

SUICIDE RISK ASSESSMENT GUIDELINES & PROCEDURES



TABLE OF CONTENTS

CLICK THE FOLLOWING TOPIC FOR A DIRECT LINK

- I. [PURPOSE](#)
- II. [PROCEDURES](#)
 - a. [Suicide Ideation](#)
 - b. [Suicide Threat](#)
 - c. [Suicide Prevention](#)
 - d. [Suicide Attempt](#)
 - e. [Referral for High-Risk Students or Students with Special Needs](#)
 - f. [Employee Responsibilities](#)
 - i. [Teachers – Faculty & Staff](#)
 - ii. [Administrators](#)
 - iii. [Counselors](#)
 - g. [Suicide Protocol Flowchart](#)
- III. [POLICE OFFICER’S CHECKLIST](#)
- IV. [STUDENT HEALTH SAFETY CONTACTS](#)
- V. [DISTRICT FORMS](#)
- VI. [RESOURCES](#)
- VII. [REQUIRED TRAININGS](#)

PURPOSE

The purpose of this guide is to provide school personnel the information necessary to effectively implement district procedures regarding the handling of potentially suicidal students. A goal of the Tuloso-Midway Independent School District (TMISD) is to foster the emotional safety of students by reducing the risk of suicide attempts and completions, to help school personnel recognize the signs of potentially dangerous behavior to students themselves or others, and to respond appropriately.

PROCEDURES

SUICIDE IDEATION

All reports of suspected suicide ideation of any student (either through verbalization, drawings, or writings) must be referred to the school counselor immediately.

Two Important Notes

- A student who has expressed suicidal ideation must never be allowed to be alone until he/she has seen a counselor. An adult must escort the student to the counselor's office or the main office. If an adult is unavailable, the counselor or an administrator should be called to get the student. The student must remain under adult supervision while waiting to see the counselor. If a campus counselor is unavailable, contact the district office.
- School personnel may not require a student to have a release from a professional (doctor, counselor, psychologist, or psychiatrist) before returning to school [TEC 38.016(b)]; however, they can request that they provide documentation that they were further evaluated to determine if they need to make a report for medical neglect.

Safety of the Student

- The counselor is not required to see the student immediately (if he/she is not in his/her office, is in a meeting with another student or parent, or is scheduled for classroom guidance) but must see the student before the end of the day.
- While waiting to see the counselor, the student must remain under adult supervision at all times. The student may remain in the classroom or be escorted to the main office until meeting with the school counselor (depending on the condition of the student).
- If a school counselor is not available on campus on the day of concern, District Administration should be contacted to send a District representative or other campus counselor (who has been trained to handle suicide ideation) to complete the interview process before the end of the day and before the student can leave the campus.

PROCEDURES

SUICIDE IDEATION

Reminders

- There should be no liability issues for the school or its agents except in three possible areas:
 - If someone on the campus knew about the threat and nothing was done (neglect).
 - Crisis response is not provided to students when traumatic events (deaths, natural disasters, etc.) occur.
 - If the campus does not have prevention programs to support students and warn them about symptoms, signs, etc. (***Requirement of law and Board Policy***).
- Stating that a counselor is busy with other duties and not available to provide responsive service is not a defense a court will consider as justifiable.
- Maintain the campus documentation in a locked cabinet in the counselor's office. There are no legal requirements for how long these documents should be kept.
- Only share students' suicidal ideation with those who have an "educational need to know" and remind them the information is not shared with anyone else.
- When meeting with the parents, the level of risk or assessment should never be mentioned, but rather the exact statement and facts that the student and teacher shared. Relay physical and emotional symptoms seen and heard – never give a diagnosis.
- If there is a high level of concern for imminent danger, a student must be released to a parent/guardian or another parent-designated adult. No student may be taken home in the counselor's (or other school personnel's) car due to liability.
 - If a parent or parent designee cannot pick up a student, notify the campus administrator and law enforcement.
 - If a parent refuses to pick up the student or has someone else pick up and supervise the student, notify the campus administrator, law enforcement for transport to the hospital, and contact CPS to report medical neglect.
 - Sometimes parents don't believe that their child would commit suicide and may feel the student is seeking attention or avoiding something. However, liability is higher if a student is allowed to leave unmonitored without a provision for follow-up assistance.

PROCEDURES

SUICIDE IDEATION

Re-entry Process

- Counselors should meet with a student and the parent the day they return after a suicide inquiry, a suicide attempt, or hospitalization due to emotional issues. The following should be topics to discuss:
- Check-in on stability and current thinking of the student.
- If the student appears to be ready to return to his/her daily routine, let the student know that you are available anytime they may need to have a check-in or discuss any situations causing stress.
- If the student does not appear to be ready to return to his/her daily routine, consider developing a [Student Re-entry Plan](#).
- Ensure parents/student has access to mental health providers and hotline phone numbers.
- Ask the parents if they have any medical or psychological reports that they are willing to share to help the student or if the school may request a [Release of Information](#) or talk to someone to better meet the student's needs.

Caution in Making Predictions

There is no exactness for any counselor to make a definitive "prediction" about whether a student will or will not attempt suicide. A counselor will certainly be more concerned about a student who has a plan, an opportunity, and a means than for a student who has no plan. Other factors may raise the risk for the student's attempting suicide, such as a recent major traumatic event, a previous attempt, or a family history of depression or suicide. However, the counselor only knows what is being told to him/her by the student or the parent. Because we do not know everything the student is thinking, suicide thinking, or gestures (drawings, giving away things, etc.) should be taken seriously. All parents should be notified even when the counselor may believe there is a low risk of an attempt.

Parent Concerns

Sometimes parents do not believe their child is suicidal and may even demand that the counselor/school withdraw their involvement. There is a greater liability for a counselor when he/she honors that request and when a child/adolescent is allowed to be unmonitored with no provision for follow-up assistance. When in doubt, consult with District Administration

PROCEDURES

SUICIDE IDEATION

Evidence-Based Best Practices

- It important not to present information to make suicide seem common, normal, or acceptable.
- Presenting suicide as an inexplicable act of an otherwise healthy, well-liked, or high-achieving person may encourage identification with the victim.
- Oversimplification of suicide can mislead people to believe that it is a normal response to fairly ordinary life circumstances.
- Strategies or activities around a student's suicide should never glorify or romanticize people who have completed suicide. Students who may not be doing well may see this as a way to get attention and sympathy.
- Suicide should never be explained as a result of stress.
- Personal details of a person completing suicide should never be a focus.

PROCEDURES

SUICIDE THREAT

A suicide threat is defined as any spoken, written, or behavioral indication of self-destructive tendencies with the intent of taking one's own life.

No suicide threat shall be ignored. School personnel shall take all threats seriously and shall implement the following procedures:

1. Any person on a campus who becomes aware of a suicide threat by a student contacts the Social Worker to request immediate assistance.
2. The campus principal should be notified immediately.
3. Staff shall speak calmly to the student and protect the student's privacy by speaking to the student privately. The student is "handed off" to the Social Worker. The student is NEVER left alone for any reason.
4. All dangerous substances or items are immediately removed from the student and the area. Secure the area for safety.
5. A parent, guardian or relative is notified of the student's threat by the Social Worker or other designated campus personnel. [Notification of Emergency Conference Form](#) is completed.
6. The Social Worker administers the [Columbia-Suicide Severity Rating Scale](#) (CSSRS-Screener) to the student. Decision-making will adhere to the [Suicide Protocol Flowchart](#).
7. If the results of the CSSRS-Screener are **low**, the student shall be asked to complete a [Student Re-entry Plan](#) with the assistance of the Social Worker, the parent/guardian will be provided **community referrals and resources**, and the counselor should provide guidance in problem solving and supporting the immediate needs of the student.
8. If the results of the CSSRS-Screener are **moderate or high**, contact the Social Worker immediately.
 - If necessary, the Social Worker will determine if a call to Nueces County Mental Health Intellectual Disabilities (MHID) is needed.

PROCEDURES

SUICIDE PREVENTION

For a variety of reasons, some children may recant or deny their suicidal ideation after they report it. However, the threat must still be taken seriously. At a minimum, a suicide threat suggests poor coping skills and it is not a “normal” reaction. Look for any of the following warning signs and follow the procedures above:

- Change in mood: sadness, anxiety, irritability
- Change in behavior
- Increase in aggression or impulsivity
- Drop in Grades
- Feeling ashamed, humiliated, hopeless or worthless

PROCEDURES

SUICIDE ATTEMPT

All attempted suicides shall be treated initially as medical emergencies.

A suicide attempt is defined as any life-threatening behavior or gesture on the part of a student with the intent of ending his or her life.

NO discretion should be applied by school personnel to determine the seriousness of the attempt. The procedures for handling suicide attempts (either on campus or off campus) shall follow the procedures for suicide threats and include the following:

1. The Social Worker, student's parent, guardian, or relative shall be contacted immediately and the principal or designee shall strongly recommend that the student receive medical treatment from a physician and/or psychological counseling from a community mental health professional.
2. If the student has ingested medication, chemicals, or has incurred serious physical injury, secure the scene for safety and contact District police or 911 and follow the below directions regarding procedure for high-risk students. Document on the [Student Incident Report](#) for administration and Health and Medical Services in eSchoolPlus.
 - Documentation for students with disabilities should be completed in ESPED.
3. Upon the student's return to school, the Social Worker shall convene a meeting with the parents or guardian, administrator, and nurse to make recommendations regarding in-school supportive counseling and follow-up services.
4. If the Social Worker and campus principal have strongly suggested that the student receive psychiatric treatment and/or psychological counseling and the student returns to school without obtaining those services, the school personnel may determine if the lack of treatment constitutes abuse or neglect. If so, report the abuse or neglect to: Child Protective Services (800-252-5400) or online at www.txabusehotline.org.

PROCEDURES

REFERRING A HIGH-RISK OR SPECIAL NEEDS STUDENT TO OUTSIDE CARE

1. The counselor completes the [Columbia-Suicide Severity Rating Scale](#) and contacts the Social Worker for a consultation regarding the student with suicidal ideation and reviews the responses to the screener. The Social Worker will assess the risk level.
2. If student is at serious and imminent risk and needs to be transported to Bayview Behavioral Hospital (361-986-8200) or Driscoll Children's Hospital (361-694-5000), attempts will be made to contact the parent. Judgement applied by the Social Worker should be used as to how, and at what point, the parent is involved if such involvement might increase risk to the student.
3. If the parent is able and willing to transport the student, skip to step eight and give a summary to the parent.
4. If the parent cannot be reached or is unable or unwilling to take the student, call CCPD Police to provide a transport unit.
5. The officer will be given information about transporting and accompanying a minor by the Social Worker or an Administrator.
6. Contact the CPS hotline at 1-800-252-5400.
7. Documentation of the risk and need for hospitalization may be provided by the Social Worker in the form of a separate summary that will be taken by the officer or the school staff person to give to hospital personnel.
8. If the student is in need of **full restraint**, the officer will call Emergency Medical Services (EMS) to determine if EMS is the more appropriate mode of transportation.
9. The officer will not handcuff a child who is under age ten but will handcuff students they transport who are age ten and over, according to TMISD policy.
10. Upon arrival at the hospital, the officer will leave after releasing the student into the custody of the school's staff, who will be responsible for the student until a parent can be reached. If a parent cannot be reached or the parent is uncooperative, the hospital will contact Child Protective Services (CPS).

For students with disabilities, please refer to the [Social Worker Referral Flow Chart](#).

EMPLOYEE RESPONSIBILITIES

TEACHERS – FACULTY & STAFF

1. When a teacher/staff member is made aware of a student making **ANY** type of suicidal threat, he/she will contact the main office immediately and request a counselor to the classroom.
 - The student **CAN NOT** be sent to the office unaccompanied by an adult.
 - The student **MUST** be in the presence of an adult **at all times**.
2. The teacher will complete the [Student Incident Report](#) and provide it to the counselor.
3. In the event that a counselor is not present, an administrator will contact a counselor from another campus to follow the protocol. **A counselor MUST be present!**

ADMINISTRATORS

1. If the counselor is not present, an administrator will contact a counselor from another campus to follow the protocol. **A counselor MUST be present!**
2. Meet with the counselor, student, and parents to discuss the situation and complete the [Notification of Emergency Conference Form](#).
3. Administrator will notify the TMISD Superintendent and Assistant Superintendent for Instructional Services.
4. Administrator will follow up with parent/guardian the following day and document status with a [Student Incident Report](#) and update the counselor.

COUNSELORS

1. The counselor, or another adult, will escort the student to the office, discuss the incident with the student, and complete the [Columbia-Suicide Severity Rating Scale](#) to determine need of intervention level.
2. The counselor will notify the campus administrator, the student's parent/guardian and request an emergency conference with administration.
 - a. The [Notification of Emergency Conference Form](#) will be completed and signed by all adults involved.
 - b. The counselor will provide parents/guardians with the [Parent's Checklist: Suicide Precautions](#).
3. The counselor will complete the [Student Incident Report](#).
 - a. The following day, the counselor will follow up with administration on the status of the student/parent/guardian, meet with the student, and complete a [Student Re-entry Plan](#) for ideation or a [Student Safety Plan](#) for a threat, in addition to contacting the student's parent/guardian to follow up.
4. The counselor will follow up with student and parent/guardian as needed.

SUICIDE PROTOCOL FLOWCHART

Counselor meets with student and completes Columbia-Suicide Severity Rating Scale



NO INTERVENTION INDICATED

INTERVENTION INDICATED



✓ Parent Contact

✓ Notify Administrator & Parent

✓ Complete *Coping Skills for Stress Management* w/ student

✓ Complete the Notification of Emergency Conference Form

✓ Send home *Notification of Incident*

❖ ***Administrator notifies Superintendent***

✓ Provide follow-up for student support

✓ Review Suicide Precautions Checklist w/ Parents

✓ Notify Administrator via email

- Suicide Protocol initiated
- No intervention indicated
- Student initials
- Grade level

✓ Student released to parental care

✓ Follow up w/ Student & complete Student Re-entry Plan or Student Safety Plan

POLICE OFFICER'S CHECKLIST

- ✓ Determine if student's parent or legal guardian has been contacted.
- ✓ Speak to school counselor or administrator and ensure that a Crisis Intervention psychologist has been contacted.
- ✓ Get a written summary of the student's behavior from the campus Crisis Intervention representative (e.g., Counselor, Administrator).
- ✓ Transport the student to the hospital. The Crisis Intervention representative should be contacted in the event that there are questions regarding the student's admission to the hospital.
- ✓ If the student is volunteering to be admitted, and the parent or guardian is present, then the officer's obligations are complete. However, officer should enter the facility with the student and parent/guardian to ensure that the facility accepts the student, and that the student remains calm and in-control during the admission process.
- ✓ If the admission into the system is involuntary, the officer will complete the intake form that is required by the facility. The probable cause for the admission should come from the information provided by the school counselor or psychologist or social worker.

PLEASE NOTE

It may not be necessary or physically possible for the Social Worker to be on site to conduct the risk assessment. Nonetheless, the police transport to the hospital can still take place. Officers have the legal authority to detain/transport any individual who poses imminent danger to self or others.

STUDENT HEALTH SAFETY CONTACTS

TMISD

[Dr. John White](#), Assistant Superintendent for Instructional Support

[Amanda Muegge](#), Social Worker (district-wide support)

[Kacie Williams](#), Administrative Assistant

TM-ACC

[Amanda Muegge](#), Social Worker (daily support)

[Frances Baen](#), Counselor

[Iris Chapa](#), Assistant Principal

[Melodie McClarren](#), Principal

TM-High School

[Amanda Muegge](#), Social Worker (daily support)

[Jordan Garza](#), Counselor

[Priscilla Vega](#), Assistant Principal

[Gabe Alvarado](#), Principal

TM-Middle School

[Denise Fernandez](#), Parent Facilitator

[Cristal Naro DeLeon](#) – Communities in Schools

[Kavita Bhakta](#), Counselor

[Daymon St. John](#), Assistant Principal

[Melanie Arias](#), Principal

TM-Intermediate

[Lailaine Flores](#), Parent Facilitator

[Shannon Clevenger](#), Counselor

[Anita Naranjo](#), Counselor

[Ryan Jennische](#), Assistant Principal

[Christina Trevino](#), Principal

TM-Primary

[Mercedes Castellanos](#), Parent Facilitator

[Donna Kesselring](#), Counselor

[Amanda Rodriguez](#), Counselor

[Lupe Chapa](#), Assistant Principal

[Laura Davila](#), Principal

SPED Department

[Yolanda Alvaro](#), Director of Special Education

[Marissa Gonzalez](#), Special Education Counselor, LPC-A

[Keri Brock](#), Behavioral Specialist

DISTRICT FORMS

[Columbia-Suicide Severity Rating Scale](#)

[Notification of Emergency Conference](#)

[Student Incident Report](#)

[Student Re-entry Plan](#)

[Student Safety Plan](#)

[Student Release of Information](#) (HIPPA)

[Parent's Checklist: Suicide Precautions](#)

[Social Worker Referral Flow Chart](#)

[Notification of Incident Letter](#)

[Teaching Coping Skills](#)

[Depression](#)

[Activity List](#)

[Kids Activity List](#)

RESOURCES

[Best Practice of the Suicide Prevention Resource](#)

[Bayview Behavioral Hospital](#)

6629 Wooldridge Rd., Corpus Christi
(361) 986-8200

[Driscoll Children's Hospital](#)

3533 S. Alameda Drive, Corpus Christi
(361) 694-5000

[Texas Child Health Access Through Telemedicine](#) (TCHATT)

[Maritza Fuentes](#), Program Advisor
(956) 296-1244

[National Suicide Prevention Lifeline](#) (dial or text 988)

800-273-8255 (TALK)

[MHID-Child/Adolescent Mental Health](#)

3733 S. Port Ave, Corpus Christi
361-886-6970

[Texas Youth Helpline](#) (DFPS STAR)

800-210-2278

[Mobile Crisis Outreach Team](#) (MCOT)

361-886-6970

REQUIRED TRAININGS

ALL EMPLOYEES

Pursuant to [SB 1267](#) and as outlined in the [Clearinghouse Publication](#), Tuloso-Midway ISD employees will complete **annual** Suicide Prevention training via Eduhero courses at the beginning of each school year.

ADMINISTRATORS

- [Crisis Response Training](#)

COUNSELORS & SOCIAL WORKER(S)

All Counselors and Social Worker(s) will complete the following annual required trainings.

- [Crisis Response Training](#)
- [Managing Suicidal Ideation](#)
- [Preventing Self-Injury for Counselors](#)

TEACHERS – FACULTY & STAFF

Campus-based training will be delivered according to the approved staff development calendar of events and/or PLC calendar of events.

All Campuses will include the following training in their staff development calendars.

- [Suicide Prevention Training](#)
- [Mental Health Training](#)
- [Self-Injury Prevention Training](#)

STUDENTS

- [Suicide Prevention – Secondary](#)