



INFORMATION SHEET

Suicide and suicidal behaviour in work-related contexts

Purpose of this information

This information sheet provides guidance for a person conducting a business or undertaking (PCBU) on how to prevent and manage incidents involving suicide and suicidal behaviours within workplace settings or in accommodation facilities connected to the workplace.

Please note this information sheet does not address other forms of self-harm.

If there is a life-threatening situation and a person is at immediate risk of serious harm or death, call 000.

Relevance of suicide and suicide behaviours for a PCBU

Work health and safety laws place obligations on PCBUs towards workers and other people connected to the business' operations. PCBUs have a primary duty of care to eliminate or minimise health and safety risks to workers, as far as is reasonably practicable. They are also responsible for ensuring the health and safety of other people is not put at risk by the business or undertaking's activities. PCBUs must also manage and control psychosocial risks in the workplace.

Suicide and suicidal behaviours – including both suicide attempts and suicidal ideation, where a person has thoughts about taking their own life are complex and deeply personal challenges. These behaviours can arise within workplace environments and accommodation facilities. Various work-related hazards, such as inadequate support systems, may increase the risk of these behaviours.

Work factors that may increase risk of suicide or suicidal behaviours include:

- failing to establish effective systems to identify and control psychosocial hazards (refer to the *Psychosocial hazards in the workplace: Code of practice for more information*)
- managing human resources processes, such as performance management, complaint investigations, or redundancies – without adequate systems

- poor control measures concerning items that could be used by individual for suicide or suicidal behaviours, noting this is particularly relevant in high risk workplaces such as a mental health hospital or prison
- allowing stigmatising attitudes to discourage workers from seeking help for mental health concerns
- workplace designs that give limited opportunities for social interaction among workers
- workplaces or accommodation settings that restrict connectivity with family and friends, particularly in remote locations with inadequate communication facilities
- occupations or work tasks that expose individuals to potentially traumatic events or events that violate an individual's moral beliefs.

Additionally, some personal risk factors lie outside the PCBU's control but, if known or disclosed, should inform risk assessments and control measures.

Some groups of people may face elevated suicide risk due to sustained trauma, racism or discrimination. These include:

- Aboriginal or Torres Strait Islander peoples
- lesbian, gay, bisexual, transgender, intersex, queer or asexual (LGBTIQ+) people
- individuals experiencing relationship breakdowns
- those who are grieving a recent loss or have been exposed to suicide
- people with a history of suicide attempts
- individuals experiencing financial hardship
- those living with pre-existing mental or physical health conditions, or both.

Assessing the risk

In work health and safety, a risk assessment considers the possible outcome of exposure to a hazard and the likelihood of the outcome occurring.

A risk assessment for psychosocial hazards should consider the risk of suicide or suicidal behaviour. Guidance on assessing risks from psychosocial hazards are included in the *Psychosocial hazards in the workplace: Code of practice*.

Risk assessments should also consider any previous incidents of suicide or suicidal behaviours involving workers or others in the workplace, along with other relevant workplace risk factors outlined in the above section, *Relevant of suicide and suicide behaviours for a PCBU*.

Managing the risk

Prevention

Psychosocial hazards must be managed so far as reasonably practicable, as documented in the *Psychosocial hazards in the workplace: Code of practice*. In addition, any physical means of suicide should be secured and controlled where practicable, for example, by safely storing hazardous substances, poisons, or weapons. It is recognised that it is not practicable to secure all potential means of suicide, as items may be required for routine use.

Support

Ensure systems are in place to support workers and other people in the workplace experiencing mental distress or showing signs of suicidal behaviours. In life-threatening situations where someone is at immediate risk of serious harm or death, call 000 without delay.

Support systems may include:

- immediate assistance from peers, supervisors, or support roles, such as psychologists or chaplains, trained in mental health first aid or similar
- referral to medical and psychological professionals
- prioritising treatment of injuries
- access to a mental health service to develop a safety plan.

Details of relevant mental health service providers are listed in the Further information section of this document.

Support should follow trauma-informed principles, respecting the affected person's preferences and ensuring confidentiality in managing mental health concerns.

Additional considerations include:

- making mental health support service information easily accessible in the workplace
- providing reasonable accommodations, such as flexible work schedules or approved leave, for workers experiencing distress or poor mental health
- providing suitable training for workers in relation to mental health awareness, mental health first aid or peer support, informed by the workplace risk assessment.

Incident response

PCBUs must have an emergency plan in place, which should include a specific response for suicidal behaviour or suicide if it is a foreseeable risk. Factors that may increase foreseeability include the nature of the industry or work arrangements, previous incidents involving suicide, suicidal behaviour or mental health crisis, or high psychosocial risks.

The emergency plan should outline how to support all individuals affected by the incident.

Following a suicide or suicidal behaviour incident, the PCBU should conduct a trauma-informed investigation to identify any contributing work-related factors and opportunities to improve prevention, support or response systems. The investigation process should be sensitive to the needs of witnesses and everyone affected and avoid requiring them to repeat their accounts multiple times, as this can increase the risk of further harm.

The investigation should focus on issues within the PCBU's control and respect the individual's privacy with respect to non-work related factors.

Reporting requirements

Any worker death at a worksite should be treated as work-related. Even if the cause appears non-work related, such as a fatal heart attack, work conditions may have contributed and the incident should be reported.

PCBUs are required to:

- report a 'notifiable incident' arising from the conduct of the business or undertaking to the regulator immediately after becoming aware of it, using the fastest possible means
- submit written notification within 48 hours, if requested by the regulator

- preserve the incident site until an inspector arrives or provides other directions, unless an exception applies.

An attempted suicide at a mine or place associated with a mine (such as mine workers' accommodation) is a reportable incident.

If there is doubt as to whether the death is work-related, the regulator should be notified.

The death of a non-worker at a workplace is notifiable.

More information can be found within the [Incident notification: Interpretive guide](#).

The role of WorkSafe

WorkSafe is responsible for receiving and responding to notifications regarding work-related suicides and suicidal behaviours. As a risk-based regulatory body, WorkSafe determines which cases require investigation in line with its [Compliance and enforcement policy](#). An educational approach is adopted for matters not referred for investigation.

All reports are systematically recorded and analysed to support ongoing compliance and prevention efforts.

When WorkSafe investigates a reported incident, the focus is on the workplace's systems to manage psychosocial hazards via relevant controls and the adequacy of the emergency response. Based on the investigation findings, WorkSafe may take a range of actions, including:

- providing guidance to the workplace
- issuing notices requiring certain actions or improvements to systems
- collecting evidence for a potential prosecution.

Further information

Crisis lines		
Organisation	Availability	Contact number
13Yarn	24 hours, 7 days a week specifically for Aboriginal and Torres Strait Islanders	13 92 76
Beyond Blue	24 hours, 7 days a week	1300 224 636
Kids Help Line	24 hours, 7 days a week, for people aged 5–25	1800 55 1800
Lifeline	24 hours, 7 days a week	13 11 14
Mates in Construction / Mates in Mining	24 hours, 7 days a week	1300 642 111
MensLine	24 hours, 7 days a week	1300 789 978
Mental Health Emergency Response Line	24 hours, 7 days a week for crisis support	1300 555 788
Q-Life	15:00 – midnight, 7 days a week for LGBTQIA+ people	1800 184 527
Rural link	Afterhours (16:30 – 08:00)	1800 552 002

StandBy	06:00 – 20:00, 7 days a week. For those impacted by suicide	1300 727 247
Suicide Call Back Service	24 hours, 7 days a week	1300 659 467

**Department of Local Government, Industry Regulation and Safety
(WorkSafe Western Australia)**

- [Psychosocial hazards in the workplace: Code of practice](#)
- Enquiry telephone line: **1300 307 877**
- Reporting a workplace incident: **1800 678 198**

Western Australia Police

- WA Police website www.wa.gov.au/organisation/western-australia-police-force
- Emergency Line: **000**
- Police Assistance: **131 444**