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**Suicide Prevention and Postvention Protocol for all Surrey Schools and Colleges:**

**How to support the School/College community in the case of a death by (suspected) suicide or sudden unexpected death and information which may help prevent suicides for all Surrey schools.**

**“Nobody likes to think about a death in school. Yet suicide is a leading cause of death for young people in the UK and ROI.”**

**Samaritans, 2020**

**Suicide Prevention and Postvention Protocol for all Surrey Schools and Colleges**

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**1. Introduction**

This pack is intended for schools that have been affected by a suspected[[1]](#footnote-1) suicide or sudden unexpected death and would like to be prepared and plan a response that helps rebuild the wellbeing of the community and reduces the risk of further suicides. We have based this pack on research and best practice concerning suicide response within school communities.

People bereaved by suicide can be up to 65% more likely to attempt suicide themselves[[2]](#footnote-2) and are particularly vulnerable. Schools and communities should be aware of an increased risk for at least two years following a suicide event. It is therefore important to work to prevent both suicides and the potential impact of a suicide.

This protocol has been developed to help schools and colleges in Surrey identify and support students who may be suicidal and importantly to consider a wide range of associated issues, in the case of a death by (suspected) suicide. It both supports schools/colleges to prepare in case there ever is a (suspected) suicide, how to best respond when a suspected suicide has taken place and how to ensure prevention is embedded within the curriculum.

**This Protocols aims to:**

* Help prevent suicides in schools or colleges.
* To provide guidance on developing a plan when there has been a (suspected) suicide (postvention), in the case of a student (or former student) at the school/college (although this protocol also contains useful information in the case of a death of an adult).
* To provide guidance on developing a plan in advance of an event taking place.
* To provide details of support available following a suicide/suspected suicide.
* To enable agencies/organisations working to reduce suicides in Surrey the opportunity to learn from events leading to the suicide/suspected suicide.
* To signpost to relevant training and support services.

**2. Prevention of Suicide**

This section covers the following areas:

1. Development of a Suicide Prevention Policy
2. Language around Suicide
3. Intervention – how to identify and what to do when someone is struggling
4. Suicide Prevention Training
5. Teaching Resilience in School

**A. Development of a Suicide Prevention Policy or Plan**

Both Samaritans and Papyrus recommend that schools and colleges develop a suicide safety policy or plan which is known by the whole community and which is focused on suicide prevention. Both organisations have published guidance which can help develop your policy, as follows:

* https://papyrus-uk.org/wp-content/uploads/2018/08/toolkitfinal.pdf
* https://www.samaritans.org/how-we-can-help/schools/step-step/step-step-resources/responding-suspected-suicide-schools-and-colleges/

**B. Language Around Suicide**

It is recognised that language can help as well as harm. Papyrus talk about “using sensitive and appropriate language” to “help build awareness and understanding to increase empathy and support.” Their website contains useful resources which can be downloaded to help start conversations about suicide. However, the following table identifies unhelpful and helpful language which might be helpful to be aware of:

|  |  |  |
| --- | --- | --- |
| **Unhelpful Language** | **Why it is Unhelpful**  | **Language to use instead (using Papyrus guidance)**  |
| Successful suicide  | If someone dies by suicide it cannot ever be a success.  | Died by suicide Ended their life Took their own life Killed themselves  |
| Commit suicide  | Suicide hasn’t been a crime since 1961. Using the word “commit” suggests that it is still a crime which perpetuates stigma or the sense that it’s a sin.  | Died by suicide Ended their life Took their own life Killed themselves  |
| You’re not thinking of doing something stupid/silly are you?  | This suggests that the person’s thoughts of suicide are stupid or silly, and/or that the person is him/herself stupid or silly. If asked this question, people are most likely to deny their true feelings for fear of being viewed negatively.  | Are you telling me you want to kill yourself/end your life/die/die by suicide? Sometimes, when people are feeling the way you are, they think about suicide. Is that what you’re thinking about? It sounds like you’re thinking about suicide; is that right?  |

**C. Intervention – how to identify if, and what to do when someone is suicidal**

Staff may feel worried about over-responding, but in truth, it is much better to over-respond than under-respond in the case of a potential suicide.

Papyrus guidance on spotting the signs of suicidal thoughts is as follows:

“It’s not always easy to know if someone is suicidal. After all, we cannot read other people’s minds to truly understand how they are feeling in any given moment.

Sometimes though, there may be signs that a young person is feeling suicidal; some signs are more obvious than others and some can be quite subtle. After all, some young people may not have the skills, confidence or language to describe how they feel. Therefore, we might need to pay a little more attention than usual. Alternatively, some young people may be more comfortable directly expressing their thoughts of suicide which will allow us to explore them further.

So, what might the signs be? People thinking about suicide often invite us to ask directly if suicide has become an option for them.

There is no exhaustive list of ‘invitations’ but changes in behaviour (loss of interest/withdrawal, giving away possessions), physical indicators (weight loss, lack of interest in appearance), expressing thoughts or feelings (Hopeless, sad, guilty, worthless) and the words/language being used (“I can’t take it anymore”, “Everyone would be better off without me”) could all be indicators that someone is experiencing thoughts of suicide.

Recent research has indicated that asking a young person if they are experiencing thoughts of suicide can actually reduce the risk of them ending their life. Asking and determining if that person is feeling suicidal gives you the opportunity to explore those feelings further and support them to stay safe.

The most important thing to do to ascertain if someone is struggling with thoughts of suicide is to **ASK!”**

Generally speaking, someone in distress may elicit direct and/or indirect warning signs of suicidal thoughts. It’s important for staff to learn how to identify these warning signs as they may indicate intention for suicidal behaviour. It’s also important to understand that those with a mental illness or who have had a prior suicide attempt and/or been bereaved by suicide themselves are at greater risk of suicide.

There are some excellent resources to support you to identify and work with someone who is, or who may be, feeling suicidal. These are available here:

1. Papyrus website: Worried about someone - https://papyrus-uk.org/worried-about-someone/
2. MIND website: Supporting someone who feels suicidal - https://www.mind.org.uk/information-support/helping-someone-else/supporting-someone-who-feels-suicidal/#.XOP7KNIUndM
3. Samaritans website: Worried about someone - https://www.samaritans.org/how-we-can-help/support-and-information/worried-about-someone-else/?gclid=EAIaIQobChMIpeiQm9us4gIVyYbVCh1XZQLZEAAYASAAEgKfEvD\_BwE
4. Rethink website: How to support someone - https://www.rethink.org/carers-family-friends/what-you-need-to-know/suicidal-thoughts-how-to-support-someone

**D. Suicide Prevention Training**

Although some suicide prevention training is available (see below), no formal training is strictly necessary to provide crucial early support for someone.

However, nationally recognised online training (how to have a conversation with someone who may be suicidal) is available free of charge from https://www.zerosuicidealliance.com/ and http://www.nwyhelearning.nhs.uk/elearning/HEE/SuicidePrevention/

**E. Promoting Resilience and Positive Emotional Wellbeing & Mental Health in Schools**

Effective approaches to the positive development of health, behaviour and resilience are supportive, strategic and consistent. They permeate the school culture through well considered policies, procedures, partnerships, shared values, curriculum and wider enrichment opportunities. In order to achieve this the leadership team must have an established vision and ethos which models clear expectations of positive behaviours from the whole school community.

Surrey schools are supported in developing their whole school approach to wellbeing and resilience through the Surrey Healthy Schools Self-Evaluation Tool. This tool guides schools through a series of themes and evidence-based standards, providing links to appropriate and supportive national and local services, resources and documentation in order to positively address wellbeing across the following 5 themes:

1. Whole School Approach towards the Promotion of Positive Health and Wellbeing
2. PSHE Curriculum (incl. Health & Wellbeing, Relationships, Sex, Drug, Staying Safe & Financial Capability Education)
3. Healthy Eating (incl. Cooking and Healthy Eating in the Curriculum, Food Provision – school meals, packed lunches, pre and post school club food provision, and Cooking Clubs)
4. Physical Activity (incl. Physical Education and School Sport – PESSPA)
5. Emotional Wellbeing & Mental Health

The Surrey Healthy Schools self-Evaluation Tool allows schools to reflect upon their areas of strength and areas for development and enables schools to be able to develop a comprehensive action plan to guide their development of wellbeing, health and resilience. Visit: https://www.healthysurrey.org.uk/healthy-schools

**F. Resources to Support a Proactive and Developmental Approach to Wellbeing[[3]](#footnote-3)**

**Surrey Healthy Schools**

Surrey Healthy Schools takes an evidence-based approach and provides a comprehensive Self-Evaluation Tool for schools to co-ordinate, develop and improve their provision to support personal development, behaviour, teaching and learning, and leadership and management in line with Ofsted’s Inspection Framework, the Surrey 2030 Vision and Health and Wellbeing Strategy

https://www.healthysurrey.org.uk/healthy-schools

**Surrey PSHE Guidance**

This guidance will enable schools and other PSHE providers to plan, develop and monitor a coherent and progressive programme of experiences which will contribute to pupils’ personal, social development and wellbeing. This will impact upon all areas of school life; not just the formal curriculum, but also upon extracurricular activities, partnerships with the local community, links with external agencies and all that contributes to a positive school ethos.

https://www.healthysurrey.org.uk/professionals/healthy-schools/pshe

**PSHE Association PSHE Programme of Study KS1 – 5**

The DfE statutory guidance for Health Education and Relationships & Sex Education is comprehensively covered by learning opportunities for each key stage across the Programme’s three core themes: ‘Health and Wellbeing’, ‘Relationships’, and ‘Living in the Wider World’,

https://www.pshe-association.org.uk/curriculum-and-resources/resources/programme-study-pshe-education-key-stages-1%E2%80%935

**PSHE Association Guidance**

Produced for the Department for Education this guidance has been fully updated and relaunched support the **statutory PSHE requirements** regarding Health Education, Relationships Education and Relationships and Sex Education (RSE).

https://www.pshe-association.org.uk/content/guidance-and-lessons-teaching-about-mental-health

**Mentally Healthy Schools**

Mentally Healthy Schools is a free website for primary schools, offering school staff information, advice and practical resources to better understand and promote pupils’ mental health and wellbeing.

https://www.mentallyhealthyschools.org.uk/

**Rise Above – Public Health England**

Resources to support the delivery of PSHE curriculum topics to Upper KS2, KS3 and KS4 pupils, with flexible lesson plans and ready-to-use PowerPoints co-created with teachers, and video content developed with 10 to 16-year-olds.

https://campaignresources.phe.gov.uk/schools/topics/rise-above/resources

DEAL: Developing Emotional Awareness and Listening

DEAL is a free resource for teachers and other educational professionals designed to help develop resilience in secondary aged young people.

https://www.samaritans.org/how-we-can-help/schools/deal/

**MindEd**

MindEd educational online training on children and young people’s mental health.

https://www.minded.org.uk/

**3. Surrey Child Death Review Service**

**Child Death Review (CDR)**

CDR is the process to be followed when responding to, investigating, and reviewing the death of any child under the age of 18, from any cause. It runs from the moment of a child’s death to the completion of the review by the Child Death Overview Panel (CDOP). The process is

designed to capture the expertise and thoughts of all individuals who have interacted with the case in order to identify changes that could save the lives of children.

A child death review must be carried out for all children regardless of the cause of death.

It is a statutory requirement to notify CDOP of all child deaths from birth up to their 18th birthday.

**The Child Death Review Team will have a nurse available 7 days a week, 9am - 5pm (07917 212791).**

**4. Putting a Postvention[[4]](#footnote-4)4 Plan in place at your school/college**

Ideally, in a school or college setting, there will be a written plan/policy, developed in advance of a (suspected) suicide. This plan may be slightly different for each school or college, depending on the school structure, skills/support available but staff should have been appropriately trained and supported to undertake a postvention role – so that all feel ready and willing to help. Your plan or policy should include some nationally recognised steps. This is based on the Papyrus “Building Suicide-Safer Schools and Colleges” guidance[[5]](#footnote-5) and the Samaritans’ Step by Step (Help When we Needed it Most) (2017) booklet.[[6]](#footnote-6)

Please use the following steps as a guide, whether it has been possible to put a postvention plan in place or not;

**Step One - Co-ordination (Immediate response when a (suspected) suicide occurs)**

The Headteacher or Principal will likely be notified of the death by either Surrey Police, Children’s Services or the Child Death Review Team. If they become aware of the death via students, media or parents they should contact the Child Death Review Team (07917 212791) and the Surrey County Council Area Schools Officer, who will alert the relevant people including the Educational Psychology Team. The school may wish to convene a small postvention, or crisis, team which may include the school counsellor, educational psychologist, teachers of the student and other members of the senior management team. A member of the Child Death Review team will be in touch to arrange a virtual multi-agency Information Sharing and Planning Meeting (ISPM) using Microsoft Teams. They will also provide you with an email contact to send the completed Vulnerability Mapping prior to the meeting.

Details of the support available to the school from the Educational Psychology team can be found here. https://www.surreycc.gov.uk/schools-and-learning/teachers-and-education-staff/educational-advice-and-support/educational-psychology-information/a-guide-to-help-schools-prepare-and-respond-to-a-critical-incident

Ensuring the team is aware of the support that is available to staff, students and family, is crucial. The Help is at Hand document may provide some useful information to help with this. Other documents, such as “When a child dies” will be made available to the parents by the Child Death Review Nurse.

http://supportaftersuicide.org.uk/support-guides/help-is-at-hand/

**Step Two - Establish the facts, follow the Child Death Review Process and make contact with the family (Immediate/Within 24 hours)**

**Establish the facts and follow the Child Death Review Process:** A member of the school postvention team should firstly check with the authorities to be sure of the facts surrounding the death. The Child Death Review Nurse and Surrey Police will have started a Joint Agency Response following notification of the death. You may be contacted by one of these agencies to participate in the process and will be asked for information.

**Contact with the family:** The Child Death Review Team will be supporting the family following the death. It can be distressing for families to have many professionals contact them in the early days so it would be recommended to co-ordinate all contact via the Child Death Review Nurse who will be working closely with Surrey Police. This will help to support the family and manage communications. Rumours can be inaccurate and deeply hurtful and unfair to the missing/deceased person and their family and friends. It is important to avoid all speculation and focus on facts.

The Child Death Review Nurse will remain this family’s contact throughout the whole process from time of death to inquest and conclusion of all investigations. This can sometimes be several years.

Information about the death should not be disclosed to students without explicit permission of the family. The Child Death Review Nurse can act as a liaison with the family to ask any questions or to show them any draft letters. Depending on the circumstances of death, many parents find it very distressing to be contacted by school in the early days and are often worried about other parents, pupils or teachers judging them and their family. The Child Death Review Nurse can reassure them that support is available from the school when the family feel ready to make contact.

Ensure that the ongoing support of the school/college is offered to the family. Ensure, too, that the family does not receive any general administrative letters/texts (e.g. school trip information, parent consultation events).

Ensure that any schools or colleges where siblings attend are contacted at an early point so they can also use the protocol as appropriate.

**Step Three – Media Contact (as soon as possible, due to social media “chatter”. Media will pick up on things very quickly)**

A suicide of someone connected to a school/college can attract much media and social media attention. It is therefore important to designate a media spokesperson. Surrey Police can help advise on the use of words for any press release. Early press releases can cause significant distress to grieving families and friends. It is vital that these are crafted carefully to minimise distress for both the family and school. Ensure that all staff are made aware that only the media spokesperson is authorised to speak to the media. Advise those that answer external telephone calls to the school that they should not engage in answering any questions but should:

* Make a note of the reporter’s contact details (including mobile and email address)
* Make a note of the questions asked
* Pass the information given, to the Headteacher/Principal as a matter of urgency

An approved prepared statement should be compiled, in order to control the way any response on behalf of the school is answered.

The communication log at the end of this document may be useful, it may also be useful to contact the Area Schools Officers for advice.

Alternatively, Samaritans’ media team can help support schools/colleges (and the family) in dealing with the media during a crisis (Contact: 116 123 free line or 03300945717-local call charges apply, samaritans.org/media-centre).

Samaritans’ advice is not to give out any details of the method by which the person died, or any “suicide note”, or to provide any “explanation” of the suspected suicide such as “was stressed about exam results” etc.

If the school has a Facebook page or twitter account, we would strongly advise taking advice on what or whether to post from Surrey Police or the Samaritans media team on the numbers above.

**Step Four - Contact other agencies who may have been in contact with the individual**

In the case of a suspected suicide you will be asked to follow the Joint Agency Response (JAR) process which will help to ascertain facts about the death and:

* to establish, where possible, a cause or causes of death (in conjunction with the Coroner). Details about H.M. Coroners’ Service in Surrey is available here: https://www.surreycc.gov.uk/birth-death-and-ceremonies/death/coroner
* to identify any potential modifiable factors
* to provide ongoing support to the family
* to learn lessons and make recommendations in order to reduce the risks of future child deaths

You will be asked to meet and share information known to you about the child, with other key agencies/organisations who have a part to play in the Joint Agency Response for the child, such as health professionals, e.g. school nurses, CAMHS, social Workers, police, school counsellor, educational psychologists and so forth. This meeting is known as The Information Sharing and Planning Meeting and will be co-ordinated by the Child Death Review Team.

This meeting helps with information gathering to form part of any investigations and to establish any learning from this event in the time immediately after it. The purpose of this discussion is not to pass on blame, or to pass judgement on service provision, but rather to understand the event and learn and help prevent any future suicide events.

Part of the Joint Agency Response and the Child Death Review process is to make notes of these discussions to record any facts and identify any learning. It is always more difficult to recall exact timings/issues several months later. The Information Sharing and Planning Meeting will be minuted and the minutes will be shared with all representatives. It is however important that you act on any immediate/pressing issues and make notes of the actions to be taken. Support will be available from the Child Death Review Team if required.

**Step Five – Communicate with and take care of staff (Within one day)**

As soon as possible, organise an internal meeting/s for staff to attend. It may be appropriate to inform staff in different groups. Advice on how to communicate with staff and pupils can be found here. https://www.surreycc.gov.uk/schools-and-learning/teachers-and-education-staff/educational-advice-and-support/educational-psychology-information/a-guide-to-help-schools-prepare-and-respond-to-a-critical-incident

In the meeting you should ensure

* members of staff are made aware of how to identify and support both students and staff experiencing mental distress, it is important to identify both vulnerable students and staff.
* that all staff are informed about where to find this information.
* that you and your colleagues are looked after in line with the guide in the link above.

**Step Six – Communicate with and take care of the students (Within one day)**

Following agreement with the family to disclose and after the staff communication event, break the news to the students. Samaritans’ advice is that this is best done in small groups, or classes. It is better to be factual but to avoid detail about the act itself. Do not disclose details about the method used, whether there was a suicide note, or its contents. A briefing note for staff to use with the small groups/class can be useful to ensure consistency of message. Consider providing immediate counselling or emotional support to students (and staff) in a separate room. Contact CAMHS (Useful Contacts) who may be able to provide support to students who are in the care of their service and who may be struggling.

Advise students to avoid contact with the media and ensure that you have given careful thought to rules and guidelines to assist students if/when communicating about the incident on social media sites.

With parental consent, it may be appropriate to send out a letter to parents/carers of all pupils/students, to inform them of the incident and to make them aware of possible risks, together with information about support available. The Child Death Review Nurse can help with liaison with the family. The communication should contain:

* What has happened
* What support the school is putting in place
* What actions the school will take with regards to funerals and memorials
* Where to find further information about suicide and grief
* Where to access support for themselves
* What to do if they are worried about someone else

**Step Seven – Funeral**

Depending on the wishes of the family, the school/college may wish to send representative/s to attend the funeral service. Samaritans’ recommendation is that parents or guardians accompany students who wish to attend and that those who don’t attend have normal classes to go to. There should be no reason why there would be a greater attendance at a funeral service under these circumstances than for any other tragic death at the school. Some families prefer a more intimate family funeral with a separate celebration/service for school and friends.

**Step Eight – Memorials**

The school/college will want to think carefully about memorials for the individual who has died; to strike an appropriate balance between supporting distressed individuals and fulfilling the central purpose of providing education and learning. Some establishments have used a miniature artificial tree (and labels with string) to be left in a suitable place, offering a chance for individuals to leave a thought/memory/prayer for that individual on the branches of the tree.

It is important to set an appropriate time limit to the memorial (with the suggestion of up to two weeks) and to strive to treat all deaths in the same way.

In the longer term, memorials can be organised (tree/plant/plaque etc). There are many ideas to encourage children to remember the life of the person rather than their death (memory box; calendar of memories; memory jar; 10 ways to remember; skyscape).

Sending a card to the parents/family one year after the incident can be a supportive gesture and one that may be well appreciated.

**Step Nine – Evaluation and Follow-up**

As part of the Child Death Review Process, there will be subsequent meetings such as the Child Death Review Meeting. This will be organised by the Child Death Review Team once the majority of the investigations are coming to a close and all agencies involved with the young person will be invited to attend. Once all investigations are completed, each case will be considered by the Child Death Overview Panel (CDOP) where key themes and identified learning will be gathered and then disseminated across all agencies in Surrey.

**5. Useful Contacts**

**A. Urgent/Crisis Situation**

**i. Winston’s Wish** – help for grieving families. There is a lot of information on this site.

Helpline: 08452 03 04 05

Email: ask@winstonswish.org.uk

**ii. Samaritans** – confidential emotional support for anyone in a crisis – 24 hours a day

Phone: 08457 909090

Textphone: 08457 909192

Email: jo@samaritans.org

Website: www.samaritans.org

**iii. The Compassionate Friends** – support for bereaved parents who have lost a child of any age and from any circumstance

Phone: 0845 123 2304

Email: info@tcf.org.uk

Website: www.tcf.org.uk

**iv. Survivors of Bereavement by Suicide** – local self-help and support groups for those bereaved through suicide

Phone: 0870 241 3337

Website: http://sobs.admin.care4free.net/

**v. Child and Adolescent Mental Health Service (CAMHS)**

Children and adolescent mental health services (CAMHS) are made up of specialist teams offering assessment and treatment to children and young people up to age 18 who have emotional, behavioural or mental health problems.

Contact numbers for the CAMHS teams are as follows:

Please contact to make a referral or discuss any concerns you have about a child or young person:

CAMHS Single Point of Access

First Floor, Dominion House

Woodbridge Road

Guildford

Surrey GU1 4PU

Tel: 0300 222 5755

Opening hours

We are open: 8am - 8pm Monday to Friday, 9am - 12pm on Saturdays.

**vi. PAPYRUS www.papyrus-uk.org**

National charity for the prevention of young suicides. HOPELineUK is a specialist telephone service staffed by trained professionals who give non-judgmental support, practical advice and information to:

* Children, teenagers and young people up to the age of 35 who are worried about how they are feeling
* Anyone who is concerned about a young person

Call: 0800 068 41 41

Email: pat@papyrus-uk.org

SMS: 07786 209697

**vii. CALM (Campaign Against Living Miserably)** www.thecalmzone.net

* Offers support to young men in the UK who are down or in a crisis.
* Helpline: 0800 58 58 58 (Daily 17:00-midnight)
* Webchat

**B. Longer-Term/Follow-up Support**

**i. Simon Says**

Website: http://www.simonsays.org.uk

Telephone: 01794 323934

Email: info@simonsays.org.uk

Office hours: Monday-Wednesday 9am-4pm. Office closed on Thursdays and Fridays.

Simon Says aims to:

* Offer information and advice to move forward in their lives, but never forget their significant person
* Run a telephone support line
* Host monthly age appropriate support groups
* Offer the opportunity to meet other families who have also been bereaved
* Support and give advice and training to teachers, and other professionals working with bereaved children and young people.

**ii. School Nursing Service**

The School Nursing service works in partnership with children, young people and their families to ensure that pupil’s health needs are supported within their school and their community. ChatHealth (staffed by school nurses) is a text messaging service to support young people in Surrey. This is an easy way for young people 11-19 to confidentially ask for help with a range of issues, including mental health concerns.

ChatHealth allows young people in Surrey to text messages to a dedicated number **07507329951**; the messages are then delivered to a secure website. Once received, the school nurse will respond to the text within one working day.

ChatHealth is available Monday to Friday from 9am-4.30pm (excluding bank holidays). Any young person who texts the service outside of these hours will receive an automated message with advice of where to get help if their question is urgent.

The School Nursing Team are able to support young people with questions relating to a wide range of health and wellbeing issues including self-harm, relationships, bullying, weight, anxiety, drugs, smoking, stress, body worries, alcohol and sexual health. As well as giving advice, the team can signpost to appropriate services and other support.

Young people are still able to request to see a School Nurse face to face in school or a community setting.

**iii. PAPYRUS www.papyrus-uk.org**

National charity for the prevention of young suicides

Call: 0800 068 41 41

Email: pat@papyrus-uk.org

SMS: 07786 209697

HOPELineUK is a specialist telephone service staffed by trained professionals who give non-judgemental support, practical advice and information to;

* Children, teenagers and young people up to the age of 35 who are worried about how they are feeling
* Anyone who is concerned about a young person

**iv. CALM (Campaign Against Living Miserably)**

* www.thecalmzone.net
* Offers support to young men in the UK who are down or in a crisis.
* Helpline: 0800 58 58 58 (Daily 17:00-midnight)
* Webchat

**v. MindOut Lesbian, Gay, Bisexual, Trans & Queer Mental Health Service**

* Offers support, information and advocacy, including suicide prevention support, to LGBTQ communities
* 01273 234839
* info@mindout.org.uk

**vi. Childline** www.childline.org.uk

* If you're under 19 you can confidentially call, email, or chat online about any problem big or small
* Freephone 24h helpline: 0800 1111
* Sign up for a childline account on the website to be able to message a counsellor anytime without using your email address
* Chat 1:1 with an online advisor

**vii. The Mix** www.themix.org.uk

* If you're under 25 you can talk to The Mix for free on the phone, by email or on their webchat. You can also use their phone counselling service or get more information on support services you might need.
* Freephone: 0808 808 4994 (13:00-23:00 daily)

**C. Bereavement (by Suicide) Services/Agencies**

**i. Survivors of Bereavement by Suicide (SoBS)**

* Guildford (North/North East Hants) Phone: Lisa on 07434 365 815 Email: sobsguildford@gmail.com

**ii. Red Lipstick Foundation**

As a foundation built from personal experience, we are dedicated to supporting families bereaved by suicide. This is structured, linked, telephone support, and the possibility of one to ones (depending on location) with other families, from all walks of life, at different stages in their journey who are also experiencing suicide or a sudden younger person’s bereavement.

Email: theredlipstickfoundation@gmail.com

**iii. Cruse Bereavement Care** www.crusebereavementcare.org.uk (national details)

Phone: 0808 808 1677 (Mon-Fri, 9.30am-5pm)

One to One Support, Pre-bereavement Support, Telephone Support and Home Visits, Bereaved by Suicide

that they are signed off by:

* The Independent Chair/Scrutineer
* Statutory Partners
* The person who requested the release
* Anyone who is quoted
* The department head and Minister

In addition, any department which is mentioned should be consulted on information contained in the release which either directly affects them or gives information about their procedures/policies which need to be checked for accuracy.

News releases for the Surrey Safeguarding Partnership should be signed off by:

* The Independent Chair. The Independent Chair should retain final approval on all releases.
* The Statutory Partners
* The Partnership Development Team and Communications Lead
* Relevant members of the Partnership to make sure that departments are aware as required. This partnership member must also give direction on whether additional members of their department (i.e. Health and Social Services Minister) should be made aware of the release.

The Partnership Development Team (with the assistance of the Communications Department, if required) must have the freedom to judge whether a news release issued on operational matters (training, events etc.) requires the approval of all the above.

1. The word ‘suspected’ is used in the document as a suicide is not the confirmed cause of death until the Coroner’s inquest is complete. [↑](#footnote-ref-1)
2. http://bmjopen.bmj.com/content/6/1/e009948 [↑](#footnote-ref-2)
3. To ensure effective teaching and learning ensure any resource meets the needs of pupils and supports the school vision, values and ethos. To help ensure that a resource is suitable for your needs apply the criteria for the selection of resources and materials – included in the Surrey PSHE Guidance https://www.healthysurrey.org.uk/professionals/healthy-schools/pshe [↑](#footnote-ref-3)
4. Postvention “is the term given to activities and programmes that are intended to assist those who have been bereaved by suicide to cope with what has happened. Suicide prevention and postvention are closely related in that postvention can also prevent further deaths.” (p.3, New Zealand Ministry of Youth Development, ‘Guidance for community organisations involved in suicide postvention’, 2005) – taken from Help when we Needed it Most (Samaritans, 2017) [↑](#footnote-ref-4)
5. https://papyrus-uk.org/wp-content/uploads/2018/10/400734-Schools-guide-PAPYRUS.pdf [↑](#footnote-ref-5)
6. http://www.samaritans.org/sites/default/files/kcfinder/files/HWWNIM\_Feb17\_Final\_web.pdf [↑](#footnote-ref-6)