

DWP Central Freedom of Information Team

e-mail: freedom-of-information-rexxxxx@xxx.xxx.xx

Our Ref: VTR200

12 October 2011

Dear Mr Taylor,

Thank you for your Freedom of Information request received on 21st September 2011.
You asked for:-

The framework includes best practice, advice and guidelines and contains the six point plan which sets out the procedures that managers must put in place within their own office. It was developed in consultation with policy and professional experts from within the Department and operational staff." The guidance and advise you refer to is the information I have requested but you haven't supplied it. Please supply the actual detailed information as requested from you.

In response to your questions:

I have reviewed the reply sent to you in response to your original request number FOI 2441, which was received on 19 August 2011. I consider that the reply did answer in full each of the questions that you raised.

However, I am happy to treat your request for a review as a fresh request for information.

I have provided the guidance below: -

Managing Customers Suicide and Self Harm Declarations – policy framework for managers

Introduction

This framework introduces a new policy for all DWP businesses, to help them manage suicide and self harm declarations from customers.

Managers, in all DWP businesses who work with customers, are required to develop suitable arrangements to suit their own working environments, to help staff deal effectively and safely with customer declarations of suicide and self harm.

The framework summarises the plans and procedures that must be in place, as well as current best practice, advice and guidelines.

The framework will be subject to regular review to ensure it continues to meet its objectives, as outlined above, and for continuous improvement purposes. Management information will be collected from business managers periodically, at a national level, to facilitate the review

process.

Background

From time to time it is possible that a member of staff will hear a customer make a statement of intent to harm or kill themselves. Declarations of this nature can cause distress for those concerned, but there are some important points a member of staff should know that can help resolution. Both the distress and the chance of an outcome where everyone is safe are best managed by being prepared and knowing in advance how to respond.

It is important to be clear that if a customer states they will harm themselves they may well do so and our procedures and actions have to be organised around that assumption.

For the member of staff concerned, the key to responding effectively is to plan ahead so they know what to do before someone says they intend to harm themselves. Systems, procedures, and responses need to be in place, ready to apply to ensure an appropriate response.

There are two things to be considered:

1. What the response should be, and
2. The capability of the individual officers to respond appropriately

Planning & Preparing Yourself and Your Staff

Managers must consider the attached six point plan and decide what arrangements will be appropriate in your office. This includes appropriate responses for all face to face contact staff, telephony teams, any out-of-office services, and for visiting staff. Some elements may not be appropriate but the important factor is ensuring arrangements are in place that suit the individual officer's working environment.

Local procedures must be developed in consultation with your local trade union side. DWP staff are not counsellors. The aim is, by having suitable arrangements in place, to help staff deal effectively and safely in these situations to achieve a safe outcome for themselves and the customer.

Arrangements must also be put in place for a debriefing after the event to provide the necessary support for the member of staff concerned.

Actions & Responsibilities for Managers

Local managers must determine:

- The procedures to have in place to make the six point plan work. (See Local Procedures Below)
- The sources of advice to draw upon for help
- How the plan is to be kept up to date, operational and communicated to staff

Local Procedures

Local Procedures need to cover:

- Staff training (initial and refresher) covering action to take at the time of the incident (bearing in mind that intentions can be stated in writing, or verbally), the local procedures that are in place and roles and responsibilities. The training will vary according to the roles and responsibilities agreed. DWP is not a counselling organisation, but recognises that customers have varied needs and will seek

appropriate support for them.

- A signalling system within the office: so the member of staff concerned can summon support (the support partner) and trigger local procedures whilst maintaining contact with the customer. This principle must be extended to consider what action would be suitable in the event the member of staff and customer are off-site (for example, in the customer's home).
- The arrangements to ensure the member of staff dealing with the customer has no further interruptions.
- The arrangements to ensure the support partner is active in supporting the member of staff. They will assist in assessing the nature of the risk present and organising the relevant action according to local procedures. They will also tactfully and unobtrusively monitor the contact for the well-being of both the member of staff and the customer. This frees the member of staff to gather relevant information and give the customer their undivided attention. The support partner will most likely be the line manager as they will be in the best position to assist.

Additional support available for Jobcentre Plus, Customer Services Directorate

Jobcentre Plus, Customer Services Directorate, because of their customer-facing role, have District-office based specialist services available to support staff in their day to day dealings with customers who have particular needs. Their expertise can also be used to help staff deal effectively with customer declarations of suicide and self harm and help managers formulate their six point plans.

Jobcentre Plus Work Psychologist

In Jobcentre Plus offices, managers and staff may contact their District Work Psychologist for support and advice around any vulnerable customer groups. The Work Psychologist will provide specific advice and guidance around individual customers that staff wish to discuss to ensure the welfare of that customer, to support the adviser in what to do and to ensure referral to appropriate services.

Work Psychologists may also be able to help managers to implement local procedures, around this policy framework to help staff feel confident in applying the principles and practice.

Possible options for expanding the role of the Work Psychologist beyond the Jobcentre Plus Customer Service Directorate are being explored.

Mental Health Co-ordinators

A Mental Health Co-ordinator role was introduced in all Jobcentre Plus districts from October 2009. The Mental Health Co-ordinator role is to:

- Improve and facilitate links between local mental health and employment services,
- Identify the availability of local support (both internal and external) that Jobcentre Plus advisers may signpost customers to
- Provide a support role to Jobcentre Plus advisers (particularly New Jobseeker Interview advisers) who are working with customers with mental health conditions via regular team meetings, awareness sessions etc
- Influence local partners to consider whether the help currently available for those with mental health conditions satisfies local needs and encourage them to address any gaps or shortfall in provision.

Managing Customer's Suicide & Self-Harm Declarations

Information and advice for Managers and Staff

What to do to anticipate risk of self harm or suicide:

The risk of a suicide declaration can sometimes be anticipated prior to customer contact. The best information to help with this is a history of previous attempts or previous stated intention. However incidents can sometimes arise unexpectedly during the course of normal business. Local plans and procedures will need to be fit-for-purpose for both eventualities.

Expressions of suicidal thoughts are common amongst the general population. This does not mean that they are never serious statements of intent.

It is a mistake to assume that suicide and mental illness are always closely linked, they are not. While we can be fairly certain that those who attempt suicide are distressed, we cannot assume that they are 'mentally ill' nor should we assume that those who are mentally ill are at risk of suicide. Some people who kill themselves have had no contact with mental health services.

Where contact is to be made with a customer having a known high risk of suicide or self harm it is good practice to arrange for third parties to be present – either a customer representative/relative and/or a specialist such as Work Psychologist in Jobcentre Plus offices. Depending on circumstances it may make sense to rearrange a home visit or a telephone contact to an office based visit with the above third parties present.

Information you have on a customer before you see them may allow you to be better prepared. Where it is evident that customers stating suicide intent should be referred to external specialists, local managers should determine the contact arrangements and roles and responsibilities.

As part of the planning process for JCP Customer Services Directorate, discuss with the Mental Health Co-ordinator the services that are available locally in the District to support customers in these circumstances. These will have identified as part of their mapping of mental health services function. Record the access route into them.

What to do if a customer says they will harm themselves or kill themselves:

Some customers may say they intend to self harm or kill themselves as a threat or a tactic to "persuade", others will mean it. It is very hard to distinguish between the two and especially on the telephone. For this reason all declarations must be taken seriously. The member of staff should follow the six point plan to talk to the customer to find out how well formed their plans are, if they have tried to harm themselves previously, and how imminent is the intention.

If the discussion suggests there is a risk that the customer will self harm or attempt suicide the customer should be encouraged to contact their health related support: focus on ascertaining if the customer has a GP and strongly suggest that they make an emergency appointment for today. Alternatively advise them to contact their local Community Mental Health Team (CMHT) for an assessment between 9.00am – 5.00pm. If there is an arrangement locally offer to make contact for them.

The member of staff should establish if the customer is in contact with any other services, or community based healthcare professional, or establish who their main carer is, e.g., who they

live with, who their friends are. This is particularly important if the intention to self harm is made during a home visit. Help them make plans to go and see their GP or healthcare professional. With the customer's permission you may contact these people on the customer's behalf.

This permission and action should be recorded as per the six point plan. In the case of the home visit the officer should contact their line manager as soon as possible to brief them on the situation, the actions taken and they should make a written record as soon as possible after the event. The recorded details should be kept by the line manager.

What to do in an Emergency:

If the customer reveals they have already taken self harm action (taken tablets, cut themselves badly, etc) or if they are in a position of danger where self harm could be actioned easily (for example, next to heavy traffic, or in a high place) the officer should inform their manager, in line with the six point plan, who should contact the relevant emergency services.

You do not need the customers consent to contact the emergency services.
The details of this information and decision making should be recorded and retained.

What to do after an incident of declaration of intention to self harm or commit suicide: The following are essential steps to take following an incident:

1. Record the customer incident details for future reference. Monitor customer well-being for future contacts.
2. Gather detailed information of what happened. Line managers must keep these records as they may be needed in future for legal and system review purposes.
3. The member of staff and line manager should reflect on what happened. Discuss how the incident was handled. Review the procedures in place and determine if there are any lessons to be learned for future handling and responses. Keep a record of this review process.
4. Copies of the records should also be retained by the manager in the office who is responsible for developing and reviewing local plans, to enable them to ensure they remain effective.
5. Line managers must provide support to the officer after the incident. Provide the necessary practical and listening support (e.g., to give the officer time away, to listen to their concerns). Ensure the officer is aware of the counselling services available under the Employee Assistance Programme (EAP). The EAP also has a management support service to help line managers themselves deal with these conversations with their members of staff.

Declarations of Suicide & Self Harm

The 6 point plan

Take the statement to self harm or suicide seriously	Listen carefully and clarify. Check your understanding of what was said. Suspend all other activities you are carrying out.
Summon a colleague	Workplace procedures must be in place and you must know how to summon support from a colleague who will act as your 'support partner'. This is most likely to be your line manager Your support partner is there for two reasons – to assist you as you help the customer, and to act as a witness to what was said. They will need to be able

	to hear, or listen into the conversation, as best they can and record key points as it progresses.
Gather information	<ul style="list-style-type: none"> • You need to make some assessment on the degree of risk, by working through the following steps. • You should remain calm, as this will help the customer gain perspective on their situation. • Clarify and confirm that the customer has said they intend to self-harm or commit suicide. • Determine if they tried to harm themselves before and if they received treatment or are currently receiving treatment • Let the customer talk about their plans to self harm or commit suicide. • Find out specifically what is planned, when it is planned for, and whether the customer has the means to hand? • Find out if action has already been taken, e.g. have tablets or something else been taken? If so, find out What? and When? • Keep the customer talking and record key information, including their location and any plans they have for going elsewhere to harm themselves. This will be important should you need to inform other services.
Provide referral advice	<ul style="list-style-type: none"> • Encourage the customer to speak to someone who can help them • Have relevant telephone numbers to hand • Ask the customer about their GP, or health care team – find out about their location and contact arrangements. • If the situation is non-urgent (i.e., general distress but no immediate plans or means-to-hand) help the customer to contact their support team or encourage them to contact their GP immediately.
Summon Emergency help	<ul style="list-style-type: none"> • If the customer is distressed and is in immediate danger summon emergency help. • You do not need their consent to do so, but it is important to advise the customer about what is happening and why • Inform your line manager, who should arrange contact with the emergency services • Let the emergency services know the location and any other relevant details you have uncovered.
Review	Whilst this experience can be upsetting you need to look after yourself and be reassured that you have

	<p>done what you can to help the customer. After the incident you may have thoughts and feelings about the situation. This is all part of the process of coping with the experience and is normal.</p> <p>Seek support from your colleagues and line manager</p> <p>Your line manager must review the incident with you. This is your opportunity to reflect on the event and ask to agree on any further support for you. As part of this process, you should also review your written records with your line manager and check that office procedures were operational and useful. Pass a copy of your notes to your line manager.</p> <p>Line managers must retain the notes and issue a copy to the manager in your particular office who is responsible for developing and reviewing local plans.</p> <p>Managers should ensure that any member of staff who has managed an incident are provided with further opportunities to discuss the impact and how they are feeling.</p> <p>An independent, confidential counselling service is also available under the Employee Assistance Programme, if necessary.</p>
--	--

Referral and emergency support details

Community Mental Health Team

It may well be that, locally, the Crisis Resolution Team only takes referrals from the GP or Community Mental Health Trust. If advisers are to have contacts, names and phone numbers of Mental Health Services then, it is important that arrangements are put in place, at a local level, with CMHT managers, so they are prepared to receive calls from DWP staff and the reason for this. Duty workers in CMHTs need to be primed for possible emergency calls from DWP staff and know how to act.

In general, Community Mental Health Teams do not provide crisis intervention, however they normally have a duty officer/desk clerk who will be able to provide advice if this has been arranged.

If you work in a contact centre environment and therefore do not have information about local community services, all you can reasonably do is advise the customer to contact their GP, community mental health team, or find out the contact details from them.

Crisis referral should ordinarily be referred back to the client's general practitioner.

If the customer is distressed and is in immediate danger summon the emergency services. You do not need their consent to do so.

Find out **now** how to contact the local community mental health teams and hospitals and record the details.

Contact name	Address	Telephone(s)

Other useful numbers are:

Samaritans: 24hrs **08457 90 90 90**

MIND: **08457 660163**

Breathing Space (Scotland only): **0800 838587**

Get connected (a free helpline for young people): **0808 808 4994**

Record any other appropriate numbers here so you have them to hand.

If you have any queries about this letter please contact me quoting the reference number above.

Yours sincerely,

DWP Central Fol Team

Your right to complain under the Freedom of Information Act

If you are not content with the outcome of the internal review you may apply directly to the Information Commissioner's Office for a decision. Generally the Commissioner cannot make a decision unless you have exhausted our own complaints procedure. The Information Commissioner can be contacted at: The Information Commissioner's Office, Wycliffe House, Water Lane, Wilmslow Cheshire SK9 5AF www.ico.gov.uk