

**SUICIDE**

**AWARENESS**

**AND**

**PREVENTION PLAN**

**BIG VALLEY JOINT UNIFIED SCHOOL DISTRICT**

**BOARD APPROVAL DATE: JUNE 27, 2017**

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## **BP 5141.52 Students**

The Board of Education recognizes that suicide is a major cause of death among youth and that all suicide threats must be taken seriously. The Superintendent or designee shall establish procedures to be followed when a suicide attempt, threat or disclosure is reported. The district shall also provide students, parents/guardians and staff with education that helps them recognize the warning signs of severe emotional distress and take preventive measures to help potentially suicidal students.

The Superintendent or designee shall incorporate suicide prevention instruction into the curriculum.

The Superintendent or designee shall also offer parent education or information which describes the severity of the youth suicide problem and the district's suicide prevention curriculum. This information shall be designed to help parents/guardians recognize warning signs of suicide, learn basic steps for helping suicidal youth and identify community resources that can help youth in crisis.

Suicide prevention training for certificated and classified staff shall be designed to help staff recognize sudden changes in students' appearance, personality or behavior which may indicate suicidal intentions, help students of all ages develop a positive self-image and a realistic attitude towards potential accomplishments, identify helpful community resources, and follow procedures established by the Superintendent or designee for intervening when a student attempts, threatens or discloses the desire to commit suicide. The training shall be offered under the direction of a trained district counselor/psychologist or in cooperation with one or more community mental health agencies.

(cf. 1020 - Youth Services)

(cf. 4131 - Staff Development)

(cf. 4231 - Staff Development)

(cf. 4331 - Staff Development)

(cf. 6164.2 - Guidance/Counseling Services)

Staff shall promptly report suicidal threats or statements to the principal or mental health counselor, who shall promptly report the threats or statements to the student's parents/guardians. These statements shall otherwise be kept confidential.

(cf. 5141 - Health Care and Emergencies)

The Board endorses the use of peer counselors who can provide an effective support system for students who may be uncomfortable communicating with adults. Peer counselors shall first complete the suicide prevention curriculum and demonstrate that they are able to identify the warning signs of suicidal behavior and rapidly refer a suicidal student to appropriate adults.

Legal Reference:

EDUCATION CODE

49602 Confidentiality of student information

49604 Suicide prevention training for school counselors

WELFARE AND INSTITUTIONS CODE

5698 Emotionally disturbed youth; legislative intent

Management Resources:

CDE PUBLICATIONS

Suicide Prevention Program for California Schools, 1987

Health Framework for California Public Schools, 1994

Policy BIG VALLEY JOINT UNIFIED SCHOOL DISTRICT

adopted: June 27, 2017 Bieber, California

## **AR 5141.52 STUDENTS**

### **SUICIDE PREVENTION**

#### **CURRICULUM**

**THE DISTRICT'S SUICIDE PREVENTION INSTRUCTION SHALL BE DESIGNED TO HELP STUDENTS:**

- 1. UNDERSTAND HOW FEELINGS OF DEPRESSION AND DESPAIR CAN LEAD TO SUICIDE**
- 2. IDENTIFY ALTERNATIVES TO SUICIDE AND DEVELOP NEW COPING SKILLS**
- 3. RECOGNIZE THE WARNING SIGNS OF SUICIDAL INTENTIONS IN OTHERS**
- 4. LEARN TO LISTEN, BE HONEST, SHARE FEELINGS AND GET HELP WHEN COMMUNICATING WITH FRIENDS WHO SHOW SIGNS OF SUICIDAL INTENT**
- 5. IDENTIFY COMMUNITY CRISIS INTERVENTION RESOURCES WHERE YOUTH CAN GET HELP**

#### **CRISIS INTERVENTION PROCEDURES**

**DISTRICT PROCEDURES TO BE FOLLOWED WHEN A SUICIDE ATTEMPT, THREAT OR DISCLOSURE IS REPORTED SHALL:**

- 1. ENSURE THE STUDENT'S SHORT-TERM PHYSICAL SAFETY BY ONE OF THE FOLLOWING, AS APPROPRIATE:**
  - A. SECURING IMMEDIATE MEDICAL TREATMENT IF A SUICIDE ATTEMPT HAS OCCURRED**
  - B. SECURING POLICE AND/OR OTHER EMERGENCY ASSISTANCE IF A SUICIDAL ACT IS BEING ACTIVELY THREATENED**
  - C. WHEN A SUICIDAL ACT IS LESS ACTIVELY THREATENED BUT IS A SERIOUS POSSIBILITY, KEEPING THE STUDENT UNDER CONTINUOUS ADULT SUPERVISION UNTIL THE PARENT/GUARDIAN CAN BE CONTACTED AND HAS THE OPPORTUNITY TO INTERVENE**
  - D. IF AN UNSUCCESSFUL SUICIDE ATTEMPT HAS BEEN REPORTED OR THREATENED, MONITORING THE STUDENT'S ACTIONS UNTIL THE PARENT/GUARDIAN CAN BE CONTACTED AND HAS THE OPPORTUNITY TO INTERVENE**

**2. DESIGNATE SPECIFIC INDIVIDUALS TO BE PROMPTLY CONTACTED, INCLUDING:**

**A. THE SCHOOL COUNSELOR, PSYCHOLOGIST, NURSE AND/OR PRINCIPAL**

**B. THE STUDENT'S PARENT/GUARDIAN**

**C. AS NECESSARY, LOCAL POLICE OR COUNSELING AGENCIES**

**3. SET FORTH ONE OR MORE PLANS BY WHICH THE SCHOOL CAN TRANSFER RESPONSIBILITY FOR THE STUDENT'S WELFARE TO THE PARENT/GUARDIAN AND/OR THE APPROPRIATE SUPPORT AGENT OR AGENCY**

**4. PROVIDE FOR THE TIMELY FOLLOW-UP BY DESIGNATED SCHOOL STAFF REGARDING THE PARENT/GUARDIAN AND STUDENT'S CONTACT WITH AN APPROPRIATE SUPPORT AGENT OR AGENCY**

**REGULATION BIG VALLEY JOINT UNIFIED SCHOOL DISTRICT**

**APPROVED: JUNE 27, 2017 BIEBER, CALIFORNIA**

# PREVENTION

Big Valley Joint Unified School District recognizes that prevention of youth suicide, violence, and substance abuse and the early identification and treatment of mental health disorders are most effective when students, staff, parents, and community members have access to prevention information and resources.

## **SUICIDE PREVENTION TRAINING FOR STAFF SHALL INCLUDE THE FOLLOWING:**

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 loss, family instability, and other factors
2. Warning signs that may indicate suicidal intentions, including changes in students' appearance, personality, or behavior
  - Youth bereaved by suicide
  - Youth with disabilities, mental illness, or substance abuse
  - Homeless youth
  - LGBTQ youth
  - Youth in the juvenile justice or welfare system
  - Native American youth
  - Youth on the fringes of mainstream social groups
3. Research-based instructional strategies for teaching the suicide prevention curriculum and promoting mental and emotional health
4. School and community resources and services
5. District procedures for intervening when a student attempts, threatens, or discloses the desire to commit suicide

A training will be provided annually for all teachers and staff:

Keenan Link: [www.keenan.safeschools.com](http://www.keenan.safeschools.com) – Youth Suicide: Awareness and Prevention

More information on evidence-based programs and practices can be found in [SAMHSA's National Registry of Evidence-Based Programs and Practices](#).

The Trevor Project can be found at: [www.thetrevorproject.org](http://www.thetrevorproject.org)

## INTERVENTION

The following process should be followed when a staff member becomes aware that a student is experiencing a crisis that may involve risk of harm to self or others:

- When a staff member suspects or has knowledge of a student's suicidal intentions, he/she shall promptly notify the Superintendent, Principal, or designee, who shall then notify the student's parents/guardians as soon as possible. The student may be referred to mental health resources in the school or community.
- Students shall be encouraged to notify a teacher, principal, counselor, or other adult when they are experiencing thoughts of suicide or when they suspect or have knowledge of another student's suicidal intentions.

### IMMINENT RISK

- There is immediate danger to the student's self or others (for example, possible presence of a weapon or other means the student intends to use to harm self or others).
- There is a suicide attempt in progress (for example, the student has taken a drug or medication overdose).

The staff member who suspects or has knowledge of imminent risk will do the following:

- Provide for continuous supervision of the student at risk until an emergency responder arrives, keeping personal safety in mind. Evaluate the environment for safety and remove access to methods or lethal means.
- Notify the administrator or designee.

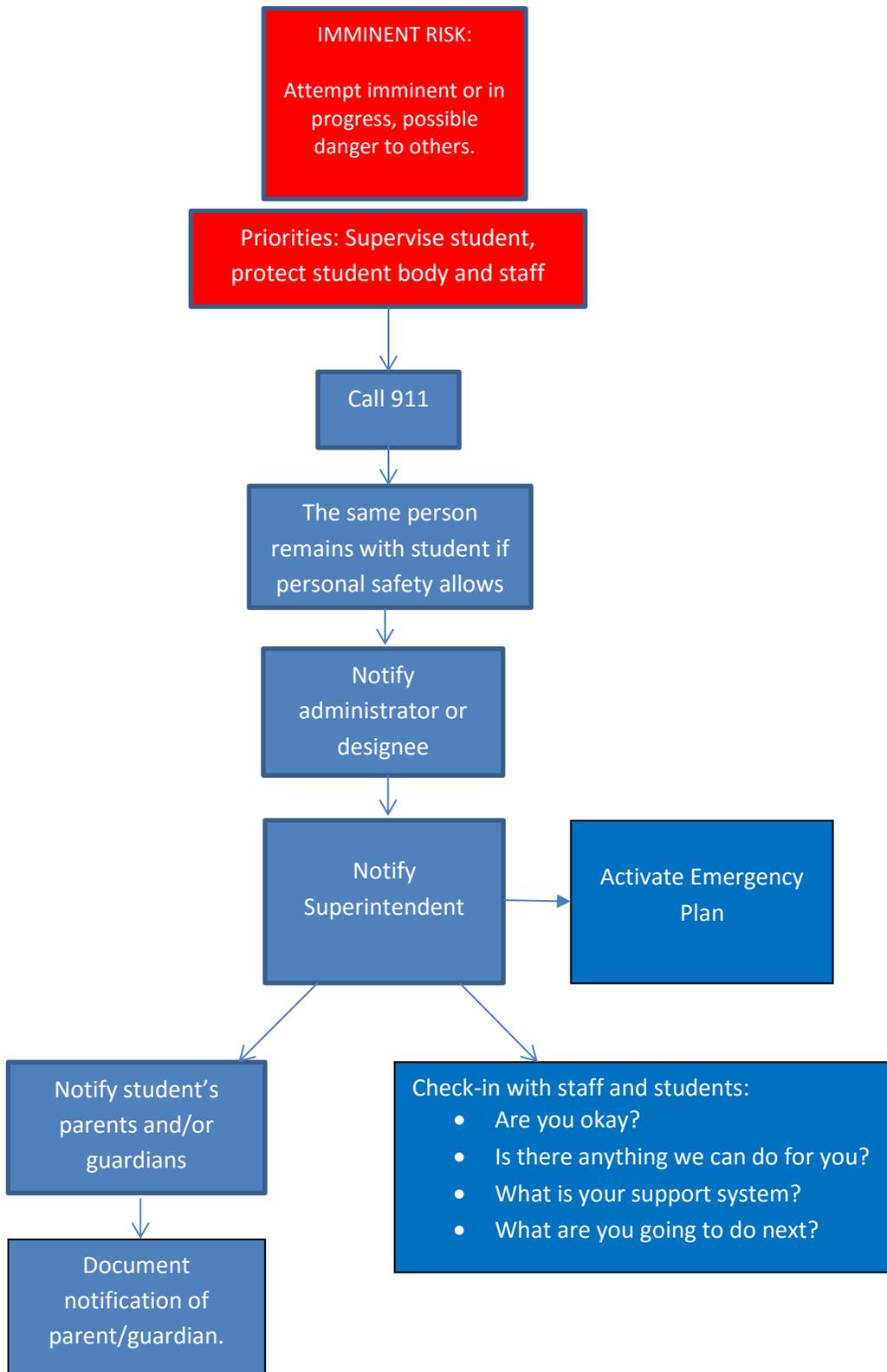
The administrator or other designee will do the following:

- Call 911 or designate a person to call. Be mindful that in the presence of a weapon or danger to others, emergency medical personnel will need the scene secured by law enforcement personnel before they can intervene.
- Notify the Superintendent.

Depending on the situation, the administrator or designee will:

- Even with no danger to others, if a suicide attempt is imminent or in progress, other students need to be removed quickly and calmly from the vicinity. (Execute emergency plan.)
- Notify the student's guardian and/or emergency contact and document the time and content of the conversation.
- Fill out the district's incident report forms.

CHART 1: IMMIDENT RISK



A school employee shall act only within the authorization and scope of the employee's credential or license.

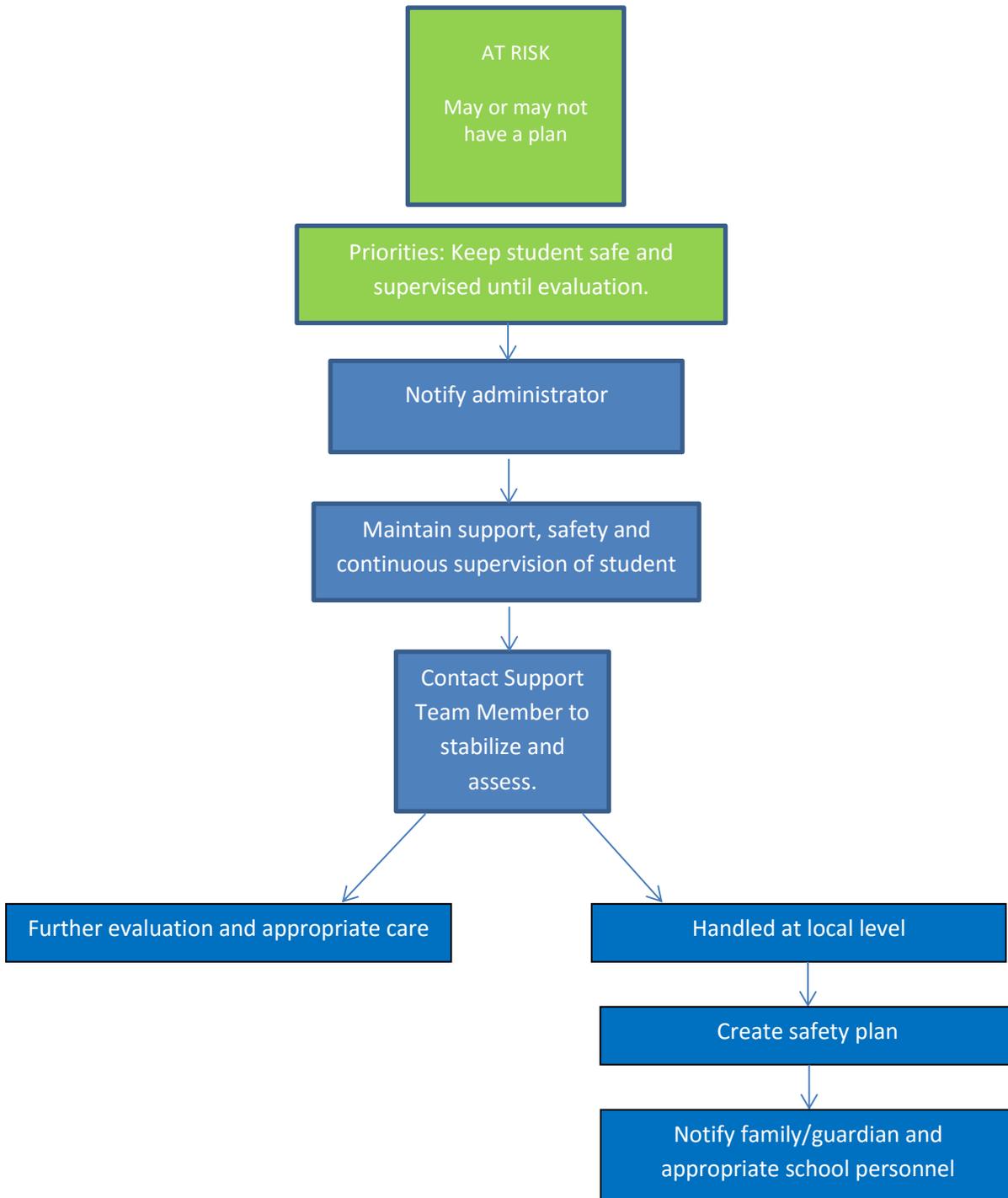
## AT RISK

- The student identifies thoughts of death but has no plan, intent to die, or suicidal behavior.
- The student identifies thoughts of death and may have a plan, intent to die or suicidal behavior.
- The student is experiencing some stressors.

The administrator or designee will do the following:

- Remain with the student and provide support, safety, and continuous supervision.
- Contact support team members (school counselor, behavioral counselor, school psychologist, Lassen County Behavioral Health).
- The administrator must be notified if the student will be leaving school grounds.
- If the assessment is that the student needs additional evaluation, appropriate arrangements will be made.

CHART 2: AT RISK



A school employee shall act only within the authorization and scope of the employee’s credential or license.

## POSTVENTION

Big Valley Joint Unified School District recognizes that the death of a student, whether by suicide or other means, is a crisis that affects the entire school and community. In the event of a student's death, it is critical that the school's response be swift, consistent, and intended to protect the student body and community. In the case of a death by suicide, other concerns such as the prevention of [suicide contagion](#) will be taken into account.

### **CONFIRMING THE NEWS AND CONVENING THE EDUCATIONAL SUPPORT TEAM**

Upon receiving news of a student's death, including an unconfirmed rumor, a staff member must immediately contact the Superintendent, Principal, and/or designee. Contact must be made whether this is during or outside school hours.

- The Superintendent, Principal, or designee will contact:
  - Lassen County Office of Education (LCOE) County Superintendent of Schools
  - Superintendent will deploy self-plan and identify key staff who will comprise the support team; i.e., teaching and classified staff, parents, students, and/or community members.
  - Compose a potential "blanket statement" to share with students and staff so the same message is disseminated to everyone.
  
- The LCOE County Superintendent of Schools will convene the educational support team which may include:
  - Administrators
  - Behavioral Counselors
  - School Psychologists

## **BEFORE SCHOOL BEGINS ON THE FIRST DAY**

The Superintendent, Principal, or designee will:

- Release accurate and concise information according to district policy.
- Convene a schoolwide staff meeting to provide accurate information and to identify any potential high-risk students.
- Notify the other school districts or call the LCOE for assistance.

## **EXAMPLE OF ITEMS FOR STAFF MEETING AGENDA**

- Assign personnel to identify and address high-risk students.
- Provide accurate information.
- Manage suicide contagion.
- Provide appropriate support to staff or send someone to his/her classroom.
- Make and set a time for debriefing.

### **Debriefing:**

- Debriefing is critical to handling the next crisis better.
- Emphasis on improvement – What? When? Where? Why?

## BIG VALLEY JOINT UNIFIED SCHOOL DISTRICT STUDENT SUICIDE RISK DOCUMENTATION FORM

STUDENT INFORMATION		
Date student was identified as possible at risk:		
Name:		
Date of Birth:	Gender:	Grade:
Name of Parent/Guardian:		
Parent/Guardian's Phone Number(s):		
IDENTIFICATION OF SUICIDE RISK		
Who identified student as being at risk? Indicate name where appropriate.		
<input type="checkbox"/> Student (him/herself): <input type="checkbox"/> Parent: <input type="checkbox"/> Teacher: <input type="checkbox"/> Other staff: <input type="checkbox"/> Student/Friend: <input type="checkbox"/> Other:		
Reason for concern:		
RISK ASSESSMENT		
Assessment conducted by:		
Date of assessment:		
Type of assessment conducted:		
Results of assessment:		
NOTIFICATION OF PARENT/GUARDIAN		
Staff who notified parent/guardian:		
Date/time notified:		
Parent Contact Acknowledgement Form signed: <input type="checkbox"/> Yes <input type="checkbox"/> No		
If no, provide reason:		
MENTAL HEALTH REFERRAL		
Student referred to:	Date of Referral:	
Safety Plan developed with student and parent: _____ (date)		
Mental Health Resources List and Student/Parent given to:		
<input type="checkbox"/> Student _____ (date) <input type="checkbox"/> Parent/Guardian _____ (date)		
Staff member to conduct follow-up:	Date of follow-up:	

## **GUIDELINES FOR NOTIFYING PARENTS**

Parents or guardians should be contacted as soon as possible after a student has been identified as being at risk for suicide. The person who contacts the family is typically the principal, school psychologist, or a staff member with a special relationship with the student or family. Staff need to be sensitive toward the family's culture, including attitudes toward suicide, mental health, privacy, and help-seeking.

1. Notify the parents about the situation and ask that they come to the school immediately.
2. When the parents arrive at the school, explain why you think their child is at risk for suicide.
3. Explain the importance of removing from the home (or locking up) firearms and other dangerous items, including over-the-counter and/or prescription medications and alcohol.
4. If the student is at risk and does not need to be hospitalized, discuss available options for individual and/or family therapy. Provide the parents with the contact information of mental health service providers in the community. If possible, call and make an appointment while the parents are with you.
5. Ask the parents to sign the Parent Contract Acknowledgement Form confirming that they were notified of their child's risk and received referrals to treatment.
6. Tell the parents that you will follow-up with them in a few days. If this follow-up conversation reveals that the parent has not contacted a mental health provider:
  - Stress the importance of getting the child help.
  - Discuss why they have not contacted a provider and offer to assist with the process.
7. If the student does not need to be hospitalized, release the student to the parents and notify the site administrator.
8. If the parents refuse to seek services for a child under the age of 18 who you believe is in danger of self-harm, you may need to notify child protective services that the child is being neglected.
9. Document *all* contacts with the parents.

## PARENT CONTACT ACKNOWLEDGEMENT FORM

Student Name: \_\_\_\_\_ Date of Birth: \_\_\_\_\_

School: \_\_\_\_\_ Grade: \_\_\_\_\_

This is to verify that I have spoken with a member of the school's staff

\_\_\_\_\_ (name) on \_\_\_\_\_ (date)  
concerning my child's suicidal risk. I have been advised to seek the services of a mental health agency or therapist immediately.

I understand that \_\_\_\_\_ (name of staff member)  
will follow-up with me, my child, and the mental health care provider to whom my child has been referred for services within two weeks.

Parent Signature: \_\_\_\_\_

Date: \_\_\_\_\_

Parent Contact Information:

Phone: \_\_\_\_\_

Email: \_\_\_\_\_

School Staff Member Signature: \_\_\_\_\_

Date: \_\_\_\_\_