Suicide Response Protocol

A Guide for School Staff

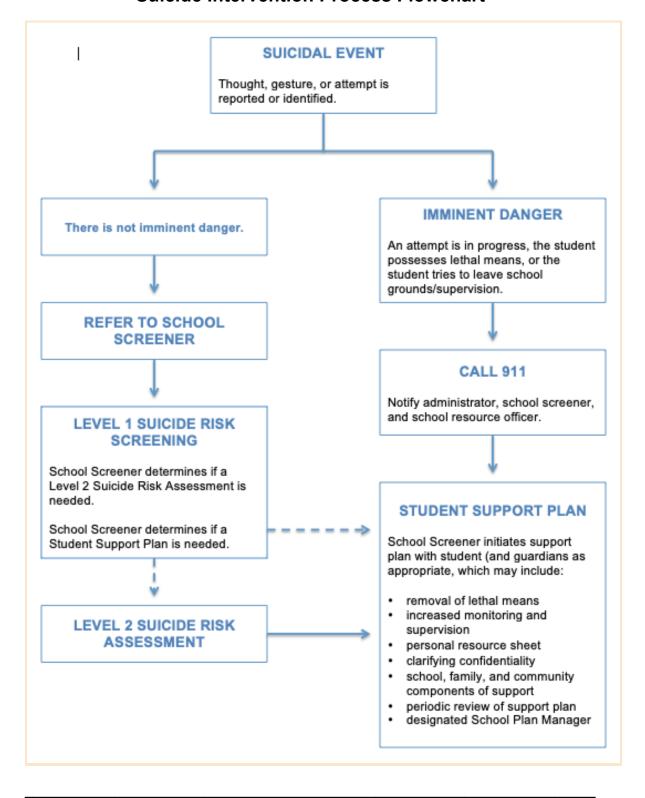
Riverdale School District

Last Edited 8/30/2020

Adapted from Forest Grove School District (edited 1/25/19)

Multnomah County Crisis Line: 503-988-4888

Suicide Intervention Process Flowchart



Suicide Risk Screening Process

School counselors, psychologists, and administrators often become aware of a student who poses a risk for suicide, and will need to complete a suicide risk screening.

If imminent danger exists, phone 911. This is especially important if the student of concern has left adult supervision and a plan to suicide is discovered.

Establishing the Risk of Suicide

- Generally, err on the side of caution. Initiating the suicide response protocol will
 not harm the student's mental health. Suicidal ideation/risk cannot be "planted"
 into a student's mind. Normalizing the ability to directly discuss concerns
 promotes safety.
- The risk of suicide is established whenever any person (student, peer, educator, parent, anyone) identifies a student as potentially suicidal because that student has directly or indirectly expressed suicidal thoughts (ideation) or demonstrated other warning signs.
- If a student is having thoughts of suicide, there is suicide risk. If imminent danger
 is <u>not</u> present but a concern about suicide risk exists, the School Screener
 initiates the screening process.
- Any school employee who gains knowledge about a potential risk of suicide must <u>immediately</u> report their knowledge to a School Screener.
 - o School Screeners generally include: school counselors, school psychologists, and administrators.
- Take suicidal behavior seriously every time.
- Take immediate action. Inform a school screener and a building administrator.
- No student expressing suicidal thoughts should be left unsupervised for any amount of time between establishing the risk of suicide and the end of the screening process.
- No student expressing suicidal thoughts should be sent home to an empty house.
- 1. A <u>Level 1 Suicide Screening</u> is conducted by a School Screener. The School Screener interviews the student and completes the Suicide Screening Form. The School Screener consults with another trained School Screener to determine if a Level 2 Suicide Assessment is warranted. The School Screener can also consult the Multnomah County Crisis Line.
- 2. A <u>Level 2 Suicide Assessment</u> must be conducted by a Qualified Mental Health Professional. The Level 1 Suicide Screening may be the basis for a Level 2 Suicide Assessment.
 - School counselors, school psychologists, and administrators are <u>not</u> qualified to conduct a Level 2 Suicide Assessment while acting in their contracted Riverdale School District role, even if they are a licensed Qualified Mental Health Professional. The contracted duties must remain separated from extracontractual qualifications.

Level 1 Suicide Screening - Student Inverview

1. Immediate Lethal Means

- o If the student is currently in possession of lethal means (razor, gun, rope, pills, etc.), secure the area and prevent other students from physically or visually accessing the area.
- Lethal means must be removed without putting anyone in danger. Call emergency services (social workers, law enforcement) to remove lethal means.

2. Supervision

o An informed employee must stay with the identified student to provide supervision and appropriate support until the School Screener meets with the student.

3. Level 1 Suicide Screening Form

- o The School Screener uses the form to determine the current level of suicide risk.
- o If the student says they are thinking about harming someone else, inform administrators so that they may initiate the Threat Assessment Process.

4. Consultation

- o After completing the Level 1 Suicide Screening Form, the School Screener will consult with another School Screener or the Multnomah County Crisis Line to determine if a Level 2 Suicide Risk Assessment is appropriate. Sharing decision-making is best practice. The outcome will be one of the following two possibilities:
 - 1. **Level 2 Suicide Assessment is not warranted**. A <u>Support Plan</u> is completed by the end of the next school day.
 - Level 2 Suicide Assessment is warranted. The School Screener refers the student to a Qualified Mental Health Professional. A <u>Support Plan</u> is developed at that time and will be updated upon the student's return to school.
- o The School Screener can consult with the Multnomah County Crisis Line at any point during any part of this process.

2. Guardian Notification

- o Guardians must always be notified when there appears to be any risk of current suicidal ideation.
- o The School Screener will include the guardians in understanding the Level 1 Suicide Screening information and safety planning. This can occur over the phone, but in-person is preferred.
- o If there is not a substantiated risk of suicide, the School Screener should still contact and inform quardians of the raised concerns.
- o The <u>Parent Information sheet</u> should be provided any time suicidal thoughts are present.
- o If the School Screener is not able to contact guardians after exhausting all avenues, they should contact the Multnomah County Crisis Line to consult about next steps, including considerations for involving the Department of Human Services (DHS) or emergency responders (social workers, law enforcement).

3. Child Abuse and/or Neglect

- o All concerns related to child abuse and/or neglect must follow mandatory reporter protocols. Child Abuse Reporting Form
- o If the risk of suicide is substantial, and guardians are not taking the necessary steps to ensure the safety of their child, the School Screener must contact DHS and the Multnomah County Crisis Line to consult about

next steps, filling out required DHS documentation as per Riverdale High School protocol.

4. Student Support Plan

- o The School Screener uses the <u>Student Support Plan</u> document to determine which aspects are relevant for completion.
- o Home Safety Planning
- This is best conducted by a Qualified Mental Health Professional, if possible.
- **o** Every effort should be made to not send a student home to an empty house.

o School Safety Planning

 A support network (school counselor, case manager, administrator, and guardians) should meet with the student to determine what adjustments and accommodations need to be made for the student to ensure safety while being able to access their education.

5. Documentation of Suicide Response Protocol

- o The School Screener compiles the Level 1 Suicide Screening form and any additional materials (Support Plan) and places copies in a confidential envelope (noted as for administrators and school counselors only) within the student's cumulative file. The Level 1 Suicide Screening form should have the appropriate signatures from administrators, school screener consultants, and guardians.
- o DHS reports should <u>not</u> be placed into a student's cumulative file.

Level 2 Suicide Assessment

If a Level 2 Suicide Assessment is warranted, the School Screener seeks to involve a Qualified Mental Health Professional. A Level 2 Suicide Assessment requires parental permission unless the student is 14 years of age or older.

If a guardian is unwilling or unavailable to consent to a Level 2 Suicide Assessment by a Qualified Mental Health Professional, the School Screener should contact the Multnomah County Crisis Line to consult about next steps. Next steps may include contacting the Department of Human Services (Child Protective Services), a school resource officer, or emergency responders (social workers, law enforcement) if the risk of self-injury may be imminent and the guardians are unwilling to seek Qualified Mental Health services. The School Screener facilitates a referral to one of the following Qualified Mental Health Professionals (listed in order of preference):

1. Student's Primary Mental Health Therapist

- o The School Screener calls the therapist, provider, or agency, who then makes an immediate plan with the student and family to conduct the Level 2 Suicide Assessment.
- o It is not sufficient to just leave a voicemail for the therapist.

2. Multnomah County Crisis Line (503-988-4888)

- o The School Screener calls the crisis line (with student, if appropriate) and requests a suicide assessment. Consider the need for an interpreter.
- o The Crisis Line may actions may include:

- 1. Assessment and development of a safety plan with student and parents via phone.
- 2. Activation of a mobile Crisis Team to come to the school (or the student's location).
- 3. Recommending the student and family go to the Cascadia Behavioral Healthcare Urgent Walk-In Clinic.

4212 SE Division St Portland, OR 97206 Hours are 7:00 am - 10:30 pm 503-963-2575 (Free service, no billing of any kind).

3. Hospital

- o The School Screener arranges transportation to the hospital.

 Transportation options are: guardian, school resource officer or law enforcement, ambulance.
- o Child/Adolescent psychiatric units/walk-in clinics in the area:

OHSU Doernbecher Pediatric Emergency

3181 S.W. Sam Jackson Park Rd. Portland, OR 97239 503-494-7551 (They will take patients up to 20 years of age).

Randall Children's Hospital at Legacy Emanuel

2801 N. Gantenbein Portland, OR 97227 503-413-2200

Level 1 Suicide Screening Form

.Background Information		
Date of Screening		
Screener		
Student Name		
Student ID		
Date of Birth, Age, Grade		
Race and/or Ethnicity		
Sex, Gender, Gender Identity Notes		
School		
Guardian Names		
Guardian Contact Numbers		
Languages of Student		
Languages of Guardians		
Interpreter Name (if needed)		
IEP, 504, or TAG Status, Case Manager		
II. Initial Con	cern	
How did the screener learn of the suicide risk?		
III. Interview with the Student		
Numbered questions are required. Others are good answers.	d to consider, depending on student	
1- Does the student confirm that they think about killing themselves?	Yes. (Screener continues with the process.) No. (If no thoughts of suicide are	
On a scale of 1-10 (10 being "I will definitely attempt,") how likely is the student to try to kill themselves today?	 No. (If no thoughts of suicide are present, screener does not need to complete this form. Contact guardians about initial concern and student response.) 	

	Guardian Contacted: Date of Contact: Screener Notes:
2- Does the student confirm that they think about hurting other people?	 Yes. (Screener refers concern to Student Threat Response Team). No. (Screener continues with the process.) Screener Notes:
3- Does the student have a plan for how they would kill themselves?	Yes.No.
What is the student's plan?	Screener Notes:
How prepared is the student to complete the plan?	
When might the student attempt to carry out the plan?	
Tip for Screener: Discuss ways to disable the plan. What can be done about the means, timing, and supervision? "I'd like to talk about ways to keep you safe."	
4- Are the means available to the student to carry out the plan?	Yes.No.
(Access to rope, guns, weapons, pills, medication, knives, environments).	Screener Notes:
5- Does the student confirm that there are previous suicide attempts?	Yes.No.
Tip for Screener: Support past survival skills. Do they have the means they had before? How did they survive the previous attempts?	Screener Notes:
6- Is the student experiencing emotional pain that feels unbearable?	Yes.No.

On a scale of 1-10 (10 being the highest), how does their pain feel right now?	Screener Notes:	
Has the student experienced: Recent death of a loved one Withdrawal from others Feelings of hopelessness Family conflict		
What helps to ease the student's pain? (Talking, walking, listening to music, art, reading, writing, exercising, etc.)		
7- Does the student use alcohol or drugs?	• Yes.	
Does the student have any gambling habits?	• No.	
Tip for Screener: Alcohol, drugs, and gambling habits are related to impulsivity and reduced inhibitions.	Screener Notes:	
8- Does the student have resources or a support system they can turn to when feeling suicidal?	Yes.No.Screener Notes:	
Tip for Screener: Explore relationships with family members, friends, and mentoring adults.	Screener Notes.	
9- Has the student ever received professional mental health care?	Yes.No.	
What is the therapist's name? Is the care past or current? Was the mental health treatment helpful? Why or why not?	Screener Notes:	
Tip for Screener: Consider diagnoses, stigma, and medication.		
IV. Consultation		
The School Screener must consult with another trained screener, or the Multnomah County Crisis Line (NUMBER) to determine whether or not to proceed to a Level 2 Suicide Risk Assessment. Consultation must occur prior to the student leaving school supervision.		
If, in addition to confirming they have suicidal thoughts (question 1), the student has risk factors ("Yes" for questions 2-7), a Level 2 Suicide Risk Assessment should be considered.		
Consultant Name		

Consultant Signature (if physically present), Date		
Will the School Screener make a referral for a Level 2 Suicide Assessment?	Yes.No.Screener Notes:	
Will the School Screener initiate a Student Support Plan?	Yes.No.Screener Notes:	
V. Guardian Contact		
Generally, the School Screener requests that a guardian come to the school to help with support and safety planning.		
Every effort should be made to contact a guardian, including through emergency contacts. If unsuccessful, School Screener must consult with building administrator and the Multnomah County Crisis Line (503-988-4888).		
Name of Guardian Contacted		
Date and Time of Contact		
Is the guardian aware of suicidal thoughts/plans/gestures?		
What is the guardian's perception of the level of risk?		
Does the student have a mental health therapist or professional mental health counselor?		
Therapist Name and Contact Information		
If the guardian wants to share additional information about physical or mental health concerns, including medications, they may do so.		
Inform guardian that suicide concerns are always shared with administrators, and then specific staff members on a need-to-know basis for safety and support considerations.	tes:	

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VI. Action and Support Plan

If proceeding with Level 1 supports only, complete the following tasks:

- Share concerns and risk factors with guardians.
- Provide guardians with a copy of the <u>Parent Letter / Information Sheet</u> (can be sent home with student, emailed, mailed, or given in person); review letter together.
- Complete <u>Student Support Plan</u> (optional).
- Request that guardians (or student age over 14) sign a Release of Information form for providers (optional).
- Inform administrator and obtain signature.

If proceeding with a Level 2 Suicide Assessment, complete the following tasks:

- Ask for guardian consent to a Level 2 Suicide Assessment (student can give consent if they are over the age of 14 without guardian consent).
 - Guardian Response:
- Refer student and guardians to a Qualified Mental Health Provider for a suicide assessment.
 - Student's Primary Therapist/Mental Health Agency:
 - o Immediate phone conversation (voicemail not acceptable), or
 - o Therapist comes to school, or
 - o Student is transported from school to therapist. Name and Number of Therapist:
 - Multnomah County Crisis Line (503-988-4888)
 - o Conducts suicide assessment by phone, or
 - o Crisis Team comes to school, or
 - o Student is transported from school to Crisis Team.
 - Hospital
 - o Student is transported from school to guardian's choice of hospital.
 - Note: Transportation of student is only to be conducted by a guardian, school resource officer, or ambulance.
- Request that guardians (or student age over 14) sign a Release of Information form between the school and suicide risk assessment provider.
- Review the Guardian Letter / Info Sheet with guardians and provide a copy.
- Schedule a meeting to complete a mandatory <u>School Support Plan</u>, including administrator. Must be completed before student returns to school.

VII. Review with Ad	VII. Review with Administration	
School Administrator Name		
Signature and Date		

School Support Plan Student Name

Plan Development

Input obtained from:

Student: XCaretaker: X

Mental Health Provider: X

Plan Initiated: X Last Updated On: X

When will this plan be terminated?

- [Discuss with student and caretakers. Keep plan active until the concern is within typical student behaviors, but default to keeping it in place. Termination of the plan should be celebratory of growth.]
- Termination of plan will be informed by data, to be collected as is needed/feasible by the school counselor.
- Data Link for current academic year (if relevant)
 - Data Links for past academic years (if relevant)

Reason for Plan

- Suicidal Ideation (past; present; passive)
- Non-Suicidal Self-Injury
- Panic Attacks
- Substance Use
- Aggression/Violence
- Supervision Concerns
- (Other)

What are the warning signs that a concern is developing?

X

What will (STUDENT NAME) do to stay safe?

X

What will school staff do to support the student's safety?

- Communicate any concerns to the school counselor and administrator.
- When perceiving a crisis, teachers will:

• (Include information about physical safety considerations, such as backpack and locker checks with an administrator)

What accommodations will teachers provide?

- X
- (Note existing plans that the student has, such as a 504 or IEP plan).
- (Consider triggers, concerning peer dynamics, academic stressors, how to grant access to
- support/coping).
- (Note when accommodations will go from automatically granted to "As discussed between student and teacher" - generally, go with the end of the next major grading period, or 6 weeks, relative to the Last Updated On date, whichever is longer).

Who will have access to this document?

- Teachers, School Counselor, Principal
- Front Office Staff, School-Affiliated Extracurricular Coaches
- Food Workers, Bus Drivers, District Nurse
- Field Trip Supervisors
- Others? Verify this list with caretakers and student.

Intervention Process Templates (for the "What will staff do to support the student's safety?")

Panic Attacks

- In the event that a serious physical medical concern is observed (such as fainting, hitting one's head, etc.), call 911.
- Communicate any concerns to the administrator, school counselor, and office staff immediately.
- Ensure adult supervision throughout the panic attack; walk the student to the office or have office staff come down.
- [Discuss level/type of external support preferred during panic attack].
- Contact home; have the student discuss plans for the rest of the day with caretakers.
- After a panic attack, have an adult walk with the student back to class when ready. If the student is going home, the adult will stay with them while they prepare. The student will remain supervised by an adult while waiting in the front office if they are being picked up.

Suicidal Ideation

- In the event of suspected, observed, or threatened serious bodily injury, call 911.
- Communicate any concerns to the school counselor and administrator.

- Regular check-ins with the school counselor (or alternative identified, appropriate staff); frequency to be discussed between student, caretakers, and school counselor.
- [Discuss the need for restrictions in the classroom setting (ex: additional supervision regarding sharp objects)].
- [Discuss the need for safety checks with an administrator (ex: backpack checks)].

Non-Suicidal Self-Injury

- In the event of suspected, observed, or threatened serious bodily injury, call 911.
- Communicate any concerns to the school counselor and administrator.
- Regular check-ins with the school counselor (or alternative identified, appropriate staff); frequency to be discussed between student, caretakers, and school counselor.
- [Discuss the need for restrictions in the classroom setting (ex: additional supervision regarding sharp objects)].
- [Discuss the need for safety checks with an administrator (ex: backpack checks)].

PD

- Inservicing Teachers
 - HS teachers will sometimes keep something confidential that they shouldn't.
 - General PD; lines of confidentiality; impress upon them the need to follow through with a concern immediately (gets more complicated at the end of the day)