SUICIDE PREVENTION AND INTERVENTIONS/STUDENT CRISIS MANAGEMENT PROCEDURE

The district recognizes its part in the community’s responsibility for responding to a student suicide or suicide attempt. The Board initiates responsible leadership in establishing intervention and postvention procedures, acknowledging that a crisis situation will have an impact on those who were not necessarily directly involved. This policy will communicate the district’s efforts to deal with these situations. These procedures will attempt to coordinate efforts of staff members, family and community services.

The Board recognizes that school personnel and students should be in-serviced regarding crisis situations and the subsequent immediate response strategies. In addition, every school will have a postvention assistance team trained in crisis intervention skills.

It is the district’s belief that students identified in crisis receive appropriate help as quickly as possible. The primary responsibilities of school personnel working with students in crisis are support, parental contact, and referral. To that end, student confidentiality will be waived in life-threatening situations.

Recognizing that suicidal behavior among school-age children is a societal problem and realizing the district’s role in the community, the Board directs the school administration to develop and implement appropriate guidelines for intervention when a suicide attempt or threat occurs while the student is on school property and under school jurisdiction.

The district shall engage the services of mental health provider for consultation when deemed necessary.

All district employees, professional or nonprofessional, must report any suicidal student or employee to the guidance counselor, nurse, or building principal. The guidance counselor, nurse, or building principal shall determine the level of risk and make an appropriate referral.

In the case of life-threatening situations, the student and staff members involved must understand that the issue of confidentiality shall no longer apply.

Cluster – more than one (1) suicide influenced by a recent suicide.

Confidentiality – recognition of a student’s right to privacy. Information is shared on a need-to-know basis. Information should be limited to the initial parties involved and extended only to administrators, counselors, nurses, Core Team...
members, and teachers needing the information in order to protect the welfare of the student. Please refer to the school district’s policy on confidentiality.

Contagion – a process by which a suicide attempt, a completed suicide, or any death influences a subsequent suicide.

Copy-Cat-Suicide – a subsequent suicide completed with identical or highly similar methods.

Core Team – a group of staff members trained in the assessment and evaluation of information dealing with students at risk and determined by the building principal. The team will generally consist of administrators, counselors, school nurses, school psychologists, and teachers.

Critically Distraught – critically distraught students are those who have not improved their personal coping mechanisms after school-based interventions.

Depression – a mental state characterized by dejection, lack of hope, and absence of cheerfulness; and/or aggressive behavior and impulsive outbursts characterized by expressions of anger.

District Crisis Team – this will consist of specially designated members of building Core Team, trained in crisis intervention, who will be available to form a district-wide team to deal with an emergency in a specific building or on a district-wide basis.

Intervention – a reality-based confrontation process intended to protect an individual from harm, and to assist him/her in reestablishing psychological equilibrium by learning more effective ways of coping with the present critical situation.

Involuntary Commitment (302) – temporary hospitalization or commitment of an individual found to be in imminent danger to himself/herself or others, based on a medical opinion, without the individual’s consent or cooperation. Extension of the involuntary commitment is based on a hearing.

Lethality – the degree of seriousness of suicidal intent. Lethality is determined by questions directed toward two (2) primary areas: suicidal thoughts and suicidal plans. If the student admits to suicidal thoughts, has a method to implement, and a timeframe for implementation, this is considered a high-risk situation. The lack of these aspects of the plan, a method, place, and time for action lowers the risk dramatically. Feelings of guilt, despair, substance abuse history and prior suicide attempts also increase the degree of lethality.

Petitioner – any reliable person who has firsthand knowledge of acts or events that
would cause them to believe that a student is a high suicide risk, or that a student is a potential source of serious harm to another person, and who is willing to attest to such before a court of law.

Postvention – postvention is an appropriate method to deal with the aftermath of a crisis such as a suicide. This includes notification of staff, students, and media as appropriate. It provides for establishment of short-term support groups to help survivors live a longer, more productive, and less stressful life than they are likely to do otherwise and to discourage contagion.

Professional behavior – professional behavior is adherence by staff members to these written policy guidelines, maintaining the appropriate level of confidentiality, and using the Core Team as their primary support resource.

Student At Risk – a student who has indicated by changed behavior, depression, written or verbal remarks (ideation) that he/she may be contemplating a suicide attempt. A broad spectrum of behaviors may be exhibited including but not limited to: giving away prized possessions; making statements about leaving; exhibiting feelings of hopelessness; offering a detailed suicide plan; writing statements; possessing a history of previous attempt; living a chronically self-destructive lifestyle combined with a severe loss or threat of loss; approaching the anniversary of a loss; displaying an inability to accept help; being observably depressed; and having expressed suicidal thoughts. No plan has been developed, but feelings that life is unbearable are present, student is seriously depressed, has stated a plan of suicide, and may have the means to do it, may have observable behavior change or may have experienced situational trauma, is threatening or making an attempt to end his/her life. Student has a weapon or means of ending his/her life.

Suicidal Ideation – suicidal ideation is an indication, either verbal or written, of a student’s thoughts about committing suicide.

In the event of a student suicide or suicide attempt during the school day and on school grounds, the following procedures will be followed as appropriate:

Immediate Procedures

Professional Staff Members

1. Immediately call the school nurse for first aid services.

2. Ambulance service will be called, if needed (call 911).

3. Notify the building administrator or designee, who will:
   a. Notify the parent/guardian.
SUICIDE PREVENTION & INTERVENTION RESOURCES

b. Call the Superintendent and/or Director of Student Services.

c. Notify police.

4. The building administrator or designee, in consultation with Core Team members, will assess the situation and plan a response to students and faculty affected by the event.

5. Someone will stay with the student at all times.

6. The building administrator may direct staff to move student classes to another location so the situation may be handled as efficiently as possible.

7. The student is to be taken to the appropriate medical or mental health facility. If the situation is too emergent to wait for the parents/guardians to arrive, or if the parents/guardians are unable to refuse to take the child for an evaluation, Children and Youth Services will be contacted. Involuntary Commitment procedures may be implemented.

8. Building administrator and the school nurse will complete an incident report.

Follow-Up Procedures

1. If a student has made an overt suicide attempt or has experienced a mental health crisis in school, a request will be made of his/her parent/guardian to have a mental health assessment of the student.

2. The student’s readmission to school is best accomplished when a mental health facility provides written recommendations that readmission to the school setting is appropriate. Homebound instruction will be provided in the interim if requested by the physician. The returning student should not be treated any differently than any other student who has been absent due to illness. A student should return to his/her normal routine within the school, as much as possible.

3. Teachers and other school personnel should be encouraged to discuss any concerns with the Core Team.

4. Periodic checks should be made by the Core Team with the student’s teachers, mental health counselors, and other appropriate school staff. Attendance records and academic standing reports should be reviewed periodically in order to assess and evaluate the student’s overall judgment.
5. Contact with the student’s parents/guardians should be maintained in order to extend support, encourage parental involvement, and to report progress.

6. If parent/guardian/student does not comply with mental health recommendations within five (5) days, the matter is referred to the school’s Core Team.

**Procedures For A Suicide On A School Bus**

1. The bus driver will communicate the incident to the bus contractor and/or the Supervisor of Transportation immediately.

2. The bus contractor and/or the Supervisor of Transportation will call 911 with the location of the bus to request assistance. The Supervisor of Transportation will contact the building administrator or Superintendent to report the incident. Another bus will be dispatched to retrieve the other passengers, if necessary.

3. The building administrator will notify the Superintendent, the Director of Student Services, and the parents/guardians.

4. The building administrator will approve plans for the immediate handling of the other students on the bus who witnessed the incident.

5. The Core Team will assist at the direction of the building administrator.

6. The bus driver will give an oral report to the Supervisor of Transportation at the earliest practical moment, describing the incident and the steps taken to ensure the safety and welfare of all students on the bus. A written report should follow within twenty-four (24) hours.

**Procedures Outside of School**

In the event of a student suicide or suicide attempt outside of school and/or off school grounds, the following procedures will be followed:

**Professional Staff Procedures**

1. Immediate Procedures

   a. The building administrator or designee will attempt to verify the validity of the report.
b. The building administrator or designee will determine if emergency medical procedures have been initiated. If not, emergency medical services will initiated, if necessary.

c. Once emergency medical services have been implemented, contact the parent/guardian if they have not yet been made aware of the situation.

d. The building administrator or designee will notify the Superintendent and Director of Student Services.

e. The building administrator will complete an incident report form.

2. Follow-Up Procedures:

   a. If a mental health crisis has been verified, a mental health assessment will be requested via the parent/guardian.

   b. Decisions on the types of support needed for the student to attend school prior to assessment will be made on an individual basis by the building administrator and Core team. The Superintendent or designee and the Director of Student Services will be notified of the decision.

   c. If parent/guardian/student does not comply with mental health recommendations within five (5) days, the matter is referred to the building administrator and Core Team.

   d. Periodic checks should be made by the Core Team.

   e. Contact with student’s parents/guardians should be maintained in order to extend support, encourage parental involvement and to report progress.

Response to a Suicide Threat

Students who communicate suicidal ideation must be treated with the utmost seriousness. Such information must be reported to the building administrator and SAP Team immediately by any district employee. Students are encouraged to report such information to a member of the school staff.

Professional Staff Procedures:

1. Immediate Procedures:

   a. The student must not be left alone.
b. The staff member or designee will notify the building administrator and SAP team. Staff member will remain with student to support aforementioned personnel until situation is under control.

c. A parent/guardian must be notified immediately. If unable to contact this person, SAM will be called.

d. If a student communicates suicidal ideation, a mental health assessment will be recommended to the parent/guardian.

e. Steps should be initiated for No Suicide Contract with the student.

2. Follow-Up Procedures:

a. The building administrator or designee will attempt to confirm the student’s mental health assessment. A release of information should be secured to obtain appropriate verification and reports.

b. Decisions on the types of support needed for the student to attend school prior to assessment will be made on an individual basis by the building administrator and Core Team.

c. Upon completion of assessment, the student will be monitored by the Core Team as deemed necessary.

d. If parent/guardian or student does not comply with mental health recommendations after assessment, the building administrator or Core Team will meet with the parent/guardian and student and encourage compliance with the mental health recommendations.

e. If parent/guardian or student does not comply with the recommendations of a mental health assessment, a referral to Children and Youth Services could be considered.

f. Staff members who are involved with this student should be verbally notified to be alert for additional indicators. Involved staff will be notified of confidentiality requirements.

Postvention Procedures

Despite the best intervention and early identification methods utilized by district staff, student crises do occur. It is the intent of the district to provide support for students/parents/guardians, and members of the school staff. We would hope that establishing procedures to help all individuals react in a positive fashion will also
serve as a guide in the event of a student/staff death.

**Immediate Response:**

1. The building administrator notifies the Superintendent and the Director of Student Services.

2. Director of Student Services or designee will make arrangements for postvention procedures in the home school and in sibling schools.

3. The building administrator will contact the appropriate officials to determine the facts of the crisis.

4. The circumstances of the crisis or death are reported to school personnel.

5. The building crisis administrator initiates two (2) phone chains:
   a. In-school faculty and all other building staff for early morning faculty meetings.
   b. In-school Core Team for A.M. meeting to organize crisis work.

**Day One In School:**

1. A faculty meeting held before school will give teachers the facts and plans they need to carry on through the day.
   a. The building administrator will review the facts and involve the Core Team in the review process in order to implement the postvention process.
   b. A procedure for handling media contacts is discussed. All media contacts will be directed to the Superintendent. Building administrators will discourage media personnel on school property in order to prohibit contact with general student body and faculty immediately following the crisis.
   c. A counselor or school psychologist describes the feelings which students may be experiencing and reviews supportive listening skills, procedures of postvention Core Team, and need for awareness of warning signs in other students. Time is allowed and needed for staff support and discussion. Staff members should be encouraged to seek help should they experience personal difficulty.
   d. Teachers are encouraged to handle any expression of grief or loss in their classes to the extent that they are comfortable. All students who are
distraught or express a need to talk to someone are referred to the Core Team. It is stressed that all classes follow a routine schedule.

e. Teachers are asked to discuss the incident to dispel rumors. Discussions should be serious, frank, and supportive.

2. Acknowledgement of a crisis will be announced in individual classrooms, reading a prepared statement at a specified time.

3. A letter is suggested to be sent to the parents/guardians of all students enrolled in the building regarding the recent death of a student, faculty, or staff member.

4. The functioning of the district Crisis Team – The postvention Core Team consists of the crisis school Core Team and members of the Pupil Services staff and community mental health representatives. It needs to be proactive in its design, responsibilities, and communication. The outline of the Crisis Core Team operation is as follows:

a. District Crisis Team, consisting of the school’s Core Team and Core Team members from the district’s other schools, will assemble before the school day begins. Members are assigned space and responsibilities for either group or individual intervention work. All grieving students must have adult supervision. Two (2) members of the Crisis Team who are familiar with the school’s students are designated as floaters to watch for withdrawn or isolated students experiencing adverse reactions.

b. Any students identified as critically distraught by school staff or the district Crisis Team members are seen for individual counseling.

c. The building administrator will call a faculty meeting at the end of the day to process the day’s happenings and to develop further strategies, if necessary. A report from members of the district Crisis Team will raise awareness of critically distraught students. Staff are reminded to be on the lookout for any of the warning signs of depression or suicidal behavior in other students. Staff are also reminded of the availability of district Crisis Team members for individual counseling.

d. The head of the District Crisis Core Team coordinates phone calls to parents/guardians of individual students identified as particularly distraught.

e. Other schools which might be affected by the crisis should be notified and postvention procedures implemented to reduce chances of contagion.

f. Representatives of the district should visit the victim’s family. In
addition to expressions of sympathy and support, advice about dealing with the student’s close friends can be discussed and any personal belongings of the student returned. Advice also can be given with regard to contacts by the media. Obtain information from parents/guardians regarding their wishes on funeral, home visitations and funeral attendance.

g. Students released for funeral proceedings must have written parental permission.

Day Two In School:

1. Students should participate in normal classroom activities to the extent possible.

2. District Core Crisis Team will be available to assist teachers and students.

3. District Core Crisis Team will monitor the behavior of the critically distraught students. Documented phone calls are made to parents/guardians of students who continue to seek counsel.

4. In keeping with district attendance policy regarding excused absences, a note from the parent/guardian will be required for a student’s attendance at the funeral.

5. Faculty members who are experiencing personal difficulty with the situation should be encouraged to seek help.

Day Three In School:

1. A faculty meeting may be held at the end of day three (3) to provide the staff with time for reflecting, support, and to discuss interventions which have taken place.

2. Strategies for critically distraught students will be mapped out for teachers.

3. Plans will be made to report and process again at the next faculty meeting. All avenues for increased communication should be used at this time.

4. Periodic, discreet checks should be made by a guidance counselor or the Core Team to assess the critically distraught students’ overall adjustment following an individual interview.

5. Where a student had to be referred to counseling outside the school setting, counselor/building administrator will report any progress or concern to the
Follow-Up

A staff meeting can be held at the end of the first week to discuss the interviews which took place and provide staff with a time for reflection and support. Staff will be reminded to continue to monitor the behavior of all students, especially those identified as critically distraught.

The Core Team, by virtue of their familiarity with the school and existing rapport with students, is a critical part of the postvention support team. As members of this team, it becomes necessary for them to be available to carry out the crisis intervention work during the three (3) critical days following a student crisis to address student needs and help maintain stability.
**Suicide Prevention Resources For Schools**

***Please note that the resources listed here are free of charge. There are many more excellent resources for minimal cost.***

**General Information (many with webinar sessions)**

**PA Youth Suicide Prevention Initiative**  
**Mission** - The Pennsylvania Youth Suicide Prevention Initiative is a multi-system collaboration to reduce youth suicide.  
**Vision** - Youth suicide prevention will be embraced and incorporated into the fabric of every community in Pennsylvania to address the social and emotional needs of youth at risk and survivors of suicide.

**Suicide Prevention Resource Center**  
SPRC is the nation’s only federally supported resource center devoted to advancing the National Strategy for Suicide Prevention. They provide technical assistance, training, and materials to increase the knowledge and expertise of suicide prevention practitioners and other professionals serving people at risk for suicide. They also promote collaboration among a variety of organizations that play a role in developing the field of suicide prevention.

**Toolkit for High Schools**  
[http://store.samhsa.gov/product/SMA12-4669](http://store.samhsa.gov/product/SMA12-4669)  
Assists high schools and school districts in designing and implementing strategies to prevent suicide and promote behavioral health. Includes tools to implement a multi-faceted suicide prevention program that responds to the needs and cultures of students. Released in June 2012.

**American Foundation for Suicide Prevention**  
The American Foundation for Suicide Prevention has been at the forefront of a wide range of suicide prevention initiatives – each designed to reduce loss of life from suicide. They are investing in groundbreaking research, new educational campaigns, innovative demonstration projects and critical policy work. And they are expanding their assistance to people, whose lives have been affected by suicide, reaching out to offer support and offering opportunities to become involved in prevention.
American Association of Suicidology  
http://www.suicidology.org/home
AAS is a membership organization for all those involved in suicide prevention and intervention, or touched by suicide. AAS is a leader in the advancement of scientific and programmatic efforts in suicide prevention through research, education and training, the development of standards and resources, and survivor support services.

Services for Teens At Risk (STAR Center)  
http://www.starcenter.pitt.edu/
Services for Teens At Risk (STAR-Center) is a comprehensive research, treatment, and training center. Funded by the State of Pennsylvania’s General Assembly in 1986 to address adolescent suicide and depression, the program provides individual assessment and treatment to teens that are experiencing depression and suicidality. They also provide community education services about depression and suicidality to schools, social service agencies, churches and other organizations that request them.

The Trevor Project  
http://www.thetrevorproject.org/
The Trevor Project is the leading national organization providing crisis intervention and suicide prevention services to lesbian, gay, bisexual, transgender, and questioning youth.

Comprehensive School Guide

Youth Suicide Prevention School-Based Guide  
http://theguide.fmhi.usf.edu/
The Youth Suicide Prevention School-Based Guide is designed to provide accurate, user-friendly information. The Guide is not a program but a tool that provides a framework for schools to assess their existing or proposed suicide prevention efforts (through a series of checklists) and provides resources and information that school administrators can use to enhance or add to their existing program. First, checklists can be completed to help evaluate the adequacy of the schools’ suicide prevention programs. Second, information is offered in a series of issue briefs corresponding to a specific checklist. Each brief offers a rationale for the importance of the specific topic together with a brief overview of the key points. The briefs also offer specific strategies that have proven to work in reducing the incidence of suicide, with references that schools may then explore in greater detail. A resource section with helpful links is also included. The Guide provides information to schools to assist them in the development of a framework to work in partnership with community resources and families.
School Policy

Model School Policy on Suicide Prevention –
https://www.afsp.org/content/download/10555/186750/file/Model%20Policy_FINAL.pdf

Written by American Foundation for Suicide Prevention, National Association of School Psychologists, American School Counselor Association, and The Trevor Project. This modular, adaptable document will help educators and school administrators implement comprehensive suicide prevention policies in communities nationwide.

STAR Center Sample School Suicide Policy and Procedure -
http://www.starcenter.pitt.edu/Sample-School-Suicide-Policy-And-Procedure/41/Default.aspx

Training for School Staff

Society for Prevention of Teen Suicide
http://www.sptsusa.org/
The mission of the Society for the Prevention of Teen Suicide is to reduce the number of youth suicides and attempted suicides by encouraging overall public awareness through the development and promotion of educational training programs for teens, parents and educators.

The free, interactive series Making Educators Partners in Suicide Prevention is designed to be completed at the viewer’s own pace. Pennsylvania school staff requiring Act 48 hours may submit the certificate of completion to c-paschool@pa.gov or fax it to 717-783-4790, along with your Dept. of Education Professional ID number, to have these hours submitted.

More Than Sad Program
The More Than Sad Program of the American Foundation for Suicide prevention provides education about factors that put youth at risk for suicide, in particular depression and other mental disorders. Instructional materials accompany the More Than Sad Program, including a PowerPoint presentation.

American Foundation for Suicide Prevention (http://www.afsp.org/) – PA AFSP chapters will make the “More Than Sad” DVD available free to all high and middle schools in PA that request one. Contact Pat Gainey to receive your copy. Patricia Gainey, Regional Director, American Foundation for Suicide Prevention, Greater Philadelphia Regional Office, 3535 Market Street, Suite 4047, Philadelphia, PA 19104; Office: (215)746-7256.
Suicide Prevention Resource Center – Best Practices Registry  http://www.sprc.org/bpr
The purpose of the Best Practices Registry (BPR) is to identify, review, and disseminate information about best practices that address specific objectives of the National Strategy for Suicide Prevention. The BPR is a collaborative project of the Suicide Prevention Resource Center (SPRC) and the American Foundation for Suicide Prevention (AFSP). It is funded by the Substance Abuse and Mental Health Services Administration (SAMHSA). Many of the best practice resources listed have to be purchased.

Material for Students

The More Than Sad Program of the American Foundation for Suicide prevention provides education about factors that put youth at risk for suicide, in particular depression and other mental disorders.

American Foundation for Suicide Prevention (http://www.afsp.org) – PA AFSP chapters will make the “More Than Sad” DVD available free to all high and middle schools in PA that request one. Contact Pat Gainey to receive your copy. Patricia Gainey, Regional Director, American Foundation for Suicide Prevention, Greater Philadelphia Regional Office, 3535 Market Street, Suite 4047, Philadelphia, PA 19104; Office: (215)746-7256.

Suicide Prevention Resource Center Best Practices Registry  http://www.sprc.org/bpr
The purpose of the Best Practices Registry (BPR) is to identify, review, and disseminate information about best practices that address specific objectives of the National Strategy for Suicide Prevention. The BPR is a collaborative project of the Suicide Prevention Resource Center (SPRC) and the American Foundation for Suicide Prevention (AFSP). It is funded by the Substance Abuse and Mental Health Services Administration (SAMHSA). Many of the best practice resources listed have to be purchased.

Wisconsin Department of Public Instruction
The curriculum is not SPRC listed, but does use elements of SOS and Lifelines. http://sspw.dpi.wi.gov/sspw_suicideprev main page
Link to Student programs: http://sspw.dpi.wi.gov/sspw_spstudentprograms
Link to Curriculum: http://sspw.dpi.wi.gov/sspw_suicideprevcurriculum
**Postvention Assistance**

**Services for Teens At Risk (STAR Center)  [http://www.starcenter.pitt.edu/](http://www.starcenter.pitt.edu/**

Services for Teens At Risk (STAR-Center) is a comprehensive research, treatment, and training center. Funded by the State of Pennsylvania’s General Assembly in 1986 to address adolescent suicide and depression, the program provides individual assessment and treatment to teens that are experiencing depression and suicidality. They also provide community education services about depression and suicidality to schools, social service agencies, churches and other organizations that request them. **Any PA school can contact the STAR-Center for assistance in the aftermath of a suicide or other tragic loss. STAR-Center can also provide in-service training and resource materials on a variety of mental health related topics.**

**Suicide Prevention Resource Center Postvention Toolkit**  

This toolkit is designed to assist schools in the aftermath of a suicide (or other death) in the school community. It is meant to serve as a practical resource for schools facing real-time crises to help them determine what to do, when, and how. The toolkit reflects consensus recommendations developed in consultation with a diverse group of national experts, including school-based personnel, clinicians, researchers, and crisis response professionals. It incorporates relevant existing material and research findings as well as references, templates, and links to additional information and assistance.

Compiled by the: PA Youth Suicide Prevention Initiative:  [www.payspi.org](http://www.payspi.org)