



**UNIVERSITY
OF HULL**

Suicide Mitigation Policy

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Suicide Mitigation Policy

Table of Contents

1.	Vision Statement	3
	Scope.....	3
2.	Aims	3
3.	Priorities and Strategic Objectives.....	4
4.	Definitions.....	4
5.	Use of language	5
6.	National Context.....	5
7.	Local Context	7
8.	University of Hull Values.....	9
9.	Embed a whole-university approach towards mental health and suicide mitigation into the university culture and environment.	9
10.	Identify individuals who may be at increased risk.....	10
11.	Ensure ease of access to support	12
12.	Provide and promote awareness of available support.....	13
13.	Creating a community of awareness and being alert to warning signs and vulnerabilities.....	14
14.	Ensure student-facing staff receive adequate training	14
15.	Information sharing	15
16.	Reduce means.....	15
17.	Build and maintain solid working relationships with external care agencies	15
18.	Postvention information and procedures	16
19.	Postvention support considerations.....	16

Suicide Mitigation Policy

A) Introduction

1. Vision Statement

- 1.1 The University of Hull aims to provide a safe community and ensure every student and member of staff can access accurate information and sources of support to enable them to flourish and achieve success.
- 1.2 This policy has been developed in accordance with Universities UK (2018) Suicide Safer Universities guidance (1) and the principles of good practice set out in The University Mental Health Charter Framework (2). It recognises that the factors which predict a heightened risk of suicide in any person are complex and not all of these may be observable. Despite this we know universities can implement effective practice, processes and training to alert and assess the risk of suicide in their staff and students, know how to engage and respond to someone who is expressing suicidal ideas or appears to be at risk of suicide, and understand how and when to actively refer them to appropriate sources of support.
- 1.3 The policy sets out in detail how we plan to prevent suicide amongst our student and staff community and what interventions we will implement when risks are identified. It also sets out the steps we will take afterwards if a death does occur where the cause appears to be or is reported to us as one that may be later identified as suicide (when reviewed by a coroner). It includes guidance and an appendix of pathways to support within and external to the university.

A Scope

- This policy applies to anyone who is currently employed by the University of Hull and all registered students of the University of Hull, and (aligning with the Student Death Policy to make sure postvention support is available when most needed) any person who is within one year of the end of their most recent period of registration as a student. This includes any person who:
 - Is enrolled on a course delivered by The University of Hull including Hull Online
 - Is in between enrolments
 - Has suspended their studies
 - Has completed their course but not yet graduated
 - Is an Alumni who has graduated within the proceeding one year
 - Has withdrawn from their studies within the proceeding one year
- 1.4 This policy does not account for collaborative provision students enrolled on University of Hull validated programmes at any of our partner institutions, or their employees. These staff and students will instead be covered by the policy of the further education institution (FEI) or higher education institution (HEI) where they are employed or are undertaking their studies.

2. Aims

- 2.1 The aim of this policy is to provide a framework which addresses and supports three key areas of practice:

1. Suicide awareness and prevention
2. Intervention
3. Postvention and response to a student or staff death by suicide

3. Priorities and Strategic Objectives

- The strengthening of robust student and staff at risk processes and procedures
- The implementation of a robust training framework.
- The establishment and training of suicide response and postvention teams
- The development and review of student and staff death policies and procedures.
- The strengthening of links and relationships with key organisations within the wider community.

4. Definitions

- 4.1 Mental health is an integral part of wellbeing which also includes physical and social wellbeing. Optimum wellbeing is defined by the ability of an individual to fully exercise their cognitive, emotional, physical and social powers, enabling them to flourish (2).
- 4.2 A whole university approach to mental health and wellbeing “must include both adequately resourced, effective and accessible mental health services and proactive interventions. It must provide an environment and culture that reduces poor mental health, as well as supporting good mental health, and facilitating staff and students to develop insight, understanding and skills to manage and maintain their own wellbeing” (2).
- 4.3 A student is defined as a person registered at the University of Hull who is completing a course that leads to the award of a qualification or (academic) credit.
- 4.4 A member of staff is defined as any employee of the University of Hull.
- 4.5 Mental illness is “a condition and experience, involving thoughts, feelings, symptoms and/or behaviours, that causes distress and reduces functioning, impacting negatively on an individual’s day to day experience, and which may receive or be eligible to receive a clinical diagnosis” (2).
- 4.6 Self-harm is “an act with non-fatal outcome in which an individual deliberately initiates a non-habitual behaviour, that without intervention from others will cause self-harm, or deliberately ingests a substance in excess of the prescribed or generally recognised therapeutic dosage, and which is aimed at realising changes that the person desires via the actual or expected physical consequences” (3)
- 4.7 In the United Kingdom (UK) the definition of suicide is “a death where the underlying cause was intentional self-harm, for those aged 10 years and over, and deaths where the underlying cause was an event of undetermined intent for those aged 15 years and over”(4)
- 4.8 The location of the death of any member of our university community determines what happens next and what level of involvement there will be from the University. This is because the death may have happened on campus or off campus, in university accommodation or at home or another location and the person could have been engaged in university activity at the time of their death (for example on a field trip, on a placement, participating in study abroad, at a conference or meeting) or not.
- 4.9 When someone dies the death cannot be confirmed as a suicide until after the event as the decision (in England and Wales and Northern Ireland) is made by a Coroner. In Scotland

unexpected deaths are investigated by the Procurator Fiscal. Whenever there is a death of a student the Student Death Policy must be implemented and followed. Where the deceased is a staff member employed by the University the direct line manager manages the process with the support of Human Resources and the Occupational Health department.

5. Use of language

- 5.1 The use of appropriate and sensitive language when talking about suicide is vital to not perpetuate stigma or increase distress for those involved. Throughout this document and in all subsequent documentation the use of the following phrases will be used/avoided:

Phrases to use	Phrases to avoid	Why?
Died by suicide/taken one's own life	Commit suicide	To avoid the implication that suicide is criminal.
Suicide attempt	Unsuccessful suicide	To avoid presenting suicide as a desired outcome.
Express suicidal feelings/ideation	Cry for help	To avoid the implication that experiencing suicidal ideation is 'weak'.
Concerning rates of suicide	Suicide epidemic/craze	To avoid sensationalism/inaccuracy.

Adapted from the Samaritan's online resource *Myths about Suicide* (5)

6. National Context

- 6.1 Suicides in England and Wales are compiled and reported by the Office for National Statistics using information supplied from coroners (4). In 2020 there were 5,224 suicides registered in England and Wales which equates to a standardised mortality rate of 10 deaths by suicide for every 100,000 people in the general population (6). The highest suicide rates were reported in the 45–49-year age group, and the lowest in the 10–24-year age group (6). For young people (in the 15–24-year age group), suicide remains one of the leading causes of death (1). Despite the suicide rates for young adults at university being significantly lower than the general population, 95 suicide deaths were recorded among higher education students in England and Wales between 2016-2017 (7), which equates to one student taking their own life every four days.
- 6.2 Observational data from real time surveillance of suspected suicides in England during and immediately after the first Covid-19 lockdown in 2020 did not identify a rise in suicide rates but this was early in the pandemic and did not include an analysis of demographic data that included education or employment status (8).
- 6.3 Identifying the factors that are associated with suicidal ideation is a crucial component in understanding and protecting students and staff, and there are many factors which may contribute to an increased risk of suicide. For example, many suicides can be linked to an existing mental illness diagnosis, and with 75% of mental health problems being established by the age of 24 (1), universities have a particular responsibility and opportunity to intervene and address suicide prevention effectively.
- 6.4 Findings also suggest that 15-24 is the peak age for self-harm (1). There is said to be a significant association with self-harming behaviours and suicidal thoughts, and self-harm can often be one of the first indicators that someone is contemplating suicide. However, it is important to note that suicide and self-harm are not mutually exclusive, and that many individuals who die by suicide do not self-harm. By contrast, individuals who self-harm are not necessarily suicidal and can instead be using self-harm as a method of coping with severe distress and may be using self-harm to prevent suicide (9).

- 6.5 For many, university is seen as a significant life period which can evoke considerable feelings of stress within students. The transition into university life can have a significant impact on student wellbeing. Moving away from home or to a new city can be difficult, and the added pressure of having to build new social relationships and adjust to university life has the potential to cause anxiety or depression within some students. Research demonstrates a link between the quality of transition experience and suicidal ideation (10), suggesting universities must ensure transition is addressed effectively. Academic and workload pressures can serve as trigger points for suicide even in the absence of any mental health issue or mental illness. Some of the most significant sources of distress for students have been identified as adjusting to workload demands, financial worries and the pressure to develop social networks (11).
- 6.6 Research into suicide in adult populations highlights employment as a protective factor, and anticipated unemployment, financial strain and/or unemployment as risk factors (12). Although there has been less research into the mental health and wellbeing of staff in universities than into that of students work-related pressures can cause significant emotional distress to staff. Research by the University College Union and the Higher Education Policy Institute suggests that university employees are at higher risk than the general population of poor wellbeing and experiencing burnout. Increasing numbers of staff seeking support for their mental health from occupational health and counselling services have been reported, with the largest referral patterns seen amongst female and professional services staff (13, 14, 15). This could reflect an increase in awareness of the support available amongst these groups and a willingness to talk about mental health problems, but it could also indicate a need to provide more targeted early help and a specific need to strengthen pathways to support for male staff.
- 6.7 Suicide rates appear to be higher among certain groups. For example, findings consistently demonstrate that instances of suicide are more prevalent amongst the male population. In 2020, three times as many males died by suicide than females (6). Evidence has previously suggested that men are less likely to access psychological therapies (16), which further demonstrates the need for universities to adopt a whole-institution approach to suicide prevention that aims to reduce stigma and help all members of the community to feel comfortable to seek support.
- 6.8 Other groups that may be more likely to exhibit suicidal behaviours are those experiencing difficulties with gender identity or sexual orientation, and members of the LGBTQ+ community appear to be disproportionately affected by mental health problems and suicidal thoughts (17). There is also evidence that links suicide to alcohol and/or substance abuse (18), and those who have prior experiences with abuse or trauma or who are currently at risk of harm may present additional risk.
- 6.9 Finally, there is a potential risk of clustering or suicide transmission among those who have been exposed to or bereaved by suicide (1), which emphasises the importance of postvention procedures whereby anyone affected by a suicide can easily access support and careful attention to how details of a suspected suicide are communicated.
- 6.10 The university therefore deems it a priority to create a culture where suicide can be talked about safely, and with research suggesting that more students and staff than ever are disclosing mental illnesses to universities (11, 13), there is an increased need for staff to feel supported and equipped with the skills to respond to students and to any staff colleague experiencing mental distress or disclosing suicidal ideation. There is a prevalent myth that talking about suicide can 'put the idea in someone's head', but evidence suggests that asking someone about suicide can protect them and gives them a better chance to discover options that aren't about taking their own life (5).

- 6.11 The University is committed to ensuring that all staff possess the knowledge to appropriately signpost students and colleagues to appropriate sources of support within the University and understand how referral pathways to external agencies are used and when external referral is important (to enable access to urgent support in a crisis). As well as having an easily accessible support service within the university, we understand the value and importance of building and maintaining relationships with those outside agencies who possess the expertise to contribute to our suicide safer university.

7. Local Context

- 7.1 As discussed above, there are certain identifiable risks to be aware of that may lead to increased likelihood of an individual taking their own life. The University does recognise, however, that students and staff experiencing symptoms of mental illness or with a mental illness diagnosis may choose not to disclose this to the university. Evidence suggests that 1 in 3 people who die by suicide have never been in contact with support services (1), further demonstrating the need for an approach that encompasses all aspects of university life and aims to address suicide prevention by operating across multiple levels, departments and teams across the institution.
- 7.1 We are committed to making Hull a mentally healthy university and this includes making sure students and staff have opportunities to learn how to positively self-manage their mental health and wellbeing and know when and how to access support. It is crucial for students and staff to feel supported in handling academic and workload pressures and have an easily accessible route to support if needed.
- 7.2 The stigma that surrounds mental illness and suicide can act as a barrier to seeking support. The University aims to remove this barrier and tackle the stigma that surrounds suicide by creating a community of awareness where people feel safe and supported to start open conversations about their psychological health and wellbeing and seek support should they feel the need to.
- 7.3 Preventing suicide is everybody's business and should involve multi-agency teams across multiple settings (1). The University has dedicated groups to ensure our approach to mental health and wellbeing remains up to date and evidence based so that all members of our university community feel supported and valued. The Mental Health Working Group comprises members from across the university community and was developed with the aim of ensuring a whole institution approach, and to lead the process of embedding the principles of the University Mental Health Charter Framework across all four domains; Learn, Support, Live and Work (2).
- 7.4 As a key employer and higher education provider within the region we collaborate with others to make sure our staff and student population is included in plans to improve access to and delivery of early help, mental health prevention, intervention and postvention in our communities and places. The University does this by working alongside health service providers, local authorities and voluntary, community and social enterprises to ensure delivery of a whole system approach to suicide prevention based on good practice and real time surveillance, an identified priority for the Mental Health, Learning Disabilities and Autism Collaborative Programmes across the Humber, Coast and Vale Integrated Care System (19).
- 7.5 We collaborate with higher and further education providers across the region and beyond to share good practice and resources through membership of communities of practice that include the first University Mental Health Charter Award national cohort, the student services organisation AMOSSHE, the Student Mental Health Research Network, the Yorkshire and Humber Colleges and Universities Student Mental Health Network and, with

our collaborative provision partners, the Mental Health and Wellbeing Group (Academic Partnerships).

- 7.6 Further information about the resources and support available to staff and students within and outside of the University can be found in the Appendix of this document.

B) Prevention and Awareness

8. University of Hull Values

The University expects all students and staff to adopt a set of shared values to ensure that every member of our community has the opportunity to thrive and achieve success. Our values, as outlined by the University's [Strategy 2030](#), align to this policy:

- We are inclusive: We provide a safe, friendly and welcoming environment for all, where our differences are celebrated. We help each and every member of the university community to achieve their full potential with a personal, supportive approach.
- We are empowering: We build people's confidence through understanding, knowledge, skills and experience. We help people develop new ways of thinking and working that help shape a fairer, brighter future. We empower people to succeed, recognising that with empowerment comes responsibility and accountability.
- We are progressive: We set high standards and challenge ourselves and others to deliver meaningful progress with tangible outcomes. We follow and develop best-practice across all areas of our activity. We are always future-facing and ready to adapt. We learn to be self-reflective so we can seek improvement and embrace a different future.

9. Embed a whole-university approach towards mental health and suicide mitigation into the university culture and environment.

- 9.1 This Suicide Mitigation Policy is publicly available on the University of Hull website.
- 9.2 The University of Hull is committed to giving every individual the opportunity to achieve their potential by building a community that is free from discrimination and creating an inclusive culture for all students and staff. To reinforce this, the university has developed policies for everyone to access and adhere to.
- 9.3 Our [Inclusive Education Framework](#) outlines a range of practical suggestions to ensure all students are given an equal opportunity to succeed, independent of background or demographic characteristics. The framework is underpinned by principles of empathetic leadership, staff empowerment, student partnership and clear communication and caters to the needs of a diverse student body.
- 9.4 At Hull we aim to create a university culture that is compassionate about mental health and free from suicide-related stigma. Students and staff are encouraged to reach out and seek support for any issue they may be experiencing and one of our key aims is that everyone feels comfortable disclosing enough information to seek support within the institution.
- 9.5 Every encounter with a suicidal person represents an opportunity to intervene and save a life. The university sees it as a priority that members of staff possess the skills and knowledge to provide support to students or colleagues, including knowing how to respond appropriately should anyone express suicidal ideation, or display behaviour that makes them concerned the person may be at risk. Online mental health and suicide awareness training courses are available for all university staff to enrol in. For example, it is mandatory for Personal Supervisors to complete the "Supporting a Distressed Student" course and for line managers who are responsible for the wellbeing of others to complete the "Managers Guide to Stress" course.
- 9.6 To further ensure Personal Supervisors and staff feel assured in delivering this support, Senior Tutors and Associate deans Student Experience can assist with and oversee complex cases in Faculties and any member of staff can report a concern about a student to the Mental Health and Wellbeing Team of practitioners in Student Services. Human Resources

Partner Teams support managers and staff within their respective Faculties and Directorates.

- 9.7 The University have a range of population level interventions in place for both students and staff to promote and encourage good wellbeing for the entire community. These include access to Student and Employee Assistance Programmes and a suite of courses and resources available to students (via the MyJourney student platform) and for staff (via the Healthy Hull SharePoint Site).
- 9.8 At Hull we recognise the important relationship between mental and physical health. Several courses hosted on the student MyJourney platform and embedded in induction and re-induction promote physical activity, healthy eating and nutrition alongside psychological methods to manage stress and prevent poor mental health. Hull Sport have implemented an Active Wellbeing Programme, which includes five- or ten-week bespoke fitness programmes to support students to integrate physical activity into their daily routine to help with overall wellbeing. University staff members can also access a similar staff Active Wellbeing Programme via the Occupational Health Team.
- 9.9 Hull University Students' Union (HUSU) are an independent organisation that have several campaigns and initiatives in place, all of which contribute to creating a welcoming, supportive and inclusive community for students. For example, [#NeverOK](#) is a joint campaign between Hull University Students' Union and the University of Hull that aims to end all forms of violence and discriminatory behaviour. HUSU has partnered with the student led mental health charity Student Minds to enable access to specific training and development for their sabbatical officers, student volunteers and members. Volunteer Wellbeing Advocates and Wellbeing Champions are volunteering roles for students within HUSU that aim to help students connect with university life and learn to better look after themselves and their fellow students. The HUSU Advice Centre provides independent advice and support for students facing a disciplinary procedure, academic appeal or complaint or who need information and support to address financial, accommodation or legal issues.

10. Identify individuals who may be at increased risk

- 10.1 All applicants offered a place to study at the University are offered the opportunity pre-enrolment to declare any pre-existing mental health condition or disability via a Student Support Questionnaire, which is subsequently reviewed by one of the university's Mental Health and Wellbeing Team registered practitioners to determine if information should be shared with relevant student support teams to make sure an individual needs are met. For example, The Disability and Inclusion Team in Student Services offer assistance to students requiring support with Disabled Students' Allowance (DSA) applications or reasonable adjustments, along with the Learning Support Team who provide support to students with specific learning differences such as ADHD or Dyslexia.
- 10.2 New staff members at the University are asked to complete a pre-placement health questionnaire prior to starting their role, providing them with an opportunity to confidentially disclose any mental or physical health issues. The Occupational Health team will make an assessment and recommend any reasonable adjustments to support the employee in their role.
- 10.3 Students can experience barriers to accessing health services through their GP upon moving to a new city from their home elsewhere in the UK or abroad, which is why all new students are encouraged to register with a Hull GP service upon arrival. Local GP practices are invited to have a presence at #WelcomeFest, alongside a whole range of external agencies and support services, and HUSU continues to promote access to all external agencies throughout the academic year by providing space on the ground floor of Student Central for these agencies to meet and exchange information with students.

- 10.4 The university is committed to hosting a mentally healthy environment for staff and students where diversity is celebrated, and every member of the community feels supported. The Chaplaincy Team welcome and support students and staff of all faiths and religious beliefs, as well as offering a physical and emotional space to talk, reflect or pray.
- 10.5 Student loneliness has been shown to be the strongest overall predictor of mental distress (20) and there is extensive research demonstrating how important social connectedness is for wellbeing. For some students, membership of a society or sports club can help to generate a sense of belonging and is an easy way to form friendships. HUSU has a variety of societies available for students to sign up to, representing a wide range of interests. To further promote this students can book onto 'Give It a Go' events via the HUSU website <https://hulluniunion.com>, enabling them to try new things and find a society that fits their interests.
- 10.6 The University of Hull has a range of on-campus accommodation and students can spend a great deal of their time in this space, meaning that creating a sense of security where students feel safe and supported is essential. Self-harm or suicide are more likely to occur in accommodation, rather than a public setting (21). Our campus and accommodation are monitored 24 hours a day and the Student Life Team in Student Services work to help students settle into their accommodation and organise social events and activities, as well as offering support and more specific interventions when required.
- 10.7 Accommodation, site and security staff receive training to be able to respond appropriately to the types of situations that may occur in accommodation, including in first aid and safeguarding (mandatory for all university staff). Suicide Awareness training is also offered to enable accommodation, security and site staff feel more confident in talking about suicide and know how to respond. This training can be adapted to meet the needs of specific groups (for example delivered face to face for groups of staff who are not familiar with or don't use online systems within their roles).
- 10.8 Research has shown that international students are more likely to experience social isolation (1), meaning extra support may be needed for these students. The University's Global Engagement team oversee international students and help to make sure specific induction measures are in place to ensure a smooth transition into university life. This includes an orientation programme called International Welcome which includes a supportive travel and arrivals service. The Immigration Team in Student Services (located in Student Central) provides free, confidential guidance and support to students with immigration and/or visas.
- 10.9 As earlier discussed, transitory periods can have a significant bearing on our emotional wellbeing, which is why the University has a range of initiatives in place to help freshers settle into university life. #WelcomeFest is organised collaboratively by the University and HUSU and consists of a range of activities and events for everyone to get involved with.
- 10.10 The University recognises that students also require support for their transition throughout university and that the pressure of transition periods goes beyond settling in as freshers. For example, the university offers support for progression and for re-induction as students transition into each academic year. Students returning from suspension may be particularly vulnerable, and extra support is therefore extended to these students. We encourage personal supervisors and programme teams to agree individual support plans that set clear expectations and realistic goals for the student to support them to re-engage with their studies and university life.
- 10.11 Graduates may struggle with readjusting to "normal life" during the transition out of university into employment. [Student Futures](#) support students to gain the skills and competencies they need to navigate recruitment and to prepare for employment and remain

available to alumni after graduation, to support everyone to reach their full potential.

11. Ensure ease of access to support

- 11.1 The Mental Health and Wellbeing Team are a team of registered mental health professionals situated in the Student Central building and they aim to make every engagement with a student meaningful and provide personalised advice and support. The team offer a range of short-term evidence-based psychological interventions but do not offer diagnosis, treatment or long-term interventions and instead liaise with internal and external agencies to ensure that the best pathway of treatment and care can be accessed to meet each individual student's needs.
- 11.2 Students and applicants can access the Mental Health and Wellbeing Team by self-referring online at <https://uohss.formstack.com/workflows/pathways>. All referrals are screened by a registered practitioner to determine the level of need and risk presented which determines the best course of action for each individual student. All referrals are responded to within 3 working days, with high -risk cases prioritised for more urgent action by the duty practitioner (a member of the team adopts the duty role each working day). It is preferable for students to self-refer to the team as this usually indicates they are prepared to engage with them. Students requiring support to complete the form can access this from their Faculty or the Central Hub Team, or by raising a query in the MyHull portal.
- 11.3 Details of available crisis support and out of hours helplines can be found on the 24 hour student support page <https://www.hull.ac.uk/choose-hull/student-life/student-support/24-hour-support>.
- 11.4 The Mental Health and Wellbeing Team at the University of Hull, support upwards of 100 individual students per week. Whilst most of these students are supported appropriately and safely through the expertise and professionalism of individual practitioners, a small number of students can present a significant level of actual or potential risk to self or others due to actions such as self-harm, suicidality, violence or threats to others or vulnerability and safeguarding concerns. Held weekly the Student at Risk meeting enables multidisciplinary team discussions and joint decision making to ensure that the team utilise their shared experience and expertise to ensure the safest and most appropriate outcomes for these students. The process also ensures transparency of decision making and defensible documentation/record keeping alongside line management involvement and support.
- 11.5 The Campus Community Support Forum is a multi-area group which comes together on a weekly basis to share knowledge, insights and / or concerns in relation to current campus, student and staff issues and / or working practices. It provides a collaborative, partnership-based approach to emerging concerns regarding student or campus issues and a forum for discussion and action in relation to issues raised with the aim of managing and mitigating risk. The forum has a direct reporting route through to the Student At Risk meetings and can also request case review meetings with the Academic Registrar to discuss specific student cases
- 11.6 Students have access to a wealth of information and self-help resources online at <https://www.hull.ac.uk/choose-hull/student-life/student-support/mental-health> in order to better manage their own emotional wellbeing.
- 11.7 The Students' Union Advice Centre are a separate organisation from the university and provide free and impartial advice and guidance relating to a range of academic issues. The Advice Centre can be contacted via email at husu-advice-centre@hull.ac.uk or telephone 01482 466263.
- 11.8 Supported by donations from our Alumni the university has partnered with Health Assured

for the development of the Student Assistance Programme (SAP), a free, confidential support service whereby students have access to a 24/7 phone line (0800 028 3766) as well as an app for Android and iOS. SAP supports students with both personal and academic problems including but not exclusive to anxiety, depression, low mood, relationship issues, sexual and gender identity concerns, and exam pressures, homesickness and transition. The My Healthy Advantage app also offers a range of features including a live chat, weekly mood tracker, mini health checks and breathing techniques. Access more information via the 24 hour student support pages <https://www.hull.ac.uk/choose-hull/student-life/student-support/24-hour-support>

- 11.9 As earlier discussed, evidence suggests that HE employees are particularly likely to face issues with their mental health and wellbeing (13). This highlights the need for universities to have adequate support and suicide prevention processes in place for staff members. A range of support is available to university staff, all of which can be found on the Healthy Hull SharePoint site. The site brings together resources, training, support and guidance to help promote good staff wellbeing.
- 11.10 Staff can access LifeWorks, an Employee Assistance Programme (EAP) commissioned by the university, which provides a range of work and life related support for employees and their immediate family members. LifeWorks is accessible via the Healthy Hull SharePoint site.
- 11.11 All University staff members are able to access counselling with Focus, a local and independent counselling service. Any employee can self-refer and have up to six sessions to discuss any work-related or non-work-related issues they may be experiencing. For more information and to self-refer please access <https://www.focuscounselling.co.uk/> or see the Focus counselling SharePoint page.
- 11.12 The University is signed up to the Mindful Employer Charter providing access to expert information, advice and resources to enable us all to take a positive, proactive and supportive approach to mental health.

12. Provide and promote awareness of available support

- 12.1 The university is committed to providing highly visible and accessible support to all students. A link to the Student Support page can be found on every page of the university website and from every Canvas page, containing links and information about the internal and external support services available to Hull students.
- 12.2 If a student or member of staff is unaware or confused about the appropriate service within the institution for the issue with which they need support for a student, they can contact the Central Hub team at 01482 462222 who will be able to direct them to the correct team. Alternatively, students can access the Central Hub team by telephone, live chat or by raising a query in the MyHull student portal.
- 12.3 The university has collaborative partnerships with several external care providers, and students who have an existing diagnosis of a common mental illness (e.g. anxiety, depression) or who find themselves developing symptoms can access treatment from primary mental healthcare services with the support of the Mental Health and Wellbeing team, by a referral from their GP or by self-referral.
- 12.4 Experiencing symptoms of psychosis or being diagnosed with a serious mental illness such as bipolar disorder, schizophrenia, personality disorder or major depressive disorder can place an individual at higher risk of suicide. Students are encouraged to disclose their diagnosis to enable reasonable adjustments and individual support plans to be agreed with them. Where necessary, the Mental Health and Wellbeing team will collaborate with secondary mental health services to ensure that the student has adequate access to treatment and to the

appropriate pathway of care (e.g., via an early intervention service (EIS) for psychosis).

- 12.5 Information about pathways to support for staff can be accessed from the Healthy Hull SharePoint site and this includes information about our staff who are Mental Health First Aid trained to act as a first point of contact for staff and guide them towards the right support for them.

C) Intervention

13. Creating a community of awareness and being alert to warning signs and vulnerabilities

- 13.1 Staff will have the awareness to spot signs of risk, safely start conversations around suicide and understand the importance of listening. Staff should also be vigilant to warning signs during periods of heightened stress for students and staff colleagues, such as during assessment and marking periods. Risk factors of deteriorating mental health include but are not exclusive to:
- Becoming seemingly withdrawn from studies/social activities
 - Drastic changes in behaviour or appearance e.g. poor hygiene or appearing dishevelled
 - Risk taking behaviours including repeated use of drugs or alcohol
 - Panic attacks
- 13.2 Talking with students can help to determine the intensity of the problem, and staff can signpost students to the Mental Health and Wellbeing Team if they feel this is appropriate or they are uncertain about the level of distress or risk being presented. It is always better to encourage students to self-refer but if staff do not feel confident that a student will do so they should **Report a Concern** about the student using the “Need help? Worried about a friend?” menu link at the top of any Student Support page on the university website <https://www.hull.ac.uk/choose-hull/student-life/student-support>.
- 13.3 Families, friends and any member of the public (e.g., a placement provider) who has concerns about a University of Hull student can use the Report a Concern process.
- 13.4 Levels of student engagement are monitored and if concerning levels of disengagement are detected students may be contacted by the University so that support can be offered, and students signposted to appropriate sources of support. Please refer to the Student Engagement and Attendance Policy for more information about these processes.
- 13.5 Concerns about a staff colleague should ideally be raised with them in a compassionate and supportive way so they can be encouraged to seek support from a Mental Health First Aider or their line manager and /or directed to the self-help and referral resources on the Healthy Hull SharePoint pages. Where staff have serious concerns about a colleague they are encouraged to raise this with their line manager.

14. Ensure student-facing staff receive adequate training

- 14.1 Providing training for all frontline university staff is a priority, and as mentioned above all student-facing staff are required to undertake training to support a student in distress and be able to appropriately respond and signpost. It is also important that staff are aware of what the university can feasibly offer students in terms of support, so that unrealistic expectations are not set leading to further distress later.
- 14.2 Security staff and accommodation security staff, including those employed by private agencies, have access to the suicide awareness training that is offered by the university.
- 14.3 Practitioners within the Mental Health and Wellbeing Team have access to continuing

professional development and clinical supervision to ensure their practice is up to date and based on the latest evidence and best practice, that they maintain the appropriate professional capabilities to intervene in crisis situations and so they can meet their revalidation requirements and maintain their professional registration.

15. Information sharing

- 15.1 In line with usual NHS guidance all clinical information relating to a student will remain confidential, with the exception of the student posing a risk to themselves or others. In this circumstance, a clinical assessment will be carried out by a registered practitioner to determine the level of risk and whom the information should be shared with to manage risk and aid recovery.

16. Reduce means

- 16.1 We will ensure that the physical spaces within university campus and accommodation are safe and that access to locations and materials that may be used for suicide are restricted.
- 16.2 All doors to rooftops are to remain locked even when work is taking place, and there is a two-person minimum rule for any roof work undertaken by in-house staff.

17. Build and maintain solid working relationships with external care agencies

- 17.1 The university works closely with health and social care providers to ensure that all members of our university community can access a form of support that is suitable and beneficial to their individual needs, and that messaging about suicide awareness is both safe and effective.
- 17.2 We will continue to expand our excellent partnership working to include local and national groups and agencies to expand our repertoire of available support, as well as training opportunities and collaboration on research and projects. The University is a member of the Humber, Coast and Vale Health and Care Partnership who are committed to ensuring mental health is given the same prominence as physical health. They run several campaigns and programmes with the primary goal of helping individuals in our region maintain good mental wellbeing. #TalkSuicide, for example, is a suicide prevention campaign which includes free online training through the Zero Suicide Alliance to promote awareness and reduce stigma surrounding suicide.
- 17.3 The Mental Health and Wellbeing Team can assist with referrals to any of the services that are listed in the Appendix, and if the student looking to be referred does not live in the local area the team can support with determining which services and organisations the student can access from wherever they may be based.
- 17.4 The Occupational Health Team will assist staff members with referrals to external services where required.

D) Postvention and response

18. Postvention information and procedures

- 18.1 The tragic event of a death by suicide can have a devastating impact on the family, friends and wider community of the deceased. It is therefore vitally important that the University provides appropriate and timely response and are has clear processes and procedures in place to be followed for postvention.
- 18.2 There is often a delay in attaining a coroner's verdict to officially rule a death as a suicide, so our University processes align to the Student Death Policy. This policy outlines all of the specific postvention processes that will be followed in the rare event of a student death, and has been developed to meet the needs of the university and wider community.
- 18.3 The policy outlines the key responsibilities of staff members to ensure that the suicide is handled in the most sensitive and respectful manner. A key aspect of this is that a Family Liaison Officer (FLO) is appointed as a single point of access for the bereaved to prevent any further distress for the family when interacting with the University. The FLO will examine the level of contact appropriate for each family on a case-by-case basis.
- 18.4 A nominated member of staff will also be responsible for liaising with the police. The responsibility of notifying the immediate family lies with the police and the University will ensure that this process is not undermined and that information about the suicide is not prematurely released. This includes staff refraining from engaging with any social media posts about the suicide.
- 18.5 A member of the communications team will liaise with the media to ensure the student suicide is reported in a sensitive and respectful manner, in a way that does not increase distress for the bereaved or the wider community. Any further media enquiries should be directed to the University Press Office who will determine the most appropriate response to enquirers.
- 18.6 Opportunities for staff and students to memorialise the deceased student will be considered sensitively. Student services in collaboration with the chaplaincy team and HUSU can help to organise such an event should the student population or student friends of the deceased request this. The university will take into consideration how to most appropriately honour the deceased and respectfully collaborate with the bereaved to understand their wishes with regard to memorials or anniversary dates. The attendance of university staff and/or students will be at the discretion of the family.
- 18.7 A Post Incident Analysis will also be carried out after a student death by suicide has occurred, which will determine if there is need for policy review or for changes to be implemented.
- 18.8 For further details about specific postvention processes in the event of a student death by suspected suicide, please refer to the Student Death Policy.
- 18.9 Processes followed after a staff death are coordinated by the line manager of the deceased with the support of their Dean or Head of Service, HR and the Occupational Health Team.

19. Postvention support considerations

- 19.1 The Mental Health and Wellbeing team will contact all students known to be immediately affected to offer access to support and provide information about referrals to external support services. Support provision will be flexible and will differ on a case-by-case basis.
- 19.2 The Student Life team can support with any student accommodation, financial or academic issues that take place as a result of the suspected suicide. Students known to be affected are made aware of the processes for mitigating circumstances and assignment extensions.

- 19.3 Staff and colleagues affected will be provided with postvention support and line managers should consider if further action is needed, such as temporary time off, an adjustment in duties or onward referral through Occupational Health to specialist services. The details of all members of staff affected by a death or suspected suicide should be forwarded to the Occupational Health team. The team will then make contact with these staff members to ensure they are aware of the support available to them. For more information about the support available to staff please access the Managing Psychological Health and Wellbeing at Work document via the Human Resources SharePoint site.
- 19.4 As earlier discussed, those who have been bereaved by or exposed to suicide pose a higher risk of being suicidal themselves (1), and support must be available in order to mitigate this risk. The Mental Health and Wellbeing Team or Occupational Health Team will consider tailored approaches to those at risk of suicide contagion.
- 19.5 Together Bereaved by Suicide is a local service delivered by the charity Hull and East Yorkshire MIND whereby people of any age that have been bereaved by suicide can access free emotional and practical support. The service has trained bereavement workers on hand and can offer support relating to funeral planning and creating memory boxes to honour the deceased. The Mental Health and Wellbeing Team or Occupational Health Team can help with referrals or individuals can self-refer by calling 01482 240133 or texting 07520633447.

E) Resources

The University would like to acknowledge and extend our gratitude to The University of Sheffield for permitting us to use their Suicide Mitigation and Response Policy as a reference point for adaptation to the needs of our own community.

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G) Appendix

Figure 1. Pathways to support within the university

PATHWAYS TO SUPPORT WITHIN THE UNIVERSITY	
For students	<ul style="list-style-type: none">- Student Support pages: https://www.hull.ac.uk/choose-hull/student-life/student-support- 24-hour student support: https://www.hull.ac.uk/choose-hull/student-life/student-support/24-hour-support- Mental Health and Wellbeing Team self-referral form: https://uohss.formstack.com/workflows/pathways- Hull University Student Union Advice Centre: https://hulluniunion.com/advice or contact via email husu-advice-centre@hull.ac.uk or phone 01482 46623.- Report a Concern form: https://myjourney.hull.ac.uk/report-a-concern- Student Life Team: studentlife@hull.ac.uk- Student Assistance Programme (SAP): https://healthassuredeap.co.uk/ sign in with username: Wellbeing and password: GrowSailTime1 or download the My Healthy Advantage app on iOS or Android using code MHA148306.
For staff	<ul style="list-style-type: none">- Occupational Health: email occupationalhealth@hull.ac.uk or call 01482 466010.- LifeWorks (Employee Assistance Programme): https://unumuk.lifeworks.com/life/employee-assistance- Healthy Hull SharePoint site: https://share.hull.ac.uk/Services/HealthyHull/SitePages/Home.aspx- Stress management: https://share.hull.ac.uk/Services/HealthyHull/SitePages/Stress%20Management.aspx- Mental Health First Aiders: https://share.hull.ac.uk/Services/HealthyHull/SitePages/Mental%20Wellbeing%20-%20Mental%20Health%20First%20Aiders.aspx

Figure 2. Local support services

LOCAL SUPPORT SERVICES	
Mental Health Support	<p>There are several organisations in the local area providing access to mental health support:</p> <ul style="list-style-type: none">- Mental Health Advice and Support Line 24/7 a partnership between the NHS and Hull and East Yorkshire MIND and available 24 hours a day to anyone in in the Hull and East Riding of Yorkshire area who requires information, advice and support with their mental health or are worried about the mental health of a family member or a friend. Calls are free from a landline 0800 138 0990- Hull and East Yorkshire Mind is an independent charity affiliated to the national MIND network that offer a range of services to suit the needs of each individual. For mental health support, information and guidance contact Hull and East Yorkshire Mind by telephone at 01482 240133 or 07520633447, or email info@heimind.org.uk or visit their website https://www.heimind.org.uk/how-we-can-help/
Postvention support	

<ul style="list-style-type: none"> - Together Bereaved by Suicide is a Hull and East Yorkshire MIND service for people of any age bereaved by suicide to access free emotional and practical support. Trained bereavement workers offer support relating to funeral planning and creating memory boxes to honour the deceased. The Mental Health and Wellbeing Team or Occupational Health Team can help with referrals or individuals can self-refer by calling 01482 240133 or texting 07520633447.
<p>Mental Health Crisis Intervention Team Urgent care service for adults living in Hull and East Yorkshire who are experiencing an acute mental health crisis. The team provide a single point of access (SPA) for service users and healthcare professionals and provide crisis interventions through telephone support, assessments and intensive community-based treatment https://www.humber.nhs.uk/Services/support-services-for-you.htm</p>
<p>Access to counselling and psychological therapies</p> <ul style="list-style-type: none"> - Let's Talk is an Improving Access to Psychological Therapies [IAPT] service in Hull offering treatment for a range of mental health difficulties. Individuals that are registered with a Hull GP can self-refer via https://www.letstalkhull.co.uk/pages/make-a-referral or 01482 247111. - Focus Counselling Any University employee can self-refer and have up to six sessions to discuss any work-related or non-work-related issues https://www.focuscounselling.co.uk/ or call 01482 891564.
<p>Drug and Alcohol Support: Students and staff experiencing problems with alcohol or substance misuse can self-refer or refer via their GP to ReNew by phoning 01482 620013 or accessing their website at https://www.changegrowlive.org/hull-renew/referrals</p>
<p>Eating Disorder Service: For support with eating disorders students and staff can self-refer to Evolve by phoning 01482 344083 or by texting EVOLVE to 61825. Alternatively, referrals can be made through a GP.</p>
<p>Sexual Assault/Domestic Abuse Support:</p> <ul style="list-style-type: none"> - The Blue Door supports those with experiences of sexual assault/abuse and can be contacted at 0800 197 47 87 or info@thebluedoor.org. - Hull Women's Aid offer support to women and children who have been victim to domestic abuse and can be contacted by phone at 01482 446099 or 0800 048 9944. Their website also have qualified staff running a live chat for support. www.hullwomensaid.org - Hull Domestic Abuse Partnership (DAP) also aim to tackle domestic violence and can be contacted via phone at 01482 318759, or a call back can be requested via their website at http://www.hulldap.com/contact-us/
<p>Gender Dysphoria Clinic: Although Hull do not have a dedicated gender clinic, Lets Talk offer referrals to a service called Relate for support with gender dysphoria. Relate can be contacted directly at 01482 329621 or www.relatehull.org.uk. Individuals can also be referred by their GP to the nearest gender clinic.</p>
<p>Accident and Emergency (A&E): Students and staff can access emergency care via A&E at Hull Royal Infirmary or by calling 999 or dial 111 first if they are not sure if emergency care is needed.</p>

Figure 3: Other recommended sources of support

Other recommended resources and sources of support
<ul style="list-style-type: none"> - SHOUT 85258 is a free, confidential, 24/7 text messaging mental health support service for anyone who is struggling to cope https://giveusashout.org - - Samaritans 24-hour free support 365 days by phone 116 123 and email jo@samaritans.org (response time for email is 24 hours) https://www.samaritans.org - Student Space (from the student led charity Student Minds supported by the Office for Students). Access to 24-hour text message support, webchat, email and phone support for students. Information and resources have the added benefit of linking back to our university support pages and they are adding resources all the time (to be as inclusive as possible, to reach specific groups of students including PGR and international students) https://studentspace.org.uk

Figure 4: Suicide awareness training resources

Suicide awareness training resources
<ul style="list-style-type: none"> - Staff are able to access Suicide Awareness training internally via Canvas. To enrol please visit the Organisational Development site on SharePoint. https://share.hull.ac.uk/Services/StaffDevelopment/SitePages/Workshops%20and%20Events%20-%20suicideAWARENESS%20(Canvas%20Course).aspx - #TalkSuicide is a campaign led by Humber Coast and Vale Health and Care Partnership to raise awareness of free training provided by the Zero Suicide Alliance. For more information please access https://talksuicide.co.uk/. - Real Talk About Suicide is an interactive training resource from Grassroots that aims to increase confidence and skills of the viewer in responding to people who may be at risk of suicide. Visit Grassroots at https://prevent-suicide.org.uk/ or visit http://realtalk.film/ to take the training. - safeTALK is a face-to-face training course delivered by LifeWorks. The university is currently targeting certain cohorts of students to book in for sessions as part of an embedded approach to learning. For more information please visit https://www.livingworks.net/safetalk.

Version Control

Version	Author	Date approved	Relevant sections
0.01	Mental Health Strat Lead		
1.00		8/6/22	Approved by Senate