5277-R Suicide Prevention

SCOPE

This regulation covers actions that take place in the school, on school property, at school-sponsored functions and activities, on school buses or vehicles and at bus stops, and at school-sponsored out-of-school events where school staff are present. This regulation also applies to the entire school community, including educators, school and district staff, students, parents/guardians, and volunteers. This regulation will also cover appropriate school responses to suicidal or at-risk behaviors that take place outside of the school environment.

DEFINITIONS

a. At risk/suicidal behavior: A student who has made a suicide attempt has displayed a significant change in behavior suggesting the onset or deterioration of a mental health condition or has suicidal ideation defined as thinking about, considering, or planning for self-injurious behavior which may result in death. A desire to be dead without a plan or intent to end one's life is still considered suicidal ideation.
b. Mental health: A state of mental and emotional being that can impact choices and actions that affect wellness. Mental health problems can include substance use or a medical condition.
c. Crisis Response team: A multidisciplinary team which may include administration, mental health professionals, and support staff trained in crisis prevention whose primary focus is to address intervention/response and postvention.
d. Postvention: Suicide postvention is a crisis intervention strategy designed to reduce the risk of suicide and suicide contagion, provide the support needed to help survivors cope, address the social stigma, and disseminate factual information.
e. Safety Information Gathering: A conversation with a student who may be at risk for suicide, conducted by the school counselor/social worker or designee (e.g., principal, nurse, school psychologist) intended to gather information regarding the student's intent to die by suicide. This may include previous history of suicide attempts, presence of a suicide plan and its level of lethality and availability, presence of support systems, level of hopelessness and helplessness, mental health status, and other relevant risk factors.
f. Risk factors for suicide: Biological, psychological, and/or social factors in the individual, family, and environment that increase the chance a person may try to take their life. Suicide risk tends to be highest when someone has several risk factors at the same time.
g. Safety packet: Will include a list of resources available in the community, means restriction information ~~for parents about youth and suicide~~, and other pertinent information.
h. Self-harm: Behavior that is self-directed and deliberately results in injury or the potential for injury to oneself. Although self-harm often lacks suicidal intent, youth who engage in self-harm are more likely to attempt suicide.
i. Suicide: Death caused by self-directed injurious behavior with any intent to die as a result of the behavior and confirmed by the coroner's or medical examiner's office.
j. Suicide attempt: A self-injurious behavior for which there is evidence that the person

had at least some intent to kill themselves. A suicide attempt may result in death, injuries, or no injuries.

k. Suicide contagion: The process by which a suicide or suicidal behavior influences an increase in the suicidal behaviors of others and may result in a cluster of suicides.

PREVENTION

a. District Policy Implementation: The Department of Student Support Services will be responsible for disseminating this policy for the district. Each school principal will designate a school counselor/social worker, or designee, as a point of contact in each school for issues relating to suicide prevention and policy implementation.
b. Staff Professional Development: All staff will receive annual professional development on risk factors, warning signs, protective factors, reporting procedures, and resources regarding youth suicide prevention. In compliance with state statute, all certified staff:
    1. Will complete at least eight (8) hours of suicide prevention education every four (4) school years using suitable materials reviewed and recommended by the State Superintendent of Public Instruction.
    2. Will complete at least two (2) hours of suicide prevention education during the initial school year of employment with the district if the teacher or school administrator has not received suicide prevention training complying with this paragraph prior to employment.
    3. Suicide prevention education may consist of self-review of approved suitable materials.
c. Youth Suicide Prevention Programming: Developmentally appropriate, student-centered education materials and programs will be utilized.

SAFETY INFORMATION GATHERING PROCEDURES

When a student displays at-risk/suicidal behavior, the student will be seen by a school counselor/social worker or designee, the same school day, when possible, to gather safety information and facilitate referral, if needed.

For youth at risk:

a. School staff will supervise the student to ensure their safety.
b. The principal will be made aware of the situation as soon as reasonably possible.
c. The school counselor/social worker or designee will contact the student's parent or guardian, as described in the Parental Notification and Involvement section, and will assist the family with an urgent referral. When appropriate, this may include calling emergency services or referring the student to the local emergency services and communicating the reason for referral.
d. Staff will ask the student's parent or guardian to sign a release of information to discuss the student's health with outside care, if appropriate.

IN-SCHOOL SUICIDE ATTEMPTS

In the case of an in-school suicide attempt, the health and safety of the student is paramount. In these situations:

a. First aid will be rendered until professional medical treatment and/or transportation

can be received, following district emergency medical procedures.

b. School staff will supervise the student to ensure their safety.
c. Staff will move all other students out of the immediate area as soon as possible. The school counselor/social worker or designee will contact the student's parent or guardian, as described in the Parental Notification and Involvement section.
d. Staff will immediately notify the principal or designated administrator, who will notify the Superintendent or designee.
e. The school will engage, as necessary, the crisis response team to assess whether additional steps should be taken to ensure student safety and well-being.

RE-ENTRY PROCEDURE

For students returning to school after a mental health crisis, a school counselor/social worker, the principal, or designee will request to meet with the student's parent or guardian and/or the student to discuss re-entry and appropriate next steps to ensure the student's readiness for return to school.

a. A school counselor/social worker or other designee will be identified to coordinate the re-entry meeting with the student, their parent or guardian, and may include any outside mental health care providers.
b. The parent or guardian will be requested to provide documentation from a mental health care provider that the student has undergone an evaluation and is safe to return to school.
c. A designated staff person(s) will periodically check in with the student to help them transition to the school community or address any ongoing concerns.

OUT-OF-SCHOOL ACTIVE SUICIDE ATTEMPTS

If a staff member becomes aware of an active suicide attempt by a student in an out-of-school location, the staff member will:

a. Call law enforcement and/or emergency medical services, such as 911, immediately.
b. If able to make contact, inform the student's parent or guardian.
c. Inform the principal, who will notify the Superintendent or designee.

OUT-OF-SCHOOL SUICIDE IDEATION

If a staff member becomes aware that a student has expressed suicidal ideation outside of school hours, the staff member should:

a. If in contact with the student, attempt to maintain contact (either in person, online, or on the phone) and enlist the assistance of another person to contact the parent and/or law enforcement.
b. If not in contact with the student (heard from another student, saw online, etc), contact law enforcement, parents/guardians, and/or Safe2Tell.

PARENT NOTIFICATION AND INVOLVEMENT

The principal, school counselor/social worker or designee will:

a. Notify the student's parent/guardian immediately in situations where a student is believed to be at risk for suicide or has made a suicide attempt.
b. Notify the parent/guardian of intervention options, including but not limited to

emergency and counseling services in the community.

c. Request the parent/guardian to transport the student to a mental health provider for the evaluation.
d. Notify law enforcement/DFS if the parent or guardian refuses to seek services to address the student's suicidal ideation or refuses to provide verification of a mental health assessment. Staff will also seek parental permission to communicate with outside mental health care providers regarding their child.
e. Provide the District's safety packet to the parent/guardian if the student is referred for an evaluation ~~has exhibited any kind of suicidal behavior~~.

Through discussion with the student, the principal, school counselor/social worker, or designee will evaluate whether there is further risk of harm due to parent/guardian notification. If the principal, school counselor/social worker, or designee, in their professional capacity, determines that contacting the parent or guardian would endanger the health or wellbeing of the student, they may delay such contact until the appropriate authorities have been contacted and consulted. If contact is delayed, the reasons for the delay should be documented, and the Superintendent or designee will be contacted.

The principal, school counselor/social worker, or designee will document the safety information gathering and parental notification process and send a copy to the Superintendent or designee.

POSTVENTION: DEVELOPMENT AND IMPLEMENTATION OF A CRISIS PLAN

The Crisis Response team will meet and develop a crisis plan as soon as possible following a death by suicide to guide the school response. The action plan may include the following steps:

a. Verify the death: Confirm the cause of death through the coroner's office or law enforcement.
b. Assess the situation: Prepare the postvention response, considering how severely the death is likely to affect other students and staff, how recently other traumatic events have occurred within the school community, and the time of year of the suicide.
c. Share information: Before the death is officially classified as a suicide by the coroner's office, the death can and should be reported to staff, students, and parents/guardians with an acknowledgment that its cause is unknown. Additional information may be provided when available and as needed.
d. Initiate support services: Coordinate support services for students and staff identified as high-risk, such as individual and small group counseling or a referral to community mental healthcare providers.
e. Avoid suicide contagion: One purpose of trying to identify and give services to other high-risk students is to prevent another death.
f. Address memorial plans: The school will not create on-campus physical memorials (e.g. photos, flowers, yearbook pages, etc.), funeral services, or fly the flag at half-mast because it may sensationalize the death and encourage suicide contagion. If memorials occur on school property, the school will take steps to disband or remove the items in an effort to prevent contagion. Items from disbanded memorials (e.g. pictures, flowers, etc.) should be offered to the student's family. School should not be

canceled for the funeral.

g. External Communication: The superintendent or designee will be the sole media spokesperson. Staff will refer inquiries from the media directly to the spokesperson.

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ADMINISTRATIVE REGULATION: