Suicide Prevention Procedures

PREVENTION

- **1. District Policy Implementation** The District Administrator shall designate a Suicide Prevention Team that will assist in the planning and coordination of the suicide prevention policy and program implementation for the school district. The Administrative Team (Administrator and school principals) will provide active oversight.
- 2. **Staff Professional Development** All staff will receive annual professional development on risk factors, warning signs, protective factors, response procedures, referrals, postvention, and resources regarding youth suicide prevention. The professional development will include additional information regarding groups of students at elevated risk for suicide, including those living with mental and/or substance use disorders, those who engage in self harm or have attempted suicide, those in out-of home settings, those experiencing homelessness, American Indian/Alaska Native students, LGBTQ (lesbian, gay, bisexual, transgender, and questioning) students, students bereaved by suicide, and those with medical conditions or certain types of disabilities. Staff will also be educated in risk assessment and crisis intervention, as provided by school counselors, mental health professionals and the district school nurse.
- 3. **Parent/Community Education Suicide** prevention information will be provided to parents and community members annually.
- 4. **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 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, *M*iddle School and High School students will receive an annual suicide prevention education and screening class, with follow-up as requested and/or appropriate.

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

INTERVENTION -- ASSESSMENT AND REFERRAL

When a student is identified by a staff person as potentially suicidal, i.e., verbalizes about suicide, presents overt risk factors such as agitation or intoxication, the act of self-harm occurs, or a student self refers, the student will be seen by a school counselor, district school nurse or administrator within the same school day to assess risk and facilitate referral to a mental health provider.

For youth at risk:

1. School staff will continuously supervise the student to ensure their safety. 2. The principal and school counselor will be made aware of the situation as soon as reasonably possible. 3. The school counselor 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 or bringing the student to the local Emergency Department, 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 ATTEMPT

In the case of an in-school suicide attempt, the health and safety of the student is paramount. In these situations: 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 and available, staff will immediately request a mental health assessment for the youth. 5. The school counselor 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 counselor regarding in-school suicide attempts. 7. The school will engage as necessary the administrator to assess whether additional steps should be taken to ensure student safety and well-being.

RE-ENTRY PROCEDURE

For students returning to school after a mental health crisis (e.g., suicide attempt or psychiatric hospitalization), a school counselor, the principal, district school nurse 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 counselor, a mental health professional, if available, 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 school counselor or district school nurse will periodically check in with student to help the student readjust to the school community and address any ongoing concerns.

OUT-OF-SCHOOL SUICIDE ATTEMPTS

If a staff member becomes aware of a suicide attempt by a student that is in progress in an out-of school location, the staff member will: 1. Call the police and/or emergency medical services, such as 911. 2. Inform the student's parent or guardian. 3. Inform the school counselor and principal.

If the student contacts the staff member and expresses suicidal ideation, the staff member should maintain contact with the student (either in person, online, or on the phone). The staff member should

- d) 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.
- e) Initiate support services. Students identified as being more likely to be affected by the death will be assessed by a school counselor or district school nurse 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. In concert with parents or guardians, crisis team members will refer to community mental healthcare providers to ensure a smooth transition from the crisis intervention phase to meeting underlying or ongoing mental health needs.
- f) Develop memorial plans. The school should not create on-campus physical

memorials (e.g. photos, flowers), funeral services, or fly the flag at half-mast because it may sensationalize the death and encourage suicide contagion. School should not be canceled for the funeral. Any school-based memorials (e.g., small gatherings) will include a focus on how to prevent future suicides and prevention resources available.

2. **External Communication** The administrator or designee will be the sole media spokesperson. Staff will refer all inquiries from the media directly to the spokesperson. The spokesperson will: a) Keep the administrator, principals and crisis team informed of school actions relating to the death. b) Prepare a statement for the media including the facts of the death, postvention plans, and available resources. The statement will not include confidential information, speculation about victim motivation, means of suicide, or personal family information. c) Answer all media inquiries. If a suicide is to be reported by news media, the spokesperson should encourage reporters not to make it a front-page story, not to use pictures of the suicide victim, not to use the word suicide in the caption of the story, not to describe the method of suicide, and not to use the phrase "suicide epidemic" — as this may elevate the risk of suicide contagion. They should also be encouraged not to link bullying to suicide and not to speculate about the reason for suicide. Media should be asked to offer the community information on suicide risk factors, warning signs, and resources available.

ADOPTED:

then enlist the assistance of another person to contact the police while maintaining verbal engagement with the student.

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, school counselor, district school nurse, or designee. If the student has exhibited any kind of suicidal behavior, the parent or guardian should be counseled on "means restriction," limiting the child's access to mechanisms for carrying out a suicide attempt. Staff will also seek parental permission to communicate with outside mental health care providers regarding their child. Through discussion with the student, the principal or school counselor, 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 should be documented.

POSTVENTION

- 1. Development and Implementation of an Action Plan The administrator, principals, school counselors and district school nurse will develop an action plan to guide school response following a death by suicide. A meeting of this crisis team to implement the action plan should take place immediately following news of the suicide death. The action plan may include the following steps:
- a) Verify the death. Staff will confirm the death and determine the cause of death through communication with a coroner's office, local hospital, the student's parent or guardian, or police department. Even when a case is perceived as being an obvious instance of suicide, it should not be labeled as such until after a cause of death ruling has been made. If the cause of death has been confirmed as suicide but the parent or guardian will not permit the cause of death to be disclosed, the school will not share the cause of death but will use the opportunity to discuss suicide prevention with students.
- b) Assess the situation. The crisis team will meet to prepare the postvention response, to consider how severely the death is likely to affect other students, and to determine which students are most likely to be affected. The crisis team will also consider how recently other traumatic events have occurred within the school community and the time of year of the suicide. If the death occurred during a school vacation, the need for or scale of postvention activities may be reduced.
- c) Share information. Before the death is officially classified as a suicide by the coroner's office, the death can and should be reported to staff, students, and parents/guardians with an acknowledgement that its cause is unknown. Inform the faculty that a sudden death has occurred, preferably in a staff meeting. Write a statement for staff members to share with students. The statement should include the basic facts of the death and known funeral arrangements (without providing details of the suicide method), recognition of the sorrow the news will cause, and information about the resources available to help students cope with their grief. Public address system announcements and school-wide assemblies should be avoided. The crisis team may prepare a letter (with the input and permission from the student's parent or guardian) to send home with students that includes facts about the death, information about what the school is doing to support students, the warning signs of suicidal behavior, and a list of resources available.

School District of Rib Lake

Suicide Prevention

The School Board is committed 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. The Board acknowledges that communication and cooperation within the school district and between the home, school, and community is vital.

shall incorporate the following strategies toward preventing The student prevention program childhood/adolescent suicides:

- 1. <u>Prevention Strategy.</u> To develop within the Rib Lake School a suicide prevention curriculum and to provide all staff members with basic information about and a recognition of, the signs of suicidal behavior.
- 2. <u>Intervention Strategy</u>. To take proactive action when an immediate referral is necessary and to understand the emergency procedures when a referral is made.
- 3. **Postvention Strategy**. To provide for student needs after a suicidal act has occurred.

The School Board recognizes that any staff member acting in good faith to prevent suicide by a student is immune from civil liability for any act or omission in respect to the suicide or attempted suicide, as provided in Wisconsin Statutes 118.295.

LEGAL REFERENCES:

Wisconsin Statutes Section 118.01(2)d7

suicide prevention and

Instructional program goals related to intervention Privileged communications Suicide intervention; civil liability exemption Section 118.126 Section 118.295

CROSS REFERENCES:

Emergency and Safety Preparedness Manual School Safety Plans

ADOPTED: October 11, 2019