The Scottish Suicide Information Database Report 2014: July 2014 Revision

Based on 2009-2012 death registrations

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About this Release

This publication is a revision of the Scottish Suicide Information Database (ScotSID) report published on 29 April 2014. The revised report includes findings based on newly-released data on psychiatric hospital inpatient/day case records up to December 2012, added to the April report and includes minor corrections made in October 2014.

Key Points

The April 2014 report on the 3,059 people whose deaths from ‘probable suicide’ (intentional self-harm and undetermined intent) were registered in Scotland between January 2009 and December 2012 included details of who they were, where they lived and what happened. The already-published findings on previous contact with health services are repeated below, along with new results (in red italics) on previous psychiatric inpatient care, to complete the picture.

- Over half (59%) of the Scottish residents in ScotSID had at least one mental health drug prescription dispensed in the community within the 12 months before death. This suggests that they were receiving care for a mental health problem or illness from a healthcare professional such as their GP or staff at an outpatient clinic.
- At least 20% had been offered a psychiatric outpatient appointment during the 12 months before death; records show that 16% attended their appointment and 4% did not attend.
- **Around 13% had been a psychiatric inpatient/day case discharged within 12 months prior to death. Most of these (87%) had been admitted on a voluntary basis.**
- Nearly one-third of all cases (32%) had been an inpatient/day case in a general hospital within the 12 months before death, and 14% of all cases had had a diagnosis of injury/poisoning. Over half of these patients (9% of all ScotSID cases) were recorded as having intentionally self-harmed.
A&E records showed that 17% attended A&E in the 30 days before death, and 26% attended within the three months before death. These figures exclude attendances which were likely to have resulted from the suicidal act.

ScotSID analyses will be developed further to examine healthcare pathways and contact with more than one health service, and to identify further characteristics of individuals with particular risk of suicide. This information will assist health professionals and others to identify opportunities for intervention to reduce future loss of life through suicide.

Background

‘Probable suicide’ deaths in this report are of people aged 5 years and over, and are coded as ‘intentional self-harm’ and ‘undetermined intent’. The latter category is based on old coding rules as defined by NRS. More information can be found on the NRS website.

The overall aim of ScotSID is to provide a central repository for information on all probable suicide deaths in Scotland, in order to support epidemiology, policy-making and suicide prevention.

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Further Information

Further information can be found in the full ScotSID report [1000Kb].

The datasets on both psychiatric inpatient/day case discharges and psychiatric outpatient appointments used in the report are known to be incomplete, leading to a potential underestimate of the prior contact with these services.

Psychiatric hospital inpatient/day case records up to 31 March 2013 became available for selected analyses on 29 July 2014, following the publication of Mental Health Hospital Inpatient Care: Trends up to 31 March 2013: Interim report for selected NHS boards of treatment.

In October 2014, an error was discovered in the number of deaths from probable suicide of Scottish residents in 2010-12, which in turn impacted on figures on mental health drug prescribing in the community and A&E attendances. These have now been corrected. This does not affect the overall interpretation or conclusions to be drawn from the data.

About ISD

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