

## **SUICIDE AWARENESS, PREVENTION AND RESPONSE**

### **Purpose:**

The Board is committed to maintain a safe school environment; to protect the health, safety and welfare of its students; to promote healthy development; and to safeguard against the threat or attempt of suicide among school-aged youth. This policy supports federal, state and local efforts to provide education on youth suicide awareness and prevention; establish methods of prevention, intervention and response to suicide or suicide attempt; and promote access to suicide awareness and prevention resources. The impact of students' mental health on their academic performance and the effect of mental health issues and suicide on students and the entire school community are significant

Therefore, in order to ensure the safety and welfare of students, the District will work to educate school personnel and students on the actions and resources necessary to prevent suicide and promote mental well-being.

### **Authority:**

In compliance with state law and regulations and in support of the West Allegheny School District's suicide prevention measures, this policy shall apply in any situation where a student is expressing suicidal thoughts or intentions of self-harm on school property, at any school-sponsored activity, or on any public vehicle providing transportation to or from a school or school-sponsored activity. This policy shall also apply following a student's suicide threat or attempt that does not occur on school grounds or during a school-sponsored activity, but that is reported to any school personnel. Information received in confidence from a student may be revealed to the student's parents/guardians, the program supervisor, building principal or other appropriate authority when the health, welfare or safety of the student or any other person is deemed to be at risk.

The District will notify school personnel, students and parent/guardians of this policy and will post the policy on the District's website.

### **Definitions:**

**At-Risk for Suicide** shall mean any youth with risk factors or warning signs that increase the likelihood of suicidal behavior.

**Chief School Administrator** shall mean the superintendent of a school district or joint school district, the chief executive officer of a charter school, regional charter school or cyber charter school, and/or the executive director of an intermediate unit or area vocational-technical school.

**Crisis Response Team** shall include, but may not be limited to, the administrators, guidance counselors, the school nurse, social worker, and school resource officers, and/or other members

of the Student Assistance Program (SAP), as designated, and may include other members as deemed appropriate by the chief school administrator/school entity. Community mental agency resources may be called for assistance to be a part of the team.

**Expressed Suicidal Thoughts or Intentions** shall mean a verbal or nonverbal communication that an individual intends to harm him/herself with the intention to die, but has not acted on the behavior.

**Prevention** refers to efforts that seek to reduce the factors that increase the risk for suicidal thoughts and behaviors and increase the factors that help strengthen, support, and protect individuals from suicide.

**Protective Factors** shall refer to characteristics (biological, psychological, and social) that reduce risk and the likelihood of the individual developing a mental illness.

**Resilience** shall refer to an individual's innate ability to persevere in the face of adversity and reduce the risk of unhealthy outcomes.

**Risk Factors** shall mean the personal or environmental characteristics associated with suicide. People affected by one or more of these risk factors have a greater probability of suicidal behavior.

**School Connectedness** shall mean the belief by students that adults and peers in the school care about their learning as well as about them as individuals.

**School Personnel** include, but may not be limited to, administrators, teachers, paraprofessionals, support staff, coaches, bus drivers, custodians, and cafeteria workers.

**Suicide** shall refer to death caused by self-directed injurious behavior with any intent to die as a result of the behavior.

**Suicidal Act or Suicide Attempt** shall mean a potentially self-injurious behavior for which there is evidence that the person probably intended to kill him/herself; a suicidal act may result in death, injuries, or no injuries.

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

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

## **Guidelines:**

### **SUICIDE AWARENESS AND PREVENTION EDUCATION**

#### Protocols for Administration of Student Education

Students shall receive age-appropriate lessons in their classrooms through health education or other appropriate curricula 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 and refer friends for help. Lessons shall contain information on comprehensive health and wellness, including emotional, behavioral and social skills development. Students shall be taught not to make promises of confidence when they are concerned about a peer or significant other. These lessons may be taught by health and physical education teachers, community service providers, classroom teachers or student services staff. Students who are in need of intervention shall be referred in accordance with the District's referral procedures for screening and recommendations.

Student education may include but is not limited to the following:

1. Information about suicide prevention. Resources are available on the Pennsylvania Department of Education's (PDE's) website– [www.education.pa.gov](http://www.education.pa.gov)
2. Help-seeking approaches amongst students, promoting a climate that encourages peer referral and emphasizes school connectedness.
3. Increasing students' ability to recognize if they or their peers are at risk for suicide.
4. Addressing problems that can lead to suicide, such as depression and other mental health issues, anger, and drug use.

#### Protocols for Administration of Employee Education

All District employees, including, but not limited to secretaries, coaches, bus drivers, custodians and cafeteria workers, shall receive information regarding risk factors, warning signs, response procedures, referrals, and resources regarding your suicide prevention.

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

Additional professional development in risk assessment and crisis intervention shall be provided to school counselors, District mental health professionals, social workers, school nurses and school psychologists.

### Resources for Parents/Guardians

The District 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/mental health resources.

### **METHODS OF PREVENTION**

The methods of prevention utilized by the District 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.

### Suicide Prevention Coordinators

#### *District-wide:*

A District-wide suicide prevention coordinator shall be designated by the Superintendent. This may be an existing District employee. The District suicide prevention coordinator shall be responsible for planning and coordinating implementation of this policy. The District suicide prevention coordinator shall investigate cases involving peer-to-peer harassment, as required under federal law and Board Policy. These individuals will help identify overlapping risk factors, including hostile environments created by persistent or severe harassment on the basis of gender, race, disability, or other protected classes.

#### *Building Level:*

Each building principal shall designate a school suicide prevention coordinator to act as a point of contact in each school for issues relating to suicide prevention and policy implementation. This may be an existing District employee.

Each building shall establish a crisis response team(s). The crisis response team(s) may include, but is not limited to, administrator(s), school counselors(s), the school nurse, social worker, and/or teachers and other members of the school's Student Assistance Program team. Community mental agency resources may also be called upon for assistance.

Any school personnel who are made aware of any threat or witnesses any attempt towards self-harm that is written, drawn, spoken, or threatened shall immediately notify the principal or designee. Any threat in any form shall be treated as real and dealt with immediately. No student should be left alone, nor confidences promised. In cases of life-threatening situations, a student's confidentiality will be waived. The school entity's crisis response procedures shall be implemented.

If an expressed suicide thought or intention is made known to any school personnel during an afterschool program and the principal or designee are not available, the school personnel shall call 412-473-1000 - County Emergency Services, 1-800-SUICIDE, or 1-800-273-TALK for help. Thereafter, immediately inform the principal of the incident and actions taken.

**Risk factors** refer to personal or environmental characteristics that are associated with suicide including, but not limited to:

- Behavioral Health Issues/Disorders:
  - Depression
  - Substance abuse or dependence
  - Previous suicide attempts
  - Self-injury
  
- Personal Characteristics:
  - Hopelessness/Low self-esteem
  - Loneliness/social alienation/isolation/lack of belonging
  - Poor problem-solving or coping skills
  - Impulsivity/risk-taking/recklessness
  
- Adverse/Stressful Life Circumstances:
  - Interpersonal difficulties or losses
  - Disciplinary or legal problems
  - Bullying (victim or perpetrator)
  - School or work issues
  - Physical, sexual or psychological abuse
  - Exposure to peer suicide
  
- Family Characteristics:
  - Family history of suicide or suicidal behavior
  - Family mental health problems
  - Divorce/death of parent/guardian
  - Parent –child relationship

**Warning signs** are indications that someone may be in danger of suicide, either immediately or in the near future. Warning signs include, but are not limited to:

- Expressions such as hopelessness, rage, anger, seeking revenge, feeling trapped, anxiety, agitation, no reason to live or sense of purpose
- Recklessness or risky behavior
- Increase alcohol or drug use
- Withdrawal from friends, family or society
- Dramatic mood changes

### Referral Procedures

Any District employee who has identified a student with one (1) or more risk factors or who has an indication that student may be contemplating suicide, shall refer the student for further assessment and intervention to the building school counselors.

### Documentation

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

## **METHODS OF INTERVENTION**

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

### Procedures for Students at Risk

A district-approved suicide assessment instrument may be utilized by trained mental health staff such as school counselors, school psychologists, or social workers.

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

If the parent or guardian refuse to cooperate and there is any doubt regarding the child's safety, the school personnel who directly witnessed the expressed suicide thought or intention will

pursue a 302 involuntary mental health assessment by calling County Emergency Services at 412-473-1000 and ask for a delegate. The delegate will listen to concerns and advise on the course of action. If a 302 involuntary mental health assessment is granted, the first-hand witness will need to be the petitioner, with support from the principal or other central office administrator.

The District shall identify mental health service providers to whom students can be referred for further assessment and assistance.

**Mental health service providers** may include, but not limited to, hospital emergency departments, psychiatric hospitals, community mental health centers, psychiatrists, psychologists, social workers and primary care providers.

The District shall create an emotional or mental health safety plan to support a student and the student's family if the student has been identified as being at increased risk of suicide.

#### 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 Board policy.

If a student is identified as being at-risk for suicide or attempts suicide and requires special education services or accommodations, the Director of Pupil Services shall be notified and shall take action to address the student's needs in accordance with applicable law, regulations and Board policy.

Documentation The District shall document observations, recommendations and actions conducted throughout the intervention and assessment process including verbal and written communications with students, parents/guardians and mental health service providers.

#### **METHODS OF RESPONSE TO SUICIDE OR SUICIDE ATTEMPT**

The methods of response to suicide or a suicide attempt utilized by the District include, but are not limited to:

1. Identification of and training for the school crisis response/crisis intervention team.
2. Determining the roles and responsibilities of each crisis response team member.
3. Notifying students, employees and parent/guardians.
4. Working with families.
5. Responding appropriately to the media.
6. Collaborating with community providers.

## Re-Entry Procedures

A student's excusal from school attendance after a mental health crisis and the student's return to school shall be consistent with state and federal laws and regulations.

A District-employed mental health professional, the building principal, or the school counselor shall meet with the parents/guardians of a student returning to school after a mental health crisis, and, if appropriate, meet with the student to discuss re-entry and applicable next steps to ensure the student's readiness to return to school.

When authorized by the student's parent/guardian, the designated District employee shall coordinate with the appropriate outside mental health care providers.

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

## **REPORT PROCEDURES**

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

When a District 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, District employees shall be responsible for effective documentation of incidents involving suicide prevention, intervention and response.

The Director of Pupil Services shall provide the Superintendent or designee with a copy of all reports and documentation regarding the at-risk student. Information and reports shall be provided, as appropriate, to school counselors, district mental health professionals and school nurses.

## **References:**

### **SUICIDE AWARENESS AND PREVENTION RESOURCES**

A comprehensive set of resources for youth suicide awareness and prevention is accessible through the Department at [www.education.pa.gov](http://www.education.pa.gov)

PA Youth Suicide Prevention Initiative - <http://payspi.org/>

Oct. 2014 Dear Colleague Letter related to peer harassment of students with disabilities:  
<http://www2.ed.gov/about/offices/list/ocr/publications.html#Section504>

Suicide Prevention Resource Center - <http://www.sprc.org/>

American Foundation for Suicide Prevention - <http://www.afsp.org/>

References:

School Code – 24 P.S. Sec. 1526

State Board of Education Regulations – 22 PA Code Sec. 12.12

2012 National Strategy for Suicide Prevention: Goals and Objectives for Action



