DELAWARE VALLEY SCHOOL DISTRICT

SECTION: OPERATIONS

TITLE:SUICIDE AWARENESS,
PREVENTION AND RESPONSEADOPTED:OCTOBER 22, 2015

REVISED: SEPTEMBER 15, 2015

		823. SUICIDE AWARENESS, PREVENTION AND RESPONSE
1.	Purpose SC 1526 Pol. 103.1, 248, 249, 806	The Board is committed to protecting the health, safety and welfare of its students and school community. This policy supports federal, state and local efforts to provide education on youth suicide awareness and prevention; establish methods of prevention, intervention, and response to suicide or suicide attempt; and to promote access to suicide awareness and prevention resources.
2.	Authority Title 22 Sec. 12.12 Pol. 207, 216, 236	In compliance with state law and regulations, and in support of the district's suicide prevention measures, information received in confidence from a student may be revealed to the student's parents/guardians, the building principal or other appropriate authority when the health, welfare or safety of the student or any other person is deemed to be at risk.
3.	Guidelines	The district shall utilize a multifaceted approach to suicide prevention which integrates school and community-based supports.
	SC 1526	The district shall notify district employees, students and parents/guardians of this policy and shall post the policy on the district's website.
	SC 1526	SUICIDE AWARENESS AND PREVENTION EDUCATION
		Protocols for Administration of Student Education
		Students shall receive age-appropriate education on the importance of safe and healthy choices, coping strategies, how to recognize risk factors and warning signs, as well as help-seeking strategies for self or others including how to engage school resources and refer friends for help.
		Lessons shall contain information on comprehensive health and wellness, including emotional, behavioral and social skills development.

	Protocols for Administration of Employee Education
	All district employees, including but not limited to secretaries, coaches, bus drivers, custodians and cafeteria workers, shall receive information regarding risk factors, warning signs, response procedures, referrals, and resources regarding youth suicide prevention.
SC 1526 Pol. 333	As part of the district's professional development plan, professional educators in school buildings shall participate in four (4) hours of youth suicide awareness and prevention training every five (5) years.
	Additional professional development in risk assessment and crisis intervention shall be provided to guidance counselors, district mental health professionals and school nurses.
	Resources for Parents/Guardians
	The district may provide parents/guardians with resources including, but not limited to, health promotion and suicide risk, including characteristics and warning signs; and information about local behavioral/mental health resources.
SC 1526	METHODS OF PREVENTION
	The methods of prevention utilized by the district include, but are not limited to, early identification and support for students at risk; education for students, staff and parents/guardians; and delegation of responsibility for planning and coordination of
	suicide prevention efforts.
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Early Identification Procedures
Early identification of individuals with one (1) or more suicidal risk factors or of individuals exhibiting warning signs, is crucial to the district's suicide prevention efforts. To promote awareness, district employees, students and parents/guardians should be educated about suicidal risk factors and warning signs.
Risk factors refer to personal or environmental characteristics that are associated with suicide including, but not limited to:
Behavioral Health Issues/Disorders:
- Depression.
- Substance abuse or dependence.
- Previous suicide attempts.
- Self injury.
Personal Characteristics:
- Hopelessness/Low self-esteem.
- Loneliness/Social alienation/isolation/lack of belonging.
- Poor problem-solving or coping skills.
- Impulsivity/Risk-taking/recklessness.
Adverse/Stressful Life Circumstances:
- Interpersonal difficulties or losses.
- Disciplinary or legal problems.
- Bullying (victim or perpetrator).
- School or work issues.
- Physical, sexual or psychological abuse.
- Exposure to peer suicide.

	Family Characteristics:
	- Family history of suicide or suicidal behavior.
	- Family mental health problems.
	- Divorce/Death of parent/guardian.
	- Parental-Child relationship.
	Warning signs are indications that someone may be in danger of suicide, either immediately or in the near future. Warning signs include, but are not limited to:
	• Expressions such as hopelessness, rage, anger, seeking revenge, feeling trapped, anxiety, agitation, no reason to live or sense of purpose.
	• Recklessness or risky behavior.
	• Increased alcohol or drug use.
	• Withdrawal from friends, family, or society.
	• Dramatic mood changes.
	Referral Procedures
	Any district employee who has identified a student with one (1) or more risk factors or who has an indication that a student may be contemplating suicide, shall refer the student for further assessment and intervention.
	Documentation
	The district shall document the reasons for referral, including specific warning signs and risk factors identified as indications that the student may be at risk.
SC 1526	METHODS OF INTERVENTION
	The district shall provide interventions, including but not limited to the development of mental health safety plans, for students identified as being at increased risk of suicide. Additional interventions will be utilized in response to threats of suicide, suicide attempts both inside and outside of school, and completed suicides.
	Procedures for Students at Risk

	A district-approved suicide assessment instrument may be used by trained mental health staff such as counselors, psychologists, social workers.
Pol. 806	Parents/Guardians of a student identified as being at risk of suicide shall be notified by the school. If the school suspects that the student's risk status is the result of abuse or neglect, school staff shall immediately notify ChildLine.
	The district shall identify mental health service providers to whom students can be referred for further assessment and assistance.
	Mental health service providers – may include, but not be limited to, hospital emergency departments, psychiatric hospitals, community mental health centers, psychiatrists, psychologists, social workers, and primary care providers.
	The district shall create an emotional or mental health safety plan to support a student and the student's family if the student has been identified as being at increased risk of suicide.
	Students With Disabilities
Pol. 103.1, 113, 113.2, 113.3, 114	For students with disabilities who are identified as being at risk for suicide or who attempt suicide, the appropriate team shall be notified and shall address the student's needs in accordance with applicable law, regulations and Board policy.
Pol. 103.1, 113, 113.2, 113.3, 114	If a student is identified as being at risk for suicide or attempts suicide and the student may require special education services or accommodations, the Director of Special Education shall be notified and shall take action to address the student's needs in accordance with applicable law, regulations and Board policy.
	Documentation
	The district shall document observations, recommendations and actions conducted throughout the intervention and assessment process including verbal and written communications with students, parents/guardians and mental health service providers.
SC 1526	METHODS OF RESPONSE TO SUICIDE OR SUICIDE ATTEMPT
	The methods of response to a suicide or a suicide attempt utilized by the district include, but are not limited to:
	1. Identifying and training the school crisis response/crisis intervention team.
	2. Determining the roles and responsibilities of each crisis response team member.

	3. Notifying students, employees and parents/guardians.
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	4. Working with families.
	5. Responding appropriately to the media.
	6. Collaborating with community providers.
	The Superintendent or designee shall develop administrative regulations with recommended guidelines for responding to a suicidal act or attempt on school grounds or during a school-sponsored event.
	Re-Entry Procedures
Pol. 103.1, 113, 113.2, 113.3, 117, 204	A student's excusal from school attendance after a mental health crisis and the student's return to school shall be consistent with state and federal laws and regulations.
	A district-employed mental health professional, the building principal or suicide prevention coordinator shall meet with the parents/guardians of a student returning to school after a mental health crisis, and, if appropriate, meet with the student to discuss re-entry and applicable next steps to ensure the student's readiness to return to school.
	When authorized by the student's parent/guardian, the designated district employee shall coordinate with the appropriate outside mental health care providers.
SC 1526	REPORT PROCEDURES
	Effective documentation assists in preserving the safety of the student and ensuring communication among school staff, parents/guardians and mental health service providers.
	When a district employee takes notes on any conversations or situations involving or relating to an at-risk student, the notes should contain only factual or directly observed information, not opinions or hearsay.
	As stated in this policy, district employees shall be responsible for effective documentation of incidents involving suicide prevention, intervention and response.
	The suicide prevention coordinator shall provide the Superintendent with a copy of all reports and documentation regarding the at-risk student. Information and reports shall be provided, as appropriate, to guidance counselors, district mental health professionals and school nurses.

SC 1526	SUICIDE AWARENESS AND PREVENTION RESOURCES
	A listing of resources regarding suicide awareness and prevention shall be attached to this policy.
	References:
	School Code – 24 P.S. Sec. 1526
	State Board of Education Regulations – 22 PA Code Sec. 12.12
	Board Policy – 103.1, 113, 113.2, 113.3, 114, 117, 146, 204, 207, 216, 236, 248, 249, 333, 805, 806