Exploring professional perspectives on the cascading impact of system responses to student suicide in secondary schools

Johanna de Lafargue

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Abstract

In the United Kingdom, educational psychologists support schools following student suicides through collaboration with school leadership, staff, and students, known as postvention. Various approaches are employed in response to such traumatic events. There is developing research in this area, as well as efforts to disseminate protocols and develop resources to support schools with these experiences. However, empirical exploration of effective support mechanisms in school settings remains sparse, particularly regarding staff support. This study involved professionals from three schools impacted by student suicide, utilising semi-structured interviews with school staff and online questionnaires with educational psychologists and senior leadership team members. The reflexive thematic analysis revealed that postvention led by educational psychologists and the headteacher is an evolving process influenced by the nature of incidents and school hierarchies, shaped by contextual and relational factors. Challenges arose concerning the definition of pastoral and professional roles as well as support boundaries. Although participants valued collaboration, certain personal, professional, and systemic factors sometimes hindered the effectiveness of postvention support. Barriers included reliance on personal experiences during crises and balancing student support with school routines. Findings suggest the need for clearer structures, role definitions, and support boundaries for professionals involved in postvention. Future research in this area may explore further identified barriers to the flow of support across school systems, particularly related to informal contracting among professional groups in postvention activities.

Keywords: Critical incident response, Death, Educational psychologist, Postvention, Qualitative, School professionals, Senior leadership, Student, Suicide.

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List of Abbreviations

Abbreviation	Definition
CI	Critical Incident
EP	Educational Psychologist
EPS	Educational Psychology Service
LA	Local Authority
PEP	Principal Educational Psychologist
RTA	Reflexive Thematic Analysis
SEN	Special Educational Needs
SENCo	Special Educational Needs Coordinator
SLT	Senior Leadership Team
SP	School Psychologist
SC	School Counsellor

1. Introduction

1.1 Chapter Introduction

This thesis reports on research exploring the perspectives of school professionals, specifically educational psychologists, senior leadership team members, and school staff, following a student suicide in secondary school settings. There is limited research in the United Kingdom (UK) on critical incident responses involving a death by suicide (see Brennan, 2021). This response in schools is also known as 'postvention' in the literature worldwide (Berkowitz et al., 2011). School staff views related to support which is provided following a student suicide are underexplored; investigating the latter is important to understand the mechanisms and factors that facilitate effective intervention (Causer, 2020). Addressing the gap through qualitative research can also inform policy and practice by enabling a fuller understanding the professional perspectives and real-world experiences of those involved in postvention (Causer et al., 2025). Therefore, this thesis aims to address this gap.

The qualitative exploration in this study aimed to gather perspectives from different school contexts; three schools consented to participate (Pseudonyms: Alderwick School, Braybourne School, Caldermere School). Two participant groups in each school, the 'educational psychologists' and 'senior leadership team members', responded to online open-ended questionnaires to share their views on the postvention process. They were given opportunities to reflect on what they would have additionally found helpful during this time of crisis. A third participant group, 'school staff', in two of the three schools (Alderwick School and Braybourne School) was asked similar questions in the format of a semi-structured interview. The responses from all participant groups were analysed based on the principles of reflexive thematic analysis (RTA) (as developed by Braun & Clarke, 2022).

This chapter focusses on introducing the topic of suicide postvention research and providing contextual information to ground the contribution of the thesis. Firstly, a brief overview of terminology will be provided, and the current child and adolescent mental health crisis will be discussed. This is followed by an account introducing the role of educational psychologists in critical incident responses specifically in relation to death by suicide. The chapter then goes on to explain the practitioner researcher positionality through reflections of my professional and personal motivations for the study, while reflecting on its relevance to educational psychology practice. At the end of the chapter, a thesis outline is provided.

1.2 Terminology and Concepts

1.2.1 Suicide

In the UK, a death by suicide is defined as being "from intentional self-harm for persons aged 10 years and over", and "where the intent was undetermined for those aged 15 years and over" (Office of National Statistics (ONS), 2020). Suicide is complex and is understood differently across contexts and disciplines (De Leo et al., 2021). In this thesis, suicidal phenomena are understood as multi-faceted, interacting with psychological, social, cultural, and systemic factors. This thesis also focuses on 'death by suicide' as defined and constructed (i.e., made sense of) by stakeholder participants rather than a reliance on how courts and coroners rule it or how it might be more narrowly defined for quantitative research studies.

1.2.2 Postvention

Throughout the empirical literature, definitions for postvention vary or are omitted (Andriessen, 2009). Here, postvention is seen as the intervention following a suicide, which is deemed to be therapeutic and incorporates multiple activities to support bereaved individuals and involves a variety of professionals (Berkowitz et al., 2011). Postvention has also been

shown to serve as a form of prevention, as it minimises the risk of further suicides and limits the deterioration of mental well-being in other community members (Andriessen, 2009; Jordan, 2017; Khalid et al., 2022).

1.2.3 Critical Incident Responses

A critical incident is defined as an unexpected event which causes distress or upset in an educational setting. Educational psychologists are part of the critical incident response team, supporting schools in the event of crisis (Beeke, 2011; Farrell et al., 2006). 'Critical incident response' as a term is more frequently used within UK and United States (US) literature (Dunne, 2023) and does not refer specifically to support provided following a death by suicide but to any traumatic incident. For this research, it will be used interchangeably with postvention, as both refer to processes and activities following a student suicide.

1.3 Child and Adolescent Mental Health Crisis

'Death by suicide' is a leading cause of death among young people worldwide (Royal College of Paediatrics and Child Health (RCPCH), 2020). There is currently a crisis in child mental health in the UK with an increase in referrals to Childline for suicidal concerns (Newlove-Delgado et al., 2022; ONS, 2020; Department of Education, 2023), although trends may also reflect a greater social awareness and an amelioration in identifying mental health needs amongst children and young people. Nevertheless, suicide rates have increased, and young women's suicides are reported to be the highest on record (RCPCH, 2020). This has led to government initiatives to develop suicide prevention as a priority (Hansard, 2023, March 23). Literature evidencing the need for suicide prevention is vast (Ashworth et al. 2023) compared to postvention (Stubbe, 2023). However, postvention is essential to support affected individuals from further harm (Jordan, 2017), particularly given the complex psycho-socio-

political landscape in which suicide occurs (e.g. individual distress, social influences and stigma, access to services, austerity).

The Coronavirus disease (COVID-19) pandemic, austerity, rising social inequalities, and an increased use of social media platforms has had a significant societal impact on suicide risk (John et al. 2020; Marchant et al., 2017), and impacted the services one can access for support (Schulze et al., 2019). Vulnerable and marginalised groups are overrepresented in suicide rates, with low socio-economic status and unemployment being the most influential predictors (Chandler, 2017; Platt, 2016). Knowledge of these contributing factors is essential to bear in mind when supporting the school community following a suicide, as it may help to identify vulnerable individuals in the system. Children and young people, their families, and services in the public sector, in the current context, are experiencing challenges of increased financial pressure, wait times and workload management (HM Government, April 2022). School funding is stretched, and capacity is limited which can lead to difficulties in staff being supported by their organisation (Department of Education, 2020; Lee & Woods, 2017).

Experiences in school such as academic pressure, peer relations and significant transitions, significantly influence mental wellbeing (Sun et al., 2007). An extensive body of empirical evidence has illuminated contributary factors to death by suicide, most often being related to adverse childhood experiences, mental health issues, isolation, bullying, academic pressures, and a lack of a sense of belonging (Grimmond et al., 2019). Adolescence is also part of a developmental trajectory whereby individuals develop adult identities, and social contexts are important to understand individual development and the strains there can be on individuals (Erikson, 1963; Lock & Steiner, 1999). Schools have a responsibility to ensure they promote and support emotional wellbeing (Department of Education and Department of Health and Social Care, 2015).

1.4 Educational Psychology and Critical Incident Responses

In the event of a suicide within the school community, many parts of the system are affected, and various considerations are needed for strategic planning. Each local authority is required to have a critical incident policy following the Civil Contingencies Act (HM Government, 2004), for which there are no official guidelines; therefore, these policies can vary from one local authority to another. Educational psychologists have a statutory duty to respond to critical incidents across the UK (Farrell et al. 2006). Due to the defined age range of suicide, and the limited educational psychology involvement in higher education, the focus of this research is on the secondary school setting rather than primary schools (Atfield et al., 2020; Causer, 2020).

Death by suicide in the school community leads to a need for support to those bereaved as well as to those who may experience trauma indirectly due to prolonged contact with others affected (i.e., as a form of 'secondary trauma' (Motta, 2008)). In addition, suicide can affect educational settings through ruptures of connections and space to process the events shapes the recovery of the organisations such as schools (Francis et al., 2022). The idea of post-traumatic growth suggests that growth can occur following a trauma rather than be bound to (solely) detrimental outcomes, whereby an individual can further develop and increase their ability to cope (Stein et al., 2018).

Due to the shocking nature of suicide and the known risks of 'suicide contagion' (i.e., further suicides by those in proximity to an initial suicide, [Cheng et al., 2014]), adequate responses need to be put in place at individual, group and organisational levels (Dunne, 2021). Although every critical incident is unique, leading to differing approaches, procedures, resources, and frameworks have been evidenced to be supportive in times of heightened stress (Beeke, 2011). Frameworks such as 'Ecological Systems Theory' have supported the

development of policy and educational psychology practice, as it ensures the considerations of wider systems around an individual's wellbeing (Bronfenbrenner, 1994). In postvention practice and suicide research linked to this, this may support a multi-level response to ensure wellbeing, which can in turn support the building of capacity within schools and be seen therefore as a form of prevention (Beeke, 2021; Cramer et al. 2017).

1.5 Practitioner Researcher Reflexivity

The research reported in this thesis can be considered practice-based research in the sense that it aims to develop professional practice by revealing the complexities of real-world experiences through professional participants and an 'applied' focus (Lunt & Shaw, 2017; Watts, 1984). This type of research often supports the development of policies, guidelines and frameworks. Indeed, this study uses a practice-based research approach to further inform postvention practice for educational psychologists who have a statutory duty to respond, as well as other professionals who seek to gain a 'practice-near' understanding (Robson & McCartan, 2016).

This approach fits with this study as it engages with real-world environments, schools, and participants are professionals working within or with the school system where suicide postvention occurs. The facilitators and barriers are explored qualitatively which captures the nuances of postvention. Prioritising contextual and relational understanding allows for more meaningful findings that are applicable to those working in postvention.

As a practitioner researcher, a dual role is held which influences the study and practice (Cullen et al., 2013). For example, working in an Educational Psychology Service (EPS) whilst exploring the perspective of the educational psychologist's role in postvention, influences how participants respond and position me as a practitioner and a researcher. Similarly, my experience in practice and theoretical alignments from training, such as system

psychodynamics, may influence my interpretation of what is shared and how meaning is constructed. Therefore, the practice-based approach opted for in this work requires reflexivity to consider positionality, power imbalances and to ensure an ethical responsibility as a researcher and practitioner (British Psychological Society, 2018).

The lens through which this study is conducted is influenced by both my cultural identity and my experiences of becoming a trainee educational psychologist. Growing up in France, cultural identity was not something I was ever prompted to consider that much; my experience was that this may relate to individuals being seen as first and foremost citizens, which shapes services and policies in France, keeping aspects of identity implicit. While I present, i.e., appear, as white, I struggled to identify with a particular group; this led to me seeking understanding beyond the specificity of a label, which influences how I practise and the relevance I give to contextual factors. I have a mixed cultural heritage (a White British parent and a French Caribbean parent), which, throughout my career and personal life, has, I think, meant I am more attuned to matters of 'difference', particularly issues of power, inclusion and representation in my work.

Being bilingual and developing the English academic language, more so as an adult, has also led to a concern on how there are significant differences in how language is interpreted, which has made me more sensitive to how meaning is constructed, as in (for this work) analytic processes in research. In addition, the intersection of this with my own learning needs and experiences of adversity in education has further shaped a desire to challenge more dominant narratives to ensure voices commonly unheard are accounted for. I see this desire as manifest in the work I have done to represent school staff perspectives currently missing in postvention and contributing to research which is limited in the UK.

I spent part of my formative years in the French education system. Managing my own mental health as well as others, which shaped my desire to work in a helping profession. I also recognise my sensitivity to the challenges of navigating secondary school whilst growing up amidst social pressures and expectations of academic performance. Whilst in secondary school, I witnessed firsthand the profound impact of several suicides within the school community when I was around 14 years old. What I recall of these events was an absence of visible adult intervention or structured support, leaving young people to independently navigate the fallout. This sense of a lack of support remained a key motivator for my research. In the UK, I have also encountered accounts from friends who are teachers, describing their experiences of having to manage the aftermath of suicides with limited external support or guidance. These conversations highlighted a recurring theme of isolation and uncertainty, which resonates strongly with my earlier experiences, further fuelling my commitment to exploring this topic.

Professionally, my work as a trainee educational psychologist and as an assistant psychologist in Child and Adolescent Mental Health Services, shaped my understanding of the complexities surrounding mental health crises in young people. Volunteering and offering psychological first aid to acute hospitals during COVID-19 also shaped my understanding of how valuable support is in times of crisis. I have also experienced feeling lost in my role and requiring further support to navigate the emotional impact of work, which I have mostly had the privilege to access through supervisory spaces, which is not afforded to all professionals. Through my training, I have worked with highly stressed school systems, observed critical incident responses in practice and witnessed their responsibility to prioritise this work. This work has sensitised me to the importance of timely, contextually relevant, and empathetic support in such situations, and how, in my position, I can now explore the systemic and

relational aspects of how schools respond to these tragic events, particularly the role of educational psychologists in providing guidance and postvention support.

1.6 Thesis Outline

The thesis contains six chapters including this chapter. The chapters follow the research journey and processes completed. The second chapter will provide a scoping review of empirical research literature related to suicide postvention in schools, highlighting gaps this study helps remedy. The third chapter details the methodology used for the study. Next, the analysis of the data is reported, across the fourth and fifth chapters to ensure clarity for the reader. The sixth chapter discusses the findings in relation to the existing literature, limitations of the study, and implications for future research and practice. Finally, a concluding chapter provides a reflective account of my personal journey in conducting this research.

2. Literature Review

2.1 Introduction

In the context of an ongoing child and adolescent mental health crisis, there is at present no clear guidelines for suicide postvention coupled with limited research in the area, as outlined in Chapter 1. To provide an overview of the available empirical research literature on responses in the aftermath of a student suicide, and the experiences of these responses, a scoping review was conducted via systematic means.

The chapter is structured in the following way. I begin by outlining the approach to the scoping review, including a detailed account of the search strategy, rationale for search terms and inclusion/exclusion criteria for the selection of the literature. I then describe the process of critical appraisal before reporting a synthesis of the literature included, alongside a thematic discussion of the findings of the review. Towards the end of the chapter, I consider the implications of the review and articulate a rationale for the empirical research reported in this thesis.

2.2 Approach to the Literature Review

A scoping review with systematic means was used to map the current evidence, clarify key concepts and examine how/what research has been conducted in the area of suicide postvention in secondary schools (Grant & Booth, 2009). Two questions guided this work:

a) What support is made available by educational professionals in the aftermath of a death by suicide of a student in a school setting?

b) How is the support provided in response to a death by suicide of a student in a school setting experienced by educational professionals?

To ensure rigour, the scoping review process was based on the PRISMA protocol (Tricco et al., 2018). I conducted a scoping review first, to answer the literature search questions, identify gaps and the range/type of research available concerning responses in the aftermath of student death (Paré et al., 2015). Following this, I completed a qualitative evidence synthesis to identify themes from the available empirical literature (Grant & Booth, 2009).

2.2.1 Search Strategy

The review involved the use of several databases to ensure scoping of the literature was achieved. Although searching more than five databases increases the risk of duplication (Vassar et al., 2017), this was necessary to ensure coverage (Bramer et al., 2017). My decision to cover a greater number was also premised on the fact that school suicide is a transdisciplinary research topic that extends across international geographical boundaries. I also sought advice from my research supervisor and consulted with a researcher who has considerable experience/expertise with literature reviews.

First, an advanced search was undertaken in October 2024 to capture any eligible publications up to that date, using the APA PsycInfo, APA PsycArticles, Psychology and Behavioral Sciences Collection, PEP, Education Source, ERIC, SocINDEX with Full Text, MEDLINE, and CINAHL databases. The abstract field was searched to ensure relevance, the key terms and 'Boolean operators' selected for this search are explained in Table 1 below. To ensure the scoping review remained up to date, the search was repeated in April 2025 to identify any newly published studies relevant to the topic. One potential study was identified for full text review (Fisher, 2024), however no full text was available at time of writing. Seven papers from the database search are therefore included in this scoping review.

Table 1

Search Terms and 'Boolean Operators'

Subject mapping terms	Key word search terms And 'Boolean Operators'	Rationale
Educational professionals	AB (teacher OR "school psycholog*" OR "educational psycholog*" OR "special educational needs coordinator" OR "senior management team" OR "senior leadership team" OR "school staff" OR "school professional" OR pastoral OR "school counsellor" OR "school counselor" OR headteacher OR "education* professional" OR "learning support assistant" OR "teaching assistant" OR "admin* staff" OR "school office staff" OR "guidance counsellor" OR "guidance counselor" OR "school nurse" OR "school social worker" OR "behavior support staff" OR "school wellbeing officer" OR "school mental health lead")	This set of terms captures the range of professionals involved in providing support after a CI such as a student suicide. The search includes: **Headteacher/Teachers**: Directly engage with students and may be the first to notice changes in student behaviour. **Educational/school psychologists**: Typically involved in emotional and psychological support within the school, often taking a lead in crisis situations. **Special educational needs coordinators (SENCOs)**: Often involved in managing students with additional needs, who may be particularly vulnerable during such incidents. **Senior management/leadership teams**: Responsible for decision-making and the implementation of school-wide responses or policies after a CI. **School staff/professionals**: A broader term to include all personnel who interact with the students, such as administrative and support staff. **Pastoral staff/school counsellor/School wellbeing officer/School mental health lead/guidance counsellors**: Focus specifically on the emotional, social, and welfare aspects of students' lives. **School Office/Admin***: Frontline communications with parents typically occurs through this department. **Learning support/Teaching assistant:** Present in the class interacting with students who may require support due to their proximity to students. **School nurse/ School social worker:** Their involvement as part of crisis response team is relevant because they often work with vulnerable students within a school setting.
	AND	

Suicide	AB (suicide OR "sudden unexpected death" OR "death by misadventure" OR "student death" OR "pupil death" OR "loss of a student") AND	This set targets the nature of the incident and includes: • **Suicide**: The central focus of the study. • **Sudden unexpected death**: While suicide is specific, some research may frame incidents in broader terms, especially in schools aiming to avoid stigma. • **Death by misadventure**: A term sometimes used to describe unexpected deaths that might involve accidental circumstances, but which some studies may include within discussions of postvention or CI response in school settings. • **Student death/Pupil death/Loss of a student:** This terminology may be used at times rather than suicide and it helps to specifically capture deaths within the student population. The phrasing may also be used to be more sensitive to the circumstances.
Schools	AB (school OR "primary school" OR "secondary school" OR provision OR "school setting" OR "school organisation" OR "school environment" OR "school community" OR "educational institution") AND	This ensures the search is restricted to school environments, and includes: • **School**: The primary context for my research. • **Provision**: This term includes particular settings such as Alternative provision/Arms provision/Specialist provision. • **Setting**: Compulsory schooling not university (i.e 0-19), Used to capture different types of educational institutions and contexts, e.g., primary schools, secondary schools. • **School organisation**: Organisational research may use this terminology. • **School community**: Broadens the scope to include systems working with schools. • **Educational institution**: Captures all school-related establishments.
Response	AB ("critical incident response" OR postvention OR support OR involvement OR intervention OR "crisis response" OR "crisis intervention" OR "bereavement support" OR "grief support" OR "aftermath support")	These terms focus on the response and support mechanisms following an incident: • **CI Response**: Standard terminology used to describe the systematic process a school follows after a crisis, including suicide. • **Postvention**: A term specifically used for support and interventions after a suicide, making it a key term for this search. • **Support/intervention**: A general term to capture any form of assistance (emotional, psychological, peer, etc.).

	• **Involvement**: Focuses on the participation of various stakeholders (students, staff, parents) in the response process.
	• **Aftermath:** Focuses on the events following a student death.

Note. CI: Critical incident

The limiters "academic journals" and "dissertation" were applied which yielded 1094 papers, however, this included duplicates, once exact duplicates were removed, 507 papers were left. In line with scoping review guidance, (Siddaway et al., 2019) a strict set of inclusion and exclusion criteria were set to only review relevant literature (Table 2 provides the inclusion/exclusion criteria along with a rationale for these).

Table 2

Inclusion and Exclusion Criteria

Criteria	Inclusion criteria	Exclusion criteria	Rationale
Study design	Studies were included if they were empirical and had an experimental or quasi-experimental or survey design.	Studies were excluded if they were opinion pieces or position papers which were not reporting the results of an empirical study. Studies were also excluded if they were reviews of the literature.	The review sought to identify studies which presented new data and findings in relation to literature search question. Including only empirical studies allows the author to directly critically evaluate the methods and results of primary research, ensuring analysis is grounded in original data rather than secondary interpretation/explanation.
Location	Studies were included if they described practice taking place in a school context.	Studies were excluded if they described practice outside of a school setting.	Research evidence was sought that was directly related to educational contexts.
Participants	Studies were accepted from all perspectives if they related to any professionals responding to a death by	Studies were excluded if professionals were not responding to a CI in the school context. Studies were excluded if the death by suicide was not a student at	The author is interested in the support provided by/to professionals in the school community in the aftermath of a student suicide to inform educational

	suicide of a student in an educational setting.	a school. Studies related to risk factors, and prevention were excluded.	psychology and teaching or pastoral support practice.
Publication	The search was conducted in October 2024 and again in April 2025. No other date parameter was set to gain an overview of the research on postvention over time. Papers written or translated in the English language only were selected.	Studies which the author had no access to were excluded.	For the purpose of the scoping review both peer reviewed and grey literature found to be relevant were included, this allowed the author to capture relevant theses.

Note. CI: Critical incident

These searches were also complemented by a snowballing technique to locate other relevant literature on the topic and a search was conducted in the first 10 pages of Google Scholar in October 2024. The search terms used for that search were: Suicide AND school AND (postvention OR "critical incident response"). The studies identified from this search were either types of literature reviews, opinion pieces, books or duplicates other than three papers (Cha et al., 2018; Hazell & Lewin, 1993; Rickwood et al., 2018) which were identified as relevant. Through snowballing, another two papers (Finegan, 2024; Poijula et al., 2001) and two theses (Brennan, 2021; Severn, 2024), were identified as relevant.

2.2.2 Selection Process

The PRISMA Diagram (Page et al., 2021), provides a visual representation of the selection process which ensures transparency and replicability (See Figure 1). The rationale of non-selected papers for the review which were assessed for eligibility by abstract and full text reading can also be found in Figure 1 and Appendix A.

Figure 1

PRISMA Flow Diagram of Study Selection Process.
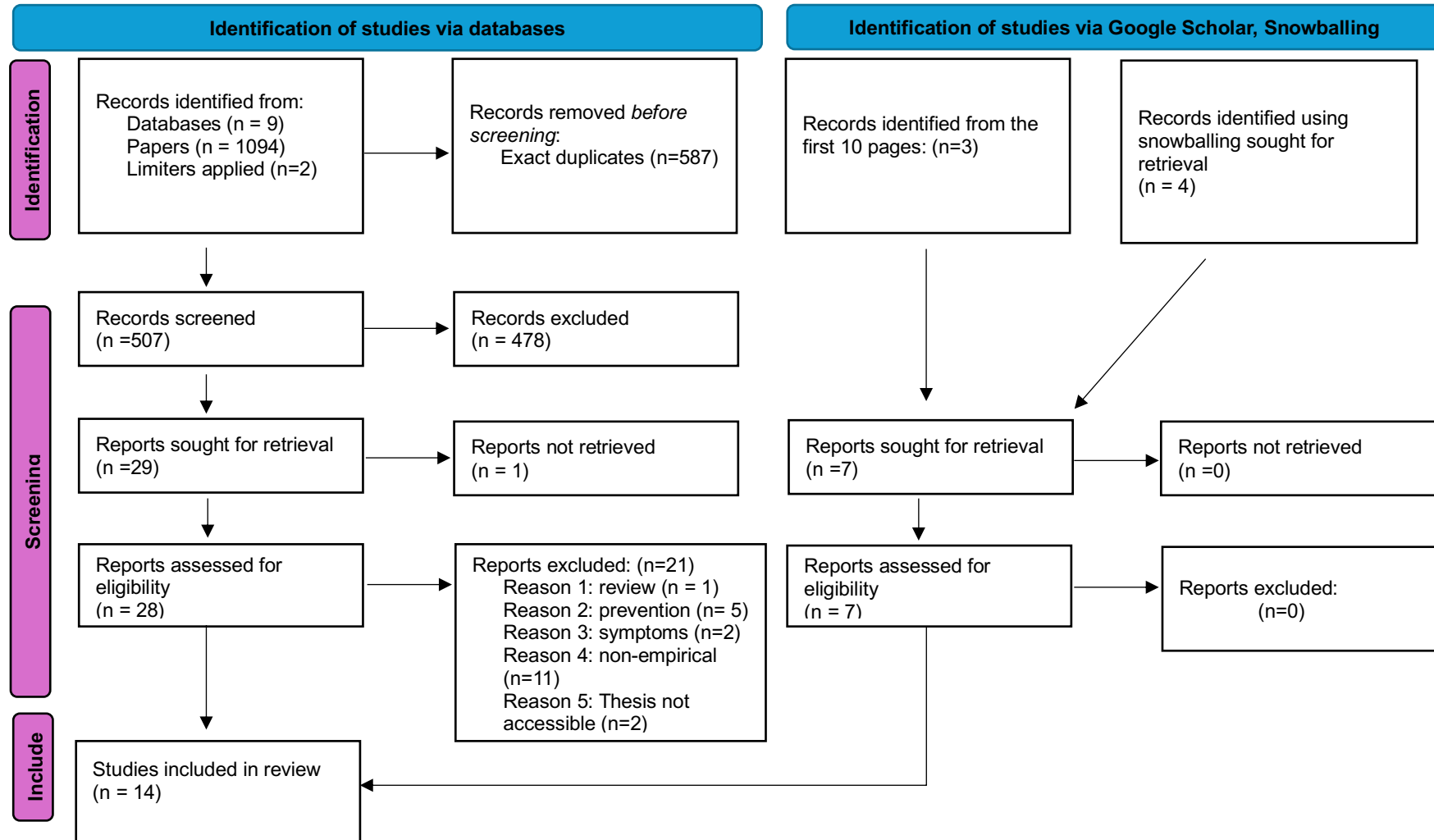
2.3 Critical Appraisal

The tools chosen to guide the critical appraisal of the literature were based on the diversity of study designs identified in the final 14 papers included.

The tools outlined below were used:

- Use of the Critical Appraisal Skills Programme (CASP) for the qualitative studies checklist (see Appendix B) and the cohort studies checklist (see Appendix B):

  o Both checklists provide questions and prompts aimed at evaluating research quality in terms of validity and applicability (CASP, 2018). Although this systematic framework is commonly used and endorsed, it has limitations (e.g., internal validity, methodological congruence), as noted by Hannes (2011). To enhance appraisal depth, I incorporated additional reflective questions (Noyes et al., 2019).

- Use of Mixed Methods Appraisal Tool (MMAT) (see Appendix C):

  o The MMAT was developed to evaluate mixed-methods research, enabling the assessment of empirical studies across qualitative designs, quantitative descriptive studies, randomized controlled trials, and mixed-methods approaches (Honga et al., 2018). This tool was chosen as it is evidenced to be appropriate for studies using mixed-method design addressing complex issues (Pace et al., 2012) and deemed relevant for postvention practice. However, MMAT uses broad/generic criteria which required further reflection to ensure a nuanced critical appraisal (Pace et al., 2012).

- Delphi Consensus Assessment Tool (DCAT) tool for the Delphi Study (see Appendix D):

  o The DCAT tool was developed to assess Delphi studies, facilitating the evaluation of research focused on expert consensus and iterative feedback across various fields and applications (Khodyakov et al., 2023). DCAT is relatively new, and therefore further reflection was required. However, it was chosen to ensure the appraisal reflected the consensus process' rigour.

Critical appraisal tools can risk oversimplifying the complexity of qualitative research by enforcing a uniform standard across varied approaches (Lester & O'Reilly, 2021; Noble & Smith, 2014). Therefore, in addition to using these tools, I sought to make use of my own reflexivity, cultural considerations and contextual relevance to ensure a more nuanced appraisal of the qualitative studies. I also consulted with two experts in literature reviews. A critical summary was developed for each study, which was then used in constructing the review.

To support transparency, critical appraisal tables (see Appendices A, B, C, D) are appended and include a RAG rating which illustrates the identified methodological quality (low, moderate, or high) of each paper included in the review.

2.4 Scoping Review

The selected studies for this review comprised 10 journal articles reporting 10 studies and four doctoral theses reporting five studies (Severn, 2024; reported two studies in a single thesis). While recognising that theses vary significantly in length, structure, and rigor compared to published empirical research these are included as part of the qualitative evidence synthesis as these have arguably been reviewed by an expert panel and therefore ensures adequate mapping of the literature. Of the selected papers for this review, methodology varied, with five studies using quantitative methods (Cha et al., 2018; Debski et al., 2007; Hazell & Lewin, 1993; O'Neill et al., 2020; Poijula et al., 2001), four employing mixed-methods approaches (Brennan, 2021; Cox et al., 2016; Mirick & Berkowitz, 2023; Rickwood et al., 2018), and six were qualitative studies (Farragh, 2019; Finegan, 2024; Hall, 2019; Hopple & Ball, 2023; Severn, 2024).

The quantitative studies employed survey-based designs with a range of sample sizes (e.g. 89 participants in Poijula et al. (2001) and 956 participants in Cha et al. (2018)). For some studies, the purpose was to measure pre- and post-intervention (Cha et al., 2018; Hazell &

Lewin, 1993), for others, it was to examine associations and predict patterns through statistical analyses (Debski et al., 2007; O'Neill et al., 2020; Poijula et al., 2001). The mixed-methods studies used descriptive analysis for their quantitative data, and for qualitative data some used thematic analysis (Brennan, 2021; Mirick & Berkowitz, 2023), whilst others provided qualitative descriptive accounts (Cox et al., 2016; Rickwood et al., 2018). The qualitative studies (Farragh, 2019; Finegan, 2024; Hall, 2019; Hopple & Ball, 2023; Severn, 2024)) employed thematic analysis, interpretative phenomenological analysis (IPA), and autoethnography, all with small sample sizes, although appropriate for in-depth exploration (i.e., between six and 11 participants). Of these studies, five were found to be of high methodological quality (Cox et al., 2016; Finegan, 2024; Hopple & Ball, 2023; Mirick & Berkowitz, 2023; O'Neill et al., 2020). Three studies were deemed to be of moderate methodological quality (Cha et al., 2018; Debski et al., 2007; Poijula et al., 2001) and two were of low methodological quality (Hazell & Lewin, 1993; Rickwood et al., 2018). Five of the studies in the theses were deemed to be of high quality due to their depth and detailed critical accounts (Brennan, 2021; Farragh, 2019; Hall, 2019; Severn, 2024).

Studies explored various aspects of suicide postvention in schools and these have been organised below to demonstrate how they answered the literature search questions.

With respect to the experiences of support made available by educational professionals in the aftermath of a death by suicide of a student in a school setting, studies explored what postvention roles and the response entailed (Brennan, 2021; Debski et al., 2007; Farragh, 2019), as well as developed postvention guidelines (Cox et al., 2016). In addition, studies also investigated appropriate postvention to aid in reducing the risk of suicide contagion (Poijula et al., 2001) and evidenced the impact of postvention following a student suicide (Cha et al., 2018; Hazell & Lewin, 1993). A study exploring the student perspective also documented professionals' postvention efforts (Mirick & Berkowitz, 2023).

With respect to support provided in response to a death by suicide of a pupil in a school setting experienced by educational professionals, in nine studies, the experiences and perspectives of professionals involved in postvention were reported. This included: educational psychologists (Brennan, 2021), school psychologists (Hall, 2019; Hopple & Ball, 2023; O'Neill et al., 2020), school counsellors (Hall, 2019), social workers (Hall, 2019), guidance counsellors (Finegan, 2024), high school principals (Severn, 2024), retired teachers (Farragh, 2019), school wellbeing coordinators and representatives (Rickwood et al., 2018), and experts in the field (e.g. school consultants, authors of peer reviewed papers in postvention; Cox et al., 2016).

The locations for the different studies were found to be predominantly in the US (N=8), followed by Australia (N=4), and then UK, South Korea, Ireland and Finland (N=1).

To present the findings of the scoping review, these have been separated into two sections – one addressing quantitative findings, and the other, qualitative findings. Consequently, mixed method studies are found in both sections.

2.4.1 Quantitative Findings

The quantitative findings of selected studies can be found in Table 3. Following this, these are presented by themes constructed from the synthesis. Findings indicated what support is made available in postvention, by identifying what training and preparation school staff receive to deliver postvention support, outlining specific interventions used after a student's suicide, identifying barriers and inconsistencies in risk assessment, and revealing effectiveness and current limitations of suicide postvention.

Table 3

Quantitative Research

Quantitative Research (Quantitative Studies)						
Author and Title	**Aim/purpose**	**Sample**	**Location**	**Data collection method**	**Method of data analysis**	**Main Findings**
Cha et al. (2018) *Five months follow-up study of school-based crisis intervention for Korean high school students who experienced a peer suicide*	To evaluate the effectiveness of a school-based crisis intervention program for Korean high school students who experienced a peer suicide, with a follow-up period of five months	956 Students	South Korea	Surveys and psychological assessments administered to students before the intervention, immediately after, and five months later	This was a prospective cohort study, ANOVA and T-tests used for the analysis of the pre/post data collected.	Postvention reduced PTSD, anxiety, depression, and complicated grief, but symptoms persisted in the trauma group at five-month follow-up, especially in girls. Elevated levels of PTSD symptoms among females and limitations in assessing pre-existing mental health highlighted the need for longer-term support and improved risk assessment.
Debski et al. (2007) *Suicide intervention: Training, roles, and knowledge of school psychologists*	To explore what the roles of school psychologists (SPs) in the areas of suicide prevention and postvention are, and the perceived barriers to involvement. To	162 SPs	US - Michigan	Online questionnaire related to risk assessment and postvention, exploring: training perception of	Descriptive analysis of responses	While most SPs had roles in crisis response, workload demands were a barrier. Less than half received instruction during their doctoral training, though newer programs included crisis management. Standardised risk assessments were rarely used, and cultural

				preparedness, roles in postvention, risk identification in scenarios.		considerations in risk assessment were limited. Many SPs appeared overly cautious in their responses to lower-risk scenarios. Ethical knowledge varied, with gaps in understanding around suicide glamorisation and best postvention practices. SPs who felt prepared scored higher on suicide knowledge, supporting the validity of self-reported preparedness.
explore what types of training they have received in these areas and how prepared do they perceive themselves to manage those roles. To understand levels of knowledge of current evidence regarding suicide prevention and response.						
Hazell & Lewin (1993) *An evaluation of postvention following adolescent suicide*	To evaluate one component (group counselling for at-risk students) of a pilot postvention program provided to two schools following student suicides	N= 806 students assessed using a risk index for suicidal behaviour. Of these, n=63 received postvention counselling, and their outcomes were compared to n=63 matched controls who did not receive counselling.	Australia (Newcastle, South Wales)	Questionnaires included: A risk index for suicidal behaviour, one's proximity to attempted and completed suicide, a suicidal ideation and behaviour profile, a drug and alcohol consumption questionnaire	Intervention within seven days of the suicides and counselling was offered to groups of 20 to 30 students. A simple correlation and 3-step regression analysis was undertaken.	Prior suicidal behaviour, rather than proximity to suicide, best predicted risk. Inefficiencies in school-based selection led to many at-risk students missing support, and postvention counselling showed no significant impact, highlighting the need for better risk identification and targeted interventions.

O'Neill et al. (2020) *Suicide postvention practices in schools: School psychologists' experiences, training, and knowledge*	To ascertain SPs' training, experiences and access to school district protocols in general postvention including suicide contagion, to explore knowledge and confidence with regards to this and to examine the relationship between training/experience/resource access with perceived knowledge and self-efficacy.	111 SPs (12.6% attrition)	US (North Carolina)	Perceived Postvention Competency Survey - created for this study	Descriptive analysis, linear regressions and multivariate analyses were conducted to identify associations between SP characteristics and perceived competency.	Postvention training significantly improved school psychologists' perceived knowledge and self-efficacy, substantial gaps remained, particularly in suicide contagion prevention. Many participants lacked adequate training, with over half feeling unprepared to provide postvention support, highlighting the need for comprehensive and ongoing professional development.
Poijula et al. (2001). *Adolescent suicide and suicide contagion in three secondary schools.*	To measure increased risk of other suicides after a suicide of a student at the school and understand the appropriate intervention to reduce the risk of suicide contagion	N= 89 students in three different schools. School A: n=15 boys, n=16 girls School B: n=15 boys, n=17 girls School C: n=16 boys, n=10 girls.	Finland	Secondary data of local SPs being informed on any new suicides in the three schools during the follow up period (1995-1999).	Poisson distribution for determining whether number was beyond chance.	Supported the suicide contagion hypothesis, showing increased suicide risk within months after an initial death. Schools that implemented crisis interventions led by trained professionals saw no further suicides during the four-year follow-up, suggesting postvention can mitigate contagion.

Quantitative Research (Mixed Method Studies)

Author and Title	Aim/purpose	Sample	Location	Data collection method	Method of data analysis	Main findings
Brennan (2021) *Providing support in a time of crisis: An investigation into how Educational Psychologists in the UK respond to a death by suicide within the school community*	How do EPs in the UK support school staff when a member of the school community dies by suicide? What are EPs' experiences of responding to a death by suicide within the school community?	N =76 EPs	UK	Online survey	Descriptive analysis	The survey found that 83% of EPs had responded to a CI, with 74% specifically addressing a death by suicide. Most worked at a systemic level (70%), while fewer provided group (60%) or individual (52%) support. Common support included face-to-face consultations, advising staff on language use, and discussing suicide with students, while handling the deceased's belongings and engaging with parents were less frequent. EPs largely felt supported, with 89% expressing satisfaction, though only 7% received workload reductions. While 79% felt adequately trained, 21% did not. Confidence was slightly lower for suicide response (6.1/10) than general CIs (6.9/10).
Cox et al. (2016) *Development of suicide postvention guidelines for secondary schools: a Delphi Study*	The development of a set of guidelines, to assist English-speaking secondary schools to develop a plan to respond to a student suicide.	40 experts across Australia/USA /New Zealand	Australia	Delphi method: Systematic review, online survey, three consensus rounds	Descriptive analysis for percentage agreement of 965 proposed actions	548 endorsed postvention actions grouped into 20 key themes, including emergency planning, communication, support for students and staff, media management, and long-term monitoring.

Mirick & Berkowitz (2023) *School-based postvention services: exploring the perspective of students*	To examine adolescents' experiences with school-based postvention services following the suicide death of a friend or classmate.	N =40 ex-students (of middle school or high school)	US	Online survey (closed and three open-ended)	Descriptive and chi-square analysis.	Support following a student suicide was inconsistent, with some receiving structured interventions while others had none. Guideline adherence varied, including differences in how deaths were announced. Memorials were seen as either healing or triggering. Non-mental health professionals (e.g., teachers, friends, family, coaches) were often perceived as more helpful than formal counselling.
Rickwood et al. (2018) *The need for and acceptance of a suicide postvention support service for Australian secondary schools*	To determine: the level of need for suicide postvention services in Australian secondary schools, the awareness of the recently implemented School Support program, the perceptions/use of the internet for suicide information and support, and to determine satisfaction with and early impacts of the service.	School Wellbeing Staff Survey, School professional (n = 214) Program Satisfaction Survey, School representatives (n = 359)	Au stra lia	Online survey: Yes/No responses, 5-point Likert scales, and open-ended questions.	Descriptive analysis of responses	Suicide risk is a concern for nearly half of Australian secondary schools, with many wellbeing staff reporting gaps in knowledge, skills, and support for managing suicide-related incidents. Engagement with headspace School Support (hSS, a postvention program in Australia) was associated with increased perceived preparedness, knowledge, and skills in suicide postvention. Satisfaction with hSS was high, with most respondents recommending the service. While online suicide-related support was viewed positively, the in-person, tailored nature of hSS was central to its perceived effectiveness.

Note. EP: Educational Psychologist, SP: School Psychologist, CI: Critical incident

2.4.1.1 Preparedness and Training of School Professionals. The preparedness and training of school professionals in suicide postvention was investigated in several studies, revealing strengths and gaps in current practices.

Training was found to be influential to feelings of preparedness and key to effective postvention. Two studies (Debski et al., 2007; Rickwood et al., 2018) found that formal training in suicide prevention and postvention was important for the effectiveness of support provided. Debski et al. (2007) identified that, for school psychologists, the perception of preparedness was positively correlated to suicide literacy, suggesting knowledge gained through training can support school psychologists in feeling prepared to implement postvention. In another study (Rickwood et al., 2018), the value of training was represented by school professionals in Australian secondary schools who reported an increased knowledge and confidence in postvention when they had accessed a postvention program (hSS). Training school staff in mental health and suicide risk assessment and liaising with external services was also recommended in Cox et al.'s (2016) study, along with highlighting that emergency response plans supported preparedness. The findings established a link between training and feelings of confidence in implementing postvention for both school psychologists and school staff, however in doing so, suggested a gap in specialist knowledge of postvention.

Preparedness for postvention and knowledge gaps were evidenced in several studies. Debski et al. (2007) found that less than half of school psychologists involved in the study had received professional development activity or formal training relating to suicide postvention. A survey study with school psychologists in North Carolina suggested considerable gaps in postvention competency, particularly in relation to suicide contagion (O'Neill et al., 2020). Participants reported being part of crisis service provision (70%), yet 61% felt inadequate to address suicide contagion effects, and 68% felt unprepared to lead a postvention response (O'Neill et al., 2020). These findings highlighted the importance of specificity within training,

such as addressing suicide contagion rather than general crisis response. A mixed-method study in the UK (Brennan, 2021) reported that 79% of educational psychologists felt their training and knowledge were adequate, albeit they identified slightly higher confidence (6.9/10) with general crisis management over suicide-related responses (6.1/10). Therefore, an increased need for specific postvention training was identified as general training related to critical incident responses appeared insufficient.

2.4.1.2 Involvement with Suicide Postvention and Evaluation. The studies reviewed suggested that there is a need for the involvement of school professionals and structured postvention plans. Differences were noted in the type of support provided throughout postvention (Hazell & Lewin, 1993; Mirick & Berkowitz, 2023; Poijula et al., 2001). Experts in Australia valued communication with various groups (staff, students, parents, the wider community), and suggested these as essential components of an effective postvention response (Cox et al., 2016). Similarly, Brennan's (2021) findings suggested the various levels of involvement from educational psychologists (individual, group, systemic) and highlighted collaborative systemic work as key in postvention, with 70% working at a systemic level with a few key staff members to plan responses, 60% working with groups, and 52% providing individual support to students/school staff. Professionals implemented postvention work in varied ways, however most frequently, this required a collaborative approach targeting individual, groups and systemic needs.

The selected studies involved various models and structures of intervention employed in postvention, while also highlighting the local variation in their application within schools. Some studies emphasised more targeted approaches and the importance of formal crisis intervention strategies by trained professionals, such as first talkthroughs and psychological debriefings (Poijula et al., 2001), while others spotlight a more flexible, holistic approach involving peers, school staff, and external mental health services (Cox et al., 2016; Mirick &

Berkowitz, 2023). Mirick and Berkowitz (2023) for example, found that the effectiveness of support services was mixed, with some students (30%) reporting they did not receive adequate support from professionals, whilst students who did receive support from peers or non-mental health professionals often perceived this as the most valuable form of postvention. Similarly, when evaluating a pilot postvention program, Hazell and Lewin (1993) found no significant differences in outcomes between students who received counselling and those who did not (albeit acknowledging the whole school intervention's impact may have generalised to the counselled group within the eight months before follow-up). Challenges in measuring postvention effectiveness were revealed due to individual needs and varied activities within schools. Despite these differences, a common thread amongst these studies was the recognition that postvention is most effective when it is tailored to the specific needs of the school community and delivered by trained professionals in a coordinated manner (Cox et al., 2016).

Workload challenges and limited use of external services/resources were indicated to hinder the effectiveness of postvention support. Debski et al. (2007) explored school psychologists training, knowledge and roles in postvention. Heavy workloads related to educational assessments and interventions were suggested to be a barrier to school psychologists' involvement in postvention activities (Debski et al., 2007). Rickwood et al. (2018) found that less than half of school wellbeing staff referred students to online counselling services, despite the availability of training and resources, highlighting that although resources and training were present, their actual usage was limited. As such, a need for a systemic approach was identified as involvement in postvention was impacted by external factors such as workload and links to external services.

Effectiveness of postvention using pre- and post-measures presents challenges as contextual factors (confounding) which may contribute to any change in symptomatology are not captured. A cohort study examining the effectiveness of school-based crisis intervention

following a student suicide using validated psychological measures (Cha et al., 2018) suggested significant reductions in post-traumatic stress symptoms, depression, anxiety, and complicated grief, particularly in girls but complete recovery was not achieved within the five-month follow-up period for students classified within a 'trauma group'. However, the reduction of symptoms was considered to be related to a broad range of factors beyond – and linked to - the intervention (Cha et al., 2018). Hazell and Lewin's (1993) study also highlighted the complexities of evaluating postvention efforts due to the ethical considerations required as well as the multiple confounding factors which exist. Both studies' findings indicated that no harm was inflicted with the postvention implemented however provided limited insight as to whether postvention was effective in supporting student recovery.

2.4.1.3 Knowledge and Applications of Risk Assessment. Risk assessment was a topic of several studies, and the findings highlighted the complexity of determining risk. Findings also show the variation in the application and perceived effectiveness of risk assessment.

School professionals and school psychologists found assessing risk and responding to varying levels of risk challenging, which may affect their confidence and decision making in postvention. Debski et al. (2007) explored school psychologists' responses to scenarios which had different levels of risk (high, mid, low). The findings suggested they were overly cautious using higher-risk actions in instances where the scenario suggested low risk. Part of the findings also suggested school psychologists did not consider cultural differences in suicide risk. On this basis, the authors argue that they may lack clarity in distinguishing between different levels of risk whilst incorporating cultural considerations of risk (Debski et al., 2007). Hence, a cautious stance may afford a safer path. This is reflected in Hazell and Lewin's (1993) study which found school professionals to have misidentified the level of risk in students. Proximity to a student suicide alone was found to be a poor predictor of future suicidal ideation or

behaviour, highlighting a need for more accurate and systematic methods for identifying at-risk students and that school staff perspectives alone are unlikely to be reliable enough to identify the next steps of support for students (Hazell & Lewin, 1993). Suggested from these findings is the need for training to increase suicide literacy amongst professionals and support their decision-making, with more nuanced risk assessment practices helping support the avoidance of being overly cautious and ensuring support is instituted where it is needed.

Despite some evidence pointing to increased training in risk assessment, there is evidence to suggest assessment tools need to be used with caution, over time and with flexibility to be effective. Some studies did not explicitly report on risk assessments and refer to monitoring the most vulnerable (Brennan, 2021; Mirick & Berkowitz, 2023; Poijula et al., 2001), and one study (Cox et al. 2016) highlighted that risk assessments should be incorporated at various time points post-suicide rather than once to ensure timely intervention. No direct evidence in the literature was found regarding the routine use of risk assessments in schools (Cox et al., 2016). This was further evidenced in Poijula et al.'s (2001) study, which explored how postvention can minimise the effects of suicide contagion. Arguably, showing that contagion effects emerged over time, which suggests the need for ongoing risk monitoring after a suicide. There is an emphasis on the need to monitor vulnerability over time and to develop an understanding of risk assessments in order to safeguard young people from further suicide attempts.

2.4.1.4 Adherence to Recommended Postvention Protocols. Some studies highlighted strengths and gaps in how schools respond to suicide within communities. A recurrent theme across the studies was the lack of consistent and comprehensive implementation of these protocols.

Context-dependent approaches appeared to contribute to inconsistencies in the implementation of postvention. Cox et al. (2016) was the first study to attempt developing guidelines based on expert perspectives and a systematic review of both empirical and grey literature (i.e., websites, policies, guidelines, etc.). The study highlighted areas that remained conflicting for experts, as these were specific to the context in which the student suicide occurred and would determine activities such as funeral and memorial arrangements, risk assessments, and parent involvement. This was further supported by Debski et al.'s (2007) study, which revealed gaps in knowledge, particularly regarding the prevention of suicide glamorisation through memorials and the use of expert-recommended interventions to discourage suicidal behaviours in affected peers. The findings of both studies suggest that inconsistencies may reflect an ongoing debate in the literature about optimal postvention practices.

Postvention protocols were not suggested to ensure consistent access to student postvention, nor did they aid school psychologists' confidence. However, although the presence of the postvention protocol did not predict perceived knowledge or self-efficacy, this does not mean that protocols were not influential in school psychologists' engagement in postvention (O'Neill, 2020). Moreover, Mirick and Berkowitz's (2023) study revealed differences in students' perspectives regarding the postvention approach; for instance, some students recalled being informed in small groups rather than through a large announcement, potentially influencing how they processed the event. Additionally, there were differences in how memorials were managed by professionals, leading to either positive or negative student experiences. The findings highlighted the range of experiences with postvention practices and the need for flexibility and sensitivity in protocols. An example of such sensitivity was outlined in both Cox et al.'s (2016) study and Brennan's (2021) study, where language and wording considerations were represented as key to effective and supportive postvention. For instance,

it is important for professionals to avoid criminalising or glamorising suicide. Throughout the selected studies, findings also emphasised that discourse regarding suicide is socially and historically situated, as terminology was noted to differ (Hazell and Lewin, 1993; Brennan, 2021).

 2.4.1.5 Strengths and Limitations of the Quantitative Findings. The quantitative findings reported the complexity of conducting research around postvention practices. Key strengths of the quantitative findings of these studies were the fact that they add to a paucity of research in postvention whilst also providing implications for future research. Some studies were also the first of their kind (Cha et al., 2018; Cox et al., 2016), many used large sample sizes (i.e., of more than 100 participants: see Cohen, 1992) such as 956 participants which enhanced generalisability (Cha et al., 2018; Debski et al., 2007; Hazell & Lewin, 1993; O'Neill et al., 2020; Rickwood et al., 2018). Generalisability was enhanced through the use of objective methods of data collection, such as psychometric tools, minimising researcher bias. For one study, there was also no direct involvement with participants, highlighting how an approach like this may be beneficial in postvention research (Poijula et al., 2001). This could be considered protective against re-traumatisation; however, within any research, participants are informed and able to withdraw at any point.

 These strengths notwithstanding, the absence of baseline data in many studies, such as Hazell and Lewin (1993), limits the ability to measure changes in students' mental health before and after postvention interventions. This gap in data impedes the ability to make comprehensive assessments of postvention effectiveness and highlights a need for qualitative studies that explore perspectives of effectiveness. Furthermore, selection bias presents a challenge, where students were selected for counselling based on their perceived relationship with the deceased (Hazell & Lewin, 1993) which may lead to inaccurate assumptions regarding the broader population of students who could benefit from postvention support.

Additionally, findings based on self-report data, which can introduce biases such as social desirability or recall bias, may skew interpretations. For example, school psychologists' self-reports about their experience and preparedness for postvention may not fully capture the messy, complex nature of practice and how the understanding of this can change over time (O'Neill et al., 2020). Another key limitation is the lack of considerations for confounding factors rendering the interpretation of findings less representative (Cha et al., 2018; Hazell & Lewin, 1993; Poijula et al., 2001).

Finally, cultural and contextual factors tend to be more superficially addressed in the reporting of these quantitative studies. Cox et al. (2016) argue that the importance of these being addressed as postvention should be tailored to the specific needs of a school community which will have important cultural influences. An additional consideration with the findings is differences in the definition of postvention (Cox et al., 2016; Hazell & Lewin, 1993; Mirick & Berkowitz, 2023; Rickwood et al., 2018) or lack of in some studies (Brennan, 2021; Cha et al., 2018; Debski et al., 2007; O'Neill et al., 2020; Poijula et al., 2001).

2.4.2 Qualitative Findings

The qualitative findings of selected studies are summarised in Table 4. Following this, they are organised by themes identified from the synthesis. The studies explored the experiences of different stakeholders, including school leaders, school professionals, educational/school psychologists, counsellors, and students, among others, when responding to a death by suicide in a school community. The emotional impact of suicide postvention, both in its implementation and in the experiences of receiving postvention, the role of leadership in crisis, the value of collaboration, preparedness, and the need for structured support are addressed.

Table 4

Qualitative Research

Qualitative research (Qualitative studies)						
Author and Title	**Aim/purpose**	**Sample**	**Location**	**Data collection method**	**Method of data analysis**	**Main Findings**
Farragh (2019) *Teacher support following death by suicide: An autoethnography of school counselor experiences within a rural school community*	To explore the lived experiences of a school counsellor (SC) navigating the aftermath of a student suicide in a rural educational setting. By exploring preparedness, understanding of policies and how these are implemented/influence institutional culture, influence of the SC in postvention)	6 Retired teachers	US	Individual interviews with retired teachers from a secondary school in a small, rural community, member checking, private anecdotal counsellor notes, counsellor reflections.	Thematic analysis (Gibson & Brown, 2009)	The study identified leadership was key in shaping teacher preparedness, implementing school policy, shaping its culture, and the role of the SC. Both headteachers and counsellors were viewed as leaders, with headteachers providing structure and counsellors offering support and expertise. A visible supportive leadership was important to postvention efforts. Teachers and SC relied on collaboration with school psychologists, social workers, clergy, law enforcement, and community mental health providers to effectively manage crisis response.

| Finegan (2024) *School organisational trauma during student suicide crisis* | To explore the concept of school organisational trauma in the context of a student suicide crisis, and how it affects school functioning. | School Guidance Counsellors (N=11) who had experienced a suicide in the last 5 years. | Ireland | In-depth interviews with a focus on interviewees' experiences from the moment they became aware of the suicide event through to the closure of the CI postvention. | An evolved version of interpretive phenomenological analysis (IPA) (Smith, 2022). Idiographic analysis followed by cross-case analysis with hermeneutic circling produced Group experiential themes (GET) | GET 1 was Managing Emotions ("You have to keep it together") with the subthemes: 'Appearing Resilient' ("No . . . script for that."), 'Fear of a Repeat' ("On alert physically and mentally"), and 'Feeling pressure- the impact of the Organisational Context' ("You have to put on your armour and just go…")

GET 2 was 'Feeling Disempowered - Organisational context' ("A Tsunami of Students") with the subthemes: 'Needing Support' ("Grasping at Straws"), and 'Accountable but Powerless' ("At the Mercy of Management").

GET 3 was 'Relying on Personal Resources' ("Scars are on my Back") with the subthemes: 'Still Feeling it' ("I don't think I'm over it all"), and 'Relying on self-compassion and self-care' ("Doing the best you can do"). |
| Hall (2019) *School Suicide Postvention: A Phenomenological Study of Perceptions of School Mental Health Professionals* | To explore experiences of school mental health professionals, implementation of postvention and understand their perception of postvention within | School mental health professionals (N=9) | USA | Semi-structured interviews | Phenomenological theme generation: 7 steps (Moutsakas, 1994) | Several themes were identified across participants, including: the importance of timing, community support, and of updated, relevant crisis plans, negative impact on school staff, and addressing student pain and anger. |

	their schools and their perception of challenges faced in implementing postvention.					
Hopple & Ball, (2023) *Collaboration Is Key: School Psychologists' Experience in Suicide Intervention.*	To explore SP experiences and attitudes in relation to collaboration in the context of suicide intervention activities.	10 SPs	US (Illinois, Kentucky, Indiana)	Semi-structured interviews	Descriptive phenomenological approach	Experiences described through interviews indicated that collaboration was a common activity which improved the quality of postvention, external collaboration was viewed both as beneficial for students and a barrier to postvention, SP were identified to cope through collaboration, and postvention would benefit from increased collaboration.

| Severn (2024) *An Interpretative Phenomenological Analysis Exploration of How High School Principals in the Rocky Mountain Region Experience and Make Sense of Responding to a Student Death by Suicide.* | To understand how high school principals experience the intersection of their professional responsibilities and their emotional response to a student death by suicide, (manuscript 1).

To explore how high school principals (from the Rocky Mountains) experience professional meaning after a student suicide crisis response (manuscript 2). | High school principals (N = 6) | US (Rocky Mountains) | In-depth interviews | IPA, generation of Personal Experiential Themes (PETs) and GETs | Manuscript 1, five GETs: (1) struggle with how religion, values, and cultural norms shape perceptions about mental health and suicide; (2) emotional toll and weight of leadership during suicide crisis events; (3) tension between expectations and the role of empathy in leadership; (4) difficulty of attending to the different social emotional needs of all individuals and the potential for negative psychological impact of students; and (5) need for collaborative professional relationships that are supportive of self and others.

Manuscript 2, four GETs: (1) commitment to help others and advocate for change in the wake of student suicide, (2) evolution of professional identity, (3) shift in perspective motivated by student death by suicide, and (4) personal and systemic changes that support a hopeful future. |

Qualitative research (Mixed method studies)

Author and Title	Aim/purpose	Sample	Location	Data collection method	Method of data analysis	Main Findings
Brennan (2021): *Providing support in a time of crisis: An investigation into how Educational Psychologists in the UK respond to a death by suicide within the school community*	To explore how EPs in the UK support school staff when a member of the school community dies by suicide and explore their experience of responding to student suicide.	EPs (n=5)	UK	Semi-structured interviews	Grounded theory approach (coding, comparing, categorising and theory building)	This produced a total of 15 axial codes which led to the core category 'Containment Across and Within the System.': 'Organising the EP' response', 'Emotional impact on EPs', 'EP Workload', 'Duty & responsibility of the EP, 'Multi-agency working', 'Vulnerable people within the system', 'Supporting the school', 'Sharing the news', 'Supporting the pupils', 'Complexities of suicide', 'Impact of the media presence', 'Factors influencing the support', 'Preventative working', 'EPs experience and confidence', 'Support for EPs'.
Cox et al. (2016) *Development of suicide postvention guidelines for secondary schools: a Delphi Study*	To develop a set of guidelines, to assist English-speaking secondary schools to develop a plan to respond to a student suicide.	40 experts across Australia /US/NZ	Australia	Feedback from experts (school consultants for postvention, authors of published postvention research, leadership role during postvention)	The feedback was reviewed by the research team, and it informed the refinement of action statements and context	The following feedback contributed to the development of guidelines for postvention: Uniqueness of suicide and a need for flexibility of guidelines which is based on the school's available resources and culture. High rates of false positives when screening therefore considerations for a different approach is important.

				after each round on their decision-making	to answers provided	Resources used for screening could be better allocated to other areas of postvention.
						Screening and obtaining parental consent are challenging.
						The location of support groups within the school setting may impact on the function of it as a place to learn.
						Importance of considering collaboration with external mental health services as staff should only take on work within their competence.
						Language used to support student should reinforce 'professional help' rather than 'treatment'.
Mirick & Berkowitz (2023) *School-based postvention services: exploring the perspective of students*	To examine adolescents' experiences with school-based postvention services following the suicide death of a friend or classmate.	40 ex-students of middle school or high school	US	Three open-ended questions from an online survey.	Thematic analysis to identify recommendations of school-based postvention services.	Six themes were constructed: Schools should be genuine (n=19), ensure supports are easy to access (n=17), recognize students need help (n=16), understand students have different needs (n=11), remember the deceased (n=11), and be flexible in terms of school requirements (n=10).

Note. CI: Critical Incident, EP: Educational Psychologist, SP: School Psychologist.

2.4.2.1 The Emotional Impact Related to Suicide Postvention. Most studies exploring different perspectives (educational psychologists, school psychologists, guidance counsellors, students, school principals) consistently identified a significant emotional impact throughout their involvement in postvention activities (Brennan, 2021; Finegan, 2024; Hall, 2019; Hopple & Ball, 2023; Mirick & Berkowitz, 2023; Rickwood et al., 2018; Severn, 2024). Brennan's (2021) study, involving interviews with educational psychologists, found that they experienced emotional difficulties during postvention, specifically marking three points: while preparing, responding, and following the response. Finegan (2024), in exploring guidance counsellor's experiences, similarly identified the challenges of managing emotions throughout. Both studies discerned an inability to prepare for the feelings encountered when responding to student suicide in a school. From the guidance counsellor perspective, there appeared to be an additional impact due to their role positioning and the expectation to respond while feeling inadequate, which affected their self-esteem (Finegan, 2024). Emotional exhaustion, uncertainty, and vulnerability were also identified for school principals responding to student suicide (Severn, 2024). School mental health professionals also recognised the emotional impact of suicide on school staff (guilt, burnout, and hypervigilance) and students (pain and anger), which necessitated professional input (Hall, 2019). Although different professional perspectives were gathered in these studies, similarities regarding the emotional impact of a suicide necessitating postvention and the effects of providing this support were evident in the findings reported. This highlighted the need for professionals to prioritise care in postvention efforts to adequately support those affected by student suicide.

More specifically, the emotional needs of professionals were described to relate to tensions between their personal beliefs and professional responsibilities. For example, Severn's (2024) first study, highlighted this conflict, whereby school principals in the Rocky Mountains (US) found it difficult to provide leadership and support to the wider school whilst navigating

their perceptions and stigma around mental health and suicide. To overcome this conflict which impacted effective postvention, the findings suggested the principals concerned benefitted from reflection and critical thinking of cultural influences related to suicide. The second study highlighted school principals were more effectively able to respond to their needs and the school's needs when they came to understand conceptual underpinnings of emotional wellbeing more broadly (Severn, 2024). In this way, suicide literacy and self-awareness were positioned as influential in providing support to the wider system (school community). Systemic thinking was further evidenced in Brennan's (2021) study, where educational psychologists were found to explore school needs in the first instance to inform their response rather than there being focus on the suicide itself. Moreover, from a different angle, postvention necessitated systemic thinking, beginning with reflection to develop self-awareness and ensure one's own beliefs does not entirely influence the support provided or the planning of the response to student suicide.

Despite understanding the emotional needs of a school, challenges remain regarding the meeting of individual needs within a system. Mirick and Berkowitz's (2023) study highlighted the difficulties of addressing individual needs within a broader system, as students expressed a desire for flexibility in postvention due to the varied experiences revealed in the findings. 'Frustration' and 'upset' were identified as emotions related to the postvention they received (Mirick & Berkowitz, 2023). The importance of flexibility and the uniqueness of each postvention were also emphasised by expert perspectives in Cox et al.'s (2016) study. In this respect, balance appeared to be required between systemic and individual needs, which highlights the tension between consistency arising from protocols/guidelines and the emotional flexibility needed, with schools likely benefiting from guidance which encompasses both of these.

Professional experiences of postvention also indicated a need for further care and flexibility themselves. Brennan's (2021) study for instance, reported that educational psychologists prioritised critical incident work over their already scheduled tasks, impacting their later workload and the time they had to process the emotional effects of postvention. Additional evidence of the necessity for processing time after implementing postvention was provided in Finegan's (2024) study. From the perspectives of guidance counsellors, a constructed theme titled 'Scars my back', underscored that these experiences lingered longer-term (Finegan, 2024). Moreover, the scars were reported to have fostered new learning and expertise (Finegan, 2024), a finding also echoed in Severn's (2024) study. This highlighted experiential learning as part of preparedness for future postvention; with additional support and adaptation being essential for professionals to feel adequately supported.

Collaboration was represented as involving not just colleagues in education but also mental health professionals. Notably, liaising with mental health professionals with previous post-intervention experience was beneficial. From interviews of school psychologists in the US, Hopple and Ball (2023) found that collaboration effectively supported professionals' emotional well-being, addressing issues like burnout and self-esteem while they were involved in postvention. Similarly, educational psychologists in the UK found the support provided by various supervisory spaces and colleagues valuable (Brennan, 2021), a sentiment also apparent in Hopple and Ball's (2023) report on school psychologists perspectives regarding collaborative approaches. Finegan's (2024) study also reflected this, suggesting that limited school containment - which seemed to refer to a process of providing a sense of safety to the school amid systemic ambiguity - was a barrier to post-traumatic growth and recovery. Overall, the necessity for trauma-informed leadership appeared essential for school staff recovering after a student suicide, and support to mitigate both the short and long-term emotional impacts of their work.

2.4.2.2 The Role of Leadership and Collaboration in Crisis. Postvention was found to require leadership to organise the response, provide emotional support, identify vulnerable individuals, and mitigate suicide contagion. Farragh (2019) suggested that school leadership roles in postvention are often assumed by principals, recognised primarily for providing stability and routine, as well as by school counsellors, who lead the provision of emotional support to the school community in collaboration with other leaders. In addition to school leaders in Farragh's (2019) study, educational psychologists were also identified as having a leadership role in organising postvention, specifically senior and principal educational psychologists (Brennan, 2021). Furthermore, educational psychologists, because of their unique position bridging the local authority and schools, were viewed as uniquely situated to facilitate a collaborative approach in postvention using specific skills (i.e., consultation) acquired through their training (Brennan, 2021). Educational psychologists also provided guidance and support to schools in identifying the most vulnerable pupils (Brennan, 2021). Similar to the leadership role of the educational psychologist, school principals have a duty to mitigate suicide contagion (which entailed identifying vulnerable individuals) while also leading postvention efforts (Severn, 2024). However, in mitigating the risks of further suicides, Cox et al. (2016) advised caution with risk screening, as this often leads to high rates of false positives; thus, time may be better spent in other areas of postvention.

Leadership skills and collaboration were also found to shape school culture (Farragh, 2019). That is, when leaders modelled ways to respond and collaborated, this appeared to influence both students' and school staff's experiences. However, school psychologists acknowledged the difficulty of holding certain responsibilities, such as communicating with parents and ensuring appropriate signposting (Hopple & Ball, 2023). To further support these responsibilities, 'shared leadership' was identified as beneficial, particularly through increased liaison with mental health services (Hopple & Ball, 2023). Severn's (2024) study reported that

decision-making and responsibility for school principals required them to manage their own emotions to engage effectively in postvention. This was reported to be challenging and incongruent when attempting to model self-care to the rest of the school, as they were neglecting their own (Severn, 2024). According to both Mirick and Berkowitz's (2023) and Brennan's (2021) studies, honesty and transparency in the support provided following student suicide were important, which was reported by Severn (2024) to be challenging.

Professional skills related to sensitive communication, liaising with colleagues, and supporting school staff were framed in the studies as essential leadership skills required in postvention. Mirick and Berkowitz (2023) emphasised in their findings that students were attuned to how information was conveyed and discussed. Experts in Australia also indicated in Cox et al.'s (2016) study that support for students was more effectively framed as 'professional help' rather than treatment, highlighting the importance of language in postvention. Similarly, educational psychologists noted that language and wording, as mediums of communication in crises, should be carefully considered to minimise negative impacts and enhance psychological safety (Brennan, 2021). These participants also underscored the significance of clear communication with schools, particularly in their leadership role in empowering staff, such as through postvention supervisory spaces and training, ensuring that roles are well defined (Brennan, 2021). The findings suggested that sensitive communication and leadership require clearly defined roles, especially as postvention extends beyond internal school teams and necessitates collaboration with external services like local authorities or mental health services.

Across studies, participants recognised the importance of professional collaboration in ensuring that suicide postvention activities were both cohesive and sustainable. Collaboration within the school and with external services was also identified as effective in postvention efforts. From an educational psychologist and school psychologist perspective, collaborating with external mental health services and adopting a multidisciplinary approach proved to be

valuable (Brennan, 2021; Hopple & Ball, 2023). In coordinating postvention, collaboration offered significant value by preventing duplicated efforts (Brennan, 2021). In providing support, collaboration was appreciated as it facilitated shared responsibility, expertise, and enhanced support for individuals needing ongoing intervention (Hopple & Ball, 2023). The study grouping school mental health professionals found that the level of input from community services affected the effectiveness of postvention (Hall, 2019). This was echoed by school principals (Severn, 2024), who emphasised the need for collaborative support from colleagues and professionals outside the school. Although collaboration occurred among the professionals working with schools, school staff were found to have limited liaisons with external services (Hopple & Ball, 2023). Barriers in collaboration were reported to be related to a difficulty in communicating across systems, which ultimately led to decreased internal cooperation, affecting capacity building and relationships with external services, in turn noted to have financial implications for schools (Hopple & Ball, 2023). Therefore, despite evidence pointing to the benefits of collaboration, it can be a far from straightforward process.

2.4.2.3 Preparedness and a Need for Structured Support. A key theme identified to support the school community in managing suicide postvention was the need for structure, plans, and proactiveness within the context of an unexpected crisis. Preventative work, including policies, protocols, and training, was discussed in educational psychologist interviews as important (Brennan, 2021). This was also evidenced in Farragh's (2019) study, where teachers felt they faced challenges in supporting students because they had limited training or professional opportunities. Findings from this study also suggested that teachers were unaware of policies directly linked to the implementation of postvention and crisis plans (Farragh, 2019). Despite this, participants managed as best they could without such resources, their perspectives identified counsellors and administrators as the relevant roles to use these guidelines in managing the response to student suicide and routine (Farragh, 2019). As such,

although value was placed on protocols, policies, and training, experiences of these could be limited for teachers compared to educational psychologists and possibly school counsellors.

There appeared to be tensions apparent in the studies between the need for structure before/during postvention and the flexibility to adapt to the needs arising from a unique traumatic event – social trauma. While structure, postvention guidelines, and plans were considered helpful, flexibility to manage the unexpected was essential (Hall, 2019). Student perspectives emphasised the need for accessible support, which required information to be shared efficiently about groups and avenues of support, as well as professionals and adults actively reaching out (Mirick & Berkowitz, 2023). School principals shared the challenge of managing emotional needs within the school community while following policies and protocols and indicated that flexibility is required (Severn, 2024). Furthermore, through experiencing postvention and reflecting, professionals were able to identify gaps in the support provided and emphasised the importance of updating crisis plans (Hall, 2019). Learning from experience was also represented in Severn's (2024) study, with hopefulness among participants being found to be linked with feeling better prepared and equipped for recovery should such a crisis occur in the future. Educational psychologists also spoke about the relationship between professional experience and confidence in implementing postvention (Brennan, 2021). Interwoven throughout the discourse was the assertion that both flexibility and structure contribute to the sense of preparedness for postvention, informed by the reflections and prior experiences of professionals. So, while postvention protocols assist in organising and initiating activities, their effectiveness could be contingent upon integrated approaches and lived experiences, and diverse perspectives and capacities to adapt.

2.4.2.4 Strengths and Limitations of the Qualitative Findings. The qualitative findings in the selected studies provided in-depth information about the subjective experiences in managing and receiving postvention, highlighting structures which enhance effectiveness.

Another strength of the findings discussed is the varied perspectives gathered from professionals, and students. This captures a more nuanced understanding of dynamics inherent to postvention in schools. It also captures the complexity of leadership in postvention activity for different professionals. Severn's (2024) studies highlighted the tensions principals hold between managing their own vulnerabilities and having to model strength to the school community. Similarly, Farragh's (2019) autoethnographic account echoed this need for leadership to be available and demonstrate expertise in their response. In doing so, these studies highlight the necessity of support for leadership roles to navigate the response. Mirick and Berkowitz (2023) supplement this, by highlighting how students seek and appear to benefit from attuned leadership in a school community. The perspectives shared from first-hand experience provide emotional and contextual nuance supporting in-depth understanding how postvention support offered and received is experienced.

Qualitative research does not concern itself with generalisability as quantitative paradigms do, but can rather prioritise transferability. Therefore, smaller samples from specific geographical locations or schools are important considerations when interpreting the findings. Severn's (2024) research, for instance, addresses particular beliefs that may not be prevalent in other school contexts. This is especially relevant since other qualitative findings in the selected studies suggest that school culture significantly influences effective postvention (Farragh, 2019; Mirick & Berkowitz, 2023). Additionally, a multidisciplinary context for educational psychologists in the UK (Brennan, 2021) differs from the contexts school psychologists practice in working in the US (Hopple & Ball, 2023). This being so, the in-depth data contributes to a deeper understanding of the phenomenon and how effective postvention is experienced in various parts of a school system, particularly considering the unique nature of each context and critical incidents. The revealing of emotions in participants' accounts

highlighted the virtues of qualitative research in capturing affective dimensions of postvention, as well how experiences are emotionally and temporally shaped (Farragh, 2019; Severn, 2024).

Though subjectivity can be viewed as a drawback of qualitative research, it also fundamentally contributes to its value by providing in-depth insights into how participants interpret their experiences. However, it remains important to consider this in interpreting findings, for example, students who chose to participate may have different perceptions from those who may not have (Mirick & Berkowitz, 2023). Furthermore, the reporting studies may have censored their contribution or been particularly marked by certain aspects, e.g., of selective memory recall of postvention due to the sensitivity and nature of the topic. For example, in Farragh's (2019), participants were retired teachers, and information about when/how they had left practice was not included. However, time elapsed may have had an impact on information gathered, though triangulation of information was used by using secondary data (documentation and notes) which enhanced the trustworthiness of the findings.

Another consideration is the role of the researcher and their interpretation of findings in different studies. Researcher reflexivity constitutes a key consideration in qualitative studies. The researcher influences the interviewee during data collection; therefore, reflexivity is essential as all perspectives are situated. For example, it is important to note in Farragh's (2019) autoethnographic study, the dual role, may lead to a questioning of sufficient distance, as personal relations and emotions do likely influence interpretations. However, several studies employed strategies to enhance robustness through member checking (Farragh, 2019) and reflexivity (Finegan, 2024). Arguably, the role of the active researcher supports engagement with data, allowing for the interpretation of implicit meanings and situating participants within the wider cultural and social context. Yet, while some studies offered clearer rationales and accounts of their reflexivity in their choices for theme construction; where detailed accounts were missing, it became more difficult to assess interpretations. For instance, Brennan (2021)

provided a rationale, whereas Hopple & Ball (2023) did not. Other challenges in transparency related to the sensitivity required in postvention research, ensuring confidentiality and anonymity in smaller groups. In the selected studies, there was also very limited discernment of the intersection of postvention and wider factors, such as cultural background, power, and authority in schools, which would conceivably impact the understanding of experiences, identities, and roles in schools.

2.5 Discussion

The discussion summarises the main insights from the selected studies whilst answering the literature search questions and situates the findings within the broader context and theoretical underpinnings previously outlined. A self-critique of the review follows, identifying strengths and limitations, as well as the gaps identified within the research. Finally, I briefly address the rationale for the empirical research reported in the thesis.

2.5.1 Summary of Scoping Review

Through qualitative and quantitative means, the selected studies for this scoping review revealed postvention efforts made available by educational professionals in school settings. From quantitative findings, key areas identified were structured protocols/guidelines, risk assessment tools, systemic work and psychological debriefing. However, variations in responses from participants and uncertainty of confounding factors suggested a need for tailored interventions for each unique context. From qualitative findings, collaborative approaches, leadership for both practical and emotional support and sensitivity in communication were specified to figure centrally in professional postvention activities.

Experiences of postvention were found to have a significant emotional impact across all studies, with a range of stakeholder groups. Quantitative findings highlighted the need to feel prepared through training and structured protocols to support their confidence in

postvention. However, findings also suggested varied experiences, cultural differences and individual needs, which are not currently met within existing frameworks. Qualitative findings provided detailed experiences which highlighted a broad spectrum of emotions held throughout postvention by different professional groups, such as vulnerabilities, exhaustion, and uncertainty. Findings also highlighted how, amongst the difficult emotions, there was experiential learning which supported growth and professional development. Again, collaborative experiences were valued as well as flexibility within the structure of postvention.

2.5.2 Contextualising the Findings

In line with the findings of this scoping review, the current UK policy and socio-cultural context, as well as factors influencing mental health, are important to consider. For example, when implementing postvention, dimensions such as risk assessment or the unique needs of vulnerable students who may have increased risk factors are important to consider (Chandler, 2017). This reinforces the importance of professional awareness through preparedness and training, as well as more flexible and targeted postvention for vulnerable groups.

The increased support for staff throughout postvention identified in the review is also increasingly relevant within the context of financial and workload challenges in secondary school provision (Lee & Woods, 2017). Moreover, the findings highlight the impact of postvention on leadership roles as well as staff, and these may be understood within the concept of secondary trauma (Motta, 2008). Collaborative approaches are valued for effective postvention, which aligns with broader critical incident literature (Beeke, 2021), reinforcing the importance of joined-up, team-based approaches.

Findings related to experiential learning from postvention activities are also consistent with the findings of other studies which suggests that whilst it remains challenging, effective postvention may develop stronger school systems and post-traumatic growth in the longer term (Beeke, 2011; Stein et al., 2018).

2.5.3 Critique of the Review

The scoping review provides a comprehensive overview of the current research, especially through the inclusion of theses which are often excluded (Armstrong et al., 2011). This increased the trustworthiness of the review as the high level of detail is often difficult to include within articles. At the same time, there are limitations. For instance, the review could have included additional grey literature such as policy documents, reflective accounts, and websites, amongst others, which may have influenced the findings and provided a more holistic view of postvention as seen in Cox et al.'s (2016) literature review.

The choice of databases to conduct the literature search was a relative strength as it included different professional fields which is crucial to the topic of suicide. Nevertheless, with the constraints of a time-limited doctoral study, I chose to focus my searches on the most relevant and comprehensive databases I had access to, and I did not extend this to ones I had no access to, which may have yielded additional relevant studies (although there is also an increased chance for duplicates considering nine databases were searched already). In addition, while the search terms were carefully selected based on the literature search questions, some terms may have been missed due to there being no universal definition of postvention and this can be referred to in varied ways across the evidence-base (Andriessen, 2009). The long list of search terms supported the exclusion of non-relevant papers, however the way research is indexed presents challenges and may have led to exclusion of relevant studies (Bramer et al., 2017). The inclusion criteria were also focused on the school context, further broadening this may have provided increased insight into postvention across contexts which may still be relevant to school settings (Clements et al., 2022).

The methodology of the review demonstrated several strengths, including thorough data charting and extraction of the studies (Tricco et al., 2018). Guidelines and critical appraisal tools were also used to ensure a thorough approach. As well as this, these resources were used

with reflexivity to include theses and to ensure cultural considerations in reviewing the research as well as critically considering the reporting of the research with regards to the language used (Long et al., 2020). Reflections on my methodological stance were also provided, as qualitative studies were more frequently assigned a higher quality, and reflexivity along with critical appraisal tools enhanced trustworthiness. I additionally sought to provide a balanced interpretation through reporting conflicting results and carefully discussing these which strengthened the credibility of this review.

2.5.4 Implications for the Empirical Study

The mapping of the literature highlighted that a significant proportion of studies having been conducted in the US and Australia. What is more, the overall number of studies addressing the topic postvention in schools is relatively scarce. The review identified significant gaps with under-sampled groups, particularly school staff and students, which is evidently crucial to understanding the effectiveness of current postvention practice. Another notable gap is that no research exploring postvention across groups within one or several school contexts was identified. This appears crucial, considering the findings of this review highlighting the uniqueness of postvention in each school setting.

The current study, by exploring varied professional perspectives in postvention, helps to address some of the gaps identified in the literature. Firstly, considering only one thesis selected was from the UK, the current study will aim to add to the evidence base as professional roles, legislations, and sociopolitical climates influence practice. Secondly, the aim is to explore the experiences of postvention in different school contexts in the UK from different professional perspectives to enhance the understanding of effective postvention.

2.6 Chapter Conclusion

This chapter provided a scoping review of professional involvement and perspectives of postvention research in school settings, critically appraising the selected studies and synthesising the findings. Finally, it provided some critical reflections on the review design and provided a rationale for the current study based on the identified gaps. While empirical studies highlighted components of postvention in schools, there is a paucity regarding how professional involvement is distributed across systems (e.g., how occurrences of support at one level may influence the well-being of others). In exploring the cascading effect of support, the current study aims to develop a more nuanced, systemic understanding of postvention work. The next chapter will provide a detailed account of the empirical study's methodology.

3. Methodology

3.1 Introduction

This chapter describes the aims and purpose of the current research, and the research questions established following the literature review. Research is built on foundations and situated within paradigms known as 'Ontology' and 'Epistemology', which will be considered concerning this study. The recruitment process will also be explained, including the sampling strategy, characteristics of the sample, and the rationale behind these choices. The approach to data analysis follows the principles of 'Reflexive Thematic Analysis (RTA)' (Braun & Clarke, 2022), which will be critically discussed, along with a detailed account of the data analysis process. Furthermore, this chapter will report on key ethical considerations.

3.2 Aims and Purpose

The purpose of this research is exploratory, to consider the perceptions of educational psychologists, senior leadership team members and school staff concerning the support given and received following a student suicide within a secondary school setting. An explorative qualitative design was used as this best fits with the research questions outlined below. Other approaches were considered such as case study methodology, however, due to the sensitivity of suicide as a topic and the necessity of in-depth context required for this approach this was not deemed appropriate within the timeframe of this research project (Crowe et al., 2011). Exploring lived experiences in different school contexts to further develop and inform the support provided helps address this gap. This study prioritised amplifying the voices of those directly involved in school-based responses to suicide. In so doing, it aimed to bridge the gap between policy and practice in fostering more compassionate and effective postvention approaches, whilst exploring the construction of meaning in different contexts (Carter et al. 2014).

3.3 Research Questions

Overarching question:

What is the cascading effect of support provided to secondary schools following a student suicide in a secondary school setting?

1. To what extent is support offered and received between educational psychologists and senior leadership team members considered effective?

2. To what extent is support offered and received considered effective from the perspective of the school staff (teaching and non-teaching staff)?

3. To what extent is there congruence across the school system regarding the support offered and received?

3.4 Research Orientation

Research practice is defined by 'basic belief systems' also known as paradigms. This is best understood by examining the philosophical foundations of ontology, which explores the nature of reality, and epistemology, which addresses how knowledge about reality is acquired (Guba and Lincoln, 1994). Realism and relativism are two different ontological positions (Poucher et al., 2019). Realists maintain that a shared external reality exists independently of how it is represented, implying there are objective, as opposed to subjective, ways of apprehending this reality (Robson & McCartan, 2016; Guba & Lincoln, 1994). By contrast, relativists argue that our subjective experience constructs what we understand as 'truth', hence, there may be said to be multiple 'realities', with subjectivity and experience being the mediums through which we understand them (Robson & McCartan, 2016; Guba & Lincoln, 1994). However, rather than being strictly dichotomous, these two positions are better understood as endpoints on a continuum.

To explore/identify the paradigm of research, the conceptualisation of language is crucial as it is at the centre of epistemological and ontological thinking (Burr, 2003) and I am primarily concerned with participants' accounts as socially constructed phenomena. This is to say I am led by questions such as: What reality is being created in the accounts of the participants? What 'narrative/nature' is ascribed to the experiences of responses in the aftermath of student suicide? Such an approach seeks to explore the versions of stories told, and what the implications of the different versions are (Marsh, 2020). And this understanding of language best fits with a relativist ontology and social constructionist epistemology (Willig, 2013). Some researchers argue that social constructionists do not concern themselves with 'reality' (ontologies). However, a 'weak' or 'light' form of social constructionism avoids radical relativism and acknowledges that certain aspects of reality (e.g., physical objects or biological processes) do exist independently of human thought (Burr, 2015) whilst maintaining that our experiences and interpretations of these is socially mediated (i.e., our understanding is socially constructed). This approach allows for practical engagement with the world while avoiding overly abstract ontological commitments., as with a 'strong' social constructionism which questions the very existence of an objective or pre-social reality (Foucault, 2002; Phillips, 2023).

In considering the epistemological and ontological foundations of my research, I take into account the value of qualitative mental health research in the field of suicidology, and the respective merits of critical realism and social constructionism (Fitzpatrick et al., 2015; Hjelmeland & Knizek, 2010; Hunt & Brookes, 2020; Neimeyer et al., 2014; Rogers & Pilgrim, 2014). Critical realism emphasises the existence of an independent reality, proposing that underlying causal mechanisms can be uncovered through research. This approach can be valuable for exploring the deeper factors that influence suicide and mental health, as it allows for a more nuanced understanding of these phenomena. However, my research focuses more

on the subjective and socially constructed meanings surrounding suicide, particularly how individuals and communities come to interpret such experiences within particular sociocultural contexts.

In this regard, social constructionism, especially in its 'weak' form, provides an appropriate metatheoretical framework for my study, supporting exploration of how meanings are constructed through language, social interaction, and cultural practices, without denying the existence of an external shared reality. Since my primary aim is to investigate how people construct and make sense of the experience of the response to student suicide, I believe that social constructionism offers the most appropriate lens through which to approach my research. This approach not only aligns with the focus of my study but also enables me to contemplate complexities of meaning-making processes in suicide postvention, reflecting the diverse and contextually specific ways in which these issues are understood. By utilising this lens, this research acknowledges that responses to student suicide are not solely based on individual expertise or standardised procedures. Rather, they are influenced by the collective meanings and practices established within educational settings (and by virtue of this, ways institutional culture, societal expectations, and interpersonal dynamics can interact to shape how educational professionals, experience, respond and manage student suicide). Furthermore, social constructionism facilitates an appreciation of multiple, potentially congruent or incongruent, perspectives among educational psychologists, senior leadership team members and school staff.

3.5 Sampling and Participants

The current study aimed to explore the perspectives of different school professionals in the aftermath of a student suicide; therefore, participants were recruited using a purposive sampling strategy due to the unique characteristics of the research questions (i.e., information

would not be able to be gathered otherwise; Campbell et al., 2020). This study was conducted in England.

3.5.1 Purposive Sampling Strategy

The recruitment process involved multiple stages to ensure informed consent and ethical approval (see Appendix E). The purpose of this process was to preserve anonymity should someone wish not to be involved. Initially, a scoping email (see Appendix F) was sent to several local authorities for the attention of the Principal Educational Psychologist (PEP). This scoping email highlighted key aspects of the research and provided for a follow-up discussion should the PEP feel that one of the schools they have worked with would meet the criteria for being involved in the research (see Appendix G for infographic). Upon consent from the PEPs, they were provided with a consent form, and information sheet, with a request to circulate these materials to educational psychologists who have been involved in responding to a suicide of a child or young person within a school (see Appendix H). Once educational psychologists' consent had been obtained, they discussed with the school where the critical incident occurred to seek their consent. Once school consent was received from the involved educational psychologist, I sought the necessary approvals from the school to distribute an information sheet to both senior leadership team members (Appendix I) and school staff (Appendix J). This process involved obtaining permission from the headteacher, which varied from school to school. In some instances, Iwas available to visit the school in person to introduce themselves, provide additional information, and address any questions the headteacher or staff may have (see presentation introducing the research in Appendix K). Once all consent forms were signed, I arranged an on-site meeting for data collection through semi-structured interviews and shared the questionnaires with the educational psychologists and senior leadership team members.

3.5.2 Sample Characteristics

The rationale behind including three participants groups fits within the social constructionist position of capturing diversity within the sample to explore the multiple ways of constructing and interpreting the phenomenon of interest. The three different groups are an important part of the design as the responses to suicide are collaborative. As the last chapter established, there is limited evidence which explores how responses are received on the ground and how support filters through the layers. Braun and Clarke (2022) emphasise that the depth and richness of data in RTA do not rely on a predetermined dataset size or large volumes of data, but rather on uncovering the nuances within the data that has been collected (Malterud, Siersma & Guassora, 2016). The focus is on identifying key patterns that are relevant to the research objectives (Malterud, Siersma & Guassora, 2016). Therefore, I was not preoccupied with a 'set' number of participants but rather to reach participants interested in taking part who met the inclusion criteria (see Table 5).

Table 5

Inclusion Criteria per Group

Participant group	Inclusion criteria	Number of Participants per school
Educational Psychologists	- Qualified EP with HCPC and BPS registrations working in the UK, involved in a CI involving death by suicide. - CI work has been completed and it was less than 3 years ago. - CI work in a secondary school setting.	At least 2
Senior Leadership Team Members	- SLT must be able to verbally communicate in English. - A member of SLT at the time of the CI in the school.	At least 2
School Staff	- School staff must be able to verbally communicate in English. - Working in the school at the time of the CI.	4 to 8

All 3	• Informed consent has been received from each participant. • Involvement in the same CI response

Note. BPS: British Psychological Society, HCPC: Health Care Professions Council, CI: Critical Incident, EP: Educational Psychologist, SLT: Senior Leadership Team member.

Below is a table of the overview of participants successfully recruited per school context:

Table 6

Recruitment Overview

	Alderwick School	**Braybourne School**	**Caldermere School**
Online	*2 EPs*	*2 EPs*	*1 EP*
Questionnaire	*2 SLTs*	*2 SLTs*	*2 SLTs*
Interview	*4 SS*	*3 SS*	*0 SS*

Note. EP: educational Psychologist, SLT: Senior Leadership Team member, SS: School Staff

3.5.3 Attrition

During the data collection process, one school's senior leadership team shared that school staff could not participate in the study. This meant that for one out of the three school contexts, the information collected does not include school staff perspectives. In addition, only one educational psychologist from this school context could answer the online questionnaire. This attrition limited the sample size for the school staff group, potentially affecting the richness of data and the perspectives represented in the study. However, the data collected from other participant groups, such as educational psychologists and senior leadership team members were still used to inform the findings. To mitigate the impact of this attrition, I focused

on gathering comprehensive data from the available participant groups and considered the potential limitations this may have on the study's findings.

3.5.4 Participant Characteristics by School Contexts

To maintain anonymity, detailed information about individual participants is limited. However, a breakdown of the roles and experiences of participants within each school context provides insight into the range of perspectives involved in the study (see Table 7). Participants were grouped into three categories: educational psychologists, senior leadership team members, and school staff.

Table 7

Participant Roles and Experience

Schools	*Participant roles and experience in role*
Alderwick School	• Two EPs participated, including one senior link EP with previous experience in CIs and one maingrade EP with one prior critical incident involvement. The number of years in role was not gathered. • The SLT comprised the headteacher and the assistant headteacher, both of whom had been involved in one previous CIs (two to six years of experience in role). • Four staff members participated: a personalised learning lead, a teaching assistant, a teacher, and a business officer (experience varied: two, three, nine and 14 years in role).
Braybourne School	• Two EPs were involved: one senior link EP and one PEP and both had experienced two critical incident responses (experiences in role were between 15 and 19 years). • Two SLT members contributed: the school SENCo and the deputy headteacher (three to eight years of experience in role and one experience of a critical incident). • Three staff members participated, holding the roles of counsellor, pastoral support manager, and assistant SENCo (three to six years of experience).

| *Caldermere* | • One PEP participated and had experience of leading several CIs. |
| *School* | • Two SLT members participated: the headteacher and assistant headteacher (nine to ten years of experience and two previous critical incident responses). |

Note. SENCo: Special Educational Needs Coordinator, EP: Educational psychologist, PEP: Principal Educational Psychologist, SLT: Senior Leadership team member, LA: Local Authority, CI: Critical incident.

This breakdown highlights the diversity of professional roles and experiences within and across school contexts. It ensures sufficient detail for understanding the perspectives while preserving the anonymity of individual participants. Below, is a table of pseudonyms (see Table 8) which will be used throughout the analysis.

Table 8

List of Participants and Pseudonyms

Pseudonym	School Context, Role	Role
Lucy	Alderwick School	School staff
Susan	Alderwick School	School staff
Sophie	Alderwick School	School staff
Helena	Alderwick School	School staff
Zoe	Alderwick School	Senior Leadership Team Member
Henry	Alderwick School	Senior Leadership Team Member
Ava	Alderwick School	Educational Psychologist
Chloe	Alderwick School	Educational Psychologist
Olivia	Braybourne School	School staff
Eve	Braybourne School	School staff
Grace	Braybourne School	School staff
Isla	Braybourne School	Senior Leadership Team Member
Mia	Braybourne School	Senior Leadership Team Member

Sienna	Braybourne School	Educational Psychologist
Thomas	Braybourne School	Educational Psychologist
George	Caldermere School	Senior Leadership Team Member
Daniel	Caldermere School	Senior Leadership Team Member
Adam	Caldermere School	Educational Psychologist

3.6 Data Collection

3.6.1 Developing the Questionnaire and Interview Schedule

The qualitative questionnaire completed by educational psychologists and the senior leadership team members aimed to identify the support offered/received, as well as gather reflections on what was helpful and what could have been more helpful. For the school staff participant group, I used semi-structured interviews to gain their perspectives on advice and support generated from systems operating outside of their own (i.e., educational psychologists, senior leadership team members). The interviews were all held in person, although an option for online was offered based on participant preference. Interviews included topic-focussed questions with an element of flexibility to allow for follow-up questions, adapted wording, change of order, and pace on the day (Robson and McCartan, 2016). The school staff group(s) are likely to be at the 'coal face', so their perspectives of how the support is useful on the ground was invaluable. The focus of this research and the gaps identified in the literature highlighted how the perspectives of school staff regarding the effectiveness of the support received/available following a critical incident have not been sufficiently attended to. Therefore, the focus was to gather more in-depth information from the school staff group in the timeframe I had to conduct the research and triangulate this with the data collected from the other two participant groups (educational psychologist and senior leadership team members). The data for this study was collected from July 2024 to October 2024.

The online questionnaire and interview schedule were developed with the research question in mind to ensure the relevance of the data collected. This was guided by previous research and themes which arose from the literature review (see Appendix L for the educational psychologists' questionnaire, Appendix M for the senior leadership team member's questionnaire, and Appendix N for school staff interview questions).

3.6.2 Pilot of Online Questionnaire and Interview Schedule

A pilot of the online questionnaire was sent out to a senior educational psychologist and a senior leadership team member, both of whom had experience of being involved in a critical incident not specifically student suicide but supported the school in overcoming a traumatic incident. The main aim of the pilot was to receive feedback on the questions to evaluate the effectiveness in gathering meaningful data, and to ensure that the questions were aligned with the research question and capable of eliciting in-depth responses rather than surface-level answers (Braun & Clarke, 2022). Similarly, the interview schedule was piloted with two separate school staff who had experienced a critical incident within their school to also ensure the relevance and appropriateness of the questions. The pilot questionnaires were conducted in June 2024.

The piloting of the educational psychologists' online questionnaire supported the development of a script providing definitions of response and request for honest detailed answers, and indicated that a minimum of 30-45 minutes was required for an interviews. The online questionnaire for the senior leadership team members yielded similar feedback as well as additional information regarding the other participant groups.

3.6.3 Location for Data Collection

Online questionnaires were located on Microsoft 365 Forms and emailed to participants using Microsoft Outlook. For the face-to-face, semi-structured interviews, these were audio

recorded and transcribed with the Microsoft team function. I conducted interviews from a private and confidential room at a school location, for example, an office, meeting room, or private workspace. A risk assessment was deemed unnecessary as there are no differences in terms of risk to other meetings I would have as a professional and participants consenting to take part were all professionals.

3.7 Reflexive Thematic Analysis Approach

An influential approach to data analysis in qualitative research is thematic analysis (Majumdar, 2022). The approach to data analysis used for this study is RTA. This type of analysis is distinct from other types of thematic analysis as it places an emphasis and value on the role of the researcher to critically question, situate and process the data collected (Braun & Clarke, 2022). Principles from RTA also align with the assumptions of a 'weak' social constructionist paradigm, i.e., in terms of exploring nuance embedded in different sociocultural contexts with the belief that there is no universal truth but rather multiple situated truths which can only be acquired through understanding language. An essential part of this meaning-making process in RTA is the use of reflexivity, as knowledge generation is considered inherently subjective (Elliott, Fischer & Rennie, 1999). Therefore, qualitative sensitivity in RTA does not concern itself with researcher bias (Gough & Madill, 2012).

RTA is flexible, the approach may shift as the analysis progresses. Moreover, the term RTA can, itself, denote different approaches to analysis. Critical qualitative approaches place emphasis on how meaning is created, negotiated, and socially constructed. These approaches focus on analysing patterns of meaning and examining the effects and functions of language use (Braun & Clarke, 2022). Unlike experiential approaches, which regard social discourse as a way to convey an objective reality or truth, critical qualitative approaches view language as central to the construction of reality and truth which aligns with the current study's paradigm.

The flexibility requires transparency in process, analytic approach, and the researcher's positioning (see section 3.5.1).

Despite RTA being flexible, a set of assumptions were outlined by Braun and Clarke (2022), to allow me to revisit and enhance the robustness of the research (see Figure 2 below):

Figure 2

Assumptions Outlined by Braun and Clarke (2022).

1. Researcher subjectivity is a principal tool guiding analysis and knowledge generation is considered to be situated and subjective in nature. The researcher is the instrument in qualitative research.
2. Analysing the data is not an objective process, and analysis should be rich, insightful, complex, nuanced, and have 'depth'.
3. Reflexive thematic analysis is possible as a single independent researcher. However, collaborative coding will enhance interpretation and reflexivity, not to ensure consensus, but to support a richer, dialogic analysis.
4. Well defined codes and themes are produced through a process of immersion in the data and depth of engagement with the data.
5. Patterns generated are anchored by a shared concept, meaning or ideas. Themes are not summaries of a topic.
6. Themes are the analytic output. Themes are generated from the coding process but are not developed before engagement with the data in a deductive, a priori way. Engagement with the literature comes later in this type of analysis.
7. Themes do not *emerge* from the data as if they pre-exist, rather, the researcher actively identifies and produces them by systematically engaging with the data.
8. Analysis is always underpinned by theoretical assumptions which need to be acknowledged.
9. Central to analysis is (researcher) reflexivity.
10. Data analysis requires creativity.

My values and worldview influenced the design of this study in different ways. For instance, broadly speaking, I align with a left-leaning political ideology, in that I believe in collective responsibility and action for social equity. In my work, I am committed to

understanding and addressing systemic barriers, particularly with regards to accessibility of support services. I am also interested in how language shapes and mediates experiences, where words chosen and how these are received is central to constructing meaning, particularly in sensitive contexts such as suicide postvention.

As a practitioner researcher, I was also mindful of how my role may influence data collection. For example, in interviews attuned to participant's emotive accounts I found challenging avoiding falling into the role of 'consultant'. Similarly, as a practitioner, I wondered and thought about how I might respond in a specific situation which was important to reflexively write about to ensure my voice did not overshadow participant voices. In addition, some interviews were held with participants who I had previously met. On one hand, this may have provided a feeling of safety, on the other, it may have hindered fluency in their responses. To manage this as best as I could, I explicitly discussed my role as a researcher and our pre-established relation at the start of the interview.

In selecting an analytical approach, I reflected on the use of inductive and deductive coding, as well as the interpretative and descriptive dimensions of thematic analysis described in Braun and Clarke (2022). With the aim to explore the multiple realities and socially constructed meanings surrounding postvention practices, an inductive and interpretative approach was most appropriate. This allows for themes to be constructed from data content and supports a deeper, theoretical interpretation of participants' accounts.

3.8 Data Analysis Process

Following on, RTA aligns theoretically with the social constructionist positions described above. Due to stances taken and the nature of the researcher's influence on the analysis, other types of thematic analysis with positivist underpinnings were inappropriate. Interviews were transcribed using an automatic transcription function from Microsoft teams, these were then manually reviewed three times, anonymised during the process to protect participant

confidentiality, and edited for accuracy. The transcripts followed a 'thin transcription' approach (Oliver et al., 2005), which captures spoken content with non-verbal detail omitted, as appropriate for the study's focus on meaning and content. Braun and Clarke (2022) outlined a phased approach to follow as a guide to conducting RTA. The analysis for the study involved the following stages:

- Familiarisation with the data**:** I listened to the recordings of each participant at least three times and read and re-read the completed questionnaires. In doing so, I wrote down in my research journal initial thoughts of any patterns I noticed, whilst considering different ways in which accounts could be understood (see Appendix O).

- Coding the data: I initially endeavoured to use NVIVO to code all transcripts, but ended up coding manually first, i.e., with the use of a highlighter and a pen labelling each segment of text. I found myself coding all participants' accounts and reflecting on the level of responsibility I felt to ensure their time and accounts were represented and not lost. These codes were then entered into NVivo to ensure a digital record for the construction of themes. In doing so, I revisited some codes and began to have an idea of the way the codes could be clustered (see Appendix P).

- Generating initial themes**:** The three participant groups were separated onto three A3 sheets of paper, organised to have three different school contexts represented separately. I went through each code in each transcript and wrote these on post it notes, adding these individually to a related cluster in the appropriate school context section on an A3 sheet. Once finished with one participant group, I went through each cluster and provided initial themes in the different school contexts. These were then recorded on three different flash cards, each representing initial themes of a certain participant group in a certain school context (see Appendix Q).

- Developing and reviewing the initial themes: The flashcards representing all initial themes across contexts were then used to consider in terms of their relationship to the research question. Some themes were merged and given a different name. The identified themes were also compared to direct quotes to ensure meaning had not been lost. At this stage, I found there were several instances of confusion and feeling too close to the data. Indeed, throughout the analysis worries, about themes not being representative emerged due to a difficulty in taking a step back from the data corpus. This led to reverting back to the coding scheme frequently and ensuring that it had been grouped in an adequate cluster. In doing so, I was able to ensure (individual) participant voices were not lost in my developing analysis. These were then organised in NVivo to facilitate the comparison of themes across/within contexts and across/within participants groups and to facilitate the retrieval of quotes for specific themes (see Appendix P).

- Refining, defining, and naming themes: In research supervision, I discussed the themes identified, and how they could be organised into two overarching themes. For each theme, I considered similarities and differences in short descriptive summaries, adding reflections related to interpretation of the data. Following this, the themes were defined and renamed which would support the cohesive narrative write up (see Appendix R).

- Writing up: The 'story' of the analysis was initially written descriptively. Following this, quotes were weaved in to create a more conceptually developed narrative, distil meaning, and support the reader's understanding of how meaning was constructed in the analysis.

3.9 Trustworthiness

This project was conducted in line with the four general criteria suggested by Lincoln and Guba (1985): credibility, transferability, dependability, and confirmability. Additional up-to-date methodological literature was also used to guide the process (Anney, 2014; Stahl & King, 2020).

Methodological and environmental triangulation (Stahl & King, 2020) were used by interviewing different participant groups through different means from various settings/institutions. I aimed to use 'investigator triangulation' by using principles of reflective practice and consultation with the research supervisor throughout the study. This promoted explorations of perspectives and enabled me to discuss data generation and management. Using reflexive auditing of every decision I made, separation of facts and interpretative comments was made clearer (Stahl & King, 2020). In addition to this, a reflective diary was kept throughout this research to support reflexivity, by gathering thoughts, experiences, and process reflections. Any worries or concerns were anonymously recorded and discussed with my research supervisor. Consideration of non-verbatim data was also explored through the above means to keep in mind:

- what might not be shared and why?
- cultural or power differences in any of the research spaces.
- my own feelings and well-being in relation to this sensitive topic.

For transferability to other contexts to be possible, the research account includes a description of the context, characteristics of participants and contextual influences related to the response to student suicide.

3.10 Ethical Considerations

The British Psychological Society (BPS) Code of Ethics and Conduct (2018) and the BPS Code of Human Research Ethics (2021) was followed to ensure that the standards are met throughout this research (see Appendix E for ethical approval). It is acknowledged that this is a particularly sensitive area of research which needed further consideration prior to the ethics submission to the Research Ethics Committee (for approval documentation, see Appendix E). This was achieved through research supervision and further exploration of the literature.

Informed consent, right to withdraw, mitigation of risk and debrief: every person who volunteered to take part in the study did so freely with sufficient information to make an informed decision. An information sheet was provided with the details of the study including the research background, the sensitivity of the topic and my contact details should the participants have wanted any further information about the study. As part of informed consent, they were reminded of their right to withdraw at any point prior to data analysis (O'Reilly et al., 2025).

This research investigated the response to suicide rather than the details of an event. However, it was acknowledged that taking part may elicit distressing memories for participants. To mitigate these risks, I reminded the participants of their right to have a break at any time, and additional time was available to book in for each interview should that happen. I was also prepared to signpost to avenues of support if the participant felt distressed, during or after the interview. I also checked in with participants throughout our initial meeting should they not feel able to ask for a break. An opportunity for debriefing was provided after each interview should the participants wish to have one and a debrief sheet was given (see Appendix S).

Data protection, confidentiality, and safeguarding: The General Data Protection Regulations were upheld throughout the project. Details of participants were collected for contact purposes only and kept securely on a password-protected device. Throughout the interview process and the online questionnaire, data collection remained confidential and anonymous. Participants and settings were assigned numbers, and anonymity was taken seriously throughout the write-up of the research project (Saunders et al., 2015). The deidentified data will be disposed of securely following the project. I took several precautions to anonymise the data due to the participants speaking about the aftermath of relatively rare events that others may be able to recognise:

- Redacted or omitted specific details that were unique to individual participants or events, particularly if they could potentially identify someone involved in the rare events being discussed.

- Used generalised demographic information provided by participants, such as age, gender, or other characteristics, to prevent identification.

- Removed or altered any identifying details or specifics mentioned by participants that could potentially reveal their identities or the identities of others involved in the events. This may include names, locations, dates, and other identifiable information.

- Assigned pseudonyms or generic labels to participants in place of their real names. Ensured that these pseudonyms are not identifiable and do not reveal any personal information about the participants.

- Instead of presenting individual responses, the data was summarised and common themes created. This approach helps obscure individual identities while still conveying the overall findings.

Considerations for the researcher: Due to the sensitive nature of the research project, I also had structures I made use of to manage their own well-being through research and personal supervision, a support network, and self-care plan.

3.11 Summary

This study employed an exploratory, qualitative design to examine cascading effects across three participant groups within three distinct school contexts. The research aimed to explore how these groups (educational psychologists, senior leadership team members, school staff) experience and navigate postvention practices following student suicide. Participants were purposively sampled to capture diverse perspectives within each group, ensuring representation of varying roles and experiences. Data collection was conducted through semi-structured interviews, and online questionnaires, allowing for an in-depth exploration of participants' lived experiences and contextual factors. Principles from RTA, as outlined by Braun and Clarke (2022), was used to guide the process of data analysis. This approach allowed for the identification of key themes and patterns within and across participant groups and school contexts. Given the topic's sensitivity, ethical considerations were central to the study design, and steps were taken to ensure participants' anonymity and confidentiality and to provide access to appropriate support resources. The research received ethical approval from the ethics committee, and informed consent was obtained from all participants and local authorities. The methodology, thus, provided a robust framework for exploring the interplay between individual, group, and contextual factors in school-based postvention practices, yielding insights into the cascading effect. The analysis reported is unique in the literature on suicide postvention in schools as none has provided an analysis across levels of the system (educational psychologist, senior leaders, and school staff) and across three different schools.

4. Analysis – The Structure and Flow of Support

4.1 Introduction

In the next two chapters, I report the findings of the research and, in doing so, address the overarching research question which looks at the cascading effect of support provided to secondary schools following a student suicide. This chapter provides contextual information relevant to the data collected and analysed, followed by an overview of the RTA introducing overarching themes, the related main themes and their subthemes. Finally, the overarching theme capturing the structure and flow of support will be presented. The next chapter continues the analysis focusing on themes related to the subjective experience of support. Throughout both chapters, data extracts[1] are used for illustrative purposes. This also enables me to evidence the active role I took in generating the themes as researcher. Abbreviations for Educational Psychologist (EP), Local Authority (LA) and Senior Leadership Team (SLT) are used in quotes when participants themselves used these terms.

4.1.1 Contextual Information

Due to considerations regarding confidentiality and anonymity, the use of contextual information in the reporting of this research had to be carefully considered, particularly in relation to the nature of the student death. The challenge this consideration poses, is that circumstances influence the development of a critical incident response. Following a student's death, there are several legal processes which occur, which may lead to challenges in disclosure. The time elapsed since the critical incident between school contexts also differed, which may also influence the data collected.

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[1] Ellipses […] are used to omit non-essential details from quotes, making the data extract clearer for the reader. This type of editing does not exclude any text that challenges the analysis or its interpretations (Braun & Clarke, 2022).

Three unique school contexts were involved in this research. Students in two school contexts ranged from 11 to 16 in age, and in one school context a separate sixth form provision existed therefore students were up to 18 in ageEach participant group had different levels of expertise, and the roles they held within their school context differed, meaning, typically, unique individual perspectives. The purpose of the data analysis is, though, to construct themes across/within participant groups and contexts to answer the research question. Reference to the three different school contexts (known as Alderwick School, Braybourne School, and Caldermere School) throughout the analysis, supports comparisons and aids in understanding congruences/incongruences in the experiences of postvention across the schools (see Table 8 for a description of each school context).

Table 8

Description of the three school contexts

School Pseudonym	Context description
Alderwick School	Located in a rural area, where one link educational psychologist takes the lead and is supported by another throughout the critical incident response. The educational psychologist's involvement comprised two days onsite, with informal, longer-term engagement beyond this period. The school has unfortunately had previous experience of responding to a suicide-related critical incident and therefore worked with the link educational psychologist previously. The school placed a strong emphasis on a relational ethos, which I witnessed when I was on-site, in my interactions with staff and with students.
Braybourne School	Located within a major city with one link educational psychologist attached to it. Two. educational psychologists were jointly involved in the immediate response, and informal follow-ups were primarily led by the link educational psychologist. For this secondary school, it was the first instance of suicide-related critical incident. The response was described as the educational psychologist as entailing them spending two days onsite and informal longer-term support, such as follow-ups and check-ins, which were not bound by time.
Caldermere School	Located within a major city, with three educational psychologists were working with the school, including the principal educational

> psychologist leading the response. The collaborative work was mostly with the headteacher and assistant headteacher in the school. For this school context, it was the second suicide-related critical incident and therefore educational psychologists had previously been involved. The focus of the response was shared to be community outreach, training and preventative work. Recruitment from this school for this study was more limited, with only two participant groups represented (Educational psychologist and Senior leadership team member).

My experience of conducting interviews in different contexts and reading through online questionnaires varied. For example, educational psychologists in Alderwick and Braybourne schools were notably reflective, providing seemingly transparent, uncensored thought processes, while weaving in psychological theory to support their perspectives in written form. This depth allowed me to situate myself more easily within their context and consider the emotional experience of postvention. By comparison, for the educational psychologists working with Caldermere School, more 'technical' and procedural accounts were provided which appeared to stem from them having a sense of clarity in their role, multidisciplinary work and successful community outreach they saw themselves as providing. senior leadership teams across all contexts provided a similar level of depth, with some degree of reflection embedded in their responses. For interviews with school staff, I noticed differences regarding the way emotional experiences, particularly more painful feelings, were attended to. Some found it very difficult to discuss their experiences, while others maintained a certain level of distance when recounting their experiences. Some participants opted to access the questions in advance to help them feel more prepared, which may have influenced the spontaneity of their responses, as well as the depth of their answers and reflections.

4.1.2 Overview of the Reflexive Thematic Analysis

I developed two overarching themes, six themes and 19 subthemes based on my analysis of the data (see Figure 3). These themes represent the meaning I made of the different perspectives and represent key patterns and insights shared by participants. Due to the nature of the research design, some themes are more relevant to some participant groups. The themes

generated are presented separately, however due to the complexity of systemic work in times of crisis these are also linked. The report of the RTA below provides a narrative which considers the differences and similarities in perspectives with regards to what worked well and what would be additionally helpful between participants groups as well as between contexts.

Figure 3

Overview of RTA - Overarching themes, Themes and Subthemes
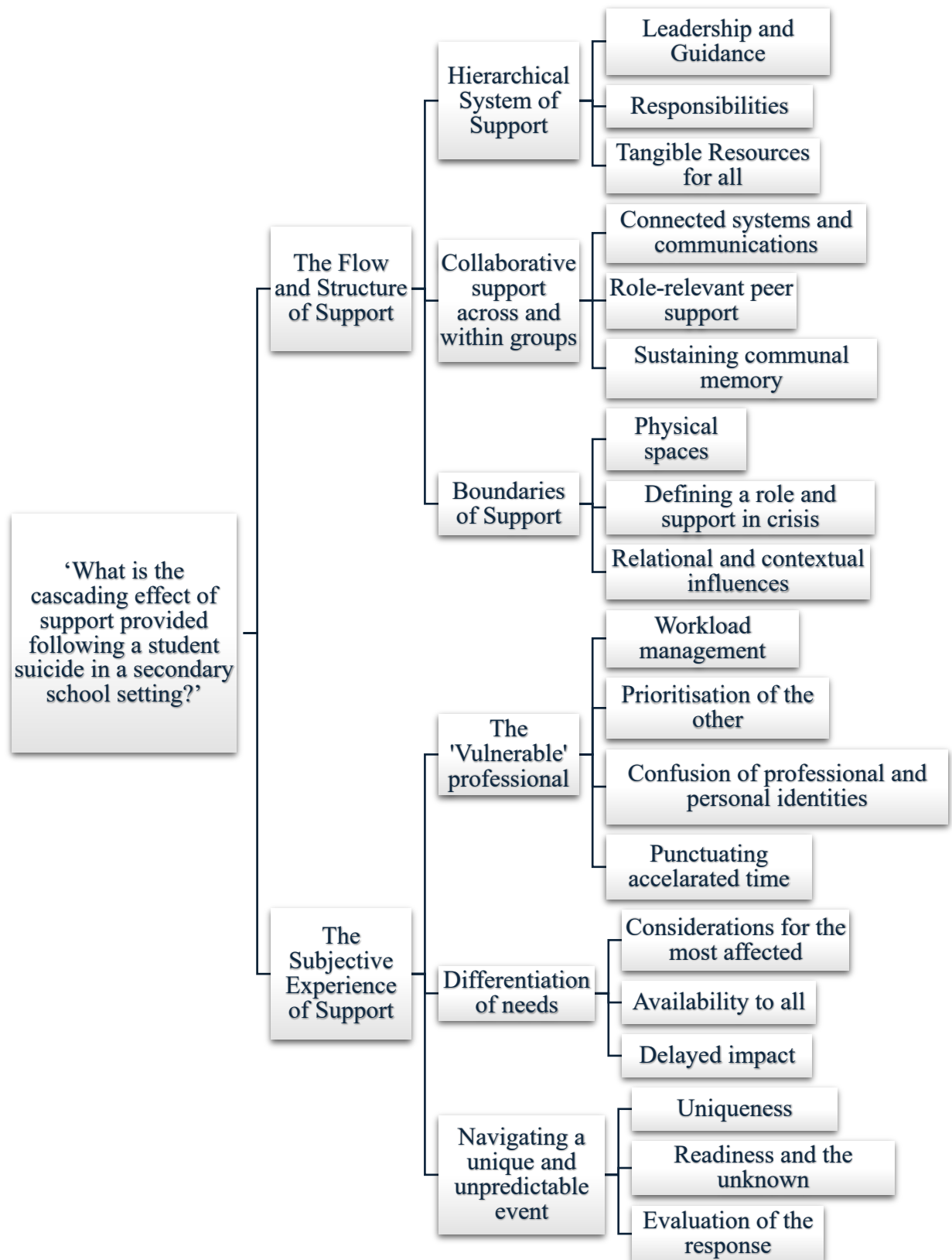
4.2 The Structure and Flow of Support

This overarching theme captures how support is organised, its function, and delivery/reception in secondary schools following a student suicide. It addresses structural and relational aspects of support, highlighting different perceptions involved in schools navigating a hierarchical system of support, fostering collaboration across and within groups, and establishing boundaries that organise the scope and limits of a response.

4.2.1 Hierarchical System of Support

Below, I represent a hierarchical system of support by reference to a directional 'flow', first, through leadership and guidance, then through responsibilities which are given or taken on, and finally through tangible resources which appear to support schools in navigating a student's suicide. The support primarily flows from the local authority to educational psychologists, to senior leadership team members, to school staff and students.

4.2.1.1 Leadership and Guidance. Participant narratives indicated a top-down process whereby organisation of the response to suicide was initiated by the 'outer layers' of the school system (local authority, educational psychologists). Educational psychologists supported senior leaders to identify the school's needs and make decisions regarding postvention. This was, to some degree, described to be set "behind the scenes", which suggested the cascade of support was initiated from outside the school staff group. For instance, Sophie shared "I think both our senior leadership team and the educational psychologists when they spoke to us and sort of told us, they sort of said what things to look out for" (School staff, Alderwick School). This was also noted in another account from school staff at the same school:

> I think from the local authority there was a lot of, there's a lot of conversations in the background and I know that cascaded down I think with the head teacher, I think he took a lot of that on and that information was kind of well that's, that support mechanism was definitely put in place for those people that work directly with the students (Lucy, School staff, Alderwick School).

Such responses suggested that part of the process of organising postvention required scaffolding staff understanding to feel prepared in coordinating a response. Educational psychologists were described as instrumental in nurturing and empowering staff. Zoe, for example, recalled how educational psychologists came in to "speak with all staff" giving them "guidance on how to support students who were coming to terms with the news of the student death" (Senior leadership team member, Alderwick School). This revealed the demands and expectations on staff to support young people in a difficult time, and the possible limited suicide postvention training and potentially, a wider systemic need.

Key roles were highlighted, with the headteacher figuring centrally to implement, communicate and translate the outer system's (local authority, educational psychologists) input to the school, whilst the educational psychologist supported the emotional uncertainties arising in both the headteacher and the school staff while implementing postvention support. All educational psychologists discussed how they supported headteachers through being both emotionally and strategically available in initiating the response. For example, Chloe emphasised this, saying "All of it was important, especially being emotionally available to the head immediately […] immediate reassurance of what tasks needed to be performed and how best to do these" (Educational psychologist, Alderwick School). The value of having immediate reassurance from the educational psychologist, both on an emotional and practical level, seemed to serve an anchoring function for the headteacher in a time which could be personally trying (i.e., where they may become overwhelmed and confused due the nature of a trauma as a destabilising event for the school community). This also provided the educational psychologist with the opportunity to present themselves as receptive and available to the headteacher, alleviate feelings of isolation in times of important decision-making, and help them to digest some of their personal experiences to make themselves in turn available to the wider system.

Educational psychologists in this initial space also attempted to prepare the headteacher for what may feel uncertain by providing examples of their previous experiences of suicide postvention. An example of this was Thomas' email to "the headteacher with some key messages", sharing important considerations for them to be aware of "in relation to managing the situation and sharing information with students[...]" (Educational psychologist, Braybourne School). In turn, the senior leadership team participant groups described the role of the headteacher as initiating, monitoring, and pacing postvention activities, with George commenting, for example, on this entailing making clear to others "what needed to happen", and ensuring that these things happened, whilst being mindful that emotional processing for school staff and students alike required protected time (Senior leadership team member, Caldermere School). At the same time, there seemed to be a tension experienced for school leadership team members between providing structure to implement postvention, which required enactment from school staff, and slowing down, which considered the time school staff and students may need to process the events.

More specifically, educational psychologists suggested providing guidance related to language sensitivity and communication in suicide bereavement was an important part of their leadership. Chloe reported that she shared with staff the importance of "focusing on the death and not on the manner of death", as this "still has stigma and elicits strong feelings of guilt" (Educational psychologist, Alderwick School). This view was consistent across all participant groups who shared the value of receiving this guidance from educational psychologists, as in the following excerpt:

> We were given direction from the headteacher on what we should say, so that school staff had a uniformed response to the sensitive situation. I believe that this was guided by advice from the EP and wider response team (Isla, Senior leadership team member, Braybourne School).

Across groups, there was also a view of cascade of support coming through in relation to the care required when discussing suicide. With this, care appeared to be linked to having ownership of an "official" narrative of the event, which could serve two functions, first, managing the emotional damage language can do, and second, maintaining a "uniformed" narrative to minimise individual faux pas. Implicitly, the educational psychologist's leadership was also to ensure an ethical, compassionate dimension to postvention through their knowledge of language and systems.

School staff also described the role of the senior leadership team to convey the support planned. Grace represented this, stating:

> I think their management with everything like I say them taking charge of the emails going out to parents. Going into each year group, having discussions, we had regular check-ins on lessons and just them managing how the students respond in a way, so making sure you know, because after something awful like that happens, things can go a bit crazy in terms of you know what people say, things getting out. Just behaviour in general. And they were really good at just making sure there was as much normality as possible (School staff, Braybourne School).

In this way, the function of management appeared to be one of a buffer against chaos (suggested to occur from both emotional distress, and instability of usual routine) using organised structures.

4.2.1.2 Responsibility. Responsibilities in postvention appeared to be concentric in quality, inasmuch as the educational psychologist was responsible for understanding the school's systemic needs and supporting individuals within it, senior leaders were responsible for school staff and students, whilst school staff primarily were responsible for students and expressed both being given and taking on responsibilities. Hence, responsibilities held at different levels enabled the flow of support to the student community.

Educational psychologists spoke about their responsibility to apply psychology to the unfolding of the events which shaped the support they provided, reflecting how their

responsibility in seeing the bigger picture (e.g. context, relationships) of a school system may support postvention planning. For Thomas, for example:

> School staff get into the profession generally because they care passionately about children's futures, and supporting children's wellbeing, development and life chances. So, a pupil suicide is in some ways the antithesis of this [...] Ensuring that school staff feel supported and reassured and not left to manage this complex mix of thoughts and feelings alone, seems important (Educational psychologist, Braybourne School).

Suggested here is that loss will be felt acutely due to a cognitive dissonance, likely creating a confusion in professional identity. Consequently, part of the educational psychologist's role is to hold the responsibility to support school staff due to their training and privileged position (outside the immediate school system) – a kind of 'obvious' position both accepted and expected. Sienna for instance, characterised their role in postvention was "to provide a confidential listening ear" and stated, "it was helpful that [educational psychologists] were 'outside the system' [as they] could offer more of an objective lens […]" (Educational psychologist, Braybourne School).

Ava (Educational psychologist, Alderwick School) described another aspect of their responsibility as individuals outside the immediate school system. This was primarily about maintaining, or holding, an environment – for school staff to feel safe to process challenging emotions. Ava stated:

> No white coats or quick fixes, but using, I hope, the skills we have gathered through our educational psychologist role to hold the space in such a way that those involved can start to find the edges of their experience for themselves. I think initially when we are brought in there can perhaps be a perception that the external professional, especially one with 'psychologist' in the title, will be there to 'fix' a situation, but ultimately these are situations to move through and not past. A lot of the impact we have on these occasions is in the holding of space (Educational psychologist, Braybourne School).

Interestingly, this viewpoint was reflected in the sentiments of the school staff group who similarly discussed their responsibility to students in terms of providing a comforting presence,

communicating their responsibility to be "not to fix, remove blame or guilt about the events",

and how this was guided by the educational psychologist (Helena, School staff, Alderwick

School). Separately, Eve added:

> Just sort of that reiteration [from educational psychologists] of, you know, you're not
> there to fix them. And also, me myself, I'm not a professional that's kind of reassurance
> like, you know, support them, listen to them reassure them but you're not there to you
> know give advice and give the answers and fix […] (School staff, Braybourne School).

Flowing through the system, appeared to be the notion of responsibilities one holds in

providing postvention support, which appeared to also provide psychological safety.

Another facet of the responsibility of educational psychologists was to work 'with'

schools (i.e., collaboratively), as in "I suppose I conceptualise it as working 'with' them in

these moments, not imparting our work 'upon' them" (Ava, Educational psychologist,

Alderwick School). The senior leadership team members appreciated the school having agency,

both in decision-making regarding the type of support they received, in the areas they felt

needed prioritising. For example, Daniel spoke about the educational psychologist presence

being "very responsive to [their] requests" and how this helped frame the support "in the most

constructive manner." (Senior leadership team member, Caldermere School). George similarly

shared the value in school-led work, as it shaped a needs-based training and developed links to

the community and parents (Senior leadership team member, Caldermere School). There

appeared to be a temporal nuance, whereby, implicitly, the educational psychologists were

more directive at the start, which then opened to be more collaborative or co-constructed

support. The primary task for the educational psychologist seemed to be one of setting

boundaries to the work, allowing for safe and creative leadership from the school to take place.

There was a directional flow of responsibilities which was described in the school staff

group with regards to who professionals were responsible for. As Sophie put it for example: "I

think so, so you know I tried to check in […] I think I tried to support [teaching assistant] where I could, and then my bosses help support me because they know that […] it was a trigger for me" (Sophie, School staff, Alderwick School). The impact of the responsibility of supporting others alongside a significant duty of care was suggested by Sophie, which was also related in Susan's experience:

> [A member of the SLT] got involved straight away and she came and found me at the end of the day and said, are you okay? And I said actually, no, can we have a chat? And I told her about it and she said I feel very strongly about being the barrier for the staff as well as for the kids because it's a lot for you to have to deal with, kids you know doing these kind of things and I wanted to make sure that you're okay as well as them and that was really helpful for me (School staff, Alderwick School).

Susan appeared to feel safe enough for her vulnerabilities to be held, communicating her distress which allowed the senior leadership team to enact a safeguarding responsibility.

Although there was a sense of communal responsibility for student wellbeing, this was prominent within the school staff group, who articulated (procedural) responsibilities allocated to them from senior leaders, as well as (caring) responsibilities, they themselves took on. For example, Grace contributed:

> I placed a level of responsibility on myself as the school counsellor or as one of the school counsellors to make myself available for people that you know, on a few days after it happened, just how important. But I wouldn't say that was necessarily placed on me. That was me just doing what I do. […] That was a separate thing. But there was the responsibility that was given […] I needed to be one of the people that told certain students what had happened (School staff, Braybourne School).

4.2.1.3 Tangible Resources for all. Resources which were shared and accessible were seen as being helpful in navigating the response to student suicide at all levels of the system. Again, a flow of resources was presented in participants' experiences. Whether they were received from the educational psychologists or external role-related trainings, there was a top-down process involved. Sophie described the content and value of these:

> […] when I went and had the chat with [Ava or Zoe], she had a little leaflet for me […] it had the whole list of places that I could go and talk to, you know, charities, places

that you can ring or you can e-mail or you can, there's forums and things, all sorts like that and recognised professional bodies where you can go and get, seek some advice if you need it. So, I think that was quite useful (School staff, Alderwick School).

In a similar vein, as school staff, Eve shared the value of resources and external training in shaping her response, she attended "one course which [she] could probably draw a few resources from" however acknowledged that there was "nothing from like the school or anything else like that". She also reflected that more tangible materials "would have been quite helpful" (School staff, Braybourne School).

Staff also highlighted the limited postvention specific resources as any training they had received often focused on "supporting the students [prevention], supporting the signs" and that there was limited content to prepare them for "what happens after" (Eve, School staff, Braybourne School). Likewise, Helena (School staff, Alderwick School) recognised that access to training was a privilege to certain staff and therefore there was likely variability in preparedness amongst staff.

Educational psychologists within the same context described the resources shared with the headteacher, stating "[Thomas] also signposted the head teacher to our service's critical incident response guidance, as well as other relevant resources, such as the Samaritan's guidance, Help when we needed it most" (Sienna, Educational psychologist, Braybourne School). They also recalled providing templates (e.g., scripts for delivering sensitive news, emails/letters). Thomas noted that he had noted how the examples he had provided had been used "within their 'script for announcing to students' (a text which Form Tutors used to share the information with students), the school incorporated a number of the 'key messages' I had shared" (Educational psychologist, Braybourne School). Resources for the headteacher seemed to relate to the strategic planning of postvention whereas there was an increased need for hands on resources to support the emotional response which appeared to be shared more so at a school staff level.

Educational psychologists also discussed the value of continuous professional development (CPD) and how training can be seen as something 'tangible' and, indeed, realistically helpful for a school.

> In a more specific sense, CPD surrounding grief and critical incident response is useful. Having ideas for day-to-day strategies ahead of time which can be drawn on if people are looking for something more 'tangible' to go away with. Having resources to hand which can be shared, left, or recommended (Ava, Educational psychologist, Alderwick School).

The value of tangible information for staff was also evident in accounts from the Caldermere School context in relation to organising further work to support staff in navigating such events. At the same time, and reflecting school staff viewpoints, it was also observed that it could be helpful as an educational psychologist "to have had more suicide-response specific knowledge and info/signposting", which was tangible and swiftly shared, i.e., it would "have helped to have more knowledge and signposting at our fingertips." (Thomas, Educational psychologist, Braybourne School).

4.2.2 Collaborative Support Across and Within Groups

Collaborative support was positioned by participants as a crucial element to the structure and flow of support in crisis. To ensure effectiveness, the flow of support was described as needing to be interconnected. As such, liaisons and open communication between levels are valued and the importance of role-relevant peer support due to the unique nature of different responsibilities and tasks at each level is evidenced. This theme also captures how sustaining communal memory appears to be an important factor to a grieving process in postvention.

4.2.2.1 Connected Systems and Communications. Effective collaboration appeared to require interconnected systems (e.g., between EPS and school systems) and communication by professionals representing these systems. Meaningful collaboration was not simply about increased communication, participants also emphasised prioritising having contextual information. Communication and joined-up approaches were found to be determined by the depth of understanding of roles and responsibilities, and experiences of communication appeared to be influenced by contextual factors, e.g., experience in role, relationship to the deceased student, and level of authority. Boundaries within interconnected relationships channelled the flow of support and information.

In the first instance, educational psychologists organised their involvement through liaising with local authority services. For Thomas for example: "discussion with Education Lead to establish further information, what was known currently in the unfolding situation, and early indications of support the school may need." (Educational psychologist, Braybourne School). Accounts across the professional groups also highlighted there was an increased need for communication at the time of the initial postvention response. Through this, educational psychologists could gather further information and school professionals could be enrolled in the process. As Lucy put it for instance, "I think my, because my role is largely communicating anyway, well with at least stakeholders quite quickly I just sort of, there was just a little bit of extra of that really" (School staff, Alderwick School).

Educational psychologists and senior leadership team members were key actors in ensuring the effective relay of information within and outside the school. Despite some school staff feeling well-informed, others appeared to feel isolated due to having limited knowledge of support in place. For example, working in an administrative role, Lucy described a desire for an "understanding of what other people are doing, kind of what's happening across the board…", also saying that "not working in isolation" was important to her (School staff,

Alderwick School). School staff participants also noted that these discussions primarily took place at a senior level, i.e., "through SLT" (Olivia, School staff, Braybourne School). According to Sophie, "I don't know whether that they would have offered that [meeting to plan the postvention work] anyway or whether that was because I wasn't involved with the conversations with the Educational psychologist" (School staff, Alderwick School).

For the educational psychologists, the headteacher and senior leadership team members were their first point of contact. Adam for example, described each visit to the school as "includ[ing] checking in with School SLT to reflect and agree[ing] next steps" (Educational psychologist, Braybourne School). With strategy being held at an organisational level, with school staff potentially less involved, naturally, there was increased communication between educational psychologists and senior leadership team members. This appeared to function as a way of maintaining boundaries to communication, to ensure a focused flow. At the same time, this meant school staff could be left out the loop and on the periphery of decision making regarding postvention work they were actively involved in.

Collaboration and communication were described in ways that suggested a reciprocal influence between the two, i.e., they were necessary for the other to be realised, yet both had to be concentrated in focus. Chloe for example, spoke about liaisons between educational psychologists and the virtual school as valuable for keeping "in touch" and working together (Educational psychologist, Alderwick School). Another type of communication held within senior levels across the school contexts was liaising with and supporting the bereaved family, with educational psychologists supporting the senior leadership team members visiting the family. As an educational psychologist, Adam, also described having communication with external, community and charitable organisations regarding support, noting how "a community leaders meeting was arranged by school SLT to agree medium-term options and actions to help

support ongoing work in the community to help understanding of suicide and bereavement support" (Educational psychologist, Caldermere School).

Multidisciplinary work and interconnectedness were also cited when links with mental health services were discussed. Thomas for instance, emphasised how "it may have been helpful/appropriate to engage practitioners (some of them therapists) from the Mental Health Support Team" (Educational psychologist, Braybourne School). Indeed, where multidisciplinary work had taken place with the educational psychologist and mental health services, in the case of Caldermere School, it appeared to have been valued. In the case of Braybourne School, where multidisciplinary work had not taken place, this was something sought after.

Experiences of the fluidity of communications also differed, from staff who spoke about how heightened emotions diminished communication, to others who referenced the significance of honesty and transparency. For Helena for example, "I think that there was a certain amount of honesty from the senior leadership team about what happened. So, I think students felt included in what had happened" (School staff, Alderwick School). By comparison, for Susan, "I think maybe then, people didn't quite understand communication or people didn't communicate quite as fully just because everyone was feeling a lot of emotions" (School staff, Alderwick School). In different ways, the individual's professional background, emotional experience, and role within a school context appeared to influence how communications were experienced, with, for example, the contrast above between Helena, as a teaching assistant who worked closely with the young person who died, and Susan, as a teacher new to the school. As a counsellor, Grace described being - and feeling - separate to the school staff group and how her role and relationship to the deceased student differed from others. In the interview itself, she also appeared to struggle to recall much of what she was aware of. "Off the top of my head, I think that I remember there being specific things sent, again, sent to staff as a whatever as a

whole. I can't remember the ins and outs If I'm honest with you" (School staff, Braybourne School).

4.2.2.2 Role-Relevant Peer Support. Different professional involvement in postvention seemed to necessitate spaces for individuals in similar positions, as such role-relevant peer support, be that the same title, being part of the same response team, or department/team. The importance of ensuring role-relevant peer support is not only available but also structured in a way that meets the diverse needs of different professional groups was represented in each participant group in different ways

This was evidenced in Eve's account, in her commenting, "our sort of pastoral team are really good at […] constantly checking in with each other (School staff, Braybourne School). Alternately, in educational psychologists' accounts the valued of role-related debrief spaces were frequently mentioned. Thomas for example, referenced "support from colleagues was invaluable" as they "can absorb a lot of the feelings experienced within the school system" and he reflected on how knowing colleagues were available, it being "a team response" was conducive to professionals coping better (Educational psychologist, Braybourne School). Adam (Educational psychologist, Caldermere School) similarly acknowledged structured peer support with other principal educational psychologists, which was in place. The specificity of this space, being with other principal educational psychologists, seemed to highlight the influence of certain responsibilities-in-role regarding the support sought throughout postvention.

Senior leadership team members also discussed the peer support from other senior members and designated safeguarding leads (DSLs) from other DSLs. For example, "As the DSL I did seek support from another DSL who had a similar incident at their school, who gave me lots of practical advice" (Mia, Senior leadership team member, Braybourne School). The

importance of the headteacher to have a role-specific support network was also noted. Thomas shared:

> I was aware of a couple of Headteachers who had experienced pupil deaths in recent years; they were made aware, and I think they reached out and offered some support to the Head too (Educational psychologist, Braybourne School).

In this way, professionals in leadership positions appeared to benefit (or were viewed as benefitting) from spaces to process postvention together. Henry commented:

> I did not get any sense of there being a team in terms of response. There were meetings of professional convened to share knowledge and learn, but nothing in terms of other professionals offering support to our school community – (Senior leadership team member, Alderwick School)

This account also highlighted the value in professional relationships rather than a structured team (i.e., response team), which appeared to underscore the notion of a response team as fluid and informally defined. This was reflected in separate accounts, where inconsistencies arose regarding who was a part of the response team, which may suggest the term to be less familiar among professionals. At times, this was viewed as a team formed within one system (EPS or School) rather than across different systems. Ava (Educational Psychologist, Alderwick School) described the membership as comprising two educational psychologists, which is a typical arrangement in postvention. Adam similarly defined their team to include a "Principal EP as coordinator; Link EP as support for staff and students," and "Senior EP providing further support", highlighting the clear roles each of one of them took on (Educational Psychologist, Caldermere School). School leaders described their team as including a variety of roles within the school, notably omitting educational psychologists, except in the case of Braybourne School. Some school leaders outlined a team that included safeguarding and specialist roles, such as "School Nurse, Care Home Manager, and Child Death Review specialists" (Zoe, Senior Leadership Team member, Alderwick School).

Despite differences in the descriptions of the response teams, participants reflected on the positive impact of having one. For instance, contributions adding "The response team (school staff) worked well because it involved the people who were closely working with […] I do not feel further professionals should have been included" (Isla, Senior leadership team member, Braybourne School). Educational psychologists, Chloe and Adam both echoed this perspective, adding a dimension that an increased number of professionals involved may have diluted the response. More specifically, for Adam, constituting the team in this way was felt to be appropriate, as "due to sensitivity" it was important to have "boundary involvement of other teams", explaining that NHS providers and commissioned organisations were liaised with but did not coordinate postvention (Educational psychologist, Caldermere School). Membership was required for coordination and decision-making in the first place prior to increased collaboration with other external services, meaning a smaller team was conducive to peer support.

In comparison to the more frequent mention of supervision or debriefing among educational psychologists and senior leaders, peer supervisory spaces for school staff primarily related to opportunities arising instead. School staff discussed the support they received from their own department, such as the pastoral or special educational needs department; however, staff who were not connected to such teams, like teachers or others in the wider school, and suggested that the support they received might have been different. For example, Eve stated "And like I said, offered the counselling and that sort of thing, so in our immediate team, I still felt supported in [month]. I think just as a wider school thing, you know[...]" (School staff, Braybourne School). This was also reflected in the Alderwick School context, where Susan explained:

> I think something that would have been really beneficial would be to have an opportunity for certain members of staff who felt particularly affected by it to actually meet up, say in the staff room and have that as a safe space for an hour (School staff, Alderwick School).

4.2.2.3 Sustaining Communal Memory. This subtheme captures more than how a community collectively remembered. It also describes how professionals supported each other through grief, and how spaces were created for shared meaning. All participants in Alderwick School mentioned the value of memorial activities and collective grief in their accounts. From the educational psychologists' first visit onwards, there was an collective effort to develop a co-constructed understanding of the events. In Braybourne School and Caldermere School, this was more relevant to the school staff group accounts, albeit the importance of family consent for the sharing of information and organisation of activities was represented throughout.

School staff at Alderwick School and Braybourne School respectively, Lucy and Eve used identical phrasing, commenting on how 'everyone just pulled together' in the wake of the death. In everyday tasks, a collective responsibility to supporting each other was captured which reflected a caring culture, as per this account:

> And everyone was really, really supportive of each other and you know if people needed to go home... I was supposed to go on a trip, and they said don't worry, we'll sort it, you don't need to go like everything was like covered. You know if you didn't feel like teaching your lessons then it was covered (Eve, School staff, Braybourne School).

As such, communal moments appearing to shape staff experiences also enabled the wider school community to navigate a period of grief.

This culture of mutual support was also echoed by senior leaders who described how educational psychologists' support helped share a burden through both their indirect and direct work with students. Daniel shared how educational psychologists "empowered staff to support students by meeting jointly with pastoral staff and students" (Senior leadership team member, Caldermere School), and that this ensured that school staff felt equipped to manage ongoing support. George, as another senior leadership team member there, also reflected on the collaborative approach, observing how educational psychologists dedicating some of their time

to support student recovery "allow[ed] the school pastoral staff to then work with others" (Senior leadership team member, Caldermere School), leading to more sustainable postvention activity.

This communal practice afforded opportunities for shared processing of grief, as created by school staff. For example, Helena shared "[...] definitely there was a lot of support for students. We had some really positive and some really healthy things for them to take part in" (School staff, Alderwick School). Three participants (Helena [school staff], Isla [senior leadership team member] and Eve [school staff]) also identified students as a source of support for school staff. Helena shared "you know, colleagues have each other and also students supporting staff to […] it was a time where people were really kind of there for each other" (School staff, Alderwick School). Isla also emphasised this, stating that "having a safe space for students and staff to sit together and grieve - this worked in the immediate aftermath" (Senior leadership team member, Braybourne School). The language of 'sit[ing] together' suggested an importance was attached to stillness in moments of grief, through shared relational experience. Whilst the experiences of this collective space were indicated to work in its immediacy, it may also suggest there is more to be done in the long-term or that in a productivity-driven context, there is limited feasibility for such a space to exist in the longevity.

The educational psychologists working with Alderwick School reflected that staff who knew the young person best came together to plan tasks and undertake them, with Chloe emphasising how part of their role was facilitating spaces for staff to come together.

> Two days later two EPs ran a structured group support session with any members of the Virtual School who wished to attend. They knew the [young person] very well and had already been supporting his [someone close to the young person]. Lots of ideas about how to support other members of the [young person's group] were highlighted by the coming together of members of the Virtual School (Chloe, Educational psychologist, Alderwick School).

Staff were also invited to share "memories about the young person - what were they like, what will they remember about them, any particular memories they wanted to share" (Ava, Educational psychologist, Alderwick School). Patterns were also discerned with regards to memorial activities playing an active role in developing a sense of shared belonging, highlighting an ethos of communal support in grief expression. Two school staff in Alderwick and Braybourne school contexts felt that collective memorial activities supported people in channelling their emotions. "It's just a community feel, and you know, I just suppose a certain level of honesty … I can't really tell you how that happened or what happened. It just kind of evolved" (Helena, School staff, Alderwick School). Another school staff in Braybourne school context echoed this:

> We planned the ceremony for the family to come in, and it sort of helped because we had a positive, to sort of focus on and to channel, channel what we wanted to do was nice (Olivia, School staff, Braybourne School).

The quotes illustrate how collective openness grounded by the wishes of the family, may have fostered belonging for members of the school community, aligning with trauma-informed approaches – a relational, rather than procedural, focus (Brunzell et al., 2015).

In sustaining communal memories of the young person, across all participant groups, senior leadership team members helped ensure student voices were heard. For Braybourne School, for example students were described as possessing "a voice in it all and ideas of their own" (Olivia, School staff, Braybourne School). In Alderwick School, student-led memorial activities were highlighted as a part of postvention to have worked well, reinforcing that student agency in responding to the loss was considered important. Some schools also cancelled upcoming celebratory events out of respect for the student who had died and their family. Not only were memorial activities suggested to be a collective process, it was also one rooted in compassion for the family and young person who had died. This appeared to also be

a meaningful way for students to take on an active role in postvention, i.e., in their contribution to sustaining communal memory.

4.2.3 Boundaries of Support

For this theme, boundaries are conceptualised as a way of containing the flow of support and, as such, a cascading effect. To contain the flow of support, understanding how support, roles, and spaces are defined across the system appeared to aid facilitation of postvention. This theme also highlighted how relationships and context can influence the boundaries of support.

4.2.3.1 Physical Spaces. Physical spaces were considered in all participant accounts, whether this was through confidential rooms ensuring privacy, knowledge and proximity of spaces fostering accessibility and reassurance, or a change of location to support processing. These all played key roles in supporting emotional processing throughout postvention.

Proximity and knowledge of physical spaces being valued was highlighted in educational psychologist's accounts. For example, for Sienna, "the PEP and I were allocated rooms next door to each other, which was helpful" (Educational psychologist, Braybourne School) and Grace's contribution, also acknowledged that "having them there and the room, that room available that […] was really good" (School staff, Braybourne School). This was reinforced by both Isla and Eve, in the same context, who described the privacy of rooms alongside a larger communal area where students were able to come together and seek support whilst waiting to see the educational psychologists (Senior leadership team member, Braybourne School; School staff, Braybourne School). Eve also suggested inequity in school spaces may impact on the support provided, pointing out, they were "lucky" with their school's infrastructure (School staff, Braybourne School), which may highlight the complexities of implementing postvention in school with minimal spaces.

Two school staff described how physical spaces created were flexible and accessible, which allowed school staff and students to access support as they wished and were able to. Helena communicated their department room was opened early, and functioned as "a drop-in centre", students were able to come in, talk, and seek support in an informal environment (School staff, Alderwick School). Similarly, Grace highlighted how there was an allocated space, accessible to "any student, to any member of staff" who needed support (School staff, Braybourne School). Similarly, in Alderwick School a "drop-in immediately afterwards in a more comfortable space within the school [staff room], […] was [made available] to any staff" (Ava, Educational psychologist, Alderwick School). I noted, a possible dual function which served not only the space itself but also 'knowledge of' facilitated emotional support.

Across descriptions from participants, there was also a notion of spaces anchoring memories, highlighting how spaces and emotions were intertwined in the recalling of events, suggesting additional significance to rooms and school spaces used. For example, school staff recalled the physicality of their discussion with educational psychologist, "which was similar to what we did yesterday, where we sat in the in the staff room. So, it was a little bit like sitting around the table and just discussing things" (Sophie, School staff, Alderwick School). That this 'staff room' was a 'site' in which they were able to come together on a longer-term basis was also suggested in a separate account by Susan, who notes they would meet "[…] in the staff room and have that as a safe space for an hour" (School staff, Alderwick School).

Some participants also highlighted how location was important to consider in processing traumatic events. This is supported in Winnicott's (1965) work, where secure and physical spaces are described as necessary for emotional development - 'the holding environment'. For example, Sienna shared "It was helpful to get off-site before our own

debriefs" (Educational psychologist, Braybourne School). Grace reflected "I just didn't want to talk in school" (School staff, Braybourne School). Similarly, physical spaces were also noted to act as a place for students and staff to step out of routine. For example, Olivia described "a time out" (School staff, Braybourne School) and Sophie stated "[…] ended up being a bit of a base for those students that were struggling. They were being told to go to there instead. If they're in lesson then they get all distressed" (School staff, Alderwick School). Adam (Educational psychologist, Caldermere School) also described keeping schools open outside of typical opening days to be used as a space to go should anyone need support. This highlights how emotions and physicality of spaces were interlinked. There seemed to be a shift in task and focus from one space/location to another which facilitates emotional wellbeing. Protected spaces provided boundaries to particular support which across the different levels of the school system facilitated the school community to process grief.

4.2.3.2 Defining a Role and Support in a Crisis. Role and support definition was an ongoing challenge across participant groups which appear to trickle down through the system from educational psychologist to school staff on the ground.

There was a consensus amongst the educational psychologists that defining their role was an immediate necessity and needed to be tailored to school needs. However, uncertainty was apparent regarding the nature of their involvement over time. Some educational psychologists were able to provide specific times and a length of involvement, whereas others, a part of the senior leadership team and school staff groups, were not able to or viewed educational psychologists' involvement as not limited by time. Senior leaders across all three contexts consistently described involvement as open, for example, Isla stated "She made it very clear that we could call on her at any point, and we did […]" (Senior leadership team member, Braybourne School) and others echoed their ongoing presence and generosity with their time (Henry, Senior leadership team member, Alderwick School, and George, Senior leadership

team member, Caldermere School). With this, accounts from school participants then went on to highlight there were still uncertainties regarding longer-term support roles.

Contracting for both beginnings and ends was not addressed by educational psychologists. They described their role as available and flexible despite specific dates being given. Sienna did highlight (to some extent) the importance of beginnings and ends when describing boundaries, orienting their work with the headteacher. "Checking in/ debriefing with [headteacher] at beginning and end of both days helped him to feel a little contained and less alone I think" (Sienna, Educational psychologist, Braybourne School). With regards to their role, I noted educational psychologists attempted to also define the boundaries of the space they provided in their accounts by describing their scope of practise. For example, Sienna shared that the space was "[…] just a case of us listening and providing supportive space to share thoughts and feelings" (Educational psychologist, Braybourne School). In describing their involvement and role, educational psychologists also sought to build capacity, with the idea that familiar adults remain in the system while educational psychologists gradually withdrew. There seemed to be a tension between wanting to do more and uncertainty of how this may work:

> It's in part about building resilience within the school community itself. I do wonder whether perhaps there is more we could do towards that, for example coaching staff through ways to foster and hold similar safe spaces (Ava, Educational psychologist, Braybourne School).

Differing educational psychologists' perspectives regarding the scope of a longer-term involvement with the school also seem to represent uncertainty. Thomas, for example, reflected, "I think the support we offered felt 'enough', and others within the school community (DSL/School Counsellors) could offer some of that follow-up/longer-term support" (Educational psychologist, Braybourne School). Others also wondered about how to define

their role long-term, with the proposition that implicit contracting may act as a barrier to defining support. Chloe, for instance, shared:

> I have some mixed feelings regarding the length of time support was offered for. On one hand, the one-off nature of our input can, I hope, provide immediate support at a time of difficult emotions, and hopefully do so in a way which leaves those present well positioned to mutually support each other and themselves in an ongoing sense. On the other hand, I do sometimes wonder whether the one-off nature of each session might be perceived as 'ticking a box', which is certainly not what is intended. There is nothing to say professionals can't reach out further down the line, however I do wonder whether we might unintentionally be imparting an expectation that they won't do so. Perhaps this is a reflection point with regard to how we communicate regarding purpose and potential (Educational psychologist, Alderwick School)

Flowing down from how educational psychologists defined their role was the senior leadership team members perceptions of support and role definition in postvention. This was perceived as available without clear time restrictions, though they sought more clarity as long-term support remained unclear. A desire for more structured counselling support and the need for funding to sustain it was apparent. For example, Mia shared that "as a school, we paid for additional support for myself and those staff closely involved, which I think should have been provided by the LA" (Senior leadership team member, Braybourne School).

On the ground, school staff further discussed their challenges in defining their role and educational psychologists' role in crisis. They reflected on their expertise and acknowledged the value of professional input from individuals with relevant skills. Sophie expressed uncertainty as they could "advise only so much" and external support from "amazing charities" as well as professionals, such as educational psychologists, would be additionally helpful to navigate the complexities of suicide (School staff, Alderwick School). Similarly, Grace stressed the importance of "support from professionals […] that know how to manage and have dealt with similar situations before" (School staff, Braybourne School). Along with this, school staff also noted a lack of clarity about long-term support and whether they could have asked for more. There were reports that further support may have been accessed if they

had been able to better appreciate its scope. Seeking more direction as to where such support would start and end, for instance, Olivia observed:

> […]and it could have just been me at the time, there was so much going on, you know, they probably did tell us and everything, if I'd known maybe a bit more exactly what they could do, I maybe would have reached out a bit more myself when I was ready (School staff, Braybourne School).

Likewise, in Alderwick School, Sophie recalled:

> But I think I don't know whether they wanted it more led by us in terms of what we needed. I don't know where that service then ends or stops, I suppose. So, I don't think that's clear to me. And whether how much more we could have asked, maybe if that makes sense […] (School staff).

4.2.3.3 Relational and Contextual Influences. Some differences in experience of postvention appeared to be attributable to varying relationships with the link educational psychologist as well as relationships within school.

Trust and prior work between educational psychologists and schools was considered crucial in several accounts from educational psychologists. For example, Chloe noted:

> Already having a trusted relationship with the school as I am their link EP and have had a [relative] attend the school in the past, so members of staff know me well […] I supported them with all these incidents and so staff members knew that I knew their history and would be supportive (Educational psychologist, Alderwick School).

Chloe also highlighted the benefits of knowing the school system, which Sienna echoed in her responses, valuing insider knowledge and being an outsider to the school system – a kind of inbetweener position (Educational psychologist, Braybourne School). However, whilst five senior members acknowledged the educational psychologist involvement in detail, they did not discuss explicitly a pre-established relationship or knowledge of context as being influential to effective support in postvention. Only Isla acknowledged the existing relationship with the educational psychologists – and the benefits this could afford. "It helped knowing that we have a very strong relationship with our link EP, and she took the time to talk to me when I was off

school during the critical incident" (Senior leadership team member, Braybourne School). Such examples suggested relational and contextual factors were important for educational psychologists which may relate to their training in thinking systemically about relations, and the need for them to do so as their positioning requires them to move in and out of systems with little disruption.

In the interviews, participants described relational influences on support they had received and offered throughout postvention. School staff who had prior relationships with educational psychologists seemed to find it easier to be candid about their needs, whether this was to decline offers of support or access it. Grace reflected that knowing the educational psychologist helped them feel comfortable enough to turn down support, stating, "Yeah, I think it's helpful that I know who [Educational psychologist] was" (School staff, Braybourne School). Alternately, Olivia (School staff, Braybourne School) shared that familiarity with the educational psychologists (Sienna and Thomas) involved throughout postvention enhanced engagement with their support, describing how "it's not just someone new... you've been comfortable to go and just sort of talk about whatever you wanted to, which was great".

Previous work with the educational psychologist also appeared to facilitate support throughout postvention and a sense of clarity. For example, Susan (School staff, Alderwick School) who had never worked with an educational psychologist previously shared a limited support from them throughout the crisis. However, in describing the involvement of the school counsellor, I noted this resembled the work of the educational psychologist, when comparing her account with other participants from the same school. The level of support also appeared to be extended for Helena and Sophie (School staff, Alderwick School) who felt they had regular check-ins informally as part of the other work they may do with the educational psychologist.

Building relationships were also considered essential for feeling less isolated. For example, Susan, new to the school, shared "[…] I did bond with [staff member sharing forms with] very quickly and him and I had lots of conversations, and he was very supportive" (School staff, Alderwick School). Chloe also reflected on relational dynamics within hierarchical school systems, whereby limited leadership experience in some schools placed additional burdens on staff. For example, she observed "the work also revealed how much more knowledgeable and experienced the staff members were in contrast to their [headteacher], and that [pronoun] relationship with the team was under strain" (Educational psychologist, Alderwick School). Therefore, internal school dynamics appeared to impact the fluidity of support. Another example, within a specific team of the secondary school, indicated that close relationships within their department team was helpful "in sort of a non-professional like sort of friendship, [they were] all checking in on each other" (Eve, School staff, Braybourne School). Beyond team support, throughout shared experiences of social trauma, any relationships formed within the school were indicated to be crucial in moments of heightened emotions, for example, knowing that "okay, I know staff member X is someone now that I can go and talk to on a day that I feel particularly affected" (Susan, School staff, Alderwick School). As Susan further put it, one "can in those moments feel really lonely…[so] it brings people closer together".

4.3 Chapter Conclusion

This chapter explored the flow and structure of postvention as constructed through participants' narratives. The layers of this cascade are described to be hierarchical in nature with the educational psychologists and headteacher identified as key roles in guiding the response to a student suicide. A top-down process of leadership, responsibilities and tangible resources was revealed through the data, flowing from educational psychologists to staff on the ground. Whilst there is a ripple effect, this is not linear, as the flow of support not only extends

down (from educational psychologists to students), but it also pools within levels whereby different levels of the cascade support each other (role-related peer support). This collaborative support inclusive of students was directed by shared experiences and responsibilities. This supported the sustaining of communal memory as individuals pulled together to move through collective grief. However, to maintain a focus on the support being provided, boundaries to communications were found to be important to prevent dilution of the postvention support. There appeared to be a value in physical spaces to process emotions as well as in 'the knowledge of' the existence of these. Other boundaries of support appeared difficult to establish as there are uncertainties about the scope for educational psychology involvement at all levels. Whilst these boundaries and defining involvement were found to facilitate clarity and minimise uncertainty, there are inevitably relational and contextual influences which appear to define participants' access to, and experiences of support.

5. Analysis- The Subjective Experiences of Support

5.1. Introduction

This chapter focuses on the overarching theme 'The Subjective Experiences of Support' (see Figure 3). This theme captures how the experience of support is influenced by an interaction of personal and professional determinants and the diverse way in which one can be affected by the other, and the reality that each response to a student suicide is unique. The analysis highlights that a layer of the cascading effect of support is not just how it spreads through the school community but how professionals themselves absorb, sustain, and redistribute this support while navigating challenges themselves.

5.1.1 The 'Vulnerable' Professional

Described in this theme are the professional sacrifices necessary to ensure support continues to be distributed through the system and the impact of doing so. This includes managing one's typical workload whilst taking on other tasks. Moreover, in a school context, prioritising the needs of another is echoed throughout participants' accounts, despite the acknowledgement that self-care is key to postvention. This theme also captures the confusion of one's personal and professional identity, which can lead to feelings of vulnerability in part due to feeling personally exposed in a professional setting. Considering these challenges, professionals described a need for and the value accessing reflective spaces of some kind. Such spaces appeared to act as a means of punctuating accelerated time. This was in the sense that, following the trauma of student suicide, there is urgency described by participants (accelerated time). Marked moments (punctuation), a pause as such, appeared to aid emotional processing outside of the accelerated rhythm participants described.

5.1.1.1 Workload Management. All participant groups described significant increases in workload following the incident, and describing how, amidst an atypical routine, the typical routine continues. Chloe discussed the difficulties of having existing commitments whilst needing to respond immediately. For example, stating, "I was delivering a full day's training in ELSA [Emotional Literacy Support Assistant] when the call came about the [young person]'s death, asking me to respond. I ended up leaving the training to the other EP and did feel conflicted" (Educational psychologist, Alderwick School). Senior leadership team members, in particular, acknowledged the strain of managing both their everyday responsibilities, i.e., maintaining a school routine, and those outside of this, i.e., in a crisis response. George for example, spoke about the need to "consider carefully the time that everything takes up" considering that "the school has to also run normally" and managing "all the other things school has to do" (Senior leadership team member, Caldermere School).

A few school staff in Alderwick and Braybourne school contexts described the responsibilities and work remaining the same, however there was an increase in executive demands and multitasking, implicitly suggesting an atypical routine: "It was more it stayed the same for a while, it was more you just had to juggle everything all at once" (Olivia, School staff, Braybourne School). With regards to managing the atypical routine, guidance was also sought by participants about the 'right time' to return to routine, particularly in Braybourne School. For instance, Isla underscored the value of "guidance on how to phase out the safe space at an appropriate time to support students to get back into lessons" as helpful (Senior leadership team member, Braybourne School). School staff also spoke about wanting guidance from educational psychologists regarding managing the flexibility school had instituted for support as required following student suicide. For example, Olivia shared a wish for advice to deal "with everything that's sort of left behind" such as "navigating, you know, the family, how hard you push with attendance" (School staff, Braybourne School). This indicated participants

wanted further support to manage the tension of atypical routine in school as it continued to operate as 'normal'.

There was also an impression given in school staff accounts that the pace became increasingly busy while managing support to students and following directions from school leaders, reflecting the need of having to balance different pressures and demands. Helena reflected on their workload, explaining, "We took on quite a lot […] at that time supporting students" (School staff, Alderwick School). Olivia similarly described the importance of ensuring everything was being done accordingly, sharing how "at the time it was just sort of go, go, go, you know, making sure all procedures were followed" (School staff, Braybourne School). The data suggested that there was not only increase in procedural demands but also in expectations of being available to the needs in the school. The increased workload for staff in planning the response and organising memorial activities was also acknowledged by educational psychologists. Chloe reflected this saying "as we talked, they thought of more things they needed to do for the young people." (Educational psychologist, Alderwick School).

Amongst educational psychologists, there was also a recognition that too few educational psychologists were available to manage such crises, with some professionals also reflecting on educational psychologist readiness and willingness to undertake such difficult work:

> […] so there were not enough of us to spread out the work […] She didn't mind but this is another problem of too few EPs and also not all EPs wish to or, in my opinion, should undertake this kind of work (Chloe, Educational psychologist, Alderwick School).

Sienna also reflected on the emotional exhaustion resulting from navigating crisis situations, mentioning how it was hard to "switch off" after the critical incident response. Concerned about emotional burnout, she suggested that "perhaps an additional colleague should have joined" them "on the second day as it was busy and intense", particularly when "the same two EPs" were "going in both days" and a "reduced workload the following week"

would have been helpful (Educational psychologist, Braybourne School). The narratives suggested that the emotional impact of the work was substantial and necessitated some considerations to minimise this impact. This was particularly as another factor in workload management can also relate to demands outside of the crisis response, such as one's newness in role.

The hope for further involvement from external services was also linked to educational psychologists needing further support to manage their workload and "[…] 'spread the load'" with both Thomas and Sienna commenting on difficulties experienced due to an influx of students over the two days (Educational psychologists, Braybourne School).

5.1.1.2 Prioritisation of the Other. This subtheme highlighted the tension between personal needs and professional responsibilities, with professionals feeling compelled to continue working even when they were emotionally exhausted. All participant groups described prioritising individuals they are responsible for before looking after themselves, despite the knowledge that they should ensure self-care. In their descriptions, the prioritisation of the other presented as educational psychologists ensuring the self-care of all, Senior leadership team members prioritising the needs of school staff and students, and school staff holding student needs in mind.

Across all contexts, participants shared that educational psychologists played a role in providing guidance on self-care and the importance of professionals considering their own needs to respond. Ava shared they facilitated spaces to discuss this in terms of having "discussed self-care and each shared something we would do to look after ourselves" (Educational psychologist, Alderwick School). Susan, likewise, recalled "I think there were lots of conversations about, you know, looking after yourself, making sure that you're okay and if anyone needed additional support to get it" (School staff, Alderwick School). As an educational psychologist, Thomas described how these conversations extended to the

headteacher too, whereby ensuring they were "reminding him about his own self-care" (Educational psychologist, Braybourne School).

While there was an awareness of the need to care for staff, the immediate priority remained with the student community, often making it difficult to actively address staff welfare needs. For instance, Grace reflected:

> "I think it's tailored to the problem in a school is as much as you want to be mindful of the welfare of the staff, […] the young people are the priority. […] so that's really where it blurs in a school environment, it really blurs because you've kind of got to show up, you've kind of got to get on with it, because it's the, you know, the school's not, just it can't just stop (School staff, Braybourne School).

The emotional cost of prioritising children and young people's needs was discussed, with school staff reflecting how personal sacrifices felt necessary to fulfil their duty of care. Grace commented that "it just worked much better for [her] to disassociate and just completely just go into like masking essentially" whilst reflecting that this was "completely the wrong thing to do" (Grace School staff, Braybourne School). Grace described a tension between engaging in self-care and supporting others, and these were presented as mutually exclusive. Other participants described it as being "almost like" they "put on a bit of a like, you know, work mode. And like, it was a bit robotic, and it was all a bit of a blur. […]" (Eve, School staff, Braybourne School).

Notable amidst school staff accounts was the use of the word 'blur' which felt to represent the speed of such events and how they possibly choose to split off or separate aspects of their experiences to survive in the 'here and now' and provide postvention support. This was reinforced in George's reflection "the support would have been available but there are always others that should be seen first" (Senior leadership team member, Caldermere School). Along similar lines, Susan recognised, "I don't think I utilised that as well as I could have. It may have also just been time frames that we had to be able to access this" (School staff, Alderwick

School). These reflections highlighted how, in crisis responses, professionals often prioritised others and their professional duties.

There was also an expectation that adults, as professionals, could manage their well-being. However as described above, in times of crisis, prioritising others appeared to lead to neglecting their self-care. For example, George reflected "Senior leaders are trying to manage many different issues that come up and, but they don't (or we didn't) really allow time for ourselves to reflect on what happened" (Senior leadership team member, Caldermere School). Increased workload and emotional demands meant that, while they were trusted to look after themselves, this was not always feasible. Helena commented:

> But I think that because we deal with adults and because you know we have a good relationship within the school with other adults here, I think we tend to trust our other adults to make the right choice for themselves. […] I remember [Ava/Chloe] being available if people wanted to speak to her, but not choosing that for myself (School staff, Alderwick School).

At the same time, as autonomous adults, they could only be advised (and not directed) to seek support—yet the inevitability of needing support to navigate such a crisis was clear. For example, Grace reflected "I should have listened to my supervisor. I should have been more, much kinder to myself. And I should have taken more care of myself in that moment" (School staff, Braybourne School). Helena similarly shared the following:

> So, for example, I would say 'No, I'm okay', and you prioritise the students. Perhaps after a time somebody maybe should have made it compulsory, and that's nobody's fault […] But people trusted my judgement about myself. So, you can question whether that's the right thing or the wrong thing to do. I don't know. You know, if someone said to me "No, no, you have to be off". I don't know how I would have reacted to that […]" (School staff, Alderwick School).

5.1.1.3 The Confusion of Professional and Personal Identities. This subtheme captures how critical incidents can blur boundaries and bring profound emotions into the workplace. Reflections suggest professionals draw on personal resources to manage postvention and how this can lead to confusion, bringing personal life into a professional context. The subtheme also describes the value of being able to bring your personal identity in role and the comfort this brings when experiencing difficult emotions.

Ava discussed how personal identity becomes intertwined with professional identity during times of grief, making it hard to separate the two. She noted that when "professionals are grieving a young person they have known" this tended to "pull the individual so much more personally into their professional role". Further explaining:

> I feel it is quite impossible for the professionals we support to experience a critical incident in isolation from their own experiences and relationships. I think a critical incident such as this perhaps brings a new or different lens through which professionals are presenting amongst colleagues, and through which they are perceiving and experiencing those colleagues in return. There is a vulnerability and sense of exposure associated with that, which I feel can be inevitable when seeking to process something like this (Educational psychologist, Alderwick School).

The emotional exposure within the workplace was discussed, whereby professionals sometimes found it hard to separate their personal lives from their professional responsibilities. Some school staff spoke about their personal experiences of grief surfacing in unexpected ways. Sophie reflected on how personal experiences of suicide only became known to others from the spaces facilitated by the educational psychologist, sharing that:

> I think that a couple of us staff-wise have both experienced a suicide within our family […] we only knew that then, based on that talk with the EP, that wasn't usually going to have been something disclosed because it's not something you bring up in conversation (School staff, Alderwick School).

The student suicide could also lead to disclosure of personal grief at times they may not have chosen. Susan, for example shared, "I tried […] to tell people when I fe[lt] ready, and it

felt like […] I needed to tell them […] because it was a trigger rather than it being at a time where I felt fully comfortable" (School staff, Alderwick School).

Ava reflected on how, as educational psychologists, they typically held their "own personal impacts" to themselves and engaged in a kind of personal debriefing. However, the idea of "showing up as people" in unstructured moments was also mentioned, suggesting some degree of personal congruence, even self-disclosure, could help them to "sit alongside" those they supported (Ava, Educational psychologist, Alderwick School). Eve also spoke about acknowledging some personal vulnerability and physically comforting others when distressed as means of establishing a sense of mutuality with others:

> Yeah that's, that's the main thing I would say like, you know, we, it was okay to be upset and it was okay to, like not manage and you know have, when you're in at work you're a professional but actually we weren't expected to be in our working mode and put that sort of professional face on like you could have a cry. You could have a cuddle[...] (Eve, School staff, Braybourne School).

One school staff member, Susan, built on this, whereby mentioning her personal experience was supportive in building a trusted relationship with a student:

> […] mentioned how it was also my experience and that if she needed to chat to people then she could and she, she used that quite a lot over the course of the year to have someone that she felt she could communicate with quite effectively who would understand the process (School staff, Alderwick School).

In different ways, Susan and Helena also described how their personal lives exacerbated the emotional impact of the student suicide and led to uncertainty in their professional role. Susan, for example, found that drawing on personal experiences could be stressful, sharing that she could tell young people "I can only really talk to you about my lived experience" and reflecting how "more training on how to deal with those experiences is really important." (School staff, Alderwick School). This highlighted how one may draw on personal experience in times where professional experiences are limited. Alternately, Helena reflected on the

emotional difficulty of imagining the loss of someone in her personal life and how this impacted her in role:

> I remember thinking, you know, in my head. Oh, thank God. It's not somebody closer to me, you know, those thoughts, and perhaps you know, we shouldn't always assume that somebody doesn't need support even if they say they don't (School staff, Alderwick School).

The experiences of participants highlighted how the personal and school contexts can become confused in times of crisis, whereby one's personal life significantly influences the way they cope throughout postvention. Sophie noted how individual spaces with an educational psychologist may protect the confusion of identities in the workplace, stating "I think probably I [...] wouldn't have been the only person who probably would have liked a bit of an individual chat that was a bit more private" (School staff, Alderwick School). Senior leadership team members also acknowledged the need for further support for specific staff, with comments such as "a number of staff were personally affected by their own past experiences - extended support [is required]" (Zoe, Senior leadership team member, Alderwick School).

For most school participants, the support available was not always taken up, as the priority remained on fulfilling professional responsibilities during the crisis. However, alongside support through school, personal support networks outside the school system were emphasised by school staff as obliging. For example, whilst Grace did not take up support in school, there was a need to offload in an impulsive sense to individuals outside of school expressed:

> I was literally on the phone; I think I was on the phone to my supervisor on the phone. I was the phone to my counsellor. I was on the phone to my partner. I just. I didn't want to talk anyone to do with school [...] I don't know if I would have even taken it up because I think when I'm in, like when I'm in school, I just very much am in role, if that makes sense (School staff, Braybourne School).

5.1.1.4 Punctuating Accelerated Time. Structured spaces provided moments to pause and reflect, however, many school staff felt unable to engage due to the demands of their roles and sought more of it. The presence of educational psychologists was valued to punctuate time and offer immediate support, yet some staff only appeared to notice their need for reflection to process experiences related to postvention at the time of interview.

Spaces to process events unfolding appeared to occur prior to the headteacher liaising with the rest of the school, for example, through an educational psychologist ensuring the headteacher was aware of the EPS's role and support available. For example, Henry offered:

> Contact was made on the day we were notified (the day [pronoun] was found). I was able to talk through how to inform the school community, the order in which to inform individuals/groups and given support in creating written responses, such as letters to parents (Senior leadership team member, Alderwick School).

Sophie also discussed the immediacy of educational psychologist presence to be valued and acted as punctuation ahead of the response to the wider system. In addition, Isla found having a space alongside postvention was important and described, "the regular follow up check-ins" as "a safe space to process and discuss the critical incident" (Senior leadership team member, Braybourne School). This was congruent with Thomas' account who shared "listening, and giving space for key school staff to process what was happening as things were unfolding" was important (Educational psychologist, Braybourne School).

Spaces created to be able to pause, and think, appeared to also enable staff to develop a narrative of the events in a shared - and safe – space, valued in Zoe's account (Senior leadership team member, Alderwick School). Ava described this as a "slow conversation, allow for reflection, and allow space for checking back, clarifying, or adding additional thoughts and feelings" (Educational psychologist, Alderwick School). In Braybourne School, one school staff (Grace) reported struggling with the rest of the school appearing calm, due to this feeling incongruent with how she was feeling. However, she also suggested that for others, the

calmness may have been a sign that the educational psychologist's presence could have acted as punctuation, stating that "maybe […] the fact that by the Monday it all seemed calm, maybe [educational psychology involvement] was enough and that was fine (Grace, School staff, Braybourne School).

However, despite efforts to punctuate time, school staff participants described having to act with limited time to pause and think. Olivia was aware of "support offered from the EPs by the drop-in sessions"; however, "at the time, […] there was just so much going on [and] didn't really have a minute to sort of think about it all[...]" (School staff, Braybourne School). Susan also spoke about a comparable feeling, "I think when [taking the time] doesn't happen, it can sometimes, you know, you get sidetracked and we all are busy as teachers and sometimes you just end up going through the motions and forget to prioritise yourself" (Susan, School staff, School Alderwick School). School staff across the different school contexts also made reference to punctuating time when speaking about needing time off. For example, in Grace's view:

> Then on another hand from another level another part of me thinks, well, why can't it just stop? Why can't school just shut? Why can't school just closed for a day? Yeah. To allow people to just get their heads around what happened, but then I get that that's not always practical." (School staff, Braybourne School).

Similarly, Helena represented this in the agency she took in having time off:

> As soon as I said, look, you know, I think I need to go home. Nobody said that's not very convenient. You know, everyone was really nice. And gosh, of course, you know, come back when you're ready. So I think it depends on your personality really. You know, so that that was okay for me (School staff, Alderwick School)

Interestingly, some participants in the school staff group described the process of being interviewed for this research project as a form of punctuation. Susan shared practical elements of the research interview set-up which would have been helpful during postvention, stating:

> I think unlike this, where a sort of specific time is being arranged. It was sort of like come and see me and then it just kind of went out of my head […] because it wasn't

sort of, you know, take this QR code or this is my email address I don't think it was utilised as fully as it could have been (School staff, Alderwick School).

For others, the process of being interviewed brought into relief how they had not had a chance to reflect about the response, for example recalling "But I've never really thought about it to be honest, it's only what I'd do anyway. Perhaps it took my job up a notch and it wasn't for long […]" (Lucy, School staff, Alderwick School). In her interview, Olivia also appeared to have been prompted to think more about support she might access: "actually, to be fair I might take them up on it at this point and, you know, reach out a little bit" (School staff, Alderwick School).

5.1.2. Differentiation of Needs

This theme describes how the flow of support within a school system needs to be tailored and respond to the individual needs of staff and students. Support is captured as beginning with those most directly affected and then expanding outward, both in proximity and over time. Ongoing support is described as important and should remain accessible to the wider school community, whilst recognising the subjective needs and delayed impact of such events.

5.1.2.1 Consideration for the Most Affected. The emotional impact on individuals who had a close relationship with the young person was considered throughout the response to the student suicide. All participant groups described the importance of differentiated support for those in proximity to the student's death. This included both how the death was communicated and how support was organised. While differentiated support was provided for those most affected, reflections across participant groups suggested that further support for both staff and students navigating personal grief could benefit future responses.

Participants suggested responsiveness to personal contexts was required in differentiating support and in considering how information was distributed:

> […] which members of staff to inform first, who knew the [young person] best so that they were not hearing the news as a large group in briefing. What words to use and to inform the [young person's] friends, then [their] tutor group, then [their] year group and then the rest of the school. How to inform staff who were not in [Alderwick School] and how to inform parents (Chloe, Educational psychologist, Alderwick School).

Ava, Chloe's colleague, also demonstrated being attuned to subjective needs in the system by being in the here and now, stating, "I felt that the unstructured drop-in worked particularly well. It formed a safe space for those impacted at different levels by this loss (thinking about Circles of Vulnerability)" (Educational psychologist, Alderwick School).

Educational psychologists also helped schools identify and monitor students who, despite not knowing the student personally, may have been particularly vulnerable due to their own experiences. For example, Chloe shared that "staff were also advised to look out for students who appeared particularly troubled by the death but who did not know the [young person]" as, she said, "these students might have other things going on in their lives which this event had triggered" (Educational psychologist, Alderwick School). Similarly, Thomas observed different triggers for individuals; this included "those closest to the [young person] who had died, or individuals for whom the news had stirred emotions related to other experiences or deaths", indeed, encompassing "a wide range of experiences and emotional responses" (Educational psychologist, Braybourne School). Susan shared the view that "it wasn't always the kids that you assume", as the young person was "quite well known amongst all year groups" which may lead to students in different year groups seeking support (School staff, Alderwick School). These observations seemed to represent more visible aspects of grief expressed by students.

Invisible grief may require a sensitive approach from educational psychologists and senior leaders, as suggested from the different contributions. Daniel for example, shared they "particularly tried to get a lot of staff around the staff that were heavily involved [pastoral staff from the year groups involving the children]" (Senior leadership team member, Caldermere

School). Sensitivity from the educational psychologist was recognised in Isla's account, noting the "link EP offered support without forcing" her "to access it", as she "wasn't ready, which was very important to" her and other school staff (Senior leadership team member, Braybourne School).

Some participants were also of the view that staff could be more affected than the students and suggested more additional support for school staff should be considered in future responses. For example, Eve observed "the children in the lesson were okay and the teachers were actually I can't [...] The sad thing I found was that the staff seemed to be more affected than the students." (School staff, Braybourne School). Mia identified the support was "fine for students but maybe needed some further support for those staff who were closely involved." (Senior leadership team member, Braybourne School). This also highlighted the limited capacity staff have to be supportive figures in times of crisis, requiring further considerations to ensure they feel supported.

All participant groups from Alderwick School reflected on how future responses could also offer additional targeted support for students most affected. Zoe identified "A higher level of EP support for closest friends who were deeply affected by [the young person's] death" would be helpful (Senior leadership team member, Alderwick School). Alternately, Chloe wondered "whether there may be more that could be provided to students. [They] often do not work with students themselves […]" (Educational psychologist, Alderwick School). And Sophie felt students "[…] maybe they would have liked their own little session with [Chloe]. I don't know or […], someone from the EP team that might have been quite a good idea" (School staff, Alderwick School).

5.1.2.2 Availability to all. Through the participants narratives, the notion of educational psychologists making themselves available to others was indicated as key to coping emotionally (it was not only about what they did but how they showed up). In addition to sensitivity, the availability of professionals also appeared to support invisible grief following a social trauma. This was particularly noted in the immediate days and weeks after a student had died. Longer-term availability appeared more prominent for the senior leadership team members group and sought after in the school staff group.

Sienna for example, noted the importance of ensuring "that we [EPS] would be available to provide support for key groups in a balanced way throughout the day." (Educational psychologist, Braybourne School). Again, highlighting access for anyone needing support, Ava described "an open invite to any members of staff who wanted to join" (Educational psychologist, Alderwick School). Educational psychologists and senior leadership team members also ensured that spaces were made available for those students most affected, for example, by considering "what facilities to make available to students who were likely to be most upset, staffed by pastoral members of staff. To help those students most upset to express their grief" (Chloe, Educational psychologist, Alderwick School).

However, these arrangements relied on individuals seeking out the support independently, which, in light of previous themes, highlights the challenges with adult autonomy and school staff not prioritising their needs to fulfil professional responsibilities may be a possible barrier to effective postvention. In relation to this, in some accounts, there were comments that indicated self-determination (competence, autonomy, relatedness) was respected through structures being flexible and accessible (Ryan & Deci, 2024). For example, Daniel observed "even if staff did not access the support, they knew it was there" (Senior leadership team member, Caldermere School). Similarly, Ava described individual agency in seeking support, stating "you very much have to meet people where they are at, and you are

supporting them very much in 'real time'" (Educational psychologist, Alderwick School). George added that the educational psychologist was available for the first two weeks and then "on request if there were students or staff who had made further requests for support." (Senior leadership team member, Caldermere School). Similar to the school staff group, I wondered about what challenges arise for students in being autonomous and needs being met in times of crisis.

There was a real sense that reminding the senior leadership team and staff of available support through being visibly onsite or checking in frequently was also an important part of postvention. In Braybourne School, participants noted this onsite availability in the days/weeks following the student suicide. For example, Isla shared "when I returned to school, two EPs were available on site to speak to staff and students." (Senior leadership team member, Braybourne School). This was reinforced by Eve who recalled "they were literally available. I think they came in two days, so anyone who wanted to be seen was seen as long as they wanted." (School staff, Braybourne School). Thomas added that availability of the educational psychologist was accomplished through "checking in to see if all was okay in the school and if any issues were arising. Checking in with EP colleagues. Touching base with the Headteacher" which suggested making their support/presence known in this way aided in managing difficulties with help-seeking (Thomas, Educational psychologist, Braybourne School).

Ava also discussed the importance of relational availability in the support provided throughout the crisis, stating, "I do feel some unscripted, more relational availability holds relevance" (Educational psychologist, Alderwick School). This suggested more adaptive practice is required, which was also represented in school staff accounts as being valuable. Eve for example, stated "[…] if you had, you know, to spend an hour there, it was accommodating to everyone." (School staff, Braybourne School). Similarly, Olivia shared that:

They offered the drop-ins quite frequently. And it wasn't just you were offered it once, and then it was sort of "What you said now that's it". Like you got offered it again and they came in and spoke with the school, which is really good (School staff, Braybourne School).

The context and needs of the school also appeared to influence the extent to which educational psychologists made themselves available longer term. For example, Chloe shared that "the support lasted longer than usual as the Head was asked to give the eulogy. The Head was emotionally very sensitive and wanted to do the [young person] justice." (Educational psychologist, Alderwick School). Within the school staff group, perceptions of support availability differed. For example, Grace noted that an external counsellor came "in once a month and [was] offered to senior members like year heads and things like that, not to general staff (School staff, Braybourne School). By comparison, in the same school, Olivia shared her view about the availability of support being accessible across the school community:

I don't know if any more was offered separately; you know SLT meetings, anything like that, I'm not sure. But as far as I'm aware, everything that was offered to any support staff or anyone in the school was also offered to SLT (School staff, Braybourne School)

These accounts suggested that the position or role of staff in a school may influence their perception or awareness of support available. Indeed, in general, school staff felt that further accessibility to support would have been helpful and advocated for increased educational psychologist availability to all. Practically, Helena suggested "maybe an e-mail specifically from that EP. Yeah, maybe a contact which would have made it easier to reach them in the future" (School staff, Alderwick School). Although this may suggest increased and clearer access to educational psychologists, I reflected on how this may also relate to broader limitations of finite availability and time-limited input in postvention. Another reflection was the difficulty which comes with endings and the possibility that there remains uncertainty about the educational psychology involvement concluding. Particularly considering the delayed impact of trauma (which I will attend to subsequently).

5.1.2.3 Delayed Impact. The delayed impact of student suicide was captured across contexts. The school staff participant group either described themselves or were described by other professionals as benefiting from longer-term support due to the delayed impact of the student's death. Despite the challenges which educational psychologists recognised regarding their involvement long-term, Ava also wondered whether:

> […]an intention to check in after a period of time could be established. I wonder if this would help to foster a sense of containment or reassurance during that period of time when the initial incident has become known but during which students and staff are still processing and adjusting (Educational psychologist, Alderwick School)

Thomas also reflected, "It may have been helpful to offer further follow-up support to key members of staff and/or students" (Educational psychologist, Braybourne School). School staff also noted that a later follow-up would have benefited staff and students. Helena emphasised that "there isn't any really any time limit on [grief]". Further, "as time goes by [it may feel as though], the doors [to support are] closed […] now, and it's hard to revisit it. And so, it might, it might be useful for something like [longer-term support]". During the interview, she also noted:

> It's only something that I've thought of since because I, it did affect me, maybe a couple of months after [name of young person] had died. You need to think, I think probably it didn't really hit me until then (School staff, Alderwick School).

Susan also commented on the delayed impact for students, recalling "a lot of kids were sometimes okay to start with and then", three to six months later the trauma seems to resurface. She added "sometimes with kids […] it takes a really long time to process that's happening, that person that's been there all the time" hadn't been in school for over six weeks and there was noticeable absence which is when "kids started to wobble a little bit more." (School staff, Alderwick School).

Senior leadership team members acknowledged the ongoing need for support beyond the immediate crisis in their response. For example, George shared the challenge of transitioning back to routine while still processing grief. "This can have a delayed impact later in the year once things had calmed down" (Senior leadership team member, Caldermere School). Senior leaders reflected on wanting further follow-up in future. For instance, Zoe shared that "opportunity for a follow-up session (group and individual) a few months/one year on would be supportive" (Senior leadership team member, Alderwick School). Similarly, George wondered "maybe we should consider follow-up for staff a year later?" (Senior leadership team member, Caldermere School).

Suicide was also described as carrying additional complexities in comparison to other bereavements such as risk to others in relation to suicide contagion. The responsibility as a school counsellor for other young people's wellbeing following a student suicide is significant, all whilst navigating their own grief. Implicitly there seemed to be a call for sustained support with other professionals to share the responsibilities of student's wellbeing. Grace shared with difficulty the challenges of suicide specifically:

> Suicide is different. It, right, it brings up, it's a whole other thing. And I just think in order to actually you know, there were potentially, yeah, I don't know. So I just think it adds another layer to everything […] It just matters it. It needs that bit more sensitivity. Yeah, that bit more. I don't know. I'm just not sure having people in for two days is not enough is kind of what I'm saying (School staff, Braybourne School).

Three school staff noted the resurgence of grief and thoughts about the student who had died; anniversaries, in particular, reawakened the need for support. For example, Susan noted "and then also when it came to like birthdays or Christmas, significant events it tended to crop up in kids heads" (School staff, Alderwick School). There was also a recognition that some individuals held onto the loss longer while others moved on and therefore, they needed flexibility in the response over time. For example:

> I understand that in a school like, life has to go on and school has to keep going and all the rest of it. I think it's just it's very difficult to be, I suppose some of it is probably just more the fact that, you know, it felt so from those two days to then coming back on a [day of the week] and then pretty much like I say, asides from that [memorial event], it hasn't really, it's just felt like it never happened (Grace, School staff, Braybourne School)

5.1.3. Navigating a Unique and Unpredictable Event

This theme captures how professionals felt in navigating the unpredictable, unique nature of a student suicide within specific school contexts and what they found supported them to feel some level of readiness within an unknown context.

5.1.3.1 Uniqueness. The unpredictability and unique nature of suicide in a school presents distinct challenges to postvention, as captured by Henry commenting that "Nothing can prepare you for such news" (Senior leadership team member, Alderwick School). The frequency of these events is low and additional challenges exist when schools are navigating them for the first time. Grace suggested that "realistically this is not like, this is never going to happen again because it's going to happen and we're in a time where the numbers and the, you know instances. It's not unheard of..." (School staff, Braybourne School). Isla added to this stating "as a fairly young school, our community had no experience in dealing with a critical incident like this." (Senior leadership team member, Braybourne School).

Described in an earlier theme was the foundations that 'tangible resources' may provide when navigating a crisis. However, participants acknowledged no suicide literacy could prepare one for the emotional demands and impact of such trauma. Grace also highlighted the individuality of each situation whereby it would be difficult to apply a generic approach to postvention:

> I had training but I don't think that any type of training can prepare you [...] I've done working with very vulnerable young people. I've done working with self-harm and

suicide. So, I've done a lot of training, but yeah […] it's very, I think, like I say, it's really so different and unique to whoever the person is." (School staff, Braybourne School).

Similarly, Mia shared that training would be "tricky as each incident would be so different." (Senior leadership team member, Braybourne School). An example of uniqueness was shared in Alderwick School, whereby a senior leadership team member participant reflected on the importance of their response to be initiated ahead of social media:

> We were fortunate nothing had leaked on social media before we were able to inform the school community […] Being able to inform the school community before news spreads on social media is incredibly important. This allows for considered sharing of information and the provision of support to be coordinated (Henry, Senior leadership team member, Alderwick School).

In Braybourne School, participants experienced challenges with social media spreading information and sought further guidance to manage this within postvention (Isla, Senior Leadership Team member, Braybourne School). Both accounts highlighted how responses to student suicide are uniquely shaped by unpredictable influences and postvention requires reactiveness in the moment.

While there was recognition amongst the participants that frameworks exist, much of the response was described as reactive rather than proactive due to the nature of these events. Grace stated:

> I think there's a lot of organisations like I say, that are trying really hard and professions that are trying to get together to put things in place. But because of the uncertainty of it... it's difficult to know what is the best thing to put in place. (School staff, Braybourne School).

Similarly, flexibility due to the unique nature of the student death was described by school staff. Lucy shared she coped with uniqueness by learning to adapt in the moment: "I think it was probably so unique that anyone or most of my understanding, most people kind of just dealt with whatever they were expected to do." (Lucy, School staff, Alderwick School).

5.1.3.2 Readiness and the Unknown. This subtheme addresses the tension between the feelings of being prepared and the unpredictable reality of responding to a student suicide. Professionals recognised factors such as experience and knowledge of frameworks/guidelines can help with confidence whilst acknowledging that the uncertainty of emotional impact will remain. School staff and senior leadership team members described how a uniform approach may provide the illusion of feeling prepared, however in reality it being inadequate and non-transferable if this were to happen again. For example, Daniel suggested "If we had modelled the situation before it happened, we would have been better prepared" (Senior leadership team member, Caldermere School).

The interview accounts attested to how schools aim to feel ready, but this is difficult and therefore often having to sit with the unknown of what ripple effects will take place. From a school staff perspective, Eve shared "it's something that you can, you could plan for you know just in case but when it happens you, you don't really know do you, it's really different when you're experiencing it in real life" (School staff, Braybourne School). Along comparable lines, Grace spoke about the value of skilled professionals in supporting critical incident response, while acknowledging that the unpredictable nature of a student suicide is incongruent with the idea of being fully prepared:

> I think just having professionals you know, in place to support senior leadership teams and schools because you know they're not going to know necessarily how to manage something like this either. But again, I'm not even sure if there's a crib sheet that is going to tell you, you know what you should and shouldn't do, if that's enough (School staff, Braybourne School).

In line with Grace's account, Sienna discussed how applying everyday skills to unknown and unpredictable events, such as consultation, can be valuable in supporting schools to manage the response. Highlighting that while the nature of these events is unique, she observed that professionals can make use of the skills they use in everyday practice.

It is a very hard thing to prepare for, so it helped me to remind myself that I would need the same skills I use in consultation and when talking to pupils that I use in everyday practice, and apply it here (Sienna, Educational psychologist, Braybourne School).

Generally, educational psychologists suggested experiences of 'what works' and guidelines such as critical incident protocols were deemed helpful to implement postvention effectively as this ensured immediate action and enhanced confidence in the effectiveness of their support. For instance, Chloe said she "used a tried and trusted formula as there is not the time to make it up on the spot." (Educational psychologist, Alderwick School). Similarly, Sienna tried to prepare by flicking through "service guidance at the beginning of each academic year, and […] signpost it to schools at autumn planning meetings." (Educational psychologist, Braybourne School). Thomas felt previous experiences aided both the practical aspects of postvention and emotional readiness due to having less uncertainty (Educational psychologist, Braybourne School). Similarly, Adam stressed the importance of "experience of supporting schools with critical incidents and working with the knowledge and understanding of the community needs" (Educational psychologist, Caldermere School).

5.1.3.3 Evaluation of the Response. Individuals reflected on the effectiveness of postvention by acknowledging both the successes and challenges in managing the difficult response. Some respondents appeared to present more critical evaluations, while some appeared confident with what had been put in place. Others highlighted in more detail their satisfaction with the support they received and provided.

One school staff, Grace, referred to the unknown role of the educational psychologist in postvention, and described understanding in the moment why they would become involved with the skills and training they have, stating:

 I was a little bit if I'm honest, I think I remember thinking like, why are we getting Ed psychs? Like, why Ed Psychs? Because that's not my experience of an Ed psych. But then I did kind of put two and two together. My experience of it has been positive, like

with Ed Psychs. It made sense to me then thinking about why Ed psychologists would come in. (School staff, Braybourne School)

At the same time, she felt things could have been done differently overall, although she did not share what specifically, reflecting, "You know, this is almost a year later. So, you know, I'm, in reflection. I think a lot of things could have been done really differently" (Grace, School staff, Braybourne School).

By comparison, some participants stated that the response was appropriate and 'right'. For example, Adam shared "nothing more or different" to their response would be helpful (Educational psychologist, Caldermere School). This was echoed by Daniel in the same context, "I think we got it right" and had no further thoughts for what educational psychologists should know or felt no more could have been offered (Senior leadership team member, Caldermere School).

In Alderwick School, school staff shared the perspective that the response to student suicide was well manage by the school. For example, Helena reflected "I think that, has it been an unprecedented situation. I think that you know, the school did really, really well" (School staff, Alderwick School). And comparably, Sophie fed back on educational psychologist involvement "I think it was quite valuable what they did and how that was offered." (School staff, Alderwick School).

Within Braybourne School, participants from all three participant groups suggested the postvention response to have been valuable despite some of the barriers acknowledged in earlier themes (i.e. longer-term support). From an educational psychologist perspective, effectiveness was judged by personal impact, gratification and feedback received from those involved. Sienna felt "It was time consuming but worthwhile and much appreciated [...] the Head did send me and the PEP an email saying the school and he really appreciated the care and support and advice we gave them." (Educational psychologist, Braybourne School). Along similar lines, the school leaders described feeling "with the guidance and support of the EP

service" that it was navigated as best they could in the circumstances (Isla, Senior leadership team member, Braybourne School). For school staff, whilst also emphasising the complex nature of postvention, Eve expressed satisfaction with how it unfolded over the two days following the student suicide.

> It was hard to think back and obviously I've never experienced anything like that before and I don't think many people have. But looking back on that day, those couple of days, I think it all went quite well and was handled quite well […] what happened obviously was devastating, but it was managed quite well, yeah[...]So I don't really think there was much more that could have been done and offered. (Eve, School staff, Braybourne School).

5.2 Chapter Conclusion

Together, these themes illustrate how participants experienced the flow of support following a student suicide, and how it required flexibility to respond to unique needs which arose within the school environment. In this way, they highlight how the cascading effect of postvention is sustained through the support individuals receive within the school system and how they, in turn, redistribute that support to others. Professional sacrifice figured, fundamentally, in the experiences of postvention, which was highlighted by the descriptions of 'survival', having to split off parts of one's responsibility to self-care, to uphold professional duties which related to prioritising others. Professionals destabilised in an atypical routine also appeared to lead to confusion of professional and personal identities in the workplace. Whilst this led to feeling exposed for some, it also served as a coping mechanism in managing the impact of shared social trauma by forming new relationships. With this, the needs and experiences described of participants appeared to benefit from punctuation points, to slow down and process grief outside of the 'not-so-normal' routine.

The narratives collected in this study highlighted how postvention activity requires attunement to both immediate and delayed needs in the school system, whilst acknowledging the challenges of visible and invisible grief. Along with this, the complexity of autonomy in

help-seeking identified, was suggested by educational psychologists to be best managed through respecting choices and remaining available to all. The concluding theme suggested postvention had for the most part been valued and managed as best as it could considering the unique and necessary unscripted nature of postvention. Participant perspectives also stressed the value of previous experience and expertise in role in navigating such events.

6. Discussion

6.1 Introduction

This chapter summarises the study findings and relates them to relevant existing literature. As part of the chapter, study strengths and limitations are also considered, as well as directions for future research and implications for practice. Plans to disseminate the work are also outlined.

As a practitioner researcher completing a training grounded in systemic and psychodynamic perspectives (including attention to systems psychodynamics in organisations), the lens through which the findings are interpreted is aligned with these frameworks. Indeed, I suggest the chapter highlights their utility for illuminating the nature of professional/personal dynamics within a school system/organisation in the wake of the social trauma of student suicide.

6.2 Summary of Findings

The current study, in exploring the cascading effect of postvention from varied professional perspectives, highlights both the hierarchical and subjective nature of responding to a student suicide in a school. Taken together, the findings suggested postvention in a hierarchical system benefits from a cascading process of 'containment', entailing distributed responsibilities and structured support based on school needs. This cascading process was found to require collaborative approaches, shared responsibilities and sensitive communications to facilitate support and adapt to individual needs within the system. Postvention was suggested to enable both collective and individual grief, through members of the school community pulling together and spaces provided for personal reflections and emotional processing. Trauma was observed to be a destabilising and fragmenting force, i.e., destabilised the person, their role and boundaries within an organisation. The fragmentation

can lead to personal and professional role confusion, with roles becoming more difficult to define and, in some cases, roles can become more rigid whereby the focus is duty over one's self-care (Eloquin, 2016; Foster, 2001). This can also be seen as a coping mechanism where silence/denial protects from overwhelming feelings, however, may also contribute to disconnect and isolation over time (Bartle & Eloquin, 2021).

On an organisational level, policies and guidelines may also unintentionally contribute to a splitting of professional conduct and emotional response, acting as a barrier to processing trauma for professionals involved in such work. Challenges with defining postvention suggested a need for clarity and contracting involvement to manage complex emotional dynamics (Obholzer & Roberts, 2019).

6.3 Integration of Findings with Existing Literature

6.3.1 Hierarchical Systems of Support

The support from educational psychologists was described to flow through various levels of the system. This included guidance related to language sensitivity, suicide literacy, and responsibilities in role. Scripts (worded sensitively) to deliver information to the wider system were referenced to be a valuable resource throughout the involvement following a student suicide, echoing Brennan's (2021) and Cox et al.'s (2016) findings. In a similar vein, guidance provided by educational psychologists was reported to help scaffold school staff's understanding of postvention. However, further guidance to support working with grieving students was sought, by school staff which may link to findings of educational psychologists themselves seeking increased suicide literacy to respond to student suicide. Therefore, insufficient suicide literacy may contribute to the disruption in the flow of information, and an increased knowledge within educational psychology practice may aid the flow of information to school staff on the ground. Indications of school staff feeling ill-equipped to take on these responsibilities were reflected in participants accounts, particularly with insufficient training –

also raised in Cox et al. (2016) and Piojula et al. (2001). As such, collectively, participant narratives point to the multifaceted role of the educational psychologists in postvention, with direct and indirect contributions supporting in building capacity, information sharing and taking up leadership.

A facet of the educational psychology leadership and responsibility was in applying psychological knowledge to support schools in navigating such social trauma. Beyond this, educational psychologists facilitated coordination with external services due to their privileged bridging position (being between local authorities and schools). These findings resonate with existing literature on the role of the educational psychologist working in complex systems and the suitability of their skills (Hill, 2013). Where educational psychologists were less visible (i.e., were engaged in less direct work), there was a strong desire for increased involvement. This illustrates the ongoing challenge between achieving system-wide benefits and providing individual-level support. Educational psychologist accounts reflected this uncertainty about whether they were best positioned given their transient presence in the school system.

Leadership was found to be essential to the development and shaping of postvention. Key communication channels were required between the educational psychologist, the headteacher and SLT members to take up a leadership role to coordinate a coherent response across the whole school system. The headteacher was particularly key in cascading the support through the system with guidance and psychological safety provided by the educational psychologist. While the scoping review highlighted the importance of emergency planning (Brennan, 2021; Cox et al., 2016) and the role of the headteacher in this (Farragh, 2019; Severn, 2024), this study pointed to the helpful mechanisms and dynamics between leadership positions which facilitated timely and sensitive postvention.

The emotional burden from leadership roles was also represented in the current study. EPs provided support strategically (template, what to expect, sharing their previous experience)

and emotionally (ensuring a space for them to process the event before responding to the needs of the wider system). This is supported in the findings of Severn's (2024) study and also reflects the core principles of psychological first aid – promoting safety, calming presence, connectedness (Ruzek et al., 2007). Transparency and honesty in leadership was shared in participants' accounts, also represented by the student preferences in Mirick and Berkowitz' (2023) research. There was also a sense of understanding among colleagues highlighted in the current study, with emotions being collectively processed (i.e., through a sense of "we-ness"). Participants' experiences underscored the role of leadership in nurturing such collective processing.

Participant accounts did not suggest any specific protocols and guidelines being used in their narratives, which may explain why school staff were unclear about protocols and procedures, suggesting that this uncertainty may be held at an educational psychologist level and possibly within the senior leadership team. The role of leadership in the implementation of policy was highlighted in the scoping review (Farragh, 2019), but it was not addressed in this study. Student perspectives in one study revealed that they received varied support or none at all, which seemed related to limited adherence to guidelines (Mirick & Berkowitz, 2023). This was echoed in Cox et al.'s (2016) literature review, where no evidence was found of routine guideline use. Arguably, the reference to guidelines with limited clarity in both the current study and the scoping review may reflect individuals seeking formal and informal systems, for these to act as a buffer between self-in-role and the reality of painful experiences necessary to cope with social trauma (Bartle & Eloquin, 2021). From this perspective, a need for guidelines and structure may be viewed as a form of defence against anxiety within the organisation, representing unconscious processes that aim to protect against difficult feelings which may be experienced (Bloom & Farragher, 2011).

Suicide literacy, postvention training and accessible resources (i.e. signposting to support services or therapeutic ones) formed part of the flow of support (a disrupted one in this study). For school staff there was also inequity highlighted with some staff feeling more prepared due to role-relevant trainings they had received. Educational psychologists also expressed a need for additional training to support postvention work effectively, consistent with O'Neill (2020), who found that many professionals lacked adequate preparation. Participants valued tangible resources shared by educational psychologists, and training itself was viewed as a concrete resource that could offer reassurance during a period of uncertainty, as evidenced in Rickwood et al. (2018), who linked training to improved staff wellbeing. A disconnect also appeared between the educational psychologists' dissemination of resources and their uptake among school staff as senior leadership team members often acknowledged receiving materials, but frontline staff reported feeling unsupported or unaware of resource availability. This may point to a broader issue of information flow and communication across hierarchical systems. Organisational research suggests that trauma can lead to fragmentation and siloed practices (Bechky & Okhuysen, 2011; Obstfeld, 2012), thereby challenges in collaboration. While such fragmentation may foster siloed productivity (members divided and undertaking different tasks with focus), postvention also necessitates agreed-upon processes and shared understanding to ensure coordination and avoid confusion.

6.3.2 Collaborative Support Across and Within Groups

The study found that collaboration relied on communications between the educational psychologist and primarily the SLT, as well as wider agencies in some instances such as community services and mental health services. However, external services became involved later in some instances and this was coordinated by the educational psychologist. This is supported in Beeke's (2021) and Brennan's (2021) studies which illuminate the value of multi-disciplinary response teams as well as Cox et al.'s (2016), where experts highlighted the

importance of considering collaboration with external mental health services to ensure staff only take on work within their competence. Educational psychologist experiences suggested that an earlier involvement from external services would have been helpful in managing workload and responsibilities, but not at the expense of ensuring clarity of roles to not dilute the response. Similarly, careful consideration of role expectations in collaboration was evidenced in Hopple and Ball (2023).

In all three schools, narratives highlighted the significant reliance on the educational psychologist to provide support, which is in line with their statutory responsibility with regards to critical incidents (Lee & Woods, 2017). However, the guidelines with regard to collaboration and shared responsibilities are absent. This may leave educational psychologists with challenges in contracting work; and the findings suggested this uncertainty trickled down through the system. Clear communication thus appears important in contracting involvement as evidenced by the school staff's experience, and supported by school consultation literature (Newman & Rosenfield, 2019).

The concept of role-relevant peer support, whereby individuals receive support from individuals in similar roles, or in teams with similar responsibilities was indicated to be important in the findings. Educational psychologists valued spaces to debrief and senior leadership team members drew on leadership professional networks. School staff may benefit from such spaces as they sought peer support spaces in their accounts. This aligns with wider literature regarding relational and social support (Solomon, 2004) and regarding the benefit of these spaces following trauma (Bartone et al., 2018). This is also evidenced in Brennan's (2021) study and Severn's (2024) study who highlight professionals value peer support. The layers of the cascade required pooling within levels for different professional groups to feel safe enough to sustain the flow of support.

For this flow of support to exist it required an infrastructure which collectively held it together, from participant accounts, this appeared to be accomplished through sustaining some sense of communal memory. A collective response was valued, and memorial activities were shared to act as a channelling of emotions in different school contexts. Memorial activities (a significant part of postvention from participants' narratives) were shaped by family wishes and student voices, which reinforced the value in joined up approaches. Staff also found students as a source of support to move through grief – 'pulling together'. In line with Chafouleas et al.'s (2023) work, school professionals implementing postvention appeared to create an environment which promoted staff and students to process grief together which can support collective coping and social connectedness. While the scoping review highlighted memorial activities to be context-dependent and experienced negatively at times (Cox et al., 2016; Mirick et al.,2023), the current study also highlighted the ways in which sustaining communal memory supports the development of postvention, while emphasising a family-led (of the young person who had died) and student-led approach.

6.3.3 Boundaries of Support

Confidential spaces were described to provide sanctuary for the sharing and processing of emotions and, as such, physical spaces were interwoven with emotions; participants recalled specific details of the spaces where they accessed support. Three ways in which these were valuable was referenced in different participant narratives - the proximity, 'knowledge of' and the territory within which this space was mattered. For instance, the 'knowledge of' available spaces for school staff and for educational psychologists, their proximity, was also described to reduce uncertainty in a time where there was a lot of it. Physical spaces were also portrayed as 'territory', in the sense that educational psychologists and the counsellor benefited from being outside of school to access their own support/debrief. A parallel to this can be found in Cox et al. (2016) who reported location of spaces should be considered carefully as it could

influence the school's learning environment. The framework of Boundary, Authority, Role, Task (BART) may also offer a useful lens in interpreting the findings, as it suggests that with every territory a new task (dynamic process determined by individuals within the group) begins and ends (Green & Molenkamp, 2005), aligning with the findings that physical spaces provided structure and clarity to the task of emotional processing.

The importance of the timing of support was noted throughout this study in different ways. This was highlighted through the references to valued immediate involvement from educational psychologists, and to a wish for increased long-term support for school staff and students, particularly at times when challenges resurfaced (i.e. anniversaries). Open invitations were appreciated, however there was a need for increased clarity suggested by participants – e.g., 'where does it start and end?'; this captured the existing ambiguity across the system. The flexibility and agency provided to school in reaching out to educational psychologists for support was appreciated, but presented challenges in understanding the boundaries of support. Contracting for involvement is an important part of educational psychologist involvement (Newman & Rosenfield, 2019), but this was found to be challenging in the context of unpredictable and sudden involvement. Notably, there was an apparent tension between requiring structure/rigidity to manage the fragmented and heightened states of anxiety in the system, whilst also requiring flexibility to adapt to unpredictable need. Theoretical concepts of boundaries were helpful to ground these findings (Eloquin, 2016). Boundaries manage how inputs (support) can be transformed into outputs (positive change), permeable boundaries are required (open enough to allow support in), and leadership roles should, arguably, have a greater responsibility to determine boundary activity and to find a balance for these not to be too tight or too open. Too tight will constrain growth and development (output), too open will lead to derailing (overwhelming state) and limited effectiveness of the task at hand (emotional processing; Eloquin, 2016).

In this study, the influence of relationships with educational psychologists and other members of staff within the school system appeared to determine access to support, particularly in the long-term with regards to informal follow-ups, with trust and pre-established relationships with educational psychologists facilitating effective support. Another finding suggested that relationships with leadership and internal relationships with colleagues in school influenced accessibility to support. Similarly, as reported in Tschannen-Moran (2014), trust and school relations can shape the effectiveness of support and culture in a school. Relationships appeared to become the bridge to sustained and informal support, as represented in participants' experiences of postvention.

6.3.4 The 'Vulnerable' Professional

Significant challenges with workload management and the impact of this on mental wellbeing were described by participants. Across the three professional groups, participants related an increased pace and quantity of work. Challenges balancing a typical routine with a crisis response were prevalent. Adjustment of workload where possible was sought from the educational psychologists to enhance capacity for self-care. Outside of crisis response, the climate already reflects a stretched public sector with retention difficulties (Lee & Woods, 2017), therefore unplanned work is likely to have a significant impact to professional emotional wellbeing. This is supported by the findings Brennan (2021) and Debski et al. (2007), reporting on the impact of workload demands as a barrier to effective postvention. The implication in this study was that utilising external support such as mental health and community services to prevent burnout, and exhaustion may in turn aid in meeting the school needs. This also points to a broader need of shared responsibility across systems to ensure the capacity of one system does not become overwhelmed.

Self-care was also found to be an important part of postvention. However, challenges with prioritising one's own self-care were indicated for all; this was suggested to be primarily

due to prioritising others and having to function as a professional. Findings suggested a cascading effect of prioritisation, which related to the responsibilities individuals held. Educational psychologists ensured the school system was prioritised over their own self-care and workload, SLT prioritised school staff and students, and school staff prioritised students. The emotional toll of postvention was echoed in the findings in the scoping review studies (Brennan, 2021; Finegan, 2024; Hall, 2019; Severn, 2024). Prioritisation of others and fulfilling professional duties also aligns with the idea that professionals may need to split 'professional care' and 'emotional burden' in order to fulfil their professional duties (Foster, 2001). Alternately, staff may suppress their own emotions in order to meet the needs and expectation of the organisation (Mann, 1997). The school staff group particularly referenced avoidance of feelings as a defence mechanism, through dissociating from/masking feelings to keep the school running and care for students. This raises important questions about how professionals are to be supported to care for themselves throughout a social trauma, considering the function of postvention is for emotional recovery of all members of the school community.

There was an expectation of self-management represented in school staff experiences which was difficult in a context where they allowed themselves little time to access support. Their reflections suggested challenges in wanting support/time off to be compulsory to some extent and being given authority/permission. This is echoed in Finegan's (2024) study, where they discussed the challenges of role ambiguity (unclear expectations and adequate training), role conflict (balancing professional expectations and personal impact of trauma) and 'double-bind' (conflicting demands – taking time off vs being present - leading to at least one undesirable outcome either way) in traumatised organisations.

Along with this, a confusion of professional and personal identities was highlighted in this study whereby staff found crisis can lead to emotional exposure in the workplace. For instance, some staff found they had to share personal experiences despite not being emotionally

ready in order to support others and receive appropriate support. Increased training to shape the support through professional skills rather than personal experiences was suggested as a way to protect individuals from feeling vulnerable in a professional setting. However, findings also indicated that to "show up as people" was important to the support provided and personal disclosures at times felt to be supportive to students. Therefore, 'role conflict' between professional and personal boundaries seemed to be experienced in relation to the competing demands in times of trauma (Finegan, 2024). Acknowledging the interplay of the self and professional role with guidance as to how one may navigate this boundary, whilst maintaining humility in supervisory spaces or training may be helpful.

The responses from participants also suggested the value of punctuation (intentional pauses) to support structuring and the slowing down of postvention activity. Examples of punctuation noted by participants were, through the initial meeting to organise the response between educational psychologist and the headteacher, the creation of spaces to facilitate collective meaning-making for school staff and spaces to reflect on students' and staff's emotional processing. Participant narratives align with findings from organisational research, which suggests the importance of reflective spaces, collaboration and interpersonal communication in times of crisis to combat 'relational austerity', suggested as a type of defence against anxiety (authoritarian rather than authoritative and combative rather than compassionate approaches; Hingley-Jones & Ruch, 2016), and how these spaces can support management of wellbeing through slowing down (Huffhines et al., 2023).

6.3.5 Differentiation of Needs

The current study highlighted the importance of differentiating support and response to individuals within the school community as well as school context being crucial to consider in marshalling an effective response. Professionals and students closest to the students who had died were described as prioritised in receiving the difficult information about the student death,

and guidance from the educational psychologist; also supported in Brennan's (2021) study. There was an awareness of different needs which were visible or invisible, both requiring differentiated support highlighted by participants, also echoed by students in Mirick et al.'s (2023) research. Tailoring support further for students and staff and for longer periods of time in future responses was also a shared reflection across participant groups. The delayed impact of the student suicide was suggested to require a sustained sensitive support, also evidenced in several studies (Cha et al., 2018; Cox et al., 2016; Severn, 2024). Factors discussed as contributing to the delayed impact related to anniversaries leading to difficult feelings resurfacing for students particularly, for staff this also related to their prioritisation of duty over self-care.

Throughout the current study, participants' responses revealed how important the availability of the educational psychologist was. Further, knowledge of this availability was suggested to be reassuring, whether it was taken up or not. The value of an open offer, and educational psychologists in the immediacy being onsite was considered (highly) advantageous. This awareness and value for availability rippled through the system with senior leadership team members ensuring their availability to staff, and staff to students. This may suggest a hierarchical containment process within the school, which may be explained by McLoughlin's (2010) contribution of concentric circles of containment, which built on early psychodynamic concepts of the caregiver/maternal presence digesting distress and transforming these into manageable feelings supporting emotional growth (see, e.g., Bion, 1962; Winnicott 1965). School can act as a holding environment where, for the students to feel safe, adult figures themselves must feel safe and require leadership and guidance to feel safe within uncertainty (Hyman, 2012; McLoughlin, 2010).

6.3.6 Navigating a Unique and Unpredictable Event

In the current study, participants from various professional groups emphasised the distinctiveness of each postvention event while acknowledging the limitations of training in adequately preparing them for the unpredictable emotional impact. While training was appreciated, narratives indicated that it was insufficient for equipping them with the lived realities of such incidents. This aligns with the implications of several studies which advocate for the training of professionals in preparation for such events (Brennan, 2021; Debski et al., 2007; Cox et al., 2016). At the same time, this study also suggests that training can also fall short, or be insufficient for, the multiple layers of postvention, i.e., in the sense that "nothing can prepare you for such news". Frameworks and guidelines were also recognised as beneficial, although they cannot account for the unknown, particularly in navigating context-specific factors such as family wishes, media impact, and relationships in school (Cox et al., 2016). The educational psychologist participant group emphasised the value of experience in role in responding to student suicide, reinforcing the empirical findings reporting the benefits of this (e.g., Brennan, 2021). Despite the challenges, the shared experiences in navigating postvention indicated that it was effectively managed and collaborative.

6.4 Strengths, Limitations and Future Research

The current study provided rich and in-depth understanding of professional perspectives working in three distinct schools following a student suicide and involved in postvention. The topic of suicide is sensitive and hard to access therefore there is limited research with regards to school responses; the chosen method supported nuanced understanding (Braun & Clarke, 2023). Reflexivity throughout the study also provided enhanced trustworthiness and transparency, notably in establishing the lens through which the study was approached as a practitioner research enquiry (Heikkinen et al., 2016).

For a time-limited doctoral research project, the participant recruitment, data collection and analysis, produced practically relevant findings – and this is a relative strength. Through reflecting lived experiences of school professionals, the study also increases its applicability to educational psychology practice, school practice and policy (Heikkinnen et al. 2016). Although this study was not a form of action research, participants reflecting on their experiences provided an opportunity for them to make sense of their own thoughts. As a practitioner researcher, I also reflected with participants in interviews, in real time, through summary and prompts which may have supported their understanding.

This study also builds on (the very limited) prior research exploring educational psychologists' perspectives of postvention in the UK (Brennan, 2021), by conducting empirical research exploring other professional perspectives. No study previously has considered the uniqueness of context in their research design and gathered perspectives of professionals working together in specific school settings (i.e., as a form of perspective triangulation – Patton, 1999). Perspective triangulation was realised in this study by gathering educational psychologists, senior leadership team members and school staff perspectives. It was also realised within the school staff participant group, as roles and responsibilities of participants varied which ensured the complexities of dynamics within schools was represented within the sample. Doing so helpfully illuminated congruences and/or incongruences across the system to further shape educational psychology practice and develop the understanding of postvention in schools. This study also employed triangulation of sources through collecting both written responses (educational psychologists and senior leadership team members) and interview responses (school staff). This can enhance study quality, not by yielding directly comparable material but by affording further insight into how different inquiries (in-person interviews, or online questionnaires with different participant groups) captured different angles, sensitive to the nuances in the real world (Patton, 1999).

These strengths notwithstanding, the current study had limitations, especially regarding the use of online questionnaires for educational psychologist and senior leadership team member groups. Informal feedback from some educational psychologist participants indicated that they would have benefited from more space to provide longer answers. Additionally, some "why?" questions or further exploration of participant responses was not possible, which would have provided a more in-depth understanding of some accounts. For example, the open-ended questionnaire format used with the senior leadership team members may not have allowed for the same depth of reflection, and prompts or follow-up questions may have further supported the co-construction of meaning with a researcher, as was possible in interviews (Dunwoodie et al., 2023).

Another limitation was the differences between roles, and it may be that the school staff group was too broad. Although the involvement of this group provided a more balanced, 'system' perspective, it may not represent the views of specific school staff roles. For example, the responsibility of a class teacher differs (considerably) from that of a school counsellor and in tailoring support, gathering a more in-depth understanding may be helpful. Similarly, roles with the senior leadership team varied and the accounts described a significant difference between the headteacher's responsibilities and the rest of the team.Consequently, future research may benefit from solely focusing on the school staff group of a school to gather more in-depth perspective of the different roles within a school or choose to further explore a particular group within the school staff group, such as 'pastoral staff', as they may play a more active role in postvention. Future research may also consider to specifically explore headteacher perspectives, as they were identified to play a key role in initiating support. Similarly, student voices are missing from this study and gathering their insight of work in the aftermath of a student suicide would be helpful to shape educational psychology and school practice further.

In line with limitations related to the sample, the third research sub-question which explored the extent to which there is congruence across the school system regarding the support offered and received was difficult to answer despite efforts to recruit varied roles. Considering the small sample size and certain key stakeholders such as parents or pupils not being included the findings with regards to systemic coherence should be interpreted with this in mind as it may not reflect broader systemic dynamics.

In addition, limitations exist regarding the limited contextual information surrounding the young person, the suicide, and the school itself. For example, exploring the time of year, how the news was shared, and investigating media involvement may further support the understanding of postvention perspectives. Case study methodologies may have allowed for further interpretation and construction of meaning (Crowe et al., 2011). For instance, triangulating documentation, meetings, and demographic information may enhance the interpretation of findings. In the current study, triangulating documentation may have further developed the systemic understanding of critical incidents involving death by suicide in UK schools, which would inform both school and educational psychology practices. Therefore, findings indicated relevant areas for further research, namely, the influence of contextual and relational factors that may require increased triangulation to understand the cascading effect of postvention for which comparative case study methodology may be appropriate (Priya, 2021). There are ethical challenges concerning confidentiality and anonymity that may hinder conducting this type of research. Yet, focus groups and reflective spaces discussing themes developed from this study could provide an opportunity to delve deeper into the findings and develop a more in-depth critical understanding of their views, representing a potential future direction for research to consider (Sim & Waterfield, 2019). This would enhance the co-construction of meaning, and likely enhance applicability to practice (Kitzinger, 1995). In

addition, alternative qualitative methods, beyond interviews, such as ethnography, would be suitable to attend directly to relationships and working practices in schools, which would further support understanding of postvention work (Brewer, 1994). This being so, there are ethical complexities related to this area of research, such as the unpredictability of the event, the vulnerability of participants in crisis, and ensuring ongoing consent, which would complicate the application of the methods in community settings (Reimann, 2005).

Finally, an implication for future research may be that, considering the gaps identified in postvention research in the UK, a Delphi study, which includes a review of relevant grey literature in the UK, would be a helpful first step to gaining insight on the guidelines and protocols used in postvention. For example, Public Health England previously published guidance for local services, which may still be helpful, although not specific to schools (Public Health England, 2016).

6.5 Implication for Practice

The implication for practice described below are not for means to dictate practice but to inform ways of working and suggest possible avenues for doing so. I have embedded some quotes from participants to illustrate the experiences of postvention work.

6.5.1 Implications for Educational Psychologists and Local Authorities

This research project highlighted important considerations for educational psychology practice as well as the local authorities within which they perform their statutory duty and respond to critical incidents (see Figures 5 and 6).

Figure 5

Implications at a Service Level

Service level considerations in Postvention
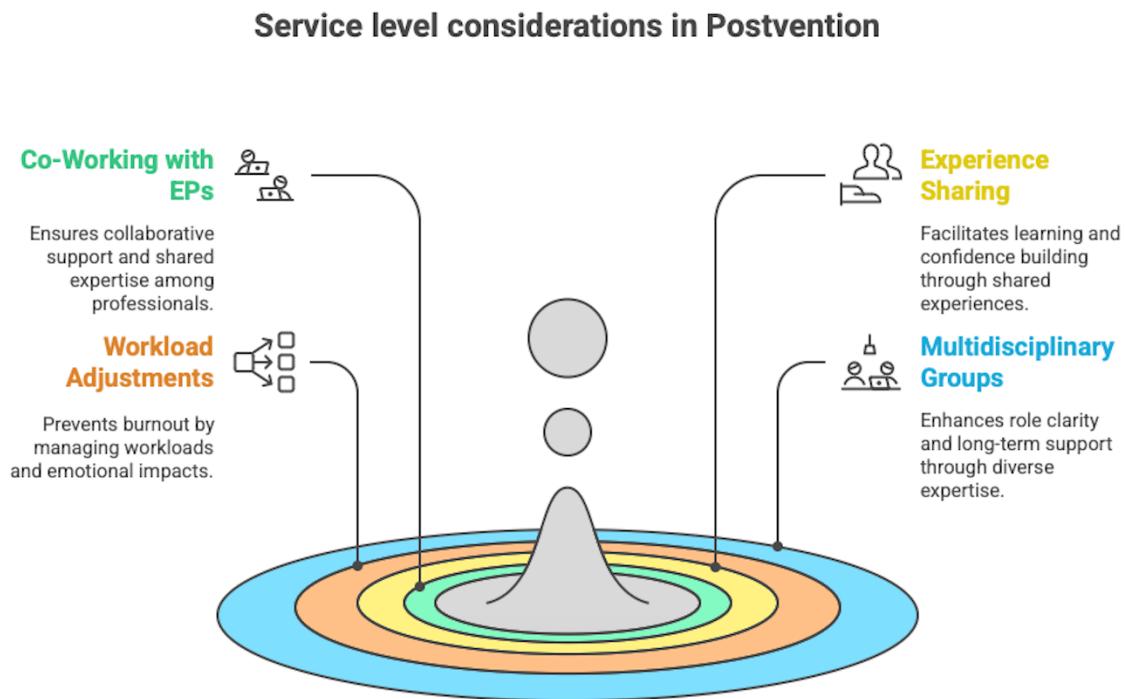
At a service level, the study findings suggested:

- The importance of ensuring co-working with another educational psychologist, supervisory support specific to postvention and spaces to debrief.

    o As per, "Support from colleagues was invaluable" (Thomas, Educational psychologist, Braybourne School).

- Experience influences confidence and knowledge about postvention, suggesting space for sensitive sharing of practice to learn from experience may be beneficial.

- Considerations for adjusted workload for professionals involved in postvention to prevent burnout and allow for space to process emotional impact may be helpful.

    o As per, "In hindsight perhaps I should have had a reduced workload the following week" (Sienna, Educational psychologist, Braybourne School).

- Developing working groups to support the development of a multidisciplinary approach to postvention, whilst ensuring role clarity, may be beneficial, especially

in informing how support is shaped long-term in supporting the evidenced delayed impact.

Figure 6

Implications for Educational Psychologists

Postvention considerations for Educational Psychologists
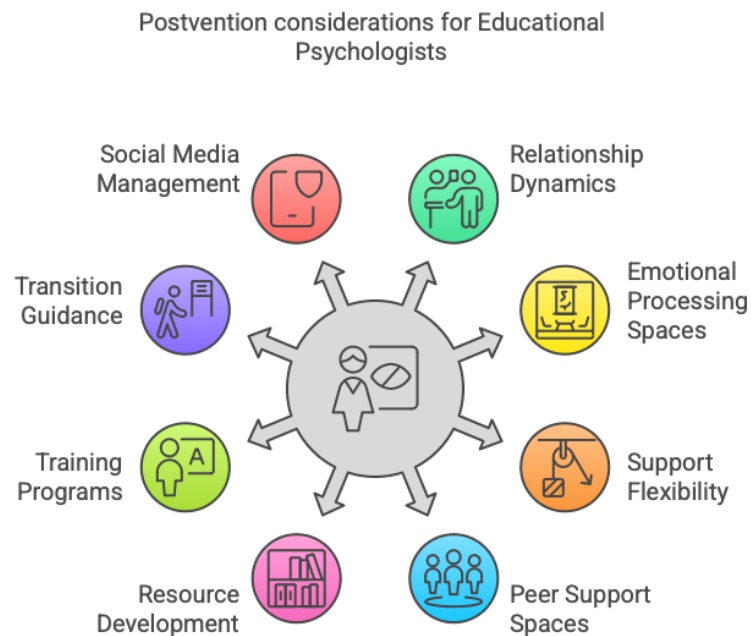
The current study also highlighted aspects of postvention for educational psychologists be mindful of (see Figure 6):

- The influences of their relationships with the school and staff may lead to variability in understanding their role and/or accessing their support.
  - As per, "It's not just someone new... you've been comfortable to go and just sort of talk about whatever you wanted to, which was great." (Olivia, School staff, Braybourne School)

- The value of separate spaces for individuals to pause and process emotions separate to their daily routine may be important to consider.

- It may be helpful to further explore ways in which to contract support with flexibility, while considering how the scope (boundaries) of support may be defined and communicated across the school system.

- Considerations for protected peer/role-relevant spaces for school professionals to come together following a student suicide may be helpful.

  - As per, "I think something that would have been really beneficial would be to have an opportunity for certain members of staff who felt particularly affected by it to actually meet up, say in the staff room and have that as a safe space for an hour" (Susan, School staff, Alderwick School).

- Specific resources and training are beneficial in empowering staff and educational psychologists in postvention practice. Therefore, further developing specific resources related to the complexities of suicide may support professionals in postvention.

- Further training on postvention may be helpful for educational psychologists, including for trainee educational psychologists.

- School staff may benefit from guidance with regards to students transitioning back to school and how to navigate the flexibility of routine such as 'attendance'.

- Further guidance around social media management following a student suicide may be helpful, as suggested by findings in Bell & Westoby (2025).

6.5.2 Implications for Schools and their Professionals

Figure 7

Implications for School Professionals

Considerations for school professionals in Postvention

Transparency in Leadership
Encourages open communication and trust within the school community.

Consider Staff and Student Voices
Ensures memorial activities are inclusive and respectful.

Increase Communication
Helps staff feel safe and clear about their roles.

Awareness of Vulnerability
Promotes self-care and awareness of emotional challenges.

The study also suggested implications for different professionals within the school system (see Figure 7):

- The emotional impact was suggested to be wide and varied, therefore reinforcing previous findings whereby persons closest to the student who died are not necessarily the most affected.

- Transparency and compassion in leadership were valued, as well as considerations of school staff and student voices in the memorial activities:
  - as per, "I think that there was a certain amount of honesty from the senior leadership team about what happened. So, I think students felt included in what had happened" – Helena, School staff, Alderwick School.

- Consideration of the increased communication and clarity in roles and expectations may support school staff in feeling safe:
  - as in "I don't know where that service then ends or stops, I suppose. So, I don't think that's clear to me. And whether how much more we could have asked, maybe if that makes sense" – Sophie, School staff, Alderwick School.

- Within a school, considering factors which influence accessing/knowing about postvention such as one's experience in role as a staff member, familiarity with the setting, and/or responsibility in role may be helpful.

- In the school system, awareness of vulnerability and challenges with prioritising self-care may also be helpful to hold in mind:

    o as per "it just worked much better for me just to disassociate and just completely just go into like masking essentially" – Grace, School staff, Braybourne School.

- The importance of spaces to process emotions was shared, one school provided an example of remaining open during holidays to support students and the community.

6.6 Dissemination

This research will be disseminated in a manner that ensures the work makes a meaningful contribution to practice. Study participants will receive a brief summary of the findings (see Appendix S). The study will also be disseminated with practitioners, professional networks and communities through presentations at appropriate professional forums, such as within Educational Psychology Services and the annual BPS Educational Psychology conference.

To support dissemination beyond this, my abstract was accepted for a presentation at the International Association of Suicide Prevention World Conference to disseminate findings via a poster presentation to researchers and professionals in the field. I am also submitting a poster for the Tavistock and Portman M4 course (Professional doctorate inn child, community and educational psychology) research day, sharing findings with other trainees and tutors of course community. Having gained some experience of writing for publication during my doctoral studies by co-authoring a brief commentary on practitioner research in child mental

health (Archard et al., 2025), I also intend to take active steps to publish one or two journal articles based on the thesis in peer reviewed educational psychology or school mental health journals.

6.7 Chapter Conclusion

This chapter examined the findings in relation to the existing literature, grounding them within the study's strengths and limitations to highlight potential implications for future research and practice. The key contributions of this study included emphasising the relational and contextual intricacies of postvention in schools, acknowledging the emotional impact on professionals, and stressing the significance of flexible yet clearly defined support. These findings led to implications for both future research and practice, particularly emphasising the need for structured reflective spaces, knowledge-sharing within EPSs, and clearer role definitions in multidisciplinary postvention responses. At the end of the chapter, a plan for disseminating the work was presented. The next chapter concludes the thesis by offering personal reflections on the experiences gained from conducting this study and the lessons learned which may also provide insight to those seeking to further research in this area.

7. Personal journey

Throughout the process of this research project, I deepened my understanding of the educational psychologist's role, enhanced my sensitivity to systemic theory, and expanded my awareness of the impact of trauma in secondary schools. I began this journey in a relatively 'naïve' position as a trainee developing my skills, responsibilities, and general practice. While I now possess more experience and knowledge in the area, I have not held the same level of responsibility for support or in the coordination of help as many of the participants in this study, particularly the educational psychologists. My experience with postvention in schools was also limited to one incident. I was not directly involved with this but rather witnessed it through my work with individuals within the school system. Engaging with the participants in this research and hearing or reading their accounts provided me with a deeper understanding of the complexities surrounding suicide and suicide postvention.

I reflected on the possible benefits of listening to their accounts from a 'naïve' position, as this fostered curiosity and allowed me to hold space without jumping to problem-solving (Archard & O'Reilly, 2024). This experience also shifted my assumptions that postvention is best served by a protocol-driven process, leading me to understand school suicides as unique events that need flexible, individually tailored responses. An important outcome of the current study is my desire to become involved in professional working groups or initiatives focused on postvention to actively engage with my role as a practitioner researcher. If such spaces do not yet exist within my locality, there may be opportunities to establish collaborative networks to develop thinking around best practices. This research is, for me, a first step toward an ongoing commitment to critically considering educational psychology's role in supporting schools through crises. Future research should, I believe, focus on 'practice-minded' empirical studies

grounded in appreciation that interpersonal dynamics shape the understanding of the nature and delivery of support, reflecting what professionals actually think, do, and experience.

Now at the end of this work, I initially approached the data with a sense of urgency, imagining a linear process and striving for coherence and clarity. I realised that a lengthy (and painful) process was required to immerse myself in the data and revisit narratives (Braun & Clarke, 2022). This helped me developed my research skills and my ability to confront uncertainty. There were moments when I felt I knew nothing, and some degree of resilience was necessary to continue revisiting the analysis. Time pressure forced me to move on, making me aware of the time one could, conceivably, choose to spend with data. Sitting with the unknown and uncertainty is a skill that has further shaped me as a practitioner.

In reviewing the feedback from my supervisor around my written accounts lacking boldness (or even implicitly conveyed a sense of my feeling censored), I reflected on the challenges I faced in taking a critical stance in an area where professionals assume significant emotional and ethical responsibilities while operating within systemic barriers. This further highlighted to me the value of reflexivity and critical thinking in practice to deepen understanding of complex systemic dynamics (Olmos-Vega et al., 2022).

As someone who finds it difficult to find their words and articulate their thoughts, I noted feelings of wanting to make a meaningful contribution and worries of losing meaning from participant voices in the process of analysis and writing up. There was a tension between wanting my voice as a 'naïve' practitioner-researcher to be quiet and my voice as a helping professional wanting participant voices to be loud. To genuinely support others, one must consider the meaning of their actions and avoid getting trapped within protocols and

frameworks, which is something I learned throughout this process. To me, this indicates that, in the context of postvention, systemic sensibility—awareness of and sensitivity to interconnected systems—is vital for navigating challenges existing between critically reflecting outside bureaucratic processes, while upholding responsibilities to support others, and being a part of an organisation.

The nature of reflexive qualitative research is somewhat iterative and slow paced, and knowledge is constructed from prolonged engagement with complex material which captures realities and contradictions rather than adhering to an imposed linear structure. In relation to this, I would say I discerned a parallel process between my work and educational psychology practice in crisis responding quickly to a trauma in a school, whereby following protocols and framework rigidity may be insufficient and critical reflection alone may hinder action. Therefore, while protocols anchor professionals in undertaking complex, emotionally taxing work, making it more manageable, they may also limit flexibility in thinking and inadvertently "authorise" certain ways of thinking. In this context, I would argue that it is essential to consider how rigidity might shape the role of the educational psychologist as a scientist-practitioner bound to neutrality and objective professional authority, which may affect the balance necessary for "showing up as people" in an emotionally charged context.

Finally, the emotional impact of the current study required careful self-care and supervision. Navigating narratives describing grief, personal and professional experiences was challenging during interviews and when revisiting the data. Reflexivity regarding my past experiences was also difficult, as it confronted me with topics I would otherwise choose to avoid. Participant accounts also highlighted the pace at which we work within systems and the

challenges in providing support, which was difficult to hear about as someone nearing qualification.

A final reflection in conducting this research is in part implications for future researchers wanting to conduct studies in this sensitive area. I found myself in a 'robotic mode' at times in order to manage both the workload and emotional difficulties which came with this research. Pauses for reflection, allowing self-awareness and self-care were essential, alongside thorough supervision and a support network. Ahead of this project, I had also developed self-knowledge, emotional readiness, and confidence in how to respond to possible distressing disclosures. Despite these foundations, the emotional vulnerability experienced is not something one can prepare for which was mirrored in the findings and highlights the importance of external holding structures.

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Appendices

Appendix A
Non-selected papers

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Appendix B
Critical Appraisal table CASP

CASP-Qualitative checklist	IPA	Phenomenological	IPA	Phenomenological	An autoethnography
RAG rating	high	high	high	high	high
Question	(Finegan, 2023) School organisational trauma during student suicide crisis	Hopple, A. M., & Ball, C. R. (2023). Collaboration Is Key: School Psychologists' Experience in Suicide Intervention.	Severn, 2024) An Interpretative Phenomenological Analysis Exploration of How High School Principals in the Rocky Mountain Region Experience and Make Sense of Responding to a Student Death by Suicide.	(Hall, 2019) School Suicide Postvention: A Phenomenological Study of Perceptions of School Mental Health Professionals	(Farragh, 2019) Teacher support following death by suicide: An autoethnography of school counselor experiences within a rural school community
Was there a clear statement of the aims of the research?	Yes - these are stated	Yes - these are stated	Yes, the study clearly aimed to explore how high school principals in the Rocky Mountain region experience and interpret their responses to student suicides. This is evident from the title and the abstract, which outlines the focus on principals' lived	Yes, the study clearly aimed to explore the lived experiences of school mental health professionals— such as school psychologists, counsellors, and social workers—who have provided postvention services following a student suicide. The research sought to understand	Yes, the study clearly aimed to explore the experiences of school counsellors in rural communities following a student suicide, focusing on the support provided to teachers during such crises. This aim is evident from the title and the abstract,

			experiences and meaning-making processes following such tragic events.	their perceptions and experiences to inform future postvention practices.	which outlines the focus on the counsellor's perspective and the support dynamics within the school community.
Is a qualitative methodology appropriate?	Yes - it looks at school counsellors' experiences	Yes - phenomenological approach: Collecting and exploring the descriptions of others about a particular experience can facilitate understanding of the essence of that experience	Yes, a qualitative methodology, specifically Interpretative Phenomenological Analysis (IPA), is appropriate for this study. PA is well-suited for exploring the depth and complexity of individuals' lived experiences, particularly in emotionally charged contexts like responding to student suicides. The choice of IPA aligns with the study's aim to understand the personal and professional impacts on principals.	Yes, a qualitative methodology, specifically phenomenological research, is appropriate for this study. Phenomenology is well-suited for exploring individuals' lived experiences and perceptions, aligning with the study's objective to delve into the personal and professional experiences of school mental health professionals in the context of postvention.	Yes, a qualitative methodology, specifically autoethnography, is appropriate for this study. Autoethnography allows for an in-depth, reflective exploration of personal experiences within a cultural context, aligning with the study's objective to delve into the counselor's lived experiences and the broader school environment.
Was the research design appropriate to	Yes - individual experiences used to identify	yes, as the interest is experiences of individuals	Yes, the research design was appropriate. The study	Yes, the research design was appropriate. The study	Yes, the research design was appropriate. Utilizing

address the aims of the research?	themes and develop further into possible group experiences identified	to draw themes from their accounts and identify frequency of themes which arise	involved conducting in-depth interviews with six high school principals, allowing for rich, detailed accounts of their experiences. This design facilitated the identification of themes related to their emotional responses, professional responsibilities, and meaning-making processes.	employed semi-structured interviews with school mental health professionals who had direct experience with student suicide postvention. This design facilitated in-depth exploration of participants' experiences, allowing for the emergence of rich, detailed data pertinent to the research aims.	autoethnography enabled the researcher to provide a rich, nuanced account of their experiences, offering insights into the emotional and professional challenges faced by school counsellors in rural settings after a student suicide.
Was the recruitment strategy appropriate to the aims of the research?	Yes - recruited specifically SC who had experienced such events. Inclusion/Exclusion criteria set out	Yes - purposive sampling to get SP with experience of suicide intervention specifically in school setting.	Yes, the recruitment strategy was appropriate. Participants were selected based on their direct experience with student suicides in their schools, ensuring relevance to the research aims. The purposive sampling ensured that the study captured diverse perspectives within the	Yes, the recruitment strategy was appropriate. Participants were selected based on specific criteria: they had to be school mental health professionals who had worked in a school that experienced a student suicide within the past five years (but not within the past six months) and had directly participated in postvention services. This	As an autoethnographic study, the primary data source is the researcher's own experiences. Therefore, traditional recruitment strategies were not applicable. However, the study may have included interactions with other educators or stakeholders to contextualize the

			specific context of the Rocky Mountain region.	purposive sampling ensured that the participants had relevant and recent experiences to share.	experiences, though specific details on this are not provided.
Was the data collected in a way that addressed the research issue?	Yes, through interviews	Yes, through semi-structured interviews which was 14 open-ended questions. These were reviewed by expert.	Yes, data collection through semi-structured interviews allowed participants to share their experiences in their own words, providing insights into their emotional and professional journeys. This method aligns with IPA's emphasis on understanding how individuals make sense of significant life events.	Yes, data collection through semi-structured interviews allowed participants to share their experiences in their own words, providing insights into their perceptions and experiences with postvention. This method aligns with phenomenological research's emphasis on understanding individuals' lived experiences.	Yes, data collection through reflective journaling and narrative accounts allowed the researcher to capture the complexities of their experiences and the support mechanisms in place for teachers. This method aligns with the autoethnographic approach, facilitating a deep exploration of the research issue.
Has the relationship between researcher and participants been adequately considered?	It states there was no conflict of interest and there is brief account of author's background and experiences. However, no reflexivity	No, the research does not discuss their positioning or bias or assumptions in theme interpretation however they had member checking	The study does not provide enough detailed information on reflexivity or how the researcher's background may have influenced the research process. While	The study does not provide detailed information on reflexivity or how the researcher's background may have influenced the research process. While phenomenological research	In autoethnography, the researcher is both the subject and the analyst. The study acknowledges this dual role, with the researcher engaging in

	of researcher's position. Lacks transparency for the groupings of themes	and peer review checking for biases/mistakes	IPA acknowledges the researcher's interpretative role, explicit discussion of reflexivity would strengthen the study's credibility. detailed	acknowledges the researcher's interpretative role, explicit discussion of reflexivity would strengthen the study's credibility.	reflexivity to examine their biases, emotions, and positionality within the school community. This consideration enhances the credibility and authenticity of the findings.
Have ethical issues been taken into consideration?	Brief mention of informed consent sought at start of interview, limit consideration for other aspects such as power dynamics, cultural differences, right to withdraw	There are procedural ethical considerations discussed such as consent, ethical approval board. No other mentions of ethical considerations. No conflict of interests declared.	The dissertation does not specify the ethical procedures followed, such as informed consent or ethical approval. Given the sensitive nature of the topic, addressing ethical considerations is crucial. Explicit mention of ethical safeguards would enhance the study's trustworthiness.	The dissertation does not specify the ethical procedures followed, such as informed consent or ethical approval. Given the sensitive nature of the topic, addressing ethical considerations is crucial. Explicit mention of ethical safeguards would enhance the study's trustworthiness.	The study discusses ethical considerations pertinent to autoethnographic research, such as maintaining confidentiality, obtaining consent when referencing others, and handling sensitive information with care. Given the personal and potentially identifiable nature of the narratives, ethical diligence is crucial and appears to have been upheld.

Was the data analysis sufficiently rigorous?	Yes, there is depth with data engagement, use of themes and subthemes, some transparency in analytical process of PETS but not GETS, Interpretative Layer linking to theory, but no Reflexivity to check for biases and assumptions	Yes, there is description of themes with example quotes, and evidence interpretation. Limited transparency in step-by-step process of each theme.	Yes, the data analysis appears rigorous. The study identified multiple themes and subthemes that capture the complexity of principals' experiences. The use of IPA facilitated a nuanced understanding of how participants made sense of their experiences, although more detail on the analytical process would be beneficial.	Yes, the data analysis appears rigorous. The study utilized Moustakas' (1994) phenomenological data analysis method, which involves identifying significant statements, clustering them into themes, and synthesizing the meanings. This systematic approach facilitated a deep understanding of participants' experiences.	Yes, the data analysis involved thematic exploration of the narratives, identifying patterns and insights related to teacher support and the counselor's role. The researcher employed reflexive practices to ensure a thorough and critical examination of the data, contributing to the study's rigor.
Is there a clear statement of findings?	Yes - the study states the themes clearly	Yes, the findings are clear under different subheading, including implications for practice and limitations to consider	Yes, the findings are clearly presented, with themes such as the emotional toll of leadership during crises, the influence of personal values and cultural norms, and the evolution of professional identity. These findings provide valuable insights into the	Yes, the findings are clearly presented, with themes such as the importance of timing in postvention, the need for community support, the significance of an updated crisis plan, the negative impact on school staff, and addressing student emotions like pain and anger. These findings	Yes, the study presents clear findings, highlighting themes such as the emotional toll on educators, the importance of timely and empathetic support, and the challenges of navigating postvention in rural school settings. These findings offer valuable perspectives on the

			multifaceted impact of student suicides on school principals.	provide valuable insights into the multifaceted impact of student suicides on school mental health professionals.	counselor's experiences and the support dynamics within the school community.
How valuable is the research?	Very valuable in understanding trauma in organisation and support made available by school counsellors as well as the support they require (their experience of providing this support)	Valuable, first to explore experience of collaboration for SPs following suicide. 11 is a good size for IPA.	The research is highly valuable, offering in-depth understanding of the challenges faced by school principals in the aftermath of student suicides. It highlights the need for support systems and professional development to equip school leaders in handling such crises. The study contributes to the limited literature on this topic and has practical implications for educational policy and mental health support in schools.	The research is highly valuable, offering in-depth understanding of the challenges faced by school mental health professionals in the aftermath of student suicides. It highlights the need for support systems, training, and updated crisis plans to equip school staff in handling such crises. The study contributes to the limited literature on this topic and has practical implications for educational policy and mental health support in schools.	The research is highly valuable, providing an intimate look into the counselor's experiences and shedding light on the support needs of teachers following a student suicide. It contributes to the limited literature on postvention in rural schools and offers practical implications for enhancing support systems and training for educators.

Cultural ly responsi ve practice demonst rated?	No - no discussions of cultural differences or consideratio ns throughout	No - no discussions of cultural differences or considerati ons throughout	The study touches on cultural factors, such as how religion and community norms influence perceptions of mental health and suicide. Howe ver, it does not deeply explore how cultural responsiveness was integrated into the research process or analysis. A more thorough examination of cultural considerations would enhance the study's applicability across diverse contexts.	The study does not explicitly address culturally responsive practices or how cultural factors may influence postvention experiences. Inc orporating discussions on cultural responsiveness would enhance the study's applicability across diverse contexts and populations.	The study reflects on the cultural context of rural communities, acknowledgin g how cultural norms and values influence the response to student suicide and the support provided to teachers. By situating the counselor's experiences within this cultural framework, the research demonstrates an awareness of the importance of culturally responsive practices.

Critical Appraisal Table CASP Cohort Studies

CASP - Cohort Studies checkli st	**Case-control study**	**Quasi-experimental design/retrospective cohort study**	**Quant - Prospective cohort study**
RAG rating	**low**	**Mod**	**Mod**

Question	(Hazell & Lewin, 1993) An evaluation of postvention following adolescent suicide	Poijula, S., Wahlberg, K. E., & Dyregrov, A. (2001). Adolescent suicide and suicide contagion in three secondary schools.	(Cha et al., 2018) Five months follow-up study of school-based crisis intervention for Korean high school students who experienced a peer suicide?
Did the study address a clearly focused issue?	Yes, focused issue of two schools which experienced the death of suicide by a student	Yes, In this study the schools crisis interventions following different suicides are described and compared with the post stress interventions described by Dyregrov (1991). The suicide contagion hypothesis was also addressed with data from a four-year follow-up period. Our hypotheses were that: 1) after a suicide of a student there will be an increased risk of other suicides at the school, and 2) appropriate intervention will reduce the risk of suicide contagion.	Yes, the study is focused on assessing the effectiveness of a crisis intervention over a five-month period for high school students who experienced a peer suicide. This question is both defined and relevant to understanding postvention approaches in schools and its impact on PTSD symptoms and gender differences in this. The clarity of the issue aligns well with the goals of school-based postvention practices.
Was the cohort recruited in an acceptable way?	Selection of participants for counselling groups was done by staff who identified the friends of student who died. Not everyone was therefore include who should have been based on evidence which shows proximity to the decease is not the only factor to trigger distress. The cohort was selected to take part in counselling, students from selected years were asked to fill in a questionnaire. Unsure how these were selected. No consent was sought from parents for	Yes, these three schools were all located in small rural communities. Geographically they were not neighbouring communities. This cluster of unrelated adolescent suicides was the starting point for this study. Participants in this study were the students of the three schools and homeroom classmates of the suicide victims. All together there were 270 students in school A, 346 in school B and 585 students in school C.	The study collects baseline and follow-up data on mental health outcomes among students who received postvention, 956 out of 1032 were included. Signed agreement from parents.

	counselling due to urgency of problem, this is an important ethical consideration. However, consent was sought for questionnaires - 60 percent of possible sample participated. Counselled students were matched with non-counselled students - 63 were identified as counselled group in questionnaire		
Was the exposure accurately measured to minimise bias?	2 questionnaires had been used in a previous study, Risk behaviour Questionnaire and the Child Behaviour Checklist are referenced. Limited detail re standardisation and constructions of measurements in article. Although a description of their content is provided. Unsure whether these have been validated. They were all using same questionnaires.	Yes, the study monitored the incidence of suicides and used historical data of interventions (First talk through and debriefs at a later date collected) to analyse contagion effects.	The intervention provided was described and baseline measures were provided to students. These are detailed in the study and referenced. Cronbach's alpha and test -retest reliability was provided
Was the outcome accurately measured to minimise bias?	The same measures were used in both groups. Data was anonymous unless risk identified and then number was provided to deputy principal	The outcome (suicides) was measured through reports from school psychologists over a four-year period, in the different schools taking into account timing of debriefs if any were given.	Same measures were used for all students, anonymous, demographics are provided. Several measure to inform different aspect of mental health increase the robustness of findings
Have the authors identified all important confounding	No discussion of confounding factors such as access to other support for none-counselled group or other support for counselled group	No, Confounding factors in this context might include pre-existing mental health conditions, support systems, or socio-demographic factors which were not identified.	Confounding factors in this context might include pre-existing mental health conditions, support systems, or socio-demographic factors which were not identified.

factors ?			
Have they taken account of the confounding factors in the design and/or analysis?	N/a	n/a	n/a
Was the follow up of subjects complete enough?	No discussion of attrition	Over 4 years, sufficiently long.	No discussion of attrition
Was the follow up of subjects long enough?	Long period of follow up meant additional confounding factors such as time may have had a more significant impact. Acknowledged by the authors	Over 4 years, sufficiently long.	A five-month period provides a reasonable timeframe for observing immediate and mid-term effects, though longer follow-ups might capture sustained or delayed impacts of the intervention
What are the results of this study?	No difference between counselled and non-counselled. Incorrect identification of student requiring counselling is likely based on findings from questionnaire re proximity to deceased of those uncounselled. Self-reports might inflate or mask proximity.	The contagion hypothesis was supported as there was a much higher probability found when student suicide occurred for other suicides and the methods of suicide was also found to be imitated. Time was found to be 1 to 4 months between first	The results showed decrease in symptoms and differences between girls and boys.

		suicide and the next. Second hypothesis was also supported as when FTT and Debrief by mental health professional took place this suggested to inhibit further suicide. When incomplete interventions took place further suicides occurred. Preliminary findings of this study show that early crisis intervention and use of first talk-throughs and psychological debriefing do not cause suicide contagion, but lack of intervention may do so.	
How precise are the results?	No details given for Confidence intervals given	Some level of data analysis provided not enough information for the reader about Poisson distribution and assumptions required and reliability etc.	Precise with the level of statistical information provided.
Do you believe the results?	Somewhat re the findings of time elapsed.	Somewhat although this is context specific and the lack of confounding factors lead to difficulties in interpretation, also the risk with secondary data to consider such as data quality and bias of initial collection. The discussion and interpretation of findings is very brief.	Somewhat due to the lack of control for confounding factors although this is typical with qualitative data or further descriptive data this may have been accounted for some more.
Can the results be applied to local population?	No due to limited information about participant demographic and school culture/system	This has relevance to geographical location careful considerations for generalisation, further information of intervention would provide more robust findings.	The results have direct relevance to Korean high school students, but the cultural and educational context may differ elsewhere. Adaptation may be needed before generalizing to different populations.

Do the results of this study fit with other available evidence?	unsure	unsure	unsure
What are the implications of this study for practice?	Highlights that staff may not have enough information to select who should have counselling, that further information about postvention aspects is required	Implications with regards to the importance of intervention to be carefully considered and further developing the evidence base.	Informs the process of school crisis intervention in Korea and examine its effectiveness. Furthermore, it is also important that the findings of this study are used as the basis for devising policies to support schools in the event of a crisis such as student suicides.
Culturally responsive practice	No	No	Yes - discusses the differences in Korean school systems and culture in accessing interventions in crises such as these

Appendix C
Critical appraisal table MMAT

MMAT	Mixed methods	Mixed methods	Quant	Quant	Mixed method
RAG Rating	**low**	**high**	**mod**	**high**	**high**
Questions/Title	**(Rickwood et al., 2018) The need for and acceptance of a suicide postvention support service for Australian secondary schools**	**(Mirick & Berkowitz, 2023) School-based postvention services: exploring the perspective of students**	**Debski, J., Spadafore, C. D., Jacob, S., Poole, D. A., & Hixson, M. D. (2007). Suicide intervention: Training, roles, and knowledge of school psychologists. Psychology in the Schools, 44 (2), 157-170**	**(O'Neill et al., 2020) Suicide postvention practices in schools: School psychologists' experiences, training, and knowledge.**	**Brennan (2021)**
Are there clear research questions?	No but there are 2 aims of the study outlined	No but aim is stated - exploring a) student reactions self-report b)school responses c)acceptability and helpfulness of responses	Yes these are outlined: : (1) What are the roles of school psychology practitioners in the areas of suicide prevention and postvention, and perceived barriers to involvement? (2) What types of training have they received in these areas?	Aims for the research set out: a) SP's training, experiences and access to postvention protocols with/without context of suicide contagion. B) Perceived knowledge of suicide postvention and contagion. C) confidence and preparedness to conduct postvention	Yes

			(3) How prepared do they perceive themselves to be to handle these roles? and (4) How knowledgeable are they of the current literature on suicide prevention and response?	and mitigate suicide contagion. (Accounting for frequency of training, years worked, crisis team membership, and age of student on caseload. Hypothesis provided.	
Do the collected data allow for addressing the research question(s)?	Yes - each survey addressed one of the aims	Yes, the data collection was done via online survey which is detailed and relevant to the aims of the research.	Yes, the different data collection methods described, aim to answer the research question	Yes, the tools developed were aimed to measure the variable outlined in the aims.	Yes
A. Qualitative Studies					
Is the qualitative approach appropriate to answer the research question?	The three open-ended questions are not commented on in findings and discussion, mention ed in recommend ations and stated these were optional, descriptive	Yes, TA was used to identify participants' recommend ed characteristi cs and qualities of school-based postvention services, relevant to the aim exploring perspectives	n/a	n/a	Yes – grounded theory approach arriving at containmen t in/across schools

	account provided				
Are the qualitative data collection methods adequate to address the research question?	n/a	Yes, open-ended questions	n/a	n/a	Yes interviews, transcription, axial coding to saturation
Are the findings adequately derived from the data?	n/a	Yes, the steps of TA taken are outlined although this is brief. No member checking or peer review to check for assumptions and bias	n/a	n/a	Yes – clear transparent process of construction
Is the interpretation of results sufficiently substantiated by the data?	n/a	Yes - these were supported with quotes from the survey and number of times themes arose in the responses are provided	n/a	n/a	Yes, clear critique and discussion
Is there coherence between qualitative data sources, collection, analysis, and interpretation?	n/a	Yes	n/a	n/a	Coherent throughout

D. Quantitative Descriptive Studies					
Is the sampling strategy relevant to address the research question?	Yes - purposive to find targeted pop	Yes - purposive to find targeted pop	Yes somewhat - random sample of 400 NASP members identified by NASP as school practitioners. Of this sample, 199 (50%) were returned and 184 of these were completed. Because 22 respondents were not employed by school districts (most were working as consultants), 162 surveys (80% female) were usable	the study seeks to gather insights specifically from school psychologists in North Carolina regarding suicide postvention practices. The sampling strategy appears relevant since it targets SPs actively involved in school-based practice aligning with the research question on postvention competency /knowledge self-efficacy.	Yes, reaches EPs across the UK (76)
Is the sample representative of the target population?	Yes somewhat although the researcher acknowledges that not all schools had a school wellbeing coordinator so this went to the next most appropriate person, this is likely to have impact on	Somewhat - descriptive statistics show that half white women and mostly 9th to 12th grade suicide. However more diversity in sexual orientation, relationship with	Yes, somewhat however, it says school psychologists in the research question although it only chose local district employed SPs and also only 40 percent of completed surveys.	sampled 111 school psychologists from North Carolina. The study offers insights into their specific demographic and professional characteristics, but because it's limited to one state, it may not fully represent school	76 – on the smaller side

	responses obtained.	deceased and years since suicide.		psychologists nationwide. This limitation is recognized, and further research across different regions is suggested to confirm the generalizability of findings	
Are the measurements appropriate?	Somewhat-measured the perceived knowledge and satisfaction but not standardised or piloted. Confounding factors not explored?	Built to answer aim by researcher. quality and rigor of measurement tools - non standardised, no description of how the survey was constructed. Although there is a breakdown of what it contains. Confounding factors not explored?	The measures were appropriate to answer research aim, however no standardisation. TYK measure demonstrated rigour as Multiple drafts of the TYK items were evaluated for match to content domains, fidelity to the professional literature, agreement on correctness of responses, and clarity by a group of two school psychology practitioners	The study used the Perceived Postvention Competency Survey, which is specifically designed to assess school psychologists' perceived knowledge and self-efficacy in postvention practices. This tool is suited to the study's goals, aiming to capture both knowledge and confidence levels in handling post-suicide protocols, which suggests appropriate outcome measurement tools. New items from	Use of descriptive analysis appropriate to providing overview of practice in CI

			and three psychology professors until consensus regarding item acceptabilit y was reached. In addition, the two practitioners solicited feedback from their work colleagues on the clarity of instructions and item	questionnaire were reviewed by a psychometric ian, others were drawn from previously established questionnaire s and references are provided. Strong reliability measures for internal consistency are provided.	
Is the risk of nonresponse bias low?	Unsure as there is a synthesis of data presented rather than each particular question.	Not sure - attrition or missed questions not spoken to	Only completed surveys were included (40% of recruitment sample)	all 111 psychologists are presented, allowing for a full analysis of the variables under study. 12.6% attrition initially 127.	No
Is the statistical analysis appropriate to answer the research question?	Yes -it answers the aims of the research and discusses how it answers the hypotheses	Yes - answers all three aims	Descriptive analysis appears to have been used, there is no mention of this however in their methods.	Yes - descriptive analysis was conducted for aims 1 and 2 using SPSS. Third aim was exploring relationship, and hierarchical linear	Yes

					regression is appropriate as entry of variable takes into account confounding variables. Often used to investigate complex or nested data structures and controlling for the influence of different variable sets	
E. Mixed Methods Studies						
Is there an adequate rationale for using a mixed methods design to address the research question?	Not discussed in the article, it seems as though this was mostly quantitative	Yes, as it hopes to also get perspectives on top of descriptive data	n/a	n/a		Yes Yes, the study provides a clear rationale for employing a mixed methods approach. By integrating both quantitative and qualitative data, the research aims to capture the breadth and depth of EPs' experiences and responses to student suicides. This design allows for a comprehen

					sive understanding of the phenomena, combining statistical trends with personal narratives.
Are the different components of the study effectively integrated to answer the research question?	Quant data from survey, qualitative information is spoken to at the end in recommendations therefore not integrated.	These are integrated into one survey and integrated in the discussion	n/a	n/a	The study demonstrates effective integration of its qualitative and quantitative components. Quantitative data offers a broad overview of EPs' responses, while qualitative interviews provide in-depth insights into individual experiences. The convergence of these data sources enhances the validity of the findings and offers a nuanced perspective on the issue.

Are the outputs of the qualitative and quantitative components adequately interpreted?	The quants data is adequately interpreted, although the measures used were not standardised and no piloting was discussed. This is addressed in their limitations however.	These are adequately interpreted with in depth descriptions used in discussion and themes also discussed.	n/a	n/a	Yes, the outputs from both components are thoroughly interpreted. The study discusses how quantitative findings align with qualitative themes, providing a cohesive narrative that supports the research conclusions. This comprehensive interpretation ensures that the data collectively contribute to answering the research question.
Are divergences and inconsistencies between qualitative and	No as qual is not spoken to throughout	No inconsistencies or divergence spoken to.	n/a	n/a	The study acknowledges and explores any divergence

quantitative results adequately addressed?					s between the qualitative and quantitative findings. By examining these inconsistencies, the research offers a deeper understanding of the complexities involved in EPs' responses to student suicides, highlighting areas for further investigation and potential practice improvements.
Do the different components of the study adhere to the quality criteria of each tradition of the methods involved?	Somewhat - the quant design allows for details of both survey and their makeup although limited information was provided with regarding to how these were put together.	Yes, this does adhere to quality criteria of qual with use of TA step by step and implications of these, similarly the descriptive findings are broken down in tables and	n/a	n/a	Yes, the study adheres to the quality standards of both qualitative and quantitative research traditions. Quantitative methods are applied with appropriate statistical rigor, while

	There is no discussion of attrition or possible bias, power dynamics, culturally responsive practice	clear to the reader.			qualitative methods follow established protocols for data collection and thematic analysis. This adherence ensures the credibility and reliability of the study's findings.
Culturally responsive practice	No	Yes, to some extent it discusses vulnerable groups and the need for further research as there is higher rates of suicide in LGBT population. However, there is no mention of other 'GRACES' such as race/religion/SES	No mention of social characteristics in this paper	No considerations for cultural differences in this paper	The study incorporates culturally responsive practices by considering the diverse backgrounds of students and EPs. It emphasizes the importance of cultural sensitivity in critical incident responses, acknowledging how cultural factors influence perceptions and reactions to suicide. This approach

					enhances the relevance and applicability of the research across different cultural contexts.

Appendix D
Critical Appraisal Table DCAT

	Delphi
RAG Rating	**High**
Questions	**(Cox et al., 2016) Development of suicide postvention guidelines for secondary schools: a Delphi Study**
Study Purpose and Justification: Was there a clear and justified rationale for using the Delphi method? Did the researchers explain why other methods were not appropriate for reaching consensus?	Yes - the rationale is outlined in the article; this was the first of its kind to attempt to gather all information on postvention as the lack of evidence called into questions how evidence based these were and provide expert guidance on published guidelines out there to support practice in the aftermath of a suicide.
Panel Selection: Were the selection criteria for expert participants clearly described? Was there a rationale provided for the size and composition of the panel, and were the participants' expertise and experience relevant?	Yes, this is outline in the research they were either experts in the field of postvention or the Delphi method. The experts were identified through the literature search and snowball sampling ensued. Criteria for inclusion set out and they had to fulfil one of four criteria. There was not rationale for the size of the panel however.
Anonymity: Did the study maintain participant anonymity throughout rounds, a core principle of Delphi studies? If anonymity was compromised (e.g., in modified Delphi), was this justified?	Yes anonymous
Rounds of Data Collection: How many rounds were conducted, and was this appropriate for the study's objectives? Did the rounds provide sufficient opportunity for participants to revise their opinions based on feedback?	3 rounds of data collection which allowed to get to set number of items to be agreed to be included. There was opportunity for feedback and statements/questionnaire were amended accordingly.
Feedback: Was feedback between rounds adequate and transparent? Did it include summary statistics or qualitative insights from the group responses?	Yes, these were provided throughout.
Consensus Definition: How was consensus defined (e.g., a specific percentage of agreement)? Was the threshold for consensus appropriate and clearly reported?	Statements rated as essential or important by 80 % of panel members in round one was included in the guidelines. There was also transparency in what ratings had occurred in previous rounds for each statement.

Data Analysis: Was the analysis of the Delphi rounds clearly described and consistent with the consensus definition? Were both qualitative and quantitative data considered?	Yes, both the quant and qual are considered and described in the write up.
Transparency in Reporting: Did the study provide a detailed account of the methodology, including panel characteristics, rounds, and feedback provided to participants?	Yes, this described throughout
Culturally responsive practice	No - however they consider this in their limitation and discuss indigenous population

Appendix E
Ethical Approval

Dear Johanna,

Please accept my sincere apologies for the delays in providing feedback on your TREC application.

I am pleased to inform you that subject to formal ratification by the Trust Research Ethics Committee (TREC) your application has been approved.

This means you can proceed with your research.

Please note that any changes to the project design including changes to methodology/data collection etc, must be referred to TREC as failure to do so, may result in a report of academic and/or research misconduct.

For information governance purposes and in line with the Trust policies, please be advised that in order to conduct research/interviews using online video conferencing you must contact TEL team (telsupport@tavi-port.nhs.uk) to set up a zoom account.

With regards to privacy, please ensure that meetings with yourself and your participants are conducting in a safe environment and that confidentiality is maintained.

Your updated TREC form is attached.

If you have any further questions or require any clarification do not hesitate to contact me.

May I take this opportunity of wishing you every success with your research.

Best wishes,

NHS

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www.tavistockandportman.nhs.uk

Michael Franklyn (he/him)
Academic Governance and Quality Officer
Tavistock and Portman NHS Foundation Trust
mfranklyn@tavi-port.nhs.uk

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Tavistock and Portman Trust Research Ethics Committee (TREC)
APPLICATION FOR ETHICAL REVIEW OF STUDENT RESEARCH PROJECTS

This application should be submitted alongside copies of any supporting documentation which will be handed to participants, including a participant information sheet, consent form, self-completion survey or questionnaire.

Where a form is submitted and sections are incomplete, the form will not be considered by TREC and will be returned to the applicant for completion.

For further guidance please contact Paru Jeram (academicquality@tavi-port.nhs.uk)

FOR ALL APPLICANTS

If you already have ethical approval from another body (including HRA/IRAS) please submit the application form and outcome letters. You need only complete sections of the TREC form which are NOT covered in your existing approval

Is your project considered as 'research' according to the HRA tool? (http://www.hra-decisiontools.org.uk/research/index.html)	YES
Will your project involve participants who are under 18 or who are classed as vulnerable? (see section 7)	NO
Will your project include data collection outside of the UK?	NO

SECTION A: PROJECT DETAILS

Project title	Evaluating the cascading effect of the critical incident response across different levels of a secondary school system in the aftermath of a pupil suicide, as perceived by school professionals and educational psychologists.
Proposed project start date	March 2024	**Anticipated project end date**	**May 2025**

Principal Investigator (normally your Research Supervisor): Dr Nikki Collingwood

Please note: TREC approval will only be given for the length of the project as stated above up to a maximum of 6 years. Projects exceeding these timeframes will need additional ethical approval

Has NHS or other approval been sought for this research including through submission via Research Application System (IRAS) or to the Health Research Authority (HRA)?	**YES (NRES approval)** ☐
	YES (HRA approval) ☐
	Other ☐
	NO ☒

If you already have ethical approval from another body (including HRA/IRAS) please submit the application form and outcome letters.

SECTION B: APPLICANT DETAILS

Name of Researcher	Johanna de Lafargue
Programme of Study and Target Award	Doctorate in Child, Community and Educational Psychology (M4)
Email address	jdelafargue@tavi-port.nhs.uk
Contact telephone number	███████

SECTION C: CONFLICTS OF INTEREST

Will any of the researchers or their institutions receive any other benefits or incentives for taking part in this research over and above their normal salary package or the costs of undertaking the research? **YES** ☐ **NO** ☒ If **YES**, please detail below:
Is there any further possibility for conflict of interest? YES ☐ **NO** ☒
Are you proposing to conduct this work in a location where you work or have a placement? **YES** ☐ **NO** ☒ If **YES**, please detail below outline how you will avoid issues arising around colleagues being involved in this project:

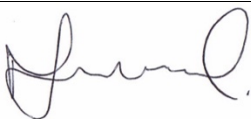|	
Is your project being commissioned by and/or carried out on behalf of a body external to the Trust? (for example; commissioned by a local authority, school, care home, other NHS Trust or other organisation). *Please note that 'external' is defined as an organisation which is external to the Tavistock and Portman NHS Foundation Trust (Trust)	**YES** ☐ **NO** ☒
If **YES**, please add details here:	
Will you be required to get further ethical approval after receiving TREC approval? If **YES**, please supply details of the ethical approval bodies below AND include any letters of approval from the ethical approval bodies (letters received after receiving TREC approval should be submitted to complete your record):	**YES** ☐ **NO** ☒
If your project is being undertaken with one or more clinical services or organisations external to the Trust, please provide details of these:	

If you still need to agree these arrangements or if you can only approach organisations after you have ethical approval, please identify the types of organisations (eg. schools or clinical services) you wish to approach:
Initially, a scoping email (see Appendix H) was sent to a number of local authorities for the attention of the Principal Educational Psychologist. This scoping email highlighted key aspects of the research and provided for a follow up discussion should the PEP feel that one of the schools they have worked with would meet the criteria for being involved in the research. Following, ethical approval, the PEP will be asked to send a letter stating they are happy for this research to take place in their local authority – this will be shared with Ethics Panel for them to put on file. The PEP will share the information sheet and consent form to the EP, who in turn following their consent will liaise with the school's Headteacher to share with them the information sheet and seek consent for the researcher to get in touch with them. Further details regarding recruitment are detailed below.

Do you have approval from the organisations detailed above? (this includes R&D approval where relevant) Please attach approval letters to this application. Any approval letters received after TREC approval has been granted MUST be submitted to be appended to your record	**YES** ☐ **NO** ☐ **NA** ☒
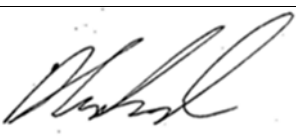
SECTION D: SIGNATURES AND DECLARATIONS

APPLICANT DECLARATION I confirm that: • The information contained in this application is, to the best of my knowledge, correct and up to date. • I have attempted to identify all risks related to the research. • I acknowledge my obligations and commitment to upholding ethical principles and to keep my supervisor updated with the progress of my research • I am aware that for cases of proven misconduct, it may result in formal disciplinary proceedings and/or the cancellation of the proposed research. • I understand that if my project design, methodology or method of data collection changes I must seek an amendment to my ethical approvals as failure to do so, may result in a report of academic and/or research misconduct.	
Applicant (print name)	JOHANNA DE LAFARGUE
Signed	
Date	02/02/2024

FOR RESEARCH DEGREE STUDENT APPLICANTS ONLY

Name of Supervisor/Principal Investigator	Dr Nikki Collingwood

Supervisor –
- Does the student have the necessary skills to carry out the research?
  YES ☒ **NO** ☐
- Is the participant information sheet, consent form and any other documentation appropriate?
  YES ☒ **NO** ☐
- Are the procedures for recruitment of participants and obtaining informed consent suitable and sufficient?
  YES ☒ **NO** ☐
- Where required, does the researcher have current Disclosure and Barring Service (DBS) clearance?
  YES ☒ **NO** ☐

Signed	
Date	05.02.24

COURSE LEAD/RESEARCH LEAD Does the proposed research as detailed herein have your support to proceed? YES ☐ NO ☐	
Signed	
Date	05.02.24

SECTION E: DETAILS OF THE PROPOSED RESEARCH

1. **Provide a brief description of the proposed research, including the requirements of participants. This must be in lay terms and free from technical or discipline specific terminology or jargon. If such terms are required, please ensure they are adequately explained (Do not exceed 500 words)**
The proposed research will explore school staff perspectives on the Educational Psychologist (EP) response in a UK secondary school following a critical incident (CI) involving a pupil's death by suicide. A critical incident is defined as an unexpected event taking place within a school community which may lead to distressing feelings for the individuals involved. Each CI is unique in nature, and responses are similarly dependent on many factors. In line with this, an in-depth exploratory qualitative design is felt to be the most appropriate approach. Ideally, the researcher is hoping to have two sites to gain further insight into the response across two different settings as this would allow for an exploration of similarities and differences across settings (Crowe et al., 2011). Should the researcher only be able to recruit for one site, the design outlined in this form will still apply. If feasible in the timeframe the researcher has and should there be interest and consent for a third site the design outlined below will still apply. A case study approach was considered, however due to the sensitivity it was felt more appropriate to explore purely the support provided and not gather information about the critical incident itself.
There will be 3 participant groups involved in this research to gain an understanding of the cascading support in place in the school system (from the EP to school staff on the ground):

- Educational Psychologists (EP)
- School Leadership Team (SLT)
- School Staff (SS) which will include teaching and non-teaching staff

The research will explore perspective from each of the groups (EP, SLT, SS) regarding:
- Responses which took place following the CI;
- Particular responses/support which were perceived as helpful;
- Consideration of responses/support which might have been additionally helpful.

This is to shed light on the perspectives of the current responses from different parts of the school system to further shape the EP response to CIs involving death by suicide (Carter, 2014).

To explore the cascade effect (where system dependencies lead to impacts propagating from one system to other systems the design approach will include two phases (Hassel et al., 2014; Quiroz-Saavedra et al., 2023) (See appendix G for more details):

Phase 1
- PEP consent
- EP consent and questionnaires
- Headteacher consent for researcher to get in touch.

Phase 2
- Meeting introducing the research on site in school
- SLT and SS consent
- School staff Semi-structured interviews (SSI) face to face or online
- SLT questionnaires whilst researcher is on site or available online.
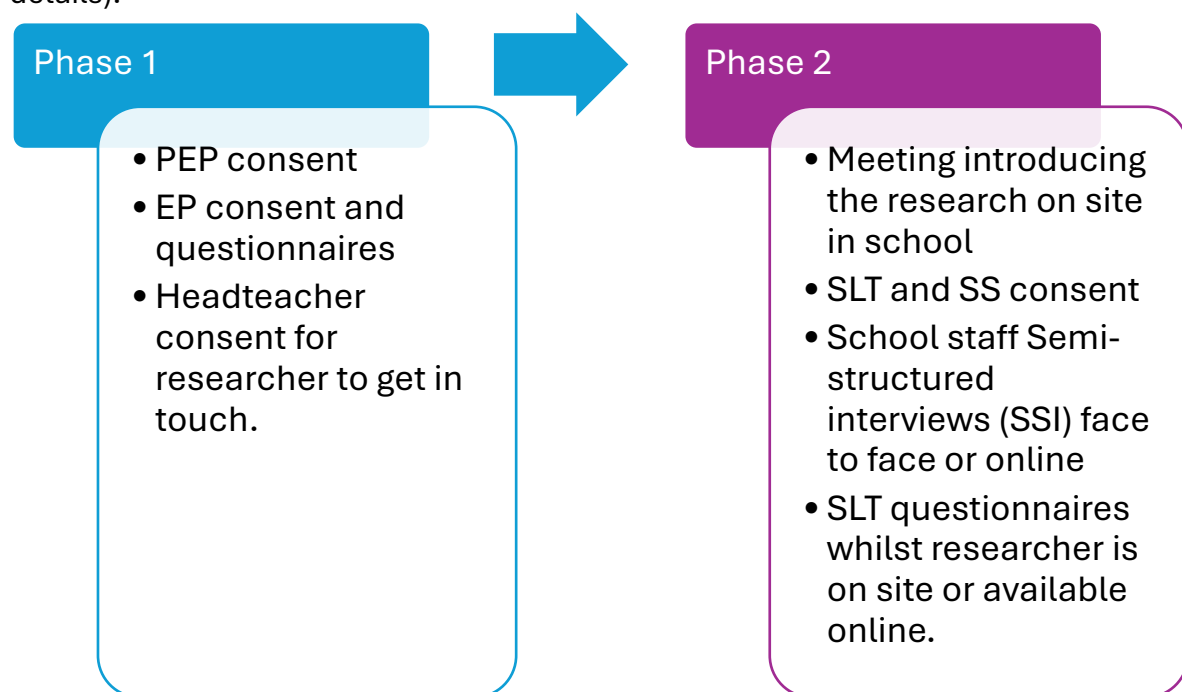
A Reflexive thematic analysis (TA) will be undertaken for the data collected from each participant group. Following this a synthesis of all the findings will be done in order to explore the between groups similarities and differences as well as between sites should there be more than one site (see appendix G for an overview).

2. **Provide a statement on the aims and significance of the proposed research, including potential impact to knowledge and understanding in the field (where appropriate, indicate the associated hypothesis which will be tested). This should be a clear justification of the proposed research, why it should proceed and a statement on any anticipated benefits to the community. (Do not exceed 700 words)**

In the UK, a death by suicide is defined as having "a cause of intentional self-harm (ages ten years and over) and deaths with an underlying cause of the event of undetermined intent (ages 15 years and over)" (Office of National Statistics, 2020). 'Death by suicide' is a leading cause of death among young people worldwide. Suicide rates for 15- to 24-year-olds in the UK increased by 2 % between 2017 and 2018, and young women suicides were the highest on record (78) in 2018/2019. There is currently a crisis in child mental health in the UK with an increase in referrals to Childline for suicidal concerns: over 3,518 were recorded in 2018/2019 compared to 283 in 2009/2010 (Royal College of Paediatrics and Child Health, 2020).

Death by suicide in the school community leads to a need for support for those bereaved and for those experiencing trauma indirectly due to prolonged contact with others affected ('secondary trauma' (Motta, 2008). Due to the shocking nature of suicide and the known risks of 'suicide contagion' (spreading of suicide in others in proximity) (Cheng et al., 2014), adequate responses need to be established at an individual, group, and organisational level (Dunne, 2021). Procedures, resources, and frameworks have been evidenced to be supportive in times of heightened stress (Beeke, 2011). The response to a CI can also be seen as a means for prevention as it also supports the development of resiliency and builds capacity within the systems (Beeke, 2021). Post-traumatic growth theory suggests that growth can occur following a trauma rather than be bound to negative outcomes, whereby an individual can further develop and increase their ability to cope (Stein et al., 2018).

Responding to critical incidents is deemed a core function of the EP role and forms part of the statutory work (Farrell et al., 2006). Research has evidenced EP's to primarily be 'containers' to the SLT through their involvement in different forms of work. These can entail consultation, staff drop-ins, signposting, direct casework, and training which differ according to the need of the school community in the event of a suicide (Beeke, 2011; Brennan, 2021). Resources and policies which can be found on the local offer have been developed to support the CI response although there remains limited research evaluating these (Dunne et al., 2022). Literature in the UK remains limited in comparison to Australia and the USA. Organisational influences (Mirick & Berkowitz, 2023; Farragh, 2019; Causer, 2020; Hopple & Ball, 2023; Brennan, 2021; Finegan, 2023;), the preparedness to a CI involving a death by suicide (Mirick et al., 2023; Khalid et al., 2022; Mirick & Berkowitz, 2023; O'Neill et al., 2020; Finegan, 2023; Causer, 2020; Farragh, 2019), and the need for containment (Mirick & Berkowitz, 2023; Farragh, 2019; Kolves et al.,2017; Brennan, 2021; Finegan, 2023) were noticeable themes emerging from the literature relating to the response to death by suicide within a school.

Within the UK context no studies were identified by the researcher to look at the whole school response and the systemic interactions of support. There is substantial research in preventative work, assessing risk or managing suicide-related behaviours, however limited research worldwide can be found on how the response to suicide within schools is received. Although Brennan (2021) explores the EP perspective, further in-depth perspectives would add to the understanding of the systemic planning identified to be necessary for the preparedness and support for professionals in responding to a crisis.

The aim of this research is to inform the support provided by EPs, the response within schools whilst considering the multiple perspectives in the school community. Overarching question: What is the cascading effect of support provided to secondary schools following a critical incident involving pupil's death by suicide?

A. To what extent is support offered and received between EP and SLT considered effective?

B. To what extent is support offered and received considered effective from the perspective of the school staff (teaching and non-teaching staff)?

C. To what extent is there congruence across the school system regarding the support offered and received?

3. **Provide an outline of the methodology for the proposed research, including proposed method of data collection, *tasks* assigned to participants of the research and the proposed method and duration of data analysis. If the proposed research makes use of pre-established and generally accepted techniques, please make this clear. (Do not exceed 500 words)**

The research design outlined below is informed by the ontological position of Critical Realism and the potential epistemological stance of social constructionism, as different participants may construct their understanding of the support/advice given and received. It recognizes that the choice of epistemological stance may evolve as the research progresses and as the researcher engages with the data and participants' perspectives. The study utilises a qualitative exploratory design to look at both support/advice offered (by the EPs) and also how this support/advice was received by different layers of the school system (participant groups SLTs and SS's). The researcher hopes to interview both teaching and non-teaching staff to get a range of perspectives of how the support is received on the ground.

The data will be collected using a qualitative questionnaire with two participant groups (EPs and SLTs) and SSI (SS).
1. The qualitative questionnaire completed by EPs and the SLT would enable information to be collected which identifies the support offered/received, as well as a reflection of what was helpful and what could have been even more helpful. The data collected through the open-ended questionnaires will be analysed through a TA. Although the researcher is aware of the small sample, TA research suggests this to be the most suitable analysis (Terry et al. 2017; Cedervall & Aberg, 2010). The questionnaire introduction will ask for their responses to be as honest and detailed, due to the possibility of open-ended questionnaire data not being rich or in depth enough (see appendix A1).

2. The researcher will use SSI (online or in person based on participant preference) with SSs to gain their perspectives on advice and support generated from systems outside of them (i.e., EPs, SLT). These will include topic questions with an element of flexibility to allow for follow-up questions,

adapted wording, change of order, and pace on the day (Robson and McCarten, 2016). The SS group(s) are likely to be at the 'coal face' and so their perspectives of how the support is useful on the ground would be invaluable. The gaps identified in the literature highlighted the limited perspectives of school staff with regards to the effectiveness of the support received/available following a CI. Therefore, the focus will be to gather more in-depth information from the SS group in the timeframe the researcher has to conduct the research. This will be triangulated with the data collected in the other two participant groups (EP and SLT).

The rationale for using Reflexive TA is to consider how elements of collected data connects and builds on each other to support the 'cascade' effect (Braun and Clarke, 2022). This is also due to the ontological and epistemological stances taken, and the researcher's possible influence on the analysis. This leads to other types of TA with positivist underpinnings to be inappropriate. The Reflexive TA will be guided by the six phases outlined above and described by Braun and Clarke (2022)
Data analysis is expected to take place over 2-3 months (See appendix G).

SECTION F: PARTICIPANT DETAILS

4. **Provide an explanation detailing how you will identify, approach and recruit the participants for the proposed research, including clarification on sample size and location. Please provide justification for the exclusion/inclusion criteria for this study (i.e. who will be allowed to / not allowed to participate) and explain briefly, in lay terms, why these criteria are in place. (Do not exceed 500 words)**

Participant for this research will be recruited purposefully so that they have the required experience for the focus of the research:

1. The email addresses of Local authorities (LA)/PEP's in the UK has been collected from a list on gov.uk website and double checked with the LA's own website (see Appendix H for the scoping email).
2. PEP's in different England LA who have shared an interest will be contacted via email with an information sheet and asked to provide the researcher an email or letter consenting for research to take part in their LA, this will be shared with Ethics Panel for them to put on file. They will also be provided with a consent form, information sheet and questionnaire via email, with a request to circulate these to EPs in their LA who have responded to a suicide of a CYP within a school (see Appendices A,B,C,D).
3. Should the EP consent, they will work alongside the researcher to be in contact with the school where the CI occurred and requisite approvals will be sought from the school to share an information sheet to all SLTs (Appendix B) and an information sheet to all SS (Appendix C), for example seeking permission from the Headteacher this may differ from school to school. An option of the researcher coming into school in the first place to introduce themselves and provide further information about the research as well as answer any questions will be offered. Once SLT and SS have received information sheets and signed consent forms the researcher will arrange an onsite visit for data collection. The questionnaire will be shared with SLT on the day of SS semi-structured interviews in order for the researcher to be

available to the SLT for support, debrief and answering questions. Semi-structured interviews with SS will be arranged individually (online or in person based on preference) to explore the EP response and support provided to the school.

Participant group	Inclusion criteria	Number per school
EP	• Qualified EP with HCPC and BPS registrations working in the UK, involved in a CI involving death by suicide. • CI work has been completed and it was less than 3 years ago. • CI work in a secondary school setting.	At least 2
SLT	• SLT must be able to verbally communicate in English. • A member of SLT at the time of the CI in the school.	At least 2
SS	• School staff must be able to verbally communicate in English. • Working in the school at the time of the CI.	4 to 8
All 3	• Informed consent has been received from each participant. • Involvement in the same critical incident response	

Although sample sizes remain unclear, in one school it is hoped to get above numbers from each participant group. This number of participants is deemed appropriate for this research as it allows for the rich, individual data to be valued, whilst also accounting for feasibility of transcribing and analysing the data within a certain timeframe (Fugard & Potts, 2015).

5. **Please state the location(s) of the proposed research including the location of any interviews. Please provide a Risk Assessment if required. Consideration should be given to lone working, visiting private residences, conducting research outside working hours or any other non-standard arrangements.**

   If any data collection is to be done online, please identify the platforms to be used.

Email with outlook the information sheets and consent form to Principal EPs, and Headteachers. Online questionnaire by Microsoft 365 Forms (password-protected).
Face to face semi-structured interviews these will be audio recorded with the MS team function (password-protected recordings). The researcher will conduct the interviews from a private and confidential room at the school location should they want a face-to-face interview. For example, an office, meeting room, or workspace which is private. A risk assessment is deemed unnecessary as these are no different in terms of risk to meetings I would have as a professional and participants consenting to take part are all professionals.

Should the participants wish to do these online the Microsoft teams platform will be used. The researcher will use a private and confidential room along with headphones for further confidentiality. The participant will be asked to find a private room to protect their own information.

In accordance with the principles of good practice in data management, the researcher will use the transcription function for qualitative data analysis, allowing for thorough examination of participants' perspectives on support and advice. However, it is important to acknowledge associated risks such as potential loss of nuance or misinterpretation during transcription, which will be mitigated through careful review and validation procedures. For example:

- Having transcription guidelines
- Quality checks by spot-checking transcripts against audio recordings or conducting random audits of transcribed data.
- Transcription software with features such as timestamps, speaker identification, and playback controls to facilitate accurate transcription and review. These features enhance transparency and enable efficient validation of transcripts.
- Consultation with experts to gain valuable insights and validation of transcription accuracy.
- Continuously revisit and refine transcripts as new insights emerge, ensuring alignment with the research objectives and participants' experiences.
- Maintain detailed documentation of the transcription process, including any revisions, corrections, or decisions made during review and validation.

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6. Will the participants be from any of the following groups?*(Tick as appropriate)*

☐ Students or Staff of the Trust or Partner delivering your programme.
☒ Adults (over the age of 18 years with mental capacity to give consent to participate in the research).
☐ Children or legal minors (anyone under the age of 16 years)[1]
☐ Adults who are unconscious, severely ill or have a terminal illness.
☐ Adults who may lose mental capacity to consent during the course of the research.
☐ Adults in emergency situations.
☐ Adults[2] with mental illness - particularly those detained under the Mental Health Act (1983 & 2007).
☐ Participants who may lack capacity to consent to participate in the research under the research requirements of the Mental Capacity Act (2005).
☐ Prisoners, where ethical approval may be required from the National Offender Management Service (NOMS).
☐ Young Offenders, where ethical approval may be required from the National Offender Management Service (NOMS).
☐ Healthy volunteers (in high risk intervention studies).
☐ Participants who may be considered to have a pre-existing and potentially dependent[3] relationship with the investigator (e.g. those in care homes, students, colleagues, service-users, patients).
☐ Other vulnerable groups (see Question 6).
☐ Adults who are in custody, custodial care, or for whom a court has assumed responsibility.
☐ Participants who are members of the Armed Forces.

[1]*If the proposed research involves children or adults who meet the Police Act (1997) definition of vulnerability[3], any researchers who will have contact with participants must have current Disclosure and Barring Service (DBS) clearance.*
[2] *'Adults with a learning or physical disability, a physical or mental illness, or a reduction in physical or mental capacity, and living in a care home or home for people with learning difficulties or receiving care in their own home, or receiving hospital or social care services.' (Police Act, 1997)*
[3] *Proposed research involving participants with whom the investigator or researcher(s) shares a dependent or unequal relationships (e.g. teacher/student, clinical therapist/service-user) may compromise the ability to give informed consent which is free from any form of pressure (real or implied) arising from this relationship. TREC recommends that, wherever practicable, investigators choose participants with whom they have no dependent relationship. Following due scrutiny, if the investigator is confident that the research involving participants in dependent relationships is vital and defensible, TREC will require additional information setting out the case and detailing how risks inherent in the dependent relationship will be managed. TREC will also need to be reassured that refusal to participate will not result in any discrimination or penalty.*

7. Will the study involve participants who are vulnerable? YES ☐ NO ☒

For the purposes of research, 'vulnerable' participants may be adults whose ability to protect their own interests are impaired or reduced in comparison to that of the broader population. Vulnerability may arise from:

- the participant's personal characteristics (e.g. mental or physical impairment)
- their social environment, context and/or disadvantage (e.g. socio-economic mobility, educational attainment, resources, substance dependence, displacement or homelessness).
- where prospective participants are at high risk of consenting under duress, or as a result of manipulation or coercion, they must also be considered as vulnerable
- children are automatically presumed to be vulnerable.

7.1. If YES, what special arrangements are in place to protect vulnerable participants' interests?

If YES, a Disclosure and Barring Service (DBS) check **within the last three years** is required.
Please provide details of the "clear disclosure":

Date of disclosure:	
Type of disclosure:	
Organisation that requested disclosure:	
DBS certificate number:	

*(NOTE: information concerning activities which require DBS checks can be found via https://www.gov.uk/government/publications/dbs-check-eligible-positions-guidance). Please **do not** include a copy of your DBS certificate with your application*

8. Do you propose to make any form of payment or incentive available to participants of the research? YES ☐ NO ☒

If **YES**, please provide details taking into account that any payment or incentive should be representative of reasonable remuneration for participation and may not be of a value that could be coercive or exerting undue influence on potential participants' decision to take part in the research. Wherever possible, remuneration in a monetary form should be avoided and substituted with vouchers, coupons or equivalent. Any payment made to research participants may have benefit or HMRC implications and participants should be alerted to this in the participant information sheet as they may wish to choose to decline payment.

9. What special arrangements are in place for eliciting informed consent from participants who may not adequately understand verbal explanations or written information provided in English; where participants have special communication needs; where participants have limited literacy; or where children are involved in the research? (Do not exceed 200 words)

- Professionals working in the local authority and in a school setting should have a level of expressive and receptive language allowing for the researcher to seek additional verbal consent at the start of each interview.

SECTION F: RISK ASSESSMENT AND RISK MANAGEMENT

10. Does the proposed research involve any of the following? *(Tick as appropriate)*

☒ use of a questionnaire, self-completion survey or data-collection instrument (attach copy)
☐ use of emails or the internet as a means of data collection
☐ use of written or computerised tests
☒ interviews (attach interview questions)
☐ diaries (attach diary record form)
☐ participant observation
☐ participant observation (in a non-public place) without their knowledge / covert research
☒ audio-recording interviewees or events
☒ video-recording interviewees or events
☐ access to personal and/or sensitive data (i.e. student, patient, client or service-user data) without the participant's informed consent for use of these data for research purposes
☐ administration of any questions, tasks, investigations, procedures or stimuli which may be experienced by participants as physically or mentally painful, stressful or unpleasant during or after the research process
☐ performance of any acts which might diminish the self-esteem of participants or cause them to experience discomfiture, regret or any other adverse emotional or psychological reaction
☐ Themes around extremism or radicalisation
☐ investigation of participants involved in illegal or illicit activities (e.g. use of illegal drugs)
☐ procedures that involve the deception of participants
☐ administration of any substance or agent
☐ use of non-treatment of placebo control conditions
☐ participation in a clinical trial
☐ research undertaken at an off-campus location (<u>risk assessment attached</u>)
☐ research overseas (<u>please ensure Section G is complete</u>)

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11. Does the proposed research involve any specific or anticipated risks (e.g. physical, psychological, social, legal or economic) to participants that are greater than those encountered in everyday life?

YES ☒   **NO** ☐

If **YES**, please describe below including details of precautionary measures.

Criteria for participation in the research would take into account the timing of the CI to ensure a balance against potential harmful impact of the recency of an incident, as well as enabling enough time for clarity, reflection and processing. Following a scoping conversation with Principal Educational Psychologist it was deemed a specific timeframe was difficult to instil due to the impact of such events not being timebound. Therefore, the EP linked to the school aware of the context would be best place to use their professional judgement with regards to their participation in the study. However, any CI where the work has not been completed or where it has been over a period of 3 years would not meet criteria due time needed for reflections and the complexity of staff changes as well as recall difficulties.

Although the topic of the research project focuses on the response rather than the details of the death by suicide in a school it may still cause some distress when discussing what support was provided as these may elicit certain memories. However, it is not the researcher's intention to seek out this information for the purpose of this study. Participants will be provided with full information about what would be expected of them should they wish to take part as well as a consent form to

review and sign. At the start of the interview all participants will be asked if they have someone they can speak to should this interview leave them distressed in any way. This will be a requirement for them to take part. The participant will be reminded that they can choose to end the interview at any stage without any repercussions. Participants will be made aware that they are able to withdraw from the study at any point up until data analysis. Participants will be provided with a date to allow them to know the exact date they are able to withdraw from (BPS, 2021).

The researcher will ensure process consent is also sought. If a participant became visibly distressed in an interview the researcher would stop the interview and suggest that a break be taken. Following a break, the researcher would ascertain if the participant felt they were able to continue or whether ending the interview would be the best course of action for them. The researcher would remind them to check in with the person they identified at the start of the interview. The participants will also be provided with a list of support services. The researcher would also encourage them to seek support through their GP if they feel that their level of distress requires a more urgent response. The researcher would follow up with any participants they are concerned about the following day of the interview. The researcher's professional experiences of working with individuals experiencing distress are also outlined below. The researcher will have to take precautions to anonymise the data due to the participants speaking about the aftermath of relatively rare events that others may be able to recognise:

- Provide broader context or background information about the rare events being discussed to minimize the risk of identification.
- Redact or omit specific details that are unique to individual participants or events, particularly if they could potentially identify someone involved in the rare events being discussed.
- Modify or generalize demographic information provided by participants, such as age, gender, or other characteristics, to prevent identification.
- Remove or alter any identifying details or specifics mentioned by participants that could potentially reveal their identities or the identities of others involved in the events. This may include names, locations, dates, and other identifiable information.
- Assign pseudonyms or generic labels to participants in place of their real names. Ensure that these pseudonyms are not identifiable and do not reveal any personal information about the participants.
- Instead of presenting individual responses, aggregate the data by summarizing common themes, patterns, or key points across participants. This approach helps to obscure individual identities while still conveying the overall findings.

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12. **Where the procedures involve potential hazards and/or discomfort or distress for participants, please state what previous experience the investigator or researcher(s) have had in conducting this type of research.**

As a researcher I have numerous years of experience in clinical practice working with families and schools as well as experience of working within education. This has given me the tools to discuss sensitive topics as well as be able to recognise non-verbal signs of discomfort should participants need a break or wish to not discuss something further.

The researcher has regular access to supervision both on the course and at placement.
The researcher has had safeguarding training.
The researcher has psychological first aid training and worked throughout COVID19 pandemic to support medical staff in acute settings with their wellbeing. This has developed my skillset in recognising distress and appropriately signposting.

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13. **Provide an explanation of any potential benefits to participants. Please ensure this is framed within the overall contribution of the proposed research to knowledge or practice. (Do not exceed 400 words) 279**
   NOTE: Where the proposed research involves students, they should be assured that accepting the offer to participate or choosing to decline will have no impact on their assessments or learning experience. Similarly, it should be made clear to participants who are patients, service-users and/or receiving any form of treatment or medication that they are not invited to participate in the belief that participation in the research will result in some relief or improvement in their condition.

The interviews will focus on the response and support received across the different systems following a CI involving death by suicide from their perspective, leading to information sharing regarding what was helpful and what may have been additionally helpful. Information sheets provided to the SSs will emphasise that the interview sessions will not be therapeutic sessions and that they will focus on the support provided from the EP and how they were received. This may lead to school staff feeling validated and feeling a sense of agency towards the shaping of the response in the future. The participant group of teaching and non-teaching staff may feel empowered to share their perspective with a wider audience as this will raise awareness about support possibly needed on the ground when such an event takes place. Participants may also be pleased to contribute to research in this field considering the current concerns of school staff wellbeing and an overall increase in suicides worldwide.

Considering the themes drawn from the literature review (preparedness, organisational influences, and containment) conducting interviews on this matter may lead to staff feeling contained, prepared for critical incidents in the future. The aims of the research are to gain a shared understanding of the support needed across the different layers of the school system in the event of a suicide.

There is a limited amount of existing research exploring perspective of Educational Psychologists (EPs) responses to Critical Incidents (CIs) involving death by suicide. Questionnaires for EPs and SLTs participant groups will also provide opportunities for reflections enhancing their own clinical practice and the dissemination of this research will also support in developing practice and training in this particular area.

14. **Provide an outline of any measures you have in place in the event of adverse or unexpected outcomes and the potential impact this may have on participants involved in the proposed research. (Do not exceed 300 words) 262**

The researcher will ensure that all adverse or unforeseen problems arising from the research project are reported in a timely fashion to the Tavistock Ethics Committees.

- The information sheets are to ensure that participants are aware of the aims of the research study, and what it would entail if they chose to participate, as well as how the data will be used and destroyed in the future (in line with GDPR). Included in the sheet will also be information about the right to withdraw, confidentiality and how the research will be disseminated.
- All participants will be given a list of services they can access for support following the interview if needed (Appendix F).
- The researcher will remind the participants of their right to have a break at any time, additional time will be booked in for each interview should that happen.
- The researcher will also be prepared to signpost to avenues of support if the participants felt distressed, during or after the interview.
- The researcher will also check in with participants throughout the assessment should they not feel able to do so. An opportunity for debriefing will be provided after each interview should the participants wish to have one. The research will follow up if they have any concerns, and the participants will have the email contact of the researcher if they wish to contact.
- Reminders of the process, of confidentiality, of the right to withdraw and of the debrief opportunity will be provided at the start of each interview.
- Research supervision will be used to ensure safety of both the researcher and participants.

15. **Provide an outline of your debriefing, support and feedback protocol for participants involved in the proposed research. This should include, for example, where participants may feel the need to discuss thoughts or feelings brought about following their participation in the research. This may involve referral to an external support or counseling service, where participation in the research has caused specific issues for participants.**

Potential participants will receive an information sheet (see appendix A/B/C/D/E) which clearly outlines the research background, aims of the study and procedures involved in the study, as well as contact details should they want more information about the study. The information sheet will also make clear:

- right to withdraw at any time prior data analysis (approximately 14 days)
- right not to participate at all in the study
- anonymity of all names and personal information of the participants

Debriefing: Following the interviews, as outlined above, the participants will receive an information sheet with services they may wish to access should they feel any emotional distress, including appropriate counseling services (adult NHS services for the adults) (Appendix F). Once data analysis has been undertaken and conclusions

have been reached, the participants will receive a short summary of the results if they have requested this.

16. Please provide the names and nature of any external support or counselling organisations that will be suggested to participants if participation in the research has potential to raise specific issues for participants.

Participants will be provided a list of services they may wish to access, such as Mind, Shout UK, Samaritans and general IAPT NHS mental health services.

 see appendix F

17. Where medical aftercare may be necessary, this should include details of the treatment available to participants. Debriefing may involve the disclosure of further information on the aims of the research, the participant's performance and/or the results of the research. (Do not exceed 500 words)

n/a

FOR RESEARCH UNDERTAKEN OUTSIDE THE UK

18. Does the proposed research involve travel outside of the UK? ☐
YES ☒☐ **NO**

If YES, please confirm:

☐ I have consulted the Foreign and Commonwealth Office website for guidance/travel advice? http://www.fco.gov.uk/en/travel-and-living-abroad/

☐ I have completed ta RISK Assessment covering all aspects of the project including consideration of the location of the data collection and risks to participants.

All overseas project data collection will need approval from the Deputy Director of Education and Training or their nominee. Normally this will be done based on the information provided in this form. All projects approved through the TREC process will be indemnified by the Trust against claims made by third parties.

If you have any queries regarding research outside the UK, please contact academicquality@tavi-port.nhs.uk:

Students are required to arrange their own travel and medical insurance to cover project work outside of the UK. Please indicate what insurance cover you have or will have in place.

19. Please evidence how compliance with all local research ethics and research governance requirements have been assessed for the country(ies) in which the research is taking place. Please also clarify how the requirements will be met:

SECTION G: PARTICIPANT CONSENT AND WITHDRAWAL

20. Have you attached a copy of your participant information sheet (this should be in *plain English*)? Where the research involves non-English speaking participants, please include translated materials.

YES ☒   **NO** ☐

If **NO**, please indicate what alternative arrangements are in place below:

21. Have you attached a copy of your participant consent form (this should be in *plain English*)? Where the research involves non-English speaking participants, please include translated materials.

YES ☒   **NO** ☐

If **NO**, please indicate what alternative arrangements are in place below:

22. The following is a <u>participant information sheet</u> checklist covering the various points that should be included in this document.

☒ Clear identification of the Trust as the sponsor for the research, the project title, the Researcher and Principal Investigator (your Research Supervisor) and other researchers along with relevant contact details.
☒ Details of what involvement in the proposed research will require (e.g., participation in interviews, completion of questionnaire, audio/video-recording of events), estimated time commitment and any risks involved.
☒ A statement confirming that the research has received formal approval from TREC or other ethics body.
☒ If the sample size is small, advice to participants that this may have implications for confidentiality / anonymity.
☒ A clear statement that where participants are in a dependent relationship with any of the researchers that participation in the research will have no impact on assessment / treatment / service-use or support.
☒ Assurance that involvement in the project is voluntary and that participants are free to withdraw consent at any time, and to withdraw any unprocessed data previously supplied.
☒ Advice as to arrangements to be made to protect confidentiality of data, including that confidentiality of information provided is subject to legal limitations.
☒ A statement that the data generated in the course of the research will be retained in accordance with the Trusts 's Data Protection and handling Policies.:
https://tavistockandportman.nhs.uk/about-us/governance/policies-and-procedures/
☒ Advice that if participants have any concerns about the conduct of the investigator, researcher(s) or any other aspect of this research project, they should contact Head of Academic Registry (academicquality@tavi-port.nhs.uk)
☒ Confirmation on any limitations in confidentiality where disclosure of imminent harm to self and/or others may occur.

23. The following is a <u>consent form</u> checklist covering the various points that should be included in this document.

☒ Trust letterhead or logo.
☒ Title of the project (with research degree projects this need not necessarily be the title of the thesis) and names of investigators.
☒ Confirmation that the research project is part of a degree
☒ Confirmation that involvement in the project is voluntary and that participants are free to withdraw at any time, or to withdraw any unprocessed data previously supplied.
☒ Confirmation of particular requirements of participants, including for example whether interviews are to be audio-/video-recorded, whether anonymised quotes will be used in publications advice of legal limitations to data confidentiality.
☒ If the sample size is small, confirmation that this may have implications for anonymity any other relevant information.
☒ The proposed method of publication or dissemination of the research findings.
☒ Details of any external contractors or partner institutions involved in the research.
☒ Details of any funding bodies or research councils supporting the research.
☒ Confirmation on any limitations in confidentiality where disclosure of imminent harm to self and/or others may occur.

SECTION H: CONFIDENTIALITY AND ANONYMITY

24. Below is a checklist covering key points relating to the confidentiality and anonymity of participants. Please indicate where relevant to the proposed research.

☐ Participants will be completely anonymised and their identity will not be known by the investigator or researcher(s) (i.e. the participants are part of an anonymous randomised sample and return responses with no form of personal identification)?
☐ The responses are anonymised or are an anonymised sample (i.e. a permanent process of coding has been carried out whereby direct and indirect identifiers have been removed from data and replaced by a code, with <u>no</u> record retained of how the code relates to the identifiers).
☒ The samples and data are de-identified (i.e. direct and indirect identifiers have been removed and replaced by a code. The investigator or researchers <u>are</u> able to link the code to the original identifiers and isolate the participant to whom the sample or data relates).
☐ Participants have the option of being identified in a publication that will arise from the research.
☒ Participants will be pseudo-anonymised in a publication that will arise from the research. (i.e. the researcher will endeavour to remove or alter details that would identify the participant.)
☐ The proposed research will make use of personal sensitive data.
☐ Participants consent to be identified in the study and subsequent dissemination of research findings and/or publication.

25. Participants must be made aware that the confidentiality of the information they provide is subject to legal limitations in data confidentiality (i.e. the data may be subject to a subpoena, a freedom of information request or mandated reporting by some professions). This only applies to named or de-identified data. If your participants are named or de-identified, please confirm that you will specifically state these limitations.

YES ☒   NO ☐

If **NO**, please indicate why this is the case below:

NOTE: WHERE THE PROPOSED RESEARCH INVOLVES A SMALL SAMPLE OR FOCUS GROUP, PARTICIPANTS SHOULD BE ADVISED THAT THERE WILL BE DISTINCT LIMITATIONS IN THE LEVEL OF ANONYMITY THEY CAN BE AFFORDED.

SECTION I: DATA ACCESS, SECURITY AND MANAGEMENT

26. Will the Researcher/Principal Investigator be responsible for the security of all data collected in connection with the proposed research? YES ☒   **NO** ☐ If **NO**, please indicate what alternative arrangements are in place below:

27. In line with the 5th principle of the Data Protection Act (1998), which states that personal data shall not be kept for longer than is necessary for that purpose or those purposes for which it was collected; please state how long data will be retained for. ☐ 1-2 years ☐ 3-5 years ☒ 6-10 years ☐ 10> years **NOTE: In line with** Research Councils UK (RCUK) guidance, doctoral project data should normally be stored for 10 years and Masters level data for up to 2 years

28. Below is a checklist which relates to the management, storage and secure destruction of data for the purposes of the proposed research. Please indicate where relevant to your proposed arrangements.

☐ Research data, codes and all identifying information to be kept in separate locked filing cabinets.
☐ Research data will only be stored in the University of Essex OneDrive system and no other cloud storage location.
☒ Access to computer files to be available to research team by password only.
☐ Access to computer files to be available to individuals outside the research team by password only (See **23.1**).
☒ Research data will be encrypted and transferred electronically within the UK.
☐ Research data will be encrypted and transferred electronically outside of the UK.

NOTE: Transfer of research data via third party commercial file sharing services, such as Google Docs and YouSendIt are not necessarily secure or permanent. These systems may also be located overseas and not covered by UK law. If the system is located outside the European Economic Area (EEA) or territories deemed to have sufficient standards of data protection, transfer may also breach the Data Protection Act (1998).

Essex students also have access the 'Box' service for file transfer:
https://www.essex.ac.uk/student/it-services/box

☐ Use of personal addresses, postcodes, faxes, e-mails or telephone numbers.
☐ Collection and storage of personal sensitive data (e.g. racial or ethnic origin, political or religious beliefs or physical or mental health or condition).
☐ Use of personal data in the form of audio or video recordings.
☐ Primary data gathered on encrypted mobile devices (i.e. laptops).

NOTE: This should be transferred to secure University of Essex OneDrive at the first opportunity.

☒ All electronic data will undergo secure disposal.

NOTE: For hard drives and magnetic storage devices (HDD or SSD), deleting files does not permanently erase the data on most systems, but only deletes the reference to the file. Files can be restored when deleted in this way. Research files must be overwritten to ensure they are completely irretrievable. Software is available for the secure erasing of files from hard drives which

meet recognised standards to securely scramble sensitive data. Examples of this software are BC Wipe, Wipe File, DeleteOnClick and Eraser for Windows platforms. Mac users can use the standard 'secure empty trash' option; an alternative is Permanent eraser software.

☐ All hardcopy data will undergo secure disposal.

NOTE: For shredding research data stored in hardcopy (i.e. paper), adopting DIN 3 ensures files are cut into 2mm strips or confetti like cross-cut particles of 4x40mm. The UK government requires a minimum standard of DIN 4 for its material, which ensures cross cut particles of at least 2x15mm.

29. Please provide details of individuals outside the research team who will be given password protected access to encrypted data for the proposed research.
n/a
30. Please provide details on the regions and territories where research data will be electronically transferred that are external to the UK:
n/a

SECTION J: PUBLICATION AND DISSEMINATION OF RESEARCH FINDINGS

30. How will the results of the research be reported and disseminated? *(Select all that apply)*
☒ Peer reviewed journal ☒ Non-peer reviewed journal ☒ Peer reviewed books ☒ Publication in media, social media or website (including Podcasts and online videos) ☒ Conference presentation ☐ Internal report ☐ Promotional report and materials ☐ Reports compiled for or on behalf of external organisations ☒ Dissertation/Thesis ☒ Other publication

☒ Written feedback to research participants
☐ Presentation to participants or relevant community groups
☐ Other (Please specify below)

SECTION K: OTHER ETHICAL ISSUES

31. Are there any other ethical issues that have not been addressed which you would wish to bring to the attention of Tavistock Research Ethics Committee (TREC)?

Considerations for the researcher:

Due to the nature of the research project, the researcher will also have structures in place to manage their own well-being: Research and personal supervision, a support network, and a self-care plan.

SECTION L: CHECKLIST FOR ATTACHED DOCUMENTS

32. Please check that the following documents are attached to your application.

☐ Letters of approval from any external ethical approval bodies (where relevant)
☐ Recruitment advertisement
☒ Participant information sheets (including easy-read where relevant)
☒ Consent forms (including easy-read where relevant)
☐ Assent form for children (where relevant)
☐ Letters of approval from locations for data collection
☒ Questionnaire
☒ Interview Schedule or topic guide
☐ Risk Assessment (where applicable)
☐ Overseas travel approval (where applicable)

34. Where it is not possible to attach the above materials, please provide an explanation below.

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Dear Principal Educational Psychologist,
I am a trainee educational psychologist at the Tavistock and Portman in second year of the doctoral program. I am hoping to research the response/approach to critical incidents involving death by suicide of CYP in secondary school settings, looking at the different layers of the systems in a school community (EP, Senior Leadership Team, and School professionals) and their perspective on the response, rather than the incident itself.
I am in the process of applying for ethics and thought it would be good to do some scoping/gage feasibility of doing this.

At present the idea is for Educational Psychologists and the respective Senior Leadership Teams in schools who have been involved in a Critical Incident involving death by suicide of a pupil in their school to fill a questionnaire - this would **only be asking about what support was provided** (EPs) and what support was **received** (SLT). The second phase I am hoping to recruit for interviews teaching/non-teaching staff in the respective schools, I would be happy to come in to discuss this if the Headteacher of the school consented. The incident would have to have happened over a year ago due to the sensitivity of the topic and the work with the school completed, although again I would be looking at the response/support rather than the details of the Critical Incident.

This is of course all pending ethics approval so it's just an initial scoping of what the possibilities are regarding participant recruitment. I appreciate this may be difficult due to the current time/workload pressures.
The hopes are to shed more light on what/how EP critical incident support is received by school professionals on the ground directly/indirectly.

If it was something you felt was feasible within your local authority, would you be able to let me know ?
I'm happy to clarify or expand on anything and I am also able to follow up with a phone call should you wish.
All the best and thank you for your time in reading this,

Jo

Johanna de Lafargue
Pronouns: She/Her
Trainee Child, Community & Educational Psychologist
Tavistock and Portman NHS trust

Appendix G
Infographic for recruitment

Appendix H
Information sheet and consent forms for Educational Psychologists

Information sheet and consent form EP

Tavistock and Portman Trust Research Ethics Committee (TREC)
This research has received formal approval from the TREC committee. This research is unfunded and being undertaken as part of doctoral training in child, community and educational psychology. If you have any queries regarding the conduct of the programme in which you are being asked to participate, please contact:
Paru Jeram, Trust Quality Assurance Officer pjeram@tavi-port.nhs.uk

The Researcher
Johanna de Lafargue (Trainee Child and Educational Psychologist) jdelafargue@tavi-port.nhs.uk
Dr Nikki Collingwood (Research Supervisor) ncollingwood@tavi-port.nhs.uk

Consent to Participate in a Research Study
The purpose of this letter is to provide you with the information that you need to consider in deciding whether to participate in this study.

Project Title
Evaluating the cascading effect of the critical incident response across different levels of a secondary school system in the aftermath of a pupil suicide, as perceived by school professionals and educational psychologists.

Project Description
The aim will be to gather the different perspectives on the response/support received by professionals working in/with schools in the aftermath of a suicide. This is to inform the support provided by Educational Psychologists, the senior leadership team and inform how support is received by school staff. The hope is to develop a framework which considers the multiple perspectives in the school community. The research will also aim, by learning from the work that has been undertaken, to provide additional up-to-date evidence to inform local authorities policies and training courses about the critical incident response involving death by suicide.
Participants will be sent a questionnaire with questions relating to the support offered and undertaken, whilst evaluating what they felt was helpful for school professionals as well as what could have been additionally helpful. The critical incident work must be over, and the incident must have occurred less than three years ago. This timing for inclusion is at the discretion of the EP involved in the Critical incident work.
The research will focus on the response; however, due to the sensitive nature of the topic, participants must be mindful of possible distressing emotions/memories which may resurface. Information of services participants can access should they feel distressed will be provided following participation. The researcher will check-in with all participants should they wish a follow-up. The questionnaire should take approximately 30 minutes.

Confidentiality of the Data
General Data Protection Regulations (The Parliament of the United Kingdom, 2018) will be upheld throughout the project. Details of participants will be collected if they opt in for contact purposes only, these will be kept securely on a password-protected device.
Throughout the interview process the data collected will remain confidential and anonymous.

Participants and settings will be assigned numbers, anonymity will also be upheld throughout the write-up of the research project. The data will not be kept and will be disposed of securely following the project.

However, confidentiality can be overridden by legal limitations or if there's a concern about imminent harm to oneself or others. The small sample size also means there is a possibility that some examples and experiences shared in interviews might be recognizable. However, to safeguard your identity, pseudonyms will be employed, and any identifiable information will be altered.

Data generated throughout this research will be retained in accordance with the Trust's Data Protection and handling Policies:
https://tavistockandportman.nhs.uk/about-us/governance/policies-and-procedures/.

Location
The Microsoft Forms questionnaire link will be sent electronically via email and responses will be password protected and recorded online. A follow-up conversation and debrief will be provided to the EPs completing the questionnaire.

Disclaimer
You are not obliged to take part in this study and are free to withdraw at any time prior to data analysis (approximately 14 days). Should you choose to withdraw from the programme you may do so without disadvantage to yourself and without any obligation to give a reason.

Consent to Participate in this research project:

The Tavistock and Portman **NHS**
NHS Foundation Trust

Evaluating the cascading effect of the critical incident response across different levels of a secondary school system in the aftermath of a pupil suicide, as perceived by school professionals and educational psychologists. This research has received formal approval, is unfunded and being undertaken as part of doctoral training in child, community and educational psychology.

1. I confirm that I have read and understood the Participant Information Sheet for the above study. I have had an opportunity to consider the information and what will be expected of me. I have also had the opportunity to ask questions which have been answered to my satisfaction.	
2. I understand that all personal information will remain strictly confidential and that only the researchers involved in the study will have access to the data. I understand that my data collected in this study will be stored anonymously and securely. Small sample size also means there is a possibility that some examples and experiences shared in interviews might be recognizable. However, to safeguard your identity, pseudonyms will be employed, and any identifiable information will be altered.	
3. I consent to participate in the study and for my questionnaire data to be recorded with Microsoft forms password protected. I understand that my personal information will be used for the purposes of the research explained to me.	
4. I understand that my participation is voluntary and that I am free to withdraw prior to data analysis (approximately 14 days), without giving any reason and without this having any impact on my relations with any services.	
5. I understand the potential risks of participating and the support that will be available to me should I become distressed during the course of the research.	
6. I understand that the data will not be made available to any commercial organisations but is solely the responsibility of the researcher(s) undertaking this study.	
7. I understand that the findings from this research will be published in a thesis and potentially in a presentation or peer-reviewed journal.	
8. I understand that there may be potential limitations to confidentiality such as in the event of unforeseen legal duties or the disclosure of a threat of or actual harm to myself or others	
9. I am willing to participate in this study.	
10. I would like to receive a brief summary of the research findings	

If you **don't** want to take part, don't sign your name! If you **do** want to take part, please write your name below:

Participant's Name (BLOCK CAPITALS)

……………………………………………………………………….

Participant's Signature

………………………………………………………………………………………..

Investigator's Name (BLOCK CAPITALS)

………………………………………………………………………..

Investigator's Signature

……………………………………………………………………………………………

Date: …………………………

Thank you for your help!

Appendix I
Consent form and information sheet for Senior Leadership Team members

Information sheet and consent form SLT

The Tavistock and Portman **NHS**
NHS Foundation Trust

Tavistock and Portman Trust Research Ethics Committee (TREC)

This research has received formal approval from the TREC committee. This research is unfunded and being undertaken as part of doctoral training in child, community and educational psychology. If you have any queries regarding the conduct of the programme in which you are being asked to participate, please contact:
Paru Jeram, Trust Quality Assurance Officer pjeram@tavi-port.nhs.uk

The Researcher
Johanna de Lafargue (Trainee Child and Educational Psychologist) jdelafargue@tavi-port.nhs.uk
Dr Nikki Collingwood (Research Supervisor) ncollingwood@tavi-port.nhs.uk

Consent to Participate in a Research Study
The purpose of this letter is to provide you with the information that you need to consider in deciding whether to participate in this study.

Project Title
Evaluating the cascading effect of the critical incident response across different levels of a secondary school system in the aftermath of a pupil suicide, as perceived by school professionals and educational psychologists.

Project Description
The aim will be to gather the different perspectives on the response/support received by professionals working in/with schools in the aftermath of a suicide. This is to inform the support provided by Educational Psychologists, the senior leadership team and inform how support is received by school staff. The hope is to develop a framework which considers the multiple perspectives in the school community. The research will also aim, by learning from the work that has been undertaken, to provide additional up-to-date evidence to inform local authorities policies and training courses about the critical incident response involving death by suicide.
Participants will be sent a questionnaire with a set of questions relating to the support received/given whilst evaluating what they found helpful as well as what could have been additionally helpful. The critical incident work must be over, and the incident must have occurred less than three years ago.
The research will focus purely on the specific support given; however, due to the sensitive nature of the topic, participants must be mindful of possible distressing emotions/memories which may resurface.
Information of services participants can access should they feel distressed will be provided following participation. The researcher can be on site on the day of questionnaire being shared should you need any support or have any questions; alternatively should you prefer online the researcher will be available on Microsoft teams on the day. All participants will be provided a follow-up and debrief. The questionnaire should take approximately 30 minutes.

Confidentiality of the Data

General Data Protection Regulations (The Parliament of the United Kingdom, 2018) will be upheld throughout the project. Details of participants will be collected if they opt in for contact purposes only, these will be kept securely on a password-protected device.

Throughout the interview process the data collected will remain confidential and anonymous. Participants and settings will be assigned numbers, anonymity will also be upheld throughout the write-up of the research project. The data will not be kept and will be disposed of securely following the project.

However, confidentiality can be overridden by legal limitations or if there's a concern about imminent harm to oneself or others. The small sample size also means there is a possibility that some examples and experiences shared in interviews might be recognizable. However, to safeguard your identity, pseudonyms will be employed, and any identifiable information will be altered.

Data generated throughout this research will be retained in accordance with the Trust's Data Protection and handling Policies:

https://tavistockandportman.nhs.uk/about-us/governance/policies-and-procedures/.

Location

The researcher can be on site on the day should the participants have any questions or should they want a follow-up. A follow-up conversation and debrief will be provided to one's completing the questionnaire. Option of face-to-face or online will be provided to participants. The questionnaire link will be sent electronically via email and responses will be password protected and recorded online.

Disclaimer

You are not obliged to take part in this study and are free to withdraw at any time prior to data analysis (approximately 14 days). Should you choose to withdraw from the programme you may do so without disadvantage to yourself and without any obligation to give a reason.

Consent form - SLTs

Consent to Participate in this research project:

Evaluating the cascading effect of the critical incident response across different levels of a secondary school system in the aftermath of a pupil suicide, as perceived by school professionals and educational psychologists. This research has received formal approval, is unfunded and being undertaken as part of doctoral training in child, community and educational psychology.

1. I confirm that I have read and understood the Participant Information Sheet for the above study. I have had an opportunity to consider the information and what will be expected of me. I have also had the opportunity to ask questions which have been answered to my satisfaction.	
2. I understand that all personal information will remain strictly confidential and that only the researchers involved in the study will have access to the data. I understand that my data collected in this study will be stored anonymously and securely. Small sample size also means there is a possibility that some examples and experiences shared in interviews might be recognizable. However, to safeguard your identity, pseudonyms will be employed, and any identifiable information will be altered.	
3. I consent to participate in the study and for my questionnaire data to be recorded with Microsoft forms password protected. I understand that my personal information will be used for the purposes of the research explained to me.	
4. I understand that my participation is voluntary and that I am free to withdraw prior to data analysis (approximately 14 days), without giving any reason and without this having any impact on my relations with any services.	
5. I understand the potential risks of participating and the support that will be available to me should I become distressed during the course of the research.	
6. I understand that the data will not be made available to any commercial organisations but is solely the responsibility of the researcher(s) undertaking this study.	
7. I understand that the findings from this research will be published in a thesis and potentially in a presentation or peer-reviewed journal.	
8. I understand that there may be potential limitations to confidentiality such as in the event of unforeseen legal duties or the disclosure of a threat of or actual harm to myself or others	
9. I am willing to participate in this study.	
10. I would like to receive a brief summary of the research findings	

If you **don't** want to take part, don't sign your name! If you **do** want to take part, please write your name below:

Participant's Name (BLOCK CAPITALS)

…………………………………………………………………….

Participant's Signature

………………………………………………………………………………………..

Investigator's Name (BLOCK CAPITALS)

…………………………………………………………………..

Investigator's Signature

…………………………………………………………………………………………

Date: ………………………….

Thank you for your help!

Appendix J
Information sheet and consent form for School staff

Information sheet and consent form SS

The Tavistock and Portman **NHS**
NHS Foundation Trust

Tavistock and Portman Trust Research Ethics Committee (TREC)
This research has received formal approval from the TREC committee. This research is unfunded and being undertaken as part of doctoral training in child, community and educational psychology. If you have any queries regarding the conduct of the programme in which you are being asked to participate, please contact:
Paru Jeram, Trust Quality Assurance Officer pjeram@tavi-port.nhs.uk

The Researcher
Johanna de Lafargue (Trainee Child and Educational Psychologist) jdelafargue@tavi-port.nhs.uk
Dr Nikki Collingwood (Research Supervisor) ncollingwood@tavi-port.nhs.uk

Consent to Participate in a Research Study
The purpose of this letter is to provide you with the information that you need to consider in deciding whether to participate in this study.

Project Title
Evaluating the cascading effect of the critical incident response across different levels of a secondary school system in the aftermath of a pupil suicide, as perceived by school professionals and educational psychologists.

Project Description
The aim will be to gather the different perspectives on the response/support received by professionals working in/with schools in the aftermath of a suicide. This is to inform the support provided by Educational Psychologists, the senior leadership team and inform how support is received by school staff. The hope is to develop a framework which considers the multiple perspectives in the school community. The research will also aim, by learning from the work that has been undertaken, to provide additional up-to-date evidence to inform local authorities policies and training courses about the critical incident response involving death by suicide.
Participants will be asked a set of questions relating to the support received/given whilst evaluating what they found helpful as well as what could have been additionally helpful. The work with the critical incident team must be finished and the incident must have occurred less than three years ago.
The research will focus on the specific support received; however, due to the sensitive nature of the topic, participants must be mindful of possible distressing emotions/memories which may resurface.
Information of services participants can access should they feel distressed will be provided following participation. The interview is not intended to be therapeutic in nature, but rather a reflection of the different types of support offered and received. All participants will be provided a follow-up and debrief. The length of the interview will be approximately 1 hour including the debrief.

Confidentiality of the Data

General Data Protection Regulations (The Parliament of the United Kingdom, 2018) will be upheld throughout the project. Details of participants will be collected if they opt in for contact purposes only, these will be kept securely on a password-protected device.

Throughout the interview process the data collected will remain confidential and anonymous. Participants and settings will be assigned numbers, anonymity will also be upheld throughout the write-up of the research project. The data will not be kept and will be disposed of securely following the project.

However, confidentiality can be overridden by legal limitations or if there's a concern about imminent harm to oneself or others. The small sample size also means there is a possibility that some examples and experiences shared in interviews might be recognizable. However, to safeguard your identity, pseudonyms will be employed, and any identifiable information will be altered.

Data generated throughout this research will be retained in accordance with the Trust's Data Protection and handling Policies:
https://tavistockandportman.nhs.uk/about-us/governance/policies-and-procedures/.

Location

Participant interviews will be held face-to-face in a private room on-site and voices will be recorded with Microsoft Teams, these will be password-protected and anonymous. The researcher will provide options for face-to-face or online interviews. Should you prefer face-to-face the researcher will arrange a suitable time with participants to do an on-site visit and conduct interviews in a private and confidential room at your school. Should you prefer online, the researcher will use a private and confidential room along with headphones for further confidentiality and you will be asked to find a private room to protect your own information.

Disclaimer

You are not obliged to take part in this study, and are free to withdraw at any time prior to data analysis (approximately 14 days). Should you choose to withdraw from the programme you may do so without disadvantage to yourself and without any obligation to give a reason.

Consent form SS
Consent to Participate in this research project:

The Tavistock and Portman **NHS**
NHS Foundation Trust

Evaluating the cascading effect of the critical incident response across different levels of a secondary school system in the aftermath of a pupil suicide, as perceived by school professionals and educational psychologists. This research has received formal approval, is unfunded and being undertaken as part of doctoral training in child, community and educational psychology.

1. I confirm that I have read and understood the Participant Information Sheet for the above study. I have had an opportunity to consider the information and what will be expected of me. I have also had the opportunity to ask questions which have been answered to my satisfaction.	
2. I understand that all personal information will remain strictly confidential and that only the researchers involved in the study will have access to the data. I understand that my data collected in this study will be stored anonymously and securely. Small sample size also means there is a possibility that some examples and experiences shared in interviews might be recognizable. However, to safeguard your identity, pseudonyms will be employed, and any identifiable information will be altered.	
3. I consent to participate in the study and for my interview data to be voice recorded with Microsoft teams. I understand that my personal information will be password protected and used for the purposes of the research explained to me.	
4. I understand that my participation is voluntary and that I am free to withdraw prior to data analysis (approximately 14 days), without giving any reason and without this having any impact on my relations with any services.	
5. I understand the potential risks of participating and the support that will be available to me should I become distressed during the course of the research.	
6. I understand that the data will not be made available to any commercial organisations but is solely the responsibility of the researcher(s) undertaking this study.	
7. I understand that the findings from this research will be published in a thesis and potentially in a presentation or peer-reviewed journal.	
8. I understand that there may be potential limitations to confidentiality such as in the event of unforeseen legal duties or the disclosure of a threat of or actual harm to myself or others	
9. I am willing to participate in this study.	
10. I would like to receive a brief summary of the research findings	

If you **don't** want to take part, don't sign your name! If you **do** want to take part, please write your name below:

Participant's Name (BLOCK CAPITALS) ……………………………………

Participant's Signature

…………………………………………………………………………………..

Email/Contact to arrange interview tomorrow:………………………

Preferred time for interview:…………………….

Investigator's Name (BLOCK CAPITALS)

…………………………………………………………………..

Investigator's Signature

…………………………………………………………………………………

Date: ………………………….

Thank you for your help!

Appendix K
Introducing the research to the school

Slide 1

Critical Incident Response Research Project

By Jo de Lábogue (Trainee Child and Educational Psychologist)

Slide 2

Introduction

- To better understand the support provided to schools in the event of a critical incident involving death by suicide. Your insights are crucial to improve support systems in place.
- The focus is on what support was offered and received rather than the event itself
- May still evoke emotions or distress, as it deals with a sensitive topic.
- Should you feel the need for emotional support or someone to talk to, please reach out to any of the support services provided in the debrief form, myself, or a trusted person in your life.
- Participation is purely voluntary, anonymous and confidential

Slide 3

Thesis title

- Evaluating the cascading effect of the critical incident response across different levels of a secondary school system in the aftermath of a pupil suicide, as perceived by school professionals and educational psychologists.

Senior Leadership Team

Educational Psychology Service — School staff

Slide 4

Rationale

- Child and adolescent mental health concerns increasing
- Build on the evidence base with regards to what works
- Gather more information from the school perspective
- Shape the support provided by EPs further
- Understand what happens across a school community (at the different levels).

Slide 5

Process

- EPs will answer an online questionnaire
- SLT will answer an online questionnaire
- School staff will take part in an interview with myself (voice recording)

Slide 6

What will you be asked?

- Interview questions can be provided in advance to individuals who consent to take part.
- Importance of individual perspectives and reflections
- Themes of questions for all 3 participant groups:
  - What did the response involve?
  - Who was involved?
  - What worked and what would have been additionally helpful?

(EP) Critical Incident Support provided/recieved following a death by suicide of a pupil

Thank you for considering participating in this study. The research aim is to better understand the support provided to schools in the event of a critical incident involving death by suicide. Your insights are crucial for advancing our understanding and improving support systems.

Although the nature of the questions are purely focused on what support was offered and received, please be aware that it may still evoke emotions or distress, as it deals with a sensitive topic. If you find any questions uncomfortable or distressing, you are encouraged to skip them or withdraw from the study at any point without consequence.

Your participation is entirely voluntary, and your responses will be kept confidential. We kindly ask for your honest and detailed answers, as they contribute significantly to the depth of our research.

If, at any time during or after the completion of the questionnaire, you feel the need for emotional support or someone to talk to, please reach out to any of the support services provided in the debrief form, myself, or a trusted person in your life.

Your participation is invaluable, and we appreciate your willingness to contribute to this important research.

Thank you!
Johanna de Lafargue

Consent form and information sheet

1. Have you read the information sheet : https://tavistock120-my.sharepoint.com/:w:/g/personal/jdelafargue_tavi-port_nhs_uk/ESYx-_Uf8ItHihXjUO0wCAYBcBxg90gwKJYwuW35p6Q9Nw?e=7SdVI9 *

   ◯ Yes

   ◯ No

   https://tavistock120-my.sharepoint.com/:w:/g/
   personal/jdelafargue_tavi-port_nhs_uk/ESYx-
   _Uf8ItHihXjUO0wCAYBcBxg90gwKJYwuW35p6
   Q9Nw?e=7SdVI9

2. Have you filled in the online consent form: https://forms.office.com/e/XhkbhpgBBa *

   ◯ Yes

   ◯ No

About you:(Copy)

3. How many years have you been a qualified EP for? *

4. How many Critical Incidents (CI) involving death by suicide of a pupil in a school have you responded to? *

Thinking about a CI response involving death by suicide of a pupil in a particular school:

5. What did the CI response entail and if you can recall, in what order did the different phases of support occur ? *

6. How long ago was the CI? *

7. How long was your involvement and was there any follow-up? *

8. What are your thoughts on the length of time of the support offered? *

9. Who were your key liaisons at the school and/or who was part of the response team? Do you feel any other professionals or staff groupings should have been included? *

10. What steps were taken that you felt as an EP to be important? *

11. What do you feel worked particularly well with regards to the support you provided ? *

12. Why do you feel these steps were important and/or worked particularly well? *

13. What else would you have liked to do, or what would you have liked to do differently? *

14. From a professional point of view, what support did you receive or would have liked to have received? *

15. What are your thoughts on the support you had access to? *

16. Is there anything you feel would have prepared you best in responding or did prepare you well in responding to the CI? *

17. Is there anything else you would like to share? *

(SLT) Critical Incident Support provided/recieved following a death by suicide of a pupil

Thank you for considering participating in this study. The research aim is to better understand the support provided to schools in the event of a critical incident involving death by suicide. Your insights are crucial for advancing our understanding and improving support systems.

Although the nature of the questions are purely focused on what support was offered and received, please be aware that it may still evoke emotions or distress, as it deals with a sensitive topic. If you find any questions uncomfortable or distressing, you are encouraged to skip them or withdraw from the study at any point without consequence.

Your participation is entirely voluntary, and your responses will be kept confidential. We kindly ask for your honest and detailed answers, as they contribute significantly to the depth of our research.

If, at any time during or after the completion of the questionnaire, you feel the need for emotional support or someone to talk to, please reach out to any of the support services provided in the debrief form, myself, or a trusted person in your life.

Your participation is invaluable, and we appreciate your willingness to contribute to this important research.

Thank you!
Johanna de Lafargue

* Required

1. I have read and submitted the consent form : https://forms.office.com/e/ic4HTzykWF

　○ Yes

　○ No

About you:

2. How many years have you been part of the Senior Leadership Team (SLT) of the school ? *

3. How many Critical Incidents (CI) involving death by suicide of a pupil in a school have you responded to or been involved in? If this has been in different schools please provide this information. *

Thinking about a Critical Incident (CI) response you were involved in:

This will be the CI response involving death by suicide of a pupil in your school which the Educational Psychologist you worked with has discussed with you for the purpose of this research.

4. What support was offered by the Educational Psychologists and if you can recall in what order did the different phases of support occur? *

5. How long was their involvement and was there any follow-up? *

6. What are your thoughts on the length of time of the support which was offered? *

7. Who were your key liaisons at the school and/or who was a part of the CI response team? *

(Names of roles only, please do not mention any names for confidentiality purposes)

8. What are your thoughts on the make-up of the response team? Do you feel any other professionals or staff groupings should have been included? *

9. What steps were taken in the school that you felt were important and/or worked particularly well? *

10. What else would you (the response team) have liked to do, or what would you have liked to do differently? *

11. Is there anything you feel **would** have prepared you better in responding or anything that **did** prepare you well in responding to the CI? *

12. What support did you yourself have access to with regards to the response/support provided to staff/parents/pupils ? *

13. What are your thoughts on the support you or the response team had access to ? *

14. Is there anything else you would like to share or feel is important for Educational Psychologists to know with regards to supporting schools to respond to CIs involving death by suicide? *

Appendix N
School staff questionnaire

- How many years have you been at this school?

- What is your current role? What other roles have you had in this and/or other schools?

- At the time of critical incident (CI) did you find yourself assuming certain roles, if so, what did these/this look like? (This may be related to taking on certain responsibilities?)
  - Was there any support you received which helped you in taking on this role/responsibility?
  - Is there anything you feel would have been additionally helpful?

- Have you worked with an Educational Psychologist before?

  - If so, what is your understanding of their role when a critical incident involving a death by suicide takes place in a school?
  - What support were you aware of that they provided to the school and/or the Senior Leadership Team following the CI?
  - What would you have liked to have known about the support being offered if any?
  - If not, why do you think that might be? What is your understanding of their role more generally?

- What advice regarding how to respond/how to support young people/parents/colleagues following the CI did you receive from Senior Leadership Team and/or EP, if any?
  - Did you receive support as to how to respond from anyone else (external agencies, colleagues, personal connections)?

- What did you feel was most helpful about the response and possible support from SLT and/or EP?
  - What would you have found additionally helpful with regards to this?

- Is there anything else you would like to add that we haven't discussed or that you feel is important for EPs and SLTs to know?

Appendix
Excerpt of transcript

Researcher: I'm just checking in at this point. How are you feeling?

X: Yeah, no I'm okay. Thank you.

Researcher: And in terms of kind of the support that you did receive, did you think, was there anything else in hindsight that you felt would have been additionally helpful to help you take on these responsibilities that you took?

X: I think, I think it was quite valuable what they did and how that was offered. I think that because it was in the staff room and there was, it wasn't just only me, there was a few members of staff that wanted to talk. I think that we were kind of talking in front of lots of people and I felt like maybe like some way of booking in a little slot might be a good idea. But for those that perhaps wanted a bit more of a one-to-one talk and I didn't realise at that time how involved I would be with the students, I suppose so I think like looking back at it now, I think I would have liked maybe another a further conversation with them just to think about how best to support the kids. One of [young person's] friends who stayed with us for a bit, but then [they] just stopped attending, and then we didn't get, we only got [them] back then for exams because it was in their final year. So, I think [they] really struggled and [they were] a worry on my mind in terms of what, what did that look like at home? How was [young person's friend] getting that emotional kind of support? So I think it would have been something to do with maybe more targeted support for the kids, I think would have been quite nice. But again, I don't know whether that they would have offered that anyway or whether that was because I wasn't involved with the conversations with the EP. It was mostly [name of headteacher] or the, [name of SLT member], who I think were mostly involved. And whether they'd offered that, I don't know. But, didn't get reached down to me anyway, but I think I would have liked something like that. I think that would have helped me support the kids a bit more.
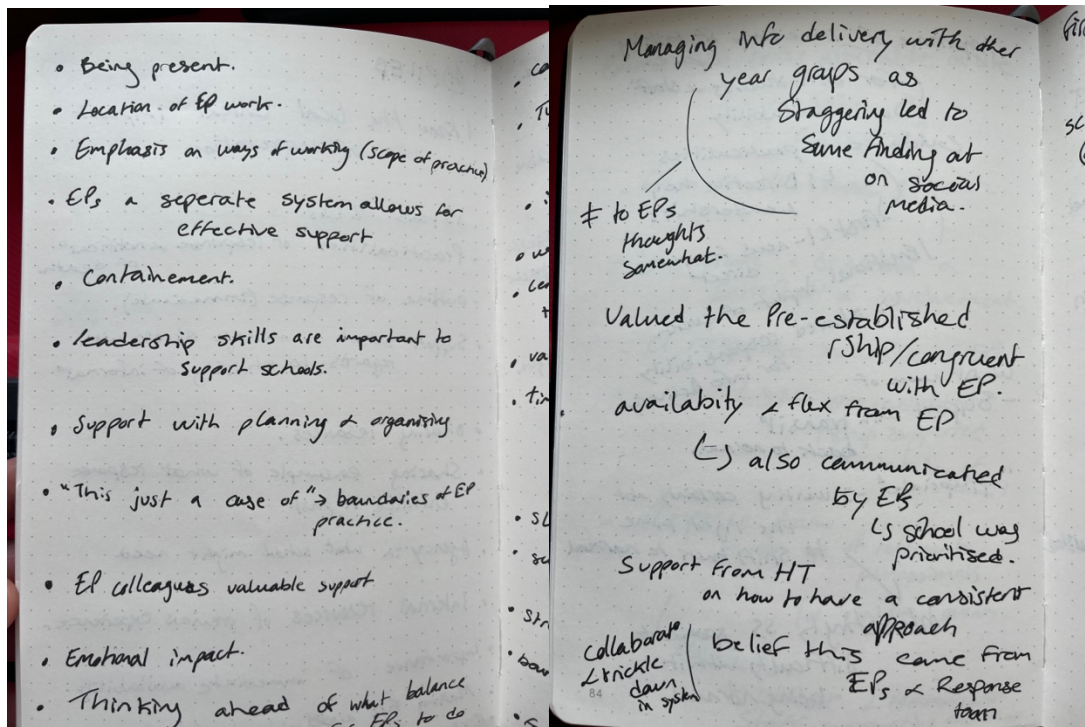
Researcher: That's really helpful.

Sophie: Or even if [EP name] was there, like, when the kids were told something like that because it was. I'm pretty sure it was just me and [headteacher name] and the kids. And then three of them....

Researcher: Sounds as though, like, there was something around kind of sharing that responsibility.

X: Yeah. But also I'm. I'm not like a professional. Looking back, I don't know whether my advice was always like the, you just never know, do you? But obviously you can advise only so much and there, at that age they you know... there's lots of amazing charities out there that were also recommended to me that we could, we could then recommend to the students as well. But I think maybe they would have liked their own little session with [EP name]. I don't know or you know someone from the EP team that might have been quite a good idea.
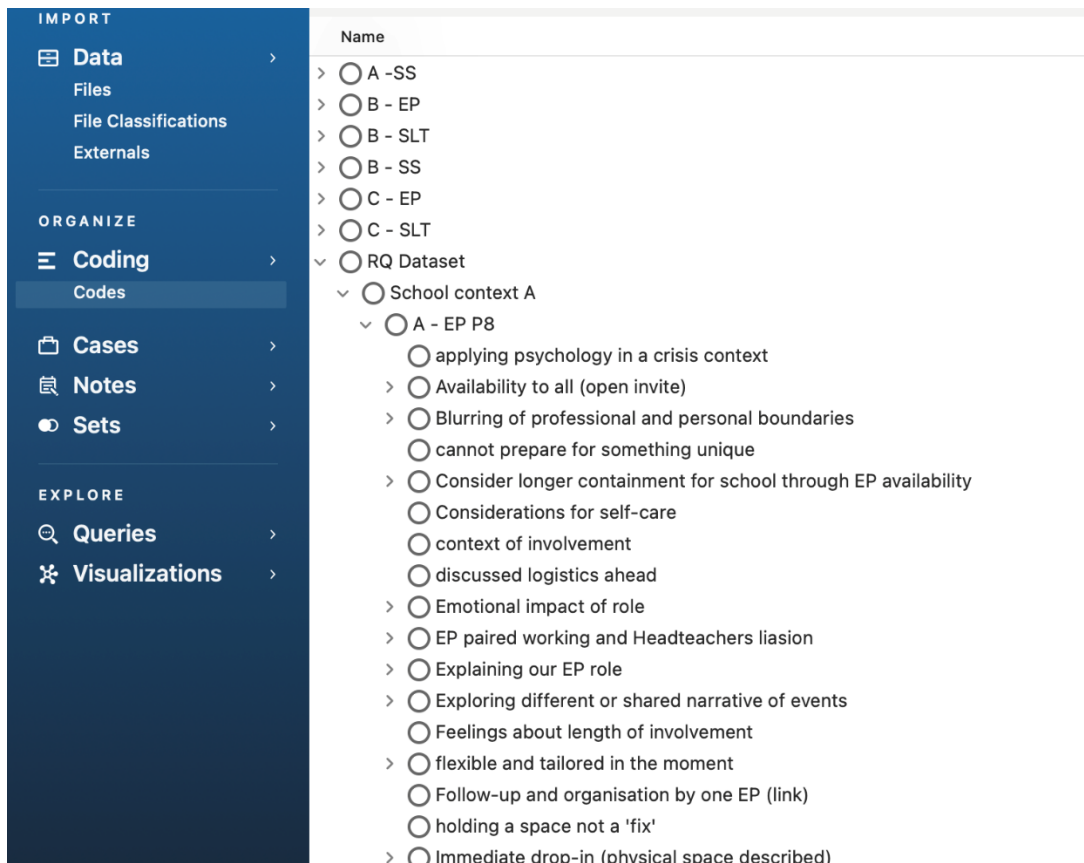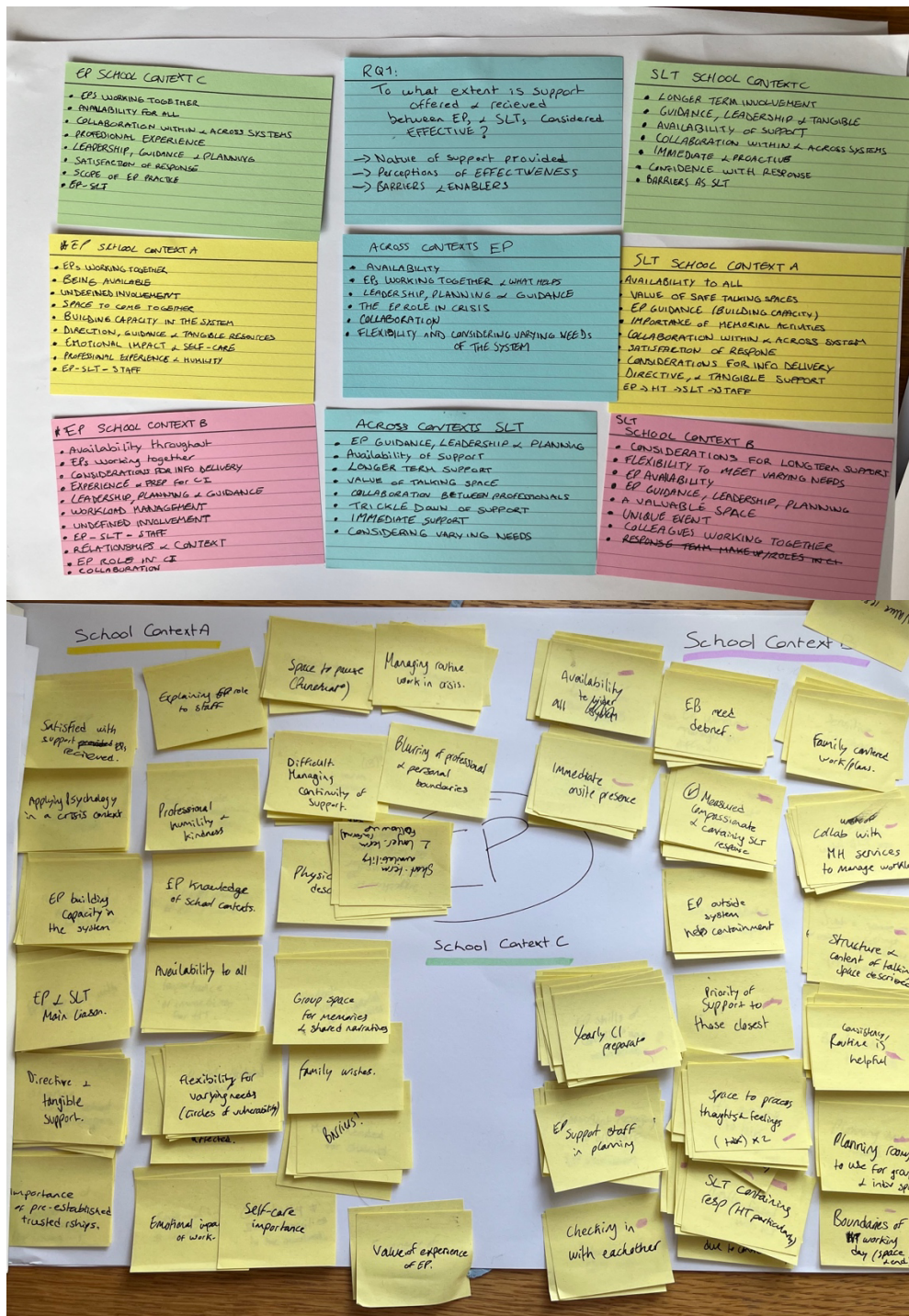
Appendix O
Reflective diary example

Appendix P
NVivo coding example

Appendix Q
Generating initial themes examples

EP SCHOOL CONTEXT C
- EPs WORKING TOGETHER
- AVAILABILITY FOR ALL
- COLLABORATION WITHIN & ACROSS SYSTEMS
- PROFESSIONAL EXPERIENCE
- LEADERSHIP, GUIDANCE & PLANNING
- SATISFACTION OF RESPONSE
- SCOPE OF EP PRACTICE
- EP-SLT

RQ1:
To what extent is support offered & recieved between EPs & SLTs Considered EFFECTIVE?

→ Nature of support provided
→ Perceptions of EFFECTIVENESS
→ BARRIERS & ENABLERS

SLT SCHOOL CONTEXT C
- LONGER TERM INVOLVEMENT
- GUIDANCE, LEADERSHIP & TANGIBLE
- AVAILABILITY OF SUPPORT
- COLLABORATION WITHIN & ACROSS SYSTEMS
- IMMEDIATE & PROACTIVE
- CONFIDENCE WITH RESPONSE
- BARRIERS AS SLT

EP SCHOOL CONTEXT A
- EPs WORKING TOGETHER
- BEING AVAILABLE
- UNDEFINED INVOLVEMENT
- SPACE TO COME TOGETHER
- BUILDING CAPACITY IN THE SYSTEM
- DIRECTION, GUIDANCE & TANGIBLE RESOURCES
- EMOTIONAL IMPACT & SELF-CARE
- PROFESSIONAL EXPERIENCE & HUMILITY
- EP-SLT-STAFF

ACROSS CONTEXTS EP
- AVAILABILITY
- EPs WORKING TOGETHER & WHAT HELPS
- LEADERSHIP, PLANNING & GUIDANCE
- THE EP ROLE IN CRISIS
- COLLABORATION
- FLEXIBILITY AND CONSIDERING VARYING NEEDS OF THE SYSTEM

SLT SCHOOL CONTEXT A
- AVAILABILITY TO ALL
- VALUE OF SAFE TALKING SPACES
- EP GUIDANCE (BUILDING CAPACITY)
- IMPORTANCE OF MEMORIAL ACTIVITIES
- COLLABORATION WITHIN & ACROSS SYSTEM
- SATISFACTION OF RESPONSE
- CONSIDERATIONS FOR INFO DELIVERY
- DIRECTIVE, & TANGIBLE SUPPORT
- EP → HT →SLT →STAFF

EP SCHOOL CONTEXT B
- AVAILABILITY throughout
- EPs WORKING together
- CONSIDERATIONS FOR INFO DELIVERY
- EXPERIENCE & PREP FOR CI
- LEADERSHIP, PLANNING & GUIDANCE
- WORKLOAD MANAGEMENT
- UNDEFINED INVOLVEMENT
- EP-SLT-STAFF
- RELATIONSHIPS & CONTEXT
- EP ROLE IN CI
- COLLABORATION

ACROSS CONTEXTS SLT
- EP GUIDANCE, LEADERSHIP & PLANNING
- AVAILABILITY OF SUPPORT
- LONGER TERM SUPPORT
- VALUE OF TALKING SPACE
- COLLABORATION BETWEEN PROFESSIONALS
- TRICKLE DOWN OF SUPPORT
- IMMEDIATE SUPPORT
- CONSIDERING VARYING NEEDS

SLT SCHOOL CONTEXT B
- CONSIDERATIONS FOR LONGTERM SUPPORT
- FLEXIBILITY TO MEET VARYING NEEDS
- EP AVAILABILITY
- EP GUIDANCE, LEADERSHIP, PLANNING
- A VALUABLE SPACE
- UNIQUE EVENT
- COLLEAGUES WORKING TOGETHER
- RESPONSE TEAM MAKE-UP/ROLES IN CI

Appendix R
Review and descriptive summaries of themes

- This theme captures how...'.

Boundaries of support : Physical spaces, Defining a role and support in a crisis, relational and contextual influences – physical boundaries, contextual boundaries, temporal boundaries

School contexts – differences and commonalities

The EP role in crisis undefined and flexible?

Professional groups perspective differences

EPs (A) – differences in the involvement being define with dates and it being ongoing and undefined. Describing the context within which they provided support (i.e second CI and involvement with supporting the VS too). They speak to the flexibility of the support provided to fit the need particularly with regards to emotional impact on HT. EPs reflected on their role within the response with regards to building capacity (Familiar adults remain and EPs leave), and how they explain/communicate the purpose and potential of their involvement. Description of mixed feelings with regards to involvement and uncertainty of how to define their input with boundaries of time – this remains undefined. Reflected on their wishes of expanding their support to be more available to students. There is an emphasis on an 2 day onsite presence – felt like a pause and to coordinate support before the busyness as such. Importance of holding spaces without clockwatching. Importance of structure and scripts and also holding unscripted/relational availability (Ava -8).

SLTs (A) – Availability continued as an open offer for any staff who required additional support. "I'm sure, however it would have been there if we had requested." Zoe (A), the involvement was not limited by time from my perception" (Mateo (A)). Staff were invited to seek support if they felt they needed it.

Appendix S
Debrief Form

Thank you for participating in our research study.

The aim is to gather the different perspectives on the response/support received by professionals working in/with schools following the suicide of a student. This is to inform the support provided by Educational Psychologists, the senior leadership team and inform how support is received by school staff. The hope is to develop a framework which considers the multiple perspectives in the school community. The research will also aim, by learning from the work that has been undertaken, to provide additional up-to-date evidence to inform local authorities policies and training courses about the critical incident response involving death by suicide.

The research will focus on the response; however, due to the sensitive nature of the topic, you may find distressing emotions/memories may have resurfaced. Information of services participants can be found on the next page.

Your data will remain confidential and anonymous. You are able to withdraw from this study up to the point of data analysis. Should you wish to do so or have any questions please get in touch with me.

If you have ticked the box to receive a brief summary of the research findings and have now changed your mind please email me. Similarly, if you did not tick the box please email me to receive one

If you have any questions about this research, please feel free to contact me:
jdelafargue@tavi-port.nhs.uk
Dr Nikki Collingwood (Research Supervisor) ncollingwood@tavi-port.nhs.uk

Thank you again!

All the best,

Johanna de Lafargue

Information sheet with support services:

Signposting to support services

General information
Mind : mind.org.uk
InfoLine: 0300 123 3393
The Mind InfoLine can help you find specialist services in your area.
Helplines and listening services
Samaritans : www.samaritans.org
24 hours a day, 365 days a year. Call 116 123 (free from any phone).
Shout : www.giveusashout.org
For immediate support text SHOUT to 85258 to chat by text to a trained and supervised volunteer. Free, confidential and available 24 hours a day, 365 days a year.
For more options, visit the Helplines Partnership website for a directory of UK helplines:
www.helplines.org/helplines

Audience	Organisation	Website	Services offered

Anyone	Mind	mind.org.uk	• information resources • online peer support community • information and legal lines • network of around 120 local Minds across England and Wales, delivering a range of community-based peer support, advocacy and support services
	Mental Health Foundation	mentalhealth.org.uk	• conducts practice-informed research, disseminating resources and learning • champions mindfulness through the BeMindful resource and directory
	Rethink Mental Illness	rethink.org	• network of 140 peer support groups • over 200 services, including supported housing, one-to-one help for carers, and group activities for people leaving hospital
	Time to Change	time-to-change.org.uk	• social movement to change attitudes and behaviour towards people with mental health problems to improve • works in schools, workplaces and the community
	Sane	sane.org.uk/what_we_do	• helpline and textcare • online support forum
	NHS England	england.nhs.uk/mental-health	• see website for details of services
	NHS IAPT (Improving Access to Psychological Therapy)	NHS IAPT service search	• see website for details of services
	Hub of Hope	hubofhope.co.uk	• a national mental health database, bringing help and support together in one place, with a focus on grassroots organisations
LGBTQ+	Switchboard	switchboard.lgbt	• helpline: 0300 330 0630 (10am to 10pm every day) • messaging and email service
Men	CALM	thecalmzone.net/help/get-help	• helpline and webchat open daily, 5pm to midnight, for anyone who needs support
	Movember	uk.movember.com	• see website for a range of services and projects aimed at combatting

			premature death in men from suicide, prostate and testicular cancer
Under-25s	The Mix	themix.org.uk	• one-to-one chat and messenger services • discussion boards • information
Condition-specific	Anxiety UK	anxietyuk.org.uk	• self-help group • support to access therapy
	Bipolar UK	bipolaruk.org	• online peer support groups • regional support groups
	Beat	beateatingdisorders.org.uk	• online peer support groups • regional support groups

Appendix T
Brief summary of the study for participants

Participant Summary: Postvention in Schools – Exploring perspectives of different professionals.

Dear Participant, thank you again for taking part in this research exploring how school-based professionals, including educational psychologists, respond to a student suicide. Your insights and reflections were essential in helping to better understand this important and sensitive area of practice.

The aim of the study was to explore experiences of postvention – the support provided after a suicide – and how professionals navigate their roles in emotionally complex school environments. Your contributions have helped to highlight several key themes:

What I found - from the data analysis, several key themes emerged:

- **Postvention as relational and context-sensitive**: Participants described the importance of relationships, communication, and trust. Rigid application of protocols was often seen as limiting, with many emphasising the need for flexibility, compassion, and local understanding.

- **Emotional impact and role tension**: The study highlighted the emotional intensity of this work. Participants spoke of the challenges in maintaining a balance between self-care and upholding professional responsibilities.

- **Leadership and systems support**: There was a vlaue in transparent compassionate leadership, shared responsibility, and psychologically informed environments to support both staff and students in a crisis.

- **Reflexivity and professional development**: Many valued the opportunity to reflect, highlighting a need for more spaces to think, share, and learn from experiences. Ongoing development, supervision, and guidance were seen as essential.

Impact and Next Steps

These findings have been written up as part of a doctoral research project in Educational Psychology and may be shared in presentations or professional publications. The hope is that this research can inform future policy and practice, encouraging reflective, system-sensitive approaches to postvention that honour both professional roles and human connection.
It was a privilege to listen to your insights. The openness and care with which you spoke has shaped a piece of research that seeks to centre the real-life complexities of school-based postvention. Thank you again for your trust, time, and thoughtful contributions.

Kind regards,
Johanna de Lafargue
Tavistock and Portman NHS Trust