

# YouthBuild Charter School of California

## Youth Suicide Prevention Policy

### Introduction

California *Education Code (EC)* Section 215, as added by Assembly Bill 2246, (Chapter 642, Statutes of 2016) mandates that the Governing Board of any local educational agency (LEA) that serves pupils in grades seven to twelve, inclusive, adopt a policy on pupil suicide prevention, intervention, and postvention. The policy shall specifically address the needs of high-risk groups, including suicide awareness and prevention training for teachers, and ensure that a school employee acts within the authorization and scope of the employee's credential or license.

YouthBuild Charter School of California (YCSC) recognizes that suicide is a leading cause of death among youth and that an even greater amount of youth consider (17 percent of high school students) and attempt suicide (over 8 percent of high school students) (Centers for Disease Control and Prevention, 2015).

The possibility of suicide and suicidal ideation requires vigilant attention from our school staff. As a result, we are ethically and legally responsible for providing an appropriate and timely response in preventing suicidal ideation, attempts, and deaths. We also must work to create a safe and nurturing campus that minimizes suicidal ideation in students.

Recognizing that it is the duty of the district and schools to protect the health, safety, and welfare of its students, this policy aims to safeguard students and staff against suicide attempts, deaths and other trauma associated with suicide, including ensuring adequate supports for students, staff, and families affected by suicide attempts and loss. As it is known that the emotional wellness of students greatly impacts school attendance and educational success, this policy shall be paired with other policies that support the emotional and behavioral wellness of students.

This policy is based on research and best practices in suicide prevention, and has been adopted with the understanding that suicide prevention activities decrease suicide risk,

increase help-seeking behavior, identify those at risk of suicide, and decrease suicidal behaviors. Empirical evidence refutes a common belief that talking about suicide can increase risk or “place the idea in someone’s mind.”

In an attempt to reduce suicidal behavior and its impact on students and families, YouthBuild Charter School of California strategies for suicide prevention, intervention, and postvention, and the identification of the mental health challenges frequently associated with suicidal thinking and behavior. These strategies shall include professional development for all school personnel in all job categories who regularly interact with students or are in a position to recognize the risk factors and warning signs of suicide.

## Overall Strategic Plan for Suicide Prevention

YouthBuild Charter School has involved school-employed mental health professionals, school counselors, teachers, administrators, students, local health agencies and professionals, and community organizations in planning, implementing, and evaluating the district’s strategies for suicide prevention and intervention. YouthBuild Charter School has worked in conjunction with local government agencies, community-based organizations, and other community supports to identify additional resources. YCSC has coordinated three separate training sessions.

To ensure the policies regarding suicide prevention are properly adopted, implemented, and updated, the district has appointed the a Suicide Task Force to serve as the suicide prevention point of contact for the district. In addition, the school has identified least one staff member to serve as the liaison to the district’s suicide prevention point of contact, and coordinate and implement suicide prevention, intervention, and postvention activities across all YCSC sites. This policy shall be reviewed and revised as indicated, at least annually in conjunction with the previously mentioned community stakeholders.

## Prevention

### **A. Messaging about Suicide Prevention**

Messaging about suicide has an effect on suicidal thinking and behaviors. YCSC, along with its partners have critically reviewed and will continue to review all materials and resources used in awareness efforts to ensure they align with best practices for safe messaging about suicide.

## **B. Suicide Prevention Training and Education**

YCSC along with its partners have carefully reviewed available staff training to ensure it promotes the mental health model of suicide prevention and does not encourage the use of the stress model to explain suicide. Training shall be provided for all school staff members, including YCSC partners and will be offered both on campus, and online.

### Training:

- At least annually, all staff shall receive training on the risk factors and warning signs of suicide, suicide prevention, intervention, referral, and postvention. YCSC has selected a specific training for students to be administered by site staff. Specific crisis response training will be offered to the Crisis Response Team (academic counselors & MSW interns) who will be providing more specialized interventions to sites.
- All suicide prevention trainings shall be offered under the direction of the Suicide Task Force (Director & Associate Director of Counseling Services) who have received advanced training specific to suicide and have benefitted from collaboration with one or more county and/or community mental health agencies. Staff training may be adjusted year-to-year based on previous professional development activities and emerging best practices.
- All staff shall participate in training on the core components of suicide prevention (identification of suicide risk factors and warning signs, prevention, intervention, referral, and postvention) at the beginning of their employment. Previously employed staff members shall attend a minimum of one-hour general suicide prevention training. The core components of the general suicide prevention training shall include:
  - Suicide risk factors, warning signs, and protective factors;

- How to talk with a student about thoughts of suicide;
  - How to respond appropriately to the youth who has suicidal thoughts. Such responses shall include constant supervision of any student judged to be at risk for suicide and an immediate referral for a suicide risk assessment.
  - Emphasis on immediately referring (same day) any student who is identified to be at risk of suicide for assessment while staying under constant monitoring by staff member;
  - Emphasis on reducing stigma associated with mental illness and that early prevention and intervention can drastically reduce the risk of suicide;
  - Reviewing the data annually to look for any patterns or trends of the prevalence or occurrence of suicide ideation, attempts, or death. Data from the California School Climate, Health, and Learning Survey (Cal-SCHLS) should also be analyzed to identify school climate deficits and drive program development. See the Cal-SCHLS Web site at <http://cal-schls.wested.org/>.
- In addition to initial orientations to the core components of suicide prevention, ongoing annual staff professional development for all staff should include the following components:
- The impact of traumatic stress on emotional and mental health;
  - Common misconceptions about suicide;
  - School and community suicide prevention resources; Social Media Suicide Prevention
  - Appropriate messaging about suicide (correct terminology, safe messaging guidelines); Support on Social Media : Lifeline
  - The factors associated with suicide (risk factors, warning signs, protective factors);

- How to identify youth who may be at risk of suicide;
  - Appropriate ways to interact with a youth who is demonstrating emotional distress or is suicidal. Specifically, how to talk with a student about their thoughts of suicide and (based on district guidelines) how to respond to such thinking; how to talk with a student about thoughts of suicide and appropriately respond and provide support based on district guidelines;
  - District-approved procedures for responding to suicide risk (including multi-tiered systems of support and referrals). Such procedures should emphasize that the suicidal student should be constantly supervised until a suicide risk assessment is completed;
  - District-approved procedures for responding to the aftermath of suicidal behavior (suicidal behavior postvention);
  - Responding after a suicide occurs (suicide postvention);
  - Resources regarding youth suicide prevention;
  - Emphasis on stigma reduction and the fact that early prevention and intervention can drastically reduce the risk of suicide;
  - Emphasis that any student who is identified to be at risk of suicide is to be immediately referred (same day) for assessment while being constantly monitored by a staff member.
- The professional development also shall include additional information regarding groups of students judged by the school, and available research, to be at elevated risk for suicide. These groups include, but are not limited to, the following:
- Youth affected by suicide;
  - Youth with a history of suicide ideation or attempts;
  - Youth with disabilities, mental illness, or substance abuse disorders;

- Lesbian, gay, bisexual, transgender, or questioning youth;
- Youth experiencing homelessness or in out-of-home settings, such as foster care;
- Youth who have suffered traumatic experiences;

### **C. Employee Qualifications and Scope of Services**

Employees of YCSC and their partners must act only within the authorization and scope of their credential or license. While it is expected that school professionals are able to identify suicide risk factors and warning signs, and to prevent the immediate risk of a suicidal behavior, treatment of suicidal ideation is typically beyond the scope of services offered in the school setting. In addition, treatment of the mental health challenges often associated with suicidal thinking typically requires mental health resources beyond what schools are able to provide.

### **D. Specialized Staff Training (Assessment)**

Additional professional development in suicide risk assessment and crisis intervention shall be provided to the Crisis Response Team (MSW interns & academic counselors) employed by YCSC. All staff will receive training as to how to refer young people to the Crisis Response Team within YCSC. The CRT referral process is found in Appendix G.

### **E. Parents, Guardians, and Caregivers Participation and Education**

- YCSC will also provide take home information in pamphlet form as needed to parents, and will make the Directing Change training available to parents.
- This suicide prevention policy shall be prominently displayed on the YCSC Web page and included in the parent handbook.

- Parents/guardians/caregivers should be invited to provide input on the development and implementation of this policy.
- All parents/guardians/caregivers should have access to suicide prevention training that addresses the following:
  - Suicide risk factors, warning signs, and protective factors;
  - How to talk with a student about thoughts of suicide;
  - How to respond appropriately to the student who has suicidal thoughts. Such responses shall include constant supervision of any student judged to be at risk for suicide and referral for an immediate suicide risk assessment.

## Resources:

### [Parent Education Pamphlets](#)

- Tips on how to notify parents, and involve parents in the assessment and safety planning process are found in Appendix D.

## **F. Student Participation and Education**

YCSC along with its partners has carefully reviewed available student curricula to ensure it promotes the mental health model of suicide prevention. Under the supervision of the Suicide Task Force, YCSC has provided a student-focused suicide prevention education lesson plan that can be incorporated into classroom curricula (mental toughness, orientation, group counseling setting).

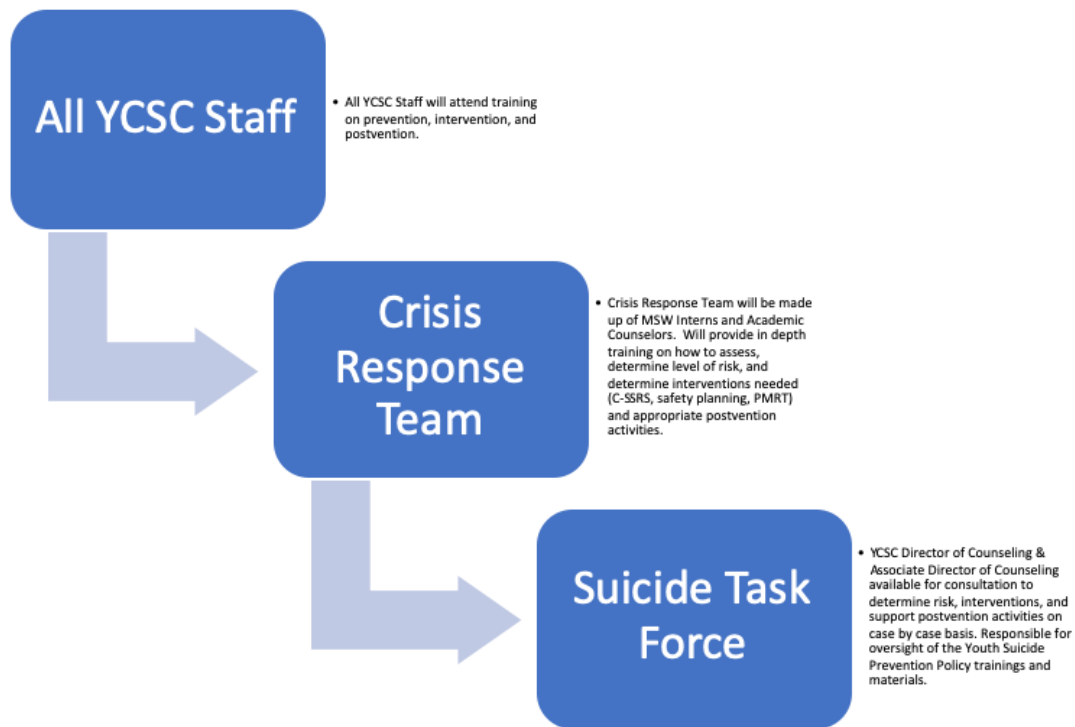
YCSC will support the creation and implementation of programs and/or activities on campus that raise awareness about mental wellness and suicide prevention and following consultation with county and community mental health agencies, students shall:

- Receive developmentally appropriate, student-centered education about the warning signs of mental health challenges and emotional distress;

- Receive developmentally appropriate guidance regarding the district's suicide prevention, intervention, and referral procedures.
- The content of the education shall include:
  - Coping strategies for dealing with stress and trauma;
  - How to recognize behaviors (warning signs) and life issues (risk factors) associated with suicide and mental health issues in oneself and others;
  - Help-seeking strategies for oneself and others, including how to engage school-based and community resources and refer peers for help;
  - Emphasis on reducing the stigma associated with mental illness and the fact that early prevention and intervention can drastically reduce the risk of suicide.



## Intervention, Assessment, Referral



### A. Staff

YCSC Suicide Task Force members (Director & Associate Director of Counseling Services) who have received advanced training in suicide intervention shall be designated as the primary suicide prevention liaisons. Whenever a staff member suspects or has knowledge of a student's suicidal intentions, they shall promptly notify the site's Crisis Response Team members (YCSC Academic Counselors & MSW Interns) (See Appendix G). The Crisis Response Team member then determines next steps after conducting an assessment of the situation. At least annually, the Crisis Response Team shall receive the Crisis Response Training. This training will provide the team with skills for the assessment, intervention, and postvention elements.

- Under normal circumstances, the primary and/or secondary contact persons shall notify the principal, another school administrator, school

psychologist or school counselor, if different from the primary and secondary contact persons. The names, titles, and contact information of Suicide Task Force and Crisis Response Team shall be distributed to all students, staff, parents/guardians/caregivers and be prominently available on school and district Web sites.

- Whenever a staff member suspects or has knowledge of a student's suicidal intentions, they shall promptly notify the on site members of the Crisis Response Team (see Appendix G). The CRT will complete the C-SSRS form and determine level of risk (Appendix A). If student is expressing safety concerns during distance learning the Remote Suicide Risk Assessment (Appendix A) .

### **Crisis Response Team steps:**

**If student is in imminent danger** (*The student is actively harming self or others, is making aggressive gestures, or active threats*)

Notify Director/Counselor/Preceptor

Call 911 (Appendix B)

**If risk is high and student is calm and not in imminent danger:**

Notify Director/Counselor/Preceptor

Call YCSC Suicide Task Force

Call PMRT (800) 854.7771

**If risk is moderate:**

Notify Director/Counselor/Preceptor

Call YCSC Suicide Task Force

Develop safety plan (Appendix C)

### **Important Considerations**

- Students experiencing suicidal ideation shall not be left unsupervised.
- A referral process (Appendix G) be prominently disseminated to all staff members, so they know how to respond to a crisis and are knowledgeable about the school and community-based resources.

## **B. Parents, Guardians, and Caregivers**

All procedures will be shared with parents/guardians/caregivers in the event that the student is a minor (Appendix D).

## **C. Students**

There will be clear messaging and training for students to understand the steps they need to take when they are experiencing emotional distress or suicidal ideation, or when they suspect or have knowledge of another student's emotional distress, suicidal ideation, or attempt.

## **D. Parental Notification and Involvement**

YCSC has notified parents of student involvement in counseling services.

If a student is a minor the parent will be notified if: they are at risk of suicide, a safety plan is created, a referral is made, a risk assessment is conducted, or there are any concerns regarding the safety of the student.

Important Considerations:

- After a referral is made for a student, school staff shall verify with the parent/guardian/caregiver that follow-up treatment has been accessed. Parents/guardians/caregivers will be required to provide documentation of care for the student.
- If parents/guardians/caregivers refuse or neglect to access treatment for a student who has been identified to be at-risk for suicide or in emotional distress, the suicide point of contact (or other appropriate school staff member) will meet with the parents/guardians/caregivers to identify barriers to treatment (e.g., cultural stigma, financial issues) and work to rectify the situation and build understanding of the importance of care. If follow-up care for the student is still not provided, school staff should consider contacting Department of Children and Family Services (DCFS) to report neglect of the youth.

# Postvention

## **A: Action Plan for In-School Suicide Attempts**

If a suicide attempt is made during the school day on campus, it is important to remember that the health and safety of the student and those around him/her is critical. The following steps should be implemented:

- Remain calm, remember the student is overwhelmed, confused, and emotionally distressed;
- Move all other students out of the immediate area
- Call 911 and give them as much information about any suicide note, medications taken, and access to weapons, if applicable.
- Notify on campus administrators, Crisis Response Team & Suicide Task Force
- If needed, provide medical first aid until a medical professional is available;
- If student is a minor: Parents/guardians/caregivers should be contacted as soon as possible (Appendix D). If student is an adult: call emergency contact.
- Do not send the student away or leave them alone, even if they need to go to the restroom;
- Listen and prompt the student to talk;
- Review options and resources of people who can help;
- Be comfortable with moments of silence as you and the student will need time to process the situation;
- Provide comfort to the student;

- Promise privacy and help, and be respectful, but do not promise confidentiality;
- Student should only be released to parents/guardians/caregivers or to a person who is qualified and trained to provide help.

## **B. Action Plan for Out-of-School Suicide Attempts**

If a suicide attempt by a student is outside of YCSC or Partner Agency property. The following steps should be implemented:

- Contact the parents/guardians/caregivers and offer support to the family if student is minor (Appendix D).
- Discuss with the family how they would like the school to respond to the attempt while minimizing widespread rumors among teachers, staff, and students;
- Obtain permission from the parents/guardians/caregivers to share information to ensure the facts regarding the crisis is correct;
- Designate a staff member to handle media requests;
- Provide care and determine appropriate support to affected students;
- Offer to the student and parents/guardians/caregivers steps for re-integration to school.

## **C. Supporting Students after a Mental Health Crisis**

It is crucial that careful steps are taken to help provide the mental health support for the student and to monitor their actions for any signs of suicide. The following steps should be implemented after the crisis has happened:

- Treat every threat with seriousness and approach with a calm manner; make the student a priority;
- Listen actively and non-judgmental to the student. Let the student express his or her feelings;
- Acknowledge the feelings and do not argue with the student;
- Offer hope and let the student know they are safe and that help is provided. Do not promise confidentiality or cause stress;
- Explain calmly and get the student to a trained professional, guidance counselor, or designated staff to further support the student;
- Keep close contact with the parents/guardians/caregivers and mental health professionals working with the student.

#### **D. Re-Entry to School After a Suicide Attempt**

A student who threatened or attempted suicide is at a higher risk for suicide in the months following the crisis. Having a streamlined and well planned re-entry process ensures the safety and wellbeing of students who have previously attempted suicide and reduces the risk of another attempt. An appropriate re-entry process is an important component of suicide prevention. Involving students in planning for their return to school provides them with a sense of control, personal responsibility, and empowerment.

The following steps shall be implemented upon re-entry:

- Obtain a written release of information signed by parents/guardians/caregivers and providers Release of Information Form (Appendix E) ; This is between the psychiatric hospital and the school.
- Confer with student and parents/guardians/caregivers about any specific requests on how to handle the situation;

- Inform the student's teachers about possible days of absences;
- Allow accommodations for student to make up work (be understanding that missed assignments may add stress to student);
- Mental health professionals or trusted staff members should maintain ongoing contact to monitor student's actions and mood;
- Work with parents/guardians/caregivers to involve the student in an aftercare plan.

Resource:

- The School Reentry for a Student Who Has Attempted Suicide or Made Serious Suicidal Threats is a guide that will assist in school re-entry for students after an attempted suicide. See the Mental Health Recovery Services Resource Web page at [http://www.mhrsonline.org/resources/suicide%5Cattempted\\_suicide\\_resources\\_for\\_schools-9/](http://www.mhrsonline.org/resources/suicide%5Cattempted_suicide_resources_for_schools-9/)

## **E. Responding After a Suicide Death (Postvention)**

A death by suicide in the school community (whether by a student or staff member) can have devastating consequences on students and staff. Therefore, it is vital that we are prepared ahead of time in the event of such a tragedy. The Suicide Task Force for the YCSC shall ensure that each school site adopts an action plan for responding to a suicide death as part of the general Crisis Response Plan. The Suicide Death Response Action Plan (Suicide Postvention Response Plan) needs to incorporate both immediate and long-term steps and objectives.

- Suicide Postvention Response Plan shall:
  - Identify a staff member to confirm death and cause (school site administrator);

- Identify a staff member to contact deceased's family (within 24 hours);
- Enact the Suicide Postvention Response Plan, include an initial meeting of the district/school Suicide Task Force
- Notify all staff members (ideally in-person or via phone, not via e-mail or mass notification).
- Coordinate an all-staff meeting, to include:
  - Notification (if not already conducted) to staff about suicide death;
  - Emotional support and resources available to staff;
  - Notification to students about suicide death and the availability of support services (if this is the protocol that is decided by administration);
  - Share information that is relevant and that which you have permission to disclose.
- Prepare staff to respond to needs of students regarding the following:
  - Review of protocols for referring students for support/assessment;
  - Talking points for staff to notify students;
  - Resources available to students (on and off campus).
- Identify students significantly affected by suicide death and other students at risk of imitative behavior;
- Identify students affected by suicide death but not at risk of imitative behavior;
- Communicate with the larger school community about the suicide death;
- Consider funeral arrangements for family and school community;



- Respond to memorial requests in respectful and non-harmful manner; responses should be handed in a thoughtful way and their impact on other students should be considered;
- Identify media spokesperson skilled to cover the story without the use of explicit, graphic, or dramatic content (Appendix F). Research has proven that sensationalized media coverage can lead to contagious suicidal behaviors.
- Utilize and respond to social media outlets:
  - Identify what platforms students are using to respond to suicide death
  - Identify/train staff and students to monitor social media outlets
- Include long-term suicide postvention responses:
  - Consider important dates (i.e., anniversary of death, deceased birthday, graduation, or other significant event) and how these will be addressed
  - Support siblings, close friends, teachers, and/or students of deceased
  - Consider long-term memorials and how they may impact students who are emotionally vulnerable and at risk of suicide

#### Resources:

- After a Suicide: A Toolkit for School is a comprehensive guide that will assist schools on what to do if a suicide death takes place in the school community. See the Suicide Prevention Resource Center Web page at <http://www.sprc.org/comprehensive-approach/postvention>

**Appendix A:**

[On Site Suicide Assessment Tool](#)  
[Remote Suicide Assessment](#)

**Appendix B:**

[Calling 911](#)

**Appendix C:**

[Safety Plan](#)

**Appendix D:**

[Notifying Parents](#)

**Appendix E:**

[Release of Information Form](#)

**Appendix F:**

[www.reportingonsuicide.org](http://www.reportingonsuicide.org)

**Appendix G:**

[CRT Referral Process](#)