

As a senior leader in UK FRS you hold significant responsibility and pressure when your service experiences a death by suicide. This guide has been produced for you as a group to gather the learning from our work with NTU so you have a guide on the key things to consider, do and reflect on when you need it. It should give you an overview of a response framework that can be used to support good practice in postvention after a suicide.

What is postvention?

Postvention refers to actions that are taken after a death by suicide. It is a critical aspect of responding to all of those who are affected by a suicide, as it can help the recovery process for these individuals and the workplace community, and it can reduce the likelihood of clusters.

What are the effects of suicide?

Suicide can affect people in many ways, and this will be personal to each individual. Everyone will have had a different relationship with the person who has died, and they will also be affected by what else is going on at the time, as well as what support is available.

Whenever someone dies, it can be overwhelming. There can be many different and intense feelings involved, including grief, disbelief and sadness, among others. However, the process of grieving and coming to terms with the death, as well as getting support after a suicide, can be complicated by feelings of guilt, rejection or anger. There are also often many questions that just can't be answered.

People who don't personally know the person can also be affected, especially if the person who died was a high-profile or if they recognise something about themselves in the person who died.

As with all grief, there will be a period of meaning-making after a suicide as people try and make sense of the death. After a suicide, it can be difficult to understand or make sense as suicide is complex and personal. It can also be difficult to talk about the loss or people may feel a sense of responsibility in not preventing the death, which make it more difficult to grieve or adapt to the loss. However, with the right support people can find their own meaning, grieve and adapt.

Things to consider for yourself

Sometimes, after a suicide, it can feel like you've got to just carry on with work, put others first, or not show that it has affected you. But this can impact how well you cope – now or in the future. It can also be helpful to others who have been affected if you share that the experience has had an emotional impact on you too.

There are two good-quality resources available that can be suggested to anyone affected by suicide that you should have available for yourself and your colleagues:

- The Help is at Hand booklet is a resource for people who have been bereaved through suicide or other unexplained death, and for those helping them.
- First Hand is an organisation that is there for anyone affected by being present at the suicide of a person they did not know.

This guidance draws from detailed guidance available online from The Fire Fighters Charity on suicide postvention including a Managers and People Professionals Guide.

Have you considered?

- ✓ visible leadership can make a difference –
 acknowledging that it's OK to be affected,
 reassuring others and admitting that you
 might not have all the answers.
- ✓ acknowledge your own feelings and if affected, show colleagues and staff that talking about suicide and accessing informal or formal support is a positive action.
- ✓ plan for support structures for senior or isolated managers e.g. a peer buddy system or with external services.
- work in partnership with the wider leadership team, as postvention after the death of a colleague as it impacts all levels of an organisation. Anyone may be affected by the death, including senior or other managers and/or those who did not know the person who died personally.
- ✓ it can be a difficult time when managing your own emotions whilst providing support to others and continuing services, so finding a balance will be important.
- ensure that there is a communication strategy regarding how information will be passed on and how to talk about suicide safely.
- consider whether there are options for adjusting or pausing work expectations to reduce the load on managers and staff.

Additional information

The post-vention phases and associated actions

Following a death by suicide there are three key phases that should be considered in your response. These are the:

- Acute/immediate phase
- Short-term/recovery phase
- · Longer-term/reconstructing phase

Each of these phases has a number of key actions to consider which we share with you below.

Acute/immediate phase

Immediately after a death by suicide, common reactions include mixed emotions (e.g. sadness with anger), shock, grief and they may include someone questioning whether they could have prevented the suicide, leading to guilt or anxiety.

Coordinate. Contain the situation; preferably a senior manager should coordinate the response, with a team from across the service, including engagement with the family, colleagues of the deceased and practical implications. [Note that this is not a family liaison officer which is allocated by the police]. This should preferably be someone who did not know the individual well. Plan for a period of disruption and adjustment and consider any helpful adjustments or pauses on work expectations.

Notify with respect. Communicate news of the death while protecting the privacy of the deceased employee and their loved ones.

Communicate. Reduce the potential for contagion and misinformation by getting in front of the news and being proactive and measured in communication. Reflect on the Samaritans' Media Guidelines on reporting on suicide.

Detailed guidance on how to communicate after a suicide is available online on page 23 of The Fire Fighters Charity Suicide Prevention and Postvention Guidance.

Support. Establish and provide appropriate immediate support, including work adjustments, a safe place and time for staff of all grades to talk. Sensitively promote the available support on offer including wellbeing services for affected staff including signposting helplines. Ensure support is provided to managers of all levels around having conversations with staff about the death. Compassionately review the wellbeing of each person affected by the death. Where appropriate, offer practical assistance to the family, e.g., regarding financial matters or funeral arrangements.

Provide opt-out instead of opt-in support provision (i.e. everyone is provided the support but may decline) as it may be beneficial due to the potential stigma regarding help-seeking after a suicide.

Short-term/recovery phase

The grieving process and its emotions can be complex, and perceptions of the person choosing to die can lead to a sense of rejection or anger. The stigma and emotions around suicide can be difficult to navigate when little informal support is provided.

Restore. Bring staff back to the importance and value of the work they do as part of the team and be a visible presence to staff.

Offer moral support to facilitate and encourage the return to usual operational activities. Support may include continued active listening, providing time away from work (including for the funeral) and considering temporary work change requests e.g. incident types or alternative duties. Sensitively coordinate the practicalities such as clearing lockers.

Lead. Build and sustain trust and confidence in organisational leadership through ongoing management of the situation. Throughout any investigations or inquest, provide information and ensure support. The government has written A Guide to Coroner Services for Bereaved People, which may be of help.

A people-management-led postvention initiative can provide information to both staff and their loved ones regarding healthy grieving to help destigmatise conversations among employees (e.g. sharing stories of what has helped them through the difficult time).

Link. Identify staff who have been affected and link them to additional support resources, referring those most affected to professional bereavement support or other services. Organise a sensitive and appropriate tribute for the deceased employee, remaining mindful of the implications of the choice of location e.g., at a workplace.

Comfort. Support, comfort and promote healthy grieving and processing among staff who have been impacted by the person's suicide. Encourage open conversations about suicide including managers expressing any personal impacts and coping strategies as well as signposting colleagues to support options. Ensure that those managing or providing support are also provided with appropriate support.

Funeral arrangements should be considered in liaison with the family and colleagues including providing appropriate logistical and practical support.

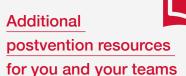
In the rare event of a suicide cluster (3 or more deaths occurring in a community or setting in a short period of time, but be aware 2 in quick succession is also cause for concern) to convene a Suicide Cluster Response Group and develop a plan in line with PHE guidance.

Longer-term/reconstructing phase

Honour. Prepare for people's reactions around the anniversary of a death by suicide and other milestone dates in consultation and inclusion of family and friends of the deceased.

Sustain. Collate and translate data and learning about deaths and postvention activity into a suicide prevention communication programme and embed this in policy. Review and address any community risk factors through a public health approach including linking in with local public health teams and suicide prevention action plans.

Evidence suggests that stigma around suicide, even after its occurrence, may still hinder changes in organisational culture and postvention, and this should be considered when implementing long-term policy and practice actions.



- Suicide prevention and suicide postvention online guidance including Managers and People Professional guide.
- Ambulance service employee suicide postvention toolkit – Samaritans
- A manager's guide to suicide postvention in the workplace – Action Alliance
- Responding to suicide risk in the workplace – Chartered Institute of Personnel and Development -Postvention Guidance
- A guide to compassionate bereavement support – Chartered Institute of Personnel and Development
- NHS employee suicide:

 a postvention toolkit to help
 manage the impact and provide
 support Suicide Postvention

 Standard Operating Procedure
 Project International Association
 of Fire Fighters | NHS Confederation
 Samaritans
- Crisis management in the event of suicide – Business in the Community, Public Health England and Samaritans

For further information, advice and guidance please feel free to reach out to us.

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The Fire Fighters Charity firefighterscharity.org.uk

For support, please contact The Fire Fighters Charity on 0800 389 8820 or the Crisis Line on 0300 373 0896.



