



# Policies and procedures relating to suicidal behaviour in aged care settings

This document provides guidance on the elements that need to be included in the policies and procedures relating to suicidal behaviour in aged care settings. It does not, however, detail the content of the policies and procedures.

## Identifying the risk

Staff at all levels should be able to have a conversation with any client or resident where there is any suspicion of suicide, to determine the risk for this client or resident and to respond appropriately.

## Caring for staff

All aged care organisations should provide support for staff involved in any incidents or involved in any difficult conversations with clients and residents.

Staff who have been involved in these incidents should be able to access support from their manager as well as through Employee Assistance Programs.

Managers should encourage staff to access support, as staff may underestimate the impact of these events on their wellbeing.

## Supporting staff when a client or resident suicides

A client's or resident's death by suicide will have a significant impact on staff. Aged care services need to consider the impact on staff including:

- direct care
- domestic
- registered and clinical.

Support may come from:

- a direct/line manager
- a formal debriefing provided by counselling services
- facilitating a referral for individual counselling.

## Support for other clients and residents

It is important to consider that if a client or resident has died by suicide, other clients or residents may also be impacted by their death and the nature of their death.

It is important that counselling is made available to other clients and residents as well.

## Caring for families and friends

The stress of living with someone who is depressed, and at risk of suicide, is enormous and can create health issues for family members. Staff working in aged care need to be supportive of family members in this situation and be aware of the potential for their grief and loss if the family member has ended their life.

Family members are likely to be shocked, feel guilty or blame themselves; and the suicide of their family member may be a trigger for their own mental health issues.

The family needs support from their General Practitioner (GP) during this period and staff need to ensure that the GP is aware of their situation.

Aged care services can hold a family meeting to support family and friends. Ensure relevant information and support is available in printed format for families and friends to take away with them.

## Useful resources and support

*The beyondblue guide for carers* available at [www.beyondblue.org.au/resources](http://www.beyondblue.org.au/resources)

*beyondblue* Support Service – [www.beyondblue.org.au/get-support/get-immediate-support](http://www.beyondblue.org.au/get-support/get-immediate-support)

Carers Australia – [www.carersaustralia.com.au/how-we-work/national-programs/carer-advisory-service/](http://www.carersaustralia.com.au/how-we-work/national-programs/carer-advisory-service/)

Counselling programs – [www.carersaustralia.com.au/how-we-work/national-programs/national-carer-counselling-program/](http://www.carersaustralia.com.au/how-we-work/national-programs/national-carer-counselling-program/)  
[www.carersaustralia.com.au/how-we-work/national-programs/mental-health-carer-counselling/](http://www.carersaustralia.com.au/how-we-work/national-programs/mental-health-carer-counselling/)

Coroner's courts –  
In each state and territory, Coroner's courts provide counsellors who are available to provide information and support to relatives and close friends of people whose deaths are being (or have been) investigated by a coroner.

### Reportable deaths: protocols when a client or resident dies by suicide

Reportable deaths are investigated when the cause of the person's death is not due to disease or a medical condition. This will include clients and residents who have died by suicide.

If a medical practitioner is not present, one will need to be called. They will then need to contact the Coroner's office.



### Use of safety plans

A safety plan is a personalised tool to help clients and residents cope with suicidal thoughts and stay safe during experiences of suicidal crises. Safety plans should be developed for any client or resident who has experienced suicidal behaviour.

Safety plans are normally developed by more senior staff in conjunction with the client or resident and their family and/or support people named in the plan. Staff who work directly with that client or resident should also be involved in the development of a safety plan. The plan should be displayed in an area that is accessible to the client/resident and staff.

The client or resident may need staff support and help to implement strategies from their safety plan. For example, it may be that they contact their main support person if they are starting to feel distressed. Staff may need to support the client or resident to make contact with their support person.

For more information on safety plans visit:

[www.beyondblue.org.au/safety-planning](http://www.beyondblue.org.au/safety-planning)

### Where to find more information

#### *beyondblue*

[www.beyondblue.org.au](http://www.beyondblue.org.au)

Learn more about anxiety, depression and suicide prevention, or talk through your concerns with our Support Service. Our trained mental health professionals will listen, provide information and advice, and point you in the right direction so you can seek further support.

☎ 1300 22 4636

✉ Email or 💬 chat to us online at [www.beyondblue.org.au/getsupport](http://www.beyondblue.org.au/getsupport)

#### *mindhealthconnect*

[www.mindhealthconnect.org.au](http://www.mindhealthconnect.org.au)

Access to trusted, relevant mental health care services, online programs and resources.

Donate online [www.beyondblue.org.au/donations](http://www.beyondblue.org.au/donations)