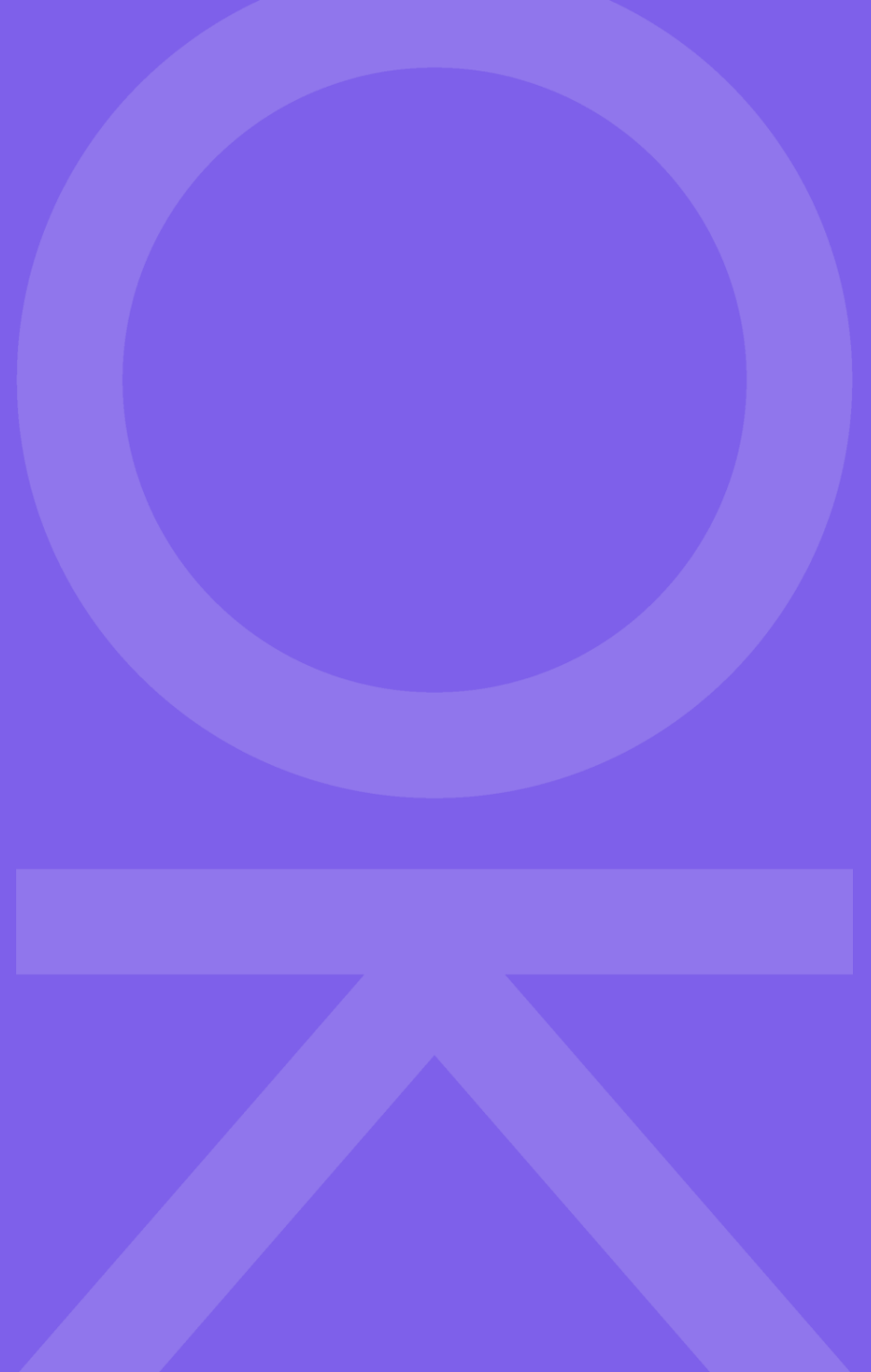


Thrive LDN

Expansion and implementation of Real-Time Surveillance in London

Gabriella Baker

Kim Hunt



About Thrive LDN

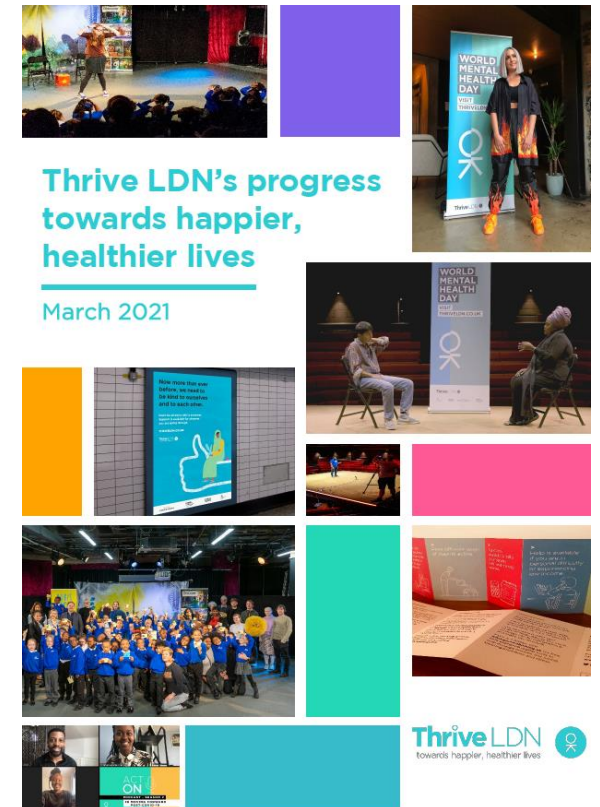
Thrive LDN was launched In July 2017 by the Mayor of London, alongside other health and care partners.

The aim: to create a collective action across London, for everyone to speak openly about mental health and have an equal opportunity to thrive.

At it's core it is **a participation-driven partnership** that engages with and responds to the needs and insights of Londoners.

Since March 2020, we have been coordinating the **public mental health response** to the COVID-19 pandemic on behalf of Office for Health Improvement and Disparities (OHID) London and wider partners.

Thrive LDN is the **regional lead for suicide prevention in London** on behalf of NHS England and facilitate the multi-agency Thrive LDN Suicide Prevention Group to deliver citywide projects to prevent suicide and support those affected.



Suicide prevention actions for London

Suicide prevention partnerships



Data insights

Community intervention



Enhanced signposting and support

Education



Resilience

Reasons for real-time data

- Sudden and unexpected deaths are notified to the coroner with a conclusion determined at inquest
- Time between a death and suicide conclusion can mean official statistics are out of date when they reach the public domain
- Bereavement support varies by Local Authority
 - Identification and recording of suspected suicides by the police, as they occur
 - Secure sharing of data to facilitate multi-agency review and response
 - Real-time referral of those affected by a suicide to postvention services

Borough	Bereavement Service	Format	Comments	Cruse	Winstons	Wishild	Bereavement UK
Barking and Dagenham	Help is at Hand Department	Website/PDF	23 links including websites, phone numbers and email addresses				
Barnet	Council Website	Website	5 Links with addresses, website and phone numbers linked.				
Bexley	None offered	N/A	N/A				
Brent	Council Website	Website	5 Links with addresses, website and phone numbers linked.				
Bromley	Bromley Bereavement	Website/PDF	13 Links including websites, phone numbers and email addresses				
Camden	Early Help Leaflet	Website/PDF	1 Link on PDF				
City of London	Council Website	Website	Link to Tower Hamlets (joint working)				
Croydon	Council Website	Website	5 Links with addresses, website and phone numbers linked.				
Ealing	None offered	N/A	N/A				
Enfield	Council Website	Website	10 Links with addresses, website and phone numbers linked				
Greenwich	Council Website	Website	4 website links				
Hackney	None offered	N/A	N/A				
Hammersmith & Fulham	None offered	N/A	N/A				
Haringey	Council Website	Website	17 links with addresses, websites and phone numbers linked				
Harrow	Council Website	Website/PDF	32 links with addresses, website and phone numbers linked				
Havering	External Website	Website	1 Link to Cruse UK				
Hillingdon	Council Website	Website	7 Links with addresses, websites and phone numbers + suicide section				
Hounslow	External Website	Website	1 Link to Cruse UK				
Islington	None offered	N/A	N/A				
Kensington & Chelsea	Council Website	Website	12 Links with addresses, website and phone numbers linked				
Kingston Upon Thames	External Website	Website/PDF	1 PDF with no specific link				
Lambeth	External Website	Website	1 Link to training and Cruse				
Lewisham	Council Website	Website	1 Link to Cruse UK and in house service				
Merton	Council Website	Website	12 Links with addresses, website and phone numbers linked				
Newham	Council Website	Website	1 Link to in house service				
Redbridge	Council Website	Website	Links to policies only				
Richmond Upon Thames	None offered	N/A	N/A				
Southwark	Council Website	Website	1 Link to in house service				
Sutton	Council Website	Website	6 Links with addresses, website and phone numbers linked				
Tower Hamlets	Council Website	Website	3 Links to services plus a suicide prevention section				
Waltham Forest	None offered	N/A	N/A				

RTS around the country

Other areas with established RTS systems

- Buckinghamshire, Oxfordshire & Berkshire West STP
- Bath, Swindon, Wiltshire STP
- Cambridge and Peterborough STP
- Cheshire & Merseyside STP
- Cornwall and Isles of Scilly STP
- Devon ICS
- Dorset ICS
- Lancashire & South Cumbria ICS
- Greater Manchester Health and Social Care Partnership
- Norfolk and Waveney STP
- North East and North Cumbria ICS
- South Yorkshire & Bassetlaw
- Somerset STP
- Suffolk and North East Essex ICS

RTS Examples of Good Practice

Lancashire & South Cumbria ICS

Real Time Surveillance (RTS) and Contagion Response

Why did we take action?

- Timely research and analysis
- Address local problems by rapid delivery of responses
- Provide early bereavement support
- Monitor trends & potential contagion

What did we do?

- RTS system
- Collect information on suspected suicides
- Alert multi-agency team within 24hrs
- Contagion response; support offer

2020/2021

What has the impact been?

- Workplace bereavement support within 3 days
- School students & staff support within 48hrs
- 65+ people supported via AMPARO

Lancashire & South Cumbria ICS

South Yorkshire & Bassetlaw

Real time surveillance (RTS)

Why did we take action?

- Real time decision prevention planning
- Gather information to help inform suicide prevention
- Improve responsiveness to suicide & contagion
- Offer timely bereavement support

What did we do?

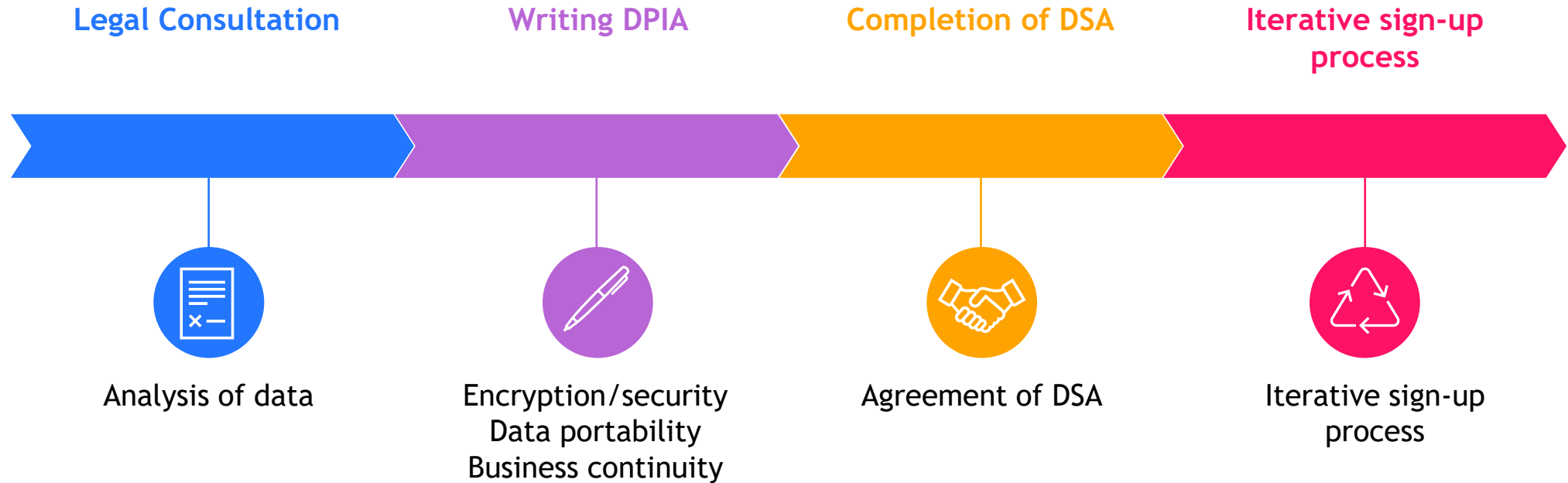
- Early alert system
- Collect information on suicidal behaviour
- Multi-agency information sharing
- Offer of support (AMPARO)
- Learning panel case review

What has the impact been?

- 1 Jan-31 Mar 2020
- Key at-risk groups identified
- Specialised support pathway
- 40+ bereaved families supported

South Yorkshire and Bassetlaw ICS

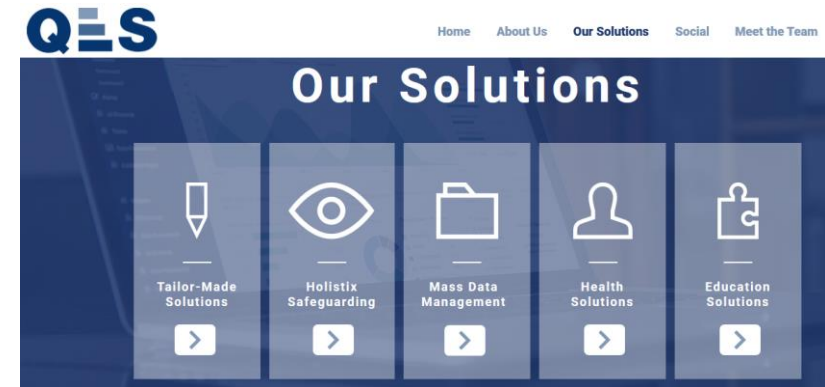
Information governance



DPIA: Data Protection Impact Assessment
DSA: Data Sharing Agreement

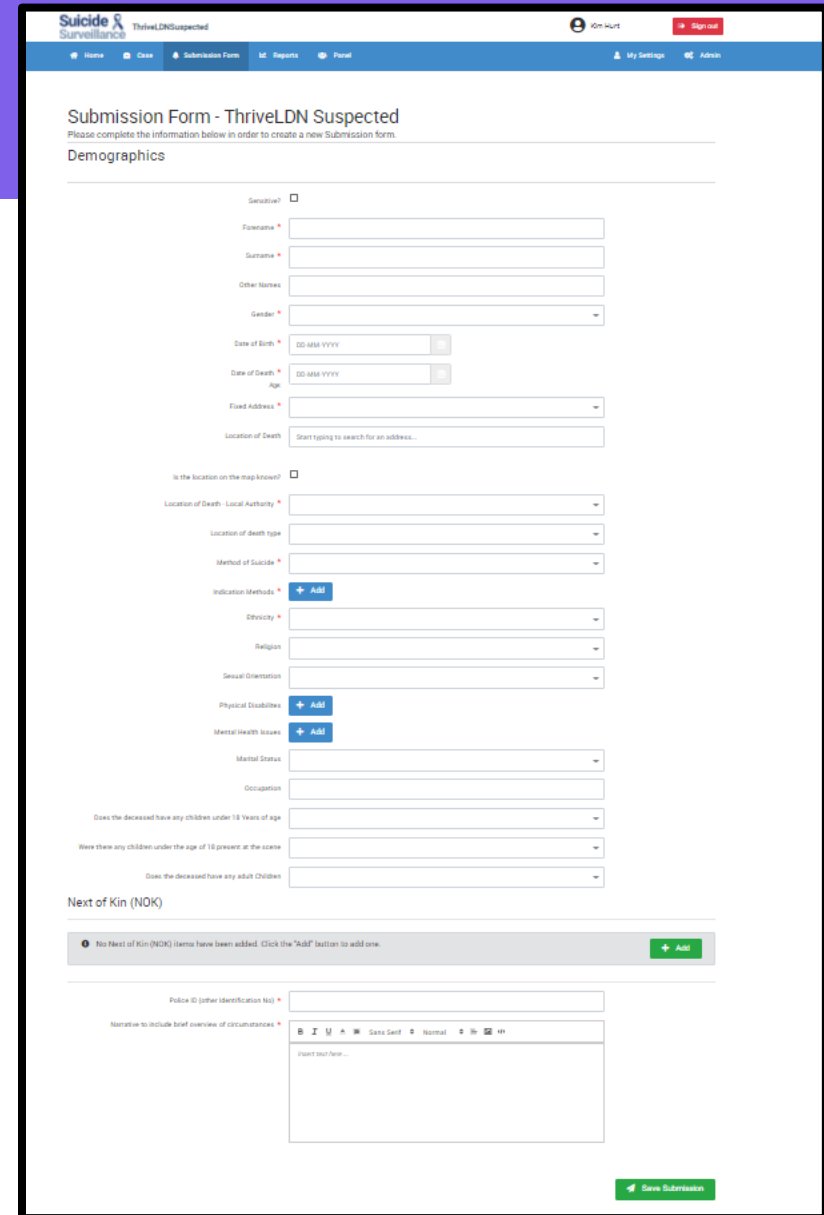
Stakeholder engagement

- QES selected via tender process
- Examples of their work involve highly sensitive information and include the Child Death Overview Panel database and Child Mortality Database.
- Regular meetings with QES, Met Police & Thrive LDN took place throughout the process.
- Their privacy policy has enabled the hub to adhere to robust data protection laws.



Platform functionality

- ❖ Submission form populated predominately by the host following a suspected suicide
- ❖ Minimised mandatory fields and free text areas for speed of completion and analytics; facilitates real-time understanding of incidence, methods and demographic trends
- ❖ Notification to relevant Local Authority, NHS organisations and referral to Integrated Care Service (ICS) suicide bereavement services
- ❖ Partners submit enquiry forms to clarify e.g. prior mental or physical health conditions
- ❖ Reporting by location → multi-agency suicide prevention groups



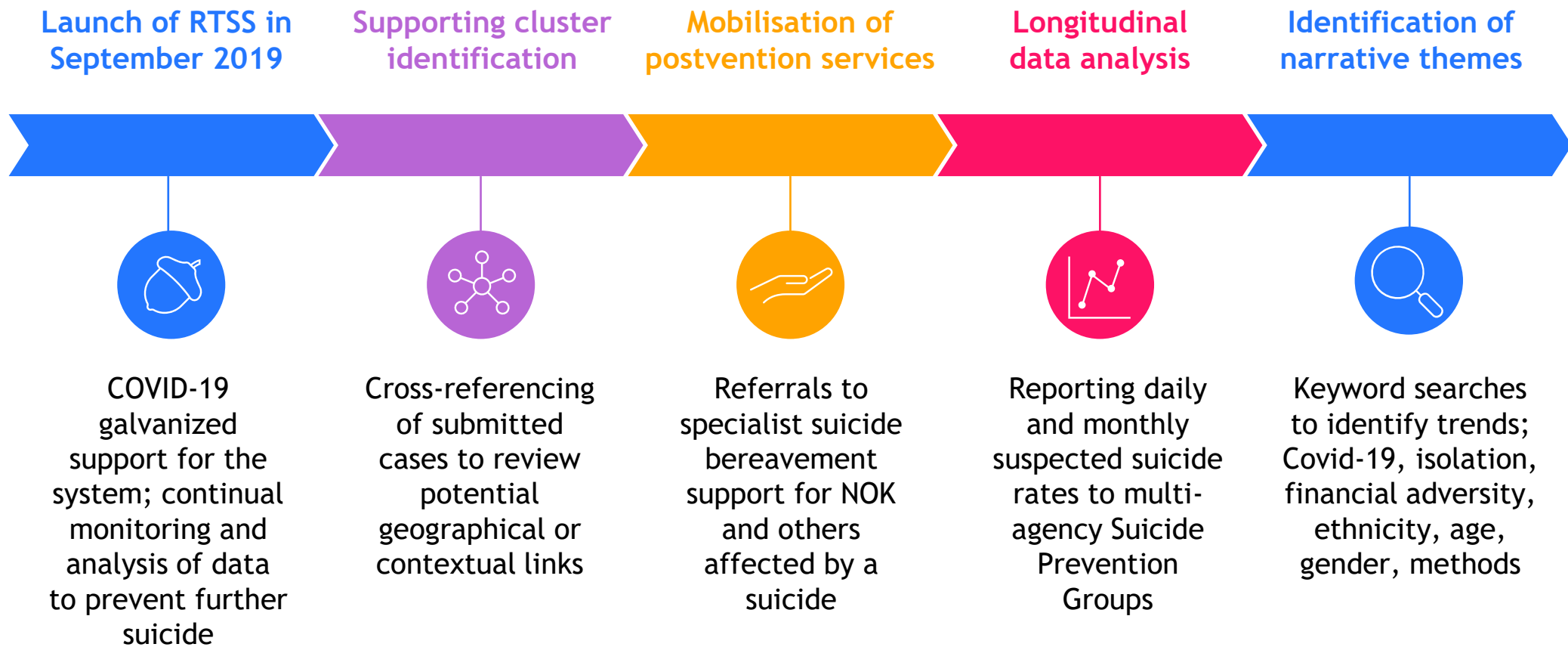
Data insights

- ❖ Monthly reports of pan-London data have not indicated a rise in suicides regionally
- ❖ Recent results have shown demographics are usually similar to national statistics
- ❖ Provides data to assist with developing regional briefings
- ❖ Helps to prioritise the development of local strategies

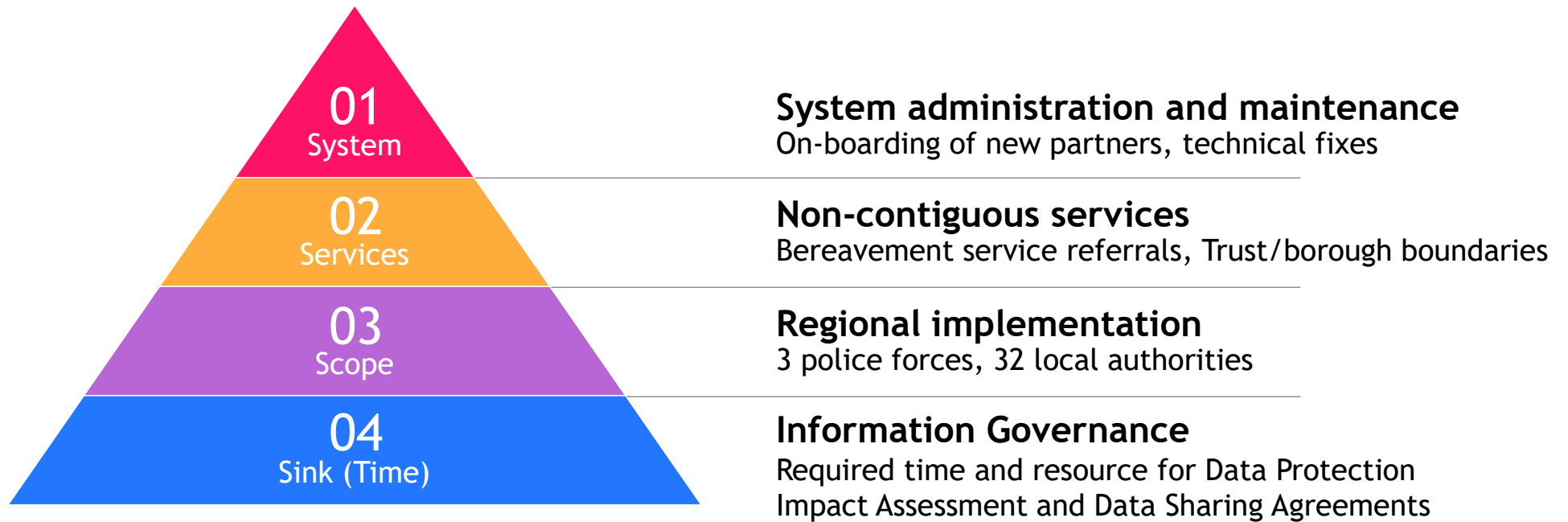
Limitations

- ❖ Lack of high-quality control data prior to the system launching in 2019
- ❖ Data quality has steadily improved since 2019 but limits accuracy when comparing latest data with previous RTSS reports

Real-Time Surveillance Utilisation



Challenges in London



Self-harm and suicidality



Hospital presentations for self-harm have increased in recent years; 200,000 presentations per year is the current estimate in the UK, relative to 140,000 in the mid 1990s (Hawton, Fagg et al. 1997; Tsiachristas, Geulayov et al. 2020).



Self-harm prevalence is increasing across age groups, but particularly among women and girls aged 16-24; proportion of lifetime reported **non-suicidal self-harm increased from 6.5% to 19.7% between 2000-2014** (McManus 2019).



50% of people who die by suicide have a history of self-harm and the risk of suicide is increased up to 50x in the year following self-harm (NCISH 2017).

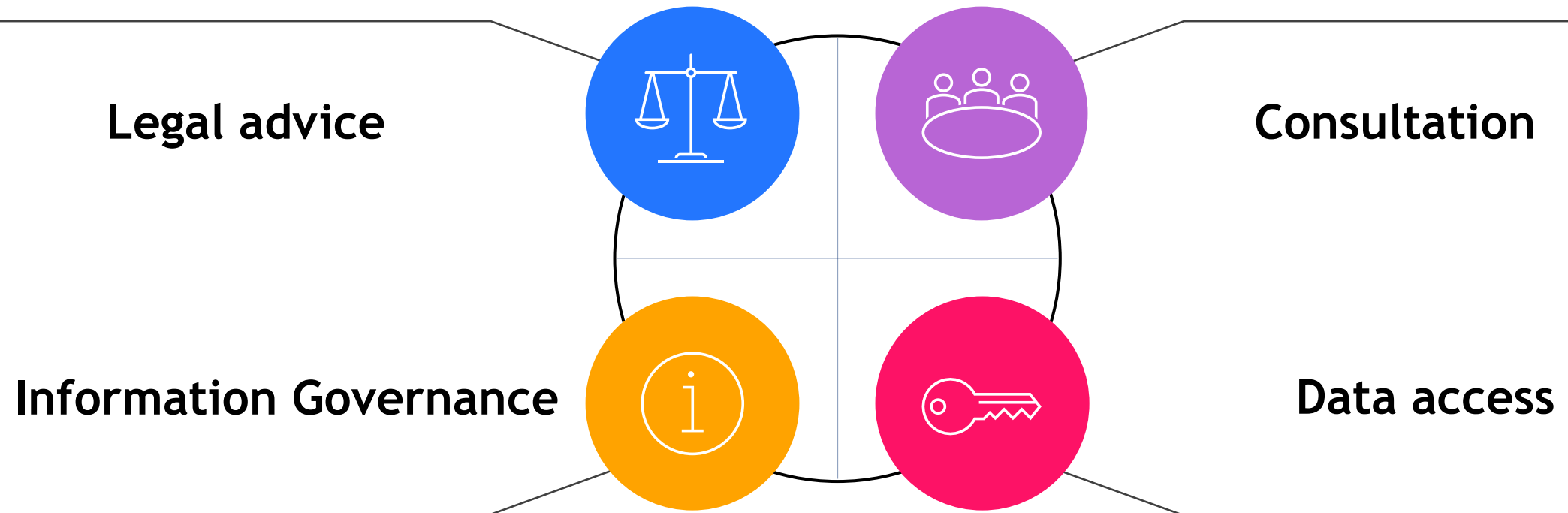


Much self-harm occurs in the community without presentation to services (Iceberg model), however **trends in rates of self-harm**, as measured by hospital-presentations, **reflect trends in suicide rates** (Geulayov, Kapur et al. 2016).

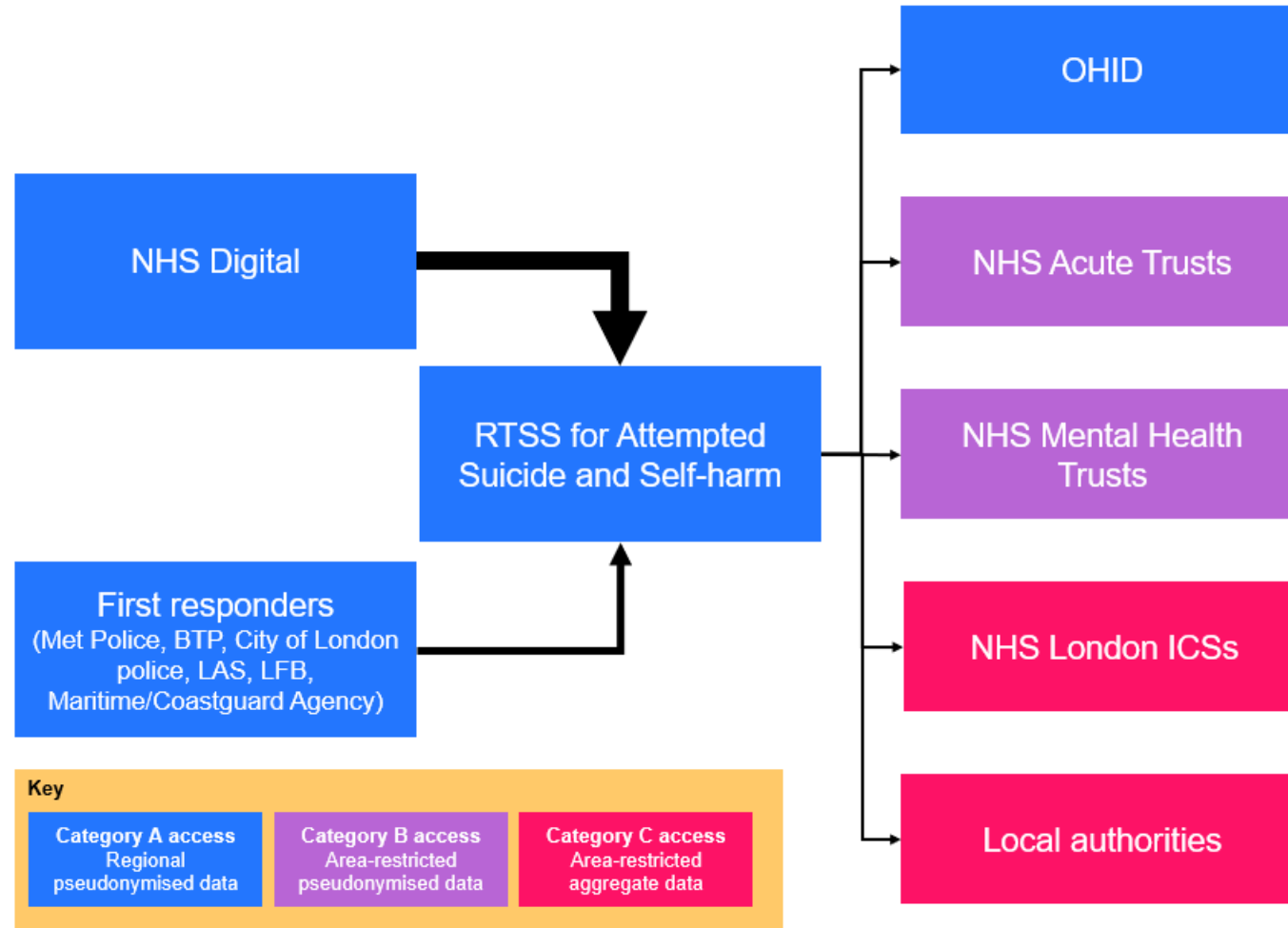


Systematic monitoring of self-harm can provide **an indication of population welfare and distress**, and inform service provision (Multicentre Study of Self-harm, 2021).

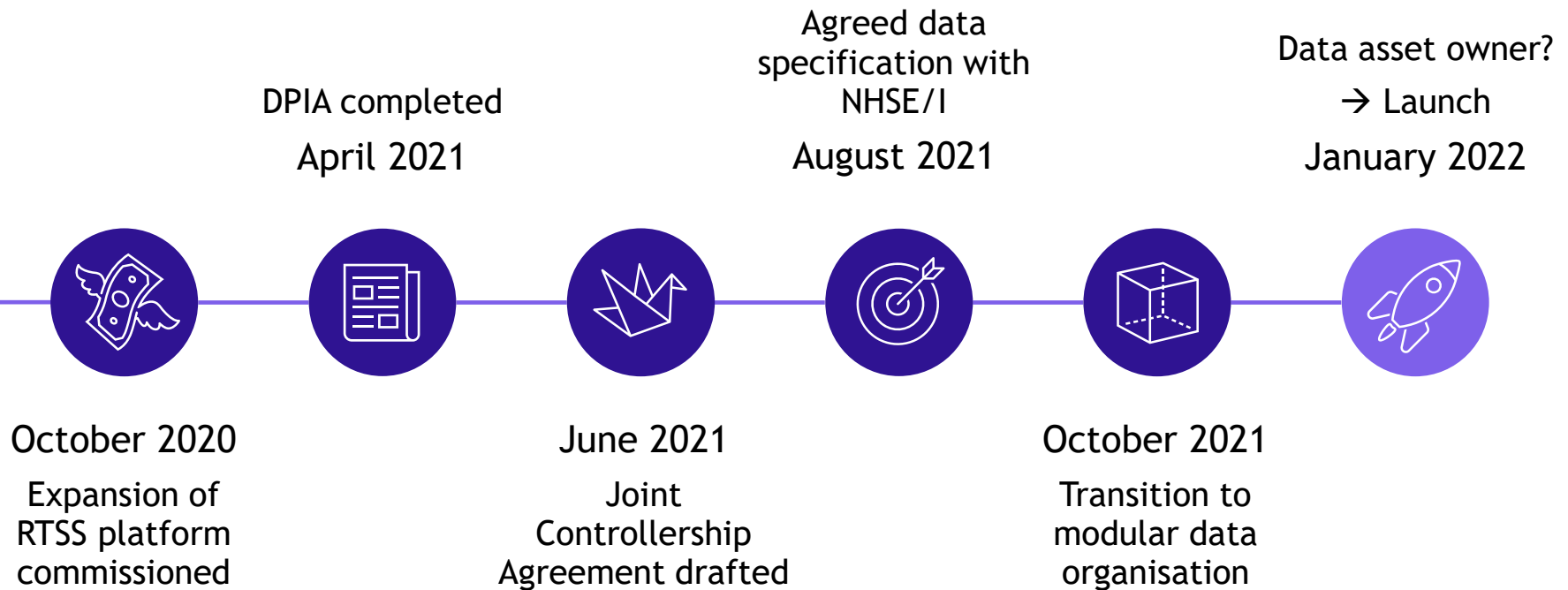
Process of expansion



Proposed data flow



Key milestones



Next steps

Data protection

- DPIA and Joint Controllorship Agreement completed
- Co-host organisation to complete DPIA and Data Security and Protection (DSP) toolkit
- Consultation with IG leads in pilot organisations

Data Access

- Secure hosting agreement with NHSE/I
- Data processors to develop:
 - Restricted access roles - anonymised data only
 - Restricted extract capability
- Review frequency of NHS Digital data uploads

Engagement

- Evidence of wider consultation included in DPIA
 - Provided opportunity to raise concerns or clarifications
 - Included record of how approach was modified in response to consultation
- Create a list of Single Point of Contact (SPoCs) for pilot organisations once mobilised

Benefits

- Secure, professionals-only resource
- Pan-London monitoring of attempted suicide & self-harm
- Identification of local risk groups
- Improved partnership working
- Greater oversight and consistency in support provision

Thank you

If you have any questions please get in touch.

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thriveLDN.co.uk