



Book	Policy Manual
Section	800 Operations
Title	Suicide Awareness, Prevention and Response (REVISED)
Code	819.1
Status	
Adopted	June 22, 2015

Purpose

The Board is committed to protecting the health, safety and welfare of its students and the school community; **promoting healthy development; and safeguarding against the threat or attempt of suicide.** This policy supports the provision of a comprehensive district program **of awareness, education, prevention, training and resources** designed to promote **school connectedness and** behavioral health, and prevent suicide.[1][2][3][4][5][6]

Authority

The Board directs the district to provide education on youth suicide awareness and prevention; methods of prevention, intervention and response to suicide attempt or suicide; **and reporting procedures.**[1][2][3][4][5][6]

The district is committed to providing access to age and developmentally-appropriate youth suicide awareness and prevention supports and resources to all district students, without bias or discrimination.[2][3]

The district shall notify employees, students and parents/guardians of this policy and shall post the policy on the district's website.[1]

Definitions

Behavioral health - the emotion, behaviors and biology related to a person's mental well-being, their ability to function in everyday life and their concept of self.

Behavioral health service providers – include, but are not limited to, state, county or local behavioral health service providers, crisis intervention center or psychiatric hospital. The term includes a private service provider which contracts with a state, county or local government to act as a behavioral health agency.[4][7]

Bias – the attitudes or beliefs we have about a person or group that affect our understanding, actions and decisions in a conscious or subconscious manner.[4]

Individualized Management Plan – a plan developed for a student who is referred to the threat assessment team that documents the concerns that brought a student to the

team's attention, as well as the resources and supports a student might need based on the information gathered during the assessment. The Individualized Management Plan is developed primarily for documentation and communication purposes.[4]

Postvention – a multi-component crisis response to provide support, promote healing after a tragic loss and to minimize risk of contagion after a suicide or other tragic event.

Prevention - refers to efforts that seek to reduce the factors that increase the risk for suicidal thoughts and behaviors and increase the factors that help strengthen, support and protect the behavioral health and wellness of individuals.

Protective factors - refer to characteristics associated with a lower likelihood of negative outcomes or that reduce a risk factor's impact. Protective factors may be seen as positive countering events.

Resilience - the process of adapting well in the face of adversity, trauma, tragedy, threats or significant sources of stress, or "bouncing back" from difficult experiences.

Risk factors - refer to characteristics at the biological, psychological, family, community or cultural level that precede and are associated with a higher likelihood of negative outcomes, including suicide.

Safety Plan – an agreement developed between the student, parent/guardian, appropriate team members and behavioral health professionals, following a suicide risk screening or assessment, that documents communications, conveys an understanding of the seriousness of the student's distress and provides a set of skills and resources the student can use in a crisis.

School connectedness - the belief by students that adults and peers in the school care about their learning as well as about them as individuals.

School personnel - include, but may not be limited to, administrators, teachers, school-based behavioral health professionals (e.g., school counselor, school nurse, school psychologist, school social worker), paraprofessionals, support staff, coaches, bus drivers, custodians and cafeteria workers.

Self-harm – behavior that is self-directed and deliberately results in injury or the potential for injury to oneself. Self-harm behaviors can be either suicidal or nonsuicidal.

Suicide - death caused by self-directed injurious behavior with intent to die as a result of the behavior.

Suicide attempt - a potentially self-injurious behavior for which there is evidence that the person had at least some intent to kill themselves.

Suicide threat - a verbal or nonverbal communication that an individual intends to harm themselves with the intention to die but has not acted on the behavior.

Threat assessment – a fact-based process for the assessment of and intervention with students whose behaviors may indicate a threat to the safety of the student, other students, school employees, school facilities, the community or others.[4]

Warning signs - evidence-based indicators, often observable, that someone may be in danger of suicide, either immediately or in the very near future.

Delegation of Responsibility

The Superintendent or designee, in collaboration with designated school personnel, shall develop administrative regulations regarding the district's protocols for response to suicide threats, suicide attempts and suicide.

Guidelines

SUICIDE AWARENESS AND PREVENTION EDUCATION^[1]

Suicide Awareness and Prevention Education for Students

Students shall receive age **and developmentally**-appropriate, **student-centered lessons** on the importance of safe and healthy choices, coping strategies **focused on resiliency**, how to recognize risk factors and warning signs, as well as help-seeking strategies for self or others, including how to engage school resources.

These lessons shall be integrated into the curriculum of health classes and other classes as appropriate. The lessons may be taught by health and physical education teachers, classroom teachers, student services staff or community service providers. Lessons shall contain information on comprehensive health and wellness, including emotional, behavioral and social skills development by:

1. **Informing** students about broader behavioral health issues such as depression and substance **use**, as well as specific risk factors, protective factors and warning signs for suicide.
2. **Encouraging** students to seek help for themselves or their peers, including when concerns arise via social media or other online forum, and to avoid making promises of confidence when they are concerned about the safety of a peer **or other individual**.
3. **Adhering** to safe and effective messaging guidelines, **avoiding** graphic testimonials and **including research-based** suicide prevention resources.
4. **Promoting** a healthy school climate where students feel connected to and can identify trusted adults in the building.
5. **Providing local, state and/or national resources for seeking help.**

Suicide Awareness and Prevention Education for School Personnel

All **school personnel** shall receive **written** information about the **district's protocols for suicide awareness and prevention, including** risk factors, warning signs, response **and communication** procedures, referrals and resources. **School personnel shall also receive information regarding strategies to enhance protective factors, resilience and school connectedness.**

As part of the district's professional development plan, professional educators in school buildings serving students in grades six (6) through twelve (12) shall participate in a minimum of four (4) hours of youth suicide awareness and prevention training every five (5) years.^{[1][8][9]}

The district shall make required training and refresher training available on an ongoing basis, so that educators may fulfill training requirements throughout the required timeframe.

School safety and security training for employees may include suicide awareness.[9]

Additional professional development in suicide risk screening and/or assessment and crisis intervention shall be provided to specialized staff and school behavioral health professionals such as school crisis response/intervention team members, **threat assessment team members**, designated administrators, school counselors, school psychologists, school social workers and school nurses.

METHODS OF PREVENTION[1]

The district shall utilize a multifaceted approach to suicide prevention which integrates school and community-based supports.

The methods of prevention utilized by the district include, but are not limited to, **education, training and awareness**; early identification and support for students at risk; and delegation of responsibility for planning and coordination of suicide prevention efforts.

Information received in confidence from a student may be revealed to the student's parents/guardians, the building principal, **the threat assessment team and/or crisis response/intervention team** or other appropriate authority when the health, welfare or safety of the student or any other person is clearly in jeopardy, **in accordance with applicable law, regulations and Board policy.**[4][10][11][12][13][14][15]

Suicide Prevention Coordinators

District-Wide -

A district-level suicide prevention coordinator shall be designated by the Superintendent **or designee**. This may be an existing district employee. The district suicide prevention coordinator shall be responsible for planning and coordinating implementation of this policy.

Building-Level -

Each building principal shall designate a school suicide prevention coordinator to act as a point of contact in each school for issues relating to suicide prevention and policy implementation. This may be an existing district employee, **who may also be a member of the threat assessment team.**[4]

Early Identification Procedures

Early identification of individuals with warning signs or suicide risk factors **that appear to adversely impact the student** is crucial to the district's suicide prevention efforts. To promote awareness, **school personnel**, students and parents/guardians should be educated about suicide risk factors and warning signs.

Referral Procedures

Any **school personnel** who observes a student exhibiting a warning sign for suicide, or **who** has another indication that a student may be contemplating suicide, shall **immediately** refer the student for suicide risk screening and/or assessment and intervention in accordance with **Board policy and** district procedures.[4][15][16]

In the absence of a warning sign for suicide, students demonstrating suicide risk factors that appear to be adversely impacting the student, **or other indications of self-harm**, should be

referred to **an appropriate team or staff member (e.g., principal, school counselor, Student Assistance Program team)** for support and follow-up.

When a student's behavior indicates a threat to the safety of the student, school personnel shall report the student to the threat assessment team, an appropriate member of the team or the suicide prevention coordinator. The threat assessment team, crisis response/intervention team and designated staff responsible for conducting or arranging suicide risk screening and assessment shall coordinate to provide assessment and intervention in accordance with Board policy and district procedures.[4][15][16][17]

School personnel shall arrange for or provide continuous adult supervision to ensure the student's safety.

Safe2Say Something

When the district receives a report through the Safe2Say Something program, members of the Safe2Say Something team shall coordinate with the appropriate emergency dispatch center(s), local law enforcement and/or district team, in accordance with district procedures.[9]

Documentation

The district shall document the referral, including specific **reasons** identified as indications that the student may be at risk.[4]

METHODS OF ASSESSMENT AND INTERVENTION[1]

The methods of **assessment and** intervention utilized by the district include, but are not limited to, responding to threats **of suicide or self-harm**, suicide attempts in school, suicide attempts outside of school and suicide.

The district shall maintain a trained school crisis response/intervention team. Team members may include, but not be limited to, designated administrators, school counselors, school nurse, school psychologist, social worker, school security personnel, members of the Student Assistance Program team and others as designated by the district such as community behavioral health agency resources.

The district's threat assessment team shall serve as a crisis response/intervention team, and may coordinate with district behavioral health staff and community behavioral health agency resources as needed.[4]

The Superintendent or designee shall establish administrative regulations for coordination of appropriate teams and staff in suicide assessment and intervention.

Suicide intervention procedures shall involve collaboration and coordination with the student, the parent/guardian, suicide prevention coordinator, the threat assessment team and/or the crisis response/intervention team and additional support services as needed.

Student Assessment and Intervention

When a student has been referred for assessment, designated members of the threat assessment team and/or crisis response/intervention team shall coordinate with appropriate behavioral health staff to assess and respond to the student's behavior, which may include development or update of an Individualized Management Plan

and/or Safety Plan, where appropriate, in accordance with Board policy and administrative regulations.[4]

A district-approved suicide risk screening or assessment tool may be used by trained behavioral health staff such as **school** counselors, psychologists **or** social workers.

Parents/Guardians of a student identified as being at risk of suicide shall be notified by the **building principal or designee** and informed of crisis and community resources. If the school suspects that the student's risk status is the result of abuse or neglect, school staff shall immediately notify Children and Youth Services, **in accordance with applicable law and Board policy.[4][6]**

The district shall identify **and develop agreements with** behavioral service providers to whom students **may** be referred for further suicide risk screening and/or assessment and **intervention.**

If the student **has been** identified as being at increased risk of suicide, the district shall **develop** a new, or update a previous, Safety Plan to support the student and the student's family. The Plan should be developed collaboratively with input from the student, **the student's parents/guardians, appropriate team members and behavioral health professionals.**

Students With Disabilities

For students with disabilities who are identified as being at risk for suicide or who attempt suicide, the **team receiving the referral or other district staff shall notify the appropriate Individualized Education Program (IEP) team or Section 504 team to** address the student's needs in accordance with applicable law, regulations and Board policy.[3][4][18][19][20][21]

If a student is identified as being at risk for suicide or attempts suicide and the student may require special education services or accommodations, the Director of Special Education shall be notified and shall take action to address the student's needs in accordance with applicable law, regulations and Board policy.[3][18][19][20][21]

Documentation

The district shall document observations, recommendations and actions conducted throughout the course of intervention, suicide risk screening and/or assessment and follow-up, including verbal and written communications with students, parents/guardians, **appropriate team members** and behavioral service providers.[4]

METHODS OF RESPONSE TO SUICIDE ATTEMPT OR SUICIDE[1]

The district's crisis response/intervention team shall coordinate with first responders, district behavioral health staff and/or community behavioral health resources in response to a suicide attempt or suicide.

Response to Suicide Attempt

Methods of response to a suicide attempt utilized by the district include, but are not limited to:

- i. Acting in accordance with professional development and crisis response training including, but not limited to:**

- a. The rendering of first aid until professional medical services and/or**

transportation can be received.

b. Supervision of the student and movement of all other students out of the immediate area.

2. Coordinating with the threat assessment team to document or follow up on the threat assessment process, in accordance with Board policy, where applicable.[4]

3. Notifying students, employees and parents/guardians.

4. Working with families.

5. Responding appropriately to the media.

6. Collaborating with community providers.

Re-entry Procedures

A student's excusal from school attendance after a behavioral health crisis and the student's return to school shall be consistent with state and federal laws and regulations, **and in accordance with Board policy.**[3][18][19][20][22][23]

Prior to a student returning to school after a behavioral health crisis, a district-employed behavioral health professional, **member(s) of the threat assessment team**, the building principal **or designee** shall meet with the parents/guardians of the student and, if appropriate, meet with the student to **discuss** the **student's return** to school and to create an individual re-entry plan.[4]

When authorized by the student's parent/guardian, the designated district employee shall coordinate with the appropriate outside behavioral **service** providers, request **releases of information** and written documentation from the treating facility and encourage their involvement in the re-entry **process**.

A school behavioral health professional shall periodically check in with the student **and** monitor the student's **re-entry plan, which may include strategies and supports to facilitate the student's progress and** transition back into the school community, **including referrals to other school-based teams or programs (e.g. Student Assistance Program).**

Re-entry of a student with a disability requires coordination with the appropriate team to address the student's needs in accordance with applicable law, regulations and Board policy.[3][18][19][20][21]

Response to Suicide (Postvention)

Upon confirmation of a suicide, the district shall immediately implement established postvention procedures which shall include methods for informing the school community; identifying and monitoring at-risk youth; and providing resources and supports for students, staff and families.

DOCUMENTATION PROCEDURES[1]

Effective documentation assists in preserving the safety of the student and ensuring communication among school staff, parents/guardians and behavioral service providers.

When **school personnel** take notes on any conversations or situations involving or relating to an

at-risk student, the notes should contain only factual or directly observed information, not opinions or hearsay.

As stated in this policy, **school personnel** shall be responsible for effective documentation of incidents involving suicide prevention, intervention and response, **in accordance with applicable laws, regulations and Board policy.**[4]

Reports and information shall be maintained confidentially and made available to appropriate district staff in accordance with applicable laws, regulations and Board policy.[4][11][12][13][14][24][25]

SUICIDE AWARENESS, PREVENTION AND CRISIS RESOURCES[1]

Crisis Resources:

- National Suicide & Crisis Lifeline: call or text 988 or visit <http://988lifeline.org>
- Crisis Text Line: **TEXT HOME to 741741** or visit <http://www.crisistextline.org/>

National:

- **Centers for Disease Control and Prevention – Risk and Protective Factors**
- **Suicide Prevention Resource Center – Risk and Protective Factors**
- Substance Abuse and Mental Health Services Administration (SAMHSA) Preventing Suicide: A Toolkit for High Schools
- Suicide Prevention Resource Center - **Safe and Effective Messaging for Suicide Prevention**
- Suicide Prevention Resource Center - **After a Suicide Toolkit**
- **Recommendations for Reporting on Suicide**

Pennsylvania:

- Suicide Prevention Guide
- List of Crisis Intervention contact information by county
- List of County CASSP and Children’s Behavioral Health Contact Persons
- **Prevent Suicide PA’s Act 71 Information**
- **STAR Center’s Postvention Manual**
- **Safe2Say Something 1-844-723-2729 or www.safe2saypa.org**

National and State Organizations

National:

- American Association of Suicidology (AAS)
- American Foundation for Suicide Prevention (AFSP)
- Suicide Prevention Resource Center (SPRC)

Pennsylvania:

- Prevent Suicide PA
- Jana Marie Foundation

- Aevidium
- [Services for Teens at Risk \(STAR-Center\)](#)
- [Pennsylvania Department of Education](#)
- **[Pennsylvania Network for Student Assistance Services \(PNSAS\)](#)**

Purpose

The Board is committed to protecting the health, safety and welfare of its students and school community. This policy supports federal, state and local efforts to provide education on youth suicide awareness and prevention; establish methods of prevention, intervention, and response to suicide or suicide attempt; and to promote access to suicide awareness and prevention resources.[1][3][4][5]

Authority

In compliance with state law and regulations, and in support of the District's suicide prevention measures, information received in confidence from a student may be revealed to the student's parents/guardians, the building principal or other appropriate authority when the health, welfare or safety of the student or any other person is deemed to be at risk.[6][7][8][9]

Guidelines

The District shall utilize a multifaceted approach to suicide prevention which integrates school and community-based supports.

The District shall notify District employees, students and parents/guardians of this policy and shall post the policy on the District's website.[1]

SUICIDE AWARENESS AND PREVENTION EDUCATION[1]

Protocols for Administration of Student Education

Students shall receive age-appropriate education on the importance of safe and healthy choices, coping strategies, how to recognize risk factors and warning signs, as well as help-seeking strategies for self or others including how to engage school resources and refer friends for help.

Lessons shall contain information on comprehensive health and wellness, including emotional, behavioral and social skills development.

Protocols for Administration of Employee Education

All District employees, including but not limited to secretaries, coaches, bus drivers, custodians and cafeteria workers, shall receive information regarding risk factors, warning signs, response procedures, referrals, and resources regarding youth suicide prevention.

As part of the District's professional development plan, professional educators in school buildings serving students in grades six (6) through twelve (12) shall participate in four (4) hours of youth suicide awareness and prevention training every five (5) years.[1][10]

Additional professional development in risk assessment and crisis intervention shall be provided to guidance counselors, District mental health professionals and school nurses.

Resources for Parents/Guardians

The District may provide parents/guardians with resources including, but not limited to, health

promotion and suicide risk, including characteristics and warning signs; and information about local behavioral/mental health resources.

METHODS OF PREVENTION^[1]

The methods of prevention utilized by the District include, but are not limited to, early identification and support for students at risk; education for students, staff and parents/guardians; and delegation of responsibility for planning and coordination of suicide prevention efforts.

Suicide Prevention Coordinators

District-Wide –

A District-wide suicide prevention coordinator shall be designated by the superintendent. This may be an existing District employee. the District suicide prevention coordinator shall be responsible for planning and coordinating implementation of this policy.

Building Level –

Each building principal shall designate a school suicide prevention coordinator to act as a point of contact in each school for issues relating to suicide prevention and policy implementation. This may be an existing District employee.

Early Identification Procedures

Early identification of individuals with one (1) or more suicidal risk factors or of individuals exhibiting warning signs, is crucial to the District's suicide prevention efforts. To promote awareness, District employees, students and parents/guardians should be educated about suicidal risk factors and warning signs.

Risk factors refer to personal or environmental characteristics that are associated with suicide including, but not limited to:

- Behavioral Health Issues/Disorders:
 - Depression.
 - Substance abuse or dependence.
 - Previous suicide attempts.
 - Self-injury.
- Personal Characteristics:
 - Hopelessness/Low self-esteem.
 - Loneliness/Social alienation/isolation/lack of belonging.
 - Poor problem-solving or coping skills.
 - Impulsivity/Risk-taking/recklessness.
- Adverse/Stressful Life Circumstances:
 - Interpersonal difficulties or losses.

- Disciplinary or legal problems.
- Bullying (victim or perpetrator).
- School or work issues.
- Physical, sexual or psychological abuse.
- Exposure to peer suicide.
- Family Characteristics:
 - Family history of suicide or suicidal behavior.
 - Family mental health problems.
 - Divorce/Death of parent/guardian.
 - Parental-Child relationship.

Warning signs are indications that someone may be in danger of suicide, either immediately or in the near future. Warning signs include, but are not limited to:

- Expressions such as hopelessness, rage, anger, seeking revenge, feeling trapped, anxiety, agitation, no reason to live or sense of purpose.
- Recklessness or risky behavior.
- Increased alcohol or drug use.
- Withdrawal from friends, family, or society.
- Dramatic mood changes.

Referral Procedures

Any District employee who has identified a student with one (1) or more risk factors or who has an indication that a student may be contemplating suicide, shall refer the student for further assessment and intervention.

Documentation

the District shall document the reasons for referral, including specific warning signs and risk factors identified as indications that the student may be at risk.

METHODS OF INTERVENTION^[1]

The methods of intervention utilized by the District include, but are not limited to, responding to suicide threats, suicide attempts in school, suicide attempts outside of school, and completed suicide. Suicide intervention procedures shall address the development of an emotional or mental health safety plan for students identified as being at increased risk of suicide.

Procedures for Students at Risk

A District-approved suicide assessment instrument may be used by trained mental health staff such as counselors, psychologists, social workers.

Parents/Guardians of a student identified as being at risk of suicide shall be notified by the

school. If the school suspects that the student's risk status is the result of abuse or neglect, school staff shall immediately notify Children and Youth Services.[5]

the District shall identify mental health service providers to whom students can be referred for further assessment and assistance.

Mental health service providers—may include, but not be limited to, hospital emergency departments, psychiatric hospitals, community mental health centers, psychiatrists, psychologists, social workers, and primary care providers.

The District shall create an emotional or mental health safety plan to support a student and the student's family if the student has been identified as being at increased risk of suicide.

Students With Disabilities

For students with disabilities who are identified as being at risk for suicide or who attempt suicide, the appropriate team shall be notified and shall address the student's needs in accordance with applicable law, regulations and Board policy.[11][12][13][14]

If a student is identified as being at risk for suicide or attempts suicide and the student may require special education services or accommodations, the Director of Special Education shall be notified and shall take action to address the student's needs in accordance with applicable law, regulations and Board policy.[11][12][13][14]

Documentation

The District shall document observations, recommendations and actions conducted throughout the intervention and assessment process including verbal and written communications with students, parents/guardians and mental health service providers.

The superintendent or designee shall develop administrative regulations providing recommended guidelines for responding to a suicide threat.

METHODS OF RESPONSE TO SUICIDE OR SUICIDE ATTEMPT[1]

The methods of response to a suicide or a suicide attempt utilized by the District include, but are not limited to:

1. Identifying and training the school crisis response/crisis intervention team.
2. Determining the roles and responsibilities of each crisis response team member.
3. Notifying students, employees and parents/guardians.
4. Working with families.
5. Responding appropriately to the media.
6. Collaborating with community providers.

The superintendent or designee shall develop administrative regulations with recommended guidelines for responding to a suicidal act or attempt on school grounds or during a school-sponsored event.

Re-Entry Procedures

A student's excusal from school attendance after a mental health crisis and the student's return to school shall be consistent with state and federal laws and regulations.[11][12][13][15][16]

~~A District-employed mental health professional, the building principal or suicide prevention coordinator shall meet with the parents/guardians of a student returning to school after a mental health crisis, and, if appropriate, meet with the student to discuss re-entry and applicable next steps to ensure the student's readiness to return to school.~~

~~When authorized by the student's parent/guardian, the designated District employee shall coordinate with the appropriate outside mental health care providers.~~

~~The designated District employee will periodically check in, as needed, with the student to facilitate the transition back into the school community and address any concerns.~~

REPORT PROCEDURES^[1]

~~Effective documentation assists in preserving the safety of the student and ensuring communication among school staff, parents/guardians and mental health service providers.~~

~~When a District employee takes notes on any conversations or situations involving or relating to an at-risk student, the notes should contain only factual or directly observed information, not opinions or hearsay.~~

~~As stated in this policy, District employees shall be responsible for effective documentation of incidents involving suicide prevention, intervention and response.~~

~~The suicide prevention coordinator shall provide the superintendent with a copy of all reports and documentation regarding the at-risk student. Information and reports shall be provided, as appropriate, to guidance counselors, District mental health professionals and school nurses.~~

SUICIDE AWARENESS AND PREVENTION RESOURCES^[1]

~~A listing of resources regarding suicide awareness and prevention shall be attached to this policy.~~

Legal

[1. 24 P.S. 1526](#)

3. Pol. 248

4. Pol. 249

5. Pol. 806

[6. 22 PA Code 12.12](#)

7. Pol. 207

8. Pol. 216

9. Pol. 236

10. Pol. 333

11. Pol. 113

12. Pol. 113.2

13. Pol. 113.3

14. Pol. 114

15. Pol. 117

16. Pol. 204

Pol. 146

Pol. 805

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