

Guidance for Educational Settings Following the Suspected or Known Attempted Suicide of a Child or Young Person.

WCF Educational Psychology Service and Worcestershire County Council Public Health

March 2024





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Purpose of this guidance

When there is an attempted suicide within a school community there is usually a profound sense of shock. It is, therefore, important to have already thought through a plan of action as it is sometimes difficult to think clearly at these times. You may find the following guidance helpful when considering the action to take in the event of a known or suspected attempted suicide or cluster of suicide attempts within your pupil population.

Within this document, links to external websites and documents have been included as potential resources for schools, families and young people. While every effort has been made to check their suitability, external sites are not under our control and their content may change without warning. We provide these links as a service and cannot guarantee their continued suitability.

Definitions

Suicide

Suicide is death resulting from an intentional, self-inflicted act.

Suicide attempt

When someone harms themselves with an intent to end their life.

Suicide ideation

Thoughts of suicide which can range from ideas about ending your life to having a specific plan.

Suicide contagion

Where one or more than one person's suicide influences another person to engage in suicidal behaviour or increases their risk of suicide ideation and attempts.

Self Harm

Self-harm is when someone deliberately hurts themselves as a way of dealing with their emotions. Unexpected/more intense self-harm is a change in the pattern of someone's self-harm – this may be the self-harm becoming more acute, more frequent or both.

Safety Plan

A <u>safety plan</u> is a tool for helping someone navigate for a young person who maybe feeling overwhelmed and in crisis and struggling to manage their emotions. It can also be a way for the school/college and the young person to plan how to communicate and check in with each other going forwards. For the school it can be a record of the arrangements it will put in place to keep the young person safe.

Consent

See this section and Appendix 1.





Using this guidance

This resource is structured into three sections.

- Immediate Response
- Medium Term Response
- Long Term Response

Each section includes local actions for the setting to ensure the safety of the individual and those within the setting and wider community plus a review of school/college processes to prevent further suicide attempts.

Evaluation

This guidance will be evaluated in January 2025. Education settings that use any aspect of this guidance are asked to contribute to the evaluation at the time the guidance is used by submitting feedback via this survey link: https://forms.office.com/e/VvLpHy67q3





Becoming aware of a suicide attempt

Area of support and guidance	Considerations	Resources/Further information (click on underlined text to open links to resources)
Immediate Response		
Disclosure	A school/college may find out about an attempted suicide through various routes.	
	If an attempted suicide occurs in school/college or has been made at home but the pupil/student is in school/college (e.g. after an overdose) the school/college should assess which medical route to follow. If in any doubt, seek medical attention. Referral to a GP may result in a delay in being seen.	
	In the case of:	
	 No pulse or breathing * Consumption of any over the counter or prescribed medicine in excess of the manufacturer's guidance on dosage Heavy bleeding/ blood loss Extensive injury Confusion, drowsiness, disorientation with or without illegal drug use Call 999 	
	*If no pulse or breathing, apply CPR while	
	 awaiting medical attention Ensure any other students/staff are safe Once safe to do so, move pupil/student to a safe place 	
	 Remove any harmful objects such as sharp objects or medication 	





	 Follow school/college emergency management protocol / safeguarding procedures When the student is safe and under medical supervision, the school/college should move to meeting the pupil/students' medium to long term needs. 	
Confidentiality/Consent	It is important to be honest with a pupil/student about confidentiality and the need to share information with key staff in school/college, health services, other services and parents/carers. Wherever possible, consent to share information should be obtained. However, there are occasions when consent is not available /forthcoming and there may be a wider risk to other children or young people e.g. contagion effect. Pupils/students can be assured that those who do not need to know will not be informed.	The GDPR and Data Protection Act 2018 do not prevent, or limit, the sharing of information for the purposes of keeping children and young people safe. See Appendix 1 for details. Further information on the 7 golden rules for information sharing can be found here (page 4): https://assets.publishing. service.gov.uk/governme nt/uploads/system/uploa ds/attachment data/file/ 1062969/Information sh aring advice practitione rs safeguarding services .pdf
Liaising with the family	Involving parents and carers will be important in most cases and as such they are likely to have many questions and may be confused or scared about how to help their child. They should be advised to use NHS 111 (option 2 mental health support) to access local support. Papyrus (a national suicide charity)	
	have a useful guide which can be given to parents of children who have attempted suicide.	https://www.papyrus- uk.org/wp- content/uploads/2020/08/Sup





	Chose the most natural member of school staff with an existing good relationship with the family to maintain contact. Is there a direct telephone line for the family to contact the school?	porting-Your-Child-A-Guide-for-Parents.pdf After a Suicide Attempt: A guide for families and friends (Herefordshire and Worcestershire Health and Care Trust)
Liaison with CAMHS	Suicide and self-harm are complex and rarely due to one factor. A crisis for young people is rarely due to a mental health problem alone and triggers for crisis can be multi-factorial. Some of these may be external factors (wider societal issues). A mental health crisis occurs when the level of distress and risk presented is not supported or contained at that moment in time provoking an overwhelming and emotional response to an event • If a child is open to CAMHS, the school should inform the CAMHS duty team via CAMHS Single Point of Access (SPA) Phone no. 01905 681961 – ask for the CAMHS duty team. • If it is not known if a child/young person is open to CAMHS and there are immediate concerns, the school should call NHS 111 or Worcestershire's urgent mental health helpline 0808 1969127 • If a pupil is not open to CAMHS or does not need immediate medical attention (physically or mentally) the school should advise young person and their parent/carers (with the young person's consent) that the young person sees their GP	





If a pupil continues to have suicidal ideation but no suicide plan, advise them to see their GP. Share this with the young person's parents/carers with the young person's consent. Where a school has any concerns about whether a young person has seen their GP/visited A&E or not, or if the young person is not attending school, the school should follow their safeguarding procedures. This should include reference to the school's Early Help offer. Communication Liaise with WCF/WCC Comms for press If needed request support and media advice from the or media support. Do not communicate WCF Comms Team on details without discussion with the comms@worcschildrenfirs young person's parents/carers and the t.org.uk young person themselves. Be led by From 1st October 2024 use them. comms@worcestershire.g

Medium Term Response

This will start in the week after the suicide attempt and run over a period of weeks. It will focus on the young person who made the suicide attempt and others who are at risk of, or are being impacted by, the attempt. School/college actions are:

Safety Plan (back to school/college plan)

Understand the young person's safety plan developed with CAMHS (if it has been shared). Determine how school/college fits into their plan. If the school/college is not privy to the CAMHS safety plan (or plan developed with other agencies), use the template in Appendix 2 to develop a school safety plan with the young person. It may include:

 Collaboration with the pupil/student, family (where appropriate) and any involved mental health professionals to identify risks and protective factors. Further information on formulating a safety plan including some examples of safety plans can be found on the following websites:

ov.uk

Stay Safe Plan (papyrusuk.org)

Suicide safety plan |
Papyrus UK | Suicide
Prevention Charity
(papyrus-uk.org)





		0.0.01
	Reasonable adjustments to	<u>SafetyPlan.pdf</u>
	school/college schedule for the	(getselfhelp.co.uk)
	pupil/student such as:	
	 Working up to full time 	
	hours	
	 Academic assessment 	
	adjustments	
	 Permission to leave class to 	
	go to designated safe	
	spaces/person within	
	school/college	
	Identify specific staff within the	
	school/college to whom student	
	can turn to - ideally two should be	
	identified to ensure availability.	
	 Identify aspects of the school's 	
	physical environment that may	
	require adjustments, this might be	
	part of the long-term response.	
	Work with other young people who	
	may present risks mentally and	
	physically to the young person in	
	question.	
Circles of vulnerability	Undertake a Circles of Vulnerability	See Appendix 3.
Circles of vulnerability	Undertake a Circles of Vulnerability exercise to determine the people who	See Appendix 3.
Circles of vulnerability	exercise to determine the people who	See Appendix 3.
Circles of vulnerability	exercise to determine the people who may be at risk because of the attempt.	See Appendix 3.
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Circles of vulnerability	exercise to determine the people who may be at risk because of the attempt. Liaise with outside organisations such as sport clubs/activity and consider children not in school such as home	See Appendix 3.
Circles of vulnerability Pupils immediately	exercise to determine the people who may be at risk because of the attempt. Liaise with outside organisations such as sport clubs/activity and consider children not in school such as home educated young people and those with persistent absence.	See Appendix 3.
	exercise to determine the people who may be at risk because of the attempt. Liaise with outside organisations such as sport clubs/activity and consider children not in school such as home educated young people and those with persistent absence. These students may be:	See Appendix 3.
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Pupils immediately	exercise to determine the people who may be at risk because of the attempt. Liaise with outside organisations such as sport clubs/activity and consider children not in school such as home educated young people and those with persistent absence. These students may be: Siblings (step and foster siblings too), cousins and other relations who are pupils at school Friendship groups (in and out of school) Tutor groups Subject groups Sports teams Activity groups outside of school	See Appendix 3.





	 group and provide them with this WCF guidance document. Students who have been bereaved by suicide. Consider siblings/cousins/friends who may have recently moved to a new school and inform their new school. Students who have lost a family member by suicide. 	
Monitor patterns of attempts/self harm	Use the spreadsheet in Appendix 4 to monitor any further attempts and self-harm across the pupil population. The spreadsheet may include those who have been identified as part of the Circles of Vulnerability exercise or other young people where suicide attempts or unexpected/more intense self-harm comes to light. This allows connections to be made between attempts or increased self-harm and developing clusters to be identified. Consider any social media or websites that young people mention or messaging groups that are being used to discuss suicide, self-harm or pacts.	
	If a possible cluster of attempted suicide or self-harm is suspected as a result of using the tool in Appendix 4 OR if messaging groups are being used to discuss suicide contact Public Health at rts@worcestershire.gov.uk (Real Time Surveillance). Collaboration between the school/college, Public Health and CAMHS will decide if a Suicide Prevention Action Group will need to be established to support the response (see Appendix 5).	
Staff	It is important to also consider the wellbeing of staff following a suicide attempt. Where there is consent to	If any member of staff is struggling with their own





share (see page 5) it may be useful to mental health, there are have a staff meeting following a various sources of support: significant event to review the response Text 'WOO' to 85258 for as well as allow for staff to talk. confidential text support 24/7 Staff members should be offered Herefordshire and support for themselves and the Worcestershire Talking appropriate information, training and Therapies Welcome to NHS Talking Therapies | Talking advice for supporting pupils. Therapies (hwhct.nhs.uk) The following national resources have been created specifically for staff in an educational setting and may be useful to share: https://www.twinkl.co.uk/r esources/twinklpartnerships/mindpartnerships/teacherwellbeing-during-schoolclosure-mind-partnerships https://www.educationsup port.org.uk/get-help/helpfor-you/helpline/ Media/Social media Be mindful of the impact of social If needed request support and media advice from the media. Where social media group WCF/WCC Comms Team messages are found to be implicit in fuelling debate and discussion about comms@worcschildrenfirs suicide or self-harm including eating t.org.uk behaviours inform the parents of the young people involved and advocate From 1st October 2024 use the closing of the group. comms@worcestershire.go v.uk Report suicide pact messaging/social media groups to Public Health at rts@worcestershire.gov.u k (Real Time Surveillance).





Long Term Response		
Review School/College Suicide Prevention Plan	Review the school/college Suicide Prevention Plan. PAPYRUS produce a useful template for schools to use.	Schools guide Papyrus UK Suicide Prevention Charity (papyrus-uk.org)
Suicide Prevention Action Group	If there are concerns about contagion or a cluster of suicide attempts or increased /unexpected or more intense self-harm, create a Suicide Prevention Action Group (SPAG). This is a multidisciplinary group to oversee and co-ordinate the necessary actions of all partners to support the pupils involved and to prevent any further suicide attempts and unexpected/more intense self-harm. There is no set time period over which the SPAG will need to meet but at least 2 meetings are likely to be required.	See Appendix 5 for terms of reference and an agenda outline.
Physical environment	The young person's back to school safety plan and/or the review of the school/college suicide prevention plan may identify aspects of the school environment that, if altered, could reduce the risk of suicidal ideation and suicide attempts. These alterations may need to be included in the school development/improvement plan.	
School ethos	Consider the ethos of the school/college community in its approach, language and responses to mental health. This may involve working with specific pupils or staff members.	

Appendix 6 provides a flowchart of the pathway.





Further information, guidance and support:

Herefordshire and Worcestershire CAMHS

Mental health help to children, young people and their families | School Mental Health (hacw.nhs.uk)

WCF Educational Psychology Service

<u>Educational Psychology | Worcestershire County Council</u> <u>Email edpsych@worcschildrenfirst.org.uk</u>

West Midlands (Worcestershire) Regional Childrens Safeguarding Procedures Guidance

Relating to self-harm and suicide: 2.11 Self-harm and suicidal behaviour | West Midlands Safeguarding Children Group (procedures.org.uk)

PAPYRUS

Prevention of young suicide and support for those affected by suicide

Papyrus UK Suicide Prevention | Prevention of Young Suicide (papyrus-uk.org)

Bereaved by Suicide Services

A free and confidential signposting service for those bereaved and affected by suicide is provided in Worcestershire by Victim Support.

Support for those who have been bereaved or affected by suicide | Worcestershire County Council 0800 068 41 41

Suicide Bereavement UK

Resources for those bereaved or affected by suicide and for the professionals supporting them. Suicide Bereavement UK

Samaritans

The Samaritans Step-by-Step programme supports schools to recover from a suspected or attempted suicide: Samaritans Step-by-Step programme Contact Us | Samaritans

116 123

Trauma Council Guidance: Informed by research and best practice, these resources support educational communities in providing a comprehensive and compassionate response to traumatic events that affect children and young people in their care. <u>Trauma Council Guidance</u>

References

Identifying and responding to suicide clusters (publishing.service.gov.uk)





Acknowledgements

With thanks to Halton District Council Public Health Team for their collaborative approach to this topic.





Appendix 1: Data/Information Sharing

The GDPR and Data Protection Act 2018 do not prevent, or limit, the sharing of information for the purposes of keeping children and young people safe.

To effectively share information:

- All practitioners should be confident of the processing conditions, which allow them to store, and share, the information that they need to carry out their safeguarding role. Information which is relevant to safeguarding will often be data which is considered 'special category personal data' meaning it is sensitive and personal.
- Where practitioners need to share special category personal data, they should be aware that the Data Protection Act 2018 includes 'safeguarding of children and individuals at risk' as a condition that allows practitioners to share information without consent.
- Information can be shared legally without consent, if a practitioner is unable to or cannot be reasonably expected to gain consent from the individual, or if to gain consent could place a child at risk.
- Relevant personal information can be shared lawfully if it is to keep a child or individual at risk safe from neglect or physical, emotional or mental harm, or if it is protecting their physical, mental or emotional well-being.





Appendix 2: Safety Plan: Guidance and Blank Template

Guidance template

Name:	
Tutor Group:	
Date of Plan:	Date completed
Completed with (parents, carers/other):	

If not completed with parents/carers, reasons:

Adults who are:

Aware of this plan:

Named in this plan:

Trusted adults in school:

Adjustments

Consider working up to full time hours, academic assessment adjustments, permission to leave class to go to designated safe spaces/person within school/college.

Identify specific staff within the school/college to whom student can access; ideally two should be identified to ensure availability.

School/college's physical environment that may require adjustments.

Alterations to class allocation and address issues with other young people who may present risks mentally and physically.

How will I know when I need to use my safety plan?

Consider thoughts, feelings, behaviours

What are my coping strategies to help me with my thoughts and feelings?

e.g., What has helped before? What will help in school? Listening to music, going for a walk with someone, talking to others, going to safe space with staff, guided self-help, being active/distraction

What resources can I access in school/college to help me with these feelings?

e.g., books / worksheets advised to use. Recommended websites; Bestie, Young Minds, Good Thinking, Rise Above, Kooth, WOO 85258 https://www.camhsbestie.co.uk/ https://youngminds.org.uk/https://www.good-thinking.uk/ https://riseabove.org.uk/ https://www.kooth.com/ Access to Student Support Services, selected teacher(s).

What can my trusted adult do to help me?





e.g., Talk to me, remind me of my self sooth box, worry monster and wellbeing box, ask me about my distraction preferences, go for a walk and talk.

What professionals/adults can I contact?

e.g., Teacher/School/Parent/Carer/Social worker/MHTiS/ GP

I can also access help from:

NHS 111

From April 2024, call 111 for 24/7 access to mental health support

Worcestershire urgent mental health helpline: (24 hrs).

Where a trained professional will be available to take your call

Kooth: https://www.kooth.com/ for online counselling (until 10pm)

Make an appointment with your GP, phone number:

Supportive friends:

Family Members:

Useful websites:

https://youngminds.org.uk/ https://www.barnardos.org.uk/ https://www.samaritans.org/

Useful Apps: Headspace / Self-help App for the Mind (SAM) / Breathe

Other:

For more urgent medical advice or attention:

- 1. Call NHS 111 (Option 2) and describe the presenting symptoms
- 2. Go to your nearest accident and emergency department or
- 3. Dial 999 for an ambulance, if you're worried that your symptoms are getting worse or advised to so by NHS 111





Blank template for use:

Name:	
Tutor Group:	
Date of Plan:	
Completed with (parents, carers,	/other):
If not completed with parents/ca	arers, reasons:
Adults who are:	
Aware of this plan:	
Named in this plan:	
Trusted adults in school:	
Adjustments	
How will I know when I need to	use my safety plan?
What are my coping strategies to	help me with my thoughts and feelings?
What resources can I access in so	chool/college to help me with these feelings?
What can my trusted adult do to	help me?
,	200 P 100 P
What professionals/adults can I	contact?





I can also access help from:

NHS 111

From April 2024, call 111 for 24/7 access to mental health support

Worcestershire urgent mental health helpline: 0808 196 9127 (24 hrs).

Where a trained professional will be available to take your call

Kooth: https://www.kooth.com/ for online counselling (until 10pm)

Make an appointment with your GP, phone number:

Supportive friends:

Family Members:

Useful websites:

https://youngminds.org.uk/ https://www.barnardos.org.uk/ https://www.samaritans.org/

Useful Apps: Headspace / Self-help App for the Mind (SAM) /

Breathe

Other:

For more urgent medical advice or attention:

- 4. Call NHS 111 and describe the presenting symptoms
- 5. Go to your nearest accident and emergency department or
- 6. Dial 999 for an ambulance, if you're worried that your symptoms are getting worse or advised to so by NHS 111

Access a copy here:

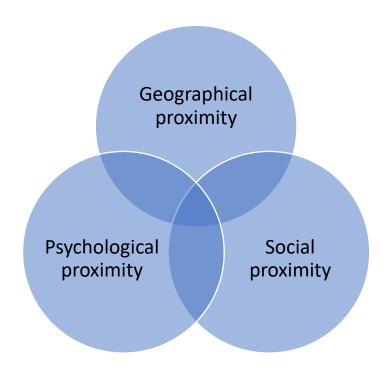






Appendix 3: Circles of Vulnerability

The Circles of Vulnerability tool is a way of identifying which individuals or groups may require additional support or monitoring due to multiple risk factors. While originally designed for use in the case of suicide, or critical incidents, it remains a useful tool for structuring thinking after a suicide attempt.



First, consider who was geographically or physically close to the young person at the time or shortly after they made the suicide attempt (if an incident happened for example on school grounds), or who lives close to the young person. Consider home educated young people and those out of school.

Psychological proximity refers to those who relate to the young person through cultural connections, shared experiences (e.g. fellow victims of bullying, team members, classmates, etc.) or the perception of having similar characteristics. Consider young people who may have a family member or friend who has died by suicide.

Social proximity refers to the relationships someone has with the young person who made the attempt. This can include family, friends, social circles, or a romantic interest.

The more circles an individual is in, the more likely it is that they are at increased risk of vulnerability and may require additional support.





Appendix 4: Spreadsheet to monitor patterns of attempts

This template can be used by the school/college to monitor suicide attempts and increased self-harm.

Ensure that this document:

- remains confidential
- has **no names** included
- is **password protected** and
- data sharing agreements are checked and agreed before sharing with outside agencies.

All recipients must be asked to delete all copies at the end of any SPAG meetings unless agreed otherwise by the school.





Appendix 5: Terms of Reference and Agenda for a Suicide Postvention Action Group (SPAG)

Terms of Reference

Aim

A response to prevent a further suicide attempt or a cluster of attempts from developing. To minimise the longer term mental and emotional distress, and the impact, that arises from a suicide attempt.

Objectives

- To decide what action needs to be taken to minimise the chance of further suicide attempts
 particularly protecting vulnerable & impressionable individuals.
- To oversee and co-ordinate the action needed to support young people impacted by the suicide attempts of a pupil (or staff member).
- To co-ordinate this response across agencies
- To escalate concerns to Public Health on rts@worcestershire.gov.uk (Real Time Surveillance) or telephone 01905 768053, ask for the Suicide Prevention Team, Public Health.

Membership

- Headteacher (Chair)
- School DSL(s)
- Senior Mental Health Lead
- SENCO
- WCF Safeguarding lead/rep
- School based mental health support
- Educational Psychologist
- CAMHS
- School Nurse
- WEST/Act on It Rep if applicable
- Note taker

If a possible cluster of attempted suicide or self-harm is identified as a result of using the tool in Appendix 2, contact rts@worcestershire.gov.uk for advice. A Public Health rep should then be invited to join the SPAG and it may be appropriate to also invite reps from the following teams to the SPAG:

- WCF Comms
- Primary Care rep e.g. GP

Frequency of meetings

This will be dependent on the planned action and timescales. It is suggested that there are at least two meetings, initially more frequently.

Notes

Action notes will be kept and circulated after each meeting.

Accountability

- The Headteacher is responsible for initiating the SPAG but all members are expected to respond and attend meetings.
- The SPAG will report on action taken (maintaining confidentiality) to the Board of Governors and WCF/WCC Safeguarding Lead.



XXXX School Suicide Prevention Action Group Agenda

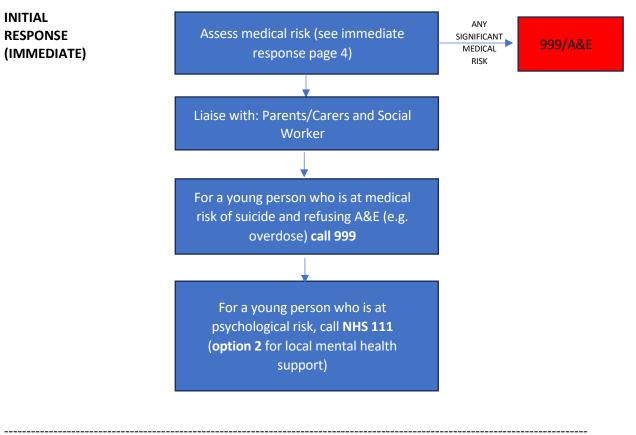
Date: Time:

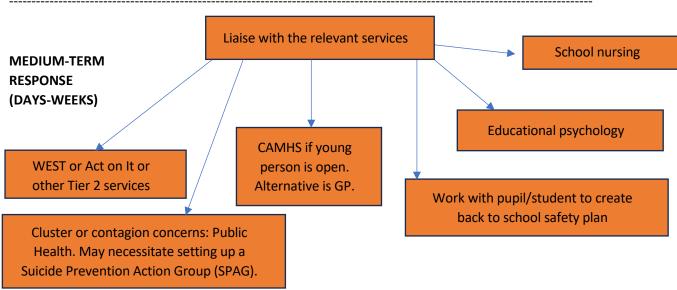
Online joining details

Introductions		Chair / All
Meeting confidentiality statement	Information shared by agency representatives within the remit of this meeting is strictly confidential and must not be disclosed to third parties without the agreement of the partners and the consent of the Chair of the meeting.	
	Information will be shared on a 'need to know' basis and a clear distinction should be made between fact and opinion. If there is any doubt about its accuracy this should be stated.	
	All agencies should ensure that the minutes of the meeting are treated as confidential material and that they are retained in an appropriately secure manner.	
	By attending this meeting we, as participants, agree to abide by these principles.	
	Local situation	
Background	 Context around the attempted suicide Report on monitoring of CYP who have expressed suicidal ideation, suicide attempts, unexpected or more intensive self-harm (Appendix 2 record) 	School Safeguarding Lead
	 Discussions re: evidence of contagion Confirmation about information sharing and password protection 	All Headteacher
Action taken to date and action needed	 School Safeguarding (School/College) Safeguarding (WCF) SENCO Education Psychology CAMHS School Nurse (Public Health) 	All
Comms	,	All
Outstanding conc	erns and actions needed	All
	Wider-system issues	
	wide response/support needed/change e.g. process change, wider not with the wider surveillance needs, additional monitoring.	All
•	preventative action and who to share this with.	All
AOB		All
Next meeting		



Appendix 6: Suicide attempt pathway







LONGER-TERM RESPONSE (WEEKS-MONTHS)

Continue to liaise with all services around the young person / safety planning

Review response Record and train staff. Review Monitor for school/college contagion, suicide arrange prevention preventative policy. Add action and raise action to school concerns. development plan.

