

THRIVE LDN SUICIDE PREVENTION: Bereavement support briefing

Author: Gabriella Baker, Suicide Prevention Lead, Thrive LDN

Contact: gabriella.baker@nhs.net

Context

There is a recognition that due to the extreme challenges posed by the COVID-19 pandemic, there is an increased risk of suicides across London and the UK; this risk is due to a number factors including self-isolation, health anxiety, economic impact, and increased stress.

The Thrive LDN Suicide Prevention Group was established in 2017 to share knowledge on suicide prevention and develop pan-London prevention projects. The Group is chaired by Dr Phil Moore and Dr Sangeeta Mahajan and consists of 48 members from 36 organisations. The Group has several pan-London projects underway, including a national-first Suicide Prevention Information Sharing Hub to share information on suspected suicides and, at a later stage, attempted suicides.

One of the key objectives of the Information Sharing Hub is to support implementation of bereavement support following a suspected suicide. A mapping exercise carried out by Thrive LDN revealed a lack of consistency in bereavement services by locality, and the hub could help usefully direct bereavement services to those who are recently bereaved by suicide, and thus more at risk of suicide themselves¹.

Significant progress has been made on the Information Sharing Hub despite COVID-19. The system has been collecting live information as of April this year, with all 12 Basic Command Units (BCUs) across London now uploading. Data entry has become significantly more detailed and consistent, aided by continual enhancements to the system's usability based on stakeholder feedback.

In relation to bereavement support, the Metropolitan Police Service have undertaken initial training of half their officers on bereavement support information uploads to the Information Sharing Hub. South West London, North West London and North Central London Sustainability and Transformation Partnerships (STPs) have received trailblazer funding to implement sub-regional suicide bereavement services, with North East London and South East London eligible to receive funding next year. Thrive LDN will continue to support utilisation of the Hub to provide appropriate bereavement services to individuals most in need. Accordingly, local authorities can now access relevant cases in real-time to inform bereavement support provision.

Bereavement support subgroup

Thrive LDN has additionally convened a Bereavement Support subgroup to work with partners in supporting those bereaved throughout the COVID-19 pandemic. Whilst this will interlink with wider bereavement support work underway at Thrive LDN, particular focus groups include:

¹ Latham, A. E., & Prigerson, H. G. (2004). Suicidality and bereavement: complicated grief as psychiatric disorder presenting greatest risk for suicidality. *Suicide and Life-Threatening Behavior*, *34*(4), 350-362.

- Those bereaved by suicide in this period, and those who have previously been bereaved by suicide, whose grieving cycles have been disrupted.
- Those who are bereaved by COVID-19 and other illnesses and have had their grieving cycle disrupted.
- Health workers who require support after witnessing patient deaths.

Aims and objectives

The group will identify and promote a range of bereavement services to support those grieving at this time, utilising Thrive LDN and partners' websites and communications channels. Initial discussions have also taken place regarding the production of a Thrive LDN Bereavement Support toolkit, which will outline the support that is available for different vulnerable groups at varied levels of intensity. Suggested focus topics include:

• Social support guidance

A wealth of bereavement services exist, but guidance for friends and family of the bereaved could be helpful to ensure they recognise when a bereaved individual would benefit from further support. In turn, advice as to when to seek help themselves and how to support a bereaved individual are vital.

Peer-to-peer support

There is recognition that increased use of digital communications presents an opportunity to connect individuals with others who are bereaved under similar circumstances. Bereavement organisations have observed significant increases in the usage of helpline and online chat functions. Promotion of peer-to-peer support via these platforms might thus be an opportunity to extend the efficacy and reach of existing services.

STP Mental Health Leads are invited to contribute to the work of the Bereavement Support subgroup through attendance at meetings, or through recommendations of appropriate partner organisations.

Current support for the bereaved

Local support

The Support After Suicide Partnership (SASP) has partnered with AtaLoss.org to help individuals find local bereavement support, specific to the circumstances and nature of their loss. This helps ensure individuals and their families can access the most appropriate forms of support, when and where they need it. Please visit the SASP website or AtaLoss.org for more information.

Providing social support

SASP provide a free support guide called <u>Finding the Words</u> which contains thoughts and ideas on how to support friends, family or colleagues who are recently bereaved by suicide.

Sudden bereavement

Hospitals and police forces can refer people bereaved in sudden ways (including by COVID-19 and any sudden illness, incident, or suicide), from day one of bereavement, into a new, government-funded, England-wide, professional, free and specialist sudden bereavement service (set up as a pandemic response and for the long term). Sudden provides free support and advocacy for up to 10 weeks, with a focus on safeguarding and wellbeing outcomes. Please visit www.sudden.org or email help@sudden.org for more information.

Support with inquests

The Coroners' Courts Support Service continues to provide support and guidance on the inquest process via their national helpline 0300 111 2141 or helpline@ccss.org.uk.