

Student Safeguarding Protocol

Introduction: Aims

The School has a duty of care for all students while they are studying on its programmes. That duty is to protect, with appropriate measures, their health, wellbeing and human rights so they are free from harm, abuse and neglect. This includes responding to on-site emergencies and supporting students experiencing mental health difficulties, helping them access appropriate support so they can engage fully and thrive throughout their studies..

All members of staff (both professional services and academic staff) are responsible for safeguarding students and should act and respond whenever and wherever concerns are observed. **If you have any concerns about a student**, it is important that you refer the matter straightaway. Please get in touch with Wellbeing Services (studentwellbeing@london.edu previously wellbeing@london.edu) or contact the relevant Programme Team.

Student-facing staff (Programme Teams, Career Centre, Wellbeing Services, Global Experiences) are expected to undertake suicide prevention training and familiarise themselves with this Protocol.

While it is a duty of the School as a whole to ensure a safe environment for all, it is a joint responsibility of staff in Programme Teams and Wellbeing Services to directly respond to, assess risk and address concerns around student welfare. Staff from other parts of the School (both professional and academic) who may have interacted with the student or raised their concerns about a student may be asked to join a safeguarding or case panel meeting. Security may also be called to support and act in cases of emergency (see **Safeguarding Protocols, Section 1: Emergencies**, page 7).

All concerns should be explored and shared as appropriate and this Protocol aims to outline how this should be done.

This procedure guides staff in the steps they need to initiate in making a meaningful response when a student's difficulties impact in adverse and significant ways on their engagement with their programme.

Some possible examples where a student might cause us to be concerned include:

- They behave very differently, are withdrawn or unresponsive.
- Their behaviour – over time, or in a particular incident – creates valid worries in those around them.
- They fail to engage with their programme of study and with others.
- They are not attending teaching or programme activities and fail to respond to communications.

- They are ill and there is a requirement for further support to be made available to them.
- They may be engaging in harassing behaviour towards other members of the community.
- They may have been subjected to harassment (this includes online bullying and harassment).
- Their behaviour causes valid health and safety concerns within the School.

Confidentiality

Every member of staff is required to treat all personal information confidentially when involved in supporting students; it is a cornerstone of any work with a student causing concern. Confidentiality is contained between the student and the members of staff directly supporting them (i.e. confidential information will be contained within the relevant Programme Team). Sharing information with others either within the School or with external services is done only with the student's consent, except for in emergency situations. Where the School has concerns that the student is at risk of harm to themselves or others we might reach out to their Emergency Contact. Please refer to the **Consent to Contact Policy and Procedure** which lists the kinds of risk that might require this response and the steps that staff will need to follow.

Where there are worries around breaking confidentiality, Wellbeing Services can advise, and specific concerns can be discussed anonymously.

Where the judgment of those supporting the student determines there is a significant risk, they will act directly on the perceived safety and welfare concerns. Where there is perceived risk to life, for example there is knowledge of suicide ideation or self-harm, those working with the student will need to prioritise the welfare of the student above the preferences of that student. If it is thought that the student presents immediate danger to themselves or to others it will be necessary to override their confidentiality to keep them safe. In such cases, this will be done in consultation with the relevant Lead Safeguarding Officer, as well as the Designated Safeguarding Lead/Co-Lead.

Safeguarding Roles and Responsibilities

Safeguarding Roles	Name & email address	Role
Designated Safeguarding Lead	Diana Favier dfavier@london.edu	Director, Wellbeing Services
Designated Safeguarding Co-Lead	Jane Charlton jcharlton@london.edu	Executive Director, Programmes & Student Experience
Deputy Designated Safeguarding Lead	Harriet Alexander halexander@london.edu	Senior Manager, Wellbeing Services
Lead Safeguarding Officer (MIM, MFA, MAM)	Kira Vorre kvorre@london.edu	Programme Director, Graduate Masters Programme

Lead Safeguarding Officer (MIFFT & MIFPT)	Robert Pinkerton rpinkerton@london.edu	Programme Director, MIF
Lead Safeguarding Officer (MBA)	Oliver Ashby oashby@london.edu	Programme Director, MBA
Lead Safeguarding Officer (EMBA London)	Hannah Daniels hdaniels@london.edu	Programme Director, EMBA London
Lead Safeguarding Officer (EMBA Dubai)	Zara Noor Kamileen znoorkamileen@london.edu	Programme Director, EMBA Dubai
Lead Safeguarding Officer (SLOAN and EMBA Global)	Bryony Murdoch bmurdoch@london.edu	Programme Director, SLOAN & EMBA Global
Lead Safeguarding Officer (PhD)	Claire van der Vegt cvandervegt@london.edu	Associate Director, RFO
Safeguarding Officer (Degree Programmes & PhD)	Riccarda Foster rfoster@london.edu	Student Wellbeing Advisor
Safeguarding Officer (Degree Programmes & PhD)	Monica De Freitas mdefreitas@london.edu	Student Wellbeing Advisor
Safeguarding Officer (Community)	Gauri Ghosalkar gghosalkar@london.edu	Community Wellbeing Advisor

Designated Safeguarding Lead and Designated Safeguarding Co-Lead (DSL)

- To be available as the escalation point where concerns are identified and to support decision-making in safeguarding meetings, when needed.
- Ensure training for themselves and staff is up to date (e.g. Prevent, Mental Health First Aid, Safeguarding and Supervision as appropriate), including the legal context and an awareness of procedures.
- Advise upwards, keeping senior management informed e.g. when policies need to be updated or if the expectations of the institution change.
- Advise senior management of the wellbeing needs of staff in student-facing roles and if resourcing levels do not meet the needs of the student population.
- Check that records are up to date, accurate and well detailed, this includes making sure minutes are taken for every meeting.
- Ensure effective and appropriate action plans are put in place to safeguard our students.
- Ensure that tracking systems are effective in recording cases that are live and closed.
- Improve outcomes for those students experiencing trauma or adversity.
- Ensure that we partner with other professional organisations and refer to them when needed.
- Ensure policies and procedures are reviewed annually.

Deputy Designated Safeguarding Lead (Deputy DSL)

- Ensure the responsibilities are being delivered in line with the Safeguarding Protocol.
- Provide guidance to Lead Safeguarding Officers.
- Support the drafting of effective and appropriate safeguarding plans.
- Provide reports to Designated Safeguarding Leads.
- Ensure training for themselves and staff in Wellbeing Services is up to date (e.g. Prevent, Mental Health First Aid, Safeguarding and Supervision as appropriate), including the legal context and an awareness of procedures.
- To Deputise for the DSL and Co-Lead as required.
- Support the annual review and re-drafting of associated policies and procedures.

Lead Safeguarding Officer (LSO)

- Maintain overall responsibility for Safeguarding panels and plans in the Officer's respective academic programmes.
- Ensure training for themselves and staff in their team is up to date (e.g. Prevent, Mental Health First Aid, Safeguarding and Supervision as appropriate), including an awareness of procedures.
- Act as a point of contact for those who have a Safeguarding concern, receive information, assess risk to the individual, ensure those concerns are recorded.
- Draft effective and appropriate safeguarding plans.
- Ensure appropriate records are kept of any safeguarding incidents or case panel meetings for students in their respective programmes.
- In the case of serious risk, i.e. where there is perceived threat to life, complete the risk assessment template and consult with the Designated Safeguarding Leads.
- Investigate and act upon concerns as appropriate, including seeking advice or making a referral to external partners such as to the GP surgery where the student is registered or to Social Care (see section on Domestic Abuse).
- Provide information and advice to staff in their team in respect of their Safeguarding responsibilities.
- Report arising concerns and advise the DSL on any process improvements needed.
- Support the annual review of associated policies and procedures.
- Report arising Prevent concerns to the DSL.
- Support the Deputy DSL with data collation and insights for reports, including the number of cases and the types of presentation.
- Cover the duties of other LSO when they are on leave or otherwise not available.

Safeguarding Officers

- Ensure training for themselves is up to date (e.g. Prevent, Mental Health First Aid, Safeguarding and Supervision as appropriate), including the legal context and an awareness of procedures.

- Act upon concerns as appropriate, including setting up a safeguarding panel on behalf of the LSO or making a referral to external partners such as to the GP surgery where the student is registered or to Social Care (see section on Domestic Abuse).
- Act as a point of contact for those who have a Safeguarding concern, receive information, assess risk to the individual, ensure those concerns are recorded and inform the relevant Lead Safeguarding Officer
- Provide specialist knowledge and guidance, including their assessment of risk and any other information, related to the student that will support the panel in drafting safeguarding plans.
- Support the annual review of associated policies and procedures.

Limits and boundaries

School staff need to be mindful not to attempt too much. In seeking to assist students in difficulty it is possible to overreach the limits of helping, particularly where a student may be at risk of harm or harming others. Our role should be to help the student to quickly access professional help that is adequate to the severity/complexity of their difficulties and advise them to engage in the management of those difficulties.

It is not appropriate for the School to act as guardian to a student. Students are required to provide details of a person who can be contacted in an emergency when they start their programme. In rare circumstances it may be necessary to communicate with the Emergency Contact. The need to contact the Emergency Contact should be discussed and decided in a Safeguarding meeting, it is the responsibility of the relevant Programme Director (LSO) to action this. See ***Consent to Contact Policy and Procedure***.

Action required

- Programme Teams to share the School **Consent to Contact Policy and Procedure** with students at the beginning of their programme of study.
- Programme Teams will run regular checks in SchoolDB to identify and contact the students who have not provided the information.
- The checks will be run monthly during the first term of the programme, to ensure that all students have updated the information.
- Students are required to keep their details updated, including next of kin information, in Portal, the School's intranet, which in turn updates SchoolDB.

Recognising difficulties are normal

Staff should bear in mind what is normal and expected in day-to-day living. It can be challenging to establish at what point behaviours shift from being part of the everyday stresses and difficulties of life to becoming something that causes concern. It may be the severity of a particular behaviour, or the repetition of less intense behaviours that may generate concerns which require a response.

Wellbeing Services (WS) arrange reasonable adjustments for students where appropriate, and students can self-refer and be referred to the service, with their consent, at any point during their studies (please refer to the **Reasonable Adjustments Arrangements policy**). There is more information about [Wellbeing Services](#) and the resources available to students on the School's website.

Domestic abuse (comes under the UK Care Act 2014 and Federal Decree Law, No 13 of 2024 on the Protection Against Domestic Violence)

In the UK, where an adult is experiencing domestic abuse, any referrals or action taken must be the decision of the adult. However, if the adult is considered vulnerable, they are unable to protect themselves against harm or they cannot be reached by phone, the School may contact the police to request a [Welfare Check](#).

Where the adult experiencing domestic abuse has a child and lives in the UK, the School must follow its legal obligations in relation to the child and refer the matter to the local authority's Child Protection Services.

[Report child abuse to a local council - GOV.UK \(www.gov.uk\)](#)

In the UAE, the School must report the case to the Ministry of Education - Child Protection Unit. To report a child abuse case, call either the MoE's Child Protection Unit on their dedicated number 80085 or the Ministry of Interior's Child Protection Centre on 116111 or email the report to CPU@moe.gov.ae with supporting documents, if any.

Read more on the ['Child Protection Unit' initiative](#).

Under Article 5 of the Law, reporting domestic violence is now an obligation on anyone who becomes aware of it, especially individuals in the field of healthcare, education and related services.

Incidents of domestic violence are to be reported to social support centres or other competent authorities, unless it involves physical or sexual violence, in which case, it must be immediately reported to the police.

Recognising impact on others

The School has a duty of care to ensure all students are safeguarded from distress or harm by the behaviour of other students. A student who is judged to be disrupting the wellbeing and progress of other students may give cause for concern and therefore this procedure would be invoked (see examples on page 1). In other cases, it may be necessary to follow the Student Disciplinary Procedure, as appropriate.

Safeguarding Protocols

1. Emergencies

Where student behaviour gives cause for serious and immediate concern – on campus - such as:

- Indicating immediate and significant risk to the student or others.
- Active talk of suicide, e.g. active plans to end their life.
- Student needs urgent medical attention.
- Student at clear risk of harm from others.
- Seeming out of touch with reality e.g. hallucinations, hearing voices.

What to do:

In the UK, contact the emergency services by calling **Security:**

Sussex Place: ext. 7888/ 020 7000 7888 / 07966 907 888

Sammy Ofer Centre: ext. 6888/ 020 7000 6888

In the UK, if there is a delay in getting through to Security, call **999** and inform Security as soon as possible afterwards.

In Dubai, contact the emergency services by calling **DIFC Security** on **+97143622299**.

In Dubai, if there is a delay in getting through to Security, call **998 for an ambulance or 999 for police**, and inform Security as soon as possible afterwards.

Security staff in both London and Dubai are First Aid trained; they will call the emergency services and will provide first aid (if required) while waiting for the emergency services to arrive.

The member of staff who is made aware of the emergency/serious & immediate risk has responsibility for following the procedure to the end/or the point at which the student has been passed on to the emergency services.

The member of staff will notify the relevant Lead Safeguarding Officer (LSO) or Wellbeing Services, who will ensure a **Safeguarding Panel** (see section 5) is convened, will decide who should attend and will complete a safeguarding assessment. **See Appendix 2 Set up a Safeguarding Panel meeting.**

If the relevant LSO is unavailable, another LSO from a different Programme Team will assume responsibility for the case in their absence.

The Safeguarding Panel will decide when and how to contact the student's Emergency Contact and agree any action plans. See **Consent to Contact Policy and Procedure**.

2. Urgent response situations

A situation that demands an immediate response and follow-up but does not require emergency services.

Examples of serious concern:

- the student is safe from immediate risk but there are indications or a history of suicidal ideation or self-harm, though no active plan
- the student appears very distressed
- the student/ their behaviour is causing high levels of concern to friends, colleagues, Programme Team.

What to do:

Signpost the student to 24hr emergency support.

If those involved in the situation are not confident in assessing whether the situation is an actual emergency, it is out of hours and no other appropriate staff are available, call Security (in London: **Sussex Place: ext. 7888/** 020 7000 7888 / 07966 907 888 and **Sammy Ofer Centre: ext. 6888/** 020 7000 6888 **or** in Dubai **+97143622299** who should then call 999 in London or 998/999 in Dubai.

- The staff involved should then inform the relevant Lead Safeguarding Officer or Wellbeing Services, who will ensure a **Safeguarding Panel** (see section 5) meeting is convened and decide who should attend. (**See Appendix 2** Set up a Safeguarding Panel meeting)

If the relevant LSO is unavailable, another LSO from a different programme will assume responsibility for the case in their absence.

3. Ongoing concerns

Ongoing concerns may be a result of an urgent incident or accumulated concerns.

Ongoing concerns must be shared within the relevant Programme Team and not be kept confidential by the member of staff or faculty who has knowledge of the situation. The Programme Director (LSO) will decide who needs to be kept informed of any concerns.

Examples of issues causing ongoing concern which are not an emergency or urgent incident:

- failure to engage with the programme, not turning up to meetings, exams, sessions
- excellent academic performance at the start of the programme followed by significant drop in grades
- poor academic performance
- poor health
- sleeping on campus
- continuous falling asleep during the day
- repeated complaints, feeling persecuted (i.e. IT not working for them)
- serious study group issues
- other people sharing concerns

What to do

Programme Team staff who are aware of an ongoing concern will escalate to their Senior Manager and/or Programme Director. The Programme Director may consult with Wellbeing Services to confirm if the student is registered with them. If the student is not known to Wellbeing Services, the Programme Team will encourage the student to reach out to them for support or, with the student's consent, connect them with Wellbeing Services via email.

If Wellbeing Services have an ongoing concern, they will escalate to the relevant Senior Manager and/or Programme Director.

Ongoing concerns may require a **Case Meeting** (see section 6, page 10).

Where the ongoing concern is assessed as an emergency or urgent incident and there are concerns about a student's safety, a Safeguarding Panel will need to be convened (See **Appendix 2** *Set up a Safeguarding Panel meeting*).

4. When students fail to respond to contact

Where students we are concerned about fail to respond to contact, friends and peers of the student may be asked. If it is not possible to verify their welfare and there is knowledge of serious risk, the relevant Programme Director may contact the student's Emergency Contact, which the student would have provided at the beginning of their programme (*Refer to **Consent to Contact Policy and Procedure***). If the student's welfare is still not verified, and the Emergency Contact cannot be contacted/does not respond, this may become a police matter. The Programme Director will need to call Police on 999 who will assess whether a welfare check at the student's address is required. In Dubai, call 999 for police. Dubai police can respond to situations where there is concern about a person's safety.

If concerns around mental health and wellbeing persist, the Programme Director (LSO) in consultation with the DSLs and the Wellbeing Services will consider whether to invoke the Fitness to Study Policy (**Wellbeing Services page on Canvas**).

5. Safeguarding Panels

Key people

The student's Programme Director, in their role as Lead Safeguarding Officer (LSO) and members of the Wellbeing Services team will normally form the foundation for the students' pastoral support and safeguarding plan. Other members of staff may also become involved depending on the details of the case, the following list is not exhaustive:

- Other Programme Team staff
- Designated Safeguarding Lead
- Designated Safeguarding Co-Lead
- Deputy Safeguarding Lead

- Relevant Academic Director, in instances where academic progression may be impacted.
- Relevant Career Coach or Student Counsellor
- Head of Quality Assurance
- Associate Dean, Programmes
- Deputy Dean, Programmes
- School Secretary

Where there are concerns about a student's safety, including concerns relating to suicide or self-harm, the Programme Lead Safeguarding Officer (LSO) will complete a safeguarding assessment to gather relevant information, consider the student's current circumstances and determine whether a Safeguarding Panel should be convened. The Lead Safeguarding Officer will seek advice from the Designated Safeguarding Leads (DSLs) or the Deputy DSL as appropriate.

The **Safeguarding Panel** will discuss concerns and agree a course of action. The Panel should be comprised of: the relevant programme Lead Safeguarding Officer (LSO) and another member of the programme team who is close to the student case; a member of staff representing Wellbeing Services, which will likely be the member of staff in Wellbeing Services supporting the student. Depending on the case, the relevant programme LSO may wish to invite other members of staff listed above.

The LSO will consult with DSLs to decide if the following people should be included Head of Quality Assurance, Deputy Dean, Programmes, School Secretary.

Please refer to:

- Appendix 1 - Safeguarding Reporting Process
- Appendix 2 – Setting up a Safeguarding Panel meeting
- Appendix 3 - Emergency and 24-hour support
- Appendix 4 - Guidance on how to deal with a situation where a member of staff has a virtual appointment with a student who discloses plans to end life.
- Appendix 5 - Suicide pathway model and risk factors

6. Case meetings

Where the ongoing concern is less urgent, i.e. there are no immediate concerns about the student's safety, a case meeting may be called to discuss the issues and to provide a prompt response. The case meeting will include: the relevant Programme Director and Programme Manager and a member of Wellbeing Services, if required.

If the matter is affecting the student's academic progression, the relevant Academic Director and a member of the Quality Assurance team may also need to be included.

In setting up a case meeting:

- Create a private outlook calendar invite, subject line 'Case Meeting, student number'.

- Set up a Case Meeting record on MTeams under the relevant programme, with the student LBS number as a title.
- Grant access to the Case Meeting channel for this student to those required for the panel only, which includes the Lead Safeguarding Officers, Programme Team staff and a Wellbeing Services representative, if required.
- PT staff will record a summary of the meeting on the channel.

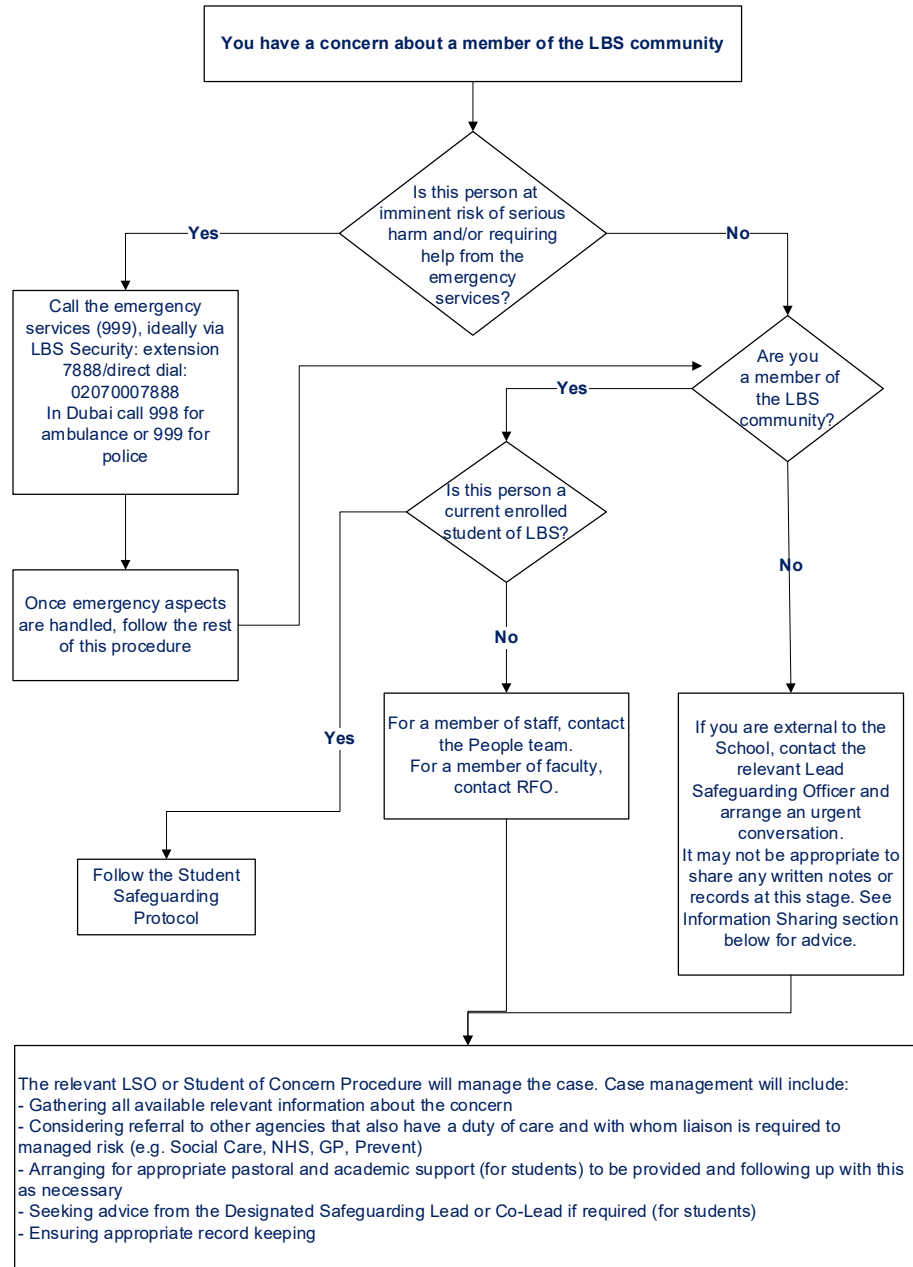
Prepare the following for the meeting:

A summary of issue: a high level summary of key concerns and information that is helpful to agreeing an appropriate safeguarding plan.	PT staff, WS
Student transcript and anything else that highlights academic performance and completion of degree and programme requirements.	PT staff
Attendance records to show whether the student has been engaging with all aspects of their programme, including careers events, coaching and interviews.	PT staff

7. Advice on information sharing for safeguarding concerns and record keeping

- Share only the relevant facts of the case, limiting information to what is necessary to inform decision-making.
- Ensure any notes or reports relating to the safeguarding concern are stored appropriately, which includes access for only those that need it, storing only what is needed, and ensuring data is used only for the intended purpose (safeguarding).
- Share records in a secure manner.
- Keep a record of all the steps you have taken and the reasons for it, ensuring this is stored securely.

Safeguarding Reporting Process



Appendix 2

Setting up a Safeguarding Panel meeting

Supporting assessment of student wellbeing concerns and agreeing proportionate actions

Staff should follow this template for emergency or urgent response situations where there is perceived risk of suicide or knowledge of self-harm.

This template supports safeguarding discussions where there are concerns about a student's wellbeing, safety, engagement or ability to continue with their studies. The purpose of the meeting is to develop a shared understanding of the situation, consider immediate concerns, identify protective factors and agree proportionate actions and follow-up responsibilities.

The discussion should remain focused on the student's current circumstances, support needs and appropriate next steps. Avoid categorising students according to levels of risk; instead, consider the nature of the concern, any immediate actions required and the support available.

Meeting set-up

Task	Responsibility
Notify the Lead Safeguarding Officer (LSO) of the safeguarding concern.	Staff member raising the concern
The LSO determines whether a Safeguarding Meeting should be convened.	Lead Safeguarding Officer
Identify attendees (minimum of three members – see Section 5).	Lead Safeguarding Officer
Confirm the availability of meeting attendees.	Programme Team

Create a Private Outlook meeting invitation with the subject line: Safeguarding Meeting – [Student Number] .	Programme Team
Create a dedicated Microsoft Teams safeguarding channel within the relevant Programme Team using the student's LBS number as the title.	Programme Team
Restrict access to the Teams channel to meeting attendees only (Lead Safeguarding Officer, Designated Safeguarding Lead or Deputy DSL, Programme Team representatives and Wellbeing Services). Tag members to ensure notifications are 'on' when setting up the meeting.	Programme Team

What to prepare

Information to prepare	Responsibility
Prepare a brief summary of the concern using high-level information only (for example, a history of abuse, recent self-harm, or a significant deterioration in wellbeing or behaviour).	Programme Team /Wellbeing Services
Prepare a summary of the safeguarding assessment completed by the Lead Safeguarding Officer, where applicable.	Lead Safeguarding Officer
Student transcript and any relevant information regarding academic progress, progression and programme requirements.	Programme Team
Attendance and engagement information, including teaching sessions, careers activities, coaching appointments and other relevant programme engagement.	Programme Team

Emergency contact details (if recorded).	Programme Team
Whether the student is known to Wellbeing Services, including any current or recent engagement with counselling or wellbeing support.	Wellbeing Services
Whether the student is registered with a GP (where known).	Wellbeing Services

Meeting template

Discussion area	Possible considerations/actions	Agreed actions	To be completed by	By when
Background and context				
Summary of completed assessment	LSO to provide a summary of the completed wellbeing/safeguarding assessment and relevant information gathered.			
Context of the concern (high-	Consider relevant background information, for example: history of self-harm, previous mental			

level summary only)	health concerns, significant life events, health concerns, bereavement, relationship difficulties or other relevant circumstances.			
Current concerns and indicators requiring attention				
Summary of current concerns	Consider factors such as: • Changes in academic performance or risk of programme failure • Failure to attend teaching sessions • Failure to attend meetings with Wellbeing Services, Personal Tutor or counsellor • Failure to attend Programme Office briefings, careers or coaching sessions • Reduced engagement with study groups or peers			

Additional information to consider	Review relevant sources of information, where appropriate: • Engagement in clubs and activities • Canvas or learning platform engagement data • Other relevant engagement indicators			
Other factors requiring consideration	Consider relevant factors outlined in Appendix 4 (where applicable).			
Immediate actions and response				
Consideration of immediate support needs	Does the situation require immediate contact with the student? Is there a need to contact an emergency contact (where appropriate and in line with confidentiality considerations)?			

	Is a welfare check request to external services required?			
Emergency response considerations	If there is concern that the student may be at immediate risk of harm, follow the relevant emergency and safeguarding procedures.			
Resolution and ongoing support plan				
What would help resolve or stabilise the situation?	Identify the actions needed to support the student and address immediate concerns.			
Adjustments and academic support	Consider whether immediate adjustments are required. Examples: temporary workload adjustments, flexibility around deadlines, or changes to elective/module commitments where appropriate.			

Retrospective adjustments	Consider whether retrospective adjustments may be required. Consult the Academic Director for approval where relevant, particularly where there may be implications such as expunging a fail or changing academic outcomes.			
Interruption of studies	Consider whether an interruption of studies should be explored. Refer to the Fitness to Study Policy where appropriate.			
Counselling or wellbeing support	Consider whether referral to Student Counselling or other wellbeing services would be appropriate.			
Protective factors and existing support				
Current support network	Consider what support the student already has access to: • Are they known to Wellbeing	Agree what ongoing support		

	Services? • Are they currently accessing counselling? • Are they registered with a GP? • Do they have supportive family members? • Do they have supportive friends, partners or housemates?	is proportionate and necessary.		
Engagement with existing services	Where appropriate and with appropriate consent, consider whether relevant professionals can contribute information about the student's current presentation and support needs. This may include counsellors, healthcare professionals or other relevant support providers.			
Emergency contact information	Consider whether an emergency contact is recorded and whether the student has provided permission for contact in circumstances where there is serious concern for their safety.			

Safety planning	Has the student completed a Safety Plan with Wellbeing Services? Consider: • Have they identified sources of support? • Do they have plans to see anyone over the weekend or during periods of concern? • What are their immediate plans and routines?			
Signposting and resources				
24/7 support information	Has the student been provided with information about organisations offering 24/7 support? (Refer to Appendix 3, Emergency and 24-hour support)	Confirm whether information has been sent and recorded.		
Wellbeing resources	Has the student been directed to relevant Wellbeing webpages and resources?	Confirm whether information has been sent and recorded.		

Meeting outcome summary

Summary of concerns discussed:

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Agreed actions and rationale:

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Follow-up arrangements:

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Date for review (if required):

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Attendees:

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Appendix 3

Emergency and 24-hour support - UK

If you're in immediate danger of hurting yourself or others:

- Go directly to the Accident & Emergency (A&E) department of [your local hospital](#) to get help.
- Call 999 to request an ambulance if you are unable to reach the hospital yourself.

If you're distressed and you need urgent support:

- Contact your GP surgery to request an emergency appointment.
- Call the NHS medical line on 111.
- Call the [TalkCampus 24hr phoneline](#) to speak to a counsellor anytime you need to. You can choose the language you feel most comfortable using and it's all totally anonymous. Download the app for free using your LBS email address and call via the sidebar of the app. If you're outside of the UK, you can find your local number to call [here](#).
- Call the [Samaritans](#) on 116 123 to talk to someone confidentially at any time, day or night.
- Download the free [Stay Alive app](#) for signposting information and a toolkit to help you stay safe in a crisis, including grounding techniques and a personalised safety plan.

Emergency and 24-hour support – Dubai

If you're in immediate danger of hurting yourself or others:

- Go directly to the Emergency Department of your nearest hospital to get help.
- Call 998 to request an ambulance, or 999 for Police, if you are unable to reach a hospital safely yourself.

If you're distressed and you need urgent support:

- Call the Dubai mental health support hotline on 800506 (Itma'en) to speak to a qualified mental health professional for confidential psychological guidance and initial support.
- Call the [TalkCampus 24hr phoneline](#) to speak to a counsellor anytime you need to. You can choose the language you feel most comfortable using and it is completely anonymous. Download the app for free using your LBS email address and call via the sidebar of the app. TalkCampus is available worldwide.
- Download the free [Stay Alive app](#), a suicide prevention resource with tools including a personalised safety plan, grounding techniques and information to help you stay safe in a crisis. The app is available worldwide and can be used in Arabic and other languages. It is available through the Apple App Store, Google Play and as a web app.

Appendix 4

If your interaction with the student takes place virtually, e.g. on a Zoom/Teams call, and the student speaks of plans to end life

The member of staff should remain on the call with the student and guide them to seek help. This may include:

- Encouraging the student to call their GP or local mental health team to arrange an emergency appointment, and waiting while they make the call.
- Encouraging the student to call the NHS line on 111
- In Dubai, encouraging the student to the Dubai mental health support hotline on 800506 (Itma'en) to speak to a qualified mental health professional for confidential psychological guidance and initial support.
- Encouraging the student to call the emergency services
- If the student is unable to call the emergency services, the member of staff, will make the call and send the emergency services to the student's address.

If the student is not based in the UK, the member of staff may need to search online what emergency services and suicide prevention helplines are available where the student is and encourage the student to use them.

After de-escalation of the situation, the member of staff will:

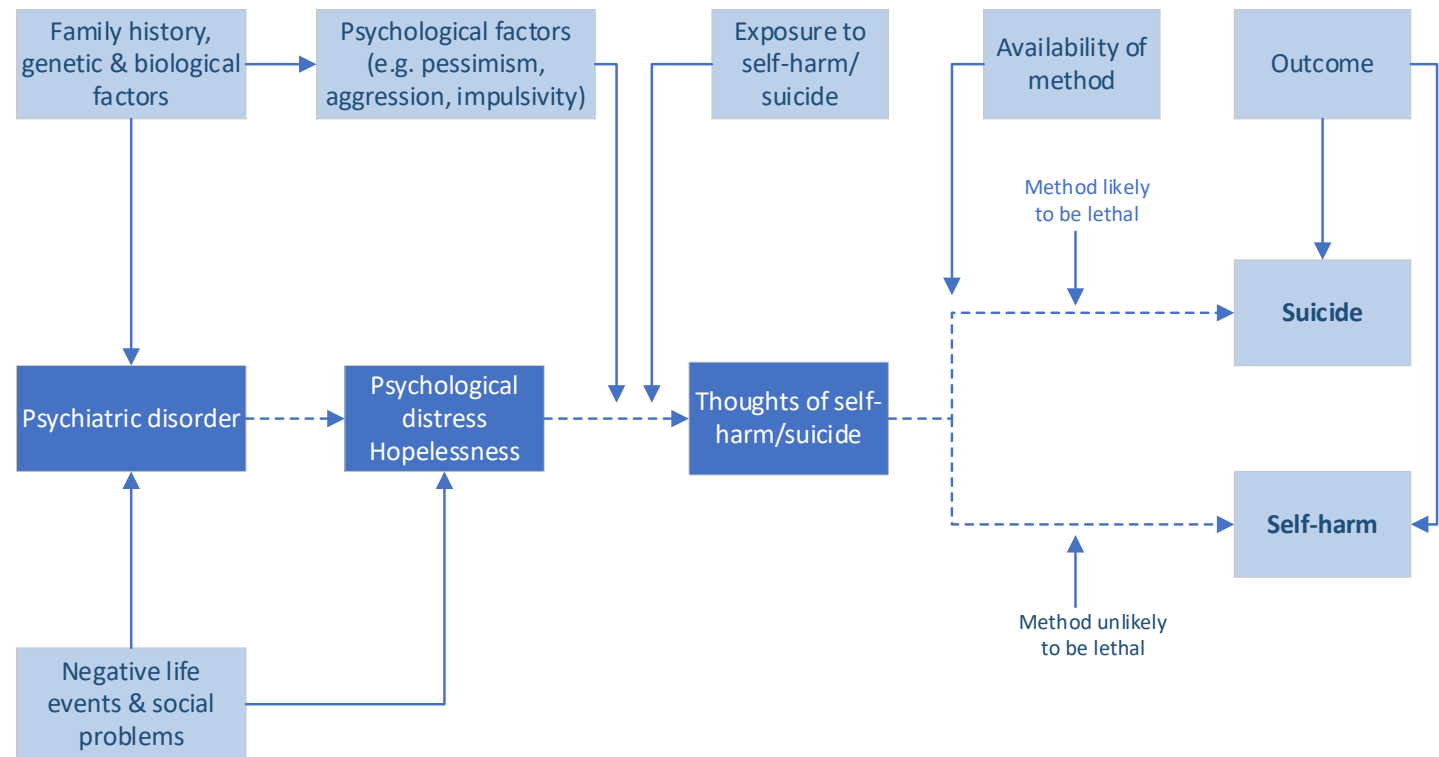
- send a follow-up email to the student, signposting 24hr support (see **Appendix 3**, for standard text for students present in the UK and Dubai)
- make further appointment with the student to check-in the next day. If the member of staff does not have availability themselves, ensure another member of their Programme Team or of the Wellbeing Services team will meet with the student
- report the incident to the relevant Lead Safeguarding Officer
- Set up a Safeguarding Panel meeting (see **Appendix 2**).

Appendix 5

Suicide pathway model and risk factors

Suicide pathway model

Suicide can result from a range of factors, including, for example, psychiatric disorder, negative life events, psychological factors, alcohol and drug misuse, family history of suicide, physical illness, exposure to suicidal behaviour of others, and access to methods of self-harm. In any individual case multiple factors are usually involved.



No one is immune to suicide. People with depression are at particular risk for suicide, especially when risk factors are present. Previous self-harm (i.e. intentional self-poisoning or self-injury, regardless of degree of suicidal intent) and family history of suicide or self-harm are particularly concerning risk factors. There are also some factors which may offer some degree of protection against suicide.

Risk factors	Possible protective factors
• History of previous suicide attempts (this includes self-harm). – Family history of suicide or self-harm. – Physical illness (especially when this is recently diagnosed, chronic and/or painful). – Exposure to suicidal behaviour of others, either directly or via the media. – Recent discharge from psychiatric inpatient care. – Access to potentially lethal means of self-harm/suicide. – Family history of mental disorder. • Severe depression. – Anxiety. – Feelings of hopelessness. – Personality disorder. – Alcohol abuse and/or drug abuse. • Male gender. • Isolation and lack of support system.	• Family/partner support. – Social support. – Religious belief. • Being responsible for children (especially young children).

When trying to assess risk of suicide or self-harm you may want to ask about a number of topics, starting with more general questions and gradually focusing on more direct ones, depending on the person's answers. This must be done with respect, sympathy and sensitivity. It may be possible to raise the topic when the person talks about negative feelings or depressive symptoms. It is important to remain calm even if there is reason for concern. Areas that you may want to explore include:

- Are they feeling hopeless, or that life is not worth living?
- Have they made plans to end their life?
- Have they told anyone about it?
- Have they carried out any acts in anticipation of death (e.g. putting their affairs in order)?
- Do they have the means for a suicidal act (do they have access to pills, insecticide, firearms...)?
- Is there any available support (family, friends, carers...)?

There is increasing evidence that visual imagery can strongly influence behaviour. Therefore, it is worth asking whether a person has any images about suicide (e.g. "If you think about suicide, do you have a particular mental picture of what this might involve?"). While assessment of risk factors for suicide in people can inform evaluation of risk, it is also important to pay heed to non-verbal clues and one's intuitive feelings about a person's level of risk.

Sometimes people with few risk factors may nevertheless make us feel uneasy about their safety. We should not ignore these feelings when assessing risk, even though they may not be quantifiable.