



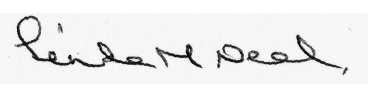
# **Ashdon Jazz Academy**

## **Safer Suicide Policy**

## Safer Suicide Policy

Profile	
<b>Version:</b>	02
<b>Author:</b>	Patricia Muirhead – Hewitt/ Linda Neal
<b>Applies to:</b>	All Trustees, Staff, Volunteers and Service users of Ashdon Jazz Academy
<b>Date issued:</b>	March 2021
<b>Review date:</b>	January 2023
<b>Review Frequency</b>	2 Yearly
Approval	
<b>Approval person/ Trustee Board:</b>	Policy Trustee AJA Board of Trustees
<b>Approval person overseeing review</b>	Linda Neal - Trustee
<b>Date:</b>	March 2021

### Signed by 2 Trustees as approval by the AJA Board of Trustees

Date	Names	Signature
22/03/2021	Linda Neal	
	Michelle Nicholas	

## **General statement**

Ashdon Jazz Academy are aware that suicide is the leading cause of death in young people and that we play a vital role in helping to prevent young suicide. We want to make sure that young women who access our services pupils at are as suicide-safe as possible and that our trustees, mentors, volunteers, parents and carers, contractors and service users are aware of our commitment to be a Suicide-Safer organisation

## **2. Our beliefs about suicide and contributory factors**

This charity acknowledges that

### **a) Suicidal thoughts are common**

### **b) Suicide is complex**

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.

### **c) Stigma inhibits learning – stigma can kill**

We recognise that the stigma surrounding suicide and mental illness can be both a barrier to seeking help and a barrier to offering help. This charity is dedicated to tackling suicide stigma. In our language and in our working relationships, we will promote open, sensitive talk that does not stigmatise and perpetuate taboos.

### **d) Suicide is everyone's business**

As a charity, we recognise that pupils may seek out someone who they trust with their concerns and worries. We want to facilitate the reporting of any risks or concerns.

### **e) Safety is very important**

We want to support our service users, sometimes working in partnership with family, caregivers, external agencies and other professionals where this may enhance suicide-safet

### **f) Suicide is a difficult thing to talk about**

We know that a young woman who is suicidal may find it very difficult to make their feelings known and speak openly about suicide. We will provide trained adults who are able to identify when a young women may be struggling with thoughts of suicide.

- ❖ Talking about suicide does not create or increase risk
- ❖ Those with personal experience have a unique role to play in the development and refinement of this Safer Suicide Policy
- ❖ We will endeavour to involve anyone from our community who has personal experience of suicide, either having struggled themselves or supported someone with thoughts of suicide.

### **g) Suicide prevention**

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.

### **3. How we help ensure an active person-centred suicide prevention and intervention policy**

- a) Our Charity has two named individuals who are responsible for the implementation and maintenance of this policy which is reviewed informally on a regular basis and formally every 2 years.
- b) We will endeavour to ensure that all our mentors are suicide aware. This means that all mentor training will include suicide awareness, i.e. how to spot signs, what to do and how to escalate any concerns.
- c) We will be clear about how we enhance the physical safety of our environment including the removal of potential ligature points, restricting access to places which facilitate jumping, and securely storing harmful substances.
- d) We recognise that the need to protect someone's life must be balanced against the need to protect their confidentiality. We therefore routinely ask all pupils over 18 for permission to share any serious concerns for their welfare with an emergency contact of their choice.
- e) Should any young woman who is known to have suffered from suicidal thoughts a mentor session leave unexpectedly for whatever reason, we will endeavour to inform them of the emergency contact of their vulnerable state.
- f) When we identify a young women at risk of suicide and decide to engage external services, such as a hospital A&E department or a crisis centre, we will have explicit guidelines on the pathways that apply. Those guidelines will be developed in cooperation with the external services, and will be reviewed regularly as the provision of such services change over time.

#### 4. Suicide Intervention

- a) Someone having thoughts of suicide will usually communicate this in ways that could seem more or less obvious
- b) Few young people feel they can be open about suicidal thinking or tell someone when they are struggling with their emotional health. But suicidal thoughts don't have to end in suicide. It is impossible to prove a definitive checklist of things to look out for to help to identify a young woman who is thinking about suicide because every young person is different.
- c) They may be longing for someone to ask them about this. They just need to be asked. Need to be asked directly "Are you thinking about suicide?"
- d) Using the word suicide tells them it is ok to talk openly about their thoughts of suicide with another person

#### **IMPORTANT STEPS TO TAKE AS A MENTOR AND VOLUNTEER WHEN FACED WITH A YOUNG PERSON WHO HAS SPOKEN ABOUT FEELING SUICIDAL**

- Ensure designated person(s) have been informed immediately.

- Approach, assess and assist with any crisis

- Assess if the young person is in a suicidal crisis- KEY QUESTIONS TO ASK

Do you have a suicide plan?

Do you have what you need to carry it out?

Do you know when you would do it?

Do you intend to attempt suicide

- Ensure the young person is not at immediate risk. If so, call 999 immediately.

- Make every effort to ensure that someone living with the young person is fully aware of the situation

- If a young person is in care please ensure foster carer is fully aware of the situation

- Advise the parent and young person to seek immediate medical attention from their GP. Follow up the next day, to ensure they have made an appointment and attended

- Record in detail the summary session and the steps you have taken following the young person's disclosures.
- Email the summary to Patricia Muirhead at [ashdonjazzacademy@yahoo.co.uk](mailto:ashdonjazzacademy@yahoo.co.uk)
- Do not panic and remain calm throughout
- Provide help lines that support mental health to parent and young person
- Ensure young people are aware of downloadable NHS apps to support mental health.

#### **f) Referral Process**

Lambeth young people- social care and CAMHS referral [www.lambeth.gov.uk](http://www.lambeth.gov.uk) ›  
cyp-lambeth-mar-form

Adult social care referral can be made via the single point of access online. Lambeth  
08000902456

Croydon - Immediate concerns for a child's mental health or safety, for example, there's immediate risk of harm to themselves or physical harm suffered – contact 999 or NHS 111 immediately. Alternatively, call the Single Point of Contact (SPOC) team on 020 8726 6400, out of hours: 0208 726 640 (Monday to Friday: 5pm to 9am, weekends and bank holidays: 24 hours

Lewisham- Contact the MASH on 020 8314 6660 and ask to speak with a duty social worker. If you think a child or young person may be in immediate danger, call 999 or contact your local police on 101.

Merton- MASH\* Team Telephone: **020 8545 4226** or **020 8545 4227** (out of hours: 020 8770 5000) Fax: 020 8545 4204

#### **g) External Agencies to support with suicide and mental health difficulties**

- Papyrus 08000684141
- MIND
- Lambeth social care 02079263100
- Lambeth Adult Social care 08000902456
- Lambeth Mind Office - 020 7089 5050
- Off the record 020 8251 0251
- Samaritans 116 123

## **5. Ongoing support and development of our policy and practice**

- a) Our trustees will ensure that ongoing reviews take place, that processes are updated in line with best practice and that on-going training is undertaken when necessary.
- b) Where possible we will include or consult with members of our community who have personal experience of suicidal ideation, either their own or as a concerned other, in the design, development and continuous refinement of this policy.

**This document will be held at Ashdon Jazz Academy Headquarters and on Google docs**

## Checklist for the Review and Approval of Procedural Documents

Title of document being reviewed	Yes/No/ Unsure	Comments
<b>1. Title</b>		
Is the title clear and unambiguous?	Yes	
Is it clear whether the document is a guideline, policy, protocol or standard?	Yes	
<b>2. Rationale</b>		
Are reasons for development of the document stated?	Yes	
<b>3. Development Process</b>		
Is the method described in brief?	Yes	
Are individuals involved in the development identified?	Yes	
Has a reasonable attempt been made to ensure relevant expertise has been used?	Yes	
Is there consultation with stakeholders and users?	Yes where possible	
<b>4. Content</b>		



Is the objective of the document clear?	Yes	
Is the target population clear and unambiguous?	Yes	
Are the intended outcomes described?	Unsure	
<b>5. Evidence Base</b>		
Are any key references cited ( if appropriate)?	N/A	
Are any local/organisational supporting documents referenced?	N/A	
<b>6. Approval</b>		
Does the document identify which committee/group will approve it?	Yes	
<b>7. Dissemination and Implementation</b>		
Is there an outline/plan to identify how this will be done?	Yes	
Does the plan include the necessary training/support to ensure compliance?	Yes	
<b>8. Document Control</b>		

Does the document identify where it will be held?	Yes	
<b>9. Review Date</b>		
Is the review date identified?	Yes	
Is the frequency of review identified? If so, is it acceptable?	Yes	
<b>10. Overall Responsibility for the Document</b>		
Is it clear who will be responsible for coordinating the dissemination, implementation of the documentation?	Yes	
Is it clear who will be responsible for overseeing the review of the documentation?	Yes	

