

Providing support for staff after a death by suicide

This section focuses on the competences associated with supporting individuals and teams after a person has died by suicide. Separate sections detail competences associated with the formal inquiry that constitutes an organisational response to suicide.

Because the response to suicide is as much institutional as individual, the competences in this section refer both to the response expected of an organisation and the individual competences of those offering support to staff.

An ability to ensure that all relevant staff are informed after a suicide and that support is offered in a timely manner

An ability to ensure that working arrangements are adjusted so that all staff who wish to attend meetings are able to do so

An ability to identify a moderator (a neutral expert with experience and expertise in working with suicide postvention, with either individuals or groups)

An ability for the moderator to establish boundaries to any discussions and ensure that there is clarity about confidentiality

Working with individuals and teams

An ability to provide information about the 'normal' consequences of a suicide

An ability to help staff discuss their emotional reactions to the death, and to:

identify and discuss the breadth of emotions evoked by a suicide (e.g. sorrow, guilt, anger, disappointment, compassion, relief)

identify and discuss emotions related to their sense of the role they played in the person's treatment (e.g. a sense of failure, incompetence, fear, shame)

discuss the ways in which they are managing feelings about the death (e.g. denial of feelings or feeling overwhelmed)

discuss (and so recognise) limits to the control that they had over the person's behaviour

recognise that (at least in the short term) the death is likely to affect their work and their sense of professional identity

verbalise fears of disciplinary or legal action

An ability to help staff reconstruct the known circumstances and behaviour of the person before suicide, and to discuss:

how they understand the person's decision to die

their sense of involvement with the person and their view of themselves after the suicide (including, for example, potential feelings of guilt or a sense of failure)

accusations of blame towards individuals or groups seen as responsible for the person's welfare

an ability to contain accusations of blame against others (e.g. by distinguishing between feelings of guilt and actual responsibility for the person)

Where a staff member has found the body, an ability to organise or provide appropriate support (e.g. where there is evidence of trauma)

Working with teams

An ability to draw on knowledge that the reactions of different members of the team will vary and be influenced by their:

- relationship with the person
- understanding and knowledge of the person
- understanding and anticipation of the event
- personal traits and life experience
- professional experience

An ability to draw on knowledge that because different team members will vary in the extent and depth of their reactions, the support offered (to the team as a whole and to individual members) needs to reflect this, for example:

- by offering individual as well as group support
- by being sensitive to what each team member knows, and what level of detail they need to know (e.g. if detailing the manner of the death is potentially traumatising, or where the family has indicated a wish to restrict information about the manner of death)

An ability to extend support to staff (such as administrative staff or cleaners) who had no formal role in caring for the person who has died, but whose duties brought them into regular contact with them