**Background and Introduction**

The World Health Organisation defines suicide as: “The deliberate act of taking one’s own life”.

Many organisations will already have in place a broad range of Mental Health and Wellbeing policies for employees. Extending this offer to include specific Suicide Prevention embeds a clear approach that can translate into cultural change, and a reduction in the risk of suicide in the workplace, or help employees better manage mental health issues. Appendix A to this document provides a visual suicide prevention strategy.

Business in the Community, in conjunction with NHS England have worked together to identify some examples of good practice that include:

* Developing a work environment that values its employees and their families – and promotes respect, open communication, a sense of belonging, emotional wellbeing, and encourages people to seek help when they need it and to support each other.
* Providing appropriate education and training on mental health, including suicide awareness, for all employees, especially line managers
* Internal Communication – and induction programmes that ensure employees are aware of resources and support available and that these are accessible to everyone, and clearly advertised.
* Clear policies, procedures and practical guidance to help employees who need support around issues including mental health, long-term health, domestic abuse and financial insecurity
* Specialised suicide awareness and prevention training for the work place’s Employee assistance Programme (EAP) providers and/or HR staff.
* Helplines with national reach and issue focus are signposted across the workplace, such as Samaritans and national domestic abuse helplines
* A plan for responding to a suicide attempt or death within the workplace as part of the organisation’s crisis management – including identification of key personnel, reporting mechanisms and key stakeholders who should be alerted.
* Postvention policies and procedures to provide support following an incident
* Equipping individuals within the organisation with additional training to undertake the role of Mental Health First Aider.

*This example policy is designed to provide a number of suggestions and examples of good practice, that if adopted, alongside a comprehensive Mental Wellbeing strategy, could reduce the risk of suicide in the workplace. It is designed to be personalised to the needs and resources of each organisation, and the existing policies that may already be in place to support health and wellbeing in the workplace.*

**Example - Suicide Prevention Policy**

**1 Introduction and Background**

One in five adults experience suicidal feelings at some point in their lives, and as one third of our lives are spent in the workplace, the workplace can be a place where support is offered. This Suicide Prevention Policy is designed to help, support and educate everyone in the organisation around the risks of suicide within the workplace, promoting good practice, and encouraging healthy conversation to remove stigma. This policy sits alongside our existing Health and Wellbeing policies *(link to, and name existing policies)* supporting our commitment under the Health and Safety at Work Act 1974.

**2 Our Organisational and Cultural Commitment**

*GUIDANCE: Sign the Time to Change employer’s pledge, and work with Time to Change to identify what immediate actions you can deliver. More information about Time to Change can be found* [*here*](https://www.time-to-change.org.uk/get-involved/get-your-workplace-involved/employer-pledge)

2.1 We understand that whilst suicide cannot always be prevented, if we understand more about the factors that may increase the risk, then we may be able to reduce the risk within our workplace. There are a number of factors that may increase an individual’s risk of suicide, (and these are identified within 2.2.1) and we recognise that these may apply to our current employers. This policy is designed not only to support employees who are at risk of suicide, but also to help employees to be able to support co-workers, and direct them to appropriate means of support. Early identification and support can significantly reduce the risk of suicide within our workforce.

Our Employee and Family Assistance Programme/Employee Assistance Programme, or other relevant programme *(reference link, and relevant information contained within EAP)* provides support and counselling services to employees who may have thoughts of suicide *(reference relevant section, or quicklink to EAP)*

2.2 At the end of this policy external support systems have been referenced. These include Mind, Samaritans and Rethink. Helplines and support systems have also been included within our Mental Health/Mental Wellbeing Policy and within our Employee Assistance Programme *(insert link)*

***2.2.1 (optional clause) Factors that can increase an individual’s risk of suicide can include:-***

* ***Prior suicide attempts***
* ***Suicide by someone else in close proximity***
* ***Problematic substance use***
* ***Mental illness such as depression, posttraumatic stress disorder, bipolar disorder, schizophrenia, anxiety disorder, etc.***
* ***Access to lethal drugs, potential weapons or means of completing suicide (highlighting any means, specific to your organisation, including equipment, work locations; hazardous materials)***
* ***Relationship break down***
* ***Debt and financial insecurity***
* ***Domestic abuse***
* ***Lone Worker or Working in Isolation for extended periods of time (referencing our Lone Worker policy and support mechanisms)***
* ***Stigma that discourages employees from asking for help***
* ***Feelings of isolation due to actual or perceived discrimination related to race, sexual orientation, disability, gender, etc.***

**3 Links to existing Policies and Employee Assistance Programme** *(or relevant alternative)*

3.1 We currently have in place detailed Health and Wellbeing policies and Mental Wellbeing policies (reference link), and this Suicide Prevention Policy sits alongside these. Our Mental Wellbeing policy will support an open culture within the workforce, that will:

* Address any stigma that relates to mental health issues, creating a culture where employees feel safe asking for help or support.
* Our equality and diversity policies support an inclusive workplace, where we welcome protect, and support all employees. *(refence organisation’s own equality policies)*
* We will not marginalise people most in need of support, including those who are in crisis, undergoing difficult life changes, or experiencing mental health issues
* We want to create an open culture amongst staff, where employees feel safe and comfortable discussing their own experiences or needs – through mandatory online training around suicide prevention *(insert your own link)*

3.2 Our Employee and Family Assistance Programme *(reference link, and relevant information contained within EAP)* provides support and counselling services to employees who may have thoughts of suicide *(reference relevant section, or quicklink to EAP).*

3.3 Our occupational health services can provide confidential advice and support from trained clinical professions who understand their specific needs and requirements in the workplace. These services can be accessed via *(insert internal procedure/link for OH services)*

3.4 At the end of this policy external support systems have been referenced. These include Mind, Samaritans and Rethink. Helplines and support systems have also been included within our Mental Health/Mental Wellbeing Policy and within our Employee Assistance Programme *(insert link)*

**4 We will develop and deliver a Workplace Suicide Prevention Programme, that includes:**

* Specialist suicide awareness and prevention training for the Workplace’s EAP providers and/or HR staff.
* Delivery of education and training on mental health, including suicide awareness for all employees, especially line managers.
* Delivering suicide intervention training to appropriate people in our workplace to act as Mental Health First Aiders, (see links at end of draft policy) to be able to offer support for our employees when in need.
* Our commitment to increasing interpersonal and social competency amongst the workforce through training in stress management and coping skills to help people deal more effectively with problems *(or reference existing stress management and coping skills training delivered within the workforce)*
* The resolution of workplace conflict efficiently and effectively to reduce feelings of hopelessness or increase stress or anxiety among our workforce.
* Provide suicide prevention education to ALL employees as part of our mandatory online training resource, to help recognise mental health problems (20 minute training module can be viewed [here](https://www.zerosuicidealliance.com/training/))
* Ensure employees understand that they are not required to intervene or put themselves at risk if they are ever in the position of responding to a situation of a potential suicide

4.1 *Mental Health First Aiders/Mental Health Champions*

As part of our Mental Wellbeing Policy and Suicide Prevention Programme, we will *(insert link to policy)* provide training for key members of staff to undertake the role of Mental Health First Aiders within the workplace. *(examples of good practice include). As part of this training, training to recognise the factors associated with suicide will be provided. Each Directorate/Department will have access to a Mental Health First Aider, and contact details will be circulated to all staff. (include internal process for staff to apply for the role of MHFA)*

*GUIDANCE: NHS Mental Health First Aider role, requests applications from staff to apply for the*

*role, and considers individuals who are empathetic, understanding, and are good listeners.*

*Consideration is given to staff members who can demonstrate active listening, inside or outside*

*of the workplace.*

**5 Practical Suicide Reduction and Risk Assessment** *(tailor to the operational needs of the organisation)*

* 1. Our existing risk assessment policies (insert link to organisational risk assessment/location) within the workplace that relate to locations and materials that can be used for suicide to be reviewed, considering the risk posed by an individual considering suicide.

GUIDANCE: Examples could include:

* Restricting access to the site out of hours, or risk assessment if reduced staff are on site.
* Risk assessment of access to higher floor windows, including locks and access methods.
* Consider additional verification processes for accessing hazardous materials.
* Review lone worker policies to consider additional support mechanisms that could be put in place.
* Use or install CCTV and surveillance at high risk areas

**6 The role of Line Managers**

6.1 As a Line Manager, or employee you have a role to play in the promoting good mental health within your team, or of your colleagues. (identify training for line managers, links to EAP and mandatory stress/coping training that may be provided through your organisation)

6.2 Our workforce Mental Wellbeing Policy provides tools and support for you as a line manager, and colleague, to enable you to encourage help-seeking behaviours for you or colleagues who may require support.

GUIDANCE:

Example: **Recognising the signs**

Business in the Community and Public Health England have produced a series of

recommendations and a comprehensive toolkit that can help reduce suicide in the

workplace, considering the wider implications. Within this is guidance on how to identify

employees who may be at risk. *(consider including signs within suicide prevention*

*training, or guidance for managers) Click* [*here*](https://wellbeing.bitc.org.uk/sites/default/files/business_in_the_community_suicide_prevention_toolkit_0.pdf)

**Part B – Points to consider within wider operational policies: -**

**B1 EXAMPLE:** W**HAT TO DO IN THE EVENT OF A SUICIDE OR SUICIDE ATTEMPT AND POSTVENTION**

**B.1.1 Should a Suicide or Suicide attempt occur within the workplace - educate and support employees**

GUIDANCE: Postvention should ideally be put in place within an organisation before a suicide or attempted suicide occurs. This document provides a framework that can give guidance on what to do.

As part of our approach to mental health and wellbeing, and suicide prevention, the following information provides example guidance on procedures that may be adopted, should a completed or attempted suicide occur. Postvention support to employees who are bereaved by suicide, can help them to deal with their trauma, and can help prevent further suicides *(NB: within this document, 2.2.1, bereavement through suicide is a known trigger that may increase a person’s risk of suicidal behaviour).*

GUIDANCE: You should always state that employees are not expected to intervene or put themselves at risk if they are ever in the position of responding to a situation of a potential suicide.

GUIDANCE: Does your Sickness and Absence policy reflect support, compassionate leave for an employee who responds to a suicide or potential suicide in the workplace?

**B.2.1 Responding to a suicide death within the workplace**

Follow our emergency response/crisis management procedure (include link to your policy) and alert the emergency services initially, followed by your line manager and Human Resources representative (can reference relevant HR emergency procedure policy). Ensure that nothing is disturbed at the scene if suicide has been completed.

* Provide prompt, accurate information to co-workers without discussing any details of the incident.
* If possible, secure the location, close doors or blinds or screen the location of the completed suicide
* Be available to provide prompt, accurate information to the emergency services.

Immediately seek personal support from line manager, colleague, mental health first aider (if in place, provide link to contact details)

**B.3.1 Responding to a suicide attempt within the workplace**

* If the danger for self-harm seems imminent, ensure that your colleague is not left alone and call 999.
* Stay with the person (or ensure they are in a private and secure place with another caring person, this may be somebody known to them) until professional help arrives. Once professional help arrives, ask the person if you would like you to remain with them or not.
* Help by asking the person of there is anyone they would like to call. Offer space for them to make this call
* Contact HR/OH or EAP to inform them what is happening *(insert links to appropriate policies and processes)*
* Be available to provide prompt, accurate information to emergency services, as they respond.

GUIDANCE: Do you have in place relevant crisis management and response procedures should a suicide occur in the workplace, including guidance for responding employees? Will this identify suitably trained individuals who can provide immediate emergency support? If you have an emergency on-call rota, consider providing additional training/awareness raising for on-call employees.

GUIDANCE: COMMUNICATION: Your procedures should identify a person who will communicate with the family of the deceased on behalf of the organisation. Identifying a person who will communicate information to employees should also be identified.

GUIDANCE: It is important that you do not underestimate the impact this will have upon your employees. Help and support should be offered via existing wellbeing policies, or through employee support.

B.3.2 Alert current emergency on-call officer (if your organisation has a rota) or relevant team with responsibility for crisis management (or Identify a person within the workplace who will communicate information to the family, if not the emergency services).

GUIDANCE: be clear who will take the lead on communicating with the family, ensuring that permission is gained from the individual who has attempted suicide. This may be a close colleague, who is known to the family and is willing to make contact. Alternatively, consider providing additional training for members of your on-call response/emergency planning team.

B.3.3 Immediately seek personal support from line manager, colleague, mental health first aider (if in place, provide link to contact details)

B.3.4 It is important that you do not underestimate the impact this will have upon you, and as such you should obtain help and support for yourself *(insert appropriate internal procedures, counselling through employee support, if available)*

**B.4.1 Workplace support after a suicide**

We understand that when a colleague dies or attempts suicide, there can be feelings of guilt or grief across the workforce. The overall psychological health and safety of our workplace is of paramount importance. Following an incident of completed or attempted suicide within the workplace, or that of a colleague, we will provide the following:

Counselling and support for any employee affected by the incident through our existing employee assistance programme. Please contact your line manager for access to support.

We will support you, our employees in organising a tribute and memorial to support your healing.

GUIDANCE: Consider a range of support, that can include: -

* Recognising that the reactions to suicide will vary across the workforce, and that a range of interventions will be required to support colleagues
* If anything in the workplace may have been a factor in the suicide or suicide attempt, take steps to remove, and address any known factors.
* Support employees to return to a state of normalcy.

**B.5.1 Sickness and Absence Policy – Employee returning to work following Mental Health episode.**

GUIDANCE: Returning to work may be as difficult for managers and co-workers as it Is for the

individual, particularly if the suicide attempt took place at the workplace. An employee may be

concerned about returning to work after a suicide attempt and may be fearful of what their

colleagues will think about them.

The organisational Sickness and Absence Policy and Return to work policies should be amended

to take account of an employee returning to work following such an incident, in line with the

policy guidelines.

**B.6.1 Wider and operational considerations following a completed suicide in the workplace: -**

GUIDANCE: Emergency planning or crisis management procedures should be amended, to include reporting and reactive procedures should a suicide attempt or completed suicide occur within the workplace. These would take account of operational, investigative and reporting procedures required, and communication methods require, both internally and externally (should external media attention occur)

*B.6.2* **Impact upon an operational site/place of work**

GUIDANCE: In the aftermath of a suicide some vulnerable individuals in the workplace

may find this period very difficult. Avoid providing any details on the means of death,

support individuals who you know to be at risk, and minimise misinformation.

Careful, timely, respectful and sensitive communication can help to dispel rumours.

* Following consultation with the family, ensure that dealing with external media interest and internal communication, are included within crisis management procedure, to provide a professional response to any media enquiries that may arise; and to provide sensitive communication to colleagues and the workforce – highlighting support available.
* Provide accurate information about the death of an employee and avoid the possibility of misinformation or rumours.
* Acknowledge that some information may spread quickly through informal communication, social media etc.
* Consider who will inform work colleagues of the deceased (or injured) particularly close friends and team members.
* It is unfortunate that an incident of this nature may attract external media interest, and that employees or the organisation may be approached for a comment. A clear communications protocol could avoid misinformation and distress.

The World Health Organisation provides guidance for reporting on suicide that

specifically targeted for media professionals that can be viewed [here](https://www.who.int/mental_health/prevention/suicide/resource_media.pdf)

GUIDANCE:

* Consider that an internal location may need to be secured for a period of time and have in place the ability to be able to secure the location and move employers elsewhere. How you would support your employees?
* Consider how your organisation would deal with an incident, that may require the external and/or customer facing element of the workplace to be out of operation for a period of time, and what support you could offer employees/customers.
* Consider housekeeping that may be required following a suicide attempt or completed suicide in the workplace and incorporate this within crisis management or emergency planning procedures.
* Health and Safety Review and risk – consider what internal procedures you would put in place to capture any organisational learning from an incident.
* Consider the support required for individuals undertaking this work, which may be distressing.

**Further sources of advice and information**

**Healthier Lancashire and South Cumbria**

For resources for employers, training, media campaigns and advice

https://www.healthierlsc.co.uk/suicide-prevention

**Rethink**

The largest national voluntary sector provider of mental health services, with 340 services and more than 130 support groups.

Helpline 0845 456 0455

www.rethink.org

**Mind**

Mind is the leading mental health charity in England and Wales. It campaigns to create a better life for everyone with an experience of mental distress

Tel: 020 8519 2122 [MIND](https://www.mind.org.uk/)

[www.mind.org.uk](http://www.mind.org.uk)

**Samaritans**

Samaritans provide confidential non-judgemental emotional support, 24 hours a day for people wo are experiencing feelings of distress or despair, including those which could lead to suicide.

Helpline 08547 909090

[www.samaritans.org](http://www.samaritans.org)

**National Suicide Prevention Alliance (NSPA)**

Is an alliance of public, private, voluntary and community organisations in England, who are willing to take action to reduce suicide and support those affected by suicide. Produce a calendar of events and training that can be accessed by organisations

www.nspa.org.uk

**Mental Health First Aid England**

Provides training and consultancy services

[www.mhfrengland.org](http://www.mhfrengland.org)

GUIDANCE: **Insert your in-house contact details for Mental Health First Aiders (MHFA)**

(including location, hours of work, full contact details, photographs and short bio – to enable individuals who may be in crisis or require support to recognise MHFA, or select the individual they may feel comfortable with.

**Appendix A**