



# **Suicide Prevention and Crisis Referral Protocols Training Course**

8 – 12 March 2027  
Abu Dhabi

## Suicide Prevention and Crisis Referral Protocols Training Course

**Ref:** 655\_150209 **Date:** 8 – 12 March 2027 **Location:** Abu Dhabi **Fees:** 4700 Euro

### Overview

Suicide Prevention and Crisis Referral Protocols Training Course is a five-day course for mental health service managers, healthcare supervisors, social service professionals, employee assistance teams, education support leaders, and crisis response coordinators who leave with an Organizational Suicide Prevention and Referral Protocol File. Participants practice warning-sign recognition, supportive conversations, immediate risk triage, safety-plan coordination, referral, documentation, privacy, and postvention within defined non-clinical boundaries. Agile Leaders Training Center approaches suicide prevention through clear roles, qualified escalation, and coordinated support.

### Who Should Attend

- Mental health service functions responsible for coordinating access, escalation, and continuity of support
- Healthcare supervision functions responsible for staff response protocols and referral pathways
- Social service functions responsible for recognizing distress and connecting people with qualified help
- Employee assistance functions responsible for workplace support, privacy, and care coordination
- Education support functions responsible for safeguarding, escalation, and family or service liaison
- Crisis response functions responsible for triage decisions, handoffs, records, and postvention coordination

The course assumes participants already support people, services, or organizational response procedures and leaves out clinical diagnosis, psychotherapy, medical treatment, and independent risk assessment beyond their authorized role.

### Departments and Industries

The course supports departments and industries that need a coordinated, role-bound response to suicide risk and crisis referral.

- Healthcare operations, behavioral health administration, and patient experience
- Human resources, employee assistance, occupational health, and wellbeing
- Schools, universities, student services, and safeguarding functions
- Social services, community organizations, and humanitarian support
- Emergency coordination, security, and business continuity functions



## Learning Objectives

By the end of this course, participants will be able to:

- Analyze warning signs and contextual risk indicators without making a diagnosis
- Apply a direct, supportive crisis conversation method
- Prioritize immediate safety and authorized escalation actions
- Build referral, handoff, documentation, and privacy protocols
- Use collaborative safety-plan coordination and follow-up tools
- Evaluate organizational postvention and team-readiness arrangements

## Course Agenda

### Day 1: Recognition, Roles, and Boundaries

- Public Health Suicide Prevention Framework
- Warning Sign and Context Indicator Checklist
- Protective Factor and Support Network Map
- Organizational Role Boundary Matrix
- Concern Recognition and Escalation Trigger Guide

### Day 2: Supportive Conversation and Immediate Triage

- Direct Supportive Conversation Method
- Nonjudgmental Listening and Clarification Guide
- Immediate Safety Priority Triage Card
- Qualified Emergency Escalation Decision Tree
- Supervisor Consultation and Action Log

### Day 3: Safety Planning, Referral, and Handoffs

- Collaborative Safety Plan Coordination Checklist
- Professional and Community Referral Directory
- Warm Handoff Communication Protocol
- Care Transition and Follow-Up Tracker
- Service Access Barrier Resolution Map

### Day 4: Governance, Privacy, and Postvention

- Crisis Documentation Minimum-Need Template
- Privacy and Information-Sharing Decision Grid
- Team Notification and Decision Rights Matrix
- Organizational Postvention Response Framework
- Staff Support and Debriefing Coordination Plan



## **Day 5: Protocol Practice and Integration**

- Exercise: Recognize Warning Signs and Role Boundaries
- Exercise: Conduct a Supportive Crisis Conversation
- Exercise: Activate Escalation and Warm Handoff Protocols
- Exercise: Coordinate Follow-Up and Postvention Actions
- Capstone Exercise: Organizational Suicide Prevention and Referral Protocol File

## **Practical Exercises**

The course uses suggested activities to practice safe, role-bound responses across workplace, healthcare, education, and community settings.

- Suggested activity: analyze warning signs in an employee-support scenario and identify the authorized escalation point.
- Suggested activity: conduct a supportive conversation and prepare a warm handoff to a qualified service.
- Suggested activity: coordinate a safety plan and follow-up record for a student-support scenario.
- Suggested activity: evaluate a postvention response for an organization after a suicide death.

## **FAQs**

### **Who suits suicide prevention and crisis referral training and what does it assume?**

Suicide prevention and crisis referral training suits managers and support professionals who already handle concerns, safeguarding, employee assistance, service coordination, or crisis procedures and need a defined method for recognition, conversation, escalation, referral, and follow-up.

### **How does suicide prevention and crisis referral training differ from clinical risk assessment training?**

Suicide prevention and crisis referral training prepares non-clinical and coordinating roles to recognize concerns and connect people with qualified help, while clinical risk assessment training prepares authorized clinicians to evaluate and manage risk within professional practice.

### **What should an organizational suicide prevention referral protocol contain?**

An organizational suicide prevention referral protocol should define warning signs, role boundaries, direct conversation steps, immediate escalation triggers, qualified contacts, handoff responsibilities, documentation rules, privacy decisions, follow-up ownership, and review arrangements.



## **How should a supportive conversation address possible suicide risk?**

A supportive conversation should be direct, calm, respectful, and focused on immediate safety, listening, authorized action, and connection with qualified emergency or clinical services. It should not attempt diagnosis, treatment, or promises of confidentiality that conflict with safeguarding duties.

## **What is postvention in organizational suicide prevention?**

Postvention is the coordinated support and response after a suicide death or serious incident. It addresses affected people, communication, staff support, service referral, privacy, operational decisions, and review while avoiding speculation and unsafe messaging.

## **Conclusion**

Participants leave with an Organizational Suicide Prevention and Referral Protocol File containing recognition tools, role boundaries, conversation prompts, escalation paths, safety-plan coordination, referral records, privacy decisions, follow-up controls, and postvention actions. The file helps teams respond consistently while remaining within authorized responsibilities. It connects immediate safety decisions with qualified care and continuing organizational support.