Book	Policy Manual
Section	800 Operations
Title	Suicide Awareness, Prevention and Response
Code	819 - New
Status	First Reading
Last Revised	January 22, 2021

Purpose

The Joint Operating Committee is committed to protecting the health, safety and welfare of its students and the school community. This policy supports the provision of a comprehensive program designed to promote behavioral health and prevent suicide.[1][2][3][4][5]

Authority

The Joint Operating Committee directs the school to provide education on youth suicide awareness and prevention; to establish methods of prevention, intervention, and response to suicide attempt or suicide death; and to promote access to suicide awareness and prevention resources.[1][2][3][4][5]

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

Definition

Behavioral health – the promotion of emotional health; the prevention of mental illnesses and substance use disorders; and treatment and services for substance abuse, addiction, substance use disorders, mental illnesses and/or mental disorders.

Guidelines

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

SUICIDE AWARENESS AND PREVENTION EDUCATION [1]

Protocols for Administration of Student Education

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

IMPORTANT NOTE: There is language preceded by brackets in the list in the Protocols for Administration of Student Education section. It should be determined if these options are in accordance with CTC practice or wishes. **If any of the language is desired, please be sure to place an X in the brackets to indicate such language should be included. If any language is not desired, please strike or delete such language**. PSBA *recommends* the first two items, but this is a local decision.

Lessons shall:

1. **Contain information on comprehensive health and wellness, including emotional, behavioral and social skills development**.
2. {X } **Inform students about broader behavioral health issues such as depression and substance abuse, as well as specific risk factors, protective factors and warning signs for suicide**.
3. {X } **Encourage students to seek help for themselves or their peers, including when concerns arise via social media or other online forum, and to avoid making promises of confidence when they are concerned about the safety of a peer**.
4. {X } **Adhere to safe and effective messaging guidelines, avoid graphic testimonials, and include reputable suicide prevention resources**.
5. {X } **Promote a healthy school climate where students feel connected to and can identify trusted adults in the building**.
6. { } **Be conducted in the classroom, not as a large group assembly**.

Protocols for Administration of Employee Education

All school employees, including but not limited to administrators, teachers, paraprofessionals, secretaries, ~~coaches, bus drivers, and custodians~~ shall receive information about risk factors, warning signs, response procedures, referrals, and resources regarding youth suicide awareness and prevention.

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

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

Resources for Parents/Guardians

The school may provide parents/guardians with resources including, but not limited to, health promotion and suicide risk, including characteristics and warning signs; and information about local behavioral health resources.

METHODS OF PREVENTION [1]

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

In support of the school's suicide prevention mission, information received in confidence from a student may be revealed to the student's parents/guardians, the building administrator or other appropriate authority when the health, welfare or safety of the student or any other person is clearly in jeopardy.[7][8][9][10]

Suicide Prevention Coordinators

A suicide prevention coordinator shall be designated by the Director to act as a point of contact for issues relating to suicide. This may be an existing school employee. The school suicide prevention coordinator shall be responsible for planning and coordinating implementation of this policy.

Early Identification Procedures

Early identification of individuals with suicide risk factors or warning signs is crucial to the school's suicide prevention efforts. To promote awareness, employees, students and parents/guardians should be educated about suicide risk factors and warning signs.

Suicide risk factors refer to personal or environmental characteristics that are associated with suicide.

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

Referral Procedures

Any employee who observes a student exhibiting a warning sign for suicide or has another indication that a student may be contemplating suicide, shall refer the student for suicide risk screening and/or assessment and intervention in accordance with school procedures.

IMPORTANT NOTE: There is language preceded by brackets in the Referral Procedures section. Please determine which option is in accordance with CTC practice or wishes. **Please place an X in the appropriate brackets to indicate the desired option**. PSBA *recommends* selecting the "school behavioral health professional" but this is a local decision. The delegated employee could be any in this list, as long as they are receiving additional training.

In the absence of a warning sign for suicide, students demonstrating suicide risk factors that appear to be adversely impacting the student should be referred to the

{X } **school counselor**

{ } **school behavioral health professional**

{ } **Student Assistance Program**

{X } **Other _sending schools student assistance program**

for support and follow-up.

Documentation

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

METHODS OF INTERVENTION [1]

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

Procedures for Students at Risk

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

Parents/Guardians of a student identified as being at risk of suicide shall be notified by the school and informed of crisis and community resources. If the school suspects that the student's risk status is the result of abuse or neglect, staff shall immediately notify Children and Youth Services.[5]

The school shall identify behavioral health service providers to whom students can be referred for further suicide risk screening and/or assessment and assistance.

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

If the student is identified as being at increased risk of suicide, the school shall create a new, or update a previous, safety plan to support the student and the student's family. The safety plan should be developed collaboratively with input from the student and reviewed with the student's family.

Students With Disabilities

For students with disabilities who are identified as being at risk for suicide or who attempt suicide, the appropriate team shall be notified and shall address the student's needs in accordance with applicable law, regulations and Joint Operating Committee policy.[3][11][12][13]

If a student is identified as being at risk for suicide or attempts suicide and the student may require special education services or accommodations, the Director of Special Education or designee shall be notified and shall take action to address the student's needs in accordance with applicable law, regulations and Joint Operating Committee policy.[3][11][12][13]

Documentation

The school shall document observations, recommendations and actions conducted throughout the course of intervention, suicide risk screening and/or assessment and follow-up, including verbal and written communications with students, parents/guardians and behavioral health service providers.

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

METHODS OF RESPONSE TO SUICIDE ATTEMPT OR SUICIDE DEATH [1]

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

Response to Suicide Attempt

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

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

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

Re-Entry Procedures

A student's excusal from school attendance after a behavioral health crisis and the student's return to school shall be consistent with state and federal laws and regulations.[3][11][12][14][15]

Prior to a student returning to school after a behavioral health crisis, a school employed behavioral health professional, the building administrator or suicide prevention coordinator shall meet with the parents/guardians of the student and, if appropriate, meet with the student to ensure the student's readiness to return to school and to create an individual re-entry plan.

When authorized by the student's parent/guardian, the designated employee shall coordinate with the appropriate outside behavioral health care providers, request written documentation from the treating facility and encourage their involvement in the re-entry meeting.

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

Re-entry of a student with a disability requires coordination with the appropriate team to address the student's needs in accordance with applicable law, regulations and Joint Operating Committee policy.[3][11][12][13]

Response to Suicide (Postvention)

Upon confirmation of a suicide death, the school shall immediately implement established postvention procedures which shall include methods for informing the school community; identifying and monitoring at risk youth; and providing resources and supports for students, staff and families. The school shall review any requests for memorials in accordance with school procedures.

The Director or designee shall develop administrative regulations with recommended guidelines for responding to a suicide death.

REPORT PROCEDURES [1]

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

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

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

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

SUICIDE AWARENESS AND PREVENTION RESOURCES [1]

National:

- National Suicide Prevention Lifeline: **1-800-273-TALK (8255)** or visit http://www.suicidepreventionlifeline.org/
- Crisis Text Line: **TEXT 741-741** or visit http://www.crisistextline.org/
- Substance Abuse and Mental Health Services Administration (SAMHSA) Preventing Suicide: A Toolkit for High Schools https://store.samhsa.gov/product/Preventing-Suicide-A-Toolkit-for-High-Schools/SMA12-4669

Pennsylvania:

- List of Crisis Intervention contact information by county
- List of County CASSP and Children's Behavioral Health Contact Persons
- County Task Force Resources: By county, available contact information is provided for crisis, the Suicide Prevention Task Force, local chapter of AFSP, and other local mental health/suicide prevention resources

National and State Organizations

National:

- American Association of Suicidology (AAS): http://www.suicidology.org/
- American Foundation for Suicide Prevention (AFSP): https://www.afsp.org/
- Suicide Prevention Resource Center (SPRC): http://www.sprc.org/

Pennsylvania:

- Prevent Suicide PA: http://www.preventsuicidepa.org/
- Jana Marie Foundation: http://www.janamariefoundation.org/
- Aevidum: http://aevidum.com/cms/
- Services for Teens at Risk (STAR-Center) https://www.starcenter.pitt.edu/STAR-Center-Home/1/Default.aspx
- Pennsylvania Department of Education www.education.state.pa.us

Legal

1. 24 P.S. 1526
2. Pol. 103
3. Pol. 103.1
4. Pol. 249
5. Pol. 806
6. Pol. 333
7. 22 PA Code 12.12
8. Pol. 207
9. Pol. 216
10. Pol. 236
11. Pol. 113
12. Pol. 113.2
13. Pol. 114
14. Pol. 117
15. Pol. 204

Pol. 146

Pol. 805

Pol. 911