

Estacada School District
Suicide Prevention Plan

Includes Prevention, Intervention, and Postvention Plans

Revised January 2025

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Section 1 – Introduction

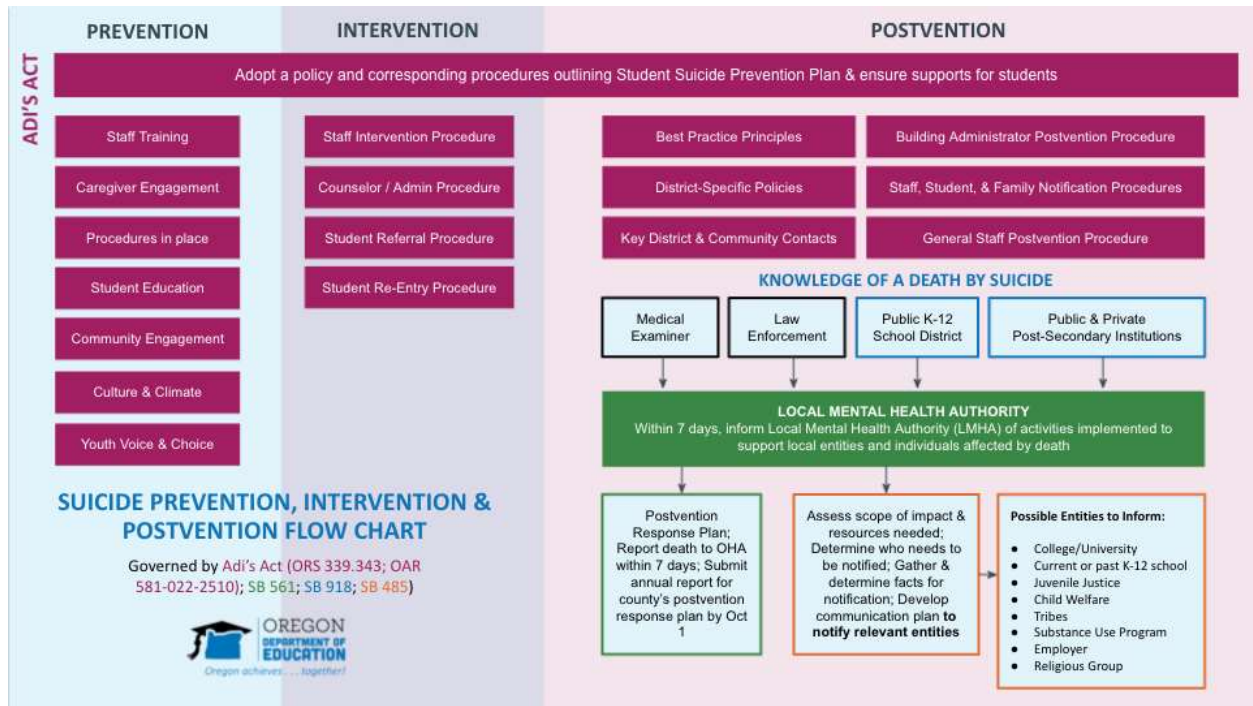
Employees of the Estacada School District care deeply about the students and families that attend the schools found in this rural suburb of Portland.

The creation of and implementation of Adi's Act (ORS 339.343; ORS 581-022-2510) by the Oregon Legislature further reiterated the need to effectively and consistently care for students, families, and community members in terms of sound mental health care.

Suicide is a leading public health concern across the globe that affects people of all identities and backgrounds. Research has also shown that individuals from historically and currently marginalized communities (especially the LGBTQIA+ community) experience suicide related-behaviors at disproportionate rates compared to the general population. Adolescents are also more vulnerable to suicide contagion than adults, as adolescents are developing a sense of self that makes them more susceptible to peer influences. Exposure to a suicide attempt or death of a peer by suicide can lead to an increased risk of suicidality and distress among teens.

The Estacada School District Suicide Prevention Plan includes the rationale, policies, and procedures that employees both follow and adhere to in order to 1) prevent suicides from happening, 2) intervene when students or staff or community members report suicidal ideation, and 3) respond professionally when a suicide has occurred. These three categories will be referred in this Suicide Prevention Plan (SPP) as Prevention, Intervention, and Postvention.

Relevant Legislation and Administrative Rules



Adi's Act (ORS 339.343; OAR 581-022-2510)

ORS 339.343 requires each school district school board adopt a policy outlining their Student Suicide Prevention Plan. Comprehensive school district Student Suicide Prevention Plans compliant with state requirements provide procedural planning, equity and racial equity-centered supports, as well as a staff training process that includes when and how students and families will be referred to appropriate mental health and crisis services. Districts are also required to make the plan available to students and the school district community on an annual basis.

The administrative rule implementing ORS 339.343, OAR 581-022-2510, further requires school districts to ensure supports for all students including LGBTQ2SIA+ (lesbian, gay, bisexual, transgender/non-binary, queer/questioning, two-spirit, intersex, asexual, and the myriad other ways to describe gender identities and sexual orientations) youth, BIPOC (Black, Indigenous, and People of Color) and tribal communities/members/students, youth in out-of-home settings, youth with disabilities, as well as historically and currently underserved youth. OAR 581-022-2510 is part of the Division 22 Standards for Public Elementary and Secondary Schools. School district superintendents are required to report their compliance annually.

School Safety & Prevention System (Section 36 of the Student Success Act, OAR 581-029-0001; OAR 581-022-2510)

The implementation of Adi's Act is supported by the School Safety and Prevention System. The SSPS is an integrated set of policies and practices designed to enact Section 36 of the Student Success Act as well as Adi's Act. Developed through a process of public support and community engagement, SSPS provides a comprehensive school safety and prevention model that centers on equity, racial equity, and access to mental health services. The SSPS model envisions school safety as access to culturally responsive mental health services and supports and SSPS as a prevention system fostering learning environments where all students thrive because they belong.

ORS 418.735 or SB 485

ORS 418.735 was expanded during the 2019 legislative session to add school districts as one of the required agencies to engage in follow-up after a suicide death by a youth under the age of 24. ORS 418.734 requires that within seven days after a suicide death of an individual 24 years of age or younger, the local mental health authority in the area where the suicide occurred and any public school district the individual was attending at the time of the individual's death shall inform the Oregon Health Authority. This district plan includes activities that will help prevent the risk of contagion. The Oregon Health Authority will serve as the key resource to the district as Postvention activities are implemented.

Connection to Local Suicide Prevention Programs

Schools play an integral role in helping prevent youth suicide. Because suicide is a complex public health issue, it is not schools' responsibility alone to prevent youth suicide. School-based youth suicide prevention is strengthened through mutually beneficial partnerships with local suicide prevention programs, such as local public health authorities, local mental health authorities, as well as community organizations working to contribute to a comprehensive approach to youth suicide prevention.

In Oregon, local suicide prevention programs can serve as another source of content expertise for evidence-based, comprehensive youth suicide prevention. The Estacada School District works closely in partnership with its local suicide prevention programs, especially Clackamas County's Suicide Prevention Team.

Further, local public health authorities and local mental health authorities will adhere to local legislation relating to youth suicide prevention, which includes the following:

Post-Suicide Intervention (ORS 430.630)

Senate Bill 561 (2015) requires local mental health authorities (LMHAs) as defined in ORS 430.630 to do the following when suicide deaths occur in youth (age 24 years or younger):

- Work with youth-serving organization partners to develop plans for information-sharing and response;
- Prepare communities to respond in a way that reduces the risk of more suicide (contagion) among friends, loved ones or peers left behind after the death; and
- Report deaths to Oregon Health Authority (OHA) within 7 days of death so that OHA can provide technical assistance on best practices in responding to suicides and reducing contagion risks.

LMHA Communications Regarding Suicides (Senate Bill 918 or ORS 418.735)

Senate Bill 918 directs LMHAs to notify local systems having contact with deceased individual 24 years of age or younger of suspected suicide if LMHA received notice of death from third party. Examples of local systems include:

- Current or past K12 school
- Current or past college or university
- Juvenile Justice
- Tribes
- Child Welfare
- Current or recent employer

- Religious Group
- Substance Use Program

LMHAs must consider the following when notifying local systems:

- Assess scope of impact and resource(s) needed
- Gather and determine facts for communication
- Determine which entities and/or individuals need notification based on the circle of influence of the deceased
- Develop a communication plan that includes: 1) who to inform, 2) reason they need information, 3) person within LMHA responsible for carrying out notification, and 4) timeline goal for communication

Notification of the death to local systems must include the following at minimum:

- Name of the deceased individual
- Birth date of the deceased individual
- Date of death of the deceased individual
- Any other information that the LMHA determines is necessary to preserve the public health and that is not otherwise protected from public disclosure by state or federal law

School Safety and Prevention System

The Estacada School District utilizes the support available through the School Safety and Prevention System (SPSS). The SPSS includes a total of 16 positions statewide:

- Regionally based in ESDs statewide, 11 School Safety and Prevention Specialist positions. These specialists are cross-trained in behavioral safety assessment, suicide prevention, and school culture and climate supports. Estacada utilizes the specialist in the Clackamas Education Service District.
- Five School Suicide Prevention and Wellness positions (4 coordinators, 1 program manager) to develop regional teams supporting suicide prevention, intervention and postvention planning, and programming.

SPSS specialists support the Estacada School District in developing its Student Suicide Prevention Plan in alignment with ODE's Integrated Model of Mental Health as well developing regional networks of mental health, public service and safety agencies, and community-based organizations to address student behavioral and mental health crises through a multidisciplinary and multicultural lens.

Our model integrates public health systems through partnership with OHA, and interfaces with public education systems through partnership with Education Service Districts (ESDs). The SPSS will provide a continuum of support ranging from safety-based crisis intervention to curriculum-based universal prevention programs. These supports include equity and racial equity-centered, evidence-based, trauma-informed, and strengths-focused suicide prevention efforts, behavioral safety assessment, access to the SafeOregon Tip Line, and positive school culture and climate (including bullying, cyberbullying, harassment, and intimidation prevention, social-emotional (SEL) learning) supports to promote mental health and well-being in school districts statewide.

Comprehensive Strategy

There is no single cause to suicide and therefore a comprehensive approach that utilizes a variety of evidence-based strategies is used by the Estacada School District for preventing youth suicide. A strategic, comprehensive approach uses multiple strategies that are aligned across multiple tiers for multiple audiences. Strategies include the following and are further detailed on our Comprehensive Approach Matrix (see pages 10-15). This provides a high-level view of the district's overall Suicide Prevention plan and approach.

6 Strategies for a Comprehensive Approach

One strategy alone will not create system-level change. A strategic, comprehensive approach uses multiple strategies that are aligned across multiple tiers for multiple audiences



Policy

Written rules, laws and/or procedures



Information/Education

Educational presentations, curricula, communication campaigns



Enhance Skills

Activities designed to increase skills of participants (e.g. students, staff, families, etc.)



Support

Opportunities to support people to participate in activities that reduce risk or enhance protection (e.g. youth clubs, parenting groups, peer support, etc.)



Increase Access/Remove Barriers

Improve systems and processes to increase ease, ability, & opportunity to utilize systems and services (e.g. SPED, transportation, access to treatment, etc.)



Physical Environment

Changing the physical design or structure of the environment to reduce risk, enhance protection, and be trauma-informed (e.g. signage, lighting, etc.)

Estacada School District Comprehensive Approach Matrix

	Prevention	Intervention	Postvention
Elementary Students	<p>Policy (JHH): The district shall develop a comprehensive student suicide prevention plan for students in kindergarten through grade 12.</p> <p>Info/Education: Pre-K through 5th grade students participate in social-emotional learning (SEL) lessons–<i>Fly Five, Second Step</i> bully prevention lessons s (<i>Second Step Child Protection Unit</i>) to include child abuse prevention and safety in- and outside the home. <i>Zones of Regulation</i> is also used.</p> <p>Enhance Skills: Access/Barriers: Referrals to Orchid Health and Trillium Family Services. Access to school-based social worker.</p> <p>Support: Inform students of the <i>Oregon Youth Line</i> hotline numbers</p> <p>Physical Environment: -Calming corner/break-space in all classrooms -Counseling office</p>	<p>Policy (JHH): Procedures and activities must be developed for suicide intervention that reduce risk and promote healing after a suicide.</p> <p>Info/Education: A safety plan is created with the student that identifies warning signs and develops procedures that support the student’s well-being.</p> <p>Enhance Skills: -Teach positive coping skills -Challenging negative thoughts -Teaching growth mindset strategies</p> <p>Access/Barriers: -- -Referrals to <i>Orchid Health</i> and <i>Trillium Family Services</i>. -Removing access to means of harm (weapons, medication, alcohol, etc.)</p> <p>Support: Provide counseling with school counselor to monitor safety/support plan</p> <p>Physical Environment: Increased supervision</p>	<p>Policy (JHH): Develop procedures and activities that promote healing after a suicide.</p> <p>Info/Education: Students identified as high-risk of suicide contagion will be offered individual counseling to learn coping skills.</p> <p>Enhance Skills: -Coping skills -Access to mental health resources</p> <p>Access/Barriers: Referrals to Orchid Health and Trillium Family Services.</p> <p>Support: Students at high risk of suicide contagion will be identified and offered mental health resources and/or services. Crisis response team members will be available for students to talk to and process feelings.</p> <p>Physical Environment: -Crisis response team will set up a safe room available for students to come and process their feelings -Increased supervision of students identified as high-risk for suicide contagion</p>

Estacada School District Comprehensive Approach Matrix

	Prevention	Intervention	Postvention
Middle School Students	<p>Policy (JHH): The district shall develop a comprehensive student suicide prevention plan for students in kindergarten through grade 12.</p> <p>Info/Education: -Students in all grades receive suicide prevention/awareness curriculum via counselor classroom visits -Students in all grades engage in SEL using <i>Success Bound</i> curriculum -6th grade and 8th grade students take Health which includes curriculum that focuses on physical and mental health</p> <p>Enhance skills: -All students receive help-seeking curricula via suicide prevention lessons</p> <p>Access/Barriers: -School based health center (Orchid Health) -Community Partner Resources: Orchid, Trillium, NWFS, Todos Juntos, Ant Farm, DHS</p> <p>Support: -Career and College Readiness learning opportunities to promote self-awareness and self-efficacy -After school programs -Sports -Girls Circle and Boys Council -School Counselor and Social Worker support</p> <p>Physical Environment: -Main office for student breaks -School counselor and other support staff office space -Nurses room</p>	<p>Policy (JHH): Procedures and activities must be developed for suicide intervention that reduce risk and promote healing after a suicide.</p> <p>Info/Education: -School counselor and administrators work with families/ students to create Safety Plan/Support Plan and provide other crisis management resources</p> <p>Enhance Skills: -Resources for help -Collaboratively complete the Student Support Plan- (i.e., positive and protective factors in individual’s life, etc...)</p> <p>Access/Barriers: Referrals to <i>Orchid Health</i> and <i>Trillium Family Services</i>. -Removing access to means of harm (weapons, medication, alcohol, etc.)</p> <p>Support: -School staff resources: Providing counseling and coping strategies -School staff collaborating with student support network outside of school -Development of Safety Plan/Support Plan</p> <p>Physical Environment: -Increased support vision -Plans for designated spaces students can go to when they need help</p>	<p>Policy (JHH): Develop procedures and activities that promote healing after a suicide.</p> <p>Info/Education: -Regional Crisis Response Team -Safe Room Activities and Counseling -Providing resources to teachers</p> <p>Enhance Skills: -Safe Room Activities and counseling -Resources for teachers to help students</p> <p>Access/Barriers: -Referrals to Orchid Health</p> <p>Support: -Local Crisis Response Team -Safe Room -Resources for those feeling suicidal, including screening</p> <p>Physical Environment: -Safe Room(s) -Counselor availability</p>

Estacada School District Comprehensive Approach Matrix

	Prevention	Intervention	Postvention
High School Students	<p>Policy (JHH): The district shall develop a comprehensive student suicide prevention plan for students in kindergarten through grade 12.</p> <p>Info/Education: -Students in all grades receive mental health promotion curriculum every year via Classroom Counselor Visits. -Students in grades 9 and 10 receive mental health promotion curriculum in Health classes.</p> <p>Enhance Skills: -QPR student training -Mental Health Awareness Week</p> <p>Access/Barriers: - Orchid Health -Trillium, NWFS, Todos Juntos, Ant Farm, DHS, CWS</p> <p>Support: -Clubs -Before/After school activities -Counselor check-ins</p> <p>Physical Environment: - Counseling office - Nurse’s room, conference room, and other quiet spaces -Teacher/student relationships</p>	<p>Policy (JHH): Procedures and activities must be developed for suicide intervention that reduce risk and promote healing after a suicide.</p> <p>Info/Education: Students and families receive a written Student Safety/Support Plan and crisis resource contact information. A letter is also available to provide to parents and guardians once a screening has been completed.</p> <p>Enhance skills: -Resources for help -Collaboratively complete the Student Support Plan- (i.e., positive and protective factors in individual’s life, etc...)</p> <p>Access/Barriers: -Support network -Barriers are addressed during screening and of the Safety Plan</p> <p>Support: - School resources - Community resources - Student Support Plan - School Safety Plan</p> <p>Physical Environment: -Designated places for students to utilize as needed</p>	<p>Policy (JHH): Develop procedures and activities that promote healing after a suicide.</p> <p>Info/Education: - Regional Crisis Response Team -Safe Room Activities and Counseling -Providing resources to teachers</p> <p>Enhance skills: -Safe Room Activities and Counseling -Resources for teachers to help students</p> <p>Access/Barriers: - Referrals to Orchid Health</p> <p>Support: -Local Crisis Response Team Support Room -Resources for those feeling suicidal, including screening</p> <p>Phys Environment: - Support Room(s) - Counselor availability</p>

Estacada School District Comprehensive Approach Matrix

	Prevention	Intervention	Postvention
School Staff	<p>Policy: Procedures and activities must be developed for suicide intervention that reduce risk and promote healing after a suicide.</p> <p>Info/Education: QPR staff training</p> <p>Enhance skills: -QPR staff training -Role specific trainings (Example: ASIST training for school counselors, Treat Assessment for Social Workers)</p> <p>Access/Barriers: Training offered yearly to maintain certification</p> <p>Support: Training from QPR Trainers</p> <p>Physical Environment: Positive Work and school environment for everyone.</p>	<p>Policy: Adi’s Act Intervention Policy</p> <p>Info/Education: QPR staff training</p> <p>Enhance skills: -QPR staff training -Role specific trainings (Example: ASIST training for school counselors, Treat Assessment for Social Workers)</p> <p>Access/Barriers: Referrals to school counselors and Orchid Health</p> <p>Support: -Student re-entry procedures</p> <p>Physical Environment: -Confidential space for suicide risk screening</p>	<p>Policy (JHH): Develop procedures and activities that promote healing after a suicide.</p> <p>Info/Education: - Regional Crisis Response Team -Safe Room Activities and Counseling -Providing resources to teachers</p> <p>Enhance skills: -Safe Room Activities and Counseling -Resources for teachers to help students</p> <p>Access/Barriers: - Referrals to Orchid Health</p> <p>Support: -Local Crisis Response Team Support Room -Resources for those feeling suicidal, including screening</p> <p>Physical Environment: - Support Room(s) - Counselor availability</p>

Estacada School District Comprehensive Approach Matrix

	Prevention	Intervention	Postvention
Caregivers	<p>Policy: Procedures and activities for suicide prevention that reduce risk and promote healing after a suicide.</p> <p>Info/Education: Parents and guardians can be aware of possible warning signs of suicide.</p> <p>Enhance Skills: -Skills training and education for parents (offered by Ant Farm and Todos Juntos)</p> <p>Access/Barriers: -Interpreters -Food Bank</p> <p>Support: - Student Safety Support Plan - Parent/Guardian Letter</p> <p>Physical Environment: Parenting classes for guardians can help promote a warm, caring home environment.</p>	<p>Policy: Procedures and activities for suicide intervention that reduce risk and promote healing after a suicide.</p> <p>Info/Education: Remove access to means; Provide referral resources</p> <p>Enhance skills: -Skills training and education for parents (offered by Ant Farm and Todos Juntos)</p> <p>Access/Barriers: -Information from various agencies</p> <p>Support: - Student Safety Support Plan - Parent/Guardian Letter</p> <p>Physical Environment: Safety plan may include student-well being plan to be implemented at home.</p>	<p>Policy: Procedures and activities for suicide intervention that reduce risk and promote healing after a suicide.</p> <p>Info/Education: Provide referral resources</p> <p>Enhance skills: Postvention trainings and meetings. Individual meetings with school counselors</p> <p>Access/Barriers: -Referrals to Orchid Health</p> <p>Support: Community Support Groups</p> <p>Physical Environment: Possible use of the Clackamas County Postvention Team</p>

Estacada School District Comprehensive Approach Matrix

	Prevention	Intervention	Postvention
Community Connection	<p>Policy: Procedures and activities ought to be developed for suicide intervention that reduce risk and promote healing after a suicide.</p> <p>Info/Education: Training community partners in QPR and other suicide prevention treatment would be ideal.</p> <p>Enhance skills: Community school classes for QPR training</p> <p>Access/Barriers: Our current community liaison is Brent Dodrill, one of the local community members who is also part of the local pastoral collective.</p> <p>Support: Contact Brent Dodrill, who will connect with the Community.</p> <p>Phys Environment: Train community members in QPR, as well as how to support youth</p>	<p>Policy: Procedures and activities for suicide intervention that reduce risk and promote healing after a suicide.</p> <p>Info/Education: Remove access to means; Provide referral resources</p> <p>Enhance skills: -Skills training and education for parents (offered by Ant Farm and Todos Juntos)</p> <p>Access/Barriers: -Information from various agencies</p> <p>Support:</p> <ul style="list-style-type: none"> - Student Safety Support Plan - Parent/Guardian Letter <p>Physical Environment: Safety plan may include student-well being plan to be implemented at home.</p>	<p>Policy: Develop procedures and activities that promote healing in the community after a suicide.</p> <p>Info/Education: Provide referral resources</p> <p>Enhance skills: Postvention trainings and meetings. Individual meetings with school counselors</p> <p>Access/Barriers: -Referrals to Orchid Health</p> <p>Support: Community Support Groups</p> <p>Physical Environment: Possible use of the Clackamas County Postvention Team</p>

Section 2 – Prevention

Introduction

Suicide prevention involves much more than solely addressing suicidality. Suicide prevention requires universal mental health promotion before suicidal ideation is identified. Mental health promotion encompasses a wide variety of activities and approaches across all six strategies of the comprehensive approach. There is no single cause to suicide and therefore a comprehensive strategy of approaches is necessary to systematically prevent youth suicide.

Inherent in our effort to prevent suicide is the acknowledgment of the inequities, disparities, racism, oppression, marginalization, insults and assaults experienced by Black, Latinx, Asian American/Pacific Islander, Tribal, and LGBTQ2SIA+ community members, individuals with disabilities and others, and the commitment to changing the policies, practices and systems that perpetuate these harms.

Policy

[ORS 339.343, or Adi’s Act](#), requires all school districts to have a written, comprehensive plan on student suicide prevention. The Estacada School District is in compliance with ORS 339.343 and annually reviews the comprehensive plan to ensure accuracy and on-going relevancy.

Information/Education

Suicide prevention through information and education includes both general educational curricula as well as specific suicide prevention curricula. Signs encouraging students to reach out in emergency situations through the new 988 phone number are in each building. As research repeatedly shows, talking about suicide does not increase the risk of suicide – on the contrary, it is a necessary part of suicide prevention. The following list complements the Matrix on pages 10-15 to outline specific informational/educational/curricular opportunities for students in our school District:

Elementary Schools: Weekly School Counselor Lessons covering a wide range of topics, including mental health, suicide prevention, health education, and overall general well-being. The Second Steps curriculum and the Fly Five curriculum are both used in the elementary schools. A Mental Health Week is held each year to promote positive mental health practices.

Middle School: Weekly SEL lessons presented by staff covering a wide range of topics a wide range of topics, including mental health, suicide prevention, health education, and overall general well-being. The *Success Bound* curriculum is used at the middle school as part of SEL lessons. Students in 6th grade and 8th grade students take a year-long Health class, which

includes curriculum focusing on physical and mental health. A Mental Health Week is held each year to promote positive mental health practices.

High School: Students at each grade level receive 8-10 weeks of school counselor lessons, covering a wide range of topics, including mental health, suicide prevention, health education and overall general well-being. In addition, students in 9th and 10th grade receive 18 weeks of Health Education, which includes sexuality education, diversity lessons, self-esteem curriculum, and abuse/violence/bullying prevention-training. A Mental Health Week is held each year to promote positive mental health practices. High school students are also given opportunities to become trained QPR Gatekeepers.

School Staff: Staff receives yearly *Public Works* trainings, which cover topics of child abuse, sexual harassment, and other content areas that train staff to help prevent student deaths by suicide. All staff (certified and classified) is trained every two years in QPR.

Caregivers and Community Member Involvement: Parenting classes and QPR training is offered for parents and interested community members. The parenting classes are offered through Todos Juntos and AntFarm, local partners with Estacada School District. QPR trainings are offered to the community by trained school counselors and through Clackamas County, as found on the website gettrainedtohelp.org.

Increasing Access and Removing Barriers

Navigating school and community resources can sometimes be difficult for families and their students. Our schools can play an integral role in working with community partnerships in order to remove barriers to services. These services are considered vital components to suicide prevention, such as:

- Language Access (The Estacada High School provides language translation in Spanish as needed.)
- Culturally Responsive Teaching/Practices (Many staff members are trained in Culturally Responsive Teaching, particularly in the Zaretta Jackson model of CRT).
- Community Partner Relationships, such as agreements between school districts and local mental health authorities (The Estacada School District has partnerships with the Clackamas Women's Service, Northwest Family Services, C-TEC, OYCP, and Clackamas ESD).
- Universal screening for mental health support (The Estacada School District has full-time school psychologists and partners with Orchid Health and Trillium Family Services for mental health support).
- School Based Health Centers (Orchid Health is Estacada School District's School Based Health Center (SBHC). All students can receive free health care.)

Support

Our schools have always played a key role in supporting students' positive identity development. This is a key factor in suicide prevention. **These activities and strategies don't have to be, and most often are not, explicitly focused on suicide prevention.** Broadly, they can include supports and services such as:

- College and Career Readiness programs
- After School Clubs
- Affinity Groups
- Sports Teams
- Support Groups focused on specific needs/experiences
- Arts, Dance, Music Programs
- Family Support & Connection
- Regional Educator Networks
- Local partners like Todos Juntos, Antfarm, and The Artback who expand connection

See pages 10-15 for specific programs at each building/level of education.

Physical Environment

The Estacada School District recognizes that the physical environment has a remarkable impact on mental health and wellbeing. While it is often not possible to completely redesign a school building, it is possible to utilize opportunities in order to make the physical environment within our buildings more accessible, more welcoming and inclusive of the students we serve.

As such, we strive to:

- Consider trauma informed design in our displays and public relations campaigns
- Ensure representation of identities that reflect the diversity of our community throughout each building and school
- Allow space for unrestricted physical movement

Section 3 – Intervention

Introduction and Policy

According to the rules adopted by the State Board of Education, each school district shall adopt a policy that outlines the procedures for intervention regarding the identification and care of students who may be at risk for suicide. Each year staff will participate in a training reviewing the district's suicide prevention protocol (see below). This protocol will be provided to staff members during the training and staff will have electronic access to the plan via a shared Google Drive file and in written form located in the main office for review. Every two years staff will participate in a suicide prevention training (QPR). Both will be provided by a QPR trained district school counselor, social worker, or school psychologist.

[Estacada School District Suicide Prevention/Intervention/Postvention Protocol](#) (*Appendix p. 1*)

When a Student Exhibits a Risk of Suicide

Young people can exhibit suicidal behavior in various ways so it is important that staff members take ALL suicidal or any questionably suicidal behavior seriously. It is not uncommon that adults may downplay or minimize these behaviors in youth, especially young children. This is usually due to a lack of training in how to respond to the situation. With the current trends for youth (ages 10-24) suicide in Oregon we must ensure that all staff is properly trained and aware of the steps necessary to ensure the safety of our students, families, and staff. Each year staff will participate in a training reviewing the district's suicide prevention protocol (see above). Every two years staff will participate in a suicide prevention training (QPR). Both will be provided by a QPR-trained district school counselor, social worker, or school psychologist.

The following is a list of indicators of possible suicidal behavior, however this list is in no way exhaustive and it is important to note that not any single indicator or group of indicators guarantees that a student will or will not attempt or complete suicide.

- Verbal/written expression of a thought or desire to kill oneself
- Verbal/written expression of a plan of how to kill oneself
- Preoccupation with death and violence
- Drawings that indicate extreme violence or themes of death/dying
- Writings or stories that express a wish, thought, desire to kill oneself
- In-direct verbal comments such as “No one would care if I wasn’t around”, “I don’t want to live anymore”, “I wish I was never born”, “Everyone would be better off if I wasn’t here/alive”.

On rare occasions a student may exhibit *life threatening* behaviors such as:

- Ingesting medication or other harmful substances
- Leaving the school campus after making a suicidal threat

- Threatening to harm self with a weapon
- Demonstrating access to a weapon (e.g. staff observes a gun in student's jacket pocket)
- Exhibiting self-injurious behavior resulting in serious harm (e.g. stabbing self with a knife or choking self with a rope or belt)

****It is a requirement that parent(s)/guardian(s) be informed of any suicidal or potentially suicidal behavior as soon as possible and no later than the end of the day.** Sometimes parents **do not** or **cannot** respond to phone calls, texts, or emails, or cannot otherwise be reached. In this situation the *School Resource Officer* (SRO) will be notified and requested to make a *home visit*.

When a Student Exhibits Risk of Suicide (Actions Not Immediately Life-threatening)

If a student demonstrates suicidal behaviors or any questionable behaviors that are not immediately life-threatening, complete the [*Student Suicide Risk Referral Form*](#) (*Appendix p. 2*) and **IMMEDIATELY REPORT THE INCIDENT TO THE SCHOOL COUNSELOR, SOCIAL WORKER, SCHOOL PSYCHOLOGIST, OR ADMINISTRATOR. Do not leave a message, voicemail, text, or email.**

The designated staff member will meet with the student to determine if the student will be referred for a **Suicide Risk Assessment: Level 1** (see pg. 13). Sometimes a student may make an inappropriate comment or remark about dying or suicide or may exhibit another questionable behavior and it is determined that the student is in fact not suicidal. For example, a kindergartener may make the comment, "Shoot me! Kill me!" during imaginary play at recess. In this instance other actions may be more appropriate rather than proceeding to a Level 1 assessment such as: 1) discussing appropriate expectations/behaviors during recess, 2) teaching appropriate coping skills for the situation, 3) informing the parent(s)/guardian(s) of the incident and gathering more information, or 4) scheduling a follow-up meeting to monitor the student's progress.

When a Student Exhibits Risk of Suicide (Actions Life-Threatening)

When a student exhibits life-threatening behavior, this behavior can be extremely frightening and upsetting to school staff therefore, it is very important to know how to respond appropriately to the situation so that risk of harm/further harm can be reduced. If a student exhibits life-threatening behaviors **DO NOT LEAVE STUDENT ALONE OR UNSUPERVISED unless the student's actions could cause potential harm to the staff member (s) or others** (e.g. student demonstrates access to a lethal weapon by pulling out a gun, large knife, etc. and threatening to harm self and/or others).

If the student's actions pose a threat of safety to self and others, then the staff member will attempt to evacuate any bystanders, secure the area, and immediately alert the administrator and/or the School Resource Officer (SRO) who will then call 9-1-1. If the SRO and administrator cannot be contacted then the school counselor and the school crisis team will be alerted, 9-1-1

will be called, and **Lock Down** procedures will be implemented. The person first on the scene will proceed with QPR (Question, Persuade, Refer) protocol if trained and appropriate to the situation. If necessary the staff member will seek shelter and the SRO/Law Enforcement, Administrator, or School Crisis Team will intervene and attempt to secure the student.

If the student **does not pose a threat to others** (For example, the student is unconscious from an overdose but the risk for injury to staff or others is very low) then immediately Call 9-1-1 and/or the School Resource Officer (SRO), alert the school principal/administrator—who will alert the school counselor as soon as possible, and school crisis team, and provide necessary **First Aid**. Alert the district [Crisis Response Team \(CRT\)](#) (*Appendix pg. 3*) for postvention if needed. Once the situation has stabilized, the [Suicide Risk Form \(Life-Threatening\)](#) (*Appendix pg. 4*) must be completed and given to the administrator.

Prior to the student's return to school the screener or school counselor will meet with the student and/or parent(s)/guardian(s) for a re-entry meeting—using the [Student Re-entry Meeting Form](#) (*Appendix pg. 6*). The [Student Safety/Support Plan](#) (*Appendix pg. 5*) will be completed at this time and a copy will be given to the student and parent(s)/guardian(s). The plan will be shared in part or whole with pertinent staff members and copies will be given to the school counselor and administrator.

Suicide Risk Assessment: Level 1 by Trained Screener

A trained screener (School Counselor/Social Worker/School Psychologist/Administrator) will interview the student using the [Suicide Screening Form](#) (*Appendix pg. 7*). Once the form is completed the screener will consult with another trained screener to determine whether to proceed to **Level 2** (See pg. 14). The screener will then inform the administrator of the determination.

Sometimes a student indicates that abuse is occurring in the home and this may be attributing to the student's suicidal behaviors. **If a student discloses abuse a report must be made to the Department of Human Services (DHS)-- using the district's [Child Abuse Reporting Form](#)—and/or Law Enforcement as soon as possible and no later than the end of the day.** DHS and/or *Law Enforcement* will be informed of the student's suicidal behavior and will provide guidance regarding whether or not to inform parent(s)/guardian(s) at this time. If the screener is advised not to inform the parent(s)/guardian(s) then the screener will inform the administrator of this decision and the rationale and will document this on the *Child Abuse Reporting Form*.

If parent(s)/guardian(s) are contacted, they will be informed of the student's suicidal behaviors and will be asked to meet with the screener in person, to gather further information and assist in the development of a [Student Safety/Support Plan](#) (*Appendix pg. 5*) along with the student. If parent(s)/guardian(s) are unable or refuse to meet with the screener in person they will be asked to participate via phone. If the screener is unable to contact the parent(s)/guardian(s),

then the screener will complete the plan with the student and continue to attempt to contact the parent(s)/guardian(s). The screener may request a *home visit* with the SRO or another screener to review and/or modify the plan with parents.

A copy of the *Student Safety/Support Plan* will be provided to the school counselor and administrator and will be filed in a secure location. The plan will be shared in part or full with pertinent staff (e.g. student's teacher(s), recess monitors, support staff, etc.). The plan will be reviewed and/or updated regularly.

Suicide Risk Assessment: Level 2 by Qualified Mental Health Provider (QMHP)

The screener will contact the parent(s)/guardian(s) to inform them of the student's suicidal behavior, gather further information, and assist in referring for further assessment by a least one of the following:

- The student's mental health therapist
- School-based health clinic: Orchid Health (503-630-8550)
- Clackamas County Behavioral Health Crisis Line (503-655-8585)

The screener will request that the student and/or parent/guardian sign a [Release of Information](#) to the referring agency so the screener can collaborate with the QMHP regarding the results of the assessment and any recommendations for the *Student Safety/Support Plan*.

The screener will initiate a *Student Safety/Support Plan* with the student and family prior to the student leaving to the referring agency. The plan may not be completed depending on the timing and urgency of the situation. **At minimum the student and family will be given a list of [crisis support and hotline numbers](#) and the screener will discuss safety measures for home including the removal, or at very least, the securing of access to means (weapons-guns, knives, medication, rope, etc.) and increased supervision.** If the plan is not completed then the screener will schedule a meeting with the student and family prior to the student's return to school and complete the plan during the re-entry meeting. The screener and/or school counselor will collaborate with the QMHP regarding the student's progress and any recommendations for school intervention.

Online Schooling & Virtual School Days

In the event that a student is believed to be at risk of suicide during online schooling, the staff member will utilize the QPR intervention and inform administrative staff and the school counselor as soon as possible. The student will then be asked to participate in an online screening with a trained screener. The screener will proceed according to the [Suicide Prevention/Intervention/Postvention Protocol](#) (*Appendix pg. 1*).

If the student is at immediate risk of life threatening behavior, the staff member will call 9-1-1

and notify administrative staff as soon as possible. The parent(s)/guardian(s) of the student will be immediately contacted and informed of the situation. Administrative and counseling staff will provide a follow-up call to the family to ensure that the student received appropriate care. Once stabilized the student and parent(s)/guardian(s) will meet in person or online to develop the *Student Safety/Support Plan* and *Re-entry Plan*.

Section 3 – Postvention

Schools must be prepared to act and provide postvention support and action in the event of a suicide attempt or completed suicide. Suicide postvention has been defined as “the provision of crisis intervention, support and assistance for those affected by a suicide” (American Association of Suicidology). Postvention strategies after a suicide attempt or completion are very important. Schools should be aware that youth and others associated with the event are vulnerable to suicide contagion or, in other words, at increased risk for suicide. Families and communities can be especially sensitive after a suicide event. The school’s primary responsibility in these cases is to respond to the suicide attempt or completion in a manner which appropriately supports students and the school community impacted. This includes having a system in place to work with the multitude of groups that may eventually be involved, such as students, staff, parents/guardians, community, law enforcement and media.

Estacada School District Flight Team Model

Estacada School District follows a Flight Team model in which trained counselors, social workers and school psychologists are deployed to a school in order to set up the systems needed to support students, families and staff following a crisis or other traumatic event. This team utilizes specific procedures related to our communication, activities and support following a completed suicide. The main objective is to assist the school community in achieving stability and returning to normalcy as soon as possible.

Estacada School District is a member of the Clackamas County Flight Team. As part of a county-wide Flight Team, additional resources are available in response to a tragedy; likewise if other school districts in Clackamas County are in need of support, we are able to support them in turn.

We recognize that families and communities may be especially sensitive to the response to suicide. Estacada School District will respond appropriately according to our Flight Team protocols.

Each county in Oregon has a Postvention Response Lead who assists communities by leading and/or coordinating responses to suicide deaths of young people 24 years of age and younger. The Postvention Response Lead may work in your community’s local public health authority or local mental health authority. The county Postvention Response Lead can offer technical assistance at the invitation of a school district; however, district-based postvention policies and procedures are the responsibility of the school district. Postvention Response Leads, when assisting a school district, follow the policies and procedures put in place by the school district when providing technical assistance. To find out more information visit the [Clackamas County Coalition to Prevent Suicide](#).

Postvention Communication Procedure

In the event of a student death by suicide, it is important that every staff member in the school district knows their role and the district procedure on how to best prevent suicide contagion. A general staff postvention procedure helps reduce confusion among staff if they find out about a student suicide death through informal communication. It is recommended that staff be regularly trained on this procedure prior to a loss or attempted loss. While the law only requires a focus on student deaths, this procedure can be valuable when there is a public suicide attempt and/or a suicide death of a staff member, recent graduate or an influential community member. The [Estacada School District Flight Team Flow Chart](#) can be referred to in all of these situations.

Safe Messaging Practices

Research has shown a link between certain kinds of suicide-related media coverage and increases in suicide deaths. Suicide contagion has been observed when:

- the number of stories about individual suicides increases,
- a particular death is reported in great detail,
- the coverage of a suicide death is prominently featured in a media outlet, or
- when the headlines about specific deaths are framed dramatically (e.g., “Bullied Gay Teen Commits Suicide By Jumping From Bridge”).

Research also shows that suicide contagion can be avoided when the media report on suicide responsibly, such as by following the steps outlined in “[Recommendations for Reporting on Suicide](#).” Contagion can also play a role in cases of self-harm behavior. These behaviors may originate with one student and can spread to other students through imitation. Because adolescents are especially vulnerable to the risk of contagion, in the case of a suicide death, it is important to memorialize the student in a way that does not inadvertently glamorize or romanticize either the student or the death. Schools can do this by seeking opportunities to emphasize the connection between suicide and underlying mental health issues such as depression or anxiety that can cause substantial psychological pain but may not be apparent to others (or that may manifest as behavioral problems or substance abuse). However, schools should strive to treat all deaths in the same way. Having one approach for memorializing a student who died of cancer or in a car accident and a different approach for a student who died by suicide reinforces stigma and may be deeply and unfairly painful to the student’s family and friends. Finally, after a death by suicide it is important for schools to encourage parents/guardians to monitor their child’s social networking pages. Students often turn to social networking websites as an outlet for communicating information and for expressing their thoughts and feelings about the death. Parents/ guardians should be advised to monitor the websites for warning signs of suicidal behavior.

Postvention Information/Education

Information and education to students and staff following a suicide death should be focused on healing, resources, and the grief process. Suicide prevention curricula or education is not appropriate in the six months following a student or staff death by suicide. Instead, work with local suicide prevention experts, including the local county Postvention Response Lead, on adjusting suicide information and education to focus on help-seeking and appropriate resources.

- It is vital to ensure that all staff and students have a basic understanding of safe messaging around suicide. Talking about suicide is important, and in fact many of our students are already talking about suicide. How we talk about suicide can increase or decrease risk of those who are already vulnerable to suicide.
- It is common for building administrators to initiate a staff stand-up meeting to provide school building staff with important information regarding the incident as well as information on resources.
- After six to twelve months following a staff or student suicide death, it may be useful and appropriate to implement a [CONNECT Postvention Training for staff](#), which is available at little-to-no-cost through the Oregon Health Authority (OHA). Contact the [Clackamas County Postvention Response Lead](#) or visit the [Association of Oregon Community Mental Health Programs](#) for more information.
- The [Dougy Center](#) provides grief support in a safe place where children, teens, young adults, and their families can share their experiences before and after a death. Their website contains a vast offering of resources for students at all developmental stages as well as resources on how adults can support young people who are grieving.
- Estacada School Districts offers Employee Assistance Programs (EAP) for staff members. Promote this resource to staff members when providing information around available resources.
- In-school support for students include opportunities to meet with their building School Counselor, School Social Worker or School Psychologist. We also have in-school partnerships with Trillium Counseling for students with longer-term postvention needs.
- A Postvention Community Contacts Sheet is available for district leaders who are charged with supporting a postvention response process.
- During a postvention response, ensure there is a space for students and staff to receive drop-in support that is trauma-informed, culturally responsive, and provides confidentiality, as well as group support. Our district-based flight team can offer running student support rooms in the direct aftermath of a sudden death. Support

rooms allow students to take a break, talk with a trained adult about their feelings, engage in regulating activities, and receive information on resources.

Postvention Resources:

- The [After a Suicide Toolkit](#) developed by the Suicide Prevention Resource Center for postvention policy and procedure examples.
- The [Dougy Center website](#) offers a variety of resources for students, families, school staff and community members following a loss by suicide.
- [Suicide Postvention Key Aspects](#) offers a variety of best practice points to consider.
- The Trauma Intervention Program NW (www.tipnw.org/) provides trained volunteers to give emotional first aid to families experiencing any type of trauma.
- Camp Erin provides grief education and emotional support at an overnight summer camp where people aged 6-17 can meet others in similar situations and receive help in a fun way. (www.providence.org/locations/or/hospice/camp-erin)
- petpartners.org/ is an organization that can provide trained therapeutic animal support to families in need post crisis.
- Sandy Mathewson is the mental health and crisis support person for Clackamas County through the ESD smathewson@clackesd.k12.or.us
- Galli Murray is the Suicide Prevention Coordinator for Clackamas County gallimur@clackamas.us