

College of  
**Policing**



The National Police  
**Wellbeing Service**

# Working together to prevent suicide in the police service

National action plan for  
suicide prevention and postvention in  
England and Wales



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## Foreword

“Nothing in life is to be feared, it is only to be understood. Now is the time to understand more, so that we might fear less.”

### Marie Curie

Men and women join the police to make a difference. They are extraordinary members of the public who undertake to confront the many challenges to law and order that threaten the safety of their communities. We ask them to uphold the Peelian principles of policing, not least to offer individual service and friendship to all members of the public by exercising courtesy and friendly good humour and willingness to offer individual sacrifice to protect and preserve life.

This national action plan for suicide prevention and postvention in England and Wales recognises that death by suicide in the police workforce – people who are currently serving or who have served – deserves attention. (Postvention is about supporting the people associated with the person who has died).

It is hard for those who have not experienced mental ill health to understand how life’s difficulties can undermine the sense of wellbeing to such an extent that usual coping mechanisms are overwhelmed. The inability to cope is perceived by some as weakness and this is a challenge for the police culture. Yet we know that at least one in six people in the United Kingdom will experience symptoms such as sleep disturbance, fatigue and worry that do not meet the criteria for a diagnosis of a mental health disorder but will affect the ability to function.

A further one in six of the population will have symptoms that meet the criteria for a mental health disorder, but they will not come to the attention of a healthcare professional. It is likely, therefore, that many police officers, staff and volunteers, in addition to people diagnosed with a mental health disorder, will have experienced mental health distress, or will know someone who has.

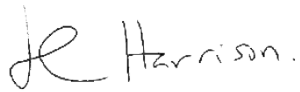
This plan addresses a culture that prevents people from talking about mental ill health. It enables and empowers us all to reach out to people who have lost hope.

Talking about suicide may be uncomfortable. People often worry that they might say the wrong thing or be unsure what action to take. There are many myths that need to be debunked.

- **You can't ask someone if they're suicidal.** Wrong! The evidence shows that asking about suicidal thoughts protects people from dying by suicide.
- **People who talk about suicide aren't really serious and won't go through with it.** Not true. It's important to always take someone seriously if they talk about feeling suicidal. Helping them get the support they need could save their life. People who die by suicide have often told someone of their thoughts or intentions.
- **If a person is serious about killing themselves, there's nothing that can be done.** This is a mistake. Most people who feel suicidal do not actually want to die; they just want the situation they're in or the way they're feeling to stop.
- **You have to be mentally ill to think about suicide.** In fact, one in five have thought about suicide during their life and not all people who die are mentally ill.

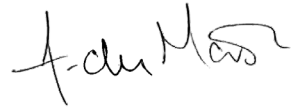
Suicide, and deaths due to poisoning where the coroner had insufficient information to make a determination, were the leading causes of death for both males and females aged 20 to 34 years in the United Kingdom up to 2018. This plan will raise awareness of suicide, challenge stigma, ensure adequate training and create safe environments. It will help us fulfil our duty of care to the people whose mission it is to protect and preserve the life of others.

We hope this action plan gives you more confidence to understand and talk about suicide, and to access resources that will support you and your teams to make a real difference. Thank you for your leadership in preventing suicides in policing.



**Professor John Harrison**

National chief medical officer for policing



**Chief Constable Andy Marsh**

Chief Executive, College of Policing



**Chief Constable Gavin Stephens**

Chair of National Police Chiefs' Council

**If you need urgent help, please contact:**

Samaritans helpline **116 123**

NHS **111**

## Executive summary

The death of any member of the policing family is a tragedy. Every death by suicide creates ripples across the service. It affects not only close families, friends and communities, but also those colleagues who knew and worked with the person who died, along with the wider policing family.

The causes of suicide are complex, and we don't always know why someone chooses to end their life. While there is evidence to show a link between suicide and mental health, many suicides happen in periods of crisis and extreme stress, without underlying mental ill health. We know policing can be stressful, therefore this action plan provides key areas of focus for us to collectively work to reduce suicides and suicide attempts across policing. It provides key focus areas to educate and support the workforce, reduce stress and improve data recording.

No one should see suicide as their only option. We hope to create a culture that supports mental health, tackles stigma and ensures that everyone affected by suicide or suicidal thoughts can access appropriate and timely support that promotes recovery.

Suicide prevention in policing requires our collective strength through collaboration. This is why key signatories previously agreed a national suicide prevention consensus statement for policing in England and Wales – [Working together to prevent suicide in the police service | Oscar Kilo](#).

This national action plan (NAP) for suicide prevention and postvention has been developed to support police forces in reducing suicide. Progress against this NAP will be monitored through the Clinical Governance Group (CGG), reporting to the Chief Medical Officer (CMO).

# Introduction

This document is a seminal national action plan (NAP). It is designed to coalesce ideas and action across the policing landscape in England and Wales to support the development of suicide prevention and postvention strategies in policing. It should act as a catalyst for current and future work to support wellbeing of police officers and staff under the auspices of the Police Covenant. We also collaborate and share our work across non-Home Office forces.

The NAP aims to address suicide prevention and postvention as a key priority area, alongside the promotion of good mental health and wellbeing, reducing stigma and promoting access to support.

The Police Workforce Suicide Prevention Delivery Group (PWSPDG) will own the plan, within the remit set by the Clinical Governance Group (CGG) and the Chief Medical Officer (CMO).

In general, people spend one third of their lives at work, therefore colleagues and line managers have an important part to play in terms of emotional and social support. Employers are in a unique position to help keep people safe (Business in the Community and Public Health England, 2020).

Every police force needs to be engaged in providing an open, supportive and inclusive environment where individuals can thrive. Thus, in contributing to the wellbeing needs of every member of the workforce, we will give mental wellbeing and suicide prevention the priority it needs and deserves. In turn, in building these environments, we hope to improve support for managing and reducing the risk of suicide.

In producing this document and considering a NAP for policing, we make it clear that suicide prevention matters.



## Context and background

More than 700,000 people die by suicide each year, and for each suicide, there are many more attempts (World Health Organisation, 2023). In England and Wales, there were 5,642 suicides registered in 2022 (Office for National Statistics (ONS), 2023). In addition, it is suggested that for each suicide, there are 135 people exposed and who may need support (Cerel and others, 2019). These figures demonstrate the wide-reaching impact of every death by suicide.

At the time of writing, policing is not currently identified as an occupation at risk by the ONS, in relation to suicide (ONS, 2021). However, any suicide is a needless loss of life, causes great concern among the policing 'family' and garners much media interest when it occurs. We are all aware of the need for good overall wellbeing, including mental health. Oscar Kilo, the National Police Wellbeing Service (NPWS), remains committed to providing guidance and support to forces, as well as relevant training and resources to officers and staff.

The recently released government policy paper, 'Suicide prevention in England: 5-year cross-sector strategy' (GOV.UK, 2023), suggests there are areas we should all consider and incorporate in services and interventions. These include the following.

- Everyone should feel confident they have the skills to be involved in preventing suicide
- Mental health is intrinsically linked to and as important as physical health
- No one should be excluded from suicide prevention efforts
- Early intervention is vital
- Those with lived experience should be involved in prevention activity
- Strong collaboration is essential
- Timely, quality evidence is fundamental

Many of these have already been considered in policing and work is ongoing to progress with further development.

No two suicides are the same and factors leading to suicide are complex, so identifying an individual's risk of suicide is challenging. There is never one reason why someone might take their own life, however there are factors that are known to heighten risk. In addition, it is often difficult to separate any specific risks in policing that may differ from those in the general public. The ONS urges caution in using published figures to establish potential suicide risk among occupations. Any difference in numbers may merely mirror underlying population, as opposed to an occupational risk (ONS, 2021).

Three written background documents were researched and released by NPWS in February 2022: These were the current landscape, consensus statement and next steps documents. These are summarised below, but are available in full here: [Working together to prevent suicide in the police service | Oscar Kilo](#).

## Current landscape

The current landscape document related to suicide prevention in policing examined the available evidence related to police suicide in England and Wales at that time. This included potential risk factors, prevention strategies and existing stakeholder knowledge. Within that document a number of suggestions for action were outlined, relating to the creation of the national consensus statement.

- Agreeing shared commitments
- Developing the consensus statement for suicide prevention in policing in England and Wales, backed up by useful tools and resources
- Further defining best practice
- Translating commitments from the consensus into next steps
- Wider consultation with officers, staff and stakeholders
- Preparing a suicide postvention toolkit

## Consensus statement

Following on from the initial scoping and literature review, the consensus statement was agreed by the following.

- The Home Office
- College of Policing
- National Police Wellbeing Service
- National Police Chiefs' Council
- Association of Police and Crime Commissioners
- Police Superintendents' Association
- Police Federation of England and Wales
- UNISON

The joint focus of the consensus is in using our collective capabilities to effectively advance the knowledge and understanding of suicide in policing, along with promoting good mental health and wellbeing, providing appropriate care and support, and signposting to specialist support in a timely manner where required.

## Next steps

The primary goal is to reduce the risk of suicide among officers and staff. The next steps document highlights the recommendations for action that were developed in relation to suicide prevention. These recommendations are as follows.

- **Recommendation 1** - Commit to delivery
- **Recommendation 2** - Record deaths
- **Recommendation 3** - Evidence the progress of change
- **Recommendation 4** - Support the supporters
- **Recommendation 5** - Commission the provision of a suicide postvention toolkit

Work has been continuing since the release of these documents, with all recommendations underway and recommendation 5 already complete. Accountability for delivering the recommendations is governed through the CMO and CGG, reporting into the NPCC Workforce Committee.

## Postvention toolkit

Recommendation 5 in the next steps document was to commission the provision of a suicide postvention toolkit. This postvention toolkit was completed and launched in September 2022 and can be accessed in full at: [Police service employee suicide postvention toolkit launched | Oscar Kilo](#). The toolkit aims to help senior leaders in policing to support staff after the loss of a colleague to suicide.

## Bereavement support

NPWS has partnered with wellbeing service Just B to provide police forces with access to specialist bereavement counselling services. If a serving officer or member of staff should die in the execution of their duties, or by suicide, this service is available to their family and immediate colleagues. This service has been established as part of the work in delivering the Police Covenant, to increase the support on offer for police officers, staff and their families.

## Additional activities

1. Following on from the launch of the suicide postvention toolkit, NPWS facilitated training by Samaritans to peer supporters at superintendent and chief officer ranks and others in policing who may be responsible for leading a postvention process. This was delivered in November and December 2022.
2. Samaritans was commissioned to deliver a series of five webinars in May and June 2023. These webinars were recorded and are hosted on the NPWS website: [The National Police Wellbeing Service | Oscar Kilo](#).
3. A further Samaritans knowledge sharing event took place in September 2023, in relation to the postvention toolkit, to share experiences and best practice between forces.
4. Samaritans and NPWS have given inputs to the College of Policing executive leadership programmes in 2023 and 2024.
5. Close links have been established with the NPCC Suicide Prevention Steering Group.

6. NPWS has recently taken responsibility for development of the recommendation from the Officer and Staff Safety Review (OSSR) (College of Policing, 2020) regarding recording of death and serious injury of police officers and staff. This will include suspected suicides. This is recommendation 2 from the next steps above.
7. The Police Workforce Suicide Prevention Delivery Group (PWSPDG) currently meets quarterly and will assist in following up recommendations, driving actions in suicide prevention and postvention, and holding the consensus signatories to account.

## Vision

Our vision is to reduce the risk of and remove the stigma around suicide, allow everyone to talk openly and to have access to appropriate support. To this end, we encourage forces to provide services for their officers and staff where:

- those who need support with mental health or are at risk of suicide feel able to ask for help and have access to support
- those affected by suicide are not alone
- improved support is available to those affected or bereaved by suicide
- through joint working and learning, we minimise the risk of suicide

No one should see suicide as their only option. Key elements of the workplace suicide prevention action plan are outlined in the next section.

## Action plan

This action plan has the clear aim of reducing deaths by suicide and reducing suicide attempts.

As previously outlined in the consensus agreement, using our collective capabilities, we seek to:

- advance the knowledge and understanding of suicide in policing
- promote good mental health and wellbeing

- provide appropriate support and access to care
- signpost to specialist support in a timely manner where required

To achieve this, there are a number of areas included in this action plan below, where we believe progress can be achieved in forces. These areas incorporate the recommendations from the next steps document, referred to above, and also go beyond.

## 1. Safe environments

### Responsible owners

NPCC, supported by NPWS

### Timescales

March 2026

### Activity and means of monitoring

Promote communication, respect, wellbeing and encourage people to seek help to build a work environment that values officers and staff (Business in the Community and Public Health England, 2020).

Leaders have a pivotal role in sustaining healthy workplaces and therefore also need to be supported in their role (Drew and others, 2023).

Policing is a unique environment, where officers and staff are exposed to many more traumatic incidents than would be expected among the general public.

Create programmes, initiatives and interventions that prevent harm and reduce operational and organisational stressors, including unmanageable workloads, bullying and harassment. This includes several of the strands currently covered by NPWS.

## 2. Education and support

### Responsible owners

NPCC, supported by NPWS

### Timescales

March 2026

### Activity and means of monitoring

Individuals at all levels need training in understanding this sensitive area to support each other.

This area should explore evidence-based education and support.

Ensure officers and staff are aware of internal and external resources and support available and that they are accessible to all.

### 3. Data recording

#### Responsible owners

NPCC, supported by NPWS

#### Timescales

March 2026

#### Activity and means of monitoring

Data, evidence, practice and lived experience are essential for delivery of actions and the continued evolution of our approach to suicide prevention.

Using these opportunities to improve data recording will improve our knowledge. This could include, for example, any link between police-specific factors and suicide, such as professional standards investigations.

The Chief Medical Officer (CMO) has been given the mandate to request information on all suspected suicides of serving officers and staff with immediate effect. The data will be used to identify trends and areas for learning so that these issues can be shared across forces in order to support their suicide prevention and postvention plans”

In addition, NPWS has launched Op Hampshire phase 2 and is currently developing a Trauma Tracker project, based on the Police Traumatic Events Checklist (PTEC) (Miller and others, 2022). In developing the Trauma Tracker project, this will provide information regarding exposure and opportunities for intervention at key points.



## 4. Support research

### Responsible owners

NPCC, supported by NPWS

### Timescales

March 2026

### Activity and means of monitoring

Linked to points 2 and 3 above, examinations of data and interventions – those that may be effective for this particular population – can only be done on sound data collection.

We should also be mindful of where the analysis of themes regarding prevention of future deaths could be relevant for policing to inform policy and actions.

## 5. Understand high risk groups in policing, address risk factors and access to support

### Responsible owners

NPCC, supported by NPWS

### Timescales

March 2026

### Activity and means of monitoring

Linked to data gathering above – gather and analyse data related to suicide in policing. Many of these risk factors will be similar to the general public, however further investigation is required regarding any police-specific risk factors.

NPWS will continue to fund 6,000 psychological risk assessments (PRA) a year to identified ‘high risk’ groups. It is also recommended that targeted PRAs should be provided by forces for groups outside this definition who have been assessed as requiring additional support.

A welfare support training package for professional standards departments is currently in development by NPWS.

## 6. Organisational learning

### Responsible owners

NPCC, supported by NPWS

### Timescales

March 2026

### Activity and means of monitoring

Analysis of sources of evidence, surveillance and reviews of suicide to improve our understanding and develop proactive support to those in need or at risk.

Cluster information, support and signposting for forces.

## 7. Postvention support

### Responsible owners

NPCC, supported by NPWS

### Timescales

March 2025

### Activity and means of monitoring

NPWS has a postvention toolkit in place that was developed with assistance from Samaritans. This needs to be disseminated by forces for them to provide a localised postvention response.

## 8. Family support

### Responsible owners

NPCC, supported by NPWS

### Timescales

March 2025

### Activity and means of monitoring

Families provide invaluable support to policing, day in, day out. As such, they may require support themselves. The Police Covenant includes a focus on protection, health and wellbeing, and support for families (Home Office, 2020).

NPWS is currently developing resources to support families. This will continue and products will be available to all forces in due course.

## 9. Crisis line

### Responsible owners

NPCC, supported by NPWS

### Timescales

March 2025

### Activity and means of monitoring

Following on from the announcement regarding investment in a crisis line, made by the Home Secretary at the Police Federation of England and Wales national conference 2023, NPWS is currently progressing this as part of the wider Police Covenant work.

## Useful links

[The National Police Wellbeing Service | Oscar Kilo](#)

[Suicide prevention in England: 5-year cross-sector strategy | GOV.UK](#)

[What does 'being there' for someone involve? | Samaritans](#)

## Closing remarks

As a police officer of 36 years and the NPCC lead for suicide prevention, I am delighted to endorse this action plan.

The nature of policing is such that during our career, police officers are likely to face many challenging and traumatic incidents. Coupled with life's everyday pressures, this can at times seem overwhelming and sadly in a few cases, officers may contemplate or complete suicide as a consequence.

This strategy will expand the important work of the NPWS Oscar Kilo programme, Care of Police Survivors (COPS) and others. It will support forces to identify those at risk earlier and intervene appropriately; improve the health and wellbeing of our people; and support bereaved families where these tragedies occur. I urge all forces to support this vital work and our continued efforts to reduce preventable deaths.

### **ACC Charlie Doyle**

NPCC Policing Lead for Suicide Prevention

On behalf of the Police Federation of England and Wales (PFEW) I am pleased to endorse the national action plan for suicide prevention and postvention in England and Wales. It's now time for every chief constable across the country to get behind the recommendations and work with PFEW and the other staff associations and unions to ensure its implementation in full.

In addition to the plan, appropriate risk assessments should be implemented, in particular for those assessed as being in the 'high risk' group. There should be a nationally consistent approach in dealing with suicides across England and Wales, including wider support for PFEW's campaign to recognise police officer suicides and attempted suicides as work-related accidents under the Reporting of Injuries, Diseases and Dangerous Occurrences Regulations (RIDDOR).

### **Steve Hartshorn**

National Chair, Police Federation of England and Wales

Our association fully endorses this plan, which is a critical step towards the national commitment and infrastructure we need to fully support our people.

We consult with our members regularly on the reality of life as a superintendent, and we know that the work that is expected of them has a significant impact on mental wellbeing. It is essential that as a service, we understand the impact that policing has on every member of the police family, and that we recognise their efforts to support communities, by doing all we can to support them in return.

We will now work with colleagues across the policing sector to ensure this plan is embedded across the police service, so that our people can feel confident in the help available to them at all times.

**Nick Smart**

Acting President, Police Superintendents' Association

UNISON strongly supports the national action plan for suicide prevention and postvention in England and Wales. The plan seeks to change the culture of policing. It aims to make it easier for those who work in policing to report their own mental health concerns and also to support colleagues who may be in mental health distress.

The action plan will provide vital assistance to those who feel at risk of suicide and to the colleagues, friends and families of any police colleague who has died as a result of taking their own life. By working together in this way, we hope to reduce the risk of suicide going forward.

Being open and supportive about mental health, and tackling the stigma associated with it, really can help save lives. That is why UNISON is so pleased to be associated with this vital work on behalf of our police staff members. Collectively, we now need to put the plan into action.

**Ben Priestley**

National Officer

UNISON

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## About the College

We're the professional body for the police service in England and Wales.

Working together with everyone in policing, we share the skills and knowledge officers and staff need to prevent crime and keep people safe.

We set the standards in policing to build and preserve public trust and we help those in policing develop the expertise needed to meet the demands of today and prepare for the challenges of the future.

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