

SUICIDE PREVENTION POLICY

The Governing Board recognizes that suicide is a leading cause of death among youth and that school personnel who regularly interact with students are often in a position to recognize the warning signs of suicide and to offer appropriate referral and/or assistance. To attempt to reduce suicidal behavior and its impact on students and families, the School Director or designee shall develop measures and strategies for suicide prevention, intervention, and postvention, to be adopted by the Governing Board at a regularly scheduled board meeting.

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.

In developing policies for use by the School for kindergarten and grades 1 to 5, the School Director or designee shall consult with school and community stakeholders, the county mental health plan, school mental health professionals and suicide prevention experts. This policy shall be age appropriate and delivered and discussed in a manner that is sensitive to the needs of young students. The policy shall also ensure proper coordination and consultation with the county mental health plan if a referral is made for mental health or related services on behalf of a student who is a Medi-Cal beneficiary.

The policy shall specifically address the needs of high-risk groups, including, but not limited to, all of the following: (A) Youth bereaved by suicide. (B) Youth with disabilities, mental illness, or substance use disorders. (C) Youth experiencing homelessness or in out-of-home settings, such as foster care. (D) Lesbian, gay, bisexual, transgender, or questioning youth.

The policy shall also address any training on suicide awareness and prevention to be provided to teachers of pupils in all of the grades served by the local educational agency. Materials approved by a local educational agency for training shall include how to identify appropriate mental health services, both at the schoolsite and within the larger community, and when and how to refer youth and their families to those services. Materials approved for training may also include programs that can be completed through self-review of suitable suicide prevention materials.

The policy shall be written to ensure that a school employee acts only within the authorization and scope of the employee's credential or license. Nothing in this section shall be construed as authorizing or encouraging a school employee to diagnose or treat mental illness unless the employee is specifically licensed and employed to do so.

The School's governing board shall review its policy on pupil suicide prevention at a minimum of every fifth year and, if necessary, update its policy.

It is preferred that the school counselor, psychologist, or social worker conduct the risk assessment. If they are not available school staff that complete a youth risk assessment (see attached) should

STUDENT POLICY #20– SUICIDE PREVENTION POLICY

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have the following training at a minimum: Vector Solutions: Youth Suicide: Awareness, Prevention and Postvention.

Resources:

Humboldt County Mental WEB SITES: <https://humboldt.gov/329/Behavioral-Health>

Call 988-Suicide Prevention Hotline

Humboldt County Behavioral Health

24-hour Crisis Line

Ph: 707-445-7715

Toll-Free Crisis Line

Ph: 888-849-5728

K–12 Toolkit for Mental Health Promotion and Suicide Prevention <https://www.heardalliance.org/help-toolkit/>

Trevor Project: <https://www.thetrevorproject.org/wp-content/uploads/2017/09/District-Policy.pdf>

U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration: <http://www.samhsa.gov>

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Youth Risk Assessment

*A suicide risk assessment should be initiated **immediately** whenever a student talks about harming himself/herself, or if there is concern that a student has thoughts about hurting himself/herself.*

This form must be filled out by the designated administrator in consultation with the school mental health professional(s) on the student’s Suicide Risk Inquiry Team

- ★ **Do not leave the student unattended by an adult.**
- ★ **Do not allow the student to leave the building until this protocol is completely filled out and a plan for ensuring the student’s safety is being carried out.**
- ★ **Administrator and parents MUST be informed.**
- ★ **File all completed paperwork in cum folder**

Student Name: _____ **Grade:** _____ **Date:** _____

Referred By: _____

Nature of risk: (self-injurious, suicidal, homicidal) _____

Evaluation completed by: _____

Does the student have ideation/thoughts about harm? Sample questions: Have you wished you were dead or wished you could go to sleep and not wake up? Have you actually had any thoughts about killing yourself?

Does the student have a plan? Sample questions: Have you thought about how you might do this? Have you started to work out or worked out the details of how to kill yourself? Do you intend to carry out this plan? Yes? Timeline? Criteria or circumstances which would lead to the harm? Have you done anything, started to do anything or prepared to do anything to end your life?

Other things to consider: Does the student have intent to harm? Does the student express desire to harm? Does the student have a means or method to harm? Does the student have access to the means/method above?

Explore Ambivalence: Reasons to live and Reasons to harm

Does the student have past behaviors similar to this?.

Action taken by Staff

Created safety plan, parent contact, referral to community based counseling, etc.)

Summary of Conversation with Parents/Guardians

Copy of Safety Plan and Assessment Shared with Guardians? ____ Yes ____ No

Follow Up within a week. Notes from follow up:

Safety Plan

STEP 1: Know When to Get Help

What are the warning signs that you are beginning to struggle with your problem? These can include thoughts, feelings, or behaviors.

STEP 2: Coping Skills

What can you do, by yourself, to take your mind off the problem? What obstacles might there be to using these coping skills?

STEP 3: Social Support

If you are unable to deal with your distressed mood alone, contact trusted family members or friends. List several people in case your first choices are not available.

Name	Contact Info

STEP 4: Seek Help from Professionals

If your problem persists, or if you have suicidal thoughts, reach out to your professional support system.

Local emergency number:	
Professional or agency:	
Suicide hotlines in the United States:	1-800-SUICIDE 1-800-273-TALK 1-800-799-4889 (for deaf or hard of hearing)