

National Confidential Inquiry

into Suicide and Safety
in Mental Health

Annual Report 2025:
Easy Read version

About this document



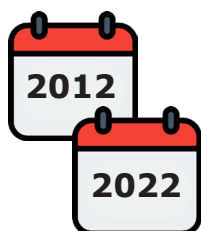
This report uses easy words and pictures



This report will tell you about our work and what this means for you



This report is about suicide and you may find it upsetting. You may want to read this report when someone else is with you



It tells you about people who died by suicide between 2012 and 2022

Introduction



We collect information about all people in the UK and Jersey who die by suicide when they have been cared for by mental health services



This information helps us understand what was happening in people's lives, and what care they had from mental health services before they died



We collect this information so we can make services safer for people who are cared for by mental health services



Every year we write a report about people who died by suicide and were cared for by mental health services before they died. We call these people patients

What we did



We collected information on people who died by suicide between 2012 and 2022 and who had been cared for by mental health services in the year before they died



This year we also asked people in mental health services to tell us as soon as they knew when someone they cared for died by suicide on a ward or very soon after they went home



This is a new way of getting information and lets us see what is happening as it happens. This is called Real-Time Surveillance



This information came from the people in mental health services who care for patients

What we found



Every year in the UK and Jersey around 6,000 people die by suicide



3 in 4 people who died were men

Suicide by patients



More than a quarter of people who died by suicide had been cared for by mental health services in the year before they died



Nearly half of patients who died lived alone

Suicide by patients



Nearly half of patients who died were unemployed



A fifth of patients had problems with money



Using alcohol and drugs in a harmful way was common



1 in 10 patients used the internet to talk about or learn about suicide

Mental health care



More than a quarter of patients who died by suicide had been staying in hospital, had recently left hospital or were being seen by a home treatment team



2 in 5 patients who died when they were in hospital died on the ward

Real Time Surveillance



People in mental health services told us about 67 people who they cared for who died by suicide on a ward or very soon after they went home



2 in 3 patients who died were on a mental health ward when they died



A third of these patients were on wards far away from their family and friends

Patients with a diagnosis of bipolar disorder



There were 136 deaths every year by patients who had a diagnosis of bipolar disorder. These patients were often female, older and lived alone



1 in 10 patients felt bad or put weight on when taking medication. This stopped them taking their medication

Patients who missed appointments and/or did not take their medication



There were 347 deaths every year by patients who did not see a doctor as planned and 182 deaths by those who did not take their medication

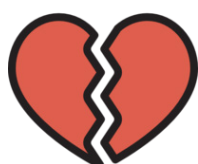


Over half of these patients had more than one mental health illness



Using alcohol and drugs in a harmful way was common

Patients who were upset by the recent death of someone they knew



There were 119 deaths every year by patients who were upset by the death of someone they knew



1 in 5 of these patients were aged over 65. Many were widowed and lived alone



Over half of these patients found sleeping difficult. 1 in 3 used alcohol in a harmful way

What these findings mean to you

If you are cared for by mental health services



If you have been staying in hospital, when you go home you should be seen by someone from your mental health team within the first 3 days



When you go home you should be told how to get crisis support if you feel unwell again

Real-Time Surveillance



We can get information early and this helps us understand what is happening and make changes quickly

If you have a diagnosis of bipolar disorder



If you have bipolar disorder you should be given the best treatment for you. This might be medication or talking therapy or both

If you missed an appointment and/or did not take your medication



If you do not go to appointments or take your medication your mental health team should try to get in touch with you, and might talk to your family

If someone you cared about has died



Talking about how you feel with special support services will help. When planning your care you should be helped to get support from these services

More information



You can read the [non-easy read report here](#)



You can watch a [short video about the report here](#)



If you have any questions you can email us at ncish@manchester.ac.uk



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