

Superintendent Procedure 2145SP

Suicide Prevention

Approved by: s/Larry Nyland Date: 9/27/16

Dr. Larry Nyland, Superintendent



Per Policy No. 2145, the Seattle School Board recognizes that suicide is a leading cause of death among youth and suicidal indicators, such as substance abuse and violence, are complex issues that should be taken seriously. The following procedures describe the district's plan for recognizing, screening, referring, and responding to students in emotional or behavioral distress.

A. Prevention

Suicide prevention strategies may include, but are not limited to, efforts to promote a positive school climate that enhances students' feelings of belonging to the school community and with each other, and is characterized by caring staff and harmonious interrelationships among students.

1. District Responsibility

The district health education program will promote the healthy mental, emotional, and social development of students including, but not limited to, the development of problem-solving skills, coping skills and self-esteem. Developmentally appropriate suicide prevention instruction will be incorporated into the health education curriculum and designed to help students and will:

- a. Identify and analyze signs of depression and self-destructive behaviors and understand how feelings of depression, loss, isolation, inadequacy and anxiety can lead to thoughts of suicide;
- b. Identify alternatives to suicide and develop coping and resiliency skills;
- c. Learn to listen, share feelings and get help when communicating with friends who show signs of suicidal intent; and
- d. Identify trusted adults, school resources, and/or community crisis intervention resources where youth can get help and recognize there is no stigma associated with seeking mental health, substance abuse and/or suicide prevention services.

2. School Responsibility

Each school principal shall designate a school staff member to act as a point of contact in each school for issues relating to suicide prevention and policy implementation. This may be an existing staff person. All staff members shall report students they believe to be at an elevated risk for suicide to the designated staff member.

School administrative teams will designate specific individuals to be promptly contacted regarding a suicide threat including the school counselor, psychologist, nurse, the student's parent/guardian and, as necessary, local law enforcement or mental health agencies.

3. Student Responsibility

The district will encourage students to notify a teacher, principal, counselor or other adult when they are experiencing depression or thoughts of suicide or when they suspect or have knowledge of another student's despair or suicidal intentions.

4. Staff Training

Annually, staff will participate in the district's suicide prevention training which will help staff identify and respond to students at risk of suicide. The training may include information on:

- a. Identifying risk factors such as previous suicide attempts, history of depression or mental illness, substance use problems, bullying and harassment, family history of suicide or violence, feelings of isolation, interpersonal conflicts, a recent severe stressor or loss, family instability, sexual abuse and other factors;
- b. Warning signs that may indicate suicidal intentions, including changes in students' appearance, personality or behavior;
- c. School and community resources/services; and
- d. District procedures for intervening when a student attempts, threatens, or discloses the desire to commit suicide or displays other indicators.

Superintendent Procedure Nos. 3208, Sexual Harassment, and 3421, Child Abuse, Neglect and Exploitation, provide guidance for staff on how to respond to allegations of sexual harassment or abuse.

B. Intervention

Whenever a staff member suspects or has knowledge of a student's suicidal intentions he/she will take proper steps to support the student, promptly notify the principal or designee who will request that appropriate school staff conduct an initial assessment. Consultation is available through the district's Safety and Security office.

The principal or designee will then notify the student's parents/guardians as soon as possible, unless notification of the parents/guardians will jeopardize the student's safety. The district may also refer the student to mental health resources in the community.

Additionally, the principal or designee will ensure the student's physical safety by one of the following as appropriate:

1. Secure immediate medical treatment if a suicide attempt has occurred;
2. Secure emergency assistance if a suicidal act is being actively threatened and call the Safety & Security Office, Security Specialist, and/or the police;
3. Keep the student under continuous adult supervision until the parent/guardian and/or appropriate support staff or agency can be contacted and has the opportunity to intervene;
4. Document the incident and disposition in writing as soon as feasible;
5. Follow-up with the parent/guardian and student, in a timely manner, to provide referrals to appropriate services as needed;
6. Provide access to counselors or other appropriate personnel to listen to and support students and staff who are directly or indirectly involved with the incident; or
7. Provide an opportunity for all who respond to the incident to debrief, evaluate the effectiveness of the strategies used and make recommendations for future actions.
8. School administrative teams will develop a reentry plan, including a student/staff support plan, for use after a suicide attempt.

C. Parent Responsibility

If a student is determined to be at risk, the principal or designee will contact the parent/guardian and:

1. Ask the parent/guardian whether he or she is aware of the student's mental state;
2. Ask the parent/guardian how he/she will obtain mental counseling or appropriate support for the student;
3. Provide names of community counseling resources, if appropriate, and offer to facilitate the referral;
4. Determine as necessary, with the parents/guardians a method of transport for the student; and
5. Discuss the student's reentry into school so that a plan may be formalized.

D. Post-Event

In the event that a suicide is attempted, the principal or designee will follow the crisis intervention procedures contained in the school safety plan.

In the event a suicide occurs, after consultation with the Principal or designee and the student's parents/guardians about facts that may be divulged in accordance with the laws governing confidentiality of student record information,

the principal or designee may provide students, parents/guardians, and staff with information, counseling and/or referrals to community agencies as needed.

School administrators may receive assistance from school counselors or other mental health professionals in determining how best to discuss the suicide with students and staff.

Following a suicide, the district will also assess the impact within all schools and the local community and provide appropriate information and support.

E. Communications

The district's suicide prevention policy and procedure and the crisis intervention manual will be available for all staff, students, and community through the student, staff, volunteer, and parent/guardian handbooks, on the district's website, and in school and district offices.

Requests for specific information regarding an incident will be directed to the building principal or designee.

F. Resources

The district will utilize school counselors, the crisis telephone hotline, physician/health care providers, mental health specialists, coaches, and youth leaders, parents, and as resources for prevention and intervention. The district will also develop partnerships with community organizations and agencies and a memorandum of understanding with at least one of these programs for referral of students to support services. Community resources include:

1. Prevention Resources:

- a. Washington Youth Suicide Prevention Program,
www.yspp.org, 206-297-5922;
- b. Washington State Department of Health,
www.doh.wa.gov/preventsuicide; 360-236-2800;
- c. Forefronts – Innovations in Suicide Prevention,
<http://inthe forefront.org>; 206-543-1016

2. Crisis Response Resources:

- a. Emergency Response: 911
- b. Local Crisis Hotline: 1-866-4-CRISIS or 206-461-3222
Crisis Clinic of King County
The Children's Crisis Outreach Response System (CCORS)
- c. National Suicide Prevention LifeLine: 1-800-273-8255
- d. The Trevor Project: 1-866-488-7386

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Cross Reference: Policy No. 2140, Policy No. 2145, Policy No. 3207, Policy No. 3418, 3208SP, 3421SP