BIMM UNIVERSITY | A university for the creative industries

BIMM University Suicide Safer Strategy – revised 2024

1. Introduction

At BIMM University we are committed to creating a suicide-safer community, because we know that suicidal thoughts can be more common than openly recognised and can occur at any stage of life. We also know that the impact of death by suicide is wide-reaching and long-lasting.

Our BIMM University Suicide Safer Strategy sets out our prevention-intervention-postvention approach, and associated action plans for each area, building upon the good work that is already been undertaken across our campuses to create a supportive and compassionate environment that fosters good mental health and wellbeing for all.

We are committed to taking an integrated and holistic approach to supporting our students because we understand that suicide prevention is everyone's responsibility - everyone must play their part for this vital work to succeed.

The original planning and action setting was the result of a significant activity including webinars, workshops, meetings and consultations, bringing members together from across our communities and incorporating specialist advice and guidance from external experts. We have put collaboration at the heart of our work, ensuring multiple perspectives and voices are involved. This resulted in a careful and sensitive range of conversations focusing on prevention, intervention, and postvention that framed our work.

In line with our commitment to ensuring that our Suicide Safer Strategy is informed by evidence-based practices and expertise from across the Higher Education sector, it has been revised to take into account our learnings, as well as progress made. The National and Local contexts have also been updated, to include Berlin and Dublin which did not form part of the original Strategy.

We will continue to build a safe and supportive culture, where staff understand their role in suicide prevention, have access to the right training and support in relation to suicide and mental health, and our processes are clear, systematic, and enable appropriate response to those in crisis or distress.

BIMM University has recently signed up to the University Mental Health Charter and we have also developed a Student Wellbeing Strategy, setting out our goals for prioritising the mental, physical and emotional health of our students. Our Suicide Safer Strategy forms an important component of this work and is testament to our commitment to building a whole university approach to mental health and wellbeing. We will continue to review and prioritise areas that have the most impact on that experience and to learn and apply lessons from our own and from across the sector to make BIMM a suicide safe community.

2. Aims and Objectives

'I expect all HE providers to understand the risk factors at their institution and undertake a range of prevention activity, proactively intervene to support students at risk, and deal sensitively when a tragedy occurs...it is vital that you monitor deaths of

students studying at your institution, including undertaking rigorous investigations into deaths by suicide or suspected suicide. This includes conducting lessons learned exercises and a review of activities after a death has occurred, involving your local public health teams and bereaved families. Actions should be followed up as part of your ongoing activity to prevent further deaths.' (Letter to all HE Providers – July 2021, Rt. Hon. Michelle Donelan MP, Minister of State for Higher and Further Education)

All Higher Education Institutions were required to develop a strategy for suicide prevention as directed by a previous Minister for Higher and Further Education. This Suicide Safer Strategy intends to develop a culture across BIMM University campuses, regardless of geographical location, that takes a whole institution approach to suicide prevention through the meeting of the following objectives:

a) Developing and nurturing a culture of compassion and support where students understand their wellbeing is a priority;
b) Building community resilience and social connectedness to support the development of life skills and emotional robustness;
c) De-stigmatising suicide and developing a culture of disclosure;
d) Equipping all staff with the knowledge and confidence to identify and respond to students in distress.

3. The National Contexts

UK Context

The latest dataset on the general population from the ONS can be summarised as follows:

- In 2022, there were 5,642 suicides registered in England and Wales, equivalent (10.7 deaths per 100,000 people). This was consistent with 2021 (5,583 deaths; 10.7 per 100,000).
- Around three-quarters of suicides registered in 2022 were males (4,179 deaths; 74.1%), equivalent to 16.4 deaths per 100,000.
- While the suicide rate in under 20s is relatively low compared with older age groups, rates across all age groups under 25 have been increasing over the last decade in England. This increase is particularly apparent among females under 25 (though this increase in rate is now levelling off.)

There has been increasing concern in the UK about incidences of suicide and attempted suicide, resulting in several strategies, including:

- National Suicide Prevention Strategy for England 2023-2028 (Department of Health and Social Care, which updated the last Suicide Prevention Strategy for England, published in 2012)
  The three aims of the strategy are:
  - Reduce the suicide rate over the next five years with initial reductions within half this time or sooner;
  - Improve support for people who have self-harmed
  - Improve support for people bereaved by suicide.
- All areas of the UK now have local suicide prevention plans and suicide bereavement services, supported through the NHS Long Term Plan.

One of the most recent studies published on suicide among higher education students was released in 2022. The Office for National Statistics produced a dataset linking information from individual Higher Education Statistics Agency (HESA) data on

university students in England and Wales to the ONS mortality records. In summary it identified:

- The suicide rate for higher education students in the academic year ending 2020 in England and Wales was 3.0 deaths per 100,000 students (64 suicide deaths); this is the lowest rate observed over the last four years, although the small numbers per year make it difficult to identify statistically significant differences.
- Between the academic year ending 2017 and the academic year ending 2020, the male suicide rate for higher education students was statistically higher (5.6 deaths per 100,000 students; 202 suicide deaths) compared with female students at 2.5 deaths per 100,000 students (117 suicide deaths); this is in line with the trend seen in the general population where suicide rates are higher among males.
- Between the academic year ending 2017 and the academic year ending 2020, higher education students in England and Wales had a significantly lower suicide rate compared with the general population of similar ages.
- When compared with the general population, the suicide rate for higher education students among those aged 20 years and under and those aged 21 to 24 years showed the biggest difference, with the rate in the general population being 2.7 times higher than in students.
- Between the academic year ending in 2017 and the academic year ending 2020, first year undergraduate males had a significantly higher suicide rate at 7.8 deaths per 100,000 compared with those studying in other years (4.3 deaths per 100,000).
- However, although this latest data shows that higher education students in England and Wales have lower rates of suicides compared with general population of similar ages, as the ONS statistician comments, 'every suicide is a tragedy for those involved. [The] analysis aims to provide insight and help those who develop suicide prevention policies and initiatives among higher education students.'

Recent research highlights the prevalence of mental ill health in Higher Education, with levels of mental illness, mental distress and low wellbeing among students increasing. According to a 2023 Student Minds Research Briefing, the proportion of home students (students who normally live in the UK) who disclosed a mental health condition to their university in 2020/21 was nearly seven times as high as a decade earlier. This trend has been flagged in a number of reports including:

- Reducing the Risk of Student Suicide: issues and responses for higher education institutions (Universities UK, 2016)
- Stepchange: Mentally Healthy Universities (Universities UK, 2020)
- Suicide Safer Universities (Universities UK, 2018)
- Mental Health of Higher Education Students (Royal College of Psychiatrists, 2021)
- Student mental health in England: Statistics, policy and guidance (House of Commons Library 2023)

The Covid-19 Pandemic accelerated the increase in students experiencing mental health difficulties. Student Minds' report 'University Mental Health: Life in a Pandemic' found that:

- 74% of students said that the pandemic had negatively impacted their mental health
- 4% of students said the pandemic had negatively impacted their financial situation
- Two thirds of students said they had 'often felt isolated or lonely' since March 2020.

The Irish Context

In the Republic of Ireland, official data released by the Central Statistics Office shows the following:

- 449 people died by suicide in 2021 – 359 males (80%) and 90 females (20%)
- The overall suicide rate was 9.2 per 100,000 (for males, it was 14.9 per 100,000 and for females, it was 3.6 per 100,000).

However, it should be noted that data is reported in stages and the above statistics do not include 'late registrations' which are often added years later and can result in substantial changes.

Ireland has one of the highest rates of mental illness in Europe, with 18.5% of the population recorded as having a mental health condition such as anxiety, bipolar, schizophrenia, depression or alcohol or drug misuse (OECD, 2018).

Almost 75% of all serious mental health conditions first emerge between the ages of 15 and 25 (Kessler et al, 2005). As the vast majority of full-time undergraduate entrants fall within that age group, students are identified as a high-risk group for mental health difficulties. A 2019 study found there had been a 127% increase in students registered with disability services for mental health over the previous five years (AHEAD 2019).

However, there is no data in Ireland on the number of students who die by suicide – the Central Statistics Office does not at present report on the occupation of people who have died by suicide.

In 2020, the Irish Higher Education Authority published the National Student Mental Health and Suicide Prevention Framework, which detailed how higher education institutions can take actions that will make a difference to student mental health and suicide prevention.

German Context

According to the Berlin Suicide Prevention Centre:

- A total of 9,215 people died by suicide in Germany in 2021. In comparison, in the same period, 2,562 people died from traffic accidents, 1,826 from illegal drugs and 275 from homicide. Thus, almost twice as many people died from suicide in Germany in 2021 as from traffic accidents, illegal drugs and homicide combined.
- In 2021, the suicide rate in Germany overall was 11.1 deaths per 100,000 people. In Berlin it was 11.8 per 100,000. Suicide rates in Germany have fallen in recent years. For example, 20 years earlier – in 2001 – the suicide rate was 13.5 in Germany and 13.0 in Berlin.
- In Berlin, 70% of all those were took their own lives in 2021 were male. However, although more men than women take their own lives, suicide attempts are more frequently made by women.
- Whilst the suicide rate is highest in older age groups, among children, adolescents and young adults aged 1 to 29, suicide was the second most common cause of death in Germany in 2021 after accidents.

There is no data specifically on the number of students who die by suicide in Germany, though there are concerns about student mental ill health, mental distress and low wellbeing. A 2018 study found that 17% of students at German universities have at least one diagnosed mental health condition. A Student Wellbeing Study conducted at five universities in 2021 found that 42% of students felt down, depressed or hopeless and 45% said they felt nervous, anxious or 'on edge' several days per week.

Although Germany doesn't currently have a suicide prevention framework focussing specifically on its higher education institutions, there are initiatives to reduce suicides across the country. For example the Berlin Suicide Prevention Center was founded in 2022, and aims to reduce suicides in Berlin by one third by 2030.

4. The creative arts context

This strategy recognises the specificity of challenge within the creative and performing arts and the challenges of working with young people who are looking to make careers in the creative industries. As an article published on the Musician Union's website in October 2023 states:

From Mahler and Schumann to Cobain and Winehouse, there has long been a romanticised connection between musical talent and mental health problems. But while popular culture idolises the idea of the 'tortured genius', the truth is more insidious. Not only are we losing talented artists to suicide and overdoses, but the lives of many more musicians are being made miserable by anxiety, depression, addiction and other psychiatric conditions.

A survey conducted by the University of Westminster in 2016, commissioned by the charity Help Musicians, of more than 2,000 self-identified musicians across the UK music industry, found that that seven out of ten had suffered anxiety and panic attacks, while two thirds had experienced depression – three times more than the general population.

A 2019 study by Swedish digital platform Record Union produced similar results. The survey concluded that 73% of independent musicians struggle with mental illness. This figure climbed to 80% amongst the 18-25 age group.

This was further supported by research in 2018 by the wellbeing charity Inspire and Ulster University which highlighted that people working in all creative industries are three times more likely to suffer from mental health problems than the general population.

5. The BIMM context

Data from schools across BIMM University indicates that mental health is a growing issue mirroring the national context. Student Wellbeing teams across the Group are experiencing increased demands on their services:

- The Savanta Student Retention survey (2024) found mental health problems were cited as by far the most prominent reason as to why students leave BIMM before the completion of their studies with 40% putting it in their top three reasons.
- Data on the CPOMS system (where Student Wellbeing teams now record all wellbeing tutorials and other interactions) show that for the 2023/24 academic year, a total of 3,262 students were recorded in the system for 12,603 category incidents.
- For the 2023-24 academic year, 1,754 students reported mental health issues.
- The above figure includes 311 students who were recorded for suicidal ideation and 97 for suicide attempts.

6. Suicide Prevention Action Across BIMM University: Prevention, Intervention, Postvention

This is a Group wide strategy that is being implemented across BIMM University's nine campuses in the UK, Ireland and Germany.

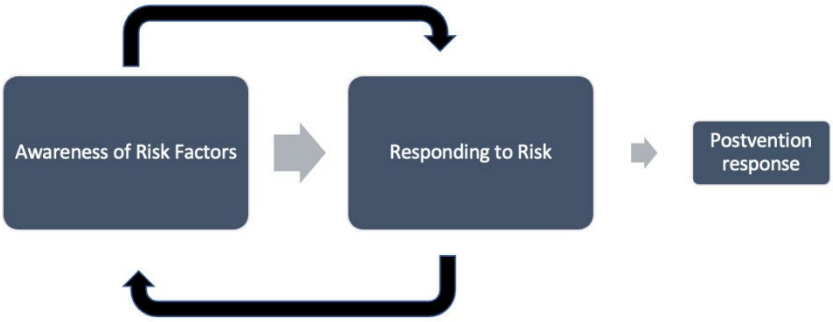
Each campus has a dedicated Student Wellbeing provision and forms relationships with local level crisis and support teams in the community. This strategy has built upon the strength of this provision but recognises that a whole organisational approach is required to develop a suicide safer community.

7. Understanding Suicide

The reasons for suicide are often complex and individual. However, we know that financial difficulties, social pressures, life transitions and academic challenges can all have a significant impact on the mental health of young people. A range of factors may be associated with an increased risk of suicide and include, but are not limited to:

- A history of previous suicide attempts or self-harm
- Suffering with a mental health disorder
- Alcohol and / or drug abuse
- Relationship and / or family breakdown
- Identifying as LGBTQ+ or being unsure about sexual orientation and gender identity
- Being bereaved or affected by suicide in others
- Debt or financial worries
- Experiencing bullying including cyberbullying
- Perfectionism and the negative impacts of social media

This strategy recognises three aspects to understanding and preventing suicide amongst students:



8. Action Plan Development

The Suicide Safer Strategy and Action Plan was developed through cross-institutional collaboration and with expert guidance provided by external consultant Professor Jo Smith OBE (Professor of Early Intervention and Psychosis, University of Worcester, and co-editor of 'Preventing and Responding to Student Suicide: A Practical Guide for FE and HE settings', published 2021.) The Strategy is owned by the Student Experience Committee, a sub-committee of the Academic Board.

It promotes a whole organisational approach throughout BIMM University and provides a framework for leadership of interventions that target whole communities with the intention to reduce risk factors and increase proactive preventative measures. The

Action Plan is divided into three areas of Prevention, Intervention, and Postvention and has identified and prioritised a range of activities that cover the following areas known to be impactful on suicide prevention:

- Strategic planning
- Training for staff and students
- Communications and signposting of available help
- Mental health service provision
- Crisis management procedures and clarity of responsibilities
- Restriction of access to potentially lethal means
- Life skills to promote resilience/successful coping
- Recording/monitoring of serious self-harm combined with a data-driven quality improvement approach

Appendices

Appendix A: Definitions

Suicide	Deliberate act of taking of one's life
Suicide attempt	A suicide attempt is a deliberate action undertaken with at least some wish to die as a result of the act. Although, the degree of suicidal 'intent' varies and may not be related to the lethality of the attempt
Suicidal feelings	Suicidal feelings can range from being preoccupied by abstract thoughts about ending one's own life, or feeling that people would be better off without you, to thinking about methods of suicide, or making clear plans to take your own life
Suicidal behaviour	A range of behaviours related to suicide and self-harm in vulnerable individuals, including suicidal thinking, deliberate recklessness and risk-taking, self-harming not aimed at causing death and suicide attempts.
Non-suicidal self-harm	**An action that is deliberate but does not include an intention to die and often does not result in hospital care. It can be used for one or more reasons that relate to reducing distress and tension, inflicting self-punishment and/or signalling personal distress to important others. Non-suicidal self-harm is a signal of underlying mental health difficulties; people who self-harm may also make suicide attempts and be at risk of suicide**

Appendix B
One page summary for staff and students

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Suicide – a Strategy to make BIMM University a safer place

Our Suicide Safer Strategy and Action Plan have been produced with our community and external experts and are designed to make BIMM University as safe as we can. Following the Universities UK Suicide-Safer Universities model, our strategy covers suicide **Prevention**, **Intervention** and **Postvention**. Taking both a whole University approach as well as more targeted interventions, it's our aim that every student has a positive and fulfilling university experience, being supported to enjoy good mental health and wellbeing.

To achieve this, we will:

- **Raise awareness, dispel myths and destigmatise talking about suicide**
  Many people experience suicidal thoughts and feelings. Raising awareness aims to catch people before they start planning a suicide or attempt it

- **Promote and encourage students and staff to undertake suicide awareness training**
  Awareness training will help our students and staff to recognise the signs of suicidal ideation, and know where to go for support

- **Encourage early help-seeking behaviour**
  Our students must know about the support services available and how to access them

- **Respond to those at risk**
  Effectively respond through the development and implementation of clear pathways for those requiring support

Suicides are rare but all of us can play a key role in trying to prevent them.

Together we can understand and do all we can to prevent suicide, as well as support those who are deeply affected by cases of suicide. Learning about it, talking about, and knowing what to do when someone needs support are key.

What can I do?

Please undertake one of these free Zero Suicide Alliance online training modules. It will take 20 minutes at most and could help save a life.

For students - University student suicide awareness training (zerosuicidealliance.com) (insert QR code)

For staff – 20-minute suicide awareness training (zerosuicidealliance.com)

Or a shortened (5/10 minutes) version - 5-10 minute suicide awareness training (zerosuicidealliance.com) (insert QR codes)

The Charlie Waller Trust have published a comprehensive guide for university staff on talking about suicide which you can download here:
https://www.charliewaller.org/media/2gwjyid2/universities-suicide-prevention-27-01-2022.pdf

Action Plan

The following were identified as the recommended actions through the original consultative process (Section 3) but have been updated to show progress made, and a number of new actions have been added. Implementation and further development will be overseen by the Student Wellbeing Strategy Group, which reports into Student Experience Committee. The Strategy and Action Plan will be reviewed on an annual basis to ensure actions remain relevant, are completed in a timely manner and that measures of success are appropriate.

They are listed under the headings of the three themes: prevention, intervention and postvention.

Prevention

Suicide prevention is a collection of efforts to reduce the risk of suicide. Suicide is often preventable, and the efforts to prevent it may occur at the individual, relationship, community or society level. Many people experience suicidal thoughts and feelings. Prevention aims to catch people before they start planning a suicide or attempt it. It requires a clear approach, aiming to change the culture using a whole-university approach.

	Action	**Intended Outcome**	**Responsibility**	**Progress 2024**
1	Schedule conversations about suicide within start of year induction events.	Destigmatising suicide and offering positive messages regarding help available, someone students can talk to, how to spot signs of concern in their peers and how to support themselves.	Campus Student Wellbeing teams	Campus Student Wellbeing teams alerted students to BIMM's 'Suicide Safer' approach as part of their Welcome activities in September 2024. They also encouraged students to complete a short on-line module on suicide prevention created by Zero Suicide Alliance, specifically developed for university students.
2	Create an internet browser landing page detailing support resources for all students using student wifi in the buildings.	Information is easily signposted, and students and staff know where to find relevant support.	Central IT team	Following discussions with the Director of Technology, it has been agreed that an internet browser landing page may not be particularly useful as most students use mobile devices to access student wifi. Alternative approaches are being considered such as developing a Sharepoint (or webpage) page to highlight BIMM's Suicide Safer approach, and to link to support available. Posters with QR codes with links to this page

				could then be put up around campuses, including on toilet doors.
3	Implement an anonymous reporting form to inform the campus Student Wellbeing teams of student welfare concerns.	Processes for students reporting concerns about their peer are clear and simple to navigate, and students understand it is safe to do so.	Central IT team and Student Wellbeing teams	Following discussions with the Director of Technology, it is now proposed that, rather than an anonymous form which has its limitations, we should develop an 'advice if you're worried about a student' webpage, which gives clear information about how to get urgent help and how to contact the campus Student Wellbeing team.
4	Undertake initial review of BIMM premises and IT infrastructure within the framework of suicide prevention and risk assessment and offer training for Campus & Technical Services teams in restricting access to high-risk locations. Adapt existing estates checks to include specific section on suicide prevention.	A suicide-safe environment is promoted, suicide risk is understood, and processes to limit means to access is embedded in existing procedures.	Campus Building & Technical Services Managers	The Campus Monthly H&S Inspection on the ECO system has been updated and now includes the questions: • Are there any high risk areas of the campus environment which could be easily accessed by someone with suicidal intentions? • Are areas of high risk/restricted access such as plant rooms, roofs, COSHH and equipment cupboards signed and locked when not in use? The Associate Director of Campus & Technical Services is attending a UMHC Insight Sharing session in October 2024, which looks at the new Suicide Safer Guidance, Reducing Access to Means, and will share any findings.
5	Consider local known suicide hotspots and work with relevant agencies to	Positive engagement with local organisations, building effective networks to create suicide safer communities.	Campus Student Wellbeing teams	This is largely covered through the work of the local suicide prevention boards and will be kept under review.

	help reduce the risk of suicide to our students.			
6	Student Wellbeing Managers (or nominee) to request membership of local suicide prevention boards.	Positive engagement with local organisations, building effective networks to create suicide safer communities.	Student Wellbeing Managers	Where these exist, campus Student Wellbeing Managers have requested membership, and are attending meetings/receiving updates.
7	Develop a Group-wide 'wellbeing reminders and tips' text alert calendar (e.g. signposting to support teams, reminders of self-care, and general messages of support) to be sent to all students across the group, throughout the academic year.	Support and wellbeing approaches are normalised and support the development of a suicide safer community.	Central Marketing and Communications team and Head of Student Wellbeing	This is being done at a local level, but more could be developed centrally. This will be picked up through the work of the UMHC project group and the Student Wellbeing Strategy.
8	Introduction of wellbeing ambassadors	The role promotes and co-ordinates activities intended to promote positive dialogue regarding suicide prevention (through, for example, producing a campus wellbeing newsletter and creative initiatives such as yarn bombing, stone painting etc).	Student Wellbeing Managers & Student Events & Community Managers	This needs to be progressed and will be picked up through the UMHC and Wellbeing Strategy work.
9	Develop a Group-wide calendar and plan for standardised wellbeing weeks and nationally recognised days (e.g. University Mental Health	Engagement with a wide range of social demographics and related national initiatives promote understanding of differentiated suicide risks.	Central Marketing and Communications team and Head of Student Wellbeing	This is being done at a local level, but not yet progressed at University-wide level. This can be picked up through the work of the UMHC project group.

	Day, IWD, disability awareness)			
10	Develop and disseminate training in an SOS procedure for staff in the event of a student presenting with suicidal plans whilst on campus.	Staff are skilled and confident in responding to crisis, and can do so according to their role and responsibility.	Head of Student Wellbeing and Student Wellbeing Managers	A Student of Concern Policy and Procedure has been developed which includes a section on 'imminent risk to self' where a student is in immediate danger of harming themselves. Once approved, this Procedure will be disseminated across the University. In addition, the Head of Student Wellbeing and Student Wellbeing Policy Manager are working with the Learning & Development Manager to progress proposals for staff training around suicide prevention.
11	Sign up to free organisational membership of Zero Suicide Alliance	Demonstrates institutional commitment to challenging stigma, and raising awareness of suicide and suicide prevention.	Head of Student Wellbeing	This opportunity has recently been identified and will be reviewed and progressed.
12	Promote Zero Suicide Alliance training modules to staff and students	Supports a whole institutional approach to suicide prevention	Head of Student Wellbeing and Head of Internal Communications	Zero Suicide Alliance bitesize training sessions were promoted to staff as part of World Suicide Prevention Day (Sept 2024) and a student version was promoted by campus Student Wellbeing teams during Welcome 2024. In addition, a one page summary poster has been created, setting out the University's Safer Suicide Strategy and links to ZSA training (see appendix B).

13	Participate in national suicide prevention campaigns, such as Baton of Hope	Demonstrates institutional commitment to challenging stigma, and raising awareness of suicide and suicide prevention.	Head of Student Wellbeing; Student Wellbeing Managers; Events teams	Brighton and Birmingham campuses were involved in the first Baton of Hope tour in 2023, providing student performers as part of the UK's largest ever suicide prevention initiative. The next event is taking place in 2025 and we will explore opportunities to participate in this and other campaigns.

Intervention

Suicide intervention is a direct effort to prevent a person from attempting to take their own life intentionally. Intervention looks at how BIMM can respond effectively through targeted evidence-led interventions when individuals disclose they are having suicidal thoughts, feel 'suicidal' or are 'in crisis'.

	Action	**Intended Outcome**	**Responsibility**	**Progress**
1	Establish two reporting tools (one aimed at internal staff and a second aimed at external parties such as stakeholders, agencies, friends or relatives of students) who may wish to pass on reports of concerning behaviour or warning signs in students. Utilise Banner CRM Advise from Sept 2023 for internal use. Create a "button" on bimmstudents.com for external use and interim internal use.	Staff and external parties have an easily accessible tool to report concerns and do not hold onto information unnecessarily.	Central IT team and Student Wellbeing Managers	All staff now have access to CPOMS to report any concerns about student wellbeing. Further work is being done to progress work on a reporting tool for external parties (see 3 above) through the UMHC and Student Wellbeing Strategy work.

2	Implement safety plan template for Student Wellbeing staff across the Group to implement when students present at risk.	Ensures Group-wide, standardised approach to students at risk of suicide.	Head of Student Wellbeing & Student Wellbeing Managers	All Student Wellbeing teams use a safety plan when students present at risk. A standard template is being developed.
3	Develop template out of office and out of hours auto response emails plus email signatures for use by all staff. To include information on local and national crisis support services and 24/7 services. SHOUT text service etc. Adapt templates for different departments.	Offers out of office hours support to anyone emailing BIMM staff in crisis at weekends or evenings. Reaffirms boundaries and student expectations of university staff support.	Head of Student Wellbeing to develop with SWMs. Template to be shared with HoDs to disseminate to their teams for roll out	This is being progressed through the UMHC and Student Wellbeing Strategy work.
4	Development of a clear policy around confidentiality and consent to share with a student's emergency contact.	Clear guidance adopted by all in the event of a possible suicide or serious self-harm risk or attempt.	Head of Student Wellbeing; Student Wellbeing Policy Manager	A new Trusted Student Contact policy has been introduced and students are now required to nominate at least one Trusted Emergency Contact as part of the enrolment process. The policy makes clear the circumstances in which the University may use Trusted Contact details to share information, and the process for doing so.
5	Guidance for security guards via a pocket-sized card, so that they know who to contact out of hours if they become concerned about someone's wellbeing. E.g. Samaritans, crisis team, 111/999 etc.	All members of the BIMM community have access to the right information to develop a suicide safer community.	Information Hub and Student Wellbeing teams	All Staff (and student ID) cards now have helpline numbers on the back. In addition, a Student Crisis Action Plan flowchart has been created and distributed across campuses and is included in the new Student of Concern Policy & Procedure.
6	Print helpline numbers and support service information	All members of the BIMM community have access to the	Information Hubs and Student Wellbeing teams	Student ID cards now have helpline details on the back.

	on the back of lanyard ID cards - for all students and staff.	right information to develop a suicide safer community.		
7	Deploy R;pple interceptive software to all available devices connected to BIMM wifi networks.	Ensure that BIMM digital spaces support a suicide safer space: R;pple presents a visual prompt when a person searches for harmful key words or phrases relating to self-harm or suicide.	Central IT Team	The Director of Technology has confirmed that R;pple is now deployed across the BIMM network.

Postvention

Suicide postvention is an organised response that occurs in the aftermath of a death by suicide or suspected suicide. It provides crisis and support interventions to those affected by a suicide. Having a plan in place, agreed templates for communications and a nominated lead ensures an effective, appropriate and timely response.

	Action	**Intended Outcome**	**Responsibility**	**Progress**
1	Establish a Postvention Response Team (PVT) per campus to include an identified named Lead and Deputy who will lead and coordinate any postvention response and the work of the PVT. Ensure PVT have clear roles and responsibilities and a template action plan / flow chart for use in the event of a suspected student suicide.	Roles and responsibilities are clearly understood, and a process can be deployed efficiently and effectively to support the BIMM community.	Head of Student Wellbeing; Student Wellbeing Policy Manager	A Death of a Current Student Policy and Procedure has been produced. This details roles and responsibilities and includes templates and checklists in the event of a student death.
2	Marketing and Communications team, in conjunction with Student Wellbeing and Exec team members, to create a	Clear communication protocols are established, allowing for effective crisis and after effect communication.	Marketing and Communications Team, Student Wellbeing Policy Manager	This has been covered by the development of a Death of a Current Student Policy & Procedure, which

	clear communications strategy following suspected student suicide.	This should include key points on internal and external comms, press and social media management, tribute, memorial, and legacy.		includes email templates and section on the role of the Chief Marketing Officer (or nominee), as well as a Protocol for cases of suspected suicide which links to the Samaritans Step by Step service which provides information and support to universities after a suspected death by suicide.
3	Targeted bereavement support offered to students and staff, to include peer support group workshop, allocation of an emergency budget to enable additional counselling support and specific outreach to those who may be suicidal themselves plus close friends/housemates of the person who has died by suicide.	Recognition of the wider impact death by suicide can have on communities, and to ensure the appropriate range of support is available to those affected.	Head of Student Wellbeing; Student Wellbeing Policy Manager	This is covered in the Death of a Current Student Policy & Procedure.
4	Develop a protocol and guidance on appropriate, timely and sensitive communication between BIMM and the family of the deceased. Ensure an identified lead for ongoing, long-term family liaison to avoid duplicated contact with the family and to give families a single point of contact.	Clear communication protocols are established, minimising distress caused by inadequate communication processes.	Head of Student Wellbeing	This has been covered by the development of a Death of a Current Student Policy & Procedure.
5	Design and implement training and support package for all PVT members. This should	Training is fit for purpose and targeted, allowing for professional response to the	People team; Learning & Development Manager	MHFA training is now more widely available across the University and ad hoc clinical supervision is

	include inquest protocol training, MHFA training and ad hoc clinical supervision.	complex requirements following a death by suicide.		available, as required. The Death of a Current Student Policy & Procedure includes links to Universities UK guidance on giving evidence at inquests, and also refers the People team liaising with relevant managers in the event of a student death to ensure that staff wellbeing is considered.

General actions

The following actions span all three areas mentioned above and are integral to the success of this strategy.

	Action	**Intended Outcome**	**Responsibility**	**Progress**
1	Review of recruitment and onboarding of staff: adapt all job descriptions to incorporate a statement regarding BIMM's whole institute approach to suicide prevention; inclusion of campus -specific suicide prevention information within staff induction and a requirement for all staff (freelance and employed) to complete standard, mandatory training in suicide awareness to be delivered online (for example via Educare) and refreshed regularly.	All staff members of the BIMM community are aware of their responsibilities in creating a suicide safer community. Staff feel supported in delivering upon their relevant responsibilities and are more likely to have an effective impact.	People Team; Learning & Development Manager	Details of Zero Suicide Alliance's free online training was shared recently with all staff as part of World Suicide Prevention Day.
2	Development of additional, tailored training for identified staff groups dependent on role	Targeted CPD provides enhanced training to ensure the right skills are developed	Learning & Development Manager; Head of Student	An additional 45 Mental Health First Aiders have recently been trained across the University. Targeted

	and level of student interaction. Additional to standard mandatory all-staff training. For example, MHFA, ASIST, boundary training etc	aligned with the appropriate roles and responsibilities.	Wellbeing; Student Wellbeing Policy Manager.	training needs for specific roles are currently being considered, to include ASIST for Student Wellbeing Advisers, as well as an option for Buildings & Technical teams; Info Hubs and nominated attendees from central teams.
3	Undertake an audit of existing Student Support Officer provision in each college to assess staff to student ratios, ensuring best and safe practice regarding levels of risk and duty of care for both students and staff.	Data and evidence is created and analysed to understand optimum support requirements across the group. Resource requirements are designed in relation to this evidence and implemented in a targeted and focused way.		This was done as part of the Project Arrow restructuring and a standard operating model has been rolled out across Student Wellbeing teams.
4	Connect with local halls of residence providers to establish communication pathways in the event of student mental health crisis, significant self-harm or suspected suicide.	Each campus develops a positive relationship with the management of residence settings in order to clearly understand what safety measures already exist and who are the main points of contact in each context.	Student Wellbeing teams	Some progress has been made at a campus level but further work will be done as part of the UMHC and Student Wellbeing Strategy work.
5	Ensure there is a sufficient number of internal Mental Health First Aid trainers to train other staff members in MHFA.	Resource is appropriately deployed, with staff feeling confident in their skills to respond to crisis scenarios.	People Team; Learning & Development Manager	Two members of staff are currently in the process of becoming qualified MHFA trainers. When qualified, there will be a rolling programme of MHFA offered across the University.