

Hollis-Brookline Cooperative School District

Suicide and Harm Prevention Plan

An Overview of Prevention, Intervention, and Postvention Practices

**Jacob Hess, HBHS Principal
Cole Etten, HBHS Assistant Principal
Yolanda Flamino, HBHS Assistant Principal
Traci Lane, HBHS Assistant Principal of Student Services**

**Patrick West, HBMS Principal
Allison Buschmann, Assistant Principal
Kathryn Ransom, HBMS Special Education Administrator**

I. Suicide Prevention:

A. District Suicide Prevention Coordinator

- a. **Lauren DiGennaro – Assistant Superintendent of Student Services**
lauren.digennaro@sau41.org

B. Suicide Prevention Liaisons

- a. **Chantel Klardie** - HBHS School Counseling Dept. Chair
chantel.klardie@sau41.org
- b. **Megan Anderson** - HBHS School Counselor
megan.anderson@sau41.org
- c. **Dawn Breault** - HBHS School Counselor
dawn.breault@sau41.org
- d. **Daniel Bumbarger** - HBHS School Counselor
daniel.bumbarger@sau41.org
- e. **Mary Carper** - HBHS School Counselor
mary.carper@sau41.org
- f. **Kristin Knarr** - HBHS School Counselor
kristin.knarr@sau41.org
- g. **Melissa Moyer** - HBHS School Counselor
melissa.moyer@sau41.org
- h. **Erin Sarris** – Social Worker HBHS/HBMS
erin.sarris@sau41.org
- i. **Julie Conrow** - HBMS School Counselor
julie.conrow@sau41.org
- j. **Kerry Dod** - HBMS School Counselor
kerry.dod@sau41.org

C. Staff Training

1. At the outset of every school year, all staff are trained on Suicide and Harm Protocol: What to do when a student talks or writes about suicide.
2. In addition to the annual review of building procedures identified on the next page, staff members are trained annually in suicide prevention as required by RSA 193-J. The Hollis Brookline Coop School District provides this required training through Vector Training, K-12 edition: "Youth Suicide: Awareness, Prevention and Postvention (Jason Flatt Act)", meeting the criteria of the RSA.
3. All staff are provided with the Suicide and Harm Protocol: What to do when a student talks or writes about suicide, Appendix A, which is to be kept in an easily accessible place within their classroom.

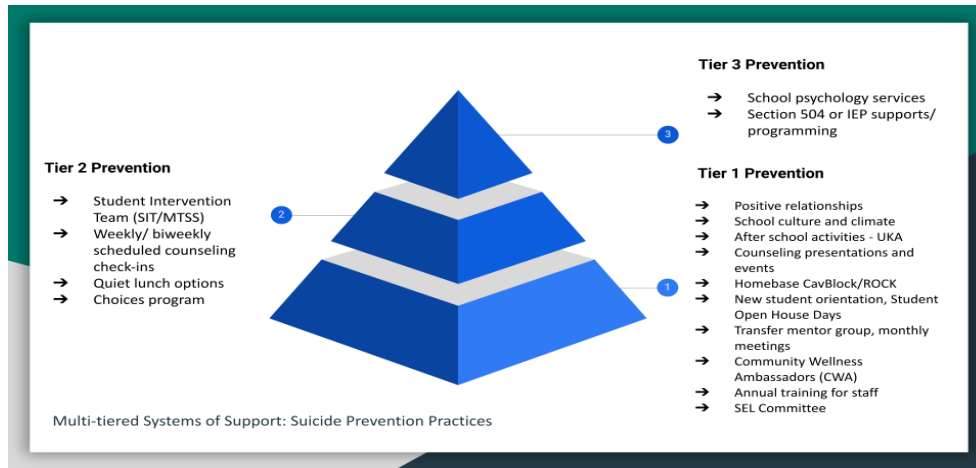
D. Education for students

1. Focused on safe and healthy choice making, coping strategies, identification of risk factors, recognizing developmentally appropriate signs of struggle, and accessing resources at school and in the community. Counselors meet with students each year to build rapport, connection, and relationships.
2. Counselors' work with students and presentations include social situations, friendship, the effects of bullying, anger management, problem solving, asking for help, challenging negative thoughts and social/self-esteem information.
3. Community resources are updated and provided to students and their families as needed and are available on the school websites under Resources>Counseling Office Tab as well as on the Family Portal>Documents and Resources.
4. Building-wide social/emotional learning (SEL) initiatives are part of regular practice.

II. Suicide Prevention as part of MTSS (Multi-Tiered System of Supports)

A. Intervention Team Meetings

1. MTSS and SIT (Student Intervention Team) meetings are held to identify struggling students. At the Middle School, School Counselors attend common planning time with grade levels for early interventions.



B. Response to Concerns of Self-Harm

1. **It is important to note that faculty and staff are not individually responsible to determine whether self-harm threats are of a serious nature.** All threats or comments are to be taken seriously and reported immediately to the administration every time they occur. The situation will then be reviewed according to the crisis intervention protocol to determine if further evaluation is needed by an outside provider. Under no circumstances are faculty and staff to provide counseling or risk-assessment services. When faculty or staff hear or see a self-harm threat, they are to contact administration or designee so the student can be accompanied to School Counseling, nurse, or administrative offices as deemed appropriate. Under no circumstances is an email sufficient notification to administration and/or School Counseling. If a student has expressed an intent to harm oneself or others, the student's School Counselor and an administrator meet with the student and follow the crisis intervention protocol accordingly.

C. Interventions: The School Counselor/Administrator will:

1. Meet with the student to determine the nature of the emergency.
2. Consult with the appropriate administrator and explain the situation. Any further action should be decided by the School Counselor/social worker/school psychologist and administrator, and protocol followed accordingly.
3. Call the parent/guardian of the student to provide them with the details of the case. When the parent/guardian cannot be contacted, the individual named on the student's emergency health information will be contacted. If parent/guardian or designee cannot be reached contact the appropriate

administrator and transportation to the Acute Community Crisis Evaluation Service System (ACCESS) program will be provided.

4. Inform parent/guardian or designee that it is the school procedure that in cases of student self-reported suicidal intent or harm, ideation or plan, the student will be picked up from school and released to the custody of the parent.
5. Provide parent/guardian or designee with information about community crisis intervention services. Explain to the adult that the student must have an assessment by a hospital/physician/community crisis team or licensed therapist to return to school and a reentry meeting with the School Counselor and administrator will take place before the student returns to classes. The student will be released to the parent/guardian or designee and will be provided with names and phone numbers for referral and assessment. The outside clinician will provide paperwork to be shared at this meeting indicating the student is safe to return to school.
6. Given an obstructive parent/guardian or designee, the School Counselor will make the parent/guardian or designee aware that DCYF Protective services will be notified of the crisis and that the police will be called to provide transportation. The School Counselor or administrator will report to DCYF.
7. NO STUDENT IN THIS SITUATION WILL BE SENT HOME ALONE OR LEFT ALONE AT ANY TIME WHILE IN THE SCHOOL BUILDING.
8. If the student has threatened harm with a lethal means and is in possession of this means: Secure the area and prevent other students from accessing this area. Lethal means must be removed without putting anyone in danger. Call the SRO immediately.
9. Complete accompanying paperwork for documentation (paperwork included in this plan).
10. Allegations of neglect/abuse will always be referred to the DYCF. Parent may be contacted by school personnel or contact may be initiated by the Division.

		On site	Off site	What this looks like
1	Private mental health practitioner	✗	✓	<ul style="list-style-type: none"> • Same day appointment • In-person or telehealth • With a practitioner familiar to the individual and their needs
2	Mobile crisis response team	✓	✗	Greater Nashua Mental Health (GNMH) <ul style="list-style-type: none"> • A team will arrive within an hour to the caller's location and will conduct a comprehensive assessment
3	Walk-in and Urgent Care clinics, Emergency room	✗	✓	<ul style="list-style-type: none"> • Within the local community • May make referrals to other practitioners • Highly stimulating environment

Obtaining a risk assessment

III. **Safety Protocol Post-Intervention** (after send out protocol)

A. Return to School

1. Upon the student being assessed by an outside clinician and determined safe to return to school, a re-entry meeting occurs to develop a safety support plan.
2. The student, family, School Counselor, and an administrator develop this plan with input, as needed, by the outside licensed mental health practitioner. School Counselor and student check-ins are scheduled.
3. The School Counselor works with the family to support them with resources to obtain outside therapeutic supports.
4. School Counselor provides a release of information form allowing collaboration between outside mental health practitioners and school.
5. If appropriate, a disabilities services referral may be made to determine whether a formal plan is necessary.
 - a. For students who may already have a 504 plan or IEP in place, a progress meeting may be scheduled to carryover student needs and services into the student's formal plan.

B. Protocol for Suicidal Attempt in the School Building

1. Keep the student safe and under close supervision, always be supervised by an adult. Contact an administrator immediately.
2. The school administrator will notify School Counselor, school nurse, emergency medical professionals, community/hospital crisis service provider, social worker, SRO and the superintendent of schools.
3. The administrator will notify the parents/guardians of what has occurred and arrange to meet them at the hospital.
4. Call the hospital/community crisis assessment provider for instructions on where to bring the student. Have the student transported by community medical personnel or police.
5. If the student does not require emergency treatment or hospitalization and the immediate crisis is under control, release the student to the parent/guardian with arrangements for needed medical treatment and/or mental health counseling. Explain to the adult that the student must have an assessment by a hospital/community crisis team to return to school and a reentry meeting with the School Counselor and administrator will take place before the student returns to classes. Release the student to the parent/guardian or designee with appropriate resources. Paperwork indicating that the student is safe to return to school must be submitted prior to reentry.

6. In the event the situation requires transportation to a hospital emergency department, EMS and/or law enforcement should be contacted to assess the situation and expedite the transition to the hospital.
7. Parents will be given the HBCSD paperwork for continued instructions and information

APPENDIX A
STUDENT SAFETY PROTOCOL – Suicide and Harm Prevention
When a Student Talks or Writes About Suicide or Harm

Hollis Brookline Coop School District: WHEN A STUDENT TALKS OR WRITES ABOUT SUICIDE OR HARM:

Level #1 - CONCERN

You may become alarmed by student behaviors, comments, or writings such as:

1. Comments about death, wanting to die by suicide (even if expressed in joking manner).
2. Expressions of sadness, emptiness, hopelessness, pessimism, helplessness, worthlessness.
3. Evidence of self-mutilation, cuts, bruises.
4. Comments from other students about a classmate with these behaviors or feelings.

Contact an Administrator Immediately for Concerns 1-4

The Administrator will immediately escort student to School Counseling

5. Withdrawal from friends, activities.
6. Marked changes in usual behavior such as losing interest/pleasure in usual activities, loss of energy or drive, falling asleep in class, restlessness/irritability, skipping class.
7. Evidence a student is having difficulty concentrating or remembering.
8. Marked changes in appearance such as weight loss or gain.
9. Evidence of psychomotor agitation, excessive energy.

Notify an Administrator and Counselor for Concerns 5-9

Level #2 - CRITICAL SITUATION

The student is distraught and tells you he/she wants to hurt him/herself.

EXPECTATIONS OF TEACHERS, STAFF, AND COACHES:

During school hours:

1. Tell the student you are not allowed to keep this information confidential, and you need to tell someone who can help.
2. **Call administrator or designee to bring student to School Counseling. Student is not to be left alone.**
3. Accompany the student to the Counselor's office.
4. Arrange for the student to see a school counselor, or school psychologist or social worker immediately.
5. If the student refuses to go with you, **do not allow the student to leave your space. IMMEDIATELY** telephone an available adult, (Asst. Principal, main office staff person, other School Counselor, School Nurse).

After school hours:

1. Encourage the student to talk about what is happening and attempt to calm him/her.
2. Tell the student you are not allowed to keep this information confidential and parents will need to be contacted.
3. Inform the appropriate school administrator.
4. Call the parents or admin will call and request that they come to pick up their son/daughter.
5. If the parents are unavailable, call the police or 911; the police can take the student to the nearest emergency room.
6. Remain with the student until parents or police come.

1. Counselor will call an administrator to join in meeting with the student.
2. The Counselor will encourage the student to talk about what is happening.
3. The Counselor/Administrator will call the student's parents and make appropriate decisions along with administration regarding the need for further assessment outside of school, per protocol.
4. If parent is unavailable or refuses, contact the Police for support to transport for evaluation. Follow up with DCYF

Post-event self-care: Hearing a student talk about suicide can trigger feelings in you. It is normal to feel helpless, angry, or an overwhelming sense of responsibility. After the crisis, take a moment to talk with someone you trust about your own feelings. You may wish to review what took place with a school Counselor.

Following a critical incident: A re-admit to school note is required from a health provider and a re-entry meeting will be scheduled with student, parent, counselor, and administrator.

The counselor will make every effort to follow up with you. Confidentiality requirements may prevent the Counselor from giving you complete feedback.

APPENDIX B
STUDENT SAFETY PROTOCOL FORMS