



# School Suicide Intervention Policy

**Updated September 2021**

Approved by HLC Governing Body: **Scheduled 30<sup>th</sup> September 2021**  
Next Review due: **September 2022**

## **Contents**

1. Statement of Purpose.....	1
2. Underlying Principles.....	1
3. Our Beliefs about Suicide and its Antecedents.....	2
4. Suicide Intervention is Everyone’s Business .....	3
5. Our Team and its Responsibilities .....	4
6. Ongoing Support and Development of our Policy and Practice.....	5
7. Sources of Support.....	6
Appendix A – Papyrus advice for staff.....	7
Appendix B – How adults can support young people bereaved by suicide.....	15
Appendix C: Suicide Safety Plan.....	17

## 1. Statement of Purpose

Hadley Learning Community is aware that:

1. Suicide is the **leading cause of death** in young people and higher in areas of socio-economic deprivation.
2. We play a vital role in helping to **prevent** young suicide and removing the myth and stigma around suicide.
3. Suicide is a preventable and avoidable death and all of us can do something about it. We believe that we can all make a difference by reaching out and talking to someone we are concerned about.
4. We want to make sure that children and young people at Hadley Learning Community are as suicide **“safe as possible”** and that our governors, parents and carers, teaching staff, support staff, pupils themselves and other key stakeholders are aware of our commitment to be a suicide-safer school at Hadley Learning Community.

## 2. Underlying Principles

Hadley Learning Community is aware that:

1. We must **improve connectedness**. A child or young person who is contemplating suicide may not feel able to access the support of those around them. This may be because of fear, perceived rejection, a sense of shame or embarrassment, or because they fear that they may need to share whatever is causing their thoughts of suicide. They may find it difficult to open up.
2. It is important to provide **safe spaces and alternative opportunities** for school children to **share their story**. It is important to use language that protects and provides safety and to **cultivate an environment** where nothing is so secret that it can't be shared.
3. It is important to ensure that the physical environment of our school is as safe as possible and we must **reduce access to means**. The removal of potential ligature points, restricting access to places which facilitate jumping. Making sure classroom items such as scissors/compasses/pencil sharpeners\* (\*please be aware that pencil sharpeners have in some cases reported as having been tampered with and blades accessed and shared for self-harm) are monitored when in use and safely secured when not in use. Also, the removal of harmful substances from public areas. All these are considerations of how **to reduce access** to potential means of suicide, this will form part of any health & safety risk assessment.
4. Hadley Learning Community will adopt the three underlying principles of **SEE-SAY-SIGNPOST**:

- See – see the problems you observe
  - Say – say the word ‘suicide’ to avoid any misunderstanding
  - Signpost – signpost to support and inform the DLS
5. Nominated staff members will undertake the **20 minute ZerOSuicide Online Training** module <http://zerosuicidealliance.com/> (completed by LR (MHL) 1/9/20)

### **3. Our Beliefs about Suicide and its Antecedents**

Hadley Learning Community acknowledges that:

1. Suicide is a **preventable and avoidable** death
2. Suicidal thoughts are **common**
3. **We acknowledge** that thoughts of suicide are common among young people.
4. Suicide is **complex**
5. We believe that **every suicide is a tragedy**. There are a number of contributory factors surrounding a suicide and the reasons are often complex and individual to that person. However, we believe that there are lessons that may be learned from each death that may help prevent future deaths.
6. Stigma inhibits learning and **stigma can kill**. We recognise that the stigma surrounding suicide and mental illness can be both a barrier to help seeking and a barrier to offering help.
7. Hadley Learning Community is committed to **tackling suicide stigma**. In our language and in our working relationships, we will promote open, sensitive talk that does not stigmatise and perpetuate taboos. This will include avoiding the use of language which perpetuates unhelpful notions that suicide is criminal, sinful or selfish.
8. We know that **unhelpful myths and misconceptions** surrounding suicide can inhibit young people in seeking and finding appropriate help when it is most needed.

#### 4. Suicide Intervention is Everyone's Business

1. As a school, we recognise that pupils may seek out someone whom they trust with their concerns and worries. **We want to play our part in supporting any pupil** who may have thoughts of suicide and training for staff will be provided through CPD and it is anticipated that teachers will deliver lessons in suicide prevention to students through our planned PSHCE curriculum.

2. **Safety is very important**-We know that pupils who are having thoughts of suicide may or may not also be behaving in a way that puts their life in danger (suicide behaviours). School children experiencing suicidal thoughts are potentially at risk of acting on these thoughts.

3. Those who are already engaging in suicide behaviours are also clearly at risk of death or harm. Hadley Learning Community wants to **work with our pupils** who may be thinking about suicide or acting on their thoughts of suicide.

4. We want to support them, sometimes **working in partnership** with family, caregivers and other professionals where this may enhance suicide safety.

5. **Suicide is a difficult thing to talk about**. We know that a child or young person who is suicidal may find it very difficult to make their feelings known and speak openly about suicide. We will equip adults with the **skills to identify** when a pupil may be struggling with thoughts of suicide. These adults will be trained to keep our young people **suicide-safe "as is possible"**.

6. **Talking about suicide does not create or worsen risk**. We will provide our pupils with opportunities to speak openly about their worries with people who are ready, willing and able to support them. We want to make it possible for school children and young people, and those who support them at Hadley Learning Community to do so safely.

7. It is important to **be direct**. Using the word suicide does not put the thought in someone's head or make it more likely to happen. Being direct reduces the chance of misunderstanding. The feelings that drive suicide are temporary, but ending their life by suicide seems like the only option left to them. It is a permanent solution to a temporary problem.

8. When someone says they are thinking about suicide, we do need to **take them seriously**. But we also need to know that there are other options. This will be in a way that leads to **support and help** where this is needed. We will do all we can to refrain from acting in a way that stops a pupil seeking the help they need when they are struggling with thoughts of suicide.

9. Hadley Learning Community recognises that **suicide bereavement has been described as "grief with the volume turned up"** the effects on families, communities and society are devastating and tragic. It is estimated that each individual death will impact on at least 20 other people. Hadley Learning Community

will support in any way we can, and the link below will be signposted as appropriate:  
[http://www.petesdragons.org.uk/Bereavement\\_Support\\_2369.aspx](http://www.petesdragons.org.uk/Bereavement_Support_2369.aspx)

## 5. Our Team and its Responsibilities

1. Our governors and leadership team at Hadley Learning Community will be clear about how we will respond in the event of a suicide. Each member of our named Designated Safeguarding Leads (DSL's), SENDCo and Mental Health Lead (MHL) will have a **defined responsibility** within our plan including leadership, family liaison and any communications with external agencies, including the media. This commitment and reporting for assistance from outside agencies, when needed, will go hand in hand with our main Child Protection & Safeguarding in School Policies.

In the event of a suicide, HLC will have a Suicide Postvention Team whose role it is to respond. Each member of the team will have a defined responsibility within our plan including leadership, family liaison and any communications with external agencies, including the media:

- Magda Farley (DSL, Assistant Head) – liaison with external agencies
- Laura Bowen (Student Support Manager) – support for students
- Louise Reilly (Mental Health Lead) – support for staff
- Paul Roberts (Executive Principal) & Daniel Roycroft (Headteacher) – communication and liaison with families
- Paul Roberts (Executive Principal) – communication with the media if appropriate

If a student is bereaved by suicide we will endeavour to support them in school and use both internal counselling support and external agencies. See Appendix C for details.

2. We will have a clear picture of who has received general suicide awareness education and commit to this being refreshed periodically. This team will be drawn from across the whole school community, not just from one department.
3. We will have a clear policy about how staff should work together where thoughts of suicide or suicide behaviours are known among our young people. We will manage the sharing of information in a way that enhances safety.
4. We will support authorities if there is an inquest after someone has died by suicide in our school but will be mindful of the distress an inquest causes to the bereaved people. We will also be mindful of the impact supporting an inquest can have on staff. Further details are available:  
<https://www.gov.uk/government/publications/child-death-review-statutory-and-operational-guidance-england>

**5.** We will record and monitor deaths by suicide and the impact on the community and share anonymised information at the Academy Trust review. This will include on-going monitoring of student deaths including suicides, suspected suicides and self-harm. Monitoring of self-harm is done through a collection of information from CPOMS, external services and information disclosed by students.

**We will also:**

- Provide information about services/sources of bereavement support to students after a suicide. Surveying students regarding how supported they feel.
- Assessing the impact of interventions on staff.
- Reviewing lessons learned and any suggested changes to procedures and provisions of well being services.
- Identification of multiple events, such as two suicides in a relatively short period of term (e.g. one term) which may indicate a possible suicide cluster, including investigating possible connections between individuals, their circumstances and their suicidal behaviour. Multiple suspected suicides may not be connected, but may contribute, in some vulnerable individuals, to thoughts of suicide as a way of dealing with problems. Where concerns arise regarding a possible suicide cluster we will immediately communicate with the local authority Public Health Suicide Prevention Lead and collaborate closely with them to develop a response plan.

## **6. Ongoing Support and Development of our Policy and Practice**

Our Governors and Leadership Team at Hadley Learning Community will keep our practice up to date by maintaining contact with best practice and on-going training. Hadley Learning Community has a named individual, our Mental Health Lead (Louise Reilly), who is responsible for the design, implementation and maintenance of this policy. Louise Reilly will lead on providing access to suicide awareness advice for staff. (See Appendix A)

## 7. Sources of Support

**Samaritans** – the Samaritans' mission is to reduce the incidence of suicide by alleviating despair, isolation, distress and suicidal feelings among individuals in our community, 24 hours a day; to educate the public about suicide prevention ; and to reduce the stigma associated with suicide.

**PAPYRUS Prevention of Young Suicide** – provides information, training, and support for young people to lead prevention.

**Hub of Hope** – A resource for those needing someone to talk to. Put in your post code and it locates close-by resources.

**CALM Campaign Against Living Miserably** – dedicated to preventing male suicide, the single biggest killer of men under the age of 45 in the UK.

**SANE** – improving the quality of life for anyone affected by mental illness.

**National Suicide Prevention Alliance** – an alliance of public, private, and voluntary organisations in the England who care about suicide prevention.

## **Appendix A – Papyrus advice for staff**

As staff we will do our best to support students but we are not experts. Our aim as a school is to keep students “safe for now” while that young person, their parents/carers and school work to secure specialist help for them.

### **What do I do when I have concern about a school child?**

#### **Q: What do I do when I have a concern about a young person?**

A: A concern is just that. It is not a judgement or an outcome; it's a concern. Whatever it is that makes you worried or questioning about the young person, may well be worth exploring. This may include a conversation with other adults (staff/parents/carers) but it is very important that the young person is your central focus. Check out how the young person is by communicating directly with them. Let the young person know what you are concerned about. What have you seen (do they seem sad or not their usual self?) What have you heard them say that makes you concerned? Is your instinct telling you that something is concerning?

#### **Q: How will I know if a young person is suicidal?**

A: If young people are having thoughts of suicide, they will usually find a way to communicate this. This is unlikely to be an explicit verbal communication about suicide. Few young people feel that they can be open about suicidal thinking or tell someone when they are struggling with their emotional health and wellbeing. When suicide is part of a young person's thinking, they usually show this in their behaviour, in how they interact and in how they communicate. It is not possible to provide a definitive checklist of things to look out for to help to identify a young person who is thinking about suicide. Every young person is different. However, when you notice changes in the way a young person is behaving or communicating, and it is causing you concern, you must explore your concern with them.

In order to find out if a young person is suicidal the most effective way is to ask them student directly if they have thoughts of suicide and if they do, you should ask if they have any specific or firm plans to take their own life. If you do not feel able to ask this question, or you know that there is already concern/knowledge about the student, then please liaise with/seek assistance from the Suicide Intervention Team.

#### **What things can I look out for?**

The first step in talking about suicide is recognising that a young person may be at risk. There is no definitive guide on how to know if somebody is thinking about suicide because anybody can be at risk – however there are some things you can look out for.

Often young people thinking about suicide will have experienced a stressful event associated with a feeling of loss. This might be something others might consider to be small but hold great meaning for them, for example the loss of a family pet, or they might have experienced a life event such as parent

separation, bullying or domestic abuse.

People who are experiencing thoughts of suicide give out 'invitations' to ask for help. Invitations are signs of distress that invite help. Anything the person at risk says, does or makes you feel might be an invitation. Accept invitations: follow your intuition; explore the meaning of things you seen and hear. Invitations could be:

**Actions:**

- Giving away possessions;
- Withdrawal (family, friends, school);
- Loss of interest in sports and leisure;
- Misuse of alcohol, drugs;
- Impulsive/reckless behaviour;
- Self-harm;
- Extreme behaviour changes.

**Physical:**

- Lack of interest in appearance;
- Disturbed sleep;
- Change/loss of appetite, weight
- Physical health complaints

**Words:**

- "All of my problems will end soon."
- "No one can do anything to help me now."
- "Now I know what they were going through."
- "I just can't take it anymore."
- "I am a burden to everyone."
- "I can't do anything right."
- "I just can't think straight anymore."

**Feelings:**

- Desperate;
- Angry;
- Guilty;
- Worthless;
- Lonely;
- Sad;
- Hopeless;
- Helpless.

Almost anything could be an indicator and often the key is that if something feels not quite right it is worth trusting your intuition and exploring what might be happening for the young person.

**How do I ask about suicide?**

Ask them directly, "Are you thinking about suicide?" By using the word

suicide, you are telling them that it's OK to talk openly about their thoughts of suicide with you. You could also say:

- "Are you telling me you want to kill yourself/end your life/die/die by suicide?"
- "It sounds like you're thinking about suicide is that right?"
- "Sometimes, when people are feeling the way you are they think about suicide. Is that what you're thinking about?"
- "It sounds like life feels too hard for you right now and you want to kill yourself, is that right?"

If they are not having thoughts of suicide, that's OK. They will tell you so. If you are still concerned, then keep exploring why your concerns remain until you are clear that suicide is not part of their thinking. If they are not having thoughts of suicide, nothing is lost by having the conversation; you will have developed suicide-safety for and with that student now and for the future. You may have other actions to follow up on which help them with other issues arising from the conversation.

If a young person indicates that they have been thinking about suicide, listen and allow them to express their feelings. They will likely feel a huge sense of relief that someone is willing to hear their darkest thoughts without judgement. Reassure them that they are not alone and you can look for support together. Let the young person know that there is help and hope. NOTE not everyone is ready to open up straightaway.

Don't ask about a suicide plan until you have explored their thinking. Be patient. Don't suggest "what about..." Be persistent but wait for their turning point. You will feel it.

### **How do I talk about suicide safely?**

Here are some ways you can continue a conversation about suicide in a reassuring, safe way:

- "It's not uncommon to have thoughts of suicide. With help and support many people can work through these thoughts and stay safe."
- "There are organisations that offer support like POPYRUS HOPELineUK. I can give you their contact details."
- "You've shown a lot of strength in telling me this. I want to help you find support."
- "There is hope. There is help available and we can find it together."
- "It sounds as though things are really hard at the moment... Can you tell me a bit more?"
- "Things must be so painful for you to feel like there is no way out. I want to listen and help."
- "Take your time and tell me what's happening for you at the moment."

- “It’s hard and scary to talk about suicide but take your time and I will listen.”
- “Can you tell me more about why you want to die?”
- “I am so sorry you’re feeling this way. Can you tell me more about how you are feeling?”
- Think about the tone of voice you use and allow plenty of time for the young person to answer and also for there to be periods of silence.
- Be led by the young person and the pace that they want to have the conversation.
- Ask if they have any active plans to take their own life.
- Ask if they want to die or whether they just want whatever is happening in their life to stop/feel better. A positive answer to the latter can be very reassuring for staff and parents alike.

### **How are self-harm and suicide related?**

**Q: “I know that a young person has self-harmed but how do I know whether it is suicide-related?”** A: Self-harm is often a precursor to suicide but usually isn’t. Those who engage in self-harm do not all go on to take their own life. Those who die by suicide do not always have a history of self-harm. If you have a concern about a young person because of self-harm, you should treat it like any other concern. You may need to explore with the student what is happening for them and if you think that suicide may be part of their thinking, ask them directly about suicide.

**Q: “I know that a young person is having thoughts of suicide – what do I do?”** A: So, the person has told you they are thinking about suicide. You may have asked them or they may have told you. This can be a challenging space for you and you may feel ill-equipped here. Be assured that you cannot make things worse by asking the suicide question.

Sometimes students will tell you or others that they are thinking about suicide during a class. If this happens you should respond in a calm and sensitive way. Don’t dismiss what they are saying. The student is asking for help, and you need to respond. You might be feeling unprepared for the disclosure, but your calm and sensitive response will let the young person and others in the class know that they can talk about suicide openly and non-judgementally with you. As soon as possible encourage the student to move to a more private place, where you can have an open conversation about their disclosure. You should also check in with the class and let them know where they can find sources of support.

Once you have had a conversation with a student who has said they are having thoughts of suicide, you will need to accompany them to a member of the Suicide Intervention Team who will instigate ASIST (Applied Suicide Intervention Skills Training). However, don’t underestimate the importance of what has been established by your asking the question or receiving the information that a young person has been thinking about suicide. That they have shared this with you means there is an increased level of trust. You need to tell the student that you must share information with others in order to

help keep them safe. You have to share with others that a young person is at risk of suicide and why they are having suicidal thoughts.

### **What do I do if there is imminent risk of death or harm?**

**Q: "I know that a young person has engaged in suicide behaviour – what do I do?"** A: If you determine that a young person has acted in a way that puts their life in danger, act quickly to keep them safe and ensure that there is no imminent risk. If they have taken an overdose you need to contact the School First Aider, Nicola Davies immediately, providing her with as much information as possible. She will decide whether to contact the emergency services. She will then inform the DSL and Head/Deputy Heads and the student's parents/carers. If the parent/carer is unable to attend school immediately, an appropriate member of staff will accompany the child to A&E and wait there with them until their parent/carer arrives.

If the young person has taken steps to end their life it is important that the young person does not feel judged or shamed for their suicide behaviour. Try to remain calm, even though you might be feeling scared, confused, upset or frustrated. It is helpful to ask the young person whether they are having thoughts of suicide. It may seem obvious in light of their behaviour, but asking clearly about suicide allows you to have an open and non-judgemental conversation about suicide. Ensure that you are able to have a conversation confidentially and that other students are not around. You may have called for help, but in the meantime, you might be best placed to stay with the young person and to talk about how they are feeling. Once you have determined that suicide is their focus – just listen. Ask them to tell you about how they are feeling. They might not want to talk, but you can let them know that you will remain with them in supportive silence, and if they do want to talk you are there to listen. Your reassurance will help the young person to feel understood and supported.

If you determine that the young person's behaviour has not put their life in danger, but there has been an injury, you must seek support from Magda Farley (either by taking the student immediately to her, or asking her to meet you where you are with the student). You must also log on CPOMS as 'self-harm' and 'safeguarding'. This will be picked up automatically by the DSLs and relevant Pastoral Leader in school. If the behaviour in question is historical behaviour, then the focus will be on what the young person has learned from this behaviour and using that learning to keep them safe. All information and conversation logs need to be put onto CPOMS immediately.

### **How do I support a young person with their return to school?**

**Q: "How do I support a student back to school after they have engaged in suicidal behaviour?"** A: Before the young person who attempted to take their own life returns to school, the Pastoral Leader and DSL will meet with them and their parents/carers. When they meet they will explore what support is in place, and also what further support the school can provide including what the young person thinks they need.

The young person who attempted to take their life may not currently be suicidal, however suicide may still be an option for them, or become an option again in the future. It is important that the young person has a Suicide-Safety Plan (Appendix F): a plan that they have created with support that details how they want to stay safe from suicide. The plan will be created immediately on the return to school with the young person – with them at its centre. The Pastoral Leader will create the plan with them, not for them, but it must be created before the student returns to lessons to safeguard staff and students. The plan must be something that the student feels they are able to agree to.

The Suicide-Safety Plan will include the following:

- Helpline numbers that are available and appropriate - including 24-hour helplines.
- Safety Contacts: people and organisations that the student can contact when they feel they can't keep themselves safe, including a safety contact for when they are at school.
- The Pastoral Leader (or Form Tutor under the Pastoral Leader's supervision) will arrange for regular 'check-ins' with the young person once they have returned to school to see how they are doing and to check the plan is ok for them.
- The Pastoral Leader will be prepared to amend the Suicide-Safety Plan based on the student's needs. It is a live document and may change over time.
- The Suicide Safety Plan might also include professional support from a counsellor or therapist during school time, which will be agreed in liaison with the DSL/Deputy DSL

### **Can I share information with others?**

**Q: “What should I do next to keep me and the young person suicide safe?”** A: The focus here is on hearing the student and ensuring that you do what you can to reassure and support them. If you can, give the student space to tell their own story. Avoid questioning them or interrupting their story. They will feel a sense of relief having been able to say that suicide is part of their thinking. They may still need some further reassurance throughout. Be supportive as they share their story. Part of them will be uncertain about suicide. Some of that uncertainty will be clear to you; some of it will be less clear. Be patient in hearing them and when they are ready to receive your support to keep them safe, work with them to work on a plan to keep them safe. This may include slowly building up their ability to see who else they can have in their support network and what else they can do or not do to keep suicide-safe. A good Suicide-Safety Plan (Appendix C) will always include a medical practitioner and another resource such as a helpline (Appendix B).

**Q: “Do I have to share everything the young person told me? Do I need to share the reasons why they are thinking about suicide?”**

A: Confidentiality is not boundless. Make no promises to keep what they say a secret or 'just between us'. Be clear from the outset that you may need to get some help in keeping them suicide safe. Make sure you keep informing the young person you are supporting that you may need to share some information with other people in order to keep them suicide-safe. The young person's parents/carers need to be informed of any concerns relating to the young person's thoughts of suicide or suicidal behaviour; the reason for suicidal thoughts (if known by the student) does not, however, need to be explicitly shared with an adult at this point. We will also keep them informed of what happens after a disclosure has been made to us, e.g. we will tell the students when we will be telling parents/carers and talk them through what will happen next.

### **Helpful and unhelpful language when talking about suicide with young people**

Be kind and supportive but also be direct. Do not leave room for misunderstanding. PAPYRUS recognises that language helps as well as harms. Using sensitive and appropriate language can help build awareness and understanding to increase empathy and support. You could say:

- "Ended their life."
- "Took their own life."
- "Died by suicide."
- "Killed themselves."

### **Unhelpful Language when talking about suicide:**

- **"Successful suicide."** Talking about suicide in terms of success is not helpful. If a student dies by suicide it cannot ever be a success. We don't talk about any other death in terms of success: we would never talk about a 'successful heart attack'.
- **"Commit suicide."** Suicide hasn't been a crime since 1961. Using the word 'commit' suggests that it is still a crime (we 'commit' crimes), which perpetuates stigma or the sense that it is a 'sin'. Stigma shuts people up – students will be less likely to talk about their suicidal feelings if they feel judged.

### **Unhelpful language when asking about suicide:**

- **"You're not thinking of doing anything stupid/silly are you?"** This judgemental language suggests that the person's thoughts of suicide are stupid or silly, and furthermore, that the young person is stupid or silly. When faced with this question, most students will deny their thoughts of suicide, for fear of being viewed negatively. This is dangerous. You become someone it is not safe to talk to about suicide.
- **"Unsuccessful or failed suicide"** Students who have attempted suicide often tell us, "I couldn't even do that right... I was unsuccessful, I failed". In part this comes from unhelpful language around their suicide behaviour. Any attempt at suicide is serious. Young people should not be further burdened by whether their

attempt was a failure, which in turn suggests they are a failure.

- **“It’s not that serious.”** Every suicide attempt is serious. By definition: they wanted to take their own life. All suicide attempts must be taken seriously as there is a risk to life. An attempt tells us that the young person is in so much pain they no longer want to live. This is serious.
- **“Attention seeking.”** This phrase assumes that the student’s behaviour is not serious, and that they are being dramatic to gain attention from others. However suicide behaviour *is* serious. Students who attempt suicide need attention, support, understanding and help.
- **“It was just a cry for help.”** This dismissive phrase belittles the young person’s need for help. They do indeed need you to help: they are in pain and their life is in danger. They may feel they are not being taken seriously, which can be dangerous.

## **Appendix B – How adults can support young people bereaved by suicide**

Source: [Cruse.org.uk/for-schools/suicide](http://Cruse.org.uk/for-schools/suicide)

- If a child or young person has been bereaved through suicide this can place them under enormous emotional pressure. They may become entrenched in the belief that the person who has died ended their life as a result of something they perceive they did or not do.

### **Feelings following a suicide**

- Feelings of intense anger directed towards the person who has died for abandoning the child or young person can also be common when the death resulted from suicide.
- Some young people who have been bereaved through suicide might be struggling with questions pertaining to why the person took the decision to end their own life. It is essential that the school liaises closely with the bereaved young person's family to ensure that the known facts relating to the death are clearly understood by the school staff.

### **Questions and guilt**

- It is also vital that staff members are aware of how much the young person knows regarding the circumstances of the death. The bereaved young person may spend time contemplating "What if" and "If only" in an attempt to try and understand what caused the person close to them to take their own life. It is essential that school staff reassure the bereaved pupil that the death was in no way their fault or as a result of arguments or inaction.
- For example, a young person might believe that their mother ended her life because they argued about cleaning her bedroom. Try not to underestimate the bereaved young person's feelings of guilt and try not to dismiss them. Rather, explore with the young person why they feel guilty and what is it that they believed they said/didn't say, did/didn't do, that they feel caused the death. If you know why the bereaved young person feels guilty then you can begin to gently challenge this and reassure the young person that they were not responsible for the death.

### **Stigma and bullying**

- Death through suicide can result in social stigma and many families can feel isolated within their communities. Similarly, young people who have been bereaved through suicide can also feel excluded from school life and may also feel shame over the suicide of someone close. It is difficult for children and families left behind to try and understand why the person they were close to ended their life and this can fuel conjecture within social circles, communities and schools.
- Young people bereaved through suicide can sometimes be bullied by classmates as a reaction to the death and school staff should be mindful of this happening. A death through suicide can unnerve a community and can often be wrongly viewed as unnatural or a selfish act. There will be individuals who will view suicide as a moral transgression depending on their faith and cultural beliefs.
- It is therefore essential that the bereaved young person is not burdened

with the opinions of others as this is unhelpful and potentially damaging.

- Similarly, if the person who has died had a history of mental illness, the bereaved young person might become subject to comments about the person they were close to being “mad” or “deranged” by their peers. It is important that teaching staff reassure the bereaved pupil that the person they were close to was not deranged and if the young person states that the person was depressed or very down before they died, use this opportunity to explain to the student that being depressed does not equate to being mad.

### **How can school staff help?**

- School staff should liaise closely with the bereaved young person and their family prior to the pupil’s return to school and whilst they are at school.
- Allocate the young person a “go to adult” in school, preferably chosen by or with their consent.
- Reassure the bereaved young person that the suicide was not their fault and wasn’t a result of anything they said/didn’t say or anything that they did / didn’t do.
- If the bereaved young person talks about ending their life their family will need to be told. Encourage the bereaved young person to seek help from Cruse and introduce them to the Hope Again website which is Cruse Bereavement Care’s specialist website designed for bereaved young people. The family of the bereaved young person may want to discuss matters with their GP.
- Let the bereaved young person know that you/your colleagues are there to support them and that you will be available to them if they need to talk or vent their feelings.
- Be alert to the possibility of bullying. Young people bereaved by suicide can be extremely vulnerable and often a target for bullying.

### **Recommended support services:**

The Lullaby Trust: [www.lullabytrust.org.uk](http://www.lullabytrust.org.uk)

Edwards Trust: [www.edwardstrust.org.uk](http://www.edwardstrust.org.uk)

Cruse Bereavement Care: [www.cruse.org.uk](http://www.cruse.org.uk)

Child Bereavement: [www.childbereavement.org.uk](http://www.childbereavement.org.uk) Telephone number 0800 02 888 40 Asian Community Advisory Centre: 487 Green Lane, Birmingham, West Midlands, B9 5PR. Tel: (0121) 753 2407

Asian Resource Centre: 10 Hamstead Road, Handsworth, Birmingham, B20 2QS. Tel: (0121) 523 0580.

Beyond the Horizons: [www.beyondthehorizon.org.uk](http://www.beyondthehorizon.org.uk)

## **Appendix C: Suicide Safety Plan**

Source: PAPYRUS

[Suicide Safety Plan \(papyrus-uk.org\)](http://papyrus-uk.org)