

StudentsSuicide Prevention

The Board recognizes that suicide is a complex issue and that, while the school may recognize potentially suicidal youth, it cannot make clinical assessment of risk and provide in-depth counseling but must refer the youth to an appropriate place for such assessment and counseling.

Any school employee who may have knowledge of suicide threat must take the proper steps to report this information to the building principal or his/her designee who will, in turn, notify the appropriate school officials, the student's family and appropriate resource services.

Legal Reference: Connecticut General Statutes
10-221(e) Boards of education to prescribe rules

Policy adopted: October 1, 1990

WESTON PUBLIC SCHOOLS
Weston, Connecticut

5141.5(a)

Students

Suicide/Prevention/Intervention

Guidelines

All school district professionals have a responsibility to share with a principal, observations of student behavior which appear to be related to the possibility of suicide.

The principal, in turn, has a responsibility to follow the guidelines attached to the Board Policy on Suicide. If circumstances of a particular situation indicate that actions other than those described would serve the best interests of a given student and the school system, the principal may consult with the designated CORE Team, Planning and Placement Team and/or other appropriate personnel to make such a decision and shall make appropriate documentation of the circumstances and the resulting decision.

Special Issues in Using Procedures

Communication: The principal shall maintain communication with the Superintendent of Schools about all suicide attempts and shall call on the Superintendent of Schools for advice on how to proceed if any situation warrants. In turn the Superintendent will keep the Board informed about suicide related issues as appropriate. All communications must be kept confidential as appropriate.

Documentation: All actions taken by school personnel should be carefully documented. Such records should express facts, observable behaviors and actions. They should be placed in the student's supplementary file. Following an attempt or completed suicide, a daily log, might be helpful.

Contagion: Sometimes a suicide attempt or completed suicide will trigger other suicide attempts. There is no clear body of knowledge about how or why this occurs and what unique circumstances cause it. The best preventive measure against the contagion effect seems to involve careful identification and monitoring of students who may be in a risk category, efforts to reduce glamorization of the suicide and carefully planned follow-up activities.

Principal: shall be understood to mean principal or principal's designee.

Suicide/Prevention/InterventionGuidelines (continued)

Anniversary Dates: The week, month or year anniversary of the death may trigger a delayed grief reaction or a suicide attempts modeled after the first. School personnel should be sensitive to this and intensify monitoring of students at these times.

Support: While CORE Team members will probably be sensitive to each other's needs for support, it can also be helpful to have an outside professional available during the following crisis periods to "debrief" the team and offer support to individual members as needed.

Suicide at School: Most experts agree it is better to keep students at school where adult support systems are available than to send them home, where no adult supervisors might be available to them. Students should only be released to their parents or other responsible adults should they ask to leave school early.

Students at Risk for Suicide

1. General Procedures During School Hours

School staff who have identified a student who exhibits the signs as noted in Appendix or who have other reason to believe the student is at risk for suicide must immediately bring the student's name to the attention of the principal or his/her designee. This must be done even if the student has confided in the staff person and asked the staff person to keep their discussion confidential. In such cases, the staff person would explain that he/she cannot keep confidentiality in these circumstances.

Appropriate staff member(s) (CORE Team) gather background information prior to contacting the student unless there appears to be imminent risk of self harm. This background check should be done on the same day as the referral and may include:

- (1) Further discussion with the person who made the referral.
- (2) Contact with other staff members to get data on recent student performance.

At the earliest possible moment following the collection of information, contact with student will be made to determine the seriousness of the situation.

Suicide/Prevention/InterventionStudent at Risk for Suicide (continued)

A. Critical Situation

The student has the intent to kill himself/herself, a specific plan for how he/she will do it and immediate access to the method; in addition, he/she exhibits feelings of loneliness, helplessness and the inability to tolerate any more pain.

- (1) A staff member will stay with the student to offer support. In addition, he/she will explain to the student that someone will be contacting parent(s) because of deep concern.
- (2) A staff member will notify the parent(s) and request that they come to the school immediately. The following points should be covered in the meeting with the parents:
 - (a) The seriousness of the situation.
 - (b) The need for immediate outside professional help.
 - (c) The need for continued monitoring.
 - (d) A request for parent(s) to sign a release of information form for communication between the school and the facility which the student will be taken to, the student's therapist and other individuals as appropriate.
3. If the parent(s) cannot be contacted or if they refuse to come to the school and the team determines that a medical emergency exists, normal procedures will be followed for such emergencies. The principal will explain that the school may be required to file a medical neglect report with the Department of Children and Youth Services. In addition, the principal may inform the parents that the student will not be accepted back into school until a formal mental health evaluation has taken place. This exclusion will be done in compliance with state regulations and only if it is deemed to be in the best interest of the student.
- (4) As a follow-up, a staff member will contact the family to discuss the family's plans to provide professional help and support to the student. Permission for communication between school and therapist will be requested. A plan of action for in-school support of the student will be discussed at the next CORE Team meeting. The team will continue to monitor the student.

Suicide/prevention/InterventionStudent at Risk for Suicide (continued)

B. Potential Situation

The student has some intent to kill himself/herself and has thought about how he/she would do it. He/she has access to the method but does not have everything in place. Although the student may exhibit feelings of hopelessness, helplessness and unbearable pain, he/she shows some willingness to accept help. The following action will be taken, the order to be determined by the specific situation:

- (1) A staff member will explain to the student that parent(s) will be contacted in order to arrange for professional help and to develop an appropriate support system. The staff member will offer to speak to those people on the student's behalf.
- (2) The principal or designees will ask the student to sign an agreement not to harm himself/herself.
- (3) Following the meeting with student the principal or designee will:
 - (a) Convene the CORE Team to plan a course of action.
 - (b) Contact the student's parent(s) to inform them of the seriousness of the situation and to request a meeting that day.
 - (c) Obtain further information from the parent(s) concerning the student's mental health history including therapy and previous suicidal attempts or threats. If the student is currently being seen by a mental health professional, the principal will ask for parental permission to speak with that professional.
 - (d) Communicate the need for suicidal risk evaluation.
- (4) If the parent refuses to come to school, the principal will explain that the school may be required to file a medical neglect report with DCYS.
- (5) As follow up a team member will contact the family to discuss their plans to provide professional help to the student. The team will meet to develop a plan for in school support.

Suicide/prevention/Intervention

Student at Risk for Suicide (continued)

2. General Procedures AFter School Hours

If a staff member has become aware of a potentially suicidal student during after school hours, he/she should consider and decide the following actions:

A. Contact the parents.

B. Contact the police.

C. Contact student's therapist.

D. Contact 24-hour crisis center.

E. Contact the principal.

Students Who Have Attempted Suicide

1. In School Attempt

A. The staff person who becomes aware of the attempt will remain with the student and will immediately send for the nurse and principal.

B. The nurse and principal will follow school medical emergency procedures to get immediate medical help for the student.

C. The parents will be contacted.

D. The principal will refer to the Crisis Plan to determine a course of action.

2. Out of School Attempt

A. The staff person who receives the information concerning an attempted suicide will immediately contact the school principal who will verify the information and actions taken by the parents.

B. The principal will determine if the situation warrants informing the full faculty.

C. If the attempted suicide is causing visible distress among students, staff may be asked to follow guidelines established in the Crisis Plan. An after school meeting may be held to identify others at risk with students and discuss concerns.

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Student Who Have Attempted Suicide (continued)

- D. The principal in conjunction with the CORE Team will develop a plan to monitor and support high risk students.
- E. A team member will be assigned to follow up and monitor the student upon his/her return to school.
- F. If appropriate, information will be shared with the principal of the sibling's school.

Regulation approved: June 17, 1991

WESTON PUBLIC SCHOOLS
Weston, Connecticut

Students

Suicide Prevention/Education

Annually, youth suicide prevention education shall be incorporated into the health education program and other pertinent curriculum. The focus of the curriculum will emphasize the development of self-esteem, coping skills, and trusting relationships with adults; build skills in stress management and problem solving; and identify support services and resources.

The professional staff shall become more aware of the factors that may increase a student's risk for suicide; symptoms of stress, coping difficulties, depression and self-destructive behaviors; warning signs of suicide; and information on school and community resources.

It is desired that the administration make use of in-service training sessions for both certified and non-certified staff in order to achieve the goals of this Board approved regulation, and that full cooperation with community agencies be given wherever such cooperation can work to the advantage of the students.