



Guidance for Educational Settings

Following a Suicide or Sudden Death

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WHAT IS THE PURPOSE OF THIS GUIDE?

This guide is designed as a comprehensive resource for schools and other educational settings to turn to in the tragic event of a suicide or sudden death in their community.

You can also use this resource to plan and inform a clear suicide response strategy or as a crisis document to refer to if needed.

A collaboration between suicide prevention charity, The OLLIE Foundation and Tooled Up Education, this resource contains reliable, evidence-based information and 'lived experience' advice to help schools coordinate an appropriate, helpful, and safe response. **This is known as suicide postvention.**

We have brought our combined knowledge and experience to set out areas for contemplation and current best practice in responding to a suicide or sudden death. Different chapters will be relevant at different times depending on your particular circumstances, but we hope that within this document you will find all the information you need to support yourself and your setting as you navigate this difficult journey.

In conjunction with this resource, we encourage you to draw on your existing relationships and connections with your Wellbeing Board and County's Suicide Response Guidance,

as well as with parents and carers, staff and students at your school. This will help inform your planned response, so that it meets the needs of your community.

Each situation will require a nuanced approach, depending on a range of factors including who has died, at what point in the school year, and the wishes of the bereaved family.

At the end of this guide, you will find a list of useful further resources and signposts to a range of excellent organisations who can provide further advice and support. By looking after yourself and your own wellbeing at this time, you will be better prepared to support others in your community who are struggling to cope with what has happened.

We understand that the likelihood of a suicide within your community may seem small and distant. Hopefully, it is not something that you will ever need to respond to. However, ideally every school would have a suicide postvention policy in place *just in case* a suicide occurs within the community. We therefore urge all settings to consider the advice in this guide and think about putting a plan in place, so that in the emotional aftermath of a sudden loss, you'll know what to do.

Suicide, or a sudden death, will impact everyone in the community, although that impact will be experienced differently by everyone. We hope this document will support you to manage what will always be an extremely difficult time.

However you use this resource, we are sending you our best wishes and a reminder not to underestimate the power of a human response and that through tragedy, we can emerge stronger and more connected.

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About The OLLIE Foundation

The OLLIE Foundation is a suicide prevention charity, set up in 2016 by three Hertfordshire parents who had each lost a son to suicide. They met in bereavement support and vowed to do all they could to stop another family going through the heartache they were experiencing.

OLLIE stands for One Life Lost Is Enough.

The OLLIE Foundation provides wellbeing, prevention and intervention events, training, talks and panel events for professionals, parents, and students. Our mission is to reduce the incidence of suicide, particularly amongst our young people.

One way we do this is through the provision of training and education to parents, children, teens and young adults and to all those with a duty of care for others.

Through our work, we aim to reduce both the stigma and the fears people have in talking about suicide. We aim to advance the pedagogy and discourse around suicide studies and effective early intervention and prevention techniques and strategies.

Our work always aims to share best practice, support curiosity, skills, capacities, and knowledge so each generation can stay safer from suicide and bereavement from suicide.

For more information on The OLLIE Foundation's work and to find out how we can support your community, visit theolliefoundation.org



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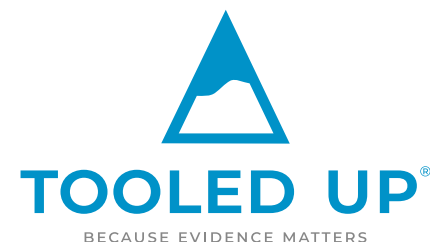
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About Tooled Up Education

Tooled Up Education is the home of evidence-based resources on all aspects of parenting, education and family life. It was founded by social scientist, Dr Kathy Weston, in 2018, one of the leading experts on parental engagement and co-author of *Engaging Parents* (Bloomsbury, 2018; 2020).

We are proud to have created a digital hub and learning community that focuses on the key areas of mental health, digital life, family life and relationships, learning and aspiration. When it comes to mental health, Tooled Up establishes relationships with some

of the world's most eminent experts and practitioners, translates research and curates content in a manner that engages parents and empowers school staff. We also regularly produce webinars that parents and staff can 'watch back' with leading clinicians on all aspects of child and teen mental health.

We are excited to support schools both within the UK and globally. Please note that full access to the world of Tooled Up resources is available via school or organisational subscription only.

To learn more, please go to: tooledupeducation.com or contact us: office@tooledupeducation.com or follow us  @tooleduptips.



Top Five notes

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2. Language matters
3. The importance of a trauma informed response
4. Legal procedures
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Our aim is to provide you with as comprehensive a resource as possible, but we know that school staff are extremely busy. The following notes offer an abridged summary of some of the key points within this guidance and provide some 'quick' considerations, whether you are just beginning to think about creating a policy and process, or responding to a tragedy in your community.



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1. Make a plan

Just as with any crisis, you will feel more supported in your role and better able to manage this evolving situation if there is a clear plan in place. Knowing the immediate steps that should be taken in the event of a sudden death or suspected suicide and having a pre-designated person/group in charge of coordinating your school's response, will be enormously important to ensuring that the needs of all the community are met. A written critical incident plan will help you to provide students, their families and staff with appropriate support, so that:

- You can communicate sensitively and appropriately, considering the particular needs and circumstances of your community.
- You can maintain normal routines and lessons as much as possible.
- You understand and can follow legal processes.
- You have a clearly thought through strategy to rely on when you are struggling or feeling overwhelmed.

We advise all schools to establish a suicide postvention policy. If your setting has not already prepared one, we hope that the notes and guidance here will help you to do so. If you are looking at this guide in response to a sudden death or suicide, it will support you each step of the way in responding to your community's immediate needs.



Section 2 of this guide focuses on what you need to consider when creating your response plan and Section 5 features a template planning document and response checklist.

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2. Language matters

We always need to be sensitive when talking about the death of a student or colleague and consider the impact of our language on others. In the case of suicide, this is particularly crucial.

The language that we choose can have a significant impact on both ourselves and those we are communicating with and can unintentionally reinforce unhelpful stereotypes and assumptions. Using language responsibly can reduce the risk of suicidal feelings in others and promote help-seeking.

A key focus of any discussions after the death should be how you will communicate the news to your school community, what you will share and the words you will use. Some of this will be decided on in consultation with the family or loved ones, to ensure their wishes are taken into consideration.

Whilst schools can confirm that there has been a death, you will ideally have the agreement of the family before the nature of the death is disclosed. Please note that under UK law, 'suicide' cannot be officially given as the cause of death until that verdict has been reached by the coroner. This is challenging for everyone as inquests can sometimes take place more than a year after the death, and even when a note was left and the method makes clear the intention, some families still don't receive a verdict of suicide.



Within Section 1 of this guide, there is a useful table outlining what language should be used and what should be avoided when talking about suicide. Section 3 focuses on how to talk to your community and Section 5 contains some templates for key communications.

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3. The importance of a trauma informed response

Exposure to suicide at any time of life can increase the chances of an individual considering suicide themselves.

Research shows that this is particularly true for young people, who, for a range of reasons, are more likely to act spontaneously when experiencing suicidal thoughts. An agreed, evidence-based protocol for responding to a suspected suicide is therefore crucial in preventing additional trauma, psychological harm or further suicides or suicidal behaviour.

Although all of the community has suffered a bereavement and therefore everyone is at some risk, it's essential to identify vulnerable students and staff members and offer them appropriate support, engaging with outside agencies and mental health professionals where useful.

It's vital to remain mindful of the wider community's needs. Some will value boundaries and familiarity, whilst others will not be able to manage routine and will want the world to stop while they process their feelings.

Although never the intention, sadly we can inadvertently glamourise or glorify suicide with well-meaning but poorly phrased communications, vigils and memorials. So, it is vital to give careful consideration to our phrasing

and what is actually being communicated through our words and actions. For instance, it's important not to link the tragedy with specific events or scenarios such as mental illness, exams or family breakdown. This can imply that these situations can be impossible to get through, which can plant a seed that you don't want to sow.

It's important to provide all those in your school with messages of hope, offer life-affirming activities and ensure that they know precisely how to seek help, should they need it.

Ideally, you will make provision for all staff members to access suicide prevention awareness training. There are a range of excellent online and in-person sessions that you can access, from 30 minute free sessions to two day in-person training.

A useful mid point is [The OLLIE Foundation's Talk Safe, Plan Safe – Suicide Prevention Training](#), which teaches delegates how to complete a Safe Plan with somebody they are concerned about. This two hour training session can be delivered online or in person.



Section 2 of this guide features information about identifying vulnerable individuals and ensuring that your response helps to prevent further suicidal behaviours. Section 5 contains a template that can be used for logging information about vulnerable pupils.

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4. Legal procedures

It is crucial for all settings to understand legal obligations and processes in the event of a sudden death. Within England, there is a nationally agreed process following the sudden death of a young person under the age of 18, which is overseen by a county-wide Local Safeguarding Board and its Child Death Overview Panel.¹

The designated professional responsible for coordinating the Rapid Response Team should be contacted immediately and the school/college headteacher must be informed as soon as possible. A meeting of the Rapid Response Team should be held within 72 hours.

In the UK, any death that is suspected to have been a suicide is reported to the local coroner. The coroner's office will then investigate the death by opening an investigation which seeks to understand the circumstances that led to the death. The cause of death is only confirmed once the coroner has published their final conclusions at an inquest.

Regardless of how strong the evidence is that the person has taken their own life, **it is vital that schools do not announce this as a definite cause of death to the community before the coroner's report has been officially published.** Schools may choose to refer to a

death as a 'suspected suicide' whilst awaiting the coroner's report. This should be discussed with family and loved ones beforehand.

The investigation into a sudden death will differ depending on individual circumstances, but it can be lengthy and may involve multiple agencies. The average estimated time before the final inquest verdict is 18 weeks and it's often longer.

Family, friends and colleagues may be called upon to give evidence. The purpose of an inquest is not to establish blame. However, participating in an inquest can be very distressing. The process may cause family members, friends, peers and staff to consider whether they could have prevented the death or if they missed signs of distress. Any students or staff members involved in this process may need to be offered further support.



Section 4 of this guide contains further information about legal processes, the role of the coroner, potential outcomes of an inquest and further considerations for school settings. For more information on identifying vulnerable students and on how best to support them, see Section 2.

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5. The importance of a human response

This guide is here to support you in formulating your response to an extremely difficult and traumatic event in your school community. We have used our knowledge, the expertise of our colleagues, researchers and testimonies from those with lived experience of suicide, to formulate checklists and bullet points that we hope will be easy to follow and feel compassionate for all members of the community.

Whilst we hope that you find all of the guidance in this document helpful, we also want to stress the importance of the human element in your response. This is something we can't write a checklist or template for, but which will make a significant difference to the loved ones and friends of the person who has died.

Every suicide or sudden death will require a different approach. The checklists that we have provided are a guide and should be adapted as needed for your community and the complexity of the circumstances around the death, as well as the context of the person who has died and their family.

Some families may not wish to engage with you in the immediate aftermath of the death because it is just too painful for them. Others may never accept that the death was a suicide at all. There may be staff in your team who have lost a loved one to suicide in the past and are re-traumatized by this event. There will be students who don't want to attend memorials or talk about their feelings, and just want to get back to routine.

A human response is about compassion for all, acknowledging all of this uncertainty, and adapting your response according to the specific needs of your community. Trust and use your inner wisdom. Don't be afraid to show emotion, or to openly acknowledge those moments when you simply don't know what to say.

A human response acknowledges that everybody's experience of grief is as unique to them as their fingerprint, and therefore all we can do is our absolute best to support those in our care at this devastating time.

It is also crucial to prioritise your own wellbeing and avoid that temptation to check your work emails at 3am. Set clear boundaries and seek professional help if you need to. By looking after yourself, you should find you are better able to support your community as needed.

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What is suicide and who is at risk?

What is suicide?

Suicide is when somebody ends their own life. There are many widely held myths and misconceptions about suicide, which add to the stigma surrounding it and often prevent those at risk from seeking help and support.

Who is at risk?

One common misconception is that only people with a mental health illness will take their own lives. **This is not the case.**

Whilst there is an association between mental illness and suicide, the reality is that many people who take their own lives have no diagnosable mental health condition and will have had no contact with their GP or local mental health services at all prior to their death.

To presume that only those with a mental illness are at risk of suicide is harmful as it adds to the stigma around both suicide and mental illness. With data showing that 1 in 4 people in the UK will experience a mental health problem every year,² it is important to recognise that a significant proportion of these do not engage in suicidal behaviours or attempt to end their own lives.

Aside from mental illness, there are many factors which can make a person at risk of suicide, including:

- Trauma
- Abuse
- Stress
- Pressure
- Loneliness
- Bullying
- Having autism spectrum disorder (ASD)
- Being part of the LGBTQ+ community
- Bereavement by suicide
- Alcohol and substance misuse
- Experiencing a really difficult time

Previous suicide attempts are also a significant risk factor, with data showing that between 25–50% of those who die by suicide have attempted to end their own lives at least once in the past.³

Whilst these risk factors are important to understand, it's also critical to know that none of these may have been prevalent

in the deceased's story. Suicide may become a viable option to someone simply because they are overwhelmed or if their pain (be it physical or mental) has exceeded their capacity to cope. They may be unaware that things can be different, that things can change, or that others can help. They may be trapped in their negative thoughts, and completely unable to see another way out.



To find out more about suicide, including the risk factors and how to keep somebody safe for now, book your ticket for [OLLIE's Talk Safe, Plan Safe – Suicide Prevention Training](#).

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What key terms should I understand?

Suicide Attempt

When someone harms themselves with an intent to end their life, but they do not die as a result of their actions.⁴

Suicide Cluster

A number of suicides or suicide attempts occurring closer together than would usually be expected.

Suicide Contagion

The process whereby one suicide or suicidal act within a school, community or geographic area increases the likelihood that others will attempt or die by suicide.⁵

Suicide Postvention

The actions taken to support the community after someone dies by suicide. Good postvention support can help people to grieve and recover and can be a critical element in preventing further suicides.⁶

Inquest

An investigation into a death which appears to be due to unknown, violent or unnatural causes, designed to find out who the deceased was, and where, when and how the death occurred.⁷

Coroner

An independent judicial officer, appointed by the local authority to investigate the causes of deaths. Since 2013, a coroner in England must be a qualified lawyer. Prior to 2013, doctors could be appointed as coroners.



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What makes a suicide death different?

Under any circumstances, the death of a member of a school community is extremely painful.

However, there are several factors that make a death by suicide even more challenging.

1. The Aftermath

Death by suicide is often sudden and unexpected. The methods used by someone to end their own life can be extremely violent and those who find the deceased are at a very high risk of developing PTSD. Press and media attention is usually very intense immediately after the death. Reporting can be insensitive and, at times entirely inaccurate.

2. Stigma, shame, and isolation

Despite the fact that we now talk about mental health and wellbeing much more openly, there remains a strong and pervasive stigma attached to mental illness and help-seeking. The false belief that all suicide and suicidal behaviour is indicative of mental illness can stop those in distress from reaching out for help. Talking about mental illness alongside any reference to a suicide can reinforce this mistaken assumption.

Sometimes, as a result of religious or cultural beliefs, people may believe that suicide is a sin. Because of this, family members may understandably be reluctant to acknowledge or share the truth about what has happened. This can increase feelings of isolation and confusion and reduce mutual support.

3. Conflicting feelings and challenging emotions

The survivors of suicide often experience a range of emotions which can feel very conflicting. These might include:



Rejection – Why didn't they feel that they could talk to me?



Guilt – I should have noticed that they were struggling and done something about it.



Anger – Why would they do this and cause such devastation?



Relinquishment – I wasn't enough to make their life worth living.

Shock – I can't believe this has happened.



Frustration – If only they had talked to me, I would have helped them.



Sadness – I'm never going to see or speak to them again.

Denial – This can't be happening.



Fear – What if someone finds I knew they were thinking about this?



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When supporting your school community, it's important to bear in mind that there may be individuals that the deceased confided in before they ended their life. Whether they had disclosed their full intentions or not, students often carry the secrets of their friends. Having potentially been sworn to secrecy, they may be left carrying the burden of knowing, or suspecting, that this was coming. **These students will need intensive support.**

There may be adult staff who are wondering what they missed or why they didn't listen to that 'gut feeling' that something was wrong. They too will need support to manage these overwhelming feelings.



WHERE TO FIND SUPPORT:

Local bereavement specialists should be able to help.

The OLLIE Foundation provides 'Write To Release' sessions for small groups of students and staff who have been bereaved.

By encouraging participants to privately write down what they are feeling, these sessions help people to release their emotions in a safe and positive way. To find out more, please email contactus@theolliefoundation.org

Your local hospice may also offer outreach work for bereaved communities.



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What is suicide contagion?

Suicide contagion occurs when exposure to suicide or suicidal behaviours in one's family, social group, online, or through viewing or reading something in the media results in an increase in suicide attempts, deaths or suicidal behaviour.

We now know that exposure to suicide at any time of life can increase the chances of an individual considering suicide. Young people are particularly vulnerable. Adolescents are more likely to self-harm, experience suicidal thoughts and act on these spontaneously than other parts of the population. They are also often more suggestible and are more likely to imitate suicidal behaviour if they are exposed to it. Research shows that young people bereaved by suicide are 65% more likely to attempt suicide, compared to those bereaved by sudden natural causes.⁹

This exposure might be through insensitive or intense media reporting, or through direct modelling from contacts in their immediate environment. Research shows that there are stronger imitating effects when there is a close bond between the young person and the person who has died (such as age, gender or background), when they are figures of admiration or role models (such as loved celebrities), or if the manner in which they died is reinforced, glamourised, or even admired.¹⁰

It's therefore crucial for school staff to be aware of the real risks of suicide contagion and what can make it more likely in the event of the death of a peer or someone in their community.



Despite what you might think, talking about suicide sensitively, especially if you are worried about someone, does not make an individual more likely to attempt suicide and will not 'put the idea in their head'.

Suicide contagion is not linked to empathetic discussions about an individual's feelings, but to exposure to a death by suicide and the way in which it is handled.

If someone is not thinking about suicide, gently suggesting that you are worried that they might be, WILL NOT plant a seed. However, if they are suicidal and you don't ask, you may be confirming their belief that nobody sees them and nobody cares. If you ask the question and they are not, all you have done is demonstrate that you are someone they can come and talk to about suicide if they ever find themselves experiencing suicidal thoughts or feelings.

If a student (or staff member) does open up to you about suicidal feelings, follow your established safeguarding procedures. Further advice can be found on [The OLLIE Foundation website](#).

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Although suicide contagion is rare, if young people have been exposed to suicide, then it is possible that it will become part of their frame of reference and, whether conscious or subconscious, it can become a more ‘imaginable option’.¹¹ Specific risk factors that make young people more vulnerable are:

- Their changing brains mean that they may be less adept at managing their impulses than adults, and are more likely to behave spontaneously, without adequately assessing the risk.
- They may not truly grasp the permanence of their actions.
- They may not yet have effective coping mechanisms in place to help them find a way through difficulties that they face, such as problems with relationships, at school, or body image concerns, leaving them feeling overwhelmed.
- They may not have access to the level of support that they need to manage changes and transitions in their lives, build good self-esteem and manage their own or others’ expectations of them.
- They do not have enough life experience to know that things get better, people move on, and that this ‘issue’ isn’t always going to matter.

All communications about a death by suicide should give clear and non-inflammatory information. An emotionally healthy school environment, where students are encouraged to seek help with any struggles and know the pathways for doing so, is likely to be protective.

Suicide clusters can occur as a result of suicide contagion.

A suicide cluster refers to a number of suicides or suicide attempts occurring closer together than would usually be expected. Young people are a demographic particularly vulnerable to suicide clusters.¹²

Suicide clusters are thought to be rare. Estimates of how frequently suicide clusters occur, or how much they contribute to the rate of death by suicide are approximate, due to difficulties in accurately identifying them.¹³ Clusters include ‘attempts’. Public Health England do not collect data on attempts and families may not always inform schools of attempts, so it can be particularly difficult to be clear on this. However, when they do occur, the impact and distress caused is widespread.

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How would I identify a suicide cluster?

Precisely defining a suicide cluster is difficult. However, Public Health England has prepared comprehensive [guidance on identifying and responding to suicide clusters](#) which we recommend you consult (pages 46–53 are particularly relevant to schools). For guidance in other regions, please contact your local Public Health Team.

The guidance notes that a suicide cluster usually includes three or more deaths. However, two suicides occurring in a specific community or setting in a short time period should be taken very seriously in terms of possible links and impacts, particularly in the case of young people.

Whilst attempts should be made to establish any clear connections between deaths, obvious links are not necessary to constitute a cluster. Concerns about a potential cluster should arise when there are:

- More suicides than expected within a time period. These suicides could all be in a specific location, or they might be geographically widespread.
- Multiple suicides involving specific methods.
- Suicides occurring in the same location as previous clusters (known as echo clusters).
- Single suicides within groups vulnerable to imitation, including within school settings. These are of concern and require a preventative response.

Research has found links between suicide clusters and actions which sensationalise or romanticise a suicide death, publicising the method of death and the volume of suicide coverage that people are exposed to, both online and off.



It's important that all school staff understand the risks of suicide contagion and clusters and quickly work to mitigate these in the event of a death, by following the behaviours suggested in this guide. It's critical that the most vulnerable students and staff (see p29.) are quickly identified and supported. That's why planning is vital!



UK Government guidance notes that 'some people dislike the terms 'suicide cluster' and 'contagion' because they find them anxiety provoking and they might also be seen as insensitive to bereaved families.¹⁴ However, they are terms used generally by people working in suicide prevention and we have therefore used them in this guide.

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How to talk about suicide: language matters

It's likely that we all understand the need to be sensitive in our language choices when talking about any death. However, in the case of suicide, this is particularly crucial. The language that we choose can have a significant impact on both ourselves and those we are communicating with. Using language responsibly can reduce the risk of suicidal feelings in others and promote help-seeking.

To use language responsibly, we may need to reconsider some of the words and phrases that we have used in the past or hear others using. We've put together a list of some of the harmful language that is commonly used around suicide and alternative phrases that you could consider.

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How to talk about suicide: language matters

✗ Word or phrase TO AVOID	Why?	✓ What to use instead...
✗ Spot the signs	Sometimes there are no signs that somebody is thinking about ending their life. Suggesting that there are always signs can make friends and loved ones feel like they have missed an opportunity to help, increasing feelings of guilt and responsibility.	✓ Encourage people/seek to be curious, ask questions and have courageous conversations.
✗ Trigger/ trigger warning	This is a widely used phrase. However, describing something as a 'trigger' can feel very offensive and hurtful to somebody who has lost a loved one to a firearm. Access to a firearm in the UK is not as uncommon as you may think. As of 31st March 2021, 565,929 people in the UK held a firearm and/or a shotgun certificate. Figures on illegal firearms are not known.	✓ Giving something a 'content warning'. ✓ Describing something as 'activating'.
✗ You're not thinking of doing something stupid are you?	Many people who are thinking about ending their lives already feel that they are a burden or that they are worthless. At the point of crisis, they can see no other way out. Suggesting that what they perceive as their only viable option is 'stupid' will only reaffirm the negative things they are thinking about themselves.	✓ I have seen in others (who have gone through this) that things can feel so difficult that they are unsure if they can keep going. I need to ask, are things that bad that you might be thinking of ending your life?
✗ Suicide is selfish	<p>Think about a person who is starving. They have two options...</p> <ol style="list-style-type: none"> 1. Steal a sandwich from a shop, even though they know it's against the law. <p>Or</p> <ol style="list-style-type: none"> 2. Starve. <p>Often, those who are in emotional crisis face a similar moral dilemma:</p> <ol style="list-style-type: none"> 1. Stop the pain by ending their lives, even though they know it will devastate their loved ones. <p>Or</p> <ol style="list-style-type: none"> 2. Continue living in turmoil and feel like a burden on their families. <p><i>It is not a straightforward selfish versus unselfish decision.</i></p>	✓ Suicide occurs when pain exceeds a person's capacity to cope.
✗ Attention seeking	It is a common, stigma-based myth that those who talk about ending their lives will never go through with it. Every time somebody talks about suicide it should be taken seriously and the right support must be given.	✓ Seeking attention/seeking support.

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✗ Word or phrase TO AVOID	Why?	✓ What to use instead...
✗ Commit suicide	<p>'Self-murder' became a crime under common law in England in the mid-13th Century, having long been condemned as a mortal sin. Thankfully, suicide was de-criminalised as part of The Suicide Act in 1961.</p> <p>Using this term further stigmatises those who have suicidal thoughts by implying a 'criminal' element to suicidal behaviours, adding to often already significant feelings of shame and guilt.</p>	<p>✓ Died by suicide</p> <p>✓ Ended their life</p>
✗ Failed attempt	<p>Describing somebody's attempt on their own life as either a 'failure' or a 'success' suggests that there is a desired outcome and that they are making an informed, conscious choice.</p>	
✗ Successful attempt	<p>Often, those who think about ending their own lives have a feeling of ambivalence. They do not want to die, but they can't live with the pain either.</p>	
✗ Completed their life	<p>To suggest that somebody has 'completed' their life insinuates that they have reached a desired outcome and that their life was made 'whole' by the act of suicide.</p>	
✗ Weak/cowardly	<p>This increases stigma and reinforces the misconception that those who end their lives are less resilient than others. It is important to remember that suicide only becomes an option when somebody's pain exceeds their capacity to cope and describing somebody who has suicidal thoughts as 'weak' or 'cowardly' makes those who are struggling much less likely to seek help.</p>	<p>✓ In emotional crisis</p> <p>✓ Numb</p> <p>✓ In unbearable pain</p>
✗ Deliberate/intentional/accidental self harm	<p>Some people self-harm whilst in a dissociative state and are afterwards unaware of any conscious intent to harm themselves.</p> <p>By using the prefix of 'deliberate' or 'intentional', we also imply that there are accidental and non-intentional forms of self-harm.</p> <p>The suggestion that someone may accidentally self-harm would be misleading. We would instead use the phrase, 'they have had an accident'.</p>	<p>✓ It is appropriate to use the term 'self-harm' whether or not somebody is in a dissociative state.</p>

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What is suicide postvention and why is it so important?

Much of the available literature and support resources available for schools and other educational settings focus on suicide prevention. However, effective postvention – the actions taken following a suicide or sudden death to support the rest of the community – is also absolutely vital.

Whilst living in a suicide-free world is something that we would all hope for, tragically over 200 schoolchildren take their own lives in the UK each year.¹⁵

Postvention refers to the actions taken to support the community after someone dies by suicide. Good postvention support can help people to grieve and recover and can be a critical element in preventing further suicides.¹⁶

Suicide is something that could happen in any setting, at any time. However, when schools have a crisis plan in place, staff members are prepared and supported in responding effectively in the devastating event of a suicide or sudden death.

'Just in case' instead of 'just in time'.

Research shows that young people bereaved by suicide are 65% more likely to attempt suicide, compared to those bereaved by sudden natural causes.¹⁷ This is known as suicide contagion.

An agreed, evidence-based protocol for responding to a suspected suicide is crucial in preventing additional trauma, psychological harm or further suicides or suicidal behaviour.



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Creating a plan

Research estimates that for each suicide, around 135 people will be directly impacted.¹⁸ Even if the bereaved family is not ready to talk, or accept your support just yet, there will be many others in your community feeling the devastating ripple effect of what has happened. You should begin to plan your response as soon as possible.



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Your preparation should take the format of a written critical incident plan with clear guidelines. It should cover all of the following areas:



Who is in the critical response team and what are their roles?

Roles to consider include:

- Who will have overall responsibility for coordinating and monitoring the response?
- Who will compose and coordinate correspondence and other communications?
- Who will tell staff members?
- Who might be best placed to liaise with the family?
- Who will liaise with any outside agencies, such as mental health teams or other external support?
- Who will handle press enquiries?



What training needs are there?

- Any training needs should be identified, and relevant training/courses should be arranged. This is imperative for the crisis response team, but also worth considering for all staff.
- If staff will be supporting members of the community who are at risk of imitating suicidal behaviours or suicide contagion, then suicide prevention training is a must. There are many organisations that can support you with this. OLLIE delivers a comprehensive two-hour session that may be useful for your team called Talk Safe, Plan Safe – Suicide Prevention Training. This can be delivered in both in-house and open sessions. [Find out more here.](#)



How will you evaluate the usefulness of your plan and identify improvements?

- Whilst the aim is for your response to be as effective and supportive as possible, there will always be learning opportunities. As part of your plan, you should consider how you will evaluate your response and make necessary adaptations to your policy. This may be an annual review task for your Wellbeing Lead and may even include input from your 6th form leadership students, if applicable.



How will you communicate?

- Your plan should carefully consider the way in which you will tell staff, students and parents and all of the communications that follow. This will/may need to be adapted depending on the individual circumstances of the death. Guidance on this is provided in the [following chapters.](#)
- It may be worth having ready-written email/letter templates in your plan to save time spent writing them from scratch. We have provided [some examples](#), but would advise that you adapt these as appropriate for your setting.
- Your policy should acknowledge that certain members of your community may not wish to disclose the death as a suicide. This should be factored into your response plans.



How will you deal with media interest?

- There is likely to be a surge of public interest following a suicide. You must consider how your school will respond to media enquiries and those from the wider community and designate responsibility for this. We [provide further guidance](#) on this later in the guide.



How will you respond if you suspect a suicide cluster?

- Your plan should contain clear response steps in the event of suspected suicide contagion or a cluster. Establishing local support networks and agencies working in your area is key. Find further guidance on this later in the guide.



How will you support your students?

- Your community is likely to be shell-shocked and many students will need supporting through their grief. This should be accounted for in your plan. Any particularly [vulnerable students should be identified](#), monitored and offered support.
- Special consideration should be paid to [siblings](#).
- We would recommend setting out a dedicated space for bereaved pupils. The location of this should be carefully considered. It should be central, but also private, and must be staffed at all times.
- Your plan should include not just immediate support, but also consider the medium and long term. The loss of a student casts a long shadow. You will want to be mindful of how you can respectfully include the deceased's name in future events without distressing students, especially end of year celebrations, leavers' events and other significant moments for their year group. Not doing so will be upsetting for some students.



How will you disseminate the policy and plan to all staff?

The critical response team will be responsible for the direct actions in the immediate aftermath of the death. However, all members of staff in your setting should be aware of:

- Who is in the crisis response team.
- What the agreed plan is.
- Any expectations of them personally.
- Pathways of support for students.
- How to access support for themselves.

Once your critical incident response plan has been agreed, we recommend sharing it with all staff in an INSET or Twilight CPD session.

This plan should be treated in the same way as a fire drill or lockdown alarm. Although talking and thinking about suicide or sudden death can be painful, practising the actual implementation of the plan will quickly highlight any practical or logistical problems which may arise.

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What if a potential suicide cluster is suspected?

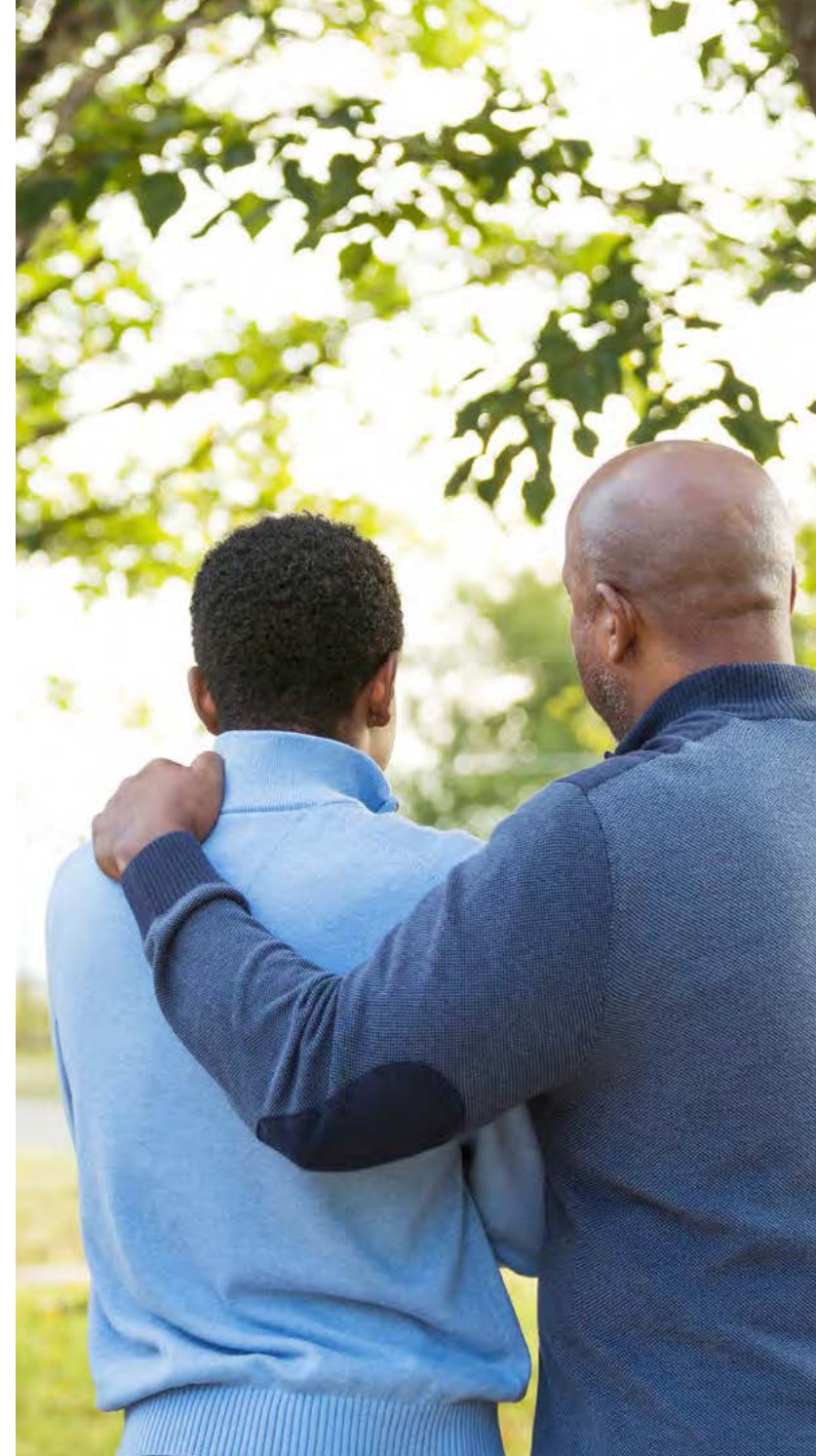
As outlined in [Section 1](#), a suicide cluster refers to several suicides or suicide attempts occurring closer together than would usually be expected. If a suicide cluster is suspected, it is important for facts to be carefully established in order to avoid potentially unhelpful responses.¹⁹

In the event of multiple suicides, a multi-agency approach will be required, with information shared appropriately with relevant groups. Guidance within England is clear. Each local authority should have a **Multi-Agency Suicide Prevention Group** responsible for suicide prevention plans, including the response in the event of a suspected suicide cluster.

[Public Health England guidance](#) states that a **Suicide Cluster Response Group** should be established to share information and plan an appropriate response. This could involve:

- The Rapid Response Team which investigates any sudden death in a child under the age of 18.
- School or college headteacher.
- Public health suicide prevention lead.
- Representatives of relevant agencies – for example social care, police and Child and Adolescent Mental Health Services (CAMHS).
- Child bereavement charities.

One member of your school's critical response team should be identified as the first point of contact for internal staff and external agencies.



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Prevention and support

School mental health staff and external mental health professionals should collaborate, meeting with affected students (and staff) to offer grief counselling or to connect them with external support services. Help-seeking should be promoted and there should be a broad focus on wellbeing within the whole school community.

There are many ways in which you can create a culture of wellbeing within the school community, such as:

- Booking wellbeing experts and professionals to speak at whole school events, such as prize days, end of year celebrations and assemblies.
- Planning engaging PSHE curriculums which teach about wellbeing in an age appropriate way, for each key stage. For younger students, you may want to bring in the [5 Ways to Wellbeing](#), for example.
- Supporting critical thinking skills such as goal setting and conflict resolution. [Storytelling For Better Behaviour](#) (Routledge, 2012) provides a year's worth of lesson plans that support both of these skill-sets and more.
- Providing students with reliable literature on wellbeing through the school library.
- Appointing 'Wellbeing Champions' amongst each year group and ensuring that they receive appropriate training and support to help other students who may struggle to speak to a staff member.

As part of your suicide response plan, establish whether or not your community has a local service focused on suicide prevention, and designate a representative to join this group. External help is especially beneficial if contagion is suspected.

In the tragic event of multiple suicides, press interest is likely to be high. We advise that you consult our advice on [managing questions from journalists](#). Irresponsible reporting is linked to the development of suicide clusters. However, responsible and sensitive reporting and social media can also provide help and support.²⁰ It might be helpful to have the [Samaritans'](#) advice on responsible reporting of suicide to hand to help ensure that guidelines are being followed. [IPSO](#) has similar guidance.



The Samaritans Media Advisory Service also provides free advice and training to support informed and safe coverage and can give advice on handling press enquiries in the event of a suicide. Email mediaadvice@samaritans.org for further information.

Please be aware that students will also need support and advice on:

1. What is appropriate to share on their social media accounts and why.
2. What to do if they see/read upsetting posts.
3. Who they can speak to confidentially if they are concerned about someone or something they have seen.

Find further information in our section on [social media](#).

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Identifying those who may need additional support

As part of your response plan, it is important to map out the members of your community who may be at higher risk of imitation behaviour or suicide. Suicide can cast a long shadow and creating a connectivity map (think mindmap crossed with a family tree) will be a useful exercise.



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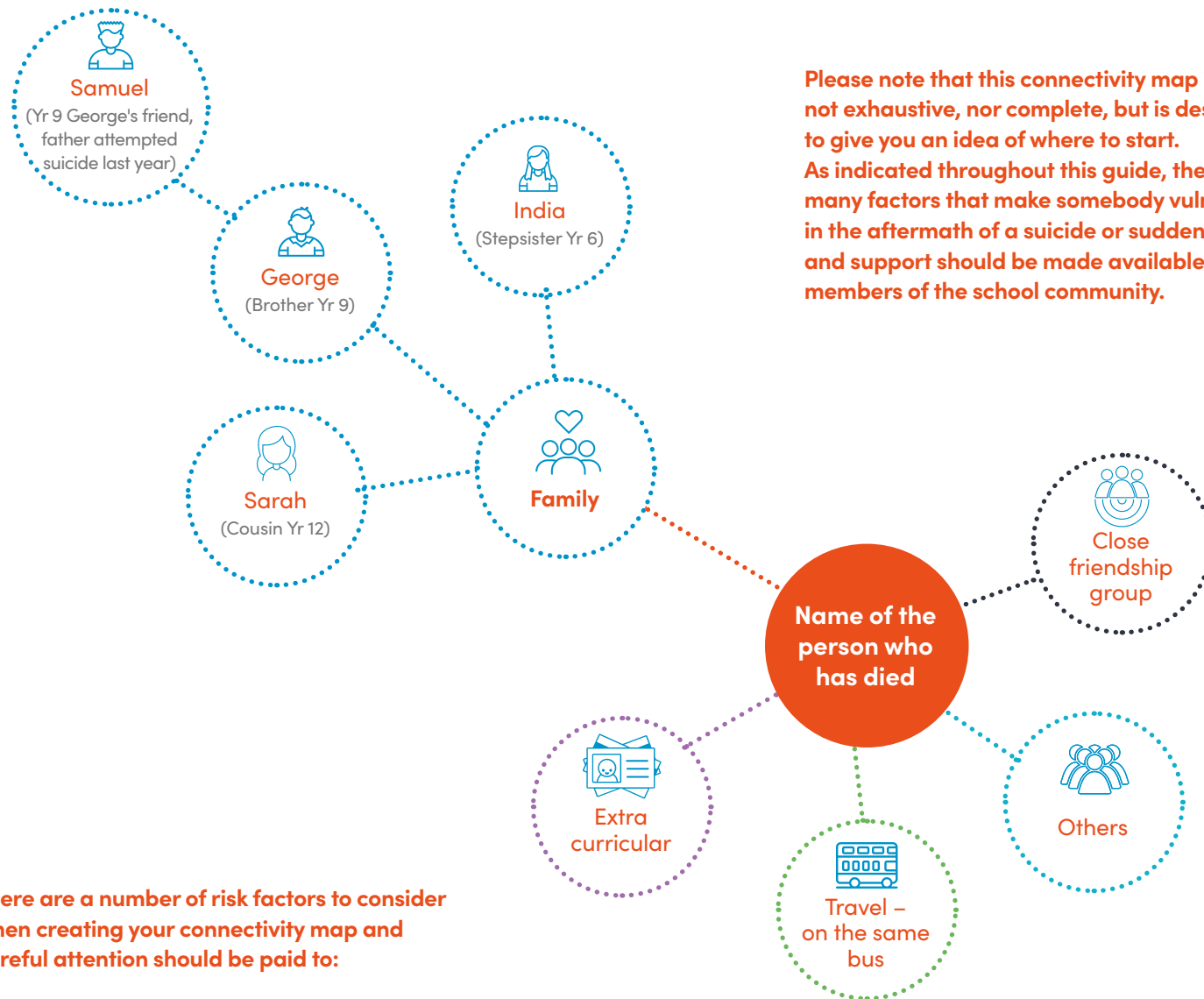
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What is a Connectivity Map?

When a suicide or sudden death occurs, a connectivity map²¹ will help you to identify the students who may be particularly vulnerable and require additional support. Your connectivity map may look something like the example below.



Please note that this connectivity map is not exhaustive, nor complete, but is designed to give you an idea of where to start. As indicated throughout this guide, there are many factors that make somebody vulnerable in the aftermath of a suicide or sudden death, and support should be made available to ALL members of the school community.

There are a number of risk factors to consider when creating your connectivity map and careful attention should be paid to:

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There are a number of risk factors to consider when creating your connectivity map. Careful attention should be paid to:

- **Close friends of the deceased.**
- **Those in the same class** and other students they took lessons with. Did the deceased have extra tuition in certain subjects? Were they part of a lunchtime reading group?
- **Their romantic partner** and their friends.
- **Students in the same extra-curricular groups.**
- **Students they travelled to and from school with.** Perhaps they sat next to/in front of/ behind them on the bus each day.
- **Students who looked up to them or mentored them.**
- **Those who have previously been bereaved by suicide** or who know somebody who has attempted to take their own life.
- **Those who have attempted suicide themselves.**
- **Those with a geographical connection to the death.** They might have lived with or near the student, or have been close to the place of death, for example.
- **Those who found the person who has died by suicide.**
- **Those in close social or digital proximity to the deceased.** They may have been in the same friendship group, played the same online game together or spoken regularly on social media, etc.
- **Siblings of the person who has died and their networks.**
- **Those who show an unusually high level of interest or fascination in suicide.**
- **Those who appear to have a significant knowledge about suicide** or who appear to have done lots of research into it. Look out for any student who uses advanced terminology or shows an in-depth understanding of risk factors or methods.
- **Those with a history of depression, trauma or loss.**
- **Those dealing with traumatic events in their lives,** such as family separation or the death of a loved one.
- **Those involved in inquest proceedings or the coroner's investigation.**
- **Those who self-harm or who have a history of self-harm.** Common examples of self-harm include cutting the arms or legs, hitting yourself, self-poisoning, cutting or burning yourself, pulling your own hair, pricking your own skin and self-strangulation. Self-harm is relatively common and does not automatically lead to suicide. However, there is an association between the two and a history of self-harm is the strongest predictor of dying by suicide.²²

Students who self-harm may feel especially vulnerable in the aftermath of a suicide or sudden death. Keep in mind that sometimes self-harm is the only way a person can cope, and therefore they may turn to self-harm as an attempt to manage the way they feel about the death.

It seems counterintuitive, but self-harming can also act as a protective factor for some people and in some scenarios may actually be preventing them from feeling so overwhelmed that they end their life.

Conversations with students who self-harm should be gentle and exploratory. Although it may seem a sensible request to you, it is vital that you do not tell them to stop harming unless an alternative and safer coping mechanism can be agreed and ongoing support is in place.

Ensure that you follow established procedures if you identify self-harm in your setting. [New NICE Guidelines](#) on responding to self-harm in an educational setting can be found via the link given.

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Some students in need of support may not initially be on your radar. Perhaps they are in another year group and just saw the deceased briefly each day. Maybe they stood up for them that one time, bought lunch for them or let them join in the footy. You won't immediately think of them, but they may be hurting deeply. They won't identify themselves because they don't feel they had a 'real' relationship with the deceased, but they will nonetheless be broken and should be as much of a concern for you as the immediate friendship group.

Signs that young people need further support and concerning behaviours to look out for include:

- Talking about or making plans for suicide.
- Expressing hopelessness.
- Showing signs of overwhelming emotional distress.
- Significant changes in behaviour or mood (such as significant anger or irritation).
- Becoming withdrawn.
- Giving away meaningful possessions.
- Spending a lot of time in the toilets.
- Using slang suicide terminology. Certain phrases are shared on pro-suicide websites as a way of talking about suicide or the intention to end one's life without raising alarm or concern. These include:
 - "Sewerslide" = suicide
 - "Barcode wrists/arms" = self-harm
 - "This is how much chapstick I have left" = When I run out, I'm going to kill myself.
 - "I want to be a baker" / "I'm cooking with Hannah Baker" = Reference to the Netflix show 13 Reasons Why.
 - "I want to go to a concert" when in reference to artists who have died by suicide/overdose, such as Lil Peep, xxtentacion, Amy Winehouse or Mac Miller = I'm contemplating suicide.

[Mental health screening tools](#) may be useful in identifying members of the general student and staff population who could be at heightened risk. Any appropriate tools should be agreed in consultation with mental health professionals, as should further professional support steps for anyone found to be at high risk.

Please keep in mind that some students are quite used to answering these type of forms in a way that avoids drawing attention and many students who feel suicidal would not meet the criteria for a mental illness diagnosis so won't be picked up via this assessment. Furthermore, [recent research](#) now makes clear that questions specific to suicide risk are hugely ineffective in identifying those who are actually at risk.

Child bereavement specialists should be able to support, and you may find your local hospice provides a range of services. The OLLIE Foundation provides 'Write To Release' sessions for small groups of students who have been bereaved that offer both emotional support combined with a memorial activity. Also, don't underestimate the importance of teacher-pupil relationship, open conversations, and open door policies.

Increasingly, the internet is where many of us go to seek connection and information. Overwhelmingly, people wanting to explore methods of suicide will search for this information online.



[R;pple](#) is an AI disruption tool that is free for educational settings, students and families to access. It interrupts searches looking for methods of self-harm and suicide.

We strongly advise that as part of your suicide prevention AND Information Technology policy that all school devices AND all devices being brought on to the school premises have R;pple downloaded on to them. R;pple is also free to families, so we would encourage all families with students at the school to download it onto their home desk and laptops too.

ripplesuicideprevention.com

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Supporting someone who has witnessed a suicide

Any pupil or staff member who witnessed or was somehow involved in a death may feel a wide range of emotions, including trauma, guilt, shame, sadness, anger, hopelessness, confusion or panic. They might also experience flashbacks, be less able to sleep, become more impulsive, be less able to concentrate or focus, want to be alone or avoid social situations, or simply feel numb. A child's emotional response is likely to be similar to an adult's, but they may lack the emotional maturity to understand their grief.

Thrive LDN, Grassroots and the Support after Suicide Partnership have produced a booklet for anyone affected by witnessing the suicide when they did not know the person who has died. [You can find this booklet here.](#)²³

[Winston's Wish](#), and [Child Bereavement UK](#) are organisations that support bereaved children and their families. They have put together some guidance on supporting children who have witnessed suicide.



In brief, they recommend the following:

- Help children and young people to understand what has happened by being prepared to talk to them **when/if they are ready**. Some children may want to talk in more detail. Others may not. Be responsive and sensitive to this.
- Be honest and open, **providing them with the age-appropriate information** that they need at the time.
- If you don't know how to answer a question, be honest and say you'll come back to them. Always follow this up.
- **Maintain stable routines.**
- **Look out for and log any unusual behaviours.**
- **Be ready to seek further support** if it is needed.

We would also advise being proactive about identifying any signs of distress, maintaining close communication with the child's family and monitoring their general wellbeing together, including sleep patterns. The child should also know where and how to seek support within the school environment.

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Supporting siblings

Supporting siblings when their brother or sister has died by suicide can be extremely challenging because everybody experiences grief differently. We have established social narratives and an understanding of parental grief (for example “there is no greater loss than losing a child”), which we simply don't have for siblings. Because of this, when a sibling loses a brother or sister, perhaps especially to suicide, they have to navigate an unknown situation and other people are less likely to know how to respond.

Siblings often face a different set of challenges to parents, extended family or friends as they attempt to deal with the loss of their brother or sister, as well as a changing family dynamic. All of a sudden, they may become the eldest, youngest or only child within the family unit. They may feel a responsibility to protect their other siblings and parents or may feel pressure to fill the space left by the death of their sibling. Their home may suddenly transform from a place of calm and sanctuary to one where emotions are highly charged and everybody is experiencing devastating grief.

There may be more conflict, more visitors, more uncertainty and more confusion in a space which used to feel unconditionally safe. If their sibling died at home, everything will act as a reminder of what has happened – their room, their clothes, their favourite food in the fridge or their shoes by the door.

It is possible that school may become that replacement sanctuary; an escape from the emotion and pain of what has happened. With this in mind, how you support siblings should form an integral part of your plan.

You should also consider how you can [support the friends of the sibling](#), who will unexpectedly find themselves needing to support a bereavement.



Most people prefer things to be done with them, not to them. This is as true for your students as it is for you. Much of the advice in this guide assumes that you will be drawing on existing relationships with the young people in your care so that you can formulate a response that considers their wants and needs. Wherever possible, involve them in discussions that will impact them, ask them what would help them in their return to school and tailor your response accordingly.

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✓ Dos

- ✓ Have a conversation with them before they return to school. Ask them what would make them feel comfortable and explore how possible these things will be to action. Make sure you also give time to consider any situations, places and people that may be challenging for them to handle over the coming weeks, and again explore together what the solution might look like.

- ✓ If they would prefer to avoid talking about what has happened at all, consider other ways in which they can communicate with their peers before they return to school. Could they write a letter to their class explaining what has happened, how they feel and what they do/don't want to discuss?

- ✓ Agree on a designated place within school where they can go if they are feeling overwhelmed and formulate a plan for how they can discreetly leave lessons if they need some time out.

Sometimes a small red card which they can subtly show a teacher is an easy way of allowing them a way out without having to explain why.

- ✓ When talking to them about what has happened, try to focus on them and how they are feeling. Make them the centre of the conversation and allow them the space to talk, cry and vent without judgement.

- ✓ Agree how often you will check in with them and stick to this. Some students may want to meet with you every morning. Others may want to use school as a place where they don't have to think about what has happened and might prefer to get back to school routine as quickly as possible.

- ✓ Reassure them that whatever they are feeling is valid. This might be anger, guilt, frustration, abandonment, resentment, relief. It could be anything. They may appear not to be feeling anything at all.

- ✓ Ensure that you are clear on family connections throughout the school. Remember that siblings from blended families may not share surnames.

- ✓ Help them to prepare for conversations that may be likely to occur, or that they are nervous might happen. Suggest that you work together to come up with pre-planned answers to questions that may arise, based on what they are comfortable saying. For example, "My brother died at the weekend. It was sad. It was suicide. Please don't ask me for any more information..."

✗ and Don'ts

- ✗ Don't presume what they will be feeling. Statements such as, "You must feel so sad!" may alienate those whose primary emotion isn't sadness at the time and make them feel that their experience of grief isn't 'normal'.

- ✗ Don't divert the conversation away from them, even if it feels more comfortable to do so. Questions such as, "How is your mum coping?" will reinforce any pressure to protect the rest of the family and put how they are actually feeling to the side.

- ✗ Don't make plans for their return to school without consulting with them first. This part of your plan should be made in discussion with them, taking into consideration what they are comfortable with.

- ✗ Avoid repeatedly asking how they are or what things are like at home.

Regularly checking in with these young people is important, even if they appear to find this frustrating. However, remember that conversations about the loss of their sibling will be dominating their lives at this point. Perhaps your check-ins could take another, less intense form? Go for a walk in the school grounds? Mindful colouring in silence? Playing a board game?

Chess and other brief games, walking and creative activities are always useful for those where eye contact is too much as they still allow for connection and, most importantly, conversation. That said, where conversation isn't helpful, these strategies allow for connection and a safe distraction.

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Returning to school following a suicide attempt

A robust plan of support should be in place **before** the student returns to school. This plan should be co-produced between the school, the student and their family wherever possible.

- **It is important to work with the family of the student to understand what existing external support is in place.** You should then make contact and coordinate with mental health professionals to plan appropriate support within the school environment, which will work alongside any support already being offered outside of school.
- **You should work with the student and their parents/carers to make a plan regarding the spread of information.** Keep in mind here that this will be deeply challenging for both the student and their family, who are likely to feel that they will be judged and may well be internally judging and blaming themselves for what has happened. They may be unclear as to whether or not you already know about the attempt via the hospital or CAMHS. Both the student and their family will need significant support throughout this conversation. The first step in this plan is to establish who, if anyone, within the school community already knows about the suicide attempt.



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- **If nobody else within the school community knows, you can work with the student and their family in a supportive way, whilst containing information.** This means informing staff on a “need to know basis” only, maintaining privacy for the student and their family, and safeguarding the rest of the school community.

It may be that the student would find it beneficial for one or two trusted members of staff to know what has happened, so they have somebody to speak to who has the whole picture. Perhaps it's the PE teacher who has taught them football for 3 years, or the art teacher who put their work in an exhibition. All decisions as to which members of staff will be told should be made in consultation with the student and their family, whilst balancing your safeguarding responsibilities to the rest of the school population.

Whilst some staff may not need to be informed of the suicide attempt, it is important to be open with all teachers and support staff about the fact that this student is struggling and may require discrete additional support in the form of deadline extensions, a moment to step out of lessons or a quiet place to eat lunch with a friend. This will ensure that the student receives the support they need, whilst also maintaining their privacy, and limiting the impact on other members of the community.

Because any member of staff within the school could be the one adult the student feels safe with we strongly recommend that ALL staff are able to access CPD training around student wellbeing and suicide prevention and intervention.

- **If some or all of the school community are aware of the attempt, you must identify other vulnerable students who may have been affected and implement support for them as well.** These may be close friends, classmates of the student, those who have attempted suicide in the past or who have lost a loved one to suicide ([Please consult our advice on identifying those who may need additional support for further information](#)).
- **Develop a support plan for any siblings in the school.** Again, it is preferable that all support plans are made in collaboration with the family and any other mental health professionals involved.
- **A risk assessment should be completed by a mental health practitioner.** This may be the school counsellor if you have one.
- **Develop an understanding of what precipitated the suicide attempt and be alert to what might precipitate another.**

- **Give classroom teachers the information they need.** Classroom teachers **do need** to know whether the student is on a full or partial study load and should be kept updated on the student's progress, in general. They **do not need** clinical information or a detailed history.
- **Think about social and peer relations.** Schedule a meeting with the young person's friends prior to their school return to discuss their feelings regarding their friend, how to relate and when to be concerned. Consider placing the student in a school-based support group, or buddy system.
- **Ask the student about any academic concerns and discuss potential options.** It may be helpful to arrange tutoring from peers or teachers, or to modify their timetable to relieve stress. Allow make-up work to be adjusted without sanctions and circulate this plan to relevant staff.

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- **Ideally, the school medical team will be given information regarding prescribed medication and possible side effects.** Medication may be prescribed to treat physical injuries as a result of the attempt, or antidepressants, such as selective serotonin reuptake inhibitors (SSRIs), may be prescribed to treat depression, anxiety or panic.

In the case of SSRIs, the medical team must be aware that this type of medication can cause side effects which lead to deepening and worsening anxiety, fear, and even suicidal thoughts.

The student and their family may not be aware of this. Many will not have been given clear details of the possible side effects and will rarely have a clear plan of action drawn up by their prescriber, in the event of experiencing any of these. Because they are unaware, they may conclude that their deteriorating wellbeing is their fault, and that this is despite the medication rather than because of it. It is vital the medical team are briefed and confident to effectively support the student and implement a Safe Plan if necessary.



For more information on this, and OLLIE's work on Safer Prescribing, please email contactus@theolliefoundation.org

Teachers should be notified that their student may/will need to leave lessons at appropriate points throughout the day to attend the medical centre and take their medication/have bandages changed, etc. Any medicines should be dispensed and monitored by the school medical team.

- **Address behaviour or attendance concerns.** Meet with teachers to help them anticipate appropriate limits and consequences of behaviour. Discuss any concerns and options with the student and plan next steps together. This may include placing the student on a sign in/out attendance sheet to be signed by the classroom teachers and returned to the attendance office at the end of the school day. Keeping in touch with the family and including the students in conversations about their progress (both personal and academic) and attendance is important in ensuring they feel involved and supported. Make home visits or regularly schedule parent conferences to review attendance and any concerns.



Some suggested steps



- 1 **Schedule a return to school meeting with the student, parents, relevant staff and health care professionals to discuss student needs.**



- 2 **Develop and implement a Safe Plan.**



- 3 **Maintain regular contact with the student and parents/carers.**



- 4 **Make sure that the student has been referred to appropriate support services.***



- 5 **Regularly review and maintain the safety plan to ensure effectiveness**



- 6 **Ensure that all staff involved have regular opportunities for debriefing and wellbeing reviews.**

* A note on referrals:

Waiting lists for referrals to specialist support services are long, so it is important for you to keep in contact with the support services and ensure that you know the following:

- Did the referral get picked up by the appropriate services?
- Did the student meet the criteria to receive their support?
- Is the student receiving meaningful support? If they are being seen, how's it going? Is it helping?
- If the student isn't being seen, what support can you implement in school in the meantime?

If the external service is offering a fixed amount of support, what is the exit strategy and how can the school support with this?

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Safe Plan – a universal tool for suicide prevention

When thoughts of suicide are overwhelming, staying safe takes a great deal of strength. A **Safe Plan** will not cure the issues and feelings that somebody is struggling with, but it can play a vital role in keeping them safe when they are feeling distressed or thinking about suicide and give them the chance to seek professional help.

The OLLIE Foundation has created their own **Safe Plan** which is [downloadable for free](#). It will remind somebody of reasons to live and connect them with people and services who can help during difficult times. Using written reminders and visual prompts, as well as important contact and emergency details, a Safe Plan will remind them that they are not alone and that help is available to keep them safe. It will also help users identify and create their own strategies for keeping safe. Doing so supports them to still have some efficacy in a situation that feels completely out of their control.

We recommend that individuals who are in an emotional crisis or worry they will be between now and the next time they see you, complete their Safe Plan with somebody that they trust. As a member of staff, you may be that person, so it's critical that you know what a Safe Plan is and how to help somebody complete one.

Whilst you are vital to facilitating this process, this should be a co-produced document with the at-risk individual thinking through how they can keep themselves safe in moments of overwhelm.



OLLIE's [Talk Safe, Plan Safe – Suicide Prevention Training](#) will teach you how to complete a Safe Plan with somebody you are concerned about. This two hour training session is delivered online and both open and in-house courses are available.

To find out more, visit OLLIE's website:

<https://theolliefoundation.org/training/talk-safe-plan-safe/>

Or email contactus@theolliefoundation.org

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Peer support: a note of caution

Peer support is widely used in many schools. You may have found it to be extremely effective, with some students able to open up to a peer more than they can to a teacher or member of support staff.

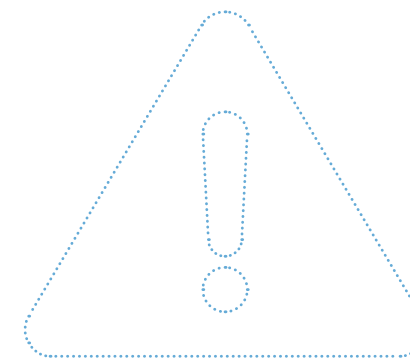
Appointing Student Wellbeing Champions in each year group can be an excellent way of encouraging peer support in your school, with students sharing advice with each other on issues such as managing homework deadlines, friendships, which clubs to join or how to write their personal statements for UCAS.

However, the evidence base on the effectiveness of peer support interventions on improving mental health remains limited²⁴ **and in the case of a suicide or sudden death, we would not expect peer champions to be part of the support that is available within school.**

Many adults do not know what to say when a suicide has occurred and although the peer mentors in your school may want to help, they are completely unqualified to support another student experiencing the complex range of emotions associated with grief. It would be completely unethical to put that burden on a student. For this reason, we would discourage students who have been impacted by the death from turning to peer mentors for support.

The student population as a whole should be made aware of where they can go both within school and externally to access support. There are many ways of doing this, but some ideas are:

- Putting up posters in each classroom and communal areas such as the canteen, library, common rooms with signposting to support networks.
- Putting a list of support resources as the wallpaper on all school devices.
- Emailing parents/carers with the full list of support and encouraging them to discuss it with their children and display it at home.
- Having regular drop-in sessions available in a discrete area of the school where students can quickly and easily access adult support.
- Meeting with your student mentors and giving them the tools to sensitively and appropriately direct students to other sources of support if they begin to talk about what has happened.
- Add a 'wellbeing' tab to your school website which signposts to local agencies and resources for support.



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Supporting staff members

The death of a pupil will impact on the whole school community and it's important to acknowledge the additional strain on school staff.

As with students, any traumatic news can activate historical trauma wounds and the same care and attention that you are putting in place for your students should be available to staff too.

Supporting grieving pupils can be extremely challenging for the adults in your setting. Striving to help bereaved students and families, making decisions about communications, implementing procedures and ensuring that all information provided is accurate and sensitive, whilst also experiencing your own grief, is very stressful.

Offering support to the whole staff team is therefore vital.

The staff population as a whole should be made aware of where they can go both within school and externally to access support. There are many ways of doing this, but some ideas are:

- Give staff opportunities to meet with each other, provide mutual support and discuss the concerns that they have.
- Consider and acknowledge any extra stresses going on in school at the time, such as assessments, transitions or inspections.
- If possible, it might be useful to arrange for substitute teachers or "floaters" from other schools who can be available in case teachers need to take time out of their classrooms.
- Certain staff members may have additional personal reasons why this time is particularly difficult, such as experiences of loss or trauma in the past, or a history of depression. Offer specific opportunities for these staff members to access support. Be mindful that these additional strains are extremely personal

and you should not wait for someone to reach out. Act as if this will be true for all, so that your staff support is as detailed, supportive, and accessible as possible, and so nobody has to ask for extra consideration.

- All staff should be provided with clear information about where and how to seek additional support and counselling should they require it.
- It may also be beneficial to appoint staff wellbeing champions, with part of their role being to raise awareness of suicide and break down the stigma.

Staff playing an active role in the suicide response team

might find the situation particularly stressful. As things begin to settle, those in crisis mode get a moment to breathe and may fall apart themselves. These individuals should be particularly mindful of their own wellbeing and find ways to look after themselves by making time for activities they enjoy. As their employer, the school should do whatever possible to put this in place on their behalf.

Remember that it is normal to feel affected by a tragic situation like this and it might be helpful to share feelings with friends, families or other staff members. Staff leading the response to the death should not be afraid to say if they are finding it overwhelming or if it is resurfacing previous loss or trauma from their own lives. Whilst compassion, understanding and sensitivity are imperative when supporting all those who have been bereaved, as with any other challenging personal situation, stay mindful of your professional boundaries and how much you are taking on.

Child Bereavement UK has some [useful resources](#) for school staff which might be worth consulting.

Anna Freud has also created an excellent document titled ["10 steps to school staff wellbeing"](#)

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The nature of grief

One of the misconceptions around grief is that it is linear and there is a point at which someone has or should have 'recovered from' their grief and their life returns to a new normal. The reality is that grief can come and go in waves. Your sudden death/suicide policy should set out the actions to be taken in the medium and long term to support the community, not just in the days or weeks after the event, or until the end of that academic year.

A term that your team should be aware of is 're-grieving'.

Re-grieving is very common and presents as a wave of emotion which can occur weeks, months or even years after somebody has died. It can be activated by any number of different stimuli, from thoughts and feelings, to events, smells, sights, tastes or words.



Imagine a group of year 8 students who tragically lose a friend to suicide. By the start of year 9, they might appear to be coping well with their loss. However, some begin to struggle again, 3 years later, around the time of their GCSE exams. It might be that they had once envisioned their friend being their revision partner. They might have agreed to take the same GCSE options and have realised that they won't see that friendly face in the exam hall. Maybe they feel guilty for celebrating on results day, because they know their friend will not be collecting theirs and joining the party afterwards, or something similar.

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Any suicide or sudden death policy must acknowledge the possibility of re-grieving amongst the community and make provision for those who experience it.

You might like to consider:

- **Having a special space in your school for those who are struggling** with feelings of re-grief or who want to be able to go somewhere to remember the person who has died six months, one year or two years on.
- **Continuing to mention the person who has died in a sensitive and appropriate way.** This will help to keep their memory alive and will normalise feelings of grief once the immediate aftermath is over. It also keeps the conversation open and supports the idea that everybody experiences loss in a different way and at a different pace, and that this is normal and healthy. Be mindful of those moments where it will be sensitive to acknowledge the deceased when 'that' year group, sports team, or any other group the deceased was part of, transitions into 6th form, leaves school or wins the sporting event. This can feel very supportive to those who are still struggling.

In the same way that grief will continue for many beyond the short term, you should be prepared for questions to be asked by the community even years after the death.

These questions may differ in their focus to those asked in the immediate aftermath, with potentially years of hearsay, rumour and dramatisation affecting what people know about the person who died and how they ended their life. You may be asked:

- What did the school do about it?
- Are you still in touch with the family of the deceased?
- How did the school prevent suicide contagion?
- How is the school remembering the person who died?
- I heard this... is it true?

It remains important to be open to these questions and set aside time to address them at an appropriate time and in the right environment.

Schools are often left walking a delicate line between those in the community who do not welcome discussion on death or continual reminders of support and those who want it to be the focus of everyone's attention and can't understand why there isn't more discussion and support being offered.

All tragedies allow us the space to review what, if anything, could have been better, should have been in place, or could have been predicted. We are all clearer with hindsight. But what you can do now, today, before you find yourself needing to respond to a suicide is ensure that all your admin, support and academic staff attend a short online suicide prevention training like [Talk Safe Plan Safe – Suicide Prevention Training](#) and ensure that as many staff possible attend [Mental Health First Aid training](#).

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The importance of routine

Whilst grief is not a linear process, maintaining normal routines for students is crucial and you should aim to return to these as soon as possible.

For many young people, the routine of school provides much-needed stability and, whilst many members of the school community may be affected by the death for a very long time, there are likely to be some who do not wish to be continually reminded of what has happened.

Getting students back into lessons, running lunchtime and after school clubs, and delivering hopeful, inspiring pastoral activities and assemblies will help to reinforce the message that, whilst it is absolutely normal to grieve and feel devastated by the death, they can and will cope with what has happened.

This can be balanced by continuing to have a dedicated space in the school for those who are struggling and ongoing one-to-one or small group check-ins, mentoring and counselling for staff and students who require ongoing support.

Staff who feel comfortable to do so should have the freedom to have conversations with their students about the death in lessons if it feels appropriate. If students bring up the death or the person who has died in their lesson, the teacher may find it useful to set a time frame for the conversation.

“ I completely understand that it's important we talk about this. Let's have 10 minutes to discuss anything you'd like, and then we will start on our work for today.

This gives those who want to talk the space to explore and share, whilst also setting out clear parameters for those who would prefer to get back to their work and routine.

Having said all of the above, there will be some students who are significantly impacted and on different days may find it hard to focus. Some lesson content may be 'activating' for them depending on their personal relationship with the deceased and/or the circumstances around their death. Birthdays, anniversaries and holidays may also be challenging.

Whilst 'routine' can and often is very supportive, there may be some days where it just feels harder than others to get through.

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Cultural and religious considerations

Cultural and religious diversity is an important consideration when planning your postvention response. Differences in religion, race, ethnicity and language may impact on how people deal with death generally and how they think about suicide specifically. It can be easy to cause offence and distress unwittingly, so things to be sensitive to include:

- Moral outlooks on suicide – some cultures still consider it a failing.
- Rituals, rites and beliefs around death and bereavement.
- Levels of comfort in talking about suicide.

Action points:

- Ensure that support is inclusive to all. This may mean researching some of the views around death (and suicide specifically) for the cultures within your community.
- Establish good connections with local religious and community leaders to help gain a stronger understanding of rites and responsibilities.
- Where the family liaison within your suicide postvention team is of a different racial, ethnic or religious group to the family of the person who has died, consider if this will cause a barrier to successful support and or communication and what you can do to overcome this potential obstacle.
- Make use of interpreters and translators as appropriate.
- Where possible, make resource materials available in different languages.
- It is important not to presume how a person's culture or faith will dictate their reactions to what has happened or how they will grieve. It is always worth having a direct conversation with the family and asking, "What would you like to do?" and, "What do you need from us at this time?"

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Memorials

After a suspected suicide, students, staff and family members are likely to want to celebrate and remember their friend, pupil or loved one. However, it's important to recognise that permanent memorials can become painful reminders for those left behind.

Any memorial needs to be sensitive to the emotional needs of those most affected. Most importantly, we want to avoid sending an unintended message to students that suicide is, in some situations, a viable option. Sadly, memorials can give this completely unintended message and that's why many schools choose not to have one. However, with careful thought and by ensuring that the memorial focuses on what the deceased achieved and the values they stood for, rather than how they died, this could be something that helps support your community.

Whatever you decide is right for your community, be aware of how easy it is to sensationalise suicide, despite our best intentions and the obvious concern any unintended messages may have on anyone who is especially vulnerable.

We advise you to put a memorial policy in place.

To ensure consistency around this complex issue, schools should consider having a single and consistent policy on how **any** death (student or staff) might be memorialised, regardless of circumstance. You might also want to establish if your local district or other local schools already have procedures in place.

Settings might create a committee to review all memorial requests. This would enable any suggestions for memorials to be carefully considered, with student safety as paramount. A committee should ideally include representation from all stakeholders – a school governor, administrator, staff member/s, as well as a parent and student (in a secondary setting). The committee should be aware of how important it is for any memorial to emphasise positive, life-affirming activities. **All staff members** should be made aware of the policy and procedures.

If your setting already has a memorial policy, revisit it to ensure that it carefully and specifically considers memorials after a death by suicide, paying attention to the body of evidence we now have on suicide contagion.

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When devising a memorial policy, settings should consider:

- What kind of permanent memorials are acceptable and what are not.
- How a memorial might help or impede the grieving process.
- How memorials might impact on vulnerable members of your community.
- The acceptable time limit for any tributes (such as cards and letters).
- An appropriate site for these kinds of tributes.
- What happens to the tributes afterwards.
- What other positive activities you will offer to pupils.
- Whether or not you will offer an online memorial on the school website.
- How you will communicate with family and close friends about the specifics of any memorial.
- How you will deal with spontaneous memorials started by students.

When choosing how to remember someone, consider options which positively affect the school community, and discount anything that might glamourise the death.

- **If your setting has a temporary site where pupils can leave cards, letters or gifts, think carefully about the location.** Memorials should be optional for all staff and pupils, so steer clear of the school entrance or anywhere on the school grounds that is unavoidable for all staff and pupils. Do not advocate any memorials at the location where the person died.
- **Set a time limit for memorials** and liaise with the family to see if they would like tributes to be sent on to them. You may choose to allow memorials until the day after the funeral, or designate a two-week period, for example.
- **Think about online tributes.** As schools can't control student-led memorials on social media, it's worth considering whether or not your setting will create a temporary online memorial on your school website. This will enable someone from your crisis response team to monitor and moderate all of the posts. If you do establish an online memorial:
 - Set a time limit and ensure that students and staff are aware of this.
 - Keep an archive copy of the memorial page after it is removed. This can help if there are later concerns about student wellbeing.
 - When the memorial is taken down, it's a good idea to replace it with a message that acknowledges the support of those who participated and provides some positive ideas and activities for boosting wellbeing.
- **For schools wanting a permanent marker or remembrance, non-physical memorials are most appropriate.**
- **Be proactive in working with family and friends when choosing a memorial. Where parents have separated, ideally both parties will agree to any memorial.**

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What sort of memorials might be acceptable?

Raising money for the person's favourite charity.

Buying books for the school library on mental health, wellbeing and resilience.

Implementing a suicide prevention programme if your school does not already have one in place.

Partnering with evidence-based groups which promote good mental health or investing in wellbeing provision and enrichment activities.

Memorials that need considerable thought because of the potential for negative consequences.

Planting trees or gardens.

Placing benches or any other physical object on school grounds.

Plaques on school premises or naming rooms, venues or events after the person.

Permanent memorial websites.

Whole-school commemorative assemblies.

Commemorative T-shirts or banners.

Images of the person who has died.

Balloon release – thought needs to be given to environmental issues if this option is considered.

Special acknowledgements at school events or in memory books/yearbooks.

What about student-led memorials?

As schools are unable to control student-led activities on social media, educating students about the potential risks of online memorials is crucial. Students need to be aware that:

- Online memorials may attract hurtful or negative content and they have little control over this. School staff should speak to the students involved to stress the importance of safe messages and information and the risks of further harm.
- Whilst their intentions are likely to be nothing but good, it's important to help pupils understand that some memorials might impact others negatively, especially if they are very public (such as t-shirts). They should be encouraged to consider positive, life-affirming memorials and activities.
- Anything that sensationalises suicide can be harmful to other peers who are vulnerable.

To mitigate risk, schools may wish to open a temporary online memorial page on the school website and direct students there.

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Funerals fall outside of a school's control, but a response to funerals still needs to be well thought out.

- If the family allow and can accommodate, pupils and staff who wish to attend a funeral should be able to do so, but normal lessons should continue for all those who don't. School policy needs to be in place to account for students' absence from school and for covering staff who wish to attend. Permission from parents/carers should be required before a pupil can leave school to attend a funeral.
- Ideally, parents or guardians should accompany any student who wants to attend and schools should encourage this.
- Young people should feel adequately prepared before attending a funeral, and understand what will happen during the ceremony in advance. In communications, consider the information that you will give about funeral arrangements. As well as location, date and time, any email or letter should also include a brief outline of what students should expect (this is likely to differ for different cultures and religions). It might also include guidance on expressing their condolences to the family.
- If possible, school pastoral staff, mental health professionals or counsellors should attend the funeral to offer support. This will need to be considered in discussion with the family, funeral director and faith leader.



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Social media

Social media can be used as an effective way to disseminate useful information about sources of support. However, it can also be problematic, not least because schools cannot control how their students (or their parents) use social media and what they say in their posts and group chats.

As we all know, news can be shared instantly via different platforms, so it is important that schools communicate with students and their families quickly and clearly to limit speculation and gossip.

Generally, as part of school agreements with pupils and families, it will be useful to have some guidance in place about the use of social media and the expected etiquette and courtesies when referencing school or anyone who attends school. This may already be part of your IT or anti-bullying policies.

You will likely also have an 'emergency communication' system in place whereby all staff and families are familiar with how urgent mass communications will be sent and which platforms you use.

It's important to:

- Ensure that your postvention plan includes protocols on how school social media channels will be used. Useful messages to put out via official school social media channels are:
 - Practical details about the funeral or memorial service, assuming the family would like this information disseminating.
 - Accurate information about how and where students can access support.
 - The details of suicide prevention organisations, such as The OLLIE Foundation, and safe messages on this topic.
 - Mental health and wellbeing resources.
 - The details of resources and organisations that offer grief and bereavement support.
 - Suggestions of positive and life-affirming activities and resources.
- Be aware that students might use their own social media or the deceased person's social media page to express their thoughts. This might include sharing how they are feeling, asking questions or potentially even spreading rumours or negative messages. Monitoring this (where possible) can be useful in identifying those at risk or in need of greater support. Any message that expresses hopelessness or suicidal ideation should be taken very seriously and support offered.
- If appropriate, schools might choose to work with certain students to help promote positive messages about mental health and suicide prevention on social media and encourage other pupils to use it safely.
- Remember to follow our guidelines on sensitive and safe communication when posting on social media.

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What if your community doesn't accept or acknowledge suicide as the cause of death?

Firstly, we want to acknowledge that this must be an incredibly difficult time for you. We really appreciate you taking the step to download this guide, and for any further actions you are able to take to support your school community.

If you are in this situation, you may be faced with any number of obstacles that prevent you from implementing much of the guidance in this booklet. Whilst this can be very challenging, you will already be aware that those who oppose suicide and refuse to accept it will have their own, valid reasons for doing so.

Despite the barriers you face, there are small changes that you may be able to implement which will make a significant difference to your students. These may include:

- Producing a new seating plan for the class which has been bereaved.
- Removing the student from registers, so their name is not called out.
- Allocating a specific location in the school for students to go if they are feeling upset or overwhelmed by 'anything'.
- Upskilling with active listening techniques so that you can facilitate a supportive space for people who need to talk.

There are organisations and resources that can support you in this situation and we have listed some below:

Inspired Minds Organisation:

A faith-based, grassroots mental health charity with the aim of raising awareness, combating stigma and providing professional, non-judgemental, confidential support to those with mental health illnesses. Although Inspired Minds works predominantly with those from the Islamic faith, they do not disregard any persons of differing backgrounds.
inspiredminds.org.uk

When a Loved One Dies By Suicide: Comfort, Hope, and Healing for Grieving Catholics by The Association of Catholic Mental Health Ministers:

Written by Catholics who have lost a loved one due to suicide. The contributors share their personal stories of loss, of learning to cope with the crushing grief, of finding comfort in faith and community, and of discovering hope as they began to move forward again.
[Available to buy here.](#)

Jewish Helpline:

Provide a lifeline to those who are feeling lonely, anxious, depressed or suicidal. Open from 12 noon to 12 midnight everyday except Shabbat and Yom Tovim.
12:00 to 15:00 Fridays.
Call 0800 652 9249 or 020 3096 2875.

Crossline:

A confidential, Christian-staffed helpline established in Hull and the surrounding area. Crossline is available to listen to problems, whether you are a Christian or non-Christian, in total confidence and with a caring, compassionate ear.
Call 0300 111 0101, everyday from 09:00 to midnight.

Rethink Mental Illness:

Telephone support service for anyone affected by mental health issues. Call 0808 800 2073 for their Sahayak helpline. Languages available are Gujarati, Punjabi, Hindi, Urdu or English.
Available Monday, Wednesday 16:00 to 19:00 and Tuesday, Thursday 12:00 to 15:00.

One Call Away:

An organisation dedicated to raising awareness of the challenges of mental health faced by the Traveller and Gypsy Community. They are trained in suicide prevention, with trainee counsellors on hand to listen, help and support those who are struggling.
They have a Facebook page available at One-Call-Away or you can call Mark: 07393 56173 or Caroline: 07748997617

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What to do if there is a suicide at another school?

Just as we would advise you to contact the headteachers of other local schools if there's a suicide in your community, you may be contacted about a suicide in another nearby school.

In this instance, you will need to gather as much information as possible, as this will inform the steps you take as part of your response. We would recommend trying to ascertain the following:

- What is the name and year group of the student who has died?
- What happened and when?
- Are there any clear links with students at your school? For instance, are there students who study together, or play in the same team for the County, etc. Could there be any other connections to your school – siblings, other relatives, romantic relationships?
- How far along in their own response is the school? Have they told their staff/students/parents yet? You will need to take this into account when planning your response as you should not announce the death to your community until their community has been told.
- What are their next steps?

In the case of a suicide at another school, we would recommend only breaking this news to the staff and students who knew or had a connection with the person who has died and are therefore likely to be directly impacted by the death.

For example, if a year 12 student at another school takes their own life, it would not be appropriate to announce the death to your Year 7 students, unless any of them are likely to have known the student in some capacity.

When deciding who to tell, it might be helpful to consider the following:

- Which of your students are likely to have been in a friendship group with or an acquaintance of the person who has died? Those in the same year group would be a good starting point.
- Family connections – are there any cousins, family friends or extended family who attend your school?
- Was the person who died involved in the same extracurricular activities or clubs as students in your school? For example, were they part of a local football team or orchestra?

Once you have identified the students who need to be informed, we recommend implementing the same type of plan as we have discussed throughout the rest of this guide, but on a smaller scale, and only for these impacted students. This includes:

- Telling them in a private space where support is on hand.
- Allocating a designated, supervised space in school where these students can go if they need support or time out of lessons.
- Making staff aware of the news and providing a list of students who have been notified. Ensure that the staff who teach these students know where to send them for support if they return to lessons but struggle to cope.
- Ensuring that their parents/carers are notified of what has happened and making them aware of the support available both in school and externally.
- You may also choose to discuss with these students how they can honour the person who has died in their own way at your school. [Visit the chapter on memorials](#) to read how to manage this sensitively and safely.

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Communication matters

A key part of discussion during meetings following a sudden death should be deciding:

- The phrasing that all staff will use in their correspondence with the community.
- Which details should be shared and which should be kept private.

It is important to consult the family or loved ones of the deceased throughout this process, but remember that this will be an extremely challenging time for them. They may not be able to or want to respond to all queries/questions in a timely manner.

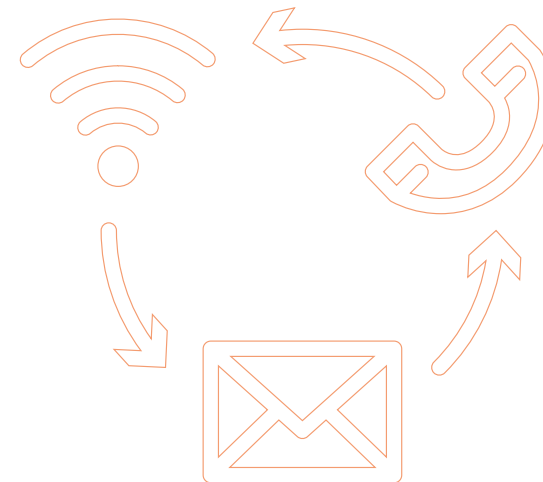
Whilst the news that somebody has died may be released almost immediately, you must consult the family and have their agreement before the cause or nature of the death is disclosed.

Regardless of what you know, perhaps because you were there or because the family have confirmed certain pieces of information, the cause of death can only be legally confirmed by the coroner's inquest. Because of this, you may choose to use the terms 'suspected suicide' or 'the death is being treated as a suicide' in your correspondence.

Parents may appreciate guidance on how to talk with their children about suicide and how best to support them at home. They will appreciate any information you can share on what students can expect at school over the coming days and weeks. This will be particularly helpful to parents who are supporting very nervous or anxious children and those with ASD.

Clear messaging will also help those whose children have been relinquished – adopted, fostered or have been in care. Any previous traumatic loss or experience of abandonment can be reactivated by such news. No matter how wonderful the placement or adoption, all adoption and placements start with loss. Although one child may not be overly upset by this, be prepared for others to be mortified, because this loss (even if they were not close to the deceased) can open up a wound that they may not even know they are carrying.

If you would like to know more about relinquishment and why those who have been relinquished are statistically more at risk of suicide compared to their peers, please contact [The OLLIE Foundation](#).



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Talking to the bereaved family

Schools will need to communicate with the family on any number of things, not least to offer condolences and support. It's likely someone will visit the family home and at some point the family will visit school.

In your initial conversation or meeting, it will be beneficial to discuss the following:

- **How can the school support the family going forward?**
This might include signposting them to sources of support depending on their needs or making a plan of support for siblings, etc.
- **Who already knows about the death and what have they been told?** This will enable you to start planning and implementing support for these individuals.
- **Sharing the news with the rest of the school community.**
How and when will the rest of the school population be told?
- **Share the school's next steps.** This might include contacting other local schools and when/how this will happen.

As a nation, we are not comfortable around grief and loss. For these reasons, we know that during the initial telephone call or meeting with the bereaved family, you may feel somewhat overwhelmed, and deeply unqualified to have this conversation. There is nothing you can say that can fix anything. This is completely unfixable. But you can make sure that in these darkest of days, you are available to talk, as and when needed, and can be present to support the family, siblings and friends during challenging moments.

Grief is not formulaic or linear. Everyone experiences grief and loss in different ways. Some family members may be visibly consumed by devastating grief, whilst others may not appear to show any emotion at all.

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To help the conversation to go as smoothly as possible, ensure you have read through all available notes and records about the person who has died and their family in advance. Know the family dynamic. What is their cultural or religious background and what that might mean for this situation? Are the parents divorced? Does the student have siblings or cousins at the school? What communication has the school had with this family so far? This will make you feel more prepared and reduce the risk of unintentionally causing offence.

To help you prepare to meet or speak with the family, the following points may be useful.

Do:

- Be honest if there are points in the conversation where you just don't know what to say or how to react.
- Use **appropriate language** to talk about what has happened
- Talk about the person who has died, use their name and, if it feels appropriate, share some warm memories of them.
- Reassure them that you are there to support them and any siblings/cousins, etc. in the school community.
- If you have not been bereaved, please be aware that grief is not linear. It comes in waves, and can feel different from one day to the next.

Don't:

- Say that you understand what they are going through, even if you have also been bereaved by suicide. Remember that everyone experiences grief differently.
- Use cliches such as 'it will get easier' or 'they've gone to a better place'.
- Make any comments which could be construed as judgemental or attempt to put forward explanations for what has happened.
- Be fearful of showing your own emotion.
- Start discussing plans straight away. This will make the conversation feel overly formal and like a tick box exercise. Remember the importance of that human response.

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Starting your first conversation with bereaved parents:

It's important that you open the conversation in a sensitive way that feels comfortable to you and appropriate in the circumstances. If you are struggling to know where to start, here are some statements that may be useful:

I'm not sure what to say, but I want you to know that we care and we will do everything we can to support you and your family.

I'm so sorry to hear what has happened. I just cannot imagine what you are going through.

This is such a devastating time. When you feel ready, please let me know if there's anything we can do to help

Supporting parents in a way that feels right for them will be different for every family. What is appreciated by one set of parents might not be for another. Drawing on your existing knowledge of and connection with the family will help. What do you know about them already? How has your communication with them in the past been received? Use this to approach your conversations.

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An urgent administrative matter that may feel insensitive, but needs to be discussed, is your duty of care to others and who you would typically now contact and why, including other schools and outside agencies. Crucially, the family needs to know what is being communicated so they have some understanding of what is being said about their child and who it's being said to.

This conversation will also likely be the first opportunity to understand how and what the family plan to communicate with others and whether they are strongly against any mention of suspected suicide at this time. It will be important for you to consider how your team will respond should the family of the deceased decide not to announce the death as a suspected suicide, even if evidence supports this or it is later ruled as such in the coroner's court. There are a number of reasons why they may choose this course of action including stigma, shame, cultural beliefs, disbelief and fear.

In this instance, and where possible, it will be useful for a lead member of staff to explore with the family how your setting wishes or needs, to support the school community. For instance, there may already be significant online chat amongst students and families alluding to suicide. You can be sensitive to the family's wishes, but if this conversation is already happening, suicide and suicide prevention will need to be spoken about, regardless of whether this tragedy is or isn't a suicide. It is important for the family to understand why you need to have these conversations.

When the coroner does give a verdict, there will be clarity regarding the cause of death for the public. Using terms like 'unexplained' or 'accidental' can be problematic for a number of reasons. For instance, should the cause of death be deemed a suicide by the coroner later, talking about an accident or 'unexplained' cause of death will simply add to the stigma and shame around suicide and may prevent potentially life-saving conversations within a community where many may already be worrying about suicide.

The loss of a loved one leaves a family in unfathomable grief but suicide leaves many in a trauma response too. The family will be in deep shock when you first speak with them and the reality is that you will likely know much more than they will about support and the services that are available to them.

It will be helpful when visiting to take a care pack with you that contains the resources list we have shared at the end of this document, and make sure everyone supporting them is aware of the Help is at Hand directory, downloadable from OLLIE's [website](#).



If the family are clear that they do not want suicide mentioned as the cause of death, you may choose to state that 'the family has asked for your support of their privacy at this time and respect for their decision not to share any details of their (daughter's/son's) death'.

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What to focus on when telling the school community

The goal is for your community to feel safe, heard, informed and supported with staff able to have honest and transparent discussions. However, the level of detail shared, and how, must be thought through. We advise you to consider what is the least that can be shared that will achieve the goal of keeping people safe, informed, heard and supported.

Some information risks being too upsetting and may even lead to imitative behaviour. This includes:

- Sharing details on the method of suicide.
- Sharing the suspected reasons why the person ended their life.
- Discussing whether or not there was a suicide note and what was included in it.
- Where the death took place.

If the suspected reasons and place of death are shared, those going through similar struggles (now or in the future) are more at risk of considering suicide a potential 'solution'.

There is rarely one single factor that contributes to somebody ending their life and to suggest this oversimplifies the complexity and ambivalence of suicide. Suicide will often be a devastating shock to the person's loved ones and friends. Please keep in mind that it could also significantly impact someone who is not yet on your radar.



For example, if a student ends their own life, exam stress is often put forward as a contributing factor, regardless of whether or not this was actually the case in reality. The anxiety and pressure of exams can certainly play a part in reaching a point of overwhelm. However, sharing that exam pressure contributed to any death by suicide could put suicide on the radar of any students who are finding it difficult to manage their own stress during exam season.

It's also important to consider the impact this could have on staff, many of whom may already be feeling guilt or responsibility after the death of one of their students. To speculate that academic stress, created by the work these teachers had set, may have contributed to the death would be entirely unethical and could lead to moral injury – another risk factor of suicide.

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Risk factors are cumulative, and anybody who finds themselves in a situation where their pain exceeds their capacity to cope may feel that suicide is their only option.

Talking about suicide sensitively with an individual or small group does not make someone more likely to take their own life. In fact, the opposite is much more likely to be the result. Discussing suicide in a sensitive and appropriate way increases honest communication, reduces stigma and may provide somebody with the opportunity to open up that they have been desperately waiting for.

However, we advise avoiding 'wholesale' talks delivered to whole year groups or the whole school. You are unlikely to be able to provide adequate support for every single member of the audience during or immediately after the session.

Your community will want to talk about what has happened, and staff should be prepared to have difficult and emotional conversations. To support staff with this, part of your plan should be evaluating the training needs of the adults in your school and arranging for the necessary CPD as soon as possible.

Below is a list of websites for organisations who are doing brilliant work in suicide prevention and postvention:

- theolliefoundation.org/our-work
- papyrus-uk.org/campaigns
- samaritans.org/how-we-can-help
- prevent-suicide.org.uk
- zerosuicidealliance.com

They will all be able to support you further and also support your students.

Online safety – R:ppl

We would also strongly recommend downloading R:ppl onto all of your school devices and sending information about this free resource to parents and families to install on their home computers.

R:ppl is an online monitoring tool which shows a visual prompt when a user searches for content relating to self-harm and suicide. When a search of this nature is carried out, R:ppl displays a vibrant interception message which shares a message of hope and signposts to a range of support organisations and helplines before any potentially harmful search results are displayed.

Find out more about R:ppl and to watch their explainer video here: ripplesuicideprevention.com



OLLIE's Talk Safe, Plan Safe - Suicide Prevention Training focuses on prevention and keeping people safe but is full of useful information that could equip your staff with the skills they need to have sensitive and courageous conversations about suicide.

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Telling young people that somebody has died

Sharing this news with your community needs to be done in a timely manner, with as many people as possible receiving the news at the same time. It is therefore important to have a planned and coordinated schedule for this. We encourage you to work with the deceased's family to ensure that their wishes are respected and a consistent message is sent.

It is vital to consider the order in which different groups are told. Whilst there is benefit to the whole community being told at once to reduce risk of rumour and hearsay, telling those closest to the deceased first will give them time to process the news and seek support.

For students with autism or those with specific learning needs, we would advise discussing the best way to deliver the news with your school's SENCO.

In the case of a student death, the following order may be most appropriate:

- Their form tutor/head of year/teachers.
- Their closest friendship group. This should be done in a private room, with plenty of staff on hand to support. You will also need to think through where they go after hearing this news and what provision will be available to them. It may be important to simultaneously speak with their parents/carers so they can process the news too and consider how this will impact the rest of their day, or working parents that may include ensuring they are at the gate or home earlier than normal, so that they can support their child.
- Please be mindful of students who are not in school, as a direct consequence of this tragedy, or not. Whatever the reason for their absence, careful consideration needs to be made in how you communicate this information and how the school will respond in the next few days.
- Their form group.
- Their year group.
- The wider school community. We advise trying to coordinate telling students simultaneously with a formal email to parents. This should be accompanied by a text message asking parents to check their emails before the end of the school day.

In the case of a staff member, the following order may be most appropriate:

- Colleagues they are closest to in a personal capacity. Consider who they are usually with in the staffroom? Who do they sit with at lunch? Who is in their department/year team?
- The rest of the staff body.
- Their form group/class(es).
- The rest of the student body.
- The wider school community, including parents and carers.

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Young people usually respond better to this sort of news if it is delivered by somebody they have a strong existing relationship with. Therefore, their form tutor or head of year is often the best person to tell them. Of course, you must evaluate on an individual basis whether or not they feel comfortable and able to do so.

It is generally not appropriate for this news to be delivered to students or staff in a whole school assembly setting. These environments can be overwhelming and it will be very challenging for effective support to be implemented on such a scale.

Although it is natural to want to protect particularly young students from the pain of learning that somebody they know has died by suicide, we would advise always being open and honest about what has happened from the start. By being honest, you are:

- Protecting and empowering them by giving them the knowledge to feel self-assured and able to tackle rumours.
- Preventing them from finding out through another, potentially less reliable or safe, source such as online or by overhearing conversations.
- Reassuring them that they are not to blame. Children and young people will pick up on things not adding up. If there is secrecy, they may feel that they are being left out of the conversation because they are at fault for what has happened.
- Developing their resilience by creating an open and truthful environment where they are supported through both positive and negative experiences.
- Supporting them and building your relationship by showing that you will be open with them, even about extremely difficult situations.

The way in which this news is delivered should be age appropriate. Although our advice is to be honest with all students when somebody has died by suicide, the vocabulary and level of complexity used should be adjusted depending on the age of students.

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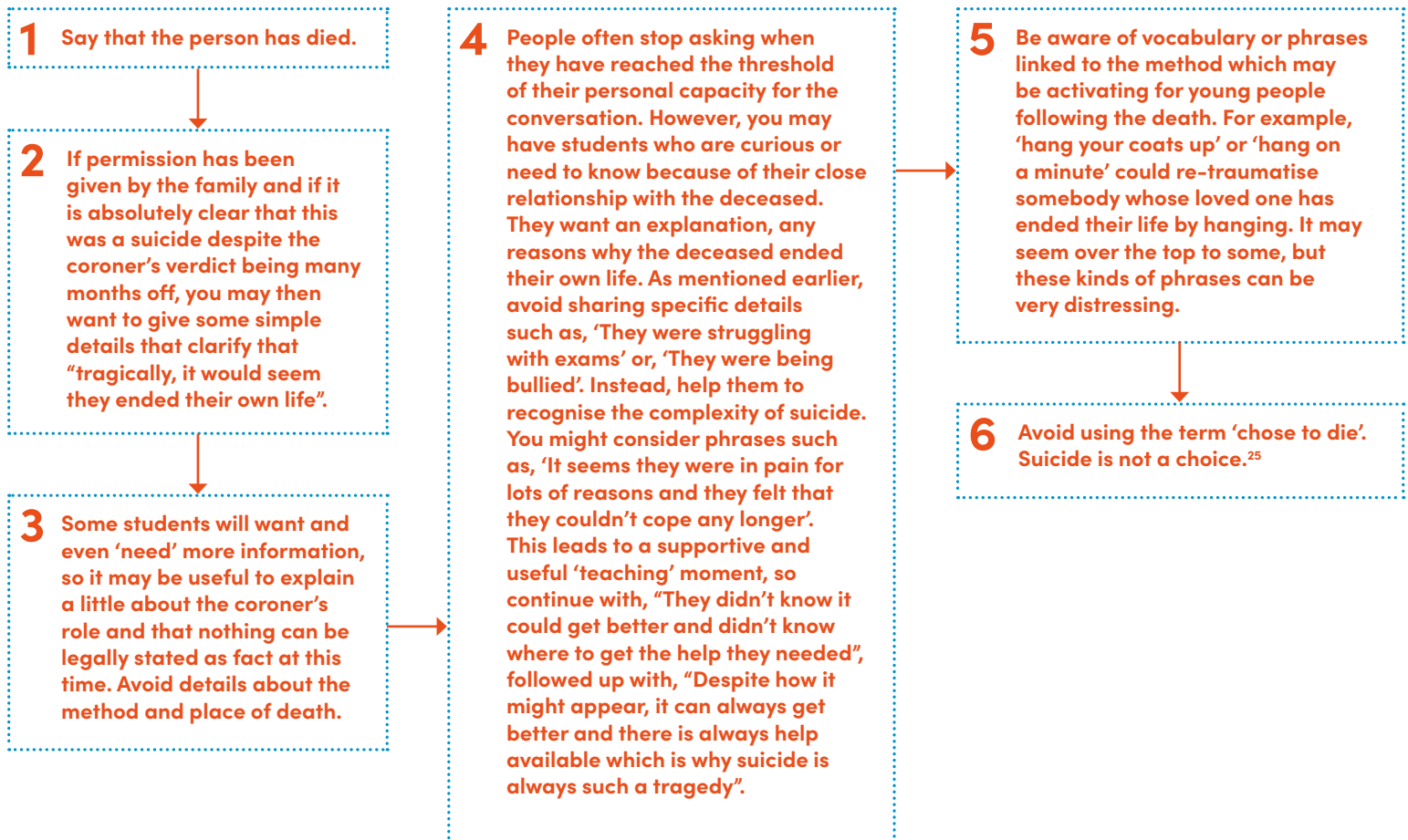
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When telling young people that somebody has died by suicide, it is usually best to follow a step-by-step approach, adding a new layer of information at each stage:



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There are some key things to be aware of when talking to any member of the community about the death:

- **Use direct language.** Say that they have 'died', rather than using euphemisms, such as 'they have gone to a better place'. This reduces confusion and glorification. One young child who wanted to end their life explained that, as their father 'had gone to a better place', she wanted to go too.
- **Find the balance between being open and honest and oversharing.** It is important that your community feels that they can have honest and open conversations and where appropriate, sharing the correct details about the person's death will help to reduce rumour/gossip. However, to avoid suicide contagion or imitation behaviour, it is important that the method, suspected causes or location of the death are not disclosed.
- **It is important to clarify and help students understand the difference between facts, speculation, gossip, and rumour.** You will likely have excellent lesson plans within your PSHE curriculum for this. In the event of a sudden death, it will be important to remind students of this learning and ask them to be mindful of what they are saying and hearing and how to distinguish and respectfully challenge communications that sound like gossip or rumour whether this is in person or online.
- **Tell students that there will be an opportunity for them to pay their respects,** and that the school will (with their input) plan a coordinated approach to remembering the person who has died. You are not able to prevent individual memories/GoFundMe pages/social media posts from being created, but students should be made aware that expectations around representing the school and showing respect to the deceased's family remain of the utmost importance.
- **Be prepared for emotions to run extremely high and avoid stifling this.** Try to help students understand that experiencing a wide range of emotional responses is normal and that they may experience these as physically – butterflies, feeling irritable, tummy ache or feeling sick or finding it hard to sleep.



Gossip: is the action of talking about someone or something with another person or a group of persons.

Rumour: Is the action of spreading specific information about someone or something that has not been verified. In other words, it may be a truth or a falsehood.

The OLLIE Foundation offers a range of student talks and workshops that help explore emotions and how our body and thoughts respond to challenging events, and will be happy to support this conversation.

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Informing part time and casual members of staff

As part of your plan, you should consider when and how you will notify members of the school community who are not physically present in school on the day that you receive the news. This may include those who are part time, or have approved absences, are off sick, or are on maternity or paternity leave.

It would perhaps be helpful to allocate this task to a member of your Crisis Response Team, or to a member of the Senior Leadership Team to ensure that the news is delivered appropriately and in a timely manner. If possible, we would recommend contacting these colleagues by telephone, rather than email.

It is also important to notify other adults in the community who are not directly employed by your school, but have regular contact with your students, parents and teachers. This may include coach drivers, agency cover supervisors, external music teachers and sports coaches.

These adults may know the young person who died either directly or indirectly. Perhaps they were part of the football team they coach or the science lesson they covered last week. They might teach their sibling the violin or drive their friends home each day after school.

By communicating what has happened with these individuals, you prepare them for what to expect when they next come into contact with members of your community. It will help them to understand why many of the students are tearful after school and why they might forget to say hello to their coach driver as they usually would.

You also reduce the likelihood of these adults asking unintentionally insensitive questions such as, “Why does everybody seem sad today?”, and warn them not to read out the young person’s name in the register.

Although this news is incredibly difficult to deliver, and may lead to some very upsetting conversations, by keeping everybody informed you are better able to support the community and deliver a consistent, effective and appropriate response.

For all staff, it is important to have the opportunity to come together and think through the many ways that the curriculum, normal activities, or their language can be activating for those who are struggling with this news and how to avoid these unintended moments. For instance, a cover teacher playing 'hangman' or a history lesson looking at hanging or the KKK, have the potential to be deeply distressing. RE sessions looking at different religious responses to death or the afterlife could also be challenging for some.

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Being ready for questions

In the aftermath of a suicide or sudden death, the community is likely to ask lots of questions. Students will want to talk about what has happened. When deciding how staff will answer questions, consistency is fundamental to ensuring that students and parents receive the same message. This will reduce speculation and gossip.

What questions might you be asked?

- Why did they end their life?
- What method did they use? / How did they do it?
- Where did they end their life and why did they choose that location?
- Did anybody know they were thinking about ending their life?
- Could I have done anything to prevent it?
- Who was the last person to speak to them?
- Is it my fault?
- Why didn't anyone see it coming?
- How do we talk about this person now?
- Where has their spirit gone?
- What will people think?

The stigma attached to suicide means that it is very rarely discussed openly and honestly, especially not with young people. This means that when questions are asked, they might be asked in a way that could be perceived as insensitive or inappropriate. Whilst it is right for misconceptions to be addressed, this must be done in a compassionate, patient and supportive way to avoid adding to the taboo around these discussions.



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Planning your responses to questions like this means that you can have some go-to answers, rather than feeling awkward, or saying something that might be potentially harmful. Don't be afraid to say that you will come back to them, if you are unsure how to answer. Just make sure that you do follow it up.

Remember that details of where and how the person died should be avoided.

Possible responses that you could consider are:

Q Why did they do it?

A "Suicide is a very complex thing. There isn't usually one reason that makes someone take their own life and we won't ever really know. Sometimes, people can feel unable to cope with things that are going on in their lives and they become so overwhelmed that they can't see another option. They might have been in pain for lots of reasons and felt that they couldn't cope with those feelings any longer. It is so very hard for the rest of us isn't it, because when you're not in despair you can often see solutions and feel able to reach out for help, but when you are in deep despair, that capacity to see the bigger picture and find help can evaporate."

Q Why didn't they ask for help?

A "Perhaps they felt unable to ask for help, they didn't know where to go, or they were frightened of what might happen.

Remember, asking for help is always a good idea and if the person or place you first reach out can't support in the way you need, keep on looking for who (or what) can. There is always someone or something that can help. For example, Ben was really struggling and his family and friends remembered he had always wanted to try scuba diving. He reluctantly went and discovered a hobby that he loved so much and that made him feel so good, his deep depression and uncertainty about living all went away. If you feel sad or overwhelmed, talk to a friend or trusted adult. Who would you go to for help?"

Q Is it my fault? Could I have prevented it? Who's fault is it?

A "It is not your fault. It's not your fault even if you were the last person to see them. It's not your fault if they confided in you and swore you to secrecy. And it's not your fault if you had an argument the last time you spoke and were really mean to them. It's not your fault because you are not in control of others. We can't always know what is going on inside other people's heads and we can't always predict what they might do."

What we can ALL do now is look at what we would want to know or be able to do in the future – How do we share with others that we are worried about someone, if we can't say why or perhaps don't know why? How can we create a Safe Plan with someone who has confided in us? How do we reinforce our boundaries AND keep our friend safe? How can we respond to secrets we are asked to keep but are TOO dangerous to keep?

If you are not clear on the answers to any of these questions the organisations already listed will be able to help. The OLLIE Foundation can certainly provide talks and training for staff and students that cover these points.

Q How did they do it?

A It is never a good idea to discuss suicide methods. Explain this to any student who asks and seek to reframe discussions away from details about the death to available support and coping mechanisms moving forward.

Q How do we talk about this person now?

A "We don't have to forget about anyone who dies, even though life goes on without them. They lived and for many of you they will continue to live in your memories. You can talk about them, share memories or funny stories and as a school we will work together to think through how we can best respectfully celebrate their life and learn how we can be stronger as a community. If you think it might help you, I am always here to listen".

MECC - Make Each Contact Count

Every conversation is an opportunity to reinforce important messages. For example, overwhelm can be felt by anyone, and that in moments of overwhelm just as when we are highly charged with anger, we can say and do things that we wouldn't at other times. Regardless of our situation, there is help available if we know where to look for it and many, many, times, in fact, most of the time, things do get better.

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Talking about feelings

Giving space to explore emotions can be extremely helpful for some people, whilst for others it feels too dangerous. Their emotions may feel TOO big to explore and they may feel scared to do so. We need to ensure that help and supportive activities are available for those who would enjoy them, but these should not be enforced or offered in a way that may feel shameful or embarrassing to students who don't want to take part. The only way you will know what might feel shameful or embarrassing is to consult with students.

At times, those who are grieving do not know how they feel, or are not sure they have the right to what they are feeling.

Research by Dr Chris Bowden found that, for young adult men, too much of a focus on feelings, especially when the person is struggling to understand exactly how they feel, reduced the effectiveness of talking therapies and talking generally to friends and family, and caused those involved to disengage with the conversation.²⁶ They didn't want to talk about their feelings, and rather wanted active strategies to help them feel better.

It is undoubtedly important to help children and young people understand that feeling a wide range of emotions in this circumstance is normal, as is feeling absolutely nothing. However, it's just as important to talk about hopeful actions going forward. Discuss who the person was when they were alive, rather than their death. Share funny stories about them. Perhaps you could ask students to consider how they can live their life going forward, whilst honouring and remembering the person who has died?

Things to encourage children to consider



Could you do an annual challenge to raise money for a suicide prevention charity in their honour?

What gifts did your friend give to you that you will take forward in your life?



Did they give you any tips on how to revise/be a good friend/play football (for example)?

Did they always say how good you are at dancing/sport/being funny?



Did they have a particular saying or catchphrase that you will always remember when things are difficult?

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Supporting friends of siblings

Some thought should be given to how you can support the friends of siblings within your school. They are unlikely to know what to say or how to help and may struggle with this extra pressure on them. Others will have views and opinions that are not shared by their friends and some will unintentionally say things that are deeply upsetting.

So how do we support these young people who are now caught up in someone's grief journey? School settings must consider how they support these friends and what help they might need.

Depending on their age, they may welcome the opportunity to take part in some training or have an outside speaker talk to them about suicide and grief. This can be done effectively and in an age appropriate way in most cases.

The organisations listed in our [resources section](#) will be able to support you further.



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Tips for active listening



If pupils have questions to ask or want to share their feelings, it is important to listen to them carefully.

This doesn't mean immediately jumping in with advice, offering them 'solutions', telling them that you know how they feel, or that you've been through it yourself. What it does mean is really tuning in to what they are saying, being open, non-judgemental and making it clear that they can take their time and you will always be happy to listen. That said, you have other commitments and so it's useful to manage expectations by letting them know when you are free each day/week and where they can find you. Here are some tips and things to consider that might help.

Think about the environment.

Allowing the person you are concerned about to pick the environment in which you talk is a good way of making them feel more comfortable to open up about how they are feeling. It may be a quiet, private space, or they may prefer noise or to be outside in the fresh air. Remember to protect yourself from a safeguarding context by keeping doors open and letting another staff member know where you are and who you are talking to.

Consider your body language.

Avoid crossing your arms or legs as this can come across as a barrier.

Maintaining eye contact is usually good practice but for some students it may be too much. It's always useful to have a tabletop activity, so they can look at that instead whilst talking.

Leaning forward can show that you are both interested and are paying attention to what is being said and can also help the students feel safe to talk to you.

Encouraging comments.

Nodding, tilting your head slightly to one side and using phrases such as, "OK", "Yes" or, "Can you tell me more about that?" can be an effective way of showing that you are listening and encouraging the person to elaborate on how they feel.

When to sit with silence and when to fill the void.

Different students will benefit from different responses and the same student might need different things on different days. Sometimes, they may value sitting in your office without needing to speak as they don't have the words to explain or have used them all up and simply need to 'be' without explanation. Other times and other students may not need active listening as much as they need solution-focused conversation.

As part of an active listening approach, don't be afraid of silence. Avoid trying to fill it with extra questions or comments, especially if it's to meet your need to fill the void. Silence gives the person who is talking the time and space they may need to articulate what they are feeling and to explore their emotions. It also gives you time to carefully consider what was just said and what your response should be.

Avoid interruptions.

It is really important that you don't talk over the person who is opening up. You don't want them to feel rushed and you should avoid trying to bring in your own experience or feelings to the conversation unless it feels really helpful for them to do so. Try to avoid diverting the focus of the conversation away from them in any way. They may have been waiting for the right moment to open up and talking about yourself or others may invalidate their feelings and cause them to shut down.

Walk and talk.

If you are trying to start a conversation with someone who is struggling to open up, suggesting that you go for a walk and talk in the fresh air can be really effective. It is less formal than a face to face discussion in an office or classroom and because you are walking side by side, can be much less daunting for those who struggle with eye contact.

Check in with them regularly throughout the conversation.

Use phrases such as, "Sounds like you feel angry with the person who has died. Is that right?" Don't be frustrated if they correct you because they feel that you have summarised their feelings wrongly. They may be confused about how they are feeling. Seeking clarification on your perception of their emotions can help them to unpick exactly what they are feeling. Is it anger? Guilt? Sadness?

Paraphrase.

Summarising what somebody has said shows them that you have heard and understood them. For example, if a student says, "I've just been feeling really sad the last few weeks. My Spanish homework is due and I got detention last week because I can't focus in lessons." You could paraphrase by saying, "It sounds like you've been struggling lately and finding it hard to concentrate which is starting to have an impact on your studies. That must feel very challenging to manage."

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Coping strategies

Different people use different coping strategies, but we'd advise encouraging your students to recognise that there will be things that help them to feel better when they experience intense emotions. Alongside the formal support that you will be providing through mental health professionals, a useful and simple exercise can be to prompt young people to create a menu of coping techniques or strategies that work for them. These might include:



Watching a film with a friend.



Exercising.



Stroking a pet.



Getting outside for a walk or a run.



Doing their favourite hobbies.



Drawing or painting.



Having a hug from a loved one.



Listening to a favourite song.



Writing down their worries and then thinking of things that might help.



Thinking of three great things from their day.



Using simple relaxation or breathing techniques.



Writing a list of things they have to look forward to.



Imagining themselves in a special place.



Thinking about happy memories.

It's also important that children and young people are prompted to consider and note down the people who they can turn to for support, should they need help.

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Talking to someone who you think may be contemplating suicide

Whilst much of this guide is focused on postvention, it is important to remember that being bereaved by suicide is a risk factor for suicide. Therefore, part of your plan should consider how to upskill all staff in suicide prevention so that they are equipped to support each other, and students, if the need arises.

There is plenty of training available and some of it is free:





[Zero Suicide Alliance](#) offers a short online film that staff can access at any time

[The OLLIE Foundation](#) offer their comprehensive, online 2 hour [Talk Safe, Plan Safe – Suicide Prevention Training](#) every few weeks.

[Olly's Future](#) offers free places on their online session **Talking about Suicide: Ten Tools** each month.

In the meantime, here are some tips for starting the conversation with somebody you are concerned about:

1. How are you? Be prepared to receive an answer such as 'fine thanks' or 'good'. Have a back-up question in your mind ready to use if this is the case such as...

-  **How are you really doing?**
-  **You don't seem yourself at the moment. How are things?**
-  **There's lots going on at the minute which is making things seem quite challenging. How are you coping?**
-  **How are things at home? How is your workload? How are your friendships going?**

Being more specific can help to focus their answer and encourage more detail. In fact, stating what you have observed that has prompted your concern lets them know that you 'see' them and makes it harder for them to deny the concern.

You can also use a third person. Start by listing the things you have noticed. For instance, "xxx died recently and I know that was really hard for you. I am also aware that you have missed a few deadlines and have not shown up for after-school practice the last couple of weeks. This isn't like you. The thing is, I have seen this mix of things in other students who have really begun to struggle and some have actually wanted to end their life as it all felt too much and, although you might not be struggling, I feel I do need to ask if you are ok and if not, is it that bad that you would prefer not to wake up tomorrow? Could it be that you have thought of ending your life?"

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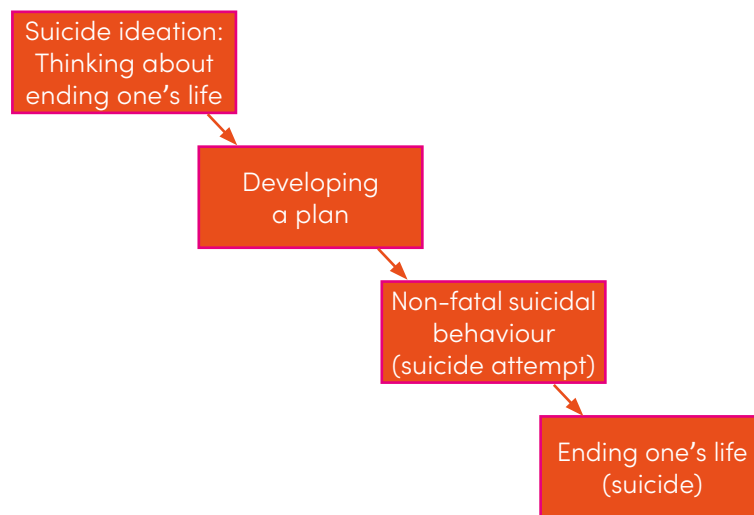
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2. Are things so bad that you have even considered ending your life? Don't be afraid of asking this question. You are not giving them ideas. If they are already considering suicide, asking them about this will help them feel seen and heard and gives them the opportunity to speak about something they are probably very frightened of. By asking you are by definition indicating that you can handle this conversation.

3. If they say 'yes' you will need to ascertain if they have thought about how and if they have collected resources? Suicidal behaviours often occur along a continuum as shown in the infographic below.



Those who take their own lives do not always have a plan and, if they do, there is no guarantee that they will share that with you. Every disclosure of suicidality, no matter where they appear on the continuum above, should be taken very seriously.

What to do if they say yes...

Provide some initial responses that reassure and validate:

- I'm really glad that you told me.
- Thank you for telling me. This is really important. What's going on?
- I really want to be here for you. Will you let me support you?
- We are going to work out what help you need, but while that is being sorted I'm not going anywhere.
- This must feel so very hard, but we will work together to try and make things feel more manageable.

Then, try to find out more. You could structure the conversation using **FIDO**:

F Frequency of the thoughts and behaviours

I Intensity of feelings and thoughts

D Duration. How long have you had these thoughts?

O Objective planning. Have they made a plan to end their life or have certain methods in mind?

What to do if they say no...

Receiving the answer, 'I'm fine' might leave you feeling frustrated and powerless. However, there are things you can do to let them know that you are there when they are ready to talk:

- **Offer emotional support and reassurance**
Let them know that you care and will be there if and whenever they need to talk through anything.
- **Be patient**
Once you have offered your support and reassured them that they can come to you when they are ready, take a step back and avoid persistently asking if they want to talk yet. Let them come to you.
- **Signpost them to sources of support.**
This could be their GP, an organisation such as [Young Minds](#), or the pastoral support team within school. These signposts are not the end of your support. You need to make sure that they found it useful. You also need to make sure that they are not languishing on a waiting list.
- **Don't take it personally if they want support, but not from you.**
Sometimes it can feel less risky for a young person to speak to a stranger, somebody who doesn't already know them or their situation.

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Handling media enquiries

When creating your critical incident plan, the role of media liaison should be allocated to ONE member of staff who is then responsible for all media communication and enquiries. This would usually be the headteacher.



When a suicide occurs, there will be significant media interest and it is important that your organisation provides consistent messaging around what has happened and how the school is responding.

Staff and students should be made aware of who is responsible for media enquiries and direct all correspondence from outlets to this individual, rather than responding themselves.

Any communication to the community should be written in the knowledge that the media may access and use it in their reporting.

Statements made by the school to the media should be kept simple and avoid any personal information or discussion of the death. They should include:

- Condolences to friends and family.
- Plans to provide support to those affected.
- Any changes to schedules/timetables etc in the following days/weeks.

Remember that in all of your communications, the death must only be confirmed as a suicide if you have permission from the family.

In 2020, Samaritans produced guidelines for the safe reporting of suicide, which the media should follow. This includes avoiding:

- Reporting on methods.
- References to suicide being preventable.
- Dramatic headlines or terms such as 'suicide epidemic'.
- Referring to specific sites or locations as suicide 'hotspots'.
- Including dramatic or sensational photos or video footage.
- Excessive coverage or overly prominent placement of stories.

The full report can be found here: media.samaritans.org/documents/Media_Guidelines_FINAL.pdf

Whilst these guidelines exist, our experiences suggest that they are not always followed. If you find that media outlets are reporting irresponsibly on the death, contact them as soon as possible to explain what you feel is inappropriate and why, and re-share the Samaritans guidelines.

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The role of the coroner

In the UK, any death that is suspected to be a suicide is reported to the coroner.

A coroner is a special judge who investigates deaths where the cause of death is unknown.

Coroners must be qualified lawyers with at least five years of experience.

The coroner's office will then open an investigation and attempt to understand the circumstances that led to the death. This may involve an inquest hearing. An inquest is held in public and is a formal process which takes place at the nearest coroner's court. This is not a court of blame and will not result in a guilty or innocent verdict.

What does the process involve?

For detailed information on the inquest process, consult the Ministry of Justice [Guide to Coroner Services for Bereaved People](#). Each inquest is different and practices can vary depending on geographical area.

In brief, following the death, a coroner's officer will contact the next of kin to explain the next steps. They will then work on behalf of the coroner to make enquiries of people with connections to the person who has died, or to their death, to gain a better understanding of what happened leading up to the deceased's death. This might include the police, the person's GP and/or hospital staff, friends and family and anybody who had contact with the individual in the 24 hours before they died. They will gather evidence and information to help understand the circumstances that led to the suspected suicide.

The evidence collected may be in the form of reports, such as the post-mortem report and statements from those who knew the person.

The time scale between initial contact from the coroner's office and the inquest can vary significantly depending on the complexities of the circumstances and the number of statements/reports that need to be collected. Depending on where the suicide took place, other organisations may want to carry out their own investigations. The family can also ask for expert witnesses from other countries if needed to submit evidence. The coroner decides which evidence and which witnesses they will accept. These reports and expert witnesses will be relied upon during the inquest. This part of the process can take anything from several weeks to over a year.

Once all evidence is collected, the case officer will create a case file which the coroner will read before the inquest. The coroner will then decide which witnesses will be called to court.

It is almost impossible to say how long an inquest may take. This is heavily dependent on the number of witnesses that are called to give evidence and the number of questions asked. Inquests can take anything from half an hour to several weeks.

Once all of the evidence has been heard, the coroner will usually give their final conclusion there and then. However, if the inquest has lasted several weeks, the coroner may take a short period of time away from the court before giving their final conclusion the following day.

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Possible final conclusions of an inquest

- **Suicide:** The coroner will reach this conclusion by considering the balance of probabilities. This means that if, based on the evidence, there is more likelihood than not that the person took their own life, they rule the death as a suicide. However, to reach this conclusion, there must also be evidence of intention - i.e. the person knew that the actions they were taking would lead to their own death.
- **Open conclusion:** The coroner may reach this conclusion if there is insufficient evidence to prove the person took their own life, or if they feel that the person was unaware that their actions would lead to their own death.
- **Accidental or Misadventure or Related to Drugs or Alcohol**

Once the final conclusion has been reached, the coroner will register the death. After around a week, the next of kin may contact the registrar to request a copy of the death certificate.



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Rights and obligations during inquests

Rights of the next of kin and 'properly interested persons' during an inquest:

- The next of kin and 'properly interested persons' have the right to request access to the case file from the coroner before the inquest. This is called 'disclosure'. Whilst this will help them prepare for what will be discussed in the inquest and consider any questions they may want to ask, it will also contain information which could be extremely painful to read.
- The family also have the right to request for certain witnesses to be called to be questioned and give evidence at the inquest. The coroner has the final say on this, but all requests will be considered.
- There may be a media presence at court, which can make loved ones feel extremely uncomfortable. Unfortunately, as inquests are public hearings, the court has no ability to prevent the press from attending, or to specify how the case should be reported on. However, the family should aim to communicate any concerns with the coroner so that intervention can be put in place where necessary.
- The coroner's conclusion is final. However, if somebody disagrees with the final conclusion, they are able to formally write to the coroner to appeal the decision and explain their concerns. If an appeal is lodged, it will be taken to a judicial review. Families who feel that an incorrect conclusion has been reached have this right, but this process is likely to be both lengthy and costly.
- There is no legal obligation for the loved ones of the deceased to attend the inquest, unless they are called as a witness. If they choose not to attend, the next of kin and Properly Interested Persons can request a recording of the inquest.

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Things for schools to consider

- Receiving the coroner's report can be a lengthy process, with the average time estimated for an inquest taking 18 weeks, but often much longer. 18 months is not unheard of.
- Those known to the deceased may be called to give evidence, including family and relatives as well as friends and colleagues. This can be an emotionally charged and distressing experience. Whilst the purpose of an inquest is not to establish blame, the final report may cause those involved to question whether anything could have been done to prevent the death.
- Usually, children under the age of 18 are not allowed to be at the inquest hearing or give evidence. However, this does vary.
- Participating in an inquest and hearing the final conclusion can be extremely distressing, and you should be prepared for those involved to find the days and weeks leading up to and during the inquest very stressful. For many, this is a very traumatic event and will feel like they are at day one again. Others will want and need a particular verdict and, though stressful, will be keen for this day to finally be here.
- Families and friends can be left broken if the verdict is other than what they wanted. There are all sorts of reasons why a particular verdict is important to the family, from strict religious views to implications for financial ruin and everything in-between. Do not underestimate how challenging this time will be for the family.
- Regardless of how strong the evidence is that the person has taken their own life, the coroner may not reach that conclusion and so it is vital to avoid announcing this as a definite cause of death to the community before the report has been officially published. Because of the length of time it takes to receive a coroner's verdict, this is difficult for everyone. When it seems clear to everyone that knew them, and when the family are using the term 'suicide', it can feel disrespectful to continue to say 'suspected.' But it is the correct description.
- You may choose to refer to the death as a 'suspected suicide' in your correspondence whilst awaiting the coroner's report. However, if the wishes of the family are different and they are clear they want this to be referred to as suicide, then you might choose another approach that the family feels supported by but still honours the legal system.

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Helpful resources about coroners and inquests

- If you would like to know more about the coroner and inquest process, we would highly recommend this episode of the Support After Suicide Partnership podcast:

podcasts.apple.com/gb/podcast/the-coroner-and-inquest-process/id1517113132?i=1000476927303

You can also direct families to the following:

- **Coroners Court Support Service** – an independent voluntary organisation whose trained volunteers offer emotional support and practical help to bereaved families, witnesses and others attending an Inquest at a Coroner’s Court.
 - Visit their website here: coronerscourtsupportservice.org.uk
 - They also provide a national support helpline on 0300 111 2141. Available Monday to Friday 9am to 7pm and Saturdays from 9am to 2pm.
- **The Ministry of Justice Guide to the Coroners Service** – gov.uk/government/publications/guide-to-coroner-services-and-coroner-investigations-a-short-guide

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These templates are designed to guide communication and should be adapted according to your individual circumstances.



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Email to parents/carers



Dear Parents/Carers,

*I am writing to you with the most difficult news. I am so sorry to have to inform you that [STUDENT NAME], one of our Year [ADD YEAR GROUP] students, passed away **earlier today/yesterday.***

Insert relevant detail about the incident below or simply state more information will be available to parents over the coming days:

You may choose to include a sentence or two here about the death being a suspected suicide or being treated as a suicide. This will depend on the complexities of the situation and the wishes of the family.

Followed by 2–3 paragraphs about the student:

- What were they like?
- What were their strengths? Popular, strong morals, confident, creative etc.
- View of teachers – ‘they were known by their teachers for being bright, curious and funny’.
- How long has the student been at the school?
- Did they win any awards/prizes/sporting achievements?
- Passions/interests/extracurricular activities inside and outside of school.

What support has been put in place so far?

- *How students will be informed – assemblies/small group sessions with staff/open sessions with school counsellors?*

Next steps/ongoing support:

- *A special assembly in the coming weeks.*
- *Ongoing support from staff/school counsellors.*
- *A designated quiet space in school for staff/students to go.*
- *When more details will be shared.*
- *Who parents/carers should contact if they have concerns about their child or questions about the death.*

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Email to parents/carers (cont'd)

Arrangements:

Information about the funeral will be made available as soon as we have it. If your child wishes to attend, we strongly encourage you to accompany him or her to the service. Should the funeral be scheduled during school hours, those who wish to attend will need written permission from parents/carers. School will remain open during this time and lessons will run as normal.

Final/closing statement and signposting:

Our thoughts are with **[STUDENT NAME]** family, friends and loved ones at this devastating time.

We know that this news will come as a terrible shock, and you and your child may require additional support at this time. There are many organisations that can provide information, advice and support including:

- Cruse Bereavement Support: cruse.org.uk
- YoungMinds: youngminds.org.uk
- Help is at Hand: <https://supportaftersuicide.org.uk/resource/help-is-at-hand>
- Samaritans: samaritans.org
- POPYRUS UK: papyrus-uk.org
- At a loss: ataloss.org
- Child Bereavement UK: childbereavementuk.org

Should you need to speak to a member of staff, please don't hesitate to contact **[RELEVANT STAFF MEMBERS NAME AND CONTACT DETAILS]**

[Personal ending],

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Exemplar communication to staff

The following should be adapted for the specific incident.

Information for staff:

Thank you so much for your professionalism, sensitivity and exemplary care in responding to this tragic event. The following information is to help you respond to questions and enquiries from students, parents and carers, and ensure that we are providing a consistent message.

We know that many of you taught **[STUDENT NAME]** or knew them well and may be struggling to come to terms with this news. Over and above what has been put in place, should you need any additional support, please reach out to your line manager or another trusted member of staff. At **[insert school name]**, we are a supportive and caring community and I know we will all come together to help each other through this extremely difficult time.

- When explaining what has happened, the message should be that it is suspected that **[STUDENT NAME]** took their own life. We don't know any more details at this stage and as you will probably know, the cause of death is determined by the coroner.
- Students will be curious and will undoubtedly have lots of questions. Many will be feeling vulnerable and some may find this news activates emotions from past traumas and loss. We do not want to shut down their questions or conversations, but we may need to acknowledge with them that many questions are unanswerable at this stage. If you are pressed for more details, please respond with 'I'm sorry, but we don't know any more information at this time.'
- Whilst we are planning special assemblies and possibly a bereavement evening in the near future, we know that many of our students need the stability our school provides. Therefore we will be returning to our normal lessons and routines as quickly as possible.

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Exemplar communication to staff (cont'd)

- Please use your professional judgement to identify any students who are too upset to return to lessons and send them to **[designated safe space]** where members of the support team are on hand to help. Please avoid allowing students or groups of students to go off on their own or to the toilet.
 - If you feel that you are not able to teach at this time, please let your line manager and the cover manager know and we will do our best to facilitate cover whilst you are supported.
 - Please pass any media enquiries on to staff member **[INSERT NAME]** who will respond on behalf of the school. We ask that you do not respond to these enquiries yourself to ensure our communication remains consistent and the privacy of the family is respected. If you are approached, please reply with "You will need to speak with my colleague **[INSERT NAME]** who has the relevant information ". Please advise said colleague of any direct communications or requests you may have received from media outlets.
 - Please can you all familiarise yourselves with the crisis response plan that we have created.
- We will begin to plan opportunities to remember and commemorate **[STUDENT NAME]**'s life and we will of course ask for student and staff input on this. If you have any suggestions, or your students put ideas forward, please pass them on to **[NAME]** who will collate them for discussion at a later date.
 - Whilst our students have already shown a huge amount of respect and maturity in response to this tragic event, please do remind them to avoid participating in rumour or gossip and of our expectations regarding their online presence and conduct. Our priority is to respect the privacy of **[STUDENT NAME]** family at this time, so please ask students not to contact them at this stage and instead send all cards, memory books or letters to the school office where they will be stored until it is appropriate to pass them on.

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Exemplar communication to staff (cont'd)

- This is a highly emotive time so, if you feel able, please do facilitate conversations in your lessons. It may be helpful to set aside time parameters e.g. 'Let's talk about things for 10 minutes and then we will make a start on our work'. Or, 'Let's get what we need to do out of the way so we can stop at quarter to and have some time to talk about....'
- Be aware that the news won't have sunk in for some students yet, and others will want to get on with routine and process this news at home on their own. Others won't have the maturity to engage in this and others may know that this is very sad but not feel personally affected by it. Each member of our community will grieve in a different way, and at different times, sometimes years later. The message should be that this range of responses is completely normal.
- Please be extra vigilant with regards to safeguarding and pass any concerns on to **[NAME DSL]** as soon as possible. These should also be logged on **[NAME OF ELECTRONIC RECORDING SYSTEM E.G. CPOMS]**
- The following students are either in **[STUDENT NAME]** close circle of friends or will be particularly vulnerable at this time for another reason. If you teach these students, please ensure your class registers are completed in the first 5 minutes of your lesson and any missing from lessons are immediately reported to the attendance team:

[Insert list of vulnerable students.]

- We will be contacting all parents and carers shortly to tell them what has happened, outline what support is in place and what our next steps are. If you are contacted by parents with questions or concerns, please use the same messaging as stated above for students.
- Our school counsellors are on hand to support both you and the students. If you would prefer to talk to somebody external, there are a number of support organisations who can help including:

If you have any questions or concerns, please do contact me or another member of the Senior Leadership Team.

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Exemplar communication to media



We are deeply saddened by the death of one of our students. Our thoughts are with their family, friends and our whole school community.

We are now supporting our students and families.

[Give further details of any grief support or suicide prevention information meetings or training that you are planning]

[Provide any changes to schedules or timetables or let them know that school remains open as normal.]

Please note that we are not allowing any cameras or reporters into our school or onto school grounds.



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Planning document

This document is designed to help your team set out the actions for each stage of the response. It will need to be adapted according to when you are notified of the death – Is it during the school day? At the weekend? In the evening? During the school holidays?

Immediate response (actions for the first hour. Communication with family of deceased, crisis team meeting to plan response and designate roles, begin drafting communications, etc.).

Day 1 (team meeting, telling staff, students and parents, etc.).

Day 2 (whole school assembly, communication with specialist teams e.g. MASH, ongoing support for students).

Day 3 onwards (ongoing support for vulnerable students, discussion of memorials/funeral arrangements/memory book/bereavement meeting, etc., continual monitoring of social media, communications with local media).

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Vulnerable students log

Name	Year/Form	Context	Current support	Lead staff member	Check-in record
Joe Bloggs	10R	<ul style="list-style-type: none"> - Father ended his life last year. - Regular self-harm. - In the same English set as the deceased. 	<ul style="list-style-type: none"> - Has bereavement therapy outside of school. - Year 12 academic mentor. - Time-out card to use in case of emergency. 	Miss Jones – Form Tutor	<p>09/06 – Miss Jones had 1-2-1 with Joe. He has mixed emotions at the moment but seems to be managing things well.</p> <p>12/06 – Mrs White contacted Joe’s mother to update on Joe and check his wellbeing at home. Agreed that he seems to be coping and really benefits from his year 12 academic mentor. Has not used his time-out this week.</p>

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Response checklist

	Action to be taken	Who
1	Notify the crisis team of news. Meet to discuss and agree a plan of action. Allocate roles: <ul style="list-style-type: none"> - Parent/carer communication lead. - Press/media liaison lead. - Bereaved family liaison lead. - Social media/e-safety lead. 	
2	Inform all members of the senior leadership team and governors.	
3	Collate a list of all sources of support (both internal and external) available to staff, students and parents. It is important to do this before the rest of the school community is informed of the death.	
4	Inform the Form Tutor and Head of Year/House.	
5	Inform all staff – preferably in person at an immediate staff meeting. This should include those who are not in school that day – those who are off sick, casual staff, coach drivers, external music teachers, etc. Signpost to sources of support.	
6	Circulate vulnerable students log to heads of year/house. Ideally, this should be a password protected live document which can be updated and checked regularly.	
7	Liaise with the MASH crisis team and discuss support.	
8	Contact the local press office and discuss strategies for dealing with the press.	
9	Work with the Form Tutor/Head of Year to identify a list of close friends and Designated Safeguarding Lead for vulnerable students.	
10	Designate a central area for impacted students to go to and organise staffing.	
11	Arrange for bereavement support and counselling to be available to students/staff – you may need to bring in additional counsellors depending on demand.	
12	Speak with family or family representatives to make them aware of the communications you have a duty of care to send out. Let them know who you will be contacting, including other schools and agencies and let them know what it is you are communicating. Give them the option to edit (within reason) that communication, should they want to.	
13	Arrange for close friends to be notified first in a safe area with support. Who is best placed to inform them?	
14	Notify all other students, outline next steps and signpost to support both within school and externally.	

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Response checklist (cont'd)

	Action to be taken	Who
15	Compose an email for parents. Proof read and send. Accompany this with a more immediate form of communication. For example, a text asking parents to check their emails as soon as possible.	
16	Alert reception to the arrival of volunteers/support staff on site, arrange ID badges and update the catering department to arrange tea/coffee/lunches for visiting staff.	
17	Produce updates for staff – recommended one at the start of each day in the immediate aftermath.	
18	Update central registration system to ensure that the student is marked as absent for all lessons, extra curricular activities, etc.	
19	Regularly check and update vulnerable students log with input from staff. Review the provision of support in school – are student and staff needs being met?	
20	Prioritise check ins with vulnerable students to ensure they are getting the support they need.	
21	Contact Headteachers of other local schools (primary and secondary) to notify them.	
22	Contact the local press office and discuss strategies for dealing with the press.	
23	Write press release.	
24	Begin to discuss and plan how this student will be remembered. Is there a central area where flowers/notes can be left? This area should be somewhere open and staffed.	
25	Remove the student from registers, reports, notice boards, and school website. Retain all safeguarding records, referrals, communication with home, etc.	
26	Discuss seating plans with teachers – we would advise a complete change in seating plan, rather than just moving those who were near the student.	
27	Liaise with family as much as possible where appropriate – funeral arrangements, memorials, memory book, announcements, etc.	
28	Make arrangements for the school on the day of the funeral – which members of staff/students will attend? How can you mark the day whilst maintaining routine?	
29	Make medium/long term plans for remembering the student and supporting the community. See chapter on memorials for further guidance on this. Consider arranging and hosting a parent information evening.	
30	Hold a staff meeting to evaluate the response – what worked well and what could have been improved/done differently?	
31	Make plans for the anniversary of death and provisional plans of support for students and staff who experience re-grieving.	

Useful resources

BOOKS

Beyond The Rough Rock

A book created by Winston's Wish providing guidance, information and practical activities for parents and professionals who are faced with telling a child that somebody has died by suicide.

shop.winstonswish.org/products/beyond-the-rough-rock

ONLINE PUBLICATIONS

Help Is At Hand

A postvention support guide for people affected by suicide, with both emotional and practical support. This revised guide includes new information for children and military families, as well as information on the probate process and more emotional support.

nspa.org.uk/wp-content/uploads/2021/05/May-2021_HIAH_Booklet_2021_V5-1-2.pdf

The Compassionate Friends - "Coping With Judgemental Attitudes"

A leaflet providing guidance and information for parents on how to cope when faced with judgemental comments and attitudes from others following the death of a child.

tcf.org.uk/resources/L06-Coping-with-Judgemental-Attitudes-C15R1605.pdf

INDIVIDUALS

Julia Samuel MBE

Julia Samuel is a psychotherapist specialising in grief, who has spent over 30 years working with bereaved families. In 1994 she helped launch Child Bereavement UK. Julia is a best-selling author and was awarded an MBE in 2015 for her services to bereaved children.

She has also designed an app called 'Grief Works' which shares Julia's advice alongside guidance and practical exercises to help manage the full range of emotions around grief.

Find Julia's website here: juliasamuel.co.uk

Find a full list of Julia's books here:

juliasamuel.co.uk/books/everfamilyhasastory

Download the Grief Works App here:

apps.apple.com/gb/app/grief-works-self-care-love/id1558867513

ORGANISATIONS

At A Loss

A national signposting website helping bereaved people find support, reliable information, resources, and emergency support.

ataloss.org

Child Bereavement UK

Child Bereavement UK helps families to rebuild their lives when a child grieves or when a child dies. They offer free, confidential bereavement support via telephone, video or instant messenger for people across the UK and also offer face to face support from various locations.

childbereavementuk.org

Childline

Childline provides a 24 hour helpline, run by trained counsellors to support anyone under 19 in the UK with any issue they're going through.

Calls are free, confidential and available any time, day or night.

0800 1111

childline.org.uk

Childhood Bereavement Network

Is a hub for those working with bereaved children, young people, and their families across the UK. They provide advice, resources, and sector support to ensure all bereaved children and young people have access to the support they need, wherever they live and however they have been bereaved.

childhoodbereavementnetwork.org.uk

Coroners Court Support Service

An independent voluntary organisation whose trained volunteers offer emotional support and practical help to bereaved families, witnesses and others attending an Inquest at a Coroner's Court.

coronerscourtsupportservice.org.uk

National Support Helpline: 0300 111 2141

Mon to Fri 9am-7pm and Saturdays from 9am-2pm.

Cruse Bereavement Care

The UK's leading bereavement charity which helps people through one of the most painful times in life – with bereavement support, information, and campaigning.

cruse.org.uk/about

Their website also features an online chat function with expert grief counsellors.

Freephone: 0808 808 1677

Grief Encounter

They provide counselling, group workshops, creative therapies and much more to bereaved children and young people.

They work with individuals, families, schools, and professionals to offer a way through the anxiety, fear and isolation caused by grief.

griefencounter.org.uk

Helpline – 0808 802 0111 Available Mon-Fri 9am-9pm

Ripple

Provides a free downloadable intervention on electronic devices such as desktop computers and laptops which displays a message of hope and signposts to support when a user carries out an online search relating to suicide or self-harm.

ripplesuicideprevention.com

Step By Step

A service provided by Samaritans which offers practical support and advice to schools that have been affected by suicide, suspected suicide, or attempted suicide.

stepbystep@samaritans.org

Freephone: 0808 168 2528

Survivors of Bereavement By Suicide (SOBS)

A national charity providing dedicated support to adults who have been bereaved by suicide. SOBS is run by over 230 volunteers, many of whom have themselves been bereaved by suicide.

uk-sobs.org.uk

The New Normal

Provide a completely free alternative to therapy in the form of online and in-person peer support meetings.

They facilitate conversations between people who find themselves in similar positions in life – whether that's struggles with grief, mental health, or anything else.

thenewnormalcharity.com

Winston's Wish

The UK's first childhood bereavement charity. They provide emotional and practical support to children, young people and those who care for them. They also provide online resources, specialist publications and training for professionals.

winstonswish.org

YoungMinds

The UK's leading charity fighting for children and young people's mental health. Their website features sections on support for young people, parents/carers and those who work with young people.

youngminds.org.uk

Closing comment

Thankfully, there are many amazing organisations across the globe doing incredible work in suicide prevention, working to reduce the stigma around suicide, tackle misconceptions and equip individuals with the tools they need to keep themselves and others safe in moments of crisis. Progress is being made and with better education, understanding and empathy, there is hope.

We know that thinking about and preparing for a suicide or sudden death in your community can be extremely difficult, and we want to take this opportunity to thank you for taking the time to read some or all of this guide.

We hope that you found the information contained within this guide to be useful and now feel better prepared to write and implement a robust and effective suicide and sudden death policy for your school.

If you have any questions about this guide or would like to share your feedback, or suggest a useful resource we would love to hear from you.

Email us at:

contactus@theolliefoundation.org

Or

research@tooledupeducation.com

The OLLIE Foundation can deliver Write to Release bereavement and memorial sessions, Goal Setting, Wellbeing, and Suicide Prevention training in-house for your staff, parents and students. Whatever your CPD needs, we have a training session that will equip your community with the knowledge and skills to help them stay safe, achieve their goals and manage moments of anxiety and overwhelm.

For more information on OLLIE's training and wellbeing events, please visit theolliefoundation.org or email contactus@theolliefoundation.org to request a free copy of our Services Directory.

For more information on Tooled Up Education, please visit www.tooledupeducation.com

Footnotes

¹ Further information on this process can be found in Chapter 5 of, HM Government, [Working Together to Safeguard Children](#) (2018).

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³ <https://wmich.edu/suicideprevention/basics/facts#:~:text=It%20is%20generally%20estimated%20that,actually%20taking%20their%20own%20lives>. Last accessed 30/06/22

⁴ <https://www.cdc.gov/suicide/facts/index.html>. Last accessed 24/06/22

⁵ <https://www.headspace.org.au/assets/School-Support/Suicide-contagion-web.pdf>. Last accessed 24/06/22

⁶ Survivors of Bereavement By Suicide (SOBS), 2017 <https://uksobs.org/for-professionals/postvention/>. Last accessed 17th June 2022.

⁷ https://coronerscourtsupportservice.org.uk/wp-content/uploads/2018/11/CCSS-EL-Inquest_Factsheet_Final29317221_3.pdf. Last accessed 24/06/22

⁸ Gould, M. S., 'Suicide and the Media', *Annals of the New York Academy of Sciences* 932 (2001), pp. 220–4; Marchant, A., Hawton, K., Stewart, A., Montgomery, P., Singaravelu, V., Lloyd, K., et al. 'A Systematic Review of the Relationship Between Internet Use, Self-Harm and Suicidal Behaviour in Young People: The Good, the Bad and the Unknown', *PLOS One* 12 (2017); Gould, M., Kleinman, M. H., Lake, A. M., Forman, J., Midle, J. B., 'The Role of Newspaper Coverage in the Initiation of Teenage Suicide Clusters', *Lancet Psychiatry* 1 (2014), pp. 34–43.

⁹ Pitman, A. L., et al., '[Bereavement by Suicide as a Risk Factor for Suicide Attempt: A Cross-Sectional National UK-Wide Study of 3432 Young Bereaved Adults](#)', *BMJ Open* (2016).

¹⁰ Bilsen, J., '[Suicide and Youth: Risk Factors](#)', *Frontiers in Psychiatry* (2018).

¹¹ Abrutyn, S. et al., 'Rekeying Cultural Scripts for Youth Suicide: How Social Networks Facilitate Suicide Diffusion and Suicide Clusters Following Exposure to Suicide', *Society and Mental Health* 10 (2020), pp. 112–135.

¹² Haw, C., Hawton, K., Niedzwiedz, C., Platt, S., 'Suicide Clusters: A Review of Risk Factors and Mechanisms', *Suicide and Life-Threatening Behavior* 43 (2013), pp. 97–108.

¹³ Niedzwiedz, C., Haw, C., Hawton, K. and Platt, S., 'The Definition and Epidemiology of Clusters of Suicidal Behavior: A Systematic Review', *Suicide and Life-Threatening Behavior* 44, (2014), pp. 569–81.

¹⁴ Public Health England, *Identifying and Responding to Suicide Clusters: A Practice Resource* (2019).

¹⁵ Papyrus News, 2017, Newsletter Edition Number 60 (November 2017). Available at https://papyrus-uk.org/wp-content/uploads/2018/08/papyrus_news_november_2017.pdf. Last accessed 17th June 2022.

¹⁶ Survivors of Bereavement By Suicide (SOBS), 2017 <https://uksobs.org/for-professionals/postvention/>. Last accessed 17th June 2022.

¹⁷ Pitman, A. L. et al., 'Bereavement by Suicide as a Risk Factor for Suicide Attempt: a Cross-Sectional National UK-wide Study of 3432 Young Bereaved Adults', *BMJ Open* (2016).

¹⁸ NHS Employers, 2020 – <https://www.nhsemployers.org/articles/suicide-prevention-and-postvention> last accessed 17th June 2022

¹⁹ Public Health England, *Identifying and Responding to Suicide Clusters* (2019).

²⁰ Sisask, M. and Värnik, A., 'Media Roles in Suicide Prevention: A Systematic Review', *International Journal of Environmental Research and Public Health* 9 (2012), pp. 123–38.

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²⁶ Dr Chris Bowden in conversation with Dr Kathy Weston, [#GetaGrip podcast, 2022](#).

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Guidance for Educational Settings Following a Suicide or Sudden Death was written in 2022 by suicide prevention charity, The OLLIE Foundation, and Tooled Up Education, the home of evidence-based resources on all aspects of parenting, education and family life.



Any death in a school creates enormous ripples across the community. Our intention in partnering with Tooled Up Education to create this resource was to create a buoyancy aid for staff who may unexpectedly find themselves needing to navigate the immediacy and ongoing impact of a sudden death.

We wanted to create something that would support individual staff and teams as they support everyone else and hopefully allow those ripple effects to be managed as compassionately and as gently as possible.

Nobody wants to ever need this resource, but it's here if a school, college or university finds they do.

Debi Roberts MA Ed, CEO of The OLLIE Foundation



We are extremely proud to have co-created this free resource with The Ollie Foundation.

It is research-informed as well as practical; designed to help schools feel better prepared for the most difficult and tragic of circumstances. We hope it enables staff to feel empowered with its actionable, evidence-based tips and better informed in the event of student suicide.

Dr Kathy Weston, Founder of Tooled Up Education

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