

NON-SUICIDAL SELF-INJURY AND SUICIDE POSTVENTION POLICY (ON COLLEGE CAMPUS)

Date Implemented5th December 2024		
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Approved By	School Council	
Consultation is Mandatory	Date: 4th December Consulted: School Council	
Next Scheduled Review Date	November 2025	



Help for non-English speakers If you need help to understand this policy, please contact Rushworth P-12 College on (03) 5856 1230

EMOTIONAL SAFETY

This resource refers to the topics of self-harm and suicide and may elicit an emotional response as you engage in the material. It is important to recognise when you become triggered by the content of this resource and prioritise your mental health and wellbeing needs first and foremost.

PURPOSE

This document provides a structured framework aimed to assist in the college delivering a coordinated and consistent response to incidents of non-suicidal self-injury and suicide/attempted suicide that occur at the college, or within the college community.

The Principal and staff have a duty of care to take such measures as are reasonable in the circumstances to protect students from risks of injuries that are reasonably foreseeable. Duty of care is non-delegable and may extend beyond school hours and the college grounds.

AIM

This policy's aim is to provide:

- Support to all vulnerable and/or affected students and staff in a supportive and timely manner.
- A clear outline of the roles and responsibilities within the college.
- Clear direction of actions that are to be taken along with a time frame for these actions to occur.

DEFINITIONS AND KEY TERMS

The below definitions and key terms listed are intended to enhance confidence and understanding of the signs that may indicate a student is at risk;

- Suicide: Refers to the act of intentionally causing one's own death.
- Suicide Attempt: Refers to an act carried out by an individual with the intention to end their life (but where death does not occur). A suicide attempt is an act of self-harm with the intended outcome being death.
- Suicidal thoughts/ideation: Refers to thoughts about how to kill oneself. Suicidal thoughts range in intensity
 and frequency from fleeting to more concrete, well thought out plans for killing oneself, or complete
 preoccupation with self-destruction.
- Self-harm or Non-suicidal self-injury (NSSI): Refers to people deliberately hurting their bodies with the
 intended outcome being to cope with the experience of distress. Intent is the defining factor differentiating
 a suicide attempt from self-harm. For some young people, engaging in self-harm will be a once-off and for
 others it will become a pattern of behaviour. Self-harm is a coping strategy in response to intense emotional
 pain or being overwhelmed by negative thoughts, feelings or memories. NSSI can present in many ways,
 including, but not exclusive to, cutting, burning, picking at wounds or scars, hitting oneself, deliberating
 overdosing on medications, drugs or other harmful substances.

GUIDELINES FOR ACTION

Emergency Response Team (ERT)

The ERT for incidents covered in this policy, will consist of the following members.

- Principal
- Assistant Principal
- Lead Teacher(s)
- Social Worker
- Mental Health Practitioner
- Business Manager

If it is not reasonable/possible for any of these ERT members to be involved, then the remaining members will form the team.

The role of the ERT is to coordinate the response to the suicide, suicide attempt or NSSI. This will include coordinating staff briefings and to distribute action plans.

Immediate Action Required/Response Checklist in the case of:

- At no time should a student who self-injures or attempts suicide on College grounds be left alone at any time, or left with another student.
- In the tables below, a first responder refers to the main staff member who is on the scene of the incident first (staff member walking past or called over by another student etc).

Suicide	(at the	College):

TASK/ACTION:	COMPLETED BY:
Confirm and establish facts as quickly as possible, before	All ERT members
enacting the College Emergency Management Plan	
Implement the College's Emergency Management Plan	Principal
(EMP)	
Assess and ensure safety of all staff and students	All ERT members
Implement first aid and/or seek medical assistance if	First responder, then seek support from Social Worker
appropriate	and Mental Health Practitioner
Contact 000 if necessary	Other ERT members or first responder
Restrict staff and student access (physical and by sight)	
to the area where the incident has occurred	
Provide support to staff and students who may have	All ERT members
witnessed the incident – including supervising any	All ERT Hembers
witnesses of the incident (see below point regarding	
recording evidence)	
Supervise students away from the area	Year level coordinators
Record evidence:	
 Preserve and secure the scene where the 	
incident occurred	
 Preserve and make record of any physical or 	
documentary evidence	All ERT members
 If multiple students have witnessed the incident, 	
ensure that they are separated to maintain the	
integrity of evidence until they have spoken	
with police – providing support during this time	
Report for support to be completed by principal or	
delegate.	
 If 000 are contacted the principal or delegate 	
must undertake an initial severity rating of the	
incident to determine the applicable reporting	
requirements.	
 In the event of a suicide of the student, the 	
severity rating will be recorded according to the	Principal or delegate
Schools Incident Management System (SIMS)	
and must be reported to the ISOC on 1800 126	
126 as soon as practicable to activate additional support from area and regional staff	
 support from area and regional staff. Where possible, it is important to engage with 	
where possible, it is important to engage with	
SSS before communicating with the school	
community about an incident.There are checklists attached to this policy as Appendix	

- actions that should be taken in order for the aims to be achieved.
- There are also scripts and letters to ensure that information is communicated effectively and respectfully throughout the college community.
- All decisions, actions, phone calls, significant discussions and correspondence must be documented clearly and precisely. This documentation should be given to the Principal at the end of the day before the ERT meets. The checklists will assist in this task.
- When the name of a staff member or role changes, the Appendix will be updated without the policy needing to be reviewed.

APPENDIX LIST:

Appendix A – Principal Class Immediate & 24 hr Response Checklist Appendix B - ERT Immediate & 24 hr Response Checklist Appendix C – Lead Teachers Immediate & 24 hr Response Checklist Appendix D – Business Manager's Immediate & 24 hr Response Checklist Appendix E – Draft Letter to Parent/Caregivers Appendix F – Draft script to read to students Appendix G – Draft scripts for Front Office staff Appendix H – Draft script for following up on student absences Appendix I – Individual Staff Responsibilities details Appendix J – 48 to 72 hour follow up Appendix K – In the first month

Appendix L - Longer term

Attempted Suicide (at the College):

See ERT suicide response.

Non-Suicidal Self-Injury/Self-harm (Non-Emergency):

NON-ERT STAFF MEMBER RESPONSE:

If a student self-injures at the College (in the classroom or in the outside areas) it is important that the staff member responding engages in a safe response and does not leave the student alone (or in the company of another student).

If possible, the respondent should move the student to a safe environment away from their peers, and should seek support from the Social Worker or Mental Health Practitioner.

 If not possible to relocate the student, the respondent should ensure that they are supported by another staff member to cordon of the area from other students.

Whilst waiting for the assistance of mental health supports, staff should only engage in conversation that is not victim-blaming and provides safety for the student.

If staff do not feel comfortable to engage with the student, they do not have to.

At no time should the staff member touch or provide first-aid to the students wounds.

TASK/ACTION:	COMPLETED BY:
Where possible move the student to a safe	Social Worker and/or Mental Health Practitioner
environment. Engage in conversation in a way that	
respects their privacy and reduces the impact on other	
students and staff.	
Request that the student hand over any instrument that	Social Worker and/or Mental Health Practitioner
may assist them to self-harm. If they refuse, contact the	
appropriate emergency services (000) to ensure safety	
of the student and staff.	
***Do not try to disarm the student against their will as	
this may result in you being injured as well.	
For more information, see: Restraint and Seclusion:	
Policy.	
If possible, arrange for the student to apply first aid	Social Worker and/or Mental Health Practitioner
immediately under supervision of an appropriate staff	
member if required. It is beneficial to encourage the	
student to apply first aid, such as dressing wounds	
themselves, as this encourages self-care rather than	
self-harm. Encouraging the student to cover their	
wounds, regardless of severity, is recommended to	
reduce distress among peers.	
Notify the ERT. (It is a requirement of the Department	First responder, Social Worker or Mental Health
that all incidents of self-harm, suicidal ideation and	Practitioner
attempted suicides are reported to ISOC 1800 126 126).	
Contact parents or carers unless circumstances indicate	Principal
that this should not occur (e.g. safety considerations).	
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Seek advice and professional assistance from SSS.	Principal class
Additional support and information also available from	
relevant child and adolescent mental health services.	
Follow up on the safety and wellbeing of students that	Principal class, Wellbeing and Engagement Coordinator,
may have witnessed or reported the incident (seek	Social Worker or Mental Health Practitioner
support to do this if required).	
An appropriately trained staff member or professional	Social Worker or Mental Health Practitioner
(e.g. a MHP, staff trained in youth mental health, SSS	
psychologist or social worker, Doctors in Secondary	
Schools Program GP, Secondary School Nurse, an	
external mental health professional, GP or hospital-	
based doctor or psychologist) should undertake a	
suicide risk assessment.	
If no suitably trained staff are available, the student's	
parents or carers should be directed to have an	
assessment completed at hospital or by a community-	
based practitioner immediately.	
Make recommendations for referral for mental health	Principal class, Wellbeing and Engagement Coordinator,
support.	Social Worker or Mental Health Practitioner
Debrief with all staff involved (make supports known) as	Principal class, Wellbeing and Engagement Coordinator,
well as any students who were a witness to the event.	Social Worker or Mental Health Practitioner

Non-Suicidal Self-Injury/Self-harm (Emergency Assistance Required):

NON-ERT STAFF MEMBER RESPONSE:

If a student self-injures at the College (in the classroom or in the outside areas) it is important that the staff member responding engages in a safe response and does not leave the student alone (or in the company of another student).

If possible, the respondent should move the student to a safe environment away from their peers, and should seek support from the Social Worker or Mental Health Practitioner.

 If not possible to relocate the student, the respondent should ensure that they are supported by another staff member to cordon of the area from other students.

Whilst waiting for the assistance of mental health supports, staff should only engage in conversation that is not victim-blaming and provides safety for the student.

If staff do not feel comfortable to engage with the student, they do not have to.

At no time should the staff member touch or provide first-aid to the students wounds.

TASK/ACTION:	COMPLETED BY:
Call 000 immediately.	All ERT members
Where possible move the student to a safe environment. Engage in conversation in a way that respects their privacy and reduces the impact on other students and staff.	Social Worker and/or Mental Health Practitioner
Request that the student hand over any instrument that may assist them to self-harm. ***Do not try to disarm the student against their will as this may result in you being injured as well. For more information, see: Restraint and Seclusion: Policy.	Social Worker and/or Mental Health Practitioner
If possible, arrange for the student to apply first aid immediately under supervision of an appropriate staff member if required. It is beneficial to encourage the student to apply first aid, such as dressing wounds themselves, as this encourages self-care rather than self-harm. Encouraging the student to cover their wounds, regardless of severity, is recommended to	Social Worker and/or Mental Health Practitioner

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reduce distress among peers.	
Notify the ERT. (It is a requirement of the Department	First responder, Social Worker or Mental Health
that all incidents of self-harm, suicidal ideation and	Practitioner
attempted suicides are reported to ISOC 1800 126 126).	
Contact parents or carers unless circumstances indicate	Principal
that this should not occur (e.g. safety considerations).	
Seek advice and professional assistance from SSS.	Principal class
Additional support and information also available from	
relevant child and adolescent mental health services.	
Follow up on the safety and wellbeing of students that	Principal class, Wellbeing and Engagement Coordinator,
may have witnessed or reported the incident (seek	Social Worker or Mental Health Practitioner
support to do this if required).	
An appropriately trained staff member or professional	Social Worker or Mental Health Practitioner
(e.g. a MHP, staff trained in youth mental health, SSS	
psychologist or social worker, Doctors in Secondary	
Schools Program GP, Secondary School Nurse, an	
external mental health professional, GP or hospital-	
based doctor or psychologist) should undertake a	
suicide risk assessment.	
If no suitably trained staff are available, the student's	
parents or carers should be directed to have an	
assessment completed at hospital or by a community-	
based practitioner immediately.	
Make recommendations for referral for mental health	Principal class, Wellbeing and Engagement Coordinator,
support.	Social Worker or Mental Health Practitioner
Debrief with all staff involved (make supports known) as	Principal class, Wellbeing and Engagement Coordinator,
well as any students who were a witness to the event.	Social Worker or Mental Health Practitioner

FURTHER INFORMATION / POLICY LINKS

It is recommended that all staff be familiar with and review the below policies and resource guides.

<u>https://www.education.vic.gov.au/PAL/responding-to-self-harm-including-suicide-attempts-in-students-a-guide-to-assist-secondary-schools.pdf</u>

https://www.education.vic.gov.au/PAL/responding-to-the-suicide-of-a-secondary-student-guidelines.pdf https://www2.education.vic.gov.au/pal/self-harm-attempted-suicide-response/policy https://www2.education.vic.gov.au/pal/suicide-response-postvention/policy

Further Information

The following phone numbers will assist in making contact with these essential services as and when appropriate.

CONTACT NAME:	CONTACT NUMBER:
Emergency Services	000
Rushworth Police Station	(03) 5856 1000
Waranga Medical Centre Goulburn	(03) 5851 8400
GV Health Waranga	(03) 5851 8000
Child Protection	1300 664 977 (13 12 78 after hours)
Psychiatric Services Triage	1300 650 172
CAMHS	(03) 5440 6506 (call triage if after hours)
Headspace	Shepparton (03) 5823 8800 Bendigo (03 5806 1400 Echuca (03) 5485 5048
Bendigo Community Health Services	(03) 5430 0500

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Centre Against Sexual Assault	Shepparton (03) 5831 2343 Bendigo (03) 5441 0430
Centre for Non-Violence	Bendigo (03) 5430 3000
The Orange Door	Shepparton 1800 634 245 Bendigo 1800 512 359

- There are checklists attached to this policy as Appendices that outline the immediate and longer-term actions that should be taken in order for the aims to be achieved.
- There are also scripts and letters to ensure that information is communicated effectively and respectfully throughout the college community.
- All decisions, actions, phone calls, significant discussions and correspondence must be documented clearly and precisely. This documentation should be given to the Principal at the end of the day before the ERT meets. The checklists will assist in this task.

When the name of a staff member or role changes, the Appendix will be updated without the policy needing to be reviewed.

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APPENDIX A: PRINCIPAL CLASS IMMEDIATE & 24-HR RESPONSE ACTION PLAN CHECKLIST

Document all	information received and action	ıs undertaken.		
🗖 Liaise w	ith police and obtain / provide accu	irate details of incid	lent.	
0	Police Officer Name:			
0	Badga No :			
	Station and Phone No.:			
Task complete	d by:	at	am/pm	
_				
	h contact with DET			
	Contact DET Security Services Uni			
0	Seek additional Wellbeing suppor			
	 Rick Simms 5440 3152 			
0	Speak with DET Media Unit Ph. 9	637 2871 (available	24/7)	
Task complete	d by:	at	am/pm	
Call im	mediate meeting of the ERT.			
Task complete	d by:	at	am/pm	
	eing and Engagement Coordinator) nominated:			
0	community.	the family feels on inwilling to speak	comfortable sharing with the college with the college, identify an alterna or student)	tive
0	Family Contact:			
0	Phone No.:			
0	Relationship to Student:			
Task complete	d by:	at	am/pm	
	e front office administration staf iquiries (both general calls and		rdised scripts to manage incoming c a).	alls
Task complete	d by:	at	am/pm	
🗋 Organi	se staff briefing			
	Inform all staff before holding stu	dent briefings wher	e possible.	
-	Make EAP information available.			
0		l be the sole liaison	person with media and what to do if	
0	approached.			

- Ensure staff are aware of who will be the sole liaison person with the family. If not yet known, advise that this will be shared as soon as decision has been made.
- Advise staff of arrangements for student briefing.
- \circ $\;$ Advise staff of the support available to them in the college at this time.
- \circ $\;$ Advise staff of the arrangements for students in the college at this time.
- Advise staff of the arrangements for the teaching and learning program on this day.

Ongoing support in having students remain under direct supervision of staff at all times by completing regular walks around the college throughout the day.

APPENDIX B: ERT IMMEDIATE & 24-HR RESPONSE ACTION PLAN CHECKLIST

Document all information received and actions undertaken	۱.
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□ Collate list of highly affected/vulnerable staff and students to ensure these people are monitored and given priority support.

Task completed by: ______ at _____ am/pm

□ Liaise with extra DET support (SSSOs) and external support (CAMHS, headspace, EAP, Child Protection) to ensure supports are being provided and that their network of staff are alerted to incident.

Task completed by:	at	am/	'pm
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Establish staff and students wellbeing spaces.

Task completed by: ______ at _____ am/pm

Arrange mandatory staff debriefing at the end of the school day.

Task completed by: ______ at _____ am/pm

□ Share/distribute information about ERT roles and responsibilities for all staff to access e.g. who is the sole contact with the family, coordination of wellbeing support, etc.

Task completed by: ______ at _____ am/pm

APPENDIX C: YEAR LEVEL COORDINATOR / LEAD TEACHER(S) IMMEDIATE & 24-HR RESPONSE ACTION PLAN CHECKLIST

Document all information received and actions undertaken.

Identify and develop a list of close friends, vulnerable students, students who have an extreme reaction to news, staff who are significantly impacted. Initial list to be returned to ERT within 30 minutes of delivering student briefing.

Task completed by: ______ at _____ am/pm

Secure student's locker and contents.

Task completed by: ______ at _____ am/pm

Ensure all advisory rolls are marked and submitted **immediately** to office staff to indicate which students were present for the student briefing. It is imperative that these rolls are marked accurately.

Task completed by: ______ am/pm

□ Assist in following up unexplained absences for students using script that is provided to you.

Task completed by: ______ am/pm

- □ Organise designated quiet areas for affected staff and students.
- **D** Ensure less affected students and staff have space to carry on with activities/work.
- □ Where possible, rotate teaching staff with available staff to give them time to process and regroup.
- Distribute letters and information sheets to every student in your community prior to the end of the day. These will be provided by the front office.
- □ In the event of a completed suicide, develop a memorial space.

APPENDIX D: BUSINESS MANAGER'S IMMEDIATE & 24-HR RESPONSE ACTION PLAN CHECKLIST

Document all information received and actions undertaken.

□ Distribute the scripts provided by the principal to office staff explaining that this script is to be strictly adhered to when responding to all enquiries and phone calls.

Task completed by: ______ at _____ am/pm

Letter and information sheet given to Business Manager by Principal class to be printed and collated in advisory groups so that it can be distributed to every student along with an email sent to families.

Task completed by:		at	_am/	pm
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Above information packs distributed to Year Level Coordinators prior to day's end to be distributed to students.

Task completed by: ______ at _____ am/pm

- Assist in the following up of unexplained absences for students in the communities using script that is provided (liaise with Lead Teacher(s) and/or Year Level Coordinators).
- Task completed by: _____

Liaise with the Principal in relation to informing the bus companies.

□ Provide the daily absences to the ERT.

APPENDIX E: DRAFT LETTER TO PARENT/CAREGIVERS

*This letter should be copied to the College's letter head before distributing

Document all information received and actions undertaken.

Insert date

Dear Parent/Caregiver

I am writing to you with some sad news about a member of our college community.

One of our Year **{insert level}** students tragically died **yesterday/today/Saturday/during the holidays**.

Our thoughts and heart-felt sympathy are with the student's family and friends.

Today and over the coming weeks, you may be concerned about the reactions of your son/daughter to this news. Many students will wish to talk with their parents, so I have attached some general information which may assist you in those conversations. I also encourage you to let your son/daughter know that you are aware of this incident and that you will listen to their concerns at any time they wish to share them. Staying connected and engaged with your son/daughter is one of the best ways to support them. When talking about the issue of suicide try to include discussion about positive ways of managing problems.

Two important messages to promote are that all of us should seek help from others when we feel down or vulnerable and that young people should tell an adult if they are worried about a friend or themselves expressing suicidal thoughts.

Our college will be concentrating on supporting our students and staff over the next months. This means, among other things, returning the college to normal routines as soon as possible and recognising that students can be affected by this event for many months to come. If your son/daughter is already using the services of a mental health professional or a General Practitioner, you should ensure this information is passed on to that professional. A list of helpful websites and services is included in the attachments to this letter.

Please feel free to contact myself, **{insert principal name}**, Assistant Principal, **{insert name}**, or Lead Teacher, **{insert name}** on 5856 1230 for further information or if you have any concerns about your son/daughter. Contacting the nominated staff is an important way of ensuring you receive consistent and accurate information and for us to be aware of all parent concerns.

Warm Regards,

{insert principal name} Principal

When talking with your children remember ...

Each child's or adolescent's response will be unique and a wide range of reactions are possible.

Their reaction will be influenced by their personality, their past relationship with the deceased or injured person, what is happening in their life now and their ability to adjust to change. Your child, whatever age, needs to find safe ways to express their feelings. They may feel confusion, anger, aggression, withdrawal, fear, guilt, denial, blame, betrayal, abandonment, hurt and sadness. Parental understanding, reassurance and attention are very important at this time. Be guided by your child's need to talk but make it clear to them that you will be available whenever they need you.

Children and adolescents who have experienced other concerns or losses in their lives may find it harder to cope.

Children and adolescents who have experienced loss (e.g. separation/divorce of parents, death of a relative or pet, moving house/school) may find it harder to cope. They may become upset and need to express their feelings about these other concerns, even though they may have appeared to be coping before the event. If your child is already using the services of a psychologist or psychiatrist for wellbeing concerns, you should ensure they are made aware of this event.

Children and adolescents may have many questions. They may want to know exactly what happened.

The school will have provided your child/children with consistent information about the incident. Details about the way a suicide or attempted suicide occurred is not provided to students as this information is generally considered to be potentially harmful to students' wellbeing. As parents, it is important to steer discussion towards the positive "help seeking" actions young people can take, such as talking to a trusted adult (e.g. parent, counsellor, teacher, relative or friend), or using the agencies or websites listed in another attachment.

"Tell an adult if you are worried about a friend."

This is an important message to share with your child/children in any discussion about suicide. Children and adolescents sometimes share their feelings about death with friends: in conversations, letters, e-mails, text messages, on the internet, etc. If young people are aware of friends who they fear may hurt themselves they should tell an adult immediately. Nothing is more important than protecting a life.

Monitor the Internet and mobile communications tools

Following a suicide, students will be texting news about the death (both accurate and rumored), calling for impromptu gatherings (both safe and unsafe), creating online memorials (both moving and risky), and posting messages (both appropriate and hostile) about the deceased. This happens quickly and often to large numbers of people. You can proactively monitor, moderate and influence what and how information is shared between students.

Be aware that you or your child may be affected by possible media responses to the event.

You may decide to protect against certain coverage or watch television news coverage together so that you can discuss any reactions or concerns and ensure your son/daughter feels supported. Hopefully, media reporting of specific youth suicides will not occur. However, if it does, be aware that it can contribute to young people's vulnerability.

Some adolescents may show reactions weeks/months/a year after an event.

If you are concerned about your child's reactions—for example, if there are changes to their behaviour such as their socialising or school work patterns—it is important to speak to the Principal or the Student Support Services Officer at the school. This may result in a referral to one of the agencies listed in Attachment No.2.

Be aware that school staff will also be affected.

While everyone will be working towards normalising school routines, some staff will be managing difficult emotions. Adult counselling support is provided to all our school staff through a process outside the school.

Respond to community concern with respect.

If speaking with other members in the community, try to reinforce that the approach is to respect the bereaved/ affected family, to avoid romanticising or sensationalising suicide and to encourage help seeking actions in young people, for their own wellbeing and when they have concerns about their friends.

Where can parents and young people get more information and help?

ARAFEMI Carer Helpline provides free, confidential information, support and referral for family, carers and friends of people with a mental illness. 1300 550 265, 9am to 5pm Weekdays WWW.arafemi.org.au/family-support/telephone-helpline.html

Area Mental Health Services (AMHS) triage provides mental health information, advice and referral. Each AMHS has a centralised triage number. www.health.vic.gov.au/mentalhealth/services

Australian Centre for Grief and Bereavement provides a range of education, counselling, research and clinical services for those working in and affected by experiences of grief and bereavement. 1800 642 066 WWW.grief.org.au

Beyondblue provides information about the signs and symptoms of depression, available treatments, how to get help and links to other relevant services and support groups. 1300 22 4636, 24 hours/7 days www.beyondblue.org.au

Bush crisis line is a telephone support and debriefing service for multi-disciplinary remote and rural health practitioners and their families. 1800 805 391, 24 hours/7 day

Child and Adolescent Mental Health Services (CAMHS)/Child and Youth Mental Health Services (CYMHS) offer assessment and treatment depending on clinical need (crisis; single session, specific assessments, ongoing case management, targeted intensive outreach case management, community based, sub-acute and acute mental health care). CAMHS are transitioning to CYMHS: 0-25 years. CAMHS/CYMHS are regionalised. www.health.vic.gov.au/mentalhealth/services/index.htm

The Compassionate Friends Victoria Inc. offers friendship and understanding to families following the death of a son or daughter, brother or sister. 9888 4944, 1800 641 091, 24 hours/7 day WWW.compassionatefriendsvictoria.org.au

EPPIC State-wide is part of Orygen Youth Health, an early psychosis program operating in the western and north western suburbs of Melbourne. 9342 2800 AH: 1800 888 320

Griefline provides confidential telephone counselling services to anyone in the community who may need support in order to express their feelings and experiences. 9935 7400, 12noon to 3am/7 days www.griefline.org.au

Headroom is a youth website for informing young people, their caregivers and service providers about positive mental health. It includes information about mental health, strategies to help young people and links to other support services. www.headroom.net.au

eheadSpace offers online and telephone mental health support to young people aged 12 to 25 and their families or friends. Young people can register at www.eheadspace.org.au or call 1800 650 890. Webchat and telephone support is available from 9am to 1 am and e-mail is available 24 hours a day.

Kids Help Line 1800 55 1800 is a 24 hour telephone and online counselling service for young people from 5-25 years of age. www.kidshelpline.com.au

Lifeline is a 24 hour telephone counselling service providing access to crisis support, suicide prevention and mental health support services. 13 11 14 WWW.lifeline.org.au

Mind Health Connect provides information on mental health care, finding relevant support and resources to meet your needs. www.mindhealthconnect.org.au

OCD and Anxiety helpline provides assistance to callers to understand and manage symptoms of anxiety disorders and depression, and referral to community and health services. 1300 269 438 or 9830 0533 10am to 4pm Weekdays. WWW.arcvic.org.au/our-services/helpline

Parentline is a state-wide telephone counselling, information and referral for parents and carers with children from birth to eighteen years. 13 22 89, 8am to midnight 7 days www.education.vic.gov.au/earlychildhood/parentline/

Reach Out is a web-based service that encourages young people to help themselves through tough times. The aim of the service is to improve young people's mental health and wellbeing by providing support, information and referrals in a format designed for young people. http://au.reachout.com

SANE Australia provides information about mental illness treatments, symptoms, medications, where to go for support and help for carers. 1800 18 SANE (7263) 9am to 5pm Weekdays. WWW.sane.org/helpline/helpline-online

Suicide Callback provides crisis counselling to people at risk of suicide, carers for someone who is suicidal and those bereaved by suicide. 1300 659 467, 24 hours/7 days www.suicidecallbackservice.org.au/

SuicideLine VIC provides specialist telephone counselling and information to anyone affected by suicide. 1300 651 25124 hours/7 days. www.suicideline.org.au

The Black Dog Institute is a not for profit organisation that offers specialist expertise in mood disorders (depression and bipolar disorder). http://www.blackdoginstitute.org.au/

Ybblue, the youth program of **beyondblue**, promotes the message that it's acceptable to talk about depression and encourages young people, their families and friends to look out for each other and to get help when it is needed. A set of youth fact sheets with information on a variety of topics, including how to recognise depression and how to talk about it, what services are available to help young people and how to help friends and family who may be going through a tough time can be downloaded from the site. www.youthbeyondblue.com

APPENDIX F: DRAFT SCRIPT TO READ TO STUDENTS

Document all information received and actions undertaken.

Today/yesterday the college was given the very sad news that on **{insert day/date}** one of our Year **{insert level}** students died. The school community is thinking of the student, **his/her** family and **his/her** friends. Some students in our college, particularly **his/her** friends will find this news very difficult to understand and accept. Other students – not just close friends – are also likely to be upset perhaps because it reminds you of another sad event in your own life.

DET staff will be available to assist individual students. A notice is going home today to inform your parents/carers about the death.

If you need to leave school early, or you are absent from school, we request that you use existing school procedures to advise of your absence from school (sign out at the office if leaving school early or have home contact the school on the absence line if you are absent for the day or are going to be late attending school).

If you are approached by anyone asking for information about the student's death, please tell them they should speak with our principal.

We request that you be sensitive and respectful of other people's feelings during this difficult period. We also encourage you to look out for each other and report any concerns that you may have about a particular student to a teacher or parent.

If you have any questions about the information contained in this notice, please speak with your Advisor, Community Leader, or other staff member that you feel comfortable in asking.

APPENDIX G: SCRIPT FOR FRONT OFFICE STAFF

Document all information received and actions undertaken.

Script for Front Office Staff - General enquiries

We have been informed that there has been an incident involving one of our students. The family of that student are aware and they are being supported.

Our principal, **{insert name}**, will be communicating with all of our college families to ensure that you have an awareness of the incident along with suggestions on how to best support your child.

We hope that you understand the need for a consistent response to queries received at this time. It helps us ensure that we are remaining sensitive to the needs of the family.

Please ask your child for the letter that they will have been given during the course of the day to share with you. This has also been emailed to all of those families that we have addresses for.

If you have current serious concerns around the safety and wellbeing of your child, then I am able to direct your call to a suitable support person. They will be able to discuss the concerns around your child with you.

Script for Front Office staff - Media enquiries

Our college principal, **{insert name}**, is currently unavailable. If you would like to leave your name, organisation name and number, then I will ask him to return your call. No other person from within the college will be liaising with the media.

We ask for your understanding that there are many demands on his time and naturally, the top priority is caring for the needs of our students and staff.

APPENDIX H:

DRAFT SCRIPT FOR FOLLOWING UP ON STUDENT ABSENCES

Document all information received and actions undertaken.

Script for Unexplained Absences

Hello, this is **{your name}** from Rushworth P-12 College. I am wishing to speak to **{parent/carers name}** if **{he/she}** is available, please.

We have received the tragic news that one of our students has passed away and wish to check on the wellbeing of all of those students who are away today.

{Name of child} is absent and we just wish to ensure that you are aware of this absence.

If aware of absence.

Are you able to provide us for a reason for this absence so we can ensure that our records are accurate?

If unaware of absence

We require your support in making contact with **{insert name}** and then request that you advise us of your success.

An email will be forwarded to you if we have your current email address which provides details of the support available here at our college along with other relevant information. A letter and information sheets will also be given to your child tomorrow on **{his/her}** return to share with you, or, if you believe that **{child's name}** will be absent for a period longer than this, we will put this in the post for you.

If you become aware that **{child's name}** will be absent tomorrow, it would be appreciated if you would make contact with the college by 9:00 am.

Thank you for your time and please know that we are working together to provide support and ensure the safety of all of our students hence us making this call.

APPENDIX I: INDIVIDUAL RESPONSIBILITIES INFORMATION POSTER

Family liaison person is
Emergency Services liaison person is
Key Student Wellbeing Contact person is
Key Staff Wellbeing Contact person is
CAMHS and headspace liaison person is
Media liaison person is

APPENDIX J: ERT 48 TO 78 HOURS RESPONSE ACTION PLAN CHECKLIST

	Ensure the College returns to it regular routines an Family liaison person (staff) to contact the parents anything further that the Department can do to as	/carers/guardi	ans and determine whether there is
Task co	ompleted by:	_ at	_am/pm
	Plan the College's involvement in the funeral if appr	oval is given b	y the family.
Task co	ompleted by:	_ at	_am/pm
	Ensure that relevant information is communicated and observations to be given.	with staff and	provide opportunities for their feedback
Task co	ompleted by:	_ at	_am/pm
	Monitor and assess students who have been ident mental health agency support with a view to prepa require one.	-	
Task co	ompleted by:	_ at	_am/pm
	Ensure all students who are receiving support are i support person is.	dentified to st	aff. This should also detail who the primary
Task co	ompleted by:	_ at	_am/pm
	Collect all of the student's belongings and store in parents/guardians or the police.	a safe and secu	ure place for them to be collected by the
Task co	ompleted by:	_ at	_am/pm
	Continue to meet at least daily at this time to ensu members are aware of developments.	re that approp	riate actions are being taken and that all

APPENDIX K: FIRST MONTH RESPONSE AND CHECKLIST

- Monitor staff wellbeing and determine whether any further actions should be taken to support staff to manage their grief and trauma.
- Monitor student wellbeing and determine whether any further actions should be taken to support individual students, including whether any Individual Support Plans need to be reviewed or amended.
- Plan for relevant events to be held by the college (college magazine, award nights, graduation etc).
- **Gather information from staff relevant for an operational debrief.**
- □ Conduct an operational debrief.

APPENDIX L: LONGER TERM RESPONSE AND CHECKLIST

- □ Continue to monitor the wellbeing of staff and students.
- □ Continue to provide support to individual students and staff as required.
- □ Keep staff, students and the college community informed of any further developments.
- □ Plan for anniversaries, birthdays and significant events.
- □ Implement recommendations from the operational debrief.
- □ Review curriculum and college-based prevention and intervention programs to ensure that they are providing positive mental health and wellbeing messages.
- □ Consider convening forums and events for students and the college community that foster optimistic thinking and a sense of connectedness with family, school and the community.
- □ Consider professional learning opportunities for college staff in understanding the impact of good mental health and wellbeing on student learning and the use of effective coping skills to manage the complexities of life.