



WyreForestSchool

Suicide Safer policy

Date of last review:	2024	Review period:	Every 2 Years
Date of next review:	2026	Written by:	Alison Hopkins
Type of policy:	Non-statutory	Committee:	
Signature:			

Statement of Purpose

Here at Wyre Forest School, including Russell House, we recognise that suicide is the leading cause of death in young people in the UK and that school plays a vital role in helping to prevent young suicide.

We want to ensure that our pupils and residents are as suicide-safe as possible and that our governors, parents/carers, and staff are aware of our commitment to be a suicide safer community.

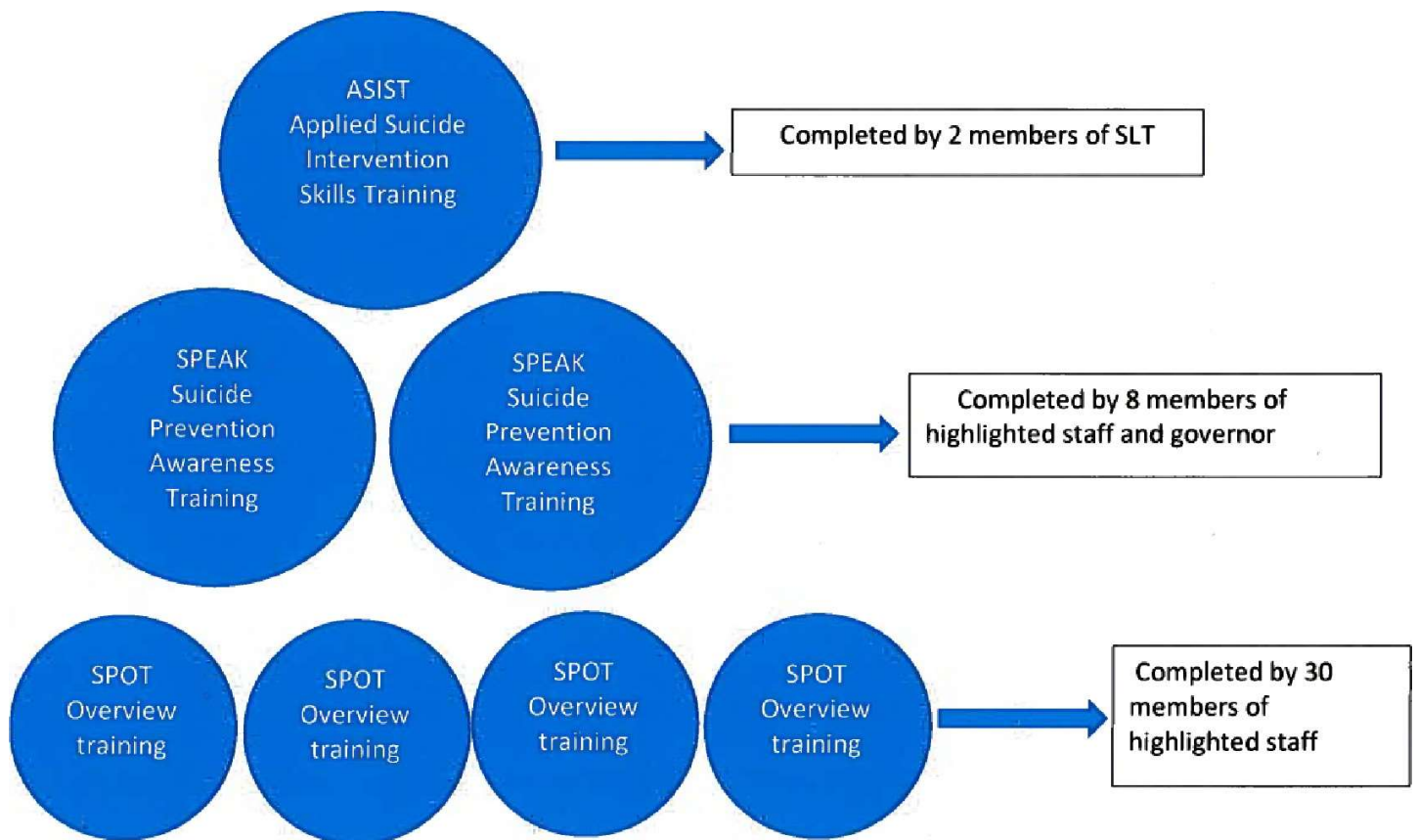
Our beliefs about suicide and contributory factors.

- We acknowledge that thoughts of suicide are common among young people, and that pupils with additional needs and learning difficulties are not exempt from these thoughts and feelings.
- We believe that every suicide is a tragedy. There are a number of contributory factors surrounding a suicide and the reasons are often complex and individual to that person. However, we believe that there are lessons that may be learned from each death that may help prevent future deaths.
- At Wyre Forest School we recognise that the stigma surrounding suicide and mental illness can be both a barrier to seeking help and a barrier to offering help. Wyre Forest School is dedicated to tackling suicide stigma. In our language and in our working relationships, we will promote open, sensitive talk and communication that does not stigmatise and perpetuate taboos.
- As both a school and residential community, we recognise that our young people may seek out someone who they trust with their concerns and worries. We want to facilitate the timely reporting of any risks or concerns through our online reporting system, CPOMS.

- We want to support our pupils, usually working in partnership with family, caregivers, external agencies and other professionals where this may enhance suicide-safety.
- We know that a pupil who is suicidal may find it very difficult to make their feelings known and speak openly about suicide. At Wyre Forest School, we will provide trained staff who are able to identify when a pupil may be struggling with thoughts of suicide
- When we identify a pupil at risk of suicide and decide to engage external services, such as a hospital A&E department or a CAMHS crisis centre, we will have explicit guidelines on the pathways that apply. Those guidelines will be developed in co-operation with the external services and will be reviewed regularly as the provision of such services change over time.
- Preventing suicidal thoughts is a multi-faceted activity which includes building resilience and ensuring early intervention and support for pupils experiencing poor mental health. However, not everyone who has thoughts of suicide has a diagnosable mental health problem, and not everyone with a mental health diagnosis feels suicidal.

The Role of Staff Training in developing a suicide-safer school

It is important that our entire Wyre Forest School community, including Russell House, nurtures an attitude around the subject of suicide which helps shatter the stigma around it. A training programme of raising staff awareness is an important aspect of this and has been explicitly addressed in our CPD programme in 2022. This will be reviewed on a bi-annual basis by the Senior Leadership Team, and will be delivered by PAPYRUS, the leading voice and charitable organisation in the UK for Suicide Prevention in Young people.



The Role of the Curriculum in developing a suicide- safer school

The 'curriculum' at WES starts the minute the pupils arrive on transport or at the front gate. This includes staff knowing the pupils well and continuously monitoring pupil well-being. Therefore, any time a child appears low or different, would be picked up and noticed by a range of staff, beyond the class team. Pupils might be encouraged to chat to their class team and the information would be shared to ensure any issues or concerns are supported.

We also recognise the importance of the planned PSHCE curriculum in supporting our learners to develop a greater awareness of mental health,

The Mental Health Policy and our PSHCE Curriculum is continuously being developed and forms a major part in making Wyre Forest school a suicide safer community. so, although suicide awareness is not explicitly taught, our pupils in Pathways 3 and 4 are given planned opportunities to learn about mental wellbeing and how to access support both in and out of school.

We also respond to individual pupil need/circumstance and provide additional interventions linked to mental health when required.

Suicide Intervention Team at Wvre Forest School

At Wyre Forest school we recognise the need for a team of skilled staff to be actively engaged in suicide prevention, intervention and postvention.

There is a designated Suicide Intervention team whose members understand this policy and have undertaken either ASIST or SP-EAK training. Our Suicide Intervention team ensures that there are a core group of trained staff present in school or at Russell House at any one time to deal with any incidents.

The Suicide Intervention Team meet to address and review policy and procedure, training requirements, and discuss any specific pupil concerns.

Suicide Postvention Team at Wvre Forest School

Wyre Forest School will also have a smaller suicide postvention team whose role it is to respond in the event of a suicide. This was established in June 2022 and will meet in response to an incident.

Each member of the Suicide postvention team will have designated responsibilities, assigned by the Headteacher, including;

- family liaison
- pupil support,
- communication with external agencies eg Ofsted, the Local Authority etc
- media coverage

Appendix 1 : Response/Protocol for Pupil expressing thoughts of suicide

Staff member to alert ASIST trained member of safeguarding team/SLT
If unavailable report to SPEAK trained member of safeguarding team/SLT
They assess and agree immediate next steps

Where appropriate, ASIST trained staff member to meet with pupil as an immediate safety intervention. "Safe for now" plan to be agreed and implemented.

Where appropriate, discuss safe for now plan with parent/carer and ensure emergency appointment is undertaken ie hospital or CAMHS

If in school hours, school nurse, Emma Zinzan, informed (07562624353)
Sam Jauncey, line manager, informed if Emma unavailable (07808898525)

Emergency Referral to CAMHS (01905 768300) Referral form to be completed by GP or school, depending on circumstance

Contact any support services already involved with young person eg Social worker/Family Support Worker. Refer to Family Front Door (01905 822666) if required

Inform classteacher and agree how wellbeing needs can be developed and met through curriculum and whether additional intervention is required

Remain in contact with pupil and parent/carers. Signpost them to any external agency support (see Appendix.)

Appendix 2: Response/Protocol for pupil that has attempted suicide

This protocol will be agreed, and adapted where necessary, by Headteacher, Head of Care for each individual case.

These actions should be completed swiftly and take priority.

If an attempt of suicide has been made by a student:
Assess risk of immediate danger- administer initial response first aid or ligature cutting(see appendix)
Contact emergency services
Inform Headteacher/SLT/Head of Care (if at Russell House)
Member of staff to remain with the young person to monitor and keep "Safe for Now"
Inform waking night staff/to action monitoring throughout the night if situation occurs at Russell House and the pupil remains in the setting
Contact parents/carers

Emergency Urgent Advice from CAMHS crisis team
01905 681915
01905 763333

Follow up actions as Appendix 1

Appendix 3: Ligature Cutter Guidelines

There are 6 Ligature Cutting kits at Wyre Forest School, that are to be used in the case of attempted asphyxiation by a pupil or staff member.

They are stored in red bumbags, so as to be distinct from our first aid kits that are in green bumbags

Each kit contains the following;

- 2x pairs Gimbel Gloves (1 medium, 1 large)
- 2x in date Padded Bandages (1 medium, 1 large)
- 1x Seatbelt Cutter (Red)
- 1x Ligature Cutter (in black pouch)
- 1x CPR mask
- 1 xLarge Envelope (for placement of used strangulation device)
- 1xWaste bag (for placement of used bandages)
- 1x Daily Checklist

2Kits are kept in the Office at Russell House in a locked cupboard 1 Kit is kept with the Forest School Leader

3Kits are kept in locked cupboards in appointed classrooms where specific pupils have been highlighted as at risk at any point in their school journey at Wyre Forest.

A member of staff from each team is responsible for checking the Kit every morning and signing the daily checklist.

The following guidance is taken directly from the Positive Behaviour Team Ligature Cutter Guidelines, and training is undertaken by staff on an tannual basis, lead by PBT.

1. Guidelines for the storage of ligature cutters

1.1 Introduction These guidelines should be read in conjunction with policies and guidelines relating to Care and Control: Team Teach, manual handling and infection control.

1.2 Equipment Specification and Maintenance

- a. The ligature cutters and seat belt cutters are purpose specific and single use items. They must not be used for any purpose

other than dealing with emergency situations involving ligatures.

- b. Ligature cutters have a hooked metal blade that folds into a plastic covered handle. When unfolded it locks into an open position for use.
- c. The metal part is designed so that the outer edges are smooth and blunt with only the inner edge of the hook sharpened.
- d. Once used it must be replaced with an unused cutter or a resharpened one.
- e. Seat belt ligature cutters are rectangular with a gap down the middle, the outer edge is smooth and blunt. In between the gap at the base is a blade which is sharpened. The gap is only wide enough to fit the narrowest part of a seat belt or an object of similar width into,
- f. Once used, it must be disposed of.

1.3 Re-sharpening of Ligature Cutters

- a. Used cutters should be placed in a jiffy envelope along with a request for sharpening, and then sealed.
- b. This request should be copied and remain in the home for auditing purposes.
- c. Ligature cutters are to be sent recorded delivery only to:

Barrington International
The Dower House Boyton
Warminster
Wiltshire
BA12 OSS
Tel: 01985 844959

1.4 Availability and Storage

- a. Ligature cutters are stored in a locked cabinet in the office of each setting, as part of the ligature emergency kits.
- b. All staff should be made aware of the location of the ligature cutters as part of the induction to the setting.
- c. A ligature cutter should only be used if gloves are available (preferably stab resistant) and for this reason, both should be always kept together. If for any exceptional reason the gloves are missing, the ligature cutter must be used with extreme caution.

- d. It is the responsibility of the shift leader/SLT to ensure that ligature kits are fully operational prior to handing over the shift responsibilities, this will be indicated on the daily ocheck list (see appendix 1).

2. Guidelines for the use of ligature cutters

2.1 Training

- a. Key staff have received training regarding the use of the ligature cutter and the ligature emergency kit as part of training, which includes suspended strangulation (hanging) and ligature (unsuspended).
- b. All relevant staff must familiarise themselves with their own local arrangements regarding access, storage and replacement of the cutters. This is particularly important where staff have to work for any periods in unfamiliar areas.

2.2 Use of ligature cutters in practice Use of cutters:

- a. To optimise the use of the cutter, the rounded, blunt end should be initially place flat against the person's body so that it can slide under the ligature.
- b. Once the ligature has been located between the person's body and the ligature material, the cutter should be turned so that the hooked blade faces the ligature material i.e. away from the person.
- c. At this point staff should pull away from the person's body, using a rocking motion, in order to allow the ligature cutter to cut through the ligature material.
- d. Staff should be aware that a ligature cutter is likely to be most effective when used to cut soft, thin materials e.g. shoe laces, string, linen.
- e. Whenever possible the knot should not be cut.
- f. Staff should always keep the cut ligature material for later inspection. The ligature material should be placed in an envelope, signed and dated and sealed by staff.
- g. Staff should immediately contact their line manager or senior member of staff for further advice.
- h. A report should be completed as soon as possible. i.A schedule 5 notification should be completed as soon as possible (Children's Homes).

j. Seat belt cutters: the seat belt, at its narrowest part, should be slid into the gap towards the blade, ensuring the principles of 2.2c are adopted.

Appendix 4: Sources of Support

- Hopeline UK Tel: 0800 068 4141 Txt: 07786209697

A Helpline Service run by Papyrus. Open 10am-1 Opm 7 days a week

- CAMHS Mental Health 24 Hour Helpline Tel: 0808 196 9127

Open 24 hours a day 365 days a year

- Samaritans Tel: 116 123

- Text SHOUT to 85258 Text YM if under 19

Childline Tel: **0800 1111**

