### WARREN COUNTY SCHOOL DISTRICT

### **SECTION 10000**

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# **10000 Students**

## 10970 Suicide Awareness, Prevention, and Response

As a part of the Board's commitment to protecting the health, safety and welfare of its students, staff, and school community, this policy is intended to provide education on youth suicide awareness and prevention; to establish methods of prevention, intervention, and response to suicide or suicide attempt; and to promote access to suicide awareness and prevention resources.

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

#### SUICIDE AWARENESS AND PREVENTION EDUCATION

### 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 and refer friends for help.

Lessons shall contain information on comprehensive health and wellness, including emotional, behavioral, and social skills development.

## Protocols for Administration of Employee Education

All District employees shall receive information regarding risk factors, warning signs, response procedures, referrals, and resources regarding youth suicide prevention.

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

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

### 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.

1 2	Suicide Prevention Coordinators					
3 4 5 6	A District-wide suicide prevention coordinator, and a suicide prevention coordinator at each school, shall be designated to be responsible for planning and coordinating implementation of this policy.					
7 8	Early Identification Procedures					
9 10	•	tification of individuals with one (1) or more suicidal risk factors or of individuals warning signs is crucial to suicide prevention efforts.				
11 12 13 14	Risk factor but not lin	<b>ors</b> refer to personal or environmental characteristics associated with suicide including, nited to:				
15 16	<u>Be</u>	havioral Health Issues/Disorders:				
17	1.	Depression.				
18		Substance abuse or dependence.				
19		Previous suicide attempts.				
20		Self-injury.				
21	••	Son injury.				
22	Pe	rsonal Characteristics:				
23						
24	1.	Hopelessness/low self-esteem.				
25		Loneliness/social alienation/isolation/lack of belonging.				
26		Poor problem-solving or coping skills.				
27		Impulsivity/risk-taking/recklessness.				
28	7.	impulsivity/fisk taking/recklessiless.				
29	Adv	verse/Stressful Life Circumstances:				
30						
31	1.	Interpersonal difficulties or losses.				
32		Disciplinary or legal problems.				
33		Bullying (victim or perpetrator).				
34		School or work issues.				
35	5.	Physical, sexual or psychological abuse.				
36	6.	Exposure to peer suicide.				
37	0.	Exposure to peer suicide.				
38	Fa	mily Characteristics:				
39	<u>1 u.</u>	miny characteristics.				
40	1.	Family history of suicide or suicidal behavior.				
41	2.	Family mental health problems.				
42	3.	Divorce/death of parent/guardian.				
43		Parental-Child relationship.				
44	7.	Turontur Cinia retationship.				

**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:

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

### Referral Procedures

If a student is identified by a District employee as being at increased risk of suicide because (i) he/she has been identified as having one (1) or more of the **risk factors** specified above or (ii) has been identified as exhibiting a **warning sign** specified above indicating he/she may be in danger of suicide, either immediately or in the near future, the District employee shall refer the student to **a suicide prevention coordinator** the **designated District representative** for the implementation of further assessment and intervention.

### 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 family intervention for a completed suicide by a student.

## Procedures for Students identified as having an Increased Risk of Suicide

A District-approved suicide assessment instrument may be used by trained mental health staff such as counselors, psychologists, social workers.

Parents/Guardians of a student identified as being at increased risk of suicide shall be notified by the school. If the school suspects the student's risk status is the result of abuse or neglect, school staff shall notify Children and Youth Services pursuant to District Policy 10960.

The District shall identify mental health service providers to whom students can be referred for further assessment and assistance, which may include 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 risk of suicide.

### METHODS OF RESPONSE TO SUICIDE OR SUICIDE ATTEMPT BY A STUDENT OR STAFF

The District's methods of response to a student or staff suicide or a suicide attempt include, but are not limited to:

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- 1. Identifying and training the school crisis response/crisis intervention team.
  - 2. Determining the roles and responsibilities of each crisis response team member.
  - 3. Notifying students, employees, and parents/guardians or spouses.
  - 4. Referrals to appropriate mental health service providers.
  - 5. Working with families.
  - 6. Responding appropriately to the media.
  - 7. Collaborating with community providers.

### **Re-Entry Procedures**

A District-employed mental health professional, the building principal, or a suicide prevention coordinator shall meet with the parents/guardians of a student returning to school after an absence that a parent/guardian has identified as being due to mental health 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, a designated District employee may also coordinate with the appropriate outside mental health care providers as necessary to ensure the student's readiness to return to school.

#### DOCUMENTATION PROCEDURES

The District shall document the reasons for referral, including specific warning signs and risk factors identified as indications the student may be at risk. The District shall document observations, recommendations and actions/responses conducted throughout the intervention and assessment process including verbal and written communications with students, parents/guardians, and mental health service providers.

Information, documents, and reports shall be provided, as appropriate, to the Superintendent, school counselors, District mental health professionals, and school nurses.

#### SUICIDE AWARENESS AND PREVENTION RESOURCES

A listing of resources regarding suicide awareness and prevention is attached to this Policy.

34	Adoption Date	-	August 10, 2015
35	<b>Revision Date</b>	-	September 1, 2017
36	Review Date	-	
37	Legal Reference	-	24 P.S. §1526
38			22Pa. Code §12.12
39	Cross Reference	-	District Policy 10960