perfect care statistics study information
Suicide prevention
crisis research risk **self-harm**
assessment resources

NHS
Mersey Care
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Please visit https://www.evidentlybetter.org/bulletins/suicide-prevention/ to view our webpage featuring key links and emerging reports about suicide prevention.

Studies

[Just living and coping: the cost-of-living crisis and the nation's mental health](#)
The effects of the crisis may be felt for some time to come. For many, it risks a legacy of missed opportunities (in education and career options), hopelessness about the future, loneliness and isolation. People in problem debt are three times as likely to have thought about suicide in the past year.

[Suicide-related internet use among mental health patients who died by suicide in the UK: a national clinical survey with case–control analysis](#)
The findings affirm Suicide-related internet use (SRIU) as a feature of suicide among patients of all ages and highlight that clinicians should inquire about SRIU during assessments. Importantly, as the most common type of SRIU can expand knowledge on suicide means, clinicians need to be aware of the association between SRIU and choice of methods.

[Exploring General Practitioners' Management of Self-Harm in Young People: A Qualitative Study](#)
Negative attitudes towards self-harm within clinical settings are well documented, but GPs said they took self-harm seriously, listened to young people, sought specialist support when concerned and described appropriate ways to help young people avoid self-harm. GPs felt that relationship-based care is an important element of self-harm care but feared remote consultations for self-harm may impede on this. There is a need for brief GP-led interventions to reduce repeat self-harm in young people.

[Sociodemographic Factors and Presentation Features of Individuals Seeking Mental Health Care in Emergency Departments: A Retrospective Cohort Study](#)
Dominant help-seeking dynamics for MH conditions in ED are characterised by two main themes: Suicidal ideation and access and egress pathways. A high proportion of consumers had previously accessed MH services, demonstrating the high demand within the community for MH services, with the most common presenting problem being suicidal ideation.

[Older Adult Self-Harm: A Descriptive Study](#)
The study highlights distinct characteristics of older adult self-harm, with multiple factors contributing to self-harm in addition to mental illness. Older adult populations commonly face challenges of social isolation, loneliness, life event and bereavement, and there is ongoing need to expand community and psychology support for older adults. Multiagency collaboration from specialist mental health services will enable effective use of local resources for holistic management of contributory problems to self-harm by promoting protective factors and reduce risk factors for self-harm in older adults. Older adults have frequent contacts with different services and every contact provides a potential opportunity to intervene and prevent self-harm.

Report

[Creating conditions for learning from deaths and near misses in inpatient and community mental health services: Assessment of suicide risk and safety planning](#)

This interim report highlights the importance of taking a person-centred approach to biopsychosocial assessments and safety planning for patients in mental health inpatient units and community mental health teams, and of stopping the use of risk assessment tools that stratify an individual's risk of suicide or self-harm as low, medium or high.

Series

[A public health approach to suicide prevention](#)

The Series, A public health approach to suicide prevention, published in The Lancet Public Health argues that a change in the narrative is needed to move from presenting suicide as a mental health issue to also acknowledging the impact of social factors, such as poverty, debt, addictions, homelessness, abuse, discrimination and social isolation, on a person's decision to consider suicide. The Series highlights how clinical treatment services are critical for people in a suicidal crisis, but upstream measures that address social factors must also be included in national suicide prevention strategies to prevent people reaching crisis point. Tackling the social factors which contribute to suicide requires a policy re-set with a whole of government commitment for suicide prevention efforts – a "suicide prevention in all policies" approach.

Online Training

[NEW ZSA Suicide Awareness Training now available](#)

Zero Suicide Alliance have updated their Suicide Awareness Training. In version 2 you'll find:

- updated introductory content
- new scenarios and buddy who takes you through the learning
- improved functionality
- updated look and feel
- a new training certificate

News

[SANE calls for lasting change as landmark public inquiry begins to examine mental health patient deaths](#)

[The Lampard Inquiry](#), chaired by Baroness Kate Lampard CBE, is investigating the circumstances surrounding the deaths of up to 2,000 mental health inpatients under NHS care in Essex between 1 January 2000 and 31 December 2023.

[Suicide crisis syndrome: a specific diagnosis to aid suicide prevention](#)

Over the last decade, several independent research teams have documented the existence of specific acute mental states associated with emergence of suicidal behavior. However, neither the DSM nor the ICD ever carried a diagnosis referring to these states. The suicide crisis syndrome (SCS) aims to fill this gap in psychiatric nosology and is under review for inclusion in the DSM. This diagnosis provides a systematic tool for recognizing and treating a mental disorder presenting imminent suicide risk without relying on self-reported suicidal intent.