Suicide liaison service

For those who are left behind: Suicide Postvention Plan in the Workplace.
Sudden & Traumatic Loss

Any bereavement can be difficult to come to terms with. An unexpected, traumatic or violent death can be particularly hard to accept.

- 2015-2017: 71 average deaths/yr by Suicide in Cornwall/IOS
- 74% = MALES; 26% = FEMALES
- Majority Males: aged 47-60 yrs; followed by: aged 33-46 yrs
- Suicide rate in same period SW: 10.6 deaths per 100,000
- England had 9.6 deaths per 100,000 for same period
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The Impact of Traumatic Death: the Emotional Tsunami

Devastation
Shock
Disbelief
Fear
Anger
The Aftermath of a Traumatic Death

• A deep sense of fear/dread: the world is no longer safe.
• Loss of purpose & meaning to life.
• Loss of previously held belief systems.
What do people affected by suicide experience?

- Unanswered questions: *Why? What could I have done to prevent it?*
- Trauma (discovering the body) or secondary trauma when told details of the death.
- An overwhelming sense of rejection – *why didn’t they come to me for help; or why did they leave me?*
- Anger, blame….blaming themselves or others.
- Regret, guilt, shame, sadness, despair.
- Detachment.
- Loss of confidence.
- Feeling socially isolated and alone.
- Stigmatised by friends and others they meet, *including some Professionals.*
How the bereaved might also be affected

Secondary Losses

- Grief
- Loss of Income
- Loss of Support System
- Loss of Financial Security
- Loss of Confidence
- Loss of Faith
- Loss of Identity
- Loss of Dreams for the Future

Primary Loss of Person Who Died

http://whatsyourgrief.com
BEREAVEMENT BY SUICIDE AS A RISK FACTOR FOR SUICIDE:

“Bereavement by suicide is a specific risk factor for suicide attempts among young bereaved adults, whether related to the deceased or not. Suicide risk assessment of young adults should involve screening for a history of suicide in blood relatives, non-blood relatives and friends.”

Alexandra L Pitman, David P J Osborn, Khadija Rantell, Michael B King

BMJ Open (January 2016)
• There is an increase in risk of suicide of people bereaved by the suicide of their partners.
• There is an increase in admission to psychiatric care for mothers who have lost an adult child to suicide.
• There is an increase in Depression amongst those who have lost a parent to suicide.

The Lancet Psychiatry, 2 May 2014
Clinical Trauma

• The loss of a loved one to suicide, often produces some degree of clinical trauma symptoms in the survivors, even if they do not reach full presentation level of post-traumatic stress disorder (PTSD).

• These symptoms can include: an intrusive reliving of the dying process and the death scene, along with rumination about the amount of mental and physical suffering, experienced by the deceased, just before the suicide.

Principles of Grief Counselling with Adult Survivors
John R. Jordan (2011)
The “ripple effect” of suicide

The immediate family: child/siblings/parents/grandparents/partner

Friends
Neighbours
Colleagues
Teachers

GPs, A&E staff
Ambulance Therapists

outlook:) SOUTH WEST LLP

Innovation in psychological services

Cornwall and Isles of Scilly
Suicide Bereavement Support (Postvention) in the Workplace

*Postvention* is psychological first aid, crisis intervention, and other support offered after a suicide; to affected individuals or the workplace as a whole; to alleviate possible negative effects of the event.
The suicide of a colleague can have a profound emotional effect in the workplace, and it's important for you and your co-workers to support each other. Some people may struggle with guilt and unanswered questions about what happened and what more they could have done to help.

www.beyondblue.org.au
Postvention Plan (1.)

Immediate Response:

1. Contain the crisis: action plan.
2. Offer support to the family whilst respecting their privacy and needs.
3. Ensure all staff are informed as soon as possible to pre-empt notification through social media: act quickly.
4. Identify vulnerable staff and offer support.
5. Contact Outlook South West’s Suicide Liaison Service (01208 871414) for further advice and support.
Postvention Plan (2.)

Short Term: 2 weeks post death

1. Make provision for attendance at the funeral for managers/colleagues.
2. Provide comfort and support to staff who need it, and promote healthy grieving & time-out.
3. Identify and link affected employees to appropriate EAP provision or local support services.
4. Restore optimum functioning.
Postvention Plan (3.)

Longer Term:

1. Prepare for anniversaries to honour the memory of the deceased and other milestone dates.
2. Transition postvention to suicide prevention.
3. Provide leadership to develop a Healthy Workplace environment; Staff Suicide 1st aider.
4. Identify key staff to undertake ASIST or SafeTalk training to promote a suicide safer workplace.
How can we help the bereaved?

**Listening**
Respecting each individual’s way of coping with the loss.
Allow the bereaved to move forward in their own way.
Providing practical and emotional support if needed/signposting to services that can help.
Current thinking is that therapy should not be offered immediately following a traumatic death.
Help is at Hand: support after someone may have died by suicide; and Finding the Words.

Public Health England
Can I mention suicide?

- If you are concerned about an employee or colleague, be assured that it’s an “urban myth” that asking someone if they have thoughts of suicide, will plant the idea in their head.

- In fact, if someone is feeling that low, hearing the word, can bring some relief and reality to their situation and permission to talk more. If you are concerned, seek advice from a local mental health service eg: OUTLOOK; GP and/or call the Samaritans (116 123)
Support with Inquests

• The majority of inquests are held within 6 months of the death.
• Where circumstances are complex, it can take up to 3 years to reach an inquest.
• Avoid pre-judging the outcome of an inquest.
• We provide support with the inquest process.
• Our primary role is to support next-of-kin at inquests.
• We access legal advice where necessary.
• We can attend inquests when they take place in Cornwall to provide emotional support.
• We can advise employers, if necessary, about the inquest process.
Contact:

Penn Petchey Suicide Liaison Service (East & North Cornwall).
email:  Penny.petchey@nhs.net
Anne.embury@nhs.net (SLS Lead)
Outlook South West
On: 01208 871414 (9 am- 1 pm wk days)
SELF-CARE

- Importance of Self-Care Activities:
- Checking-in with your own wellbeing.
- Think about: What are you going to do today; to address your own self-care?