</p> <p>Number of services by type registered with the Hub of Hope across C&M.</p> <p>Mental health concordat performance framework is complete, performance monitored and reporting on performance provided to the Mental Health Programme Board.</p>
2.3	Improve self-harm and suicide prevention skills and knowledge.	<ul style="list-style-type: none"> • Promote training self-harm training available. • Training framework is annually checked. 	<p>Champs Support Team.</p> <p>Champs Support Team.</p>	<p>Throughout the life of the strategy.</p> <p>Annually.</p>	<p>Number of people accessing training and type of training. Evaluation of training. Case studies.</p> <p>Record of the annual checks.</p>



2.4	Develop an effective communications and engagement strategy.	<ul style="list-style-type: none"> • Redesign / refresh of the suicide prevention website, alongside the Kind to your mind website, and deliver a subsequent communications campaign. • Deliver public awareness mental health campaigns (including self-harm and suicide prevention), co-developed with key groups and those with lived experience that target at-risk groups, reduce stigma, and encourage people to seek support. • Samaritans Media Advisory Service is secured to support local place leads. 	<p>Champs Support Team.</p> <p>Champs Support Team.</p> <p>Champs Support Team.</p>	<p>2023/24.</p> <p>Throughout the life of the strategy.</p> <p>2023-24.</p>	<p>Suicide Prevention and Kind to your mind website relaunched.</p> <p>A communications plan is developed and actioned. Analysis of impact of the campaigns. Analysis of usage of the websites.</p> <p>Number of interventions by media advisory service and quarterly update newsletters.</p>
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Ref.	3. INTERVENTION PRIORITIES	Action(s)	Lead(s)	Timeframe	Success measures / Outcomes / Milestones
3.1	Increase suicide prevention training and safety planning in key work groups linked to priorities.	<ul style="list-style-type: none"> • Training accessed in key work groups: <ul style="list-style-type: none"> ◦ Self-harm ◦ Males ◦ To address inequalities ◦ C&YP Safety Planning in Beyond Programme is developed and communicated 	Champs Support Team.	Throughout the life of the strategy.	Number accessed by organisation/profession. Number accessed based on work area/ geography
3.2	Improve self-harm support and implement National Institute for Health and Care Excellence (NICE) self-harm guidance.	<ul style="list-style-type: none"> • See 2.2 (actions on practice guides and safety planning). • Work collaboratively to improve self-harm pathways. • Completion of National Confidential Inquiry into Safety and Self-harm (NCISH) self-harm audits. • Explore the appetite and capacity within the Beyond Programme to take on C&YP self-harm and safety planning work. • To explore/discuss with the Mental Health Programme 	<p>See 2.2</p> <p>Champs Support Team/ICB Mental Health Programme Team.</p> <p>Mental Health Trusts.</p> <p>Champs Support Team / Beyond Programme.</p> <p>Champs Support Team.</p>	<p>See 2.2</p> <p>Throughout the life of the strategy.</p> <p>Bi-annually.</p> <p>2023-24.</p> <p>2023-2025.</p>	<p>See 2.2</p> <p>Self-harm pathways developed.</p> <p>Audits completed and RAG rated, work areas identified.</p> <p>C&YP self-harm and safety planning work is embedded in the system and a C&YP action plan is developed.</p> <p>Adult and older people self-harm and safety planning</p>



		where self-harm and safety planning work for adults and older people can be embedded into the system.			work is embedded in the system and an action plan is developed.
3.3	Improve crisis care for all ages.	<ul style="list-style-type: none"> Improve access to crisis services and benchmark activity against need. Raise awareness of available mental health crisis support. 	<p>Lead in the ICB / Mental Health Programme.</p> <p>ICB / Mental Health Programme / Champs Support Team including Communications Team.</p>	<p>Throughout the life of the strategy.</p> <p>Throughout the life of the strategy.</p>	<p>Numbers accessing crisis care compared to those waiting for crisis support.</p> <p>Views of the relevant pages on the Kind To Your Mind and Suicide Prevention websites.</p> <p>Monitoring of data to inform continued promotional campaigns / case study development.</p>
3.4	Continue to improve and implement Safer Care Standards.	<ul style="list-style-type: none"> Continue to monitor services against the safer care core standards and develop plans for improvement. 	Mental Health Trusts / Champs Support Team.	Quarterly meetings.	<p>Numbers of indicators green rated.</p> <p>Recording of improvements in areas rated amber or red in chosen improvement area.</p> <p>Case studies.</p>
3.5	Improve access to social and mental health support for all ages.	<ul style="list-style-type: none"> To understand wider services particularly social prescribing and use of Making Every Contact Count (MECC) moments. Promotion of the Suicide Prevention, Kind to your mind 	<p>Champs Support Team with Personalised Care.</p> <p>Champs Support Team / ICB.</p>	<p>Throughout the life of the strategy.</p> <p>Throughout the life of the strategy.</p>	<p>An overview of service availability has been undertaken and an understanding of the best directories is known and communicated.</p> <p>Analysis of impact of the campaigns.</p>

		<p>and MECC moments websites through revised websites / comms campaign.</p> <ul style="list-style-type: none"> Promotion of Hub of Hope app. 	Suicide Prevention Network.	Throughout the life of the strategy.	<p>Analysis of usage of the websites.</p> <p>Number of services by type registered with the Hub of hope across C&M.</p>
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Ref.	4. POSTVENTION PRIORITIES	Action(s)	Lead(s)	Timeframe	Success measures / Outcomes / Milestones
4.1	Improve effective suicide bereavement support for all ages, including specific suicide bereavement.	<ul style="list-style-type: none"> Improve access to appropriate suicide bereavement support and counselling when appropriate. Improved access to Survivors of Bereavement by Suicide (SoBS) groups across C&M. Deliver Suicide Bereavement training (with a focus on supporting both adults and C&YP). Champs Support Team to share relevant resources, in relation to bereavement support, for use by educational settings schools and organisations to support bereavement by suicide. Refresh the suicide prevention website to ensure relevant details are held. 	<p>Champs Support Team/Amparo.</p> <p>Champs Support Team/Amparo.</p> <p>Champs Support Team/HEE.</p> <p>Champs Support Team.</p> <p>Champs Support Team.</p>	<p>Throughout the life of the strategy.</p> <p>2023-2024.</p> <p>2023-2025.</p> <p>Throughout the life of the strategy.</p> <p>2023/24.</p>	<p>Numbers receiving suicide bereavement support / counselling support.</p> <p>Number of SoBS groups in C&M and people accessing these.</p> <p>Numbers accessing suicide bereavement training.</p> <p>Record of resources shared.</p> <p>Completion of website refresh and regular checking of details held on it.</p>
4.2	Ensure effective postvention services across C&M	<ul style="list-style-type: none"> Improve access to postvention service through continuous 	Champs Support Team/Amparo.	For the duration of the contract.	Number and % (as a % of total suicides) of



		development of services and counselling support.			beneficiaries receiving postvention support. % of beneficiaries with no subsequent self-harm or suicide attempts / completed suicide. Case studies.
4.3	Ensure deaths by suicide are addressed sensitively in the media.	<ul style="list-style-type: none"> • Monitor activity through Samaritans media advisory service. • Promote training and lecture offer (for universities). 	<p>Samaritans media advisory service/Champs Support Team.</p> <p>Champs Support Team/Samaritans media advisory service.</p>	<p>For the duration of the contract.</p> <p>For the duration of the contract.</p>	<p>Number of cases of inappropriate reporting. Case studies of interventions.</p> <p>Numbers trained within C&M.</p>



Ref.	5. DATA, INTELLIGENCE, EVIDENCE AND RESEARCH	Action(s)	Lead(s)	Timeframe	Success measures / Outcomes / Milestones
5.1	Improve the data sets collated by real-time surveillance (RTS) and examine capacity to undertake a suicide audit for C&M.	<ul style="list-style-type: none"> Develop the RTS system to ensure an automated system which is more sustainable and cost effective. To ensure compliance of the new automated RTS system. Develop the RTS system to include data from wider agencies to identify risks and interventions in a timelier manner. Secure capacity and resources to ensure intelligence led systems feed data and research on suicide prevention and suicide bereavement into the suicide prevention and suicide bereavement work. Review the suicide audit templates and provide guidance and advice to local areas. 	<p>Champs Support Team/Slice Up Limited.</p> <p>Champs Support Team/Slice Up Limited.</p> <p>Champs Support Team/Local Place colleagues/Key stakeholders.</p> <p>Champs Support Team.</p> <p>Champs Support Team.</p>	<p>2023/24.</p> <p>2023/24.</p> <p>Throughout the life of the strategy.</p> <p>2023/24.</p> <p>2023/24.</p>	<p>Service specification for RTS system. Data Sharing Agreement in place. RTS system is operational.</p> <p>Troubleshooting is complete with all issues recorded.</p> <p>RTS being reported to the Suicide Prevention Partnership Board. Case study of use of RTS.</p> <p>Capacity and resource is secured.</p> <p>Refreshed templates are agreed and routinely used in audits.</p>



5.2	Understand different methods of suicide and highlight issues.	<ul style="list-style-type: none"> Use RTS data reports to highlight issues of methods and link with local place leads on programmes of work to reduce risk. 	Champs Support Team.	Throughout the life of the strategy.	RTS data learning panels are regularly held.
5.3	Use the data to inform community response plans.	<ul style="list-style-type: none"> Review Community Response Plan and support local areas to embed plans in processes. 	Champs Support Team.	Throughout the life of the strategy.	Community response plan has been reviewed and updated.
5.4	Develop an overarching suicide prevention dashboard to monitor progress of the plan.	<ul style="list-style-type: none"> Develop a reporting template/framework for both the Suicide Prevention strategy and the Prevention Concordat for Better Mental Health. Data/in-depth audit on domestic abuse has been developed. 	Champs Support Team. Champs Support Team.	2023/24. 2023/24.	Performance framework developed and reported to the Suicide Prevention Partnership Board. Evidence of action based on new data and evidence on domestic abuse.