Students

SUICIDE PREVENTION

The Governing Board recognizes that suicide is a leading cause of death among youth and that school personnel who regularly interact with students are often in a position to recognize the warning signs of suicide and to offer appropriate referral and/or assistance. In order to attempt to reduce suicidal behavior and its impact on students and families, the Superintendent/designee shall develop measures and strategies for suicide prevention, intervention, and postvention.

Pursuant to Education Code section 215, this policy was developed in consultation with school and community stakeholders, the County Mental Health Plan, school-employed mental health professionals, and suicide prevention experts.

The Superintendent/designee shall involve school health professionals, school counselors, school-employed mental health professionals, administrators, school social workers, other staff, parents/guardians, students, local health agencies and professionals, and community organizations in planning, implementing, and evaluating the District's strategies for suicide prevention and intervention.

(cf. 1220 - Citizen Advisory Committees)
(cf. 1400 - Relations Between Other Governmental Agencies and the Schools)

Prevention and Instruction

Suicide prevention strategies may include, but not be limited to:

1. Staff development on suicide awareness and prevention for teachers, school counselors, and other district employees who interact with students in the secondary grades.

2. Efforts to promote a positive school climate that enhances students' feelings of connectedness with the school and is characterized by caring staff and harmonious interrelationships among students.

As appropriate, these measures and strategies shall specifically address the needs of students who are at high risk of suicide, including, but not limited to, students who are bereaved by suicide; students with disabilities, mental illness, or substance use disorders; students who are experiencing homelessness or who are in out-of-home settings such as foster care; and students who are lesbian, gay, bisexual, transgender, or questioning youth. (Education Code 215.)

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SUICIDE PREVENTION (continued)

(cf. 5131 - Conduct)
(cf. 5145.3 - Nondiscrimination (EEO, Title IX)
(cf. 5145.7 - Student Harassment)

The District's comprehensive health education program shall promote the healthy mental, emotional, and social development of students including, but not limited to, the development of problem-solving skills, coping skills, and self-esteem.

In addition, the Superintendent/designee may offer parents/guardians education or information which describes the severity of the youth suicide problem, risk factors and warning signs of suicide, basic steps for helping suicidal youth, and/or school and community resources that can help youth in crisis.

As appropriate, these measures and strategies shall specifically address the needs of students who are at high risk of suicide, including, but not limited to, students who are bereaved by suicide; students with disabilities, mental illness, or substance use disorders; students who are experiencing homelessness or who are in out-of-home settings such as foster care; and students who are lesbian, gay, bisexual, transgender, or questioning youth. (Education Code 215.)

Staff Development

Annual training for teachers and nurses shall be provided at a staff meeting by a site administrator or District psychologist on the warning signs of youth suicide and the District response protocol. Further training can be sought from the Pupil Services Department for interested staff. Such training shall be designed to help staff identify and respond to students at risk of suicide.

The training shall be offered in cooperation with one or more community mental health agencies and may include information on:

1. Research identifying risk factors, such as previous suicide attempt(s), history of depression or mental illness, substance use problems, family history of suicide or violence, feelings of isolation, interpersonal conflicts, a recent severe stressor or loss, family instability, students who are bereaved by suicide, students with disabilities, students who are experiencing homelessness or who are in out-of-home settings such as foster care, students who are lesbian, gay, bisexual, transgender, or questioning youth, and other factors.

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SUICIDE PREVENTION (continued)

The training shall be offered in cooperation with one or more community mental health.

(cf. 5131.6 - Alcohol and Other Drugs)

2. Warning signs that may indicate suicidal intentions, including changes in students' appearance, personality, or behavior.

3. Research-based instructional strategies for promoting mental and emotional health.

4. School and community resources and services.

   (cf. 5141.6 - School Health Services)
5. District procedures for intervening when a student attempts, threatens, or discloses the desire to commit suicide.

(cf. 4131 - Professional Development)

Intervention

Every statement regarding suicidal intent shall be taken seriously. Whenever a staff member suspects or has knowledge of a student's suicidal intentions, he/she shall promptly notify the principal or school psychologist. The principal or psychologist shall then notify the student's parents/guardians as soon as possible in accordance with the District's Suicide Prevention Protocol and may refer the student to mental health resources in the school or community.

(cf. 5141 - Health Care and Emergencies)

Staff members shall encourage students to notify a teacher, principal, psychologist, or other adult when they are experiencing thoughts of suicide or when they suspect or have knowledge of another student's suicidal intentions.

(cf. 5138 - Conflict Resolution/Peer Mediation

The Superintendent/designee shall establish crisis intervention procedures to ensure student safety and appropriate communications in the event that a suicide occurs, or an attempt is made on campus or at a school-sponsored activity.

SUICIDE PREVENTION (continued)

A school employee shall act only within the authorization and scope of his/her credential or license. An employee is not authorized to diagnose or treat mental illness unless he/she is specifically licensed and employed to do so. (Education Code 215.)

The School Board knows that sometimes, young people feel sad and might think about hurting themselves. This is a big problem, and we want to make it better. The person who runs the District, the Superintendent, is going to make plans to help.

The Superintendent will talk to many people, like health experts, counselors, teachers, parents, and students. They will work together to make a plan. This plan will stop young people from feeling this way and give them help when they need it.

One way to prevent kids from feeling very sad is to make our schools nice places. We want everyone at school, like teachers and students, to be friends and treat each other kindly. This is one way we can help stop kids from feeling this way.

Our school also has a program that helps students grow in a healthy way. This means learning how to solve problems, handle tough times, and feel good about themselves. We also teach students how to deal with hard situations.

The Superintendent or someone they choose may talk to parents and families about important things. They will tell them how serious it is when young people think about hurting themselves. They will also talk about things that might make young people feel this way and signs that show they might be thinking about it. They will also give simple steps to help a person who feels this way. There are also resources in the school and community that can help young people during tough times.

Every year, teachers and nurses will receive special training during a staff meeting. This training will be led by either a school leader or a District psychologist. They will talk about the signs that might show a young person is thinking about suicide and what our district does to help.

The training offered by our district for interested staff is to assist them in identifying and helping students who may be at risk of suicide. This training is in partnership with one or more community mental health agencies. It may include the following:

1. We are studying things that can make someone very sad and think about hurting themselves, like past attempts, feeling very alone, family problems, or other difficult situations. This helps us understand and help kids who are having a tough time.

Students

SUICIDE PREVENTION (continued)

2. We pay attention to signs like if a student starts looking, acting, or feeling different, which could show they need help and support.

3. We use teaching methods from research to help students feel good inside their hearts and minds.

4. We have places and people at school and in the community that can help students when they're going through tough times.

5. We have steps we follow if a student tries or talks about wanting to hurt themselves. We make sure the student is safe and let their parents or guardians know so everyone can work together to give the student the help they need.

If a teacher or staff member thinks a student might want to hurt themselves, they will tell the principal or school psychologist right away. Then, the principal or psychologist will tell the student's parents or guardians as soon as they can, following the school's rules for helping in these situations. They might also connect the student with people who can help with their mental health at school or in the community.

Teachers and staff members will always tell students to talk to a teacher, principal, psychologist, or another adult they trust if they ever have thoughts of hurting themselves or if they think another student might feel this way. It's important to let someone know so they can help.

The Superintendent or someone they choose will create a plan for what to do if someone tries to hurt themselves or if something involving suicide happens at school or during a school event. This plan will make sure students are safe and that there's good communication to handle the situation.

Postvention

In the event that a student dies by suicide, the Superintendent or designee shall communicate with the student’s parents/guardians to offer condolences, assistance, and resources. In accordance with the laws governing confidentiality of student record information, the Superintendent or designee shall consult with the parents/guardians regarding facts that may be divulged to other students, parents/guardians, and staff.

Students

SUICIDE PREVENTION (continued)

The Superintendent or designee shall implement procedures to address students' and staff's grief and to minimize the risk of imitative suicide or suicide contagion. He/she shall provide students, parents/guardians, and staff with information, counseling, and/or referrals to community agencies as needed. School staff may receive assistance from school counselors or other mental health professionals in determining how best to discuss suicide or attempted suicide with students.

Any response to media inquiries shall be handled by the District-designated spokesperson who shall not divulge confidential information. The District's response shall not sensationalize suicide and shall focus on the District's postvention plan and available resources.

After any suicide or attempted suicide by a student, the Superintendent or designee shall provide an opportunity for all staff who responded to the incident to debrief, evaluate the effectiveness of the strategies used, and make recommendations for future actions.

Legal Reference:
EDUCATION CODE
215 Adoption of policies on pupil suicide prevention
32280-32289 Comprehensive safety plan
49060-49079 Student records
49602 Confidentiality of student information
49604 Suicide prevention training for school counselors
GOVERNMENT CODE
810-996.6 Government Claims Act
WELFARE AND INSTITUTIONS CODE
5698 Emotionally disturbed youth; legislative intent
5850-5883 Mental Health Services Act
COURT DECISIONS
Corales v. Bennett (Ontario-Montclair School District), (2009) 567 F.3d 554

Students

SUICIDE PREVENTION (continued)

Management Resources:
CALIFORNIA DEPARTMENT OF EDUCATION PUBLICATIONS
Health Education Content Standards for California Public Schools, Kindergarten Through Grade Twelve, 2008
Youth Suicide-Prevention Guidelines for California Schools, 2005
Health Framework for California Public Schools, Kindergarten Through Grade Twelve, 2003
CALIFORNIA DEPARTMENT OF MENTAL HEALTH PUBLICATIONS
California Strategic Plan for Suicide Prevention: Every Californian is Part of the Solution, 2008
CENTERS FOR DISEASE CONTROL AND PREVENTION PUBLICATIONS
School Connectedness: Strategies for Increasing Protective Factors Among Youth, 2009
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLICATIONS
National Strategy for Suicide Prevention: Goals and Objectives for Action, 2001
WEB SITES
American Psychological Association: www.apa.org
California Department of Education, Mental Health: www.cde.ca.gov/ls/cg/mh
California Department of Mental Health, Children and Youth Programs: www.dmh.ca.gov/Services_and_Programs/Children_and_Youth
Centers for Disease Control and Prevention, Mental Health: www.cdc.gov/mental health
National Institute for Mental Health: www.nimh.nih.gov
U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration: www.samhsa.gov