

HEALTH & WELLBEING BOARD

Subject Heading:

Havering 2024 Suicide Prevention Annual Report

Board Lead:

Mark Ansell, Director of Public Health

Report Author and contact details:

Samantha Westrop
Samantha.westrop@havering.gov.uk

Isabel Grant-Funck
Isabel.grant-funck@havering.gov.uk

The subject matter of this report deals with the following themes of the Health and Wellbeing Strategy

<input checked="" type="checkbox"/>	<p>The wider determinants of health</p> <ul style="list-style-type: none"> • Increase employment of people with health problems or disabilities • Develop the Council and NHS Trusts as anchor institutions that consciously seek to maximise the health and wellbeing benefit to residents of everything they do. • Prevent homelessness and minimise the harm caused to those affected, particularly rough sleepers and consequent impacts on the health and social care system. 										
<input checked="" type="checkbox"/>	<p>Lifestyles and behaviours</p> <ul style="list-style-type: none"> • The prevention of obesity • Further reduce the prevalence of smoking across the borough and particularly in disadvantaged communities and by vulnerable groups • Strengthen early years providers, schools and colleges as health improving settings 										
<input checked="" type="checkbox"/>	<p>The communities and places we live in</p> <ul style="list-style-type: none"> • Realising the benefits of regeneration for the health of local residents and the health and social care services available to them • Targeted multidisciplinary working with people who, because of their life experiences, currently make frequent contact with a range of statutory services that are unable to fully resolve their underlying problem. 										
<input checked="" type="checkbox"/>	<p>Local health and social care services</p> <ul style="list-style-type: none"> • Development of integrated health, housing and social care services at locality level. 										
<input checked="" type="checkbox"/>	<p>BHR Integrated Care Partnership Board Transformation Board</p> <table border="0"> <tr> <td>• Older people and frailty and end of life</td><td>Cancer</td></tr> <tr> <td>• Long term conditions</td><td>Primary Care</td></tr> <tr> <td>• Children and young people</td><td>Accident and Emergency Delivery Board</td></tr> <tr> <td>• Mental health</td><td>Transforming Care Programme Board</td></tr> <tr> <td>• Planned Care</td><td></td></tr> </table>	• Older people and frailty and end of life	Cancer	• Long term conditions	Primary Care	• Children and young people	Accident and Emergency Delivery Board	• Mental health	Transforming Care Programme Board	• Planned Care	
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• Planned Care											



SUMMARY

Content warning: The content of this Annual Report may be emotionally challenging as it discusses suicidality and self-harm.

Support is available:

Samaritans – a listening service which is open 24/7 for anyone who needs to talk.

Campaign Against Living Miserably (CALM) - CALM's confidential helpline and live chat are open from 5pm to midnight every day.

Shout – a free confidential 24/7 text service offering support if you're in crisis and need immediate help.

There has been a national increase in suicide rates in 2023, compared to 2022 data, to the highest rates seen since 1999. In England and Wales, there were 6,069 suicides registered in 2023 (11.4 deaths per 100,000 people); compared with 5,642 deaths in 2022 (10.7 deaths per 100,000).

On average there have been 18 registered deaths by suicide per year amongst Havering residents over the last decade. The age-standardised rate of death by suicide in Havering continues to be higher than Outer London and London, albeit this difference is no longer statistically significant. In 2024:

- 17 deaths by suspected suicide amongst Havering residents were detailed in the nRTSSS database throughout 2024.
- In 2024 a larger proportion of those who died by suspected suicide were female than expected, based on historic and national data.
- Almost half of the deaths by suspected suicide in 2024 amongst Havering residents took place in a public place.
- Some methods of death were more common than others, and this information will be used to inform local actions for suicide prevention going forward.
- The average age of those who died by suspected suicide was slightly younger than National statistics, and ages spanned a wide range throughout adulthood.
- The average index of multiple deprivation score of deaths by suspected suicide (based on home address) was 4.

To work to help reduce suicide rates, from April 2024 the new "[All-Age Havering all-age suicide prevention strategy 2025-2030 - Working together to save lives](#)" was developed, and an [easy read](#) version of the strategy was also produced. The process of strategy development and consultation facilitated the strengthening of existing cross-sector relationships as well as the formation of several additional working partnerships in areas not previously involved with Public Health-led Suicide Prevention activity.

Implementation of the 5 year strategy has successfully begun, enabled by the active and engaged membership of three key groups; The Suicide Prevention Stakeholder Group, Suicide Prevention Strategy Steering Group and the Lived Experience Advisory Group. A detailed action plan has been established and agreed upon, the monitoring of the delivery of which sits within the Strategy Steering Group that meets quarterly.



The 2024 annual report details work that was undertaken alongside the new strategy development and adoption, including safeguarding referrals, a site-specific investigation and contributions from the Havering Public Health team to the NEL Cluster Response Plan.

RECOMMENDATIONS

1. Adopt and implement a local all-age suicide prevention strategy to ensure best use of local data, intelligence and partnership working
2. Continue reviewing each suspected suicide amongst Havering residents to gather relevant information to inform prevention efforts
3. Gain clarity on the outputs of reviews conducted by wider systems partners and scope possible access to reports with timeline review and incorporation of finding and recommendations into our local prevention efforts.
4. Scope the possibility of obtaining additional data sources for suspected suicides beyond nRTSSS.
5. Work with GP Practices across the borough to include their expertise in the suspected suicide review panel process.
6. Implement the agreed action plan resulting from the Havering strategy.

REPORT DETAIL

The Annual Report consists of the following sections:

1. Most Recent Official Statistics
1. Overview of Suspected Suicides Occurring in 2024
2. Development of All-Age Strategy for Suicide Prevention 2025-2030
3. Review of Deaths by Suspected Suicide
4. Safeguarding Referrals
5. Site-Specific Investigations Summary
6. NEL Cluster Response Plan
7. Recommendations

IMPLICATIONS AND RISKS

There are no financial, legal, human resources, environmental or equalities implication risks. Regarding Health and Wellbeing implications, these include:

- Improved service coordination across suicide prevention partners.
- Early intervention and prevention informed by real-time data and trends.
- Increased awareness and literacy around mental health and suicide prevention.
- Accountability and transparency through annual reporting of most up-to-date data and actions by public health team.
- Resource planning and funding justification of local prevention initiatives.

Risks include:

While the report provides important insights, there are some risks, which have been mitigated where possible:

- Data sensitivity and confidentiality: To protect individuals and families and follow the nRTSSS data sharing agreement, certain details have not been included.



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- Misinterpretation of data: To avoid misunderstanding, all data is presented with clear explanation and analysis.
- Emotional impact on readers: Given the sensitive nature of this topic, a trigger warning is included, along with signposting to relevant support services.

BACKGROUND PAPERS



Annual Report
HWBB Suicide Preve



Suicide Prevention
2024 Annual Report