

SUICIDE AWARENESS AND PREVENTION

The purpose of this policy is to protect the health and well-being of all students by having procedures in place to prevent, assess the risk of, intervene in, and respond to suicide. The corporation recognizes that physical, behavioral, and emotional health is an integral component of a student's educational outcomes, and that suicide is a leading cause of death among young people. The corporation has a responsibility to take a proactive approach in preventing deaths by suicide and acknowledges the school's role in providing an environment which is sensitive to the factors that place youth at greater risk for suicide and helps to foster positive youth development.

This policy covers actions that take place in the school, on school property, at school-sponsored functions and activities, on school buses or vehicles, at bus stops, and at school-sponsored out-of-school events where school employees are present. This policy applies to the entire school community, including teachers, administrators, corporation staff, students, parents/guardians, and volunteers.

Prevention

Policy Implementation

A corporation suicide prevention coordinator shall be designated by the Superintendent. The corporation suicide prevention coordinator will be responsible for planning and coordinating implementation of this policy for the school corporation.

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

Professional Development

All administrators, teachers, and employees will receive annual training on risk factors, warning signs, response procedures, referrals, postvention, and resources regarding youth suicide prevention. **The training programs used will be research-based that are demonstrated to be an effective or promising program and recommended by the Indiana Suicide Prevention Network Advisory Council.**

The training 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 students, LGBTQ (lesbian, gay, bisexual, transgender, and questioning) students, students bereaved by suicide, and those with medical conditions or certain types of disabilities.

Additional training in risk assessment and crisis intervention will be provided to school-employed mental health professionals and school nurses.

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

The school corporation will work in cooperation with community-based suicide prevention services to provide educational and referral information about crisis intervention to at-risk students, their parents, and school employees. Referral information and the availability of suicide prevention services in the local community will be made available by the school corporation through its employee training and student education programs to its employees, its students, and their parents.

Assessment and Referral

When a student is identified by a staff person as potentially suicidal or a student self-refers, the student will be seen by a mental health professional within the same school day to assess risk and facilitate referral. If there is no mental health professional available, a school nurse or administrator will fill this role until a mental health professional can be brought in.

For students 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 mental health professional or principal will contact the student's parent or guardian and will assist the family with an 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.

Crisis Team

The superintendent or designee will appoint a crisis team, which will be a multidisciplinary team consisting of primarily administrative, mental health, and safety professionals, and support staff whose primary focus is to address crisis preparedness, intervention/response and

recovery. Members of the crisis team should be professionals who have been specifically trained in crisis preparedness through recovery. The crisis team will take the leadership role in developing crisis plans, ensuring school staff can effectively execute various crisis protocols, and may provide mental health services for effective crisis interventions and recovery supports.

Publication and Distribution of Policy

This policy and its regulations will be distributed annually to all corporation employees and included in all student handbooks and on the school website.

Legal Reference: IC 20-26-5-34.4

ADMINISTRATIVE REGULATIONS

Parental Notification and Involvement

If a staff member becomes aware of a suicide attempt by a student that is in progress, 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 suicide prevention coordinator and principal.

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

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.

If the student has exhibited any kind of suicidal behavior, the parent or guardian should be counseled on 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 mental health professional will assess whether there is a 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 crisis team will develop an action plan to guide school response following a death by suicide. A meeting of the 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 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.
- c) Share information. Before the death is officially classified as a suicide, the death should be reported to staff, students, and parents/guardians with an acknowledgment that its cause is unknown. Inform the faculty that a sudden death has occurred. 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. 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 include 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.
- d) Avoid suicide contagion. It should be explained to staff 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. The crisis team will review suicide warning signs and procedures for reporting students who generate concern with the staff.
- e) Initiate support services. Students identified as being more likely to be affected by the death will be assessed by a mental health professional to determine the level of support needed. The crisis team will coordinate support services for students and staff

in need of counseling. 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.

2. External Communication

The school principal 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 corporation suicide prevention coordinator and superintendent 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 the victim's 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, and not to describe the method of suicide. They should also be encouraged 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.

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:

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 student.
5. The 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 the crisis team 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 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 mental health professional or another 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.