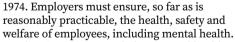
Wellbeing

AFRESH APPROACH

With the publication of the new British Standard, *Suicide and the Workplace*, Anne Davies, Partner at Richardson Lissack, explores the regulatory approach to occupational hazards and suicide risk

n the UK, the Health and Safety
Executive (HSE) is the primary regulator for workplace health and safety, operating under the Health and Safety at Work etc. Act



When it comes to workplace mental health, the primary focus of the HSE is to guide employers on best practice in managing work-related stress that could lead to severe outcomes, including suicide. What this means is the HSE takes seriously its role in highlighting how workplace factors can contribute to mental health issues and suicidality, particularly in high-risk sectors like construction.

The HSE's approach to workplace suicide is integrated into its broader mental health and stress management framework, emphasising prevention, risk assessment and employer responsibility. Through the *Working Minds* campaign, the HSE offers free toolkits for employers to identify stress, promote mental health discussions and offer signpost support

to employees. Tackling mental health remains a key priority for the HSE, with stress, anxiety and depression now affecting nearly a million employees and accounting for 22.1 million working days lost in 2024-25 (see pages 9-11).

OUR APPROACH TO ENFORCEMENT

The HSE can penalise employers for failing to manage stress or harassment. In 2024/25, more than 50 per cent of HSE inspections targeted health management, underscoring this priority, and HSE confirmed that inspections will increasingly consider how dutyholders are preventing psychological as well as physical ill health. At present, the HSE does not directly investigate suicides as standalone incidents.

A HSE representative recently stated publicly that *it may* investigate suicide "*in appropriate cases*". Where deficiencies are identified, the HSE is more likely to issue a Notification of Contravention.

This is not a penalty but serves to inform the dutyholder of the breach, the relevant law and the reasons for the inspector's opinion. It also triggers the Fee for Intervention (FFI) scheme, under which HSE recovers its costs for the time spent identifying and addressing the breach.

Suicidality has been extensively studied in the construction industry, a sector that faces disproportionately high rates compared to other sectors. According to Mates in Mind research, construction workers experience elevated risks, often three to four times the general population average, driven by a combination of occupational, psychosocial and demographic factors.

Mates in Mind was established in 2017 to raise awareness of poor mental health,

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RESEARCH SHOWS **ONE IN FOUR** ADULTS HAS CONTEMPLATED SUIGIDE

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addressing stigma and promoting positive mental wellbeing in the construction sector. It emerged from a summit organised by the Health in Construction Leadership Group (HCLG) in early 2017. Today, Mates in Mind provides free resources, training (in partnership with organisations like Mental Health First Aid England), and guidance to employers of all sizes. It emphasises breaking the silence around mental health through campaigns, fundraising and a 'Be a Mate' ethos.

THE ONGOING DEBATE

While research and data from the construction industry highlight that it is possible to drill down on the data to reveal the extent of the problem by occupation, at present, there is no systematic UK data on work-related suicides, hindering the identification of patterns and risks such as excessive workloads, bullying, job insecurity or inspections.

Currently, suicides are explicitly excluded from RIDDOR reporting, as they do not qualify as accidents under the regulations. Proponents argue that including work-related suicides would enable better data collection, investigation and prevention of psychosocial risks at work, while opponents highlight definitional, evidential and resource challenges. This contrasts with the position



KEY CONSIDERATIONS FOR EMPLOYERS AND RISK PROFESSIONALS

The new standard, combined with the HSE's stress management framework, offers a timely opportunity for employers to reassess their approach. A sector-specific risk assessment is the starting point, identifying vulnerabilities and fostering collaboration between risk, safety and HR teams. However, challenges remain, particularly

around data protection and confidentiality when supporting vulnerable employees.

By fostering supportive environments, providing resources and reducing stigma, workplaces can become a frontline defence against suicide. Employers must act decisively to protect their workforce and meet rising regulatory expectations.

in France where one in every five employee suicides reported to the social security authorities is officially recognised as being work-related.

Work is being done to fill the data gap. A 2021 University of Leeds study analysed 12 cases and highlighted hazardous workplace conditions (long hours and harassment) as intensifiers of suicide risk. It recommended amending RIDDOR to mandate reporting, alongside HSE guidance for employers on suicide prevention. It concluded that monitoring, as done in other countries including France, could lead to targeted interventions.

The debate has gained renewed energy and momentum following high-profile cases, including the 2023 suicide of headteacher Ruth Perry. In the Prevention of Future Deaths Report for Ruth Perry, Coroner Heidi Connor returned a narrative conclusion of suicide, finding that it was "contributed to by an Ofsted inspection" of the school where she was headteacher.

With no prior history of mental health concerns, her state of mind rapidly deteriorated during and after an Ofsted inspection of her school. She exhibited suicidal ideation and planning shortly after the inspection. She sought mental health support but was distressed by the inability to discuss the likely "inadequate" rating openly due to confidentiality rules.

In evidence before a subsequent House of Commons Education Committee inquiry into Ofsted, Professor Sarah Waters of the University of Leeds, whose research has focused on work-related suicide, submitted written evidence which drew attention to the "potential failure to act" on the part of both Ofsted and the HSE following prior suicides where Ofsted inspections were reported to be a contributing factor.

She also noted the absence of suicide from work-related deaths reporting systems, concluding that "without recognising, registering and investigating work-related suicides, preventable suicide deaths will continue to occur".

APPROXIMATELY 7,000 PEOPLE IN THE UK DIE BY SUICIDE EACH YEAR





LEGAL ACCOUNTABILITY OVERSEAS

The position here contrasts with that overseas. In France, when a suicide takes place in the workplace, it is immediately investigated by safety inspectors as a work-related accident. The burden of proof is on the employer to prove that it is not work-related.

This presumption of causality is designed to protect the family of the deceased by circumventing the need for them to engage in legal action to prove the employer is responsible for the death and, therefore, liable for compensation. Criminal liability can also arise. In July 2019, the criminal trial concluded in the case of the chief executive of France Télécom /Orange and six other executives who were accused of implementing abusive management policies which led to 19 suicides and 12 attempted suicides at the company. The former chief executive, his former deputy and the HR director were each given a one-year sentence, with eight months suspended, and fined €15,000.

FOR EVERY SUICIDE DEATH, **AT LEAST 135 PEOPLE,**INCLUDING COLLEAGUES, CLIENTS
AND COMMUNITIES ALIKE, ARE
DIRECTLY OR INDIRECTLY AFFECTED

Workplace suicide in Japan, termed 'karōjisatsu' (suicide due to overwork), is a recognised occupational health issue under the broader umbrella of 'karoshi' (death from overwork). It is addressed through a combination of legal frameworks, primarily governed by the Labour Standards Act (1947), the Industrial Accident Compensation Insurance Act (1966) and the Basic Act on Suicide Prevention (2006).

It is unclear what percentage of the 7,000 suicide deaths in the UK are work-related, but there is evidence to suggest they are often linked to factors such as job stress, bullying, discrimination and job insecurity.

With BS 30480, the conversation is changing. There is an increasing expectation for employers to step up when it comes to suicide prevention.

As the BSI points out in the *Suicide and the workplace: A practical first steps guide:* "It may feel daunting for smaller businesses to think about suicide prevention. However, the principles of care and support apply at every scale. While larger employers may have HR teams and wellbeing programmes, smaller organisations often have the advantage of closer personal relationships, where changes in behaviour can be noticed more quickly."

The HSE has, for many years, emphasised its focus on health hazards (noise protection, hazardous substances, etc). Mental health and suicide risk are increasingly falling into this category. The consensus is that the workplace, where most working adults spend about one-third of their lives, can play a crucial role in prevention by fostering supportive environments, providing access to resources and promoting conversations to reduce stigma. •

BS 30480 - SUICIDE AND THE WORKPLACE

The world's first standard on suicide awareness, Suicide and the Workplace – Intervention, prevention and support for people affected by suicide, offers guidance for organisations of all sizes and sectors, including public bodies, charities, social enterprises, businesses and commercial enterprises.

The standard, informed by research, data and lived experience, and published by the UK national standards body, aims to provide organisations with practical and evidence-based recommendations to help plan for, respond to and support people affected by suicide or those with thoughts of suicide in the workplace and beyond.

Research shows one in four adults has contemplated suicide and one in 13 has attempted it. For every suicide death, at least 135 people, including colleagues, clients and communities alike, are directly or indirectly affected. This means suicide touches nearly every workplace at some point, whether through the loss of a colleague, supporting someone in crisis or managing the complex emotional and operational aftermath. Yet organisations are not necessarily equipped to address this issue openly and effectively.

The standard includes support for developing clear, effective policies and offers practical advice on identifying warning signs and addressing suicidal thoughts or behaviours. It outlines how to ask about suicide in a safe, direct way, as well as how to create individual safety plans tailored to those at risk. Guidance is also provided on sensitive communication with individuals affected by suicide. Organisations are advised on when to seek specialist advice and how to commission training.

Download the guide at bit.ly/ 4oB3MPA

