

Decision making flowchart

The following flow chart is recommended as a 'guide' for people in leadership/decision making roles responding to an onsite or local incident of suicide in a public place. *This does not replace internal workplace legislative protocols, but is to sit as a supplementary, supporting resource to help facilitate response actions.*

Postvention response following a suicide incident in a public place:

In the event of an incident, all people respond differently to exposure of traumatic situations. Some people may experience shock and as a result, may have reduced capacity to respond quickly or to initiate a response process. **Regardless of leadership level or authority to manage people, it is acknowledged this leadership role may not be possible during the immediate or crisis response phase.**

This shock response is normal, and strategies to manage and overcome this should be considered with empathy and understanding for an individual's needs. **Strategies such as delegation of tasks and acting duties may be useful in protecting impacted individuals in the first instance, and help protect others from exposure and potential further harm.**

Put simply, if an individual in a leadership role is impacted by a suicide death, it may not be appropriate for them to lead this response and delegation of this lead response role is strongly recommended.



This mini resource is part of the **StandBy** Support After Suicide Toolkit: Postvention Response for Site Owners and Leadership. For more information or to download the full toolkit www.standbysupport.com.au/resources/

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EMERGENCY RESPONSE:

Actions taken after a suicide death or near fatal attempt at a public place

Advised of or witnessed incident within a public place

Delegation of the next steps may be required, if urgent assistance to bystanders is necessary.

1.

Call 000

Request Police and Ambulance (delegate if required).

Use of delegation strategies to help assign duties to specific individuals may be required. Use names if known or some identifying clothing to ensure the task has ownership, if you are unable to perform the task yourself

Eg: 'Sam, I need you to call Triple Zero immediately' OR 'You with the yellow t-shirt – Call Triple Zero'

2.

Activate internal emergency response plan (if applicable)

3.

Assure appropriate safety and security measures are in place to secure the area to prevent further injury and/or witness to the scene

Actions such as:

- Blocking off public access
- Moving people (including staff) away from the immediate area
- Closing off street access (if safe to do so) or redirecting traffic

4.

Provide known details to Police

Providing accurate details is an important factor to assist Police perform their duties.

Noting down even small details might be helpful, such as; time of day/night, people who were in the immediate area, any actions taken by witnesses or bystanders etc.

5.

Start the IMMEDIATE POSTVENTION RESPONSE

And delegate 'next steps' to managers to communicate with any staff, service users/ community members likely to be immediately impacted.

External link for more information on 'What to expect when making a Triple Zero (000) call', visit: www.triplezero.gov.au



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IMMEDIATE POSTVENTION RESPONSE

Critical Response Actions and Delegations

Actions:

- Decision regarding part or full site closure
 - 24hrs/48Hrs or based on advice of authorities
- Identify an '**Internal Communication Coordinator**' to help cascade or escalate important information internal to the site
 - Communicate who this person is and how they can support
 - Inform broader site staff of changes
 - Provide information/support where required
 - Prepare fact sheets for internal dissemination. See *Communicating about suicide and Consider Language Used to help guide this messaging*
- Identify an '**Authority Liaison**' as the main contact with Police or First Responders in the initial stages to ensure any requests are adhered to and to provide a single point of contact. Advise all necessary people of this
- Identify an '**External Communication Coordinator**' to help field and triage community questions or media requests
 - Develop a standard response for community questions and provide help-seeking information for postvention support
 - Develop a standard media and social media response see *Dealing with the Media*

NOTE: Persons Identified as site communication coordinators and liaisons may need to have support around managing their tasks and their own grief. It might be advisable, where possible, to have additional people identified as back up support. This team will form the 'Critical Incident Team' and should be supported for review at any time staff require some down-time or reprieve from their support duties.

Delegations:

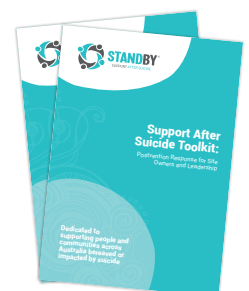
Notes:



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FIRST 24-48 HOURS

Wrap-around postvention response

Actions:

- Documentation of events and any other mandatory administration in line with site procedures
- Review *Memorial and Respecting Community Mourning* section to help prepare for appropriate decision making to support public/community grief
- Communicate clear pathways for support to all people (internally and externally)

This may look like:

- Visual posters of help-seeking information placed in public spaces
- Verbally highlighting different forms of help-seeking support available
- Provision of a quiet/recovery room/spaces
- Information handouts highlighting normal trauma and grief responses and when it is advisable to seek help

NOTE: This period of time is to help identify and direct all people who are impacted to appropriate forms of support, to process their grief and trauma and help minimise risk of re-traumatisation of themselves and others.

See *Printable Helpseeking Information* to support help-seeking pathways. Note: that page can be used a print ready resource or handout.

Delegations:

Notes:

1-2 WEEKS

Continued Postvention Support

Actions:

- Continue monitoring staff wellbeing and refer to support services where appropriate
- Publicly promote and support help-seeking. Refer those impacted to **StandBy** (if required)
- Provide information regarding practical strategies for support. See *Useful Information for those Impacted* Eg: *What do I say, What do I do?*
- Implement strategies, where appropriate, to help manage or discourage permanent memorialisation sites. See *Memorials and Respecting Community Mourning*
- **Critical incident team review:**
 - Debrief; what is working well, what needs additional actions or support
 - Self-care see *Grief & Self-care*

Delegations:

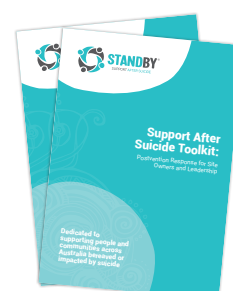
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2 WKS-6 MTHS

Continuing Postvention Support

Actions:

- Continue promoting the availability of help-seeking supports. Have one or two main posters that remain as central signposts but consider changing positions of additional signage to help sustain visibility

Ideas for signage locations:

- Main access point for the public site
- Main foyer/entry to buildings
- Restrooms/kitchenettes
- Other exits and entry points
- Social media
- Newsletters
- Self-serve access to printed handouts

See supplementary information

- Seek further support from/provide insight to local council and authorities to review public safety of site
- Continue internal communication. Provide debriefing and follow-ups as needed

NOTE: The main goal of this time is to normalise help-seeking behaviours and enable easy access to support for those who are bereaved or impacted by suicide.

NOTE: Peer Support Groups may be helpful to those who wish to engage in support from people who have Lived Experience of the impact of suicide or suicide bereavement. Speak to your local StandBy Support Coordinator for more information.

Delegations:

Notes:

LONGER TERM FOLLOW-UPS

Ongoing supports available

Actions:

- Review organisational practices, critical incident process feedback and observations
- Some individuals or community action groups may express interest in Suicide Prevention activities, such as Suicide First Aid intervention or 'Gatekeeper' training. StandBy recommends those who are bereaved or impacted by suicide wait a **minimum of 3 to 6 months after a suicide death, before participating in such training.**

For more information on suicide intervention training for community members who are not directly impacted by a public suicide, see *suicide first aid below*, or visit: www.livingworks.com.au or contact your local Primary Health Network

NOTE: This phase is to help transition the community from a postvention stage, back into a prevention mindset and build individual strength and community resilience.

Delegations:

Notes:



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