DRAFT Appendix 2: Data and Supporting Evidence

Preventing Suicides in Southwark 2023-2028

Southwark Public Health

September 2023







CONTENT WARNING

This strategy contains sensitive content relating to suicide, self-harm and mental health, including local data on numbers and means of suicide.

If you are affected by any of the issues raised, there are services that can help:

- The <u>Samaritans</u> are open every day of the year, you can phone them for free on 116 123 or email <u>jo@samaritans.org</u> (response time: 24 hours).
- Mind, the mental health charity, offers support by phone at 0300 123 3393 or online.
- NHS mental health information and support.
- The Listening Place offer free face-to-face support in London for people who feel life is no longer worth living.

This slide deck is an appendix to the Preventing Suicides in Southwark strategy and action plan 2023 - 2028

INTRODUCTION

These slides provide an overview of suicide and self-harm in Southwark.

- These slides should be read alongside the Preventing Suicides in Southwark strategy and action plan 2023-2028.
- The aim of these slides is to provide an overview of national and local context.
- Data will be monitored on an ongoing basis, as set out in the final slide.
- Definitions from the Office of National Statistics have been set out here.

Suicidal act: Refers to all suicides and suicidal attempts.

Suicide: In the UK, suicide is defined as deaths with an underlying cause of intentional self-harm (ages 10 years and over) and deaths with an underlying cause of event of undetermined intent (ages 15 years and over).

Attempted suicide: Act of self-poisoning or self-injury with suicidal intent, that is not fatal.

Suicidal ideation: Recurring thoughts or preoccupation with suicide.

Self-harm: Self-harm is defined as an intentional act of self-poisoning or self-injury, excluding attempted suicide.

This appendix includes data on registered deaths, suspected suicides and data predicted through modelling

INTERPRETING SUICIDE DATA

The way suicide data is collected and reported should be considered when interpreting suicide data:

- There is often a time lag between the occurrence of a suicide, the coroner's inquest and registration of the death.
- Figures from the ONS and the Primary Care Mortality Dataset present deaths registered within a particular year, rather than the deaths which occurred in that year.
- Misclassification of deaths, for example where a death is coded as 'accidental' or 'underdetermined intent' rather than 'suicide', can result in under-reporting of the actual number of suicides

CONTENTS

National picture	6
Local picture - suicide	12
Office for National Statistics (ONS) data	13
Primary Care Mortality Dataset (PCMD) data	14
Thrive LDN Real-Time Suicide Surveillance (RTSS) dataset	16
South-East London ICS Serious Incident Report	21
Enhanced Surveillance Data for Bridges in London	23
National Rail Surveillance Data for Southwark	24
Local picture – self-harm	25
Hospital Episode Statistics (HES) data	27
Case Note Review of Self-Harm A&E Attendances Among 10-24 year olds	30
Ongoing data monitoring	33



On average, 14 people took their own life each day in 2021 England-wide; rates were much higher in males than females

NATIONAL PICTURE: TIME TREND

England-wide, suicide rates have fluctuated over time. In 2021 in England, an average of 14.3 people took their own life every day: 10.6 males and 3.8 females.

- In England in 2021, there were 5,219 deaths due to suicide or injury of undetermined intent, equivalent to a rate of 10.5 per 100,000 people (for 10 year olds and older; age-standardised rates).
- Suicide rates were nearly 3 times higher in males (15.8 per 100,000; 3,852 deaths) than females (5.5 per 100,000; 1,367 deaths).
- In 2021, suicide rates were highest in the North East (14.1 deaths per 100,000) and North West (12.9 per 100,000) regions, and lowest in London (6.6 per 100,000).

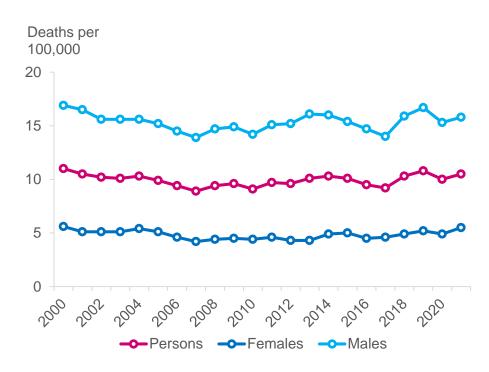


Figure 1: Age-standardised mortality rates for completed suicide per 100,000 for 10+ yr old persons, females and males, in England, for deaths registered between 2000 and 2021

Reference

1. Suicides in England and Wales: Dataset. Office for National Statistics, 2022. Figures include all deaths from intentional self-harm for persons aged 10 yr and over, and deaths due to injury or poisoning where the intent was undetermined for those aged 15 yr and over.



England-wide, suicide rates have risen substantially over 10 years in 15–24 yr, 30–34 yr and 60–64 yr groups

NATIONAL PICTURE: AGE

England-wide, over the last 10 years, suicide rates have significantly increased in:

- 15–19 yr olds, by three-quarters (to 6.2 per 100,000)
- 20–24 yr olds, by almost one-third (to 9.8 per 100,000)
- 30–34 yr olds, by over two-fifths (to 11.3 per 100,000)
- 60–64 yr olds, by over one-quarter (to 10.8 per 100,000)

Reference

1. Suicides in England and Wales: Dataset. Office for National Statistics, 2022. Figures include all deaths from intentional self-harm for persons aged 10 yr and over, and deaths due to injury or poisoning where the intent was undetermined Slide 7 for those aged 15 yr and over. Whiskers represent 95% confidence intervals.



Nationally, suicide rates are highest in mid-life, for both females and males

NATIONAL PICTURE: AGE & SEX

In 2021, England suicide rates were highest among those in middle-age, for both females and males; rates also rose in 85+ yr old males.

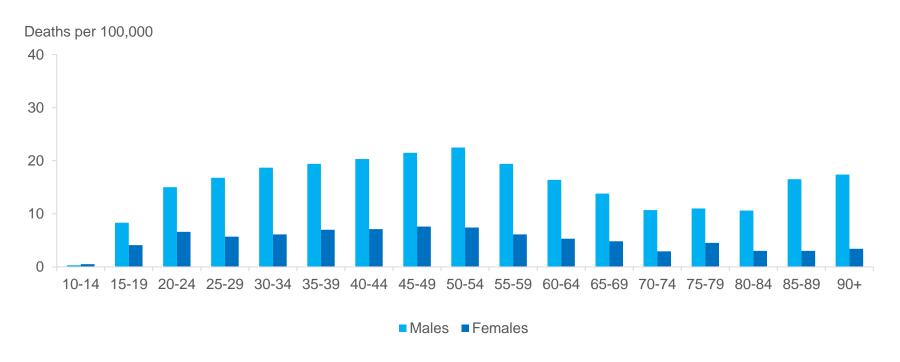


Figure 3: Age-specific suicide rates per 100,000 in England, by sex, for deaths registered in 2021

Reference

1. Suicides in England and Wales: Dataset. Office for National Statistics, 2022. Figures include all deaths from intentional self-harm for persons aged 10 yr and over, and deaths due to injury or poisoning where the intent was undetermined for those aged 15 yr and over.



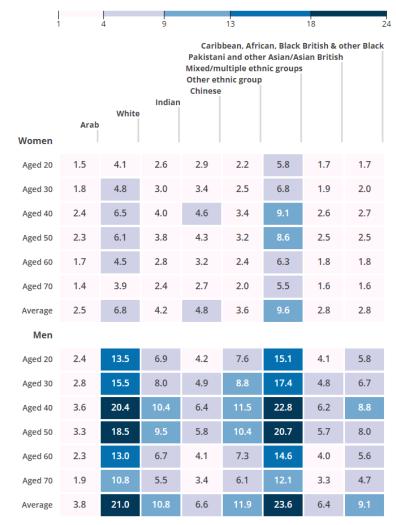
Nationally, estimated suicide rates are highest in Mixed/Multiple and White ethnic groups

NATIONAL PICTURE: ETHNICITY

In England & Wales, estimated suicide rates are highest among Mixed/Multiple ethnic groups (men: 24 per 100,000; women: 10 per 100,000) and White groups (men: 21 per 100,000; women: 7 per 100,000).

- These are estimated, average figures based on 2011 to 2021 data. Ethnicity is not recorded on death registrations, so actual reported data is not available at a national level.
- Due to differences in population demographics, suicide rates in different ethnic groups probably vary by geographic location.
- Information on the ethnicity of those who died by suicide in Southwark is shown on slide 17.

Figure 4: Estimated rates of suicide per 100,000 people by ethnicity in England and Wales. 2011-2021.



Reference

1. Sociodemographic inequalities in suicides in England and Wales: 2011 to 2021. Office for National Statistics, 2023. This data was estimated using statistical models to estimate rates of suicide across different groups, using the 2011 Census and death registration data linked by NHS number for people in England and Wales.



In 2021, hanging/asphyxiation was the most common suicide method among both females and males

NATIONAL PICTURE: METHODS

Across England and Wales in 2021, hanging was the most common suicide method among both females and males.

- Suicides involving hanging were substantially more common among males than females.
- Poisoning was the next most common method overall; levels were twice as high among females than males.

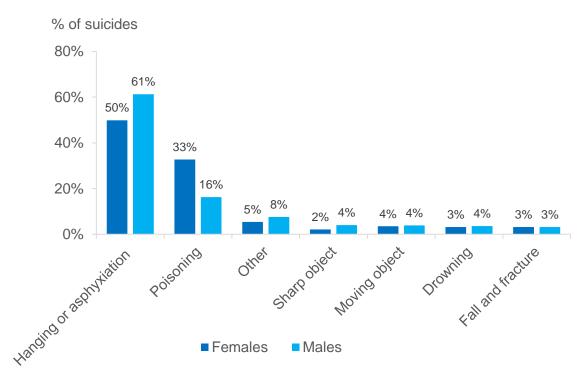


Figure 5: Percentage of suicides in England and Wales by method and sex, for 10+ yr olds in England and Wales, for deaths registered in 2021

Reference

1. Suicides in England and Wales: Dataset. Office for National Statistics, 2022. Figures include all deaths from intentional self-harm for persons aged 10 yr and over, and deaths due to injury or poisoning where the intent was undetermined for those aged 15 yr and over.



CONTENTS

National picture	6	
Local picture - suicide	12	
Office for National Statistics (ONS) data	13	
Primary Care Mortality Dataset (PCMD) data	14	
Thrive LDN Real-Time Suicide Surveillance (RTSS) dataset	16	
South-East London ICS Serious Incident Report	21	
Enhanced Surveillance Data for Bridges in London	23	
National Rail Surveillance Data for Southwark	24	
Local picture – self-harm	25	
Hospital Episode Statistics (HES) data	27	
Case Note Review of Self-Harm A&E Attendances Among 10-24 year olds	30	
Ongoing data monitoring	33	



Southwark's 3-yr suicide rate has been similar to London and England levels, and generally stable, for the last 19 years

LOCAL PICTURE: SUICIDE TIME TREND

The Office for National Statistics (ONS) publishes yearly suicide data for local authorities.

- Since 2001—3, there has been no statistically significant difference between 3-yr suicide rates for Southwark, London and England, and rates of suicide amongst Southwark residents have generally remained statistically similar over time.
- Southwark had a far longer suicide death registration delay in 2021 than in 2020; Southwark's 2021 median delay (436 days) was over double London (181 days) and England (180 days) levels.
- In 2021, 13 suicides in Southwark residents were registered; actual suicide numbers will differ due to reporting delays.



Figure 6: 3-year, age-standardised mortality rate per 100,000 from suicide and undetermined injury, for 10+ yr old persons with a usual residence in Southwark, London and England, for deaths registered in 2001–3 to 2019–21

Reference

Suicides in England and Wales by local authority. Office for National Statistics, 2022.

2. Note: the median value represents the mid-point value in a list of numbers sorted from highest to lowest (50% of values lie above the median value and 50% lie below). Chart whiskers represent 95% confidence intervals. The area is based on the persons usual residence as provided by the informant upon registration in England and Wales.



Southwark's 2019–21 3-yr suicide rate was statistically similar to almost all other boroughs, London and England

LOCAL PICTURE: SUICIDE ACROSS LONDON

The most recent Office for Health Improvement and Disparities (OHID) data shows that:

- In 2019–21, although the suicide rate amongst Southwark residents was the 5th highest of any London borough (9.0 per 100,000; 70 deaths), rate differences from almost all other boroughs were statistically insignificant.
- The suicide rate amongst Southwark's residents was statistically similar to neighbouring boroughs Lewisham and Lambeth.
- Likewise, the suicide rate for Southwark residents was statistically similar to London or England levels.

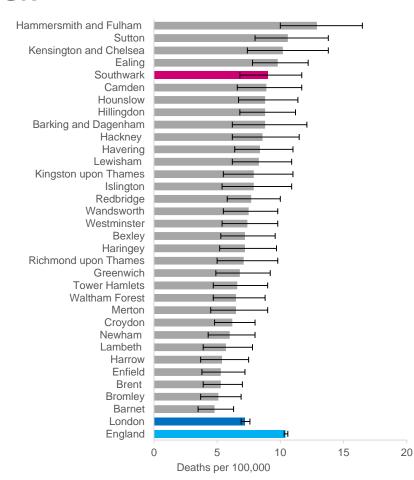


Figure 7: 3-year, age-standardised mortality rate per 100,000 residents from suicide and injury of undetermined intent, for 10+ yr olds in London boroughs, London overall and England, for deaths registered in 2019–21



Over the last 10 years, Southwark male suicide rates have been triple female rates

LOCAL PICTURE: SUICIDE BY AGE AND SEX

The Primary Care Mortality Dataset has data on all registered Southwark deaths.

- Over the last 10 years of data (2012 to 2021), suicide rates in Southwark residents were three times higher in males than females, overall and for under-30 yr, 30–59 yr and over-60 yr groups.
- Rates were lower in under-30 yr males than in older men; female rates were similar across age groups.
- 5-yr average suicide rates showed no statistically significant time trends, comparing 2008-12 to 2017-21, for 10-29 yr olds, 30-59 yr olds or 60+ yr olds; in 2017-21, rates were statistically similar for all three age groups.

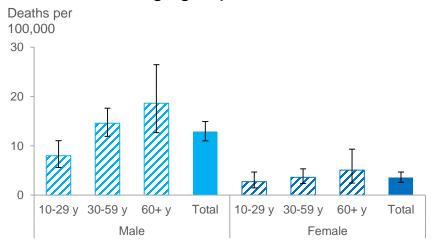


Figure 8: Total 10-yr Southwark suicide deaths per 100,000 residents by age group and sex, 2012 to 2021

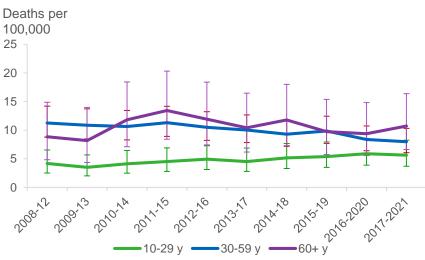


Figure 9: 5-yrly Southwark suicide deaths per 100,000 residents by age group, 2008-12 to 2017-21, by death registration year

- . Primary Care Mortality Dataset, NHS Digital, 2008–2021. Whiskers represent confidence intervals.
- 2. ONS, 2022. Mid-year population estimates.

10-yr suicide levels for more deprived neighbourhoods were statistically similar to those for less deprived areas

LOCAL PICTURE: SUICIDE BY DEPRIVATION

Address data within the Primary Care Mortality Dataset allows investigation of the link between deprivation and suicide rates.

- Over the 10 years 2012 to 2021, Southwark neighbourhoods classified in the 1st, 2nd and 3rd most deprived fifths of English neighbourhoods had suicide rates between 7.3 and 7.4 per 100,000, compared with a rate of 4.7 per 100,000 for neighbourhoods in the 4th and 5th fifths combined.
- Although levels for neighbourhoods in the 1st, 2nd and 3rd quintiles were over 50% higher than those for less deprived neighbourhoods, these differences were not statistically significant so may have been due to chance.

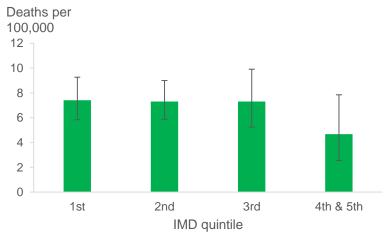


Figure 10: Total 10-yr Southwark suicide deaths per 100,000 residents by Index of Multiple Deprivation (IMD) quintile of residence, 2012 to 2021, by year of death registration (1st = most deprived; 5th = least deprived)

- 1. Primary Care Mortality Dataset, NHS Digital, 2008–2021. Whiskers represent confidence intervals.
- 2. ONS, 2022. Mid-year population estimates. Whiskers represent 95% confidence intervals.

Over the last 10 years, Southwark suicide deaths most commonly involved hanging or poisoning

LOCAL PICTURE: SUICIDE METHODS

Primary Care Mortality Dataset data also records suicide method.

- Over the 10 years from 2013 to 2022, hanging was the most common method involved in Southwark residents' suicide deaths, accounting for over two-fifths (44%) of deaths.
- Poisoning was the second most common method, accounting for over 1 in 6 (18%) deaths.
- Similarly, in 2021, across England and Wales, suicides most commonly involved hanging (58%) or poisoning (21%).

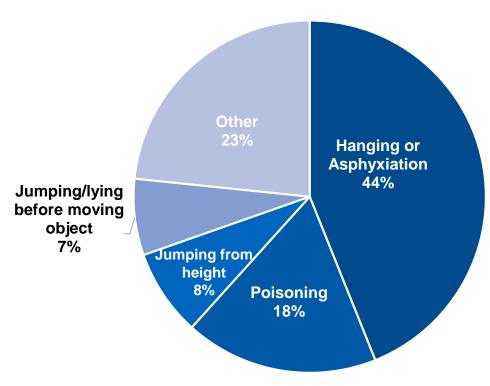


Figure 11: Percentage of suicide deaths in Southwark by method, 10-year total (2013 to 2022, by death registration year)

Slide 16

- Primary Care Mortality Dataset, NHS Digital, 2008-2019.
- 2. Suicides in England and Wales: Dataset. Office for National Statistics, 2022.

The RTSS dataset is jointly provided by the Metropolitan Police and Thrive LDN

LOCAL PICTURE: SUICIDE THRIVE LDN 1

Thrive LDN Real-Time Suicide Surveillance (RTSS) dataset

- The RTSS dataset includes real-time reporting of suspected suicides from the Metropolitan Police.
- It also includes non-statutory reporting from mental health providers and other services indicating whether individuals who have taken their own life were known to the respective services, and providing corresponding details.
- The dataset includes individual-level information, including age, sex, ethnicity, modality of death, area of residence, and location of suicide.
- Thrive LDN report that the dataset is believed to accurately capture the majority of suicides, through it is possible that some suicides within mental health provider settings are not captured.
- The dataset reports from January 2020 onwards.

According to the RTSS dataset, there were 51 suicides amongst Southwark residents between Jan 20 – Dec 21

LOCAL PICTURE: SUICIDE THRIVE LDN 2

Thrive LDN Real-Time Suicide Surveillance (RTSS) dataset

- For the period 1 January 2020 31 December 2021, there were 51 suicides reported in the RTSS dataset for Southwark residents.
- 24 were reported in 2021, contrasting with the 13 suicides that were registered in 2021 according to the ONS (slide 13).
- 75% of suicides involved men.
- 75% of people who took their own lives were white, 16% were Black, and 8% were Asian*

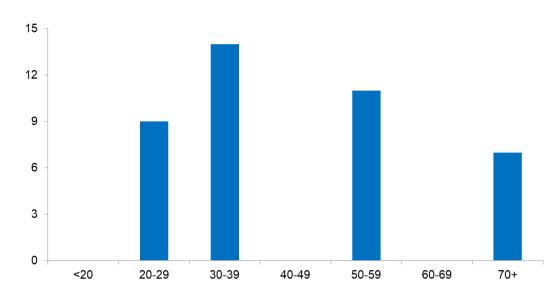


Figure 12: Number of suicides in Southwark by age group, 2020-21*.

*Figures removed for the <20 years, 40-49 years and 60-69 years age groups for confidentiality purposes owing to <6 suicides in each age group.



^{1.} Real-Time Suicide Surveillance Dataset, Thrive LDN, 2021

^{*} Note that while it would be possible to report intersectional data looking at combined effects of age, gender and ethnicity, these numbers cannot be reported due to confidentiality. National data on combined effects of age, gender and ethnicity can be found on slide 11.

Thrive LDN Southwark data for 2020-21 confirmed that hanging and poisoning were the most common methods

LOCAL PICTURE: SUICIDE THRIVE LDN 3

Thrive LDN Real-Time Suicide Surveillance (RTSS) dataset

- Thrive I DN data showed that hanging (42%) and poisoning (21%) were the most common methods involved in Southwark residents' suicide deaths in 2020-21.
- Suicides involving jumping from a height (9 cases) accounted for 17% of completed suicides – this was higher than the Southwark historical average and the national average amongst registered deaths.
- This may partly relate to a cluster of suicides in a single housing estate during this time period.

1. Real-Time Suicide Surveillance Dataset, Thrive LDN, 2021

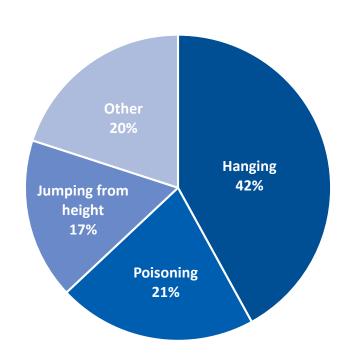


Figure 13: Suspected suicides in Southwark by method, 2020-21

Of people with suspected mental health problems dying by suicide, one-third were known to mental health services

LOCAL PICTURE: SUICIDE THRIVE LDN 4

The Thrive LDN Real-Time Suicide Surveillance (RTSS) dataset gives information from mental health services and police reports.

- In 2020-21, of Southwark residents dying by suicide who had a known or suspected mental illness, almost one-third (30%) were known to mental health services.
- Over one-fifth (21%) of all Southwark individuals dying by suicide in 2020-21 were reported to have disclosed suicidal ideation prior to death, most commonly to relatives, while one-eighth (12%) had a documented history of previous attempted suicide.
- Almost one-quarter (23%) of individuals had previously recorded contact with police, and over one-sixth (17%) had a reported history of drug use. (Police data is probably an underestimate as it relies on on-scene reporting.)

20 Southwark Council southwark.gov.uk

A serious incident report analysis revealed that more than half of serious incidents take place in the home

LOCAL PICTURE: SUICIDE ICS DATA

South-East London ICS Serious Incident Report

- South-East London CCG undertook an analysis of reports of serious incidents involving suicide and self-harm between January 2019 and September 2021 among people known to mental health services within South East London.
- This revealed that more than half of serious incidents took place in the home, with 38% of individuals having a documented history of suicidal ideation.
- The risk of a serious incident was highest in the 48 hours after being seen by a service, and persisted to 4-5 days after being seen.
- Individuals who died by suicide were more likely to be white, though ethnicity reporting was incomplete.
- The highest risk groups were males aged 46-55 years and females aged 46-55.

The Hackney and City team undertake enhanced surveillance of incidents involving bridges in London

LOCAL PICTURE: SUICIDE BRIDGE SURVEILLANCE DATA

Enhanced Surveillance Data for Bridges in London

- The Hackney and City team undertake enhanced surveillance of incidents involving bridges in London via reporting through the City of London Police and mental health personnel.
- The majority of incidents relating to bridges involve individuals living outside of London.
- Between 2019-21, 34 incidents involving bridges were reported to involve Southwark residents.
- The majority of these individuals were adolescents or young adults:
 - 6 individuals were aged under 20 years;
 - 18 individuals were aged 20-29 years;
 - 6 individuals were aged 30-39 years.
- The majority of incidents (24) involved two particular bridges.
- There were a greater number of incidents in 2021 (17 incidents) compared with 2019 (7 incidents) and 2020 (9 incidents).

Network Rail provide monitoring incidents involving the railway

LOCAL PICTURE: SUICIDE RAILWAY SURVEILLANCE DATA

Enhanced Surveillance Data for Southwark Overground Railway Stations on the Kent Line

- Network Rail provide monitoring of incidents involving the railway.
- They provide data on all incidents involving railway stations in Southwark, but do not record the borough individuals live within.
- In the six-year period 2015/16-2020/21, there were 62 incidents (range 7-14 incidents per annum) involving railway stations on the Kent Route in Southwark, including 5 suspected suicides.
- There was variation in the number of incidents at each station, with one station in particular experiencing over 4 times as many incidents as any other station
- Please note that data on deaths and serious injuries on the London Underground system is collected by the British Transport Police (BTP) and have been shared with Southwark Council since May 2023. However, this data is not currently available for publication.

CONTENTS

National picture	6
Local picture - suicide	12
Office for National Statistics (ONS) data	13
Primary Care Mortality Dataset (PCMD) data	14
Thrive LDN Real-Time Suicide Surveillance (RTSS) dataset	16
South-East London ICS Serious Incident Report	21
Enhanced Surveillance Data for Bridges in London	23
National Rail Surveillance Data for Southwark	24
Local picture – self-harm	25
Hospital Episode Statistics (HES) data	27
Case Note Review of Self-Harm A&E Attendances Among 10-24 year olds	30
Ongoing data monitoring	33



Southwark self-harm hospital admission rates doubled between 2010/11 and 2019/20, while London levels fell

LOCAL PICTURE: SELF-HARM TIME TREND

Previous OHID data gave information on hospital admissions of Southwark residents due to intentional self-harm.

- Between 2010/11 and 2019/20, admissions of Southwark residents to hospital due to self-harm more than doubled, from 59 per 100,000 to 123 per 100,000.
- Over these same years, admission numbers rose from 172 to 400.
- Between 2019/20 and 2020/21, Southwark rates decreased from 123 per 100,00 to 88 per 100,000 (270 admissions), probably affected by factors related to the Covid pandemic.
- Note that this data only reflects the minority of self-harm episodes that result in hospital admission, and relies on accurate clinical coding of selfharm episodes.

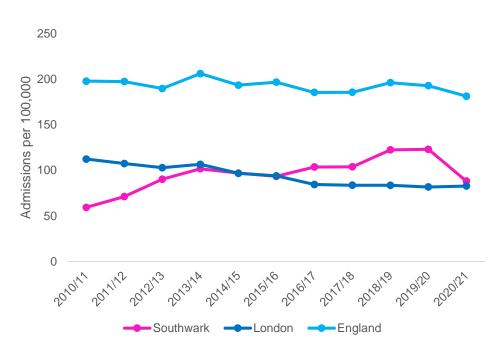


Figure 14: Directly age-standardised emergency hospital admission rate for intentional self-harm per 100,000, all ages, in Southwark, London and England, 2010/11 – 2020/21

Reference

Slide 25

Southwark.gov.uk

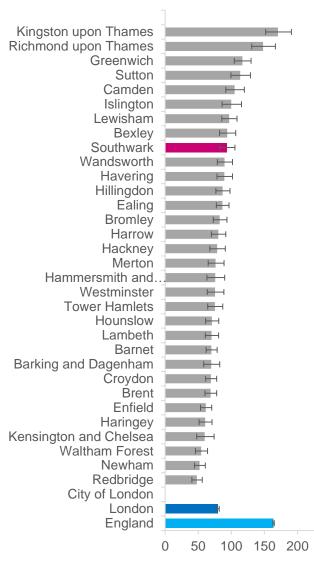
In 2021/22, Southwark ranked 9th across London boroughs for self-harm hospital admission rate

LOCAL PICTURE: LONDON SELF-HARM

OHID data shows that:

- In 2021/22, Southwark ranked 9th across all London boroughs for all-age hospital admissions for intentional self-harm (93 per 100,000 residents).
- Southwark levels were statistically significantly lower than the top 2 boroughs, and significantly higher than the 14 lowest boroughs.
- Southwark levels were significantly higher than London (80 per 100,000) but lower than England (164 per 100,000).

Figure 15: Directly age-standardised emergency hospital admission rates for intentional self-harm for Southwark residents, all ages, per 100,000 residents, for London boroughs, London and England, 2021/22



Self-harm admission rates for Southwark 10–24 year olds fell by over one-third between 2018/19 and 2020/21

LOCAL PICTURE: CYP SELF-HARM 1

Hospital admissions statistics show:

- In recent years, emergency hospital admission rates for intentional selfharm among children and young people (10-24 years) living in Southwark have fallen by over onethird, from 309 per 100,000 (170 admissions) in 2018/19 to 192 per 100,000 (104 admissions) in 2020/21 (note that 2020/21 figures may have been affected by COVID-19 pandemic related factors).
- Up to 2018/19, Southwark CYP selfharm admissions rates had almost tripled in 7 years, from 109 per 100,000 (62 admissions) in 2011/12 to 309 per 100,000 (170 admissions) in 2018/19.

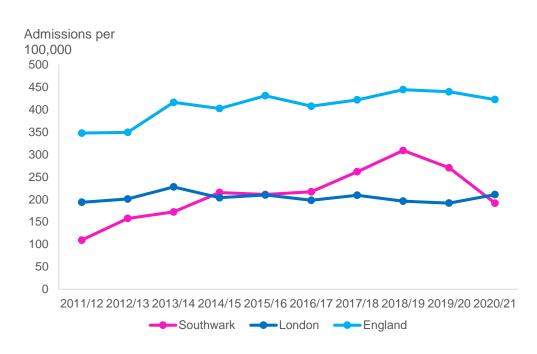


Figure 16: Emergency hospital admissions for intentional self-harm per 100,000 residents, among 10-24 year olds with in Southwark, London and England, 2011/12 to 2020/21

Reference

1. Office for Health Improvement and Disparities, 2021. Suicide Prevention Profile. Note: since publication of the above data, population numbers have been retrospectively revised based on Census 2021 findings, so 2021/22 rates are not comparable to the above data.



Hospital admission levels for self-harm are much higher in Southwark 15–19 yr olds than older or younger children

LOCAL PICTURE: CYP SELF-HARM 2

OHID self-harm hospital admissions data gives rates for different CYP age groups.

- In 2021/22, Southwark 15-19 yr olds had over double the rate of hospital admission for intentional self-harm (409 per 100,000 residents; 65 admissions) compared with younger and older children.
- Levels of admission for self-harm amongst 10 to 24 yr olds were more than double overall, all-ages self-harm admission rates.
- Southwark's 2021/22 hospital self-harm admission rates for all three CYP age groups were similar to London levels and lower than England levels.

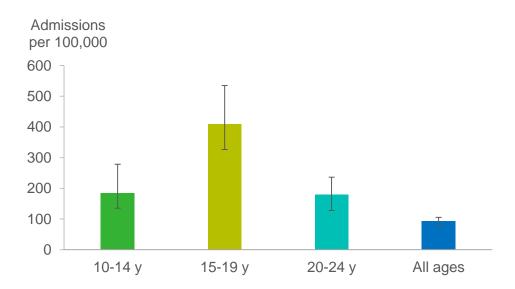


Figure 17: Hospital admissions of Southwark residents as a result of intentional self-harm, per 100,000 residents, for child and young person age groups and overall, in 2021/22

Southwark Council southwark.gov.uk

In 2019 SLaM and Southwark Public Health undertook a case note review of 100 patients aged 10-24 years

LOCAL PICTURE: SELF-HARM CASE NOTE REVIEW 1

Case Note Review of Self-Harm A&E Attendances Among 10-24 year olds

- In 2019, SLaM and Southwark Public Health undertook a case note review of 100 consecutive patients aged 10-24 years who attended A&E departments in Southwark due to intentional self-harm and who were reviewed by liaison psychiatry teams.
- 80% of patients had a history of mental illness, with 1/2 having a history of depression and/or anxiety and 1/4 having a history of personality disorder.
- 70% of patients had previously sought help for mental illness, with 30% being previously known to CAMHS and the remainder to primary/community care. 60% had a documented history of self-harm.
- 65% of presentations took place in the evening or overnight.
- Few patients were referred to community organisations.



In 2015-16, CYP A&E attendances for self-harm were commonly linked to low mood, school pressure and relationship issues

LOCAL PICTURE: SELF-HARM CASE NOTE REVIEW 2

A case note review of Southwark self-harm A&E attendances by 10-24 year olds between 2015 and 2016 gave information on what had prompted these injuries.

- In this review, the most common documented triggers for self-harm were:
 - Low mood (linked to 23% of A&E attendances)
 - School pressures (20%)
 - Relationship difficulties (20%)
 - Difficulties at home (17%)



The most common risk factors for self harm included parental separation and drug and alcohol use

LOCAL PICTURE: SELF-HARM CASE NOTE REVIEW 3

Case Note Review of Self-Harm A&E Attendances Among 10-24 year olds

- The most common background risk factors for self-harm were:
 - Parental separation (32%)
 - Alcohol or drug use (25%)
 - History of abuse (24%)

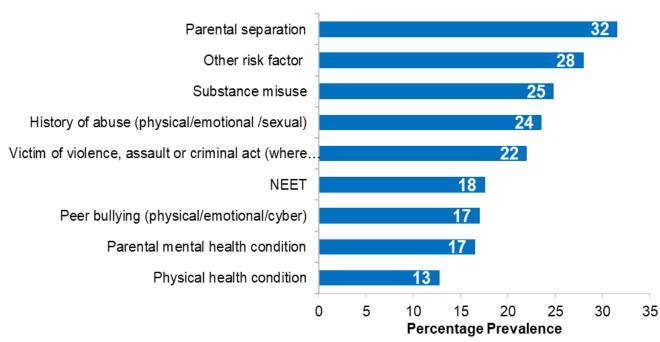


Figure 18: Documented risk factors for self-harm among 10-24 year old patients attending A&E departments in Southwark, 2015-2016



CONTENTS

National picture	6
Local picture - suicide	12
Office for National Statistics (ONS) data	13
Primary Care Mortality Dataset (PCMD) data	14
Thrive LDN Real-Time Suicide Surveillance (RTSS) dataset	16
South-East London ICS Serious Incident Report	21
Enhanced Surveillance Data for Bridges in London	23
National Rail Surveillance Data for Southwark	24
Local picture – self-harm	26
Hospital Episode Statistics (HES) data	27
Case Note Review of Self-Harm A&E Attendances Among 10-24 year olds	30
Ongoing data monitoring	33



Public health will provide annual data reports to the suicide prevention stakeholder group

ONGOING DATA MONITORING

Source of local data	Data to be included in annual reporting	Time period
Office for National Statistics	 Numbers of suicides and comparison of suicide rate with London, England and other London boroughs Suicide death registration delay 	Annually
Primary Care Mortality Dataset	 Rate of suicide by age, sex and Index of Multiple Deprivation (IMD) quintile of residence Percentage of suicide deaths by means of suicide 	Annually
Thrive LDN real-time suicide surveillance dataset	 Total number and rate of suicide in Southwark by age, sex, ethnicity, modality of death, area of residence, and location of suicide Information on whether individuals were known to mental health services, the police and/or substance misuse teams 	Biannually
SEL ICS Serious Incidence Report for SLaM	Number of serious incidents involving self-harm, attempted suicide or suicide among mental health (SLaM) service users	Annually
Drug and Alcohol team	Number of suspected suicides among individuals known to drug and alcohol services	Annually
British Transport Police and Network Rail monitoring of railway and underground incidents	 Incidents on rail or underground resulting in death or serious injury, including information on location, age, gender, previous suicidal behaviour, and who intervened. 	Annually
Hospital Episode Statistics dataset	 Rate of admissions for intentional self-harm, by time point and age group 	Annually

Find out more at southwark.gov.uk/JSNA

People & Health Intelligence Section Southwark Public Health





