LINCOLN PARK PERFORMING ARTS CHARTER SCHOOL

SECTION: PUPILS

TITLE: SUICIDE AWARENESS, PREVENTION, AND RESPONSE

ADOPTED: MARCH 14TH, 2017

249. SUICIDE AWARENESS, PREVENTION AND RESPONSE

1.Purpose SC 1526

The School and its Board of Trustees are 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 prevention; establish methods of prevention, intervention, response to suicide or suicide attempt and reporting procedures; and to promote access to suicide awareness and prevention resources.

This policy shall apply in any situation where a student is expressing suicidal thoughts or intentions of self-harm on school property, at any school-sponsored activity, or on any public vehicle providing transportation to or from a school or school-sponsored activity. This policy shall also apply following a student's suicide threat or attempt that does not occur on school grounds or during a school-sponsored activity, but that is reported to any school personnel.

2.Authority Title 22 Pa. Code Sec. 12.12

In compliance with state law and regulations, and in support of the School's suicide prevention measures, information received in confidence from a student may be revealed to the student's parents/guardians, the school principal, school C.E.O, or other appropriate authority when the health, welfare or safety of the student or any other person is deemed to be at risk.

3. Publication

Publication of Policy

The school will notify its school personnel, age-appropriate students and all parents/guardians of this policy and will post the policy on the School website.

4. Definition

At-Risk for Suicide shall mean any youth with risk factors or warning signs that increase the likelihood of suicidal behavior.

Crisis Response Team shall include, but may not be limited to, the administrators, guidance counselors, the school nurse, social worker, school psychologist and school resource officers, and/or other members of the Student Assistance Program (SAP), as designated and may include other members as deemed appropriate by the Superintendent. Community mental agency resources may be called for assistance to be a part of the team.

Expressed Suicidal Thoughts or Intentions shall mean a verbal or nonverbal communication that an individual intends to harm him/herself with the intention to die, but has not acted on the behavior.

Prevention refers to efforts that seek to reduce the factors that increase the risk for suicidal thoughts and behaviors and increase the factors that help strengthen, support, and protect individuals from suicide.

Protective Factors shall refer to characteristics (biological, psychological, and social) that reduce risk and the likelihood of the individual developing a mental illness.

Resilience shall refer to an individual's innate ability to persevere in the face of adversity and reduce the risk of unhealthy outcomes.

Risk Factors shall mean the personal or environmental characteristics associated with suicide. People affected by one or more of these risk factors have a great probability of suicidal behavior.

School Connectedness shall mean the belief by students that adults and peers in the school care about their learning as well as about them as individuals.

School Personnel include, but may not be limited to, administrators, teachers, paraprofessionals, support staff, coaches, custodians, and cafeteria workers.

Suicide shall refer to death caused by self-directed injurious behavior with any intent to die as a result of the behavior.

Suicidal Act or Suicide Attempt shall mean a potentially self-injurious behavior for which there is evidence that the person probably intended to kill him/herself; a suicidal act may result in death, injuries, or no injuries.

Warning Signs are evidence-based indicators that someone may be in danger or suicide, either immediately or in the very near future.

The School shall utilize a multifaceted approach to suicide prevention which integrates school and community-based supports.

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.

5. Guidelines SC 1526

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Protocols for Administration of Employee Education

All School employees, including but not limited to secretaries, coaches, custodians and cafeteria workers, shall receive information regarding risk factors, warning signs, response procedures, referrals, and resources regarding youth suicide prevention. In addition, education on ways to enhance students' protective factors, build resilience and increase school connectedness will be provided. SC 1526

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As part of the School's professional development plan, professional educators in school buildings serving students in grades seven (7) through twelve (12) 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, school mental health professionals and school nurses.

Resources for Parents/Guardians

The School 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.

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METHODS OF PREVENTION

The methods of prevention utilized by the School 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.

Suicide Prevention Coordinators

School-Wide -

A School-wide suicide prevention coordinator shall be designated by the C.E.O. This may be an existing School employee. The School suicide prevention coordinator will be responsible for planning and coordinating implementation of this policy.

School Building -

The principal may designate a school suicide prevention coordinator to act as a point of contact in the school for issues relating to suicide prevention and policy implementation. This shall be an existing School employee.

The school's student assistance program team will act as the crisis response team.

The School shall establish a crisis response team(s). The crisis response team(s) shall include, but is not limited to, administrators, guidance counselors, the school nurse, social worker, school psychologist, and/or teachers and other members of the school's Student Assistance Program team. (Community mental agency resources may also be called for assistance, but a letter of agreement between the School and any community provider(s) is encouraged prior to commencement of any crisis response or postvention services.)

The crisis response team(s) should also include individuals designated as coordinators and/or investigators on cases involving peer-to-peer harassment, as required under federal law. These individuals will help identify overlapping risk factors, including hostile environments created by persistent or severe harassment on the basis of gender, race, disability, or other protected classes.

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 School's suicide prevention efforts. To promote awareness, School 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 School 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 School shall document the reasons for referral, including specific warning signs and risk factors identified as indications that the student may be at risk.

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METHODS OF INTERVENTION

The methods of intervention utilized by the School include, but are not limited to, responding to suicide threats, suicide attempts in school, suicide attempts outside of school, and completed suicide. Suicide intervention procedures shall address the development of an emotional or mental health safety plan for students identified as being at increased risk of suicide.

Procedures for Students at Risk

Parent or guardian of a student identified as being at risk of suicide shall be immediately notified by the school and shall be involved in consequent actions. If a mandated reporter has reasonable cause to suspect that a student's risk status is the result of abuse or neglect, that individual must comply with the reporting requirements of the Child Protective Services Law.

If the parent or guardian refuse to cooperate and there is any doubt regarding the child's safety, the school personnel who directly witnessed the expressed suicide thought or intention will pursue a 302 involuntary mental health assessment by calling Center for Community Resources, Inc. at the 24 hour Crisis Hotline 1-800-292-3866. If a 302 involuntary mental health assessment is granted, the first-hand witness will need to be the petitioner, with support from the principal or other central office administrator.

The School shall identify mental health service providers to whom students and parents/guardians 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 School 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

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.

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 School 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.

The C.E.O. or designee shall develop administrative regulations providing recommended guidelines for responding to a suicide threat.

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METHODS OF RESPONSE TO SUICIDE OR SUICIDE ATTEMPT

The methods of response to a suicide or a suicide attempt utilized by the School 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.
- 4. Working with families.
- 5. Responding appropriately to the media.
- 6. Collaborating with community providers.

The C.E.O. 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

Excusing a student 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.

The School's psychologist, the 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 reentry and, of applicable next steps to ensure the student's readiness to return to school. When authorized by the student's parent/guardian, the designated School employee shall coordinate with the appropriate outside mental health care providers.

The designated School employee will periodically check in, as needed, with the student to facilitate the transition back into the school community and address any concerns.

REPORT PROCEDURES

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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 School 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, School employees shall be responsible for effective documentation of incidents involving potential suicide prevention, intervention and response. All notes and reports involving potential suicide prevention, intervention and response shall immediately be provided to the suicide prevention coordinator and the School suicide coordinator.

The School's suicide prevention coordinator shall provide the C.E.O. with a copy of all reports and documentation regarding the at-risk student. Information and reports shall be provided, as appropriate, to guidance counselors, School mental health professionals and school nurses.

SUICIDE AWARENESS AND PREVENTION RESOURCES

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A listing of resources regarding suicide awareness and prevention shall be attached to this policy and regularly updated and posted on the website.

References:

School Code - 24 P.S. Sec. 15-1526

State Board of Education Regulations – 22 Pa. Code 12.12