

## **STUDENTS**

# 5141.5(a)

## **SUICIDE PREVENTION AND INTERVENTION**

### **PURPOSE**

The purpose of this policy is to protect the health and well-being of all district students by having procedures in place to prevent, assess the risk of, intervene in, and respond to suicide. The district:

- a. Recognizes that physical, behavioral, and emotional health is an integral component of a student's educational outcomes,
- b. Further recognizes that suicide is a leading cause of death among young people,
- c. Has an ethical responsibility to take a proactive approach in preventing deaths by suicide, and
- d. Acknowledges the school's role in providing an environment which is sensitive to individual and societal factors that place youth at greater risk for suicide and one which helps to foster positive youth development.

Toward this end, the policy is meant to be paired with other policies supporting the emotional and behavioral health of students more broadly.

### **SCOPE**

This policy covers actions that take place in the school, on school property, at school-sponsored functions and activities, on school buses or vehicles and at bus stops, and at school sponsored out-of-school events where school staff are present. This policy applies to the entire school community, including educators, school and district staff, students, and volunteers. This policy will also cover appropriate school responses to suicidal or high risk behaviors that take place outside of the school environment.

The superintendent or designee shall serve as a suicide prevention coordinator for the purpose of planning and coordinating the implementation of this policy.

All staff members shall report students they believe to be at elevated risk for suicide to the school suicide prevention coordinator.

All staff will receive annual professional development on risk factors, warning signs, protective factors, response procedures, referrals, postvention, and resources regarding youth suicide prevention.

### **Youth Suicide Prevention Programming**

Developmentally-appropriate, student-centered education materials will be integrated into the curriculum of all K-12 health classes. The content of these age-appropriate materials will

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### **Youth Suicide Prevention Programming (continued)**

include: 1) the importance of safe and healthy choices and coping strategies, 2) how to recognize risk factors and warning signs of mental disorders and suicide in oneself and others, 3) help-seeking strategies for oneself or others, including how to engage school resources and refer friends for help.

In addition, schools may provide supplemental small-group suicide prevention programming for students.

### **Publication and Distribution**

This policy will be distributed annually and included in all student and teacher handbooks and on the school website.

When a student is identified by a staff person as potentially suicidal, the student shall be seen by a school employed mental health professional within the same day to assess risk and facilitate referral. If a school employed mental health professional is unable to see the student within the same day, prior to the close of the day, the suicide prevention coordinator shall notify the parent or guardian of the District's concern.

### **For Youth at Risk:**

1. School staff will continuously supervise the student to ensure their safety.
2. The principal and school suicide prevention coordinator will be made aware of the situation as soon as reasonably possible.
3. The school employed mental health professional or principal will contact the student's parent or guardian, as described in the Parental Notification and Involvement section, and will assist the family with urgent referral. When appropriate, this may include calling emergency services, but in most cases will involve setting up an outpatient mental health or primary care appointment and communicating the reason for referral to the healthcare provider.
4. Staff will ask the student's parent or guardian for written permission to discuss the student's health with outside care, if appropriate.

## **IN-SCHOOL SUICIDE ATTEMPTS**

In the case of an in-school suicide attempt, the health and safety of the student is paramount. In these situations:

**IN-SCHOOL SUICIDE ATTEMPTS (continued)**

1. First aid will be rendered until professional medical treatment and/or transportation can be received, following district emergency medical procedures.
2. School staff will supervise the student to ensure their safety.
3. Staff will move all other students out of the immediate area as soon as possible.
4. If appropriate, staff will immediately request a mental health assessment for the youth.
5. The school employed mental health professional or principal will contact the student's parent or guardian, as described in the Parental Notification and Involvement section.
6. Staff will immediately notify the principal or school suicide prevention coordinator regarding in-school suicide attempts.
7. The school will engage as necessary a crisis team to assess whether additional steps should be taken to ensure student safety and well-being.

For student returning to school after a mental health crisis (e.g., suicide attempt or psychiatric hospitalization), a school employed mental health professional, the principal, or designee will meet with the student's parent or guardian, and if appropriate, meet with the student to discuss re-entry and appropriate next steps to ensure the student's readiness for return to school.

1. A school employed mental health professional or other designee will be identified to coordinate with the student, their parent or guardian, and any outside mental health care providers.
2. The parent or guardian will provide documentation from a mental health care provider that the student has undergone examination and that they are no longer a danger to themselves or others.
3. The designated staff person will periodically check in with the student to help the student readjust to the school community and address any ongoing concerns.

**PARENTAL NOTIFICATION AND INVOLVEMENT**

In situations where a student is assessed at risk for suicide or has made a suicide attempt, the student's parent or guardian will be informed as soon as practicable by the principal, designee, or mental health professional. Staff will seek parental permission to communicate with outside mental health care providers regarding their child.

**PARENTAL NOTIFICATION AND INVOLVEMENT (continued)**

Through discussion with the student, the principal or school employed mental health professional will assess whether there is further risk of harm due to parent or guardian notification. If the principal, designee, or mental health professional believes, in their professional capacity, that contacting the parent or guardian would endanger the health or well-being of the student, they may delay such contact as appropriate. If contact is delayed, the reasons for the delay shall be documented.

**POSTVENTION****Development and Implementation of an Action Plan**

The crisis team will develop an action plan to guide school response following a death by suicide. A meeting of the crisis team to implement an action plan should take place immediately following news of the suicide death.

**Avoid Suicide Contagion**

It should be explained in the staff meeting described above that one purpose of trying to identify and give services to other high risk students is to prevent another death. The crisis team will work with teachers to identify students who are most likely to be significantly affected by the death. In the staff meeting, the crisis team will review suicide warning signs and procedures for reporting students who generate concern.

**Initiate Support Services**

Students identified as being more likely to be affected by the death will be assessed by a school employed mental health professional to determine the level of support needed. The crisis team will coordinate support services for students and staff in need of individual and small group counseling as needed.

**Develop Memorial Plans**

The school discourages the creation of contemporaneous on-campus physical memorials. School should not be cancelled for the funeral. Any school-based memorials (e.g. small gatherings) will make available suicide prevention resource information.

**External Communication**

The superintendent or designee will be the sole media spokesperson. Staff will refer all inquiries from the media directly to the spokesperson.

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**# 5141.5(e)**

Legal Reference: Conn. Gen. Stat. §10-221(e) Boards of education to prescribe rules,  
policies and procedures.

Litchfield Board of Education  
Policy Adopted: September 11, 1990  
Policy Revised: November 17, 1998  
Policy Revised: April 19, 2006  
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