

Delphi Community School Corporation

Suicide Prevention and Response

Policy and Procedures

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****Adapted from**

Suicide Prevention and Response: A Comprehensive Resource Guide for Indiana- 2018

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PURPOSE

Delphi Community School Corporation takes the health and safety of our students very seriously, the purpose of this policy is to have in place procedures to prevent, assess the risk of, intervene in, and respond to suicide threats and completed suicides.

SCOPE

This policy covers actions that take place in the school, on school property, at school sponsored events, on school buses, at bus stops, and at school sponsored activities off of school grounds. This policy applies to the entire school community, including educators, district staff, students, parents/guardians, and volunteers. This policy will also cover appropriate school responses to suicidal or high risk behaviors that take place outside of the school environment.

The DCSC Suicide Prevention and Response Policy and Procedures includes the steps set in place by NEOLA Policy 5350:

1. Stabilization
2. Assess the Risk
3. Take Appropriate Action
4. Communicate
5. Follow-Up

DEFINITIONS USED IN POLICY

At-Risk	A student who is defined as high risk for suicide is one who has made a previous suicide attempt, has the intent to die by suicide, or has displayed a significant change in behavior suggesting the onset or deterioration of a mental health condition. The student may have thought about suicide including potential means of death and may have a plan.
Suicide Prevention Crisis Team (SPCT)	A multidisciplinary team comprised primarily of administration, mental health professionals, and other support staff whose primary focus is to address crisis preparedness, intervention, response and recovery, in suicide related situations. These professionals have been specifically trained in suicide intervention and crisis preparedness, and take the leadership role in developing crisis plans, ensuring school staff can effectively execute crisis protocols, and may provide mental health services for effective crisis interventions and recovery supports.
Mental Health	A state of mental and emotional wellbeing that can impact choices, actions, and relationships that affect wellness.
Suicide Postvention	A crisis intervention strategy designed to reduce the risk of suicide and suicide contagion, by providing the support needed to help survivors cope with a suicide death, address the social stigma associated with suicide, and disseminate factual information after the suicide death of a member of the school community.
Risk Determination/ Assessment	An evaluation of a student who may be at risk for suicide, conducted by the appropriate school staff (e.g., school psychologist, school counselor, or school social worker). This assessment is designed to elicit information regarding the student's intent to die by suicide, previous history of suicide attempts, presence of a suicide plan and its lethality and availability, and presence of support systems.
Risk Factors for Suicide	Characteristics or conditions that increase the chance that a person may try to take their life. Suicide risk tends to be highest when someone has several risk factors at the same time. Risk factors may encompass biological, psychological, and/or social factors in the individual, family, and environment.
Self-harm	Behavior that is self-directed and deliberately results in injury or the potential for injury to oneself. It can be categorized as either nonsuicidal self-injury or suicidal. Although self-harm often lacks suicidal intent, youth who engage in self-harm are more likely to attempt suicide.
Suicidal Ideation	Thinking about, considering, or planning for self-injurious behavior which may result in death. A desire to be dead without a plan or intent to end one's life is still considered suicidal ideation and should be taken seriously.
Suicidal Behavior	These behaviors include suicide attempts, intentional injury to self associated with at least some level of intent, developing a plan for suicide, writing a suicide note, gathering the means for a suicide plan, or any other overt action or thought indicating intent to end one's life.

Suicide Attempt	A self-injurious behavior for which there is evidence that the person had at least intent to kill themselves. A suicide attempt may result in death, injuries, or no injuries. A mixture of ambivalent feelings such as wish to die and desire to live is a common experience with most suicide attempts. Therefore, ambivalence is not a sign of a less serious or less dangerous suicide attempt.
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SUICIDE RISK FACTORS

Students may be at risk for suicide attempts if they:

- have displayed a significant change in behavior;
- have made previous suicide attempt(s);
- have the intent to die by suicide;
- have the onset or deterioration of a mental health condition;
- have thoughts about the potential means of death and may have a plan;
- exhibit feelings of isolation, hopelessness, helplessness, and the inability to tolerate any more pain;
- had a parent, guardian or other close family member die by suicide.

SUICIDE WARNING SIGNS

Feelings- Feeling worthless, hopeless, helpless, anxious, worried, angry all the time, hating one's self, feeling ashamed, or fear of losing control.

Actions- Drug or alcohol use, talking or writing about death, aggressive, recklessness or risk-taking behaviors.

Changes- in personality, behavior, sleeping, eating, or loss of interest in things.

Threats- saying things, giving away possessions, preparing a plan or suicide attempts.

Situations- Getting into trouble, recent loss, overwhelming life changes or being exposed to suicide or death.

PREVENTION

District Policy

Indiana Requirements for Youth Suicide Awareness and Prevention
Suicide Prevention Policy (IC 20-26-5-34.4)

Per IC 20-26-5-34.4, school corporations shall adopt a policy addressing measures intended to increase child suicide awareness and prevention. The policy must address the following:

- 1. Counseling services for the child and the child's family related to suicide prevention.*
- 2. Availability of referral information for crisis intervention to children, parents, and school corporation staff.*
- 3. Increasing awareness of the relationship between suicide and drug and alcohol use.*
- 4. Training on warning signs and tendencies that may evidence that a child is considering suicide.*
- 5. Availability of information concerning suicide prevention services in the community.*
- 6. Cooperation among the school corporation and suicide prevention services in the community.*
- 7. Development of a plan to assist survivors of attempted suicide or death of a student or school employee.*
- 8. Development of any other program or activity that is appropriate.*

School Employee Training

Youth Suicide Awareness and Prevention Training (IC 20-28-3-6)

Per IC 20-28-3-6, superintendents, principals, teachers, librarians, school counselors, school psychologists, school nurses, and school social workers employed at schools that provide instruction to students in grades 5-12, are required to participate in at least 2 hours of youth suicide awareness and prevention training every 3 school years. The training must be during the employee's contracted day or at a time chosen by the employee; shall count toward professional development requirements; must be demonstrated to be an effective or promising program and recommended by the Indiana Suicide Prevention Network Advisory Council.

Recommended Training for Student Services Personnel

It is recommended that all School Services members participate in trainings including but not limited to:

- Suicide Risk Assessment
- Safety Planning
- Community Resource Planning
- Postvention

Support for Students

It is recommended that:

- Social and Emotional Wellness is supported through the universal delivery of a Social Emotional Learning Curriculum.
- Health Education classes for all students include content and age appropriate materials related to safety and healthy choices, coping strategies, recognizing warning signs and how to seek help for self or for others.
- The Student Services Department has a current list of community based mental health resources.
- All stakeholders prepare for student re-entry by familiarizing themselves with the student's re-entry plan and monitor the situation to determine if additional support is needed.

Student Services Personnel

- School Counselors, School Social Workers, School Nurse and other appropriate school personnel are available to provide support to students who are victims or alleged victims of bullying, abuse, or neglect.
- School employees should act only within the authorization and scope of their credential or license. Only those employees with counseling expertise and licensure should provide counseling services.

Community Resources

- Community referrals may need to be made as necessary.
- Signed release forms to communicate with community counselors, therapists, physicians, and other professionals.

SUICIDE RESPONSE PROCEDURES

In- School Suicide Attempts

In the case of a suicide attempt, in- school (during school hours or on school property), the student's health and safety is the first priority. Therefore, the school nurse or nurse designee will take the lead with this medical situation.

In such a situation:

1. Staff member should begin First- Aid, the student should NOT BE LEFT ALONE.
2. Staff member should notify the school nurse.
3. Emergency medical assistance should be notified, if needed.
4. Staff member should notify Student Services personnel and School Administration.
5. Witnessing students should be cleared from the area.
6. The school nurse should call the parent/guardian or delegate this task.

7. The school nurse should notify EMS if needed and not done previously.
8. Student Services should engage mental health services for students and staff affected by the attempt.
9. Student Services should engage the Suicide Prevention Crisis Team (SPCT) to assess the need for sharing of info with stakeholders.
10. Release of information should be done by the school administrator or DCSC superintendent, with the exception of the school nurse who will speak with the victims parents and medical staff. In collaboration with administration, student services may notify the parents of witnesses as appropriate.
11. Witnessing Staff members should document all actions taken and submit that documentation via email to Student Services member(s) and administration, as soon as possible.

In- School Suicide *Threats*

In the case of a suicide threat, in -school (during school hours or on school property), the student's health and safety should be prioritized.

1. Staff member should immediately contact the Student Services department in their building, if not available, then contact the administrator in the building.
2. The student should be escorted to or picked up by the student services member or designee (administrator or school nurse).
3. If the Student Services member is not available in the building, a student services person from another DCSC school will be called to come and assist.
4. The student should never be left alone, if the bell rings, the student will not move on to the next class, they will stay with the staff member until a student services, administrator, or school nurse comes to escort them to a safe location.
5. Student services will follow flowchart protocol as listed on page 9.
6. Witnessing Staff members should document all actions taken and submit that documentation via email to Student Services member(s) and administration, as soon as possible.

Out-of-school Suicide *Threats*:

If a staff member becomes aware of a suicide attempt in progress or the threat of a suicide involving a student outside of school hours or are otherwise unable to quickly notify the appropriate school staff, the staff member should:

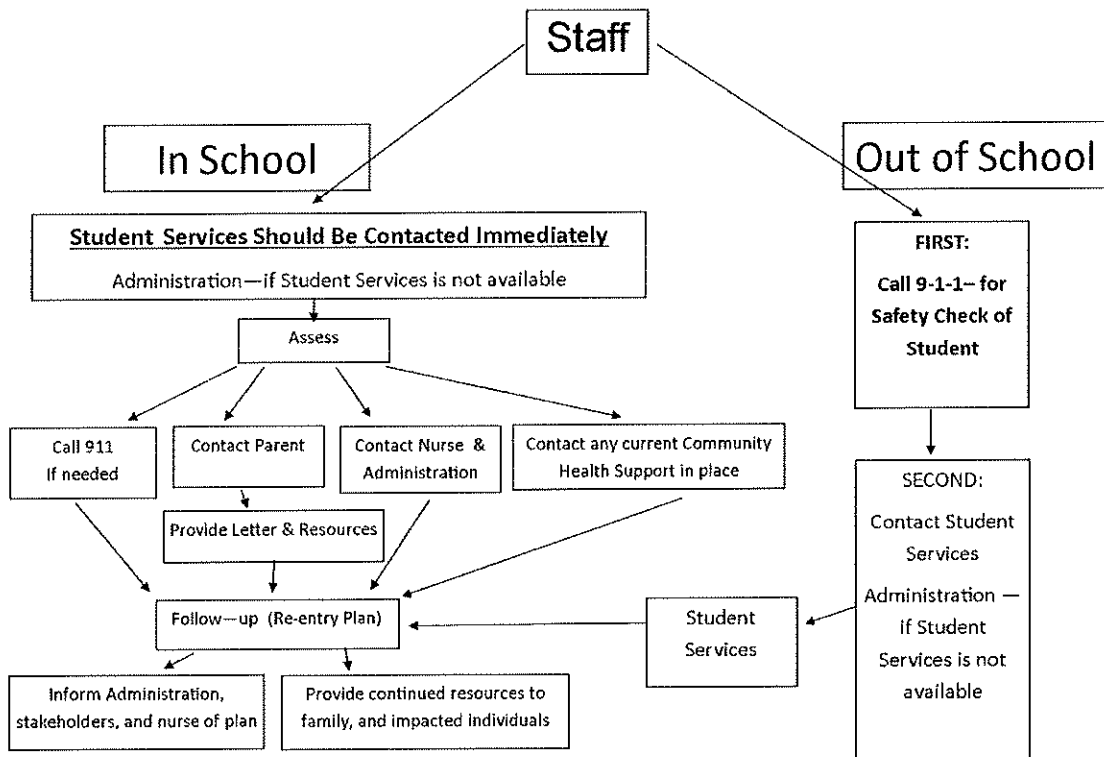
1. Call 911 for well-being check
2. Notify Student Services, School Administrator, or the DCSC superintendent.
3. The staff member must actually speak to one of the above listed persons.
4. Student Services, School Administrator, or DCSC superintendent will follow policy and protocols from there.
5. Document all actions taken in an email sent to Student Services personnel.

Out-of-school Suicide Attempts or Suicide Completions:

If a staff member becomes aware of a suicide attempt or completed suicide outside of school hours and medical assistance has already been involved, the staff member should:

1. Notify Student Services, School Administrator, or DCSC Superintendent.
2. Student Services and the SPCT will implement the Postvention Plan.
3. Document all actions taken in an email sent to Student Services personnel.

RESPONSE PROCEDURES FLOWCHART



DOCUMENTATION SHOULD HAPPEN AT EVERY LEVEL

Reporting to State Authorities

- If after informing the parent/guardian of a concern regarding a student's deteriorating mental health or suicidal ideation, the parent/guardian fails to take seriously and provide safety for the student, this may be considered emotional neglect and should be reported to the Indiana Department of Child Services.
- If it is determined by Student Services staff that contacting the parent or guardian would endanger the health or well-being of the student, parent contact may be delayed as appropriate, and the Indiana Department of Child Services and/or local law enforcement should be notified immediately.
- Reasons for which parent/guardian were not immediately notified and information that demonstrates the student's health or well-being was assumed to be in danger should be documented.
- A school administrator or student services member must stay at school with the student until the proper authorities arrive and assume responsibility for the child.

Re-Entry

Following a suicide attempt, stay in hospital, or similar deterioration of mental health. The student services department will reach out to the family to assist with developing an appropriate and supportive re-entry plan for the student. The student and family are encouraged to be involved in planning for the student's return to the educational setting. A team that the student feels comfortable with should meet to understand the needs, wishes, and professional recommendations for the student. Persons to consider placing at the meeting could include Student Services Team Members (Social Worker/ School Counselor), School Administrator, School Nurse, TOR, classroom teacher, or a staff member that the student feels "safe" with. Care should be taken to not overwhelm the student or family with too many people. This team will ensure the child's readiness to return to school, write any safety plans, and determine the appropriate information to be shared with stakeholders. Student Services members will coordinate re-entry with student, family, school team, and mental health care providers.

1. All attempts will be made to schedule a meeting with student, family, and designated school personnel to create an individualized re-entry plan.
2. Student Services will provide information to those with a *legitimate educational interest*.
3. Student Services personnel will collect physician and/or therapist recommendations and a release of information document (Appendix A) as the family allows.
4. Student Services members will be responsible for confidentiality storing all information.
5. Student Services members will recommend a 504 plan be written, if applicable.
6. A designated person will check in with the student periodically.
7. A designated person will also check in with family periodically.

If the student or family refuses a re-entry meeting or plan, student services, administration, and school staff will do their best to monitor the situation and make additional recommendations if

necessary. Refusal to participate in a re-entry meeting or plan will be documented by student services and shared with school administration and DCSC superintendent.

POSTVENTION

Following a death by suicide

Action Plan

- a. **Verify death-** Administration will confirm the death and cause with police, coroner, or family. Administration will contact the family for permission to share. The cause of death label should not come until after the death ruling has been made by the coroner and should not be shared unless the family gives permission. If the family does not allow the cause of death to be shared, the school corporation will not discuss the student's cause of death. However, the school system should continue to discuss suicide prevention resources with students.
- b. **Suicide Prevention Crisis Team (SPCT) Meets** - Administrator will contact the SPCT to schedule a meeting as soon as possible to get plans in place.
- c. **Assess the situation** - The SPCT will determine who is impacted, develop a plan for the school community, and initiate a plan for outside support. They will consider many factors such as:
 - the timeframe in which the death occurred - school night, weekend, holiday vacation, or summer vacation
 - How and when to inform students
 - How and when to release information to families
- d. **Enlist Support-** SPCT will arrange for additional mental health support, as needed
- e. **Share information with Staff-** Inform Faculty that a death has occurred (preferably a face to face staff meeting) and provide emotional support.
- f. **Share information with Students** - SPCT will provide a statement for staff to read to students. The statement will include: basic facts of death, funeral arrangements, recognition of sorrow of the loss, and info about grief resources. PA announcements and school assemblies are not appropriate for announcements. Students will be informed in small classroom settings by the teacher reading the prepared statement. Students should be referred to a predetermined area for additional support.
- g. **Share information with families-** SPCT will prepare a letter (with input and permission from parents) to email or send home with students including facts about the death, information about how the school is supporting students, warning signs of suicidal behavior and procedures for reporting students of concern.

- h. **Avoid Suicide Contagion** - It should be explained in the staff meeting that one purpose of trying to identify and provide services to other high risk students is to prevent another death.
- Staff will work with student services to identify students who are most likely to be significantly affected by the death.
 - In the staff meeting, the SPCT will review suicide warning signs and procedures for reporting students who generate concern.
 - All school staff will be careful not to sensationalize the death.
- i. **Initiate support services** - Identify students and staff who are likely to be highly affected by the death and in need of additional support.
- The SPCT will coordinate support services for students and staff as needed.
 - In concert with parents or guardians, referrals will be made to mental health care providers to meet underlying or ongoing mental health needs.
- j. **Special consideration should be given to Student(s) and/or Staff who:**
- Are related to the deceased student;
 - Are having an unusually strong reaction to the death;
 - The deceased student's closest friends;
 - The deceased student's current or former dating partners;
 - Had communication with the deceased student and may feel guilty about missing warning signs;
 - Had a recent negative interaction with the deceased student;
 - May have fought with or bullied the deceased student;
 - Teammates, members of the same clubs, or classes;
 - Those who witnessed the death;
 - Have a history of suicidal thoughts or behaviors;
 - Have experienced a recent crisis, loss, or traumatic event (or have had loved ones die by suicide) and;
 - Are experiencing mental health problems or other vulnerabilities.

k. Memorials

In cases of completed suicides, memorials should not be erected on school property or by the school:

Do's	Don'ts
Acceptable memorials (including small gatherings) include focus on ways to: <ul style="list-style-type: none"> ● decrease the risk of suicide contagion ● Increase mental health awareness 	Unacceptable memorials include: <ul style="list-style-type: none"> ● candlelight vigils ● physical memorials (photos, flowers, etc) on school grounds ● permanent memorials (plaques, benches, trees)
Make prevention resources available.	Funeral services should not be held on

	school grounds.
Provide grief counseling/support services for students and staff members.	Flags should not be flown at half mast.
Focus on how to prevent future suicides.	School should not be canceled.
If a tradition of memorializing deceased students at graduation exists, students who have died by suicide should be included.	

NEXT STEPS

The school should return to a normal schedule as quickly as possible. Accommodations should be discussed and made available on a case-by-case basis for students who have been identified at an elevated risk.

- Remove the deceased student's name from the school attendance roster, automated call system, and any other place that a call home would be initiated. (It's a good idea to give staff a heads up that they will soon be receiving a notification via email of the student's withdrawal to avoid unnecessary triggering during the school day.)
- Student's locker or desk will be cleaned and items delivered to the family.
- If possible, reconvene school staff 2-3 days following the death to focus on the following:
 - Review and make adjustments to the crisis plan implementation
 - Any emerging needs among the student body or community
 - Discussion of students identified as at risk and what they need
 - Appreciations to helpful colleagues
 - Self-care plan implementation for all staff
 - Sharing of mental health resources in community - encourage support for staff and students (normalize seeking support)

Reconvene and Debrief

The SPCT will meet to reflect on the successes and challenges of the school and district responses. Debriefing is critical to handling the next crisis better and should focus on staff self-care and process improvement. It is advised not only to provide debriefing through the immediate days following the crisis, but also after some time has passed allowing for further reflection on the crisis event.

COMMUNICATION

Notification of School Personnel -

Death During Out of School Hours

- Upon verification, the administrator will notify the Superintendent, other appropriate administrators, student services staff, and SPCT.
- SPCT meets.
- SPCT enacts a crisis response plan, as deemed appropriate.

Death that Occurs during School Hours

- Follow administrative and staff actions as listed on flow chart.
- SPCT meets. A plan will be developed and responsibilities delegated, including a communication plan:
 - Who will communicate with family
 - Who will contact relatives and friends of the student
 - Who will contact staff or call staff meeting
 - Written statement for staff members to share with students. The statement should include, basic facts of the death, known funeral arrangements (without providing details of the suicide method), and where students can get support.
 - Determine who will be available for support, including outside counselors if needed.
 - Identify and support teachers who are uncomfortable or not able to tell students
 - Plan how to interface with media
 - Determine who else should be notified (parents of friends, colleagues, etc.)
 - Determine who will collect deceased student's personal belongings, this should be done when students are not in the building
- If news of a death by suicide arrives during the school day when most staff will be teaching, they should be notified on the basic facts (what, when, who) and be advised to follow designated procedures as outlined on the notification. An after-school staff meeting should be called to provide additional information and time to ask questions and gain support.

Staff Meeting

If possible a staff meeting should be held prior to informing students of the death, the meeting should focus on how to appropriately talk to students about the death (provided by SPCT). Staff should be made aware of students who are "at risk" or "high risk" or students that might not voluntarily seek help and should be referred. A list of friends should be provided to the SPCT via the office.

If the general staff meeting is held after students are informed, the meeting should focus on reviewing the day's events, providing time for sharing, and identifying students who may need additional support.

Encourage staff to seek out support as needed.

Notification to Students

Death During Out of School Hours

- SPCT members should contact close friends as soon as possible as they arrive at school. They should be notified of the death and made aware of the support services available. If possible, parents of those identified close friends should be contacted to give them the choice of being present or telling their child themselves.
- Other students should be notified via a teacher read statement prepared by the SPCT during 1st period.

Death that Occurs during School Hours

- As the staff is being informed, those students who were closest to the person who has died by suicide should be informed in small groups by a students services member and an administrator. Parents of these students should also be contacted. The following guidelines should be observed:
 - If the student is already in the "at-risk" category and/or if the student is extremely upset and indicates he/she may be suicidal student services will follow the "in school" suicide threat protocols.
 - Provide resources for support in and out of school
 - Give the student the option of returning to class or continuing to meet with support personnel
 - Students may be allowed to leave school only if accompanied by a parent or guardian. (Request parent signature if they leave).
- The classroom teacher or SPCT member will inform students of the basic facts of the death from a prepared statement and inform of the availability of immediate and ongoing support available in and outside of school.

Media

The school district superintendent or their designee will be the sole media spokesperson. Staff will refer all inquiries from the media to the spokesperson. The spokesperson will:

- Keep the district superintendent informed of school actions relating to the death.
- Prepare a statement for the media including facts of the death, postvention plans, and available resources. The statement will not include confidential information, speculation about victim motivation, means of suicide, or personal family information.
- Answer all media inquiries. If a suicide is to be reported by news media, the spokesperson should encourage reporters not to make it a front-page story, not to use

pictures of the suicide victim, not to use the word suicide in the caption of the story, not to describe the method of suicide, and not to use the phrase “suicide epidemic”-- as this may elevate the risk of suicide contagion. They should also be encouraged not to link bullying to suicide and not to speculate about the reason for suicide. Media should be asked to offer the community information on suicide risk factors, warning signs, and resources available.

ROLES

Suicide Prevention Crisis Team (SPCT)

- DOCUMENT
- Makes decisions on who, how, and when communication will occur
- Writes statement for staff to read to students
- Provides support information for staff
- Decides on the use of additional counselors and resources to support students and staff
- Schedule a time for debriefing

Corporation Superintendent

- DOCUMENT
- Inform SPCT
- Media contacts

Building level Administrator

- DOCUMENT
- Inform SPCT
- Confirm death and cause; request death certificate
- Gain permissions from victim's family
- Schedule staff meeting to report death to staff
- Schedule a time for debriefing

School Nurse

- DOCUMENT
- First Aid
- Direct specific staff to call 911
- IF IN SCHOOL ATTEMPT, contact parent (or delegate a SPCT member to make contact)
- In suicide threat situations, the school nurse may be asked to supervise the unstable student while student services or administration call parents for assistance.

Student Services / School Counselors / School Social Workers

- DOCUMENT
- Meet with student to assess situation and determine need(s)
- IF OUT OF SCHOOL ATTEMPT, call 911, contact Parent, contact Administration, contact Community Health provider

- IF IN SCHOOL ATTEMPT, contact nurse, contact Administration, 911, contact Parent, contact Community Health provider
- Contact close friends as they arrive at school and provide information about support services; contact those parents asap
- Provide resources to students, family, staff
- Refer students, family, staff
- Contact administration
- Develop and provide Re-Entry/Safety plan to staff (as appropriate)
- Meet with student upon return to school
- Provide continued resources as needed

School Personnel- Teachers, office staff, bus drivers, custodians, aides, etc.

- DOCUMENT
- IF OUT OF SCHOOL ATTEMPT, call 911 and contact Student Services (if Student Services not available, contact Administration, if Administration not available, contact Superintendent)
- IF IN SCHOOL ATTEMPT, do not leave the student alone, contact Student Services
- IF IN SCHOOL and ACTIVE ATTEMPT, do not leave the student alone, contact Nurse, move other students to other area, contact Student Services
- Teachers will read statement to students (statement provided by SPCT)

Appendix (need to add these)

Safety Plan Forms
Re-Entry Plan Form
Staff Documentation Form

RESOURCES

See DCSC Suicide Prevention Resource Kit

Valley Oaks/Delphi (765-564-2247)
Family Health Clinic/Delphi (765-564-3016)

Four County/Delphi (574-722-5151)

Suicide Lifeguard App
Suicide Safety Plan App

National Suicide Prevention Lifeline 800-273-TALK (8255) or
www.suicidepreventionlifeline.org

Crisis Text Line Text HOME to 741741
Other information:
Go to: www.crisistextline.org