


HOWARD GARDNER MULTIPLE INTELLIGENCE CHARTER SCHOOL

	Students/Families	SF17-1001
	Suicide Awareness Policy	ADOPTED DATE: October 17, 2017 REVIEWED DATE: REVISED DATE:

1. Purpose

SUICIDE AWARENESS

The Howard Gardner Multiple Intelligence Charter School recognizes the importance of maintaining a safe school environment; the impact of students’ mental health on their academic performance and; the effect of mental health issues and suicide on students and the entire school community.

This policy provides guidelines for identifying, evaluating, and referring students to the appropriate provider/agency in both a crisis and non-crisis situation.

The Howard Gardner Multiple Intelligence Charter School has a strong commitment to awareness and prevention efforts in regard to mental health issues and suicide. This commitment combined with other strategies to increase school connectedness will serve to improve behavioral health outcomes and reduce suicide.

2. Definition

Behavioral health: The promotion of emotional health; the prevention of mental illness and substance use disorders; and treatments and services for substance abuse, addiction, substance use disorders, mental illnesses, and/or mental disorders.

Other suicidal behavior including preparatory acts: Acts or preparation towards making a suicide attempt, but before potential for harm has begun. This can include anything beyond a verbalization or thought, such as assembling a method (e.g., buying a gun, collecting pills) or preparing for one’s death by suicide (e.g., writing a suicide note, giving things away).

Postvention: Programs and interventions for survivors following a death by suicide. These activities help alleviate the suffering and emotional distress of suicide survivors and help prevent suicide contagion.

Risk factors: The personal or environmental characteristics associated with suicide. Persons affected by one or more of these risk factors have a greater probability of suicidal behavior.

School connectedness: The belief by students that adults and peers in the school care about their learning as well as about them as individuals.

Suicide: Death caused by self-directed injurious behavior with any intent to die as a result of the behavior.

Suicide attempt: A non-fatal self-directed potentially injurious behavior with any intent to die as a result of the behavior. A suicide attempt may or may not result in injury.

Suicide crisis response team: Student Assistance Program (SAP) members (i.e., administrators, guidance counselors, school nurse, and teachers), with assistance from community mental health agency resources.

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Suicidal self-directed violence: Behavior that is self-directed and deliberately results in injury or the potential for injury to oneself, there is evidence (whether implicit or explicit) of suicide attempt.

Survivor: A person who has experienced the suicide of a family member, friend, or colleague. A person who attempts suicide but does not die is an attempt survivor.

Warning signs: The indications that someone may be in danger of suicide, either immediately or in the near future.

3. Delegation of Responsibility

The school crisis response team will include: administrators, crisis response members, and school nurse.. Community mental agency resources may be called for assistance.

Parents or guardians of a student identified as being at risk of suicide must be notified by the school and must be involved in consequent actions. If the school suspects that the student's risk status is the result of abuse or neglect, school staff must notify Children and Youth Services.

4. Guidelines

Helping students with suicidal behaviors:

- When a student is believed to be at risk – Do not leave the student alone.
- Immediately notify a member of the building crisis response team for an assessment to be determined
- Notify parent/guardian of the situation and ask him or her to come to the school immediately; family support is critical.
- Assist the parent with a referral to a mental health service provider for immediate evaluation.
- If parent/guardian refuses to come to school an ambulance may be called at the parent's expense.
- Documentation of the parent contact should be done immediately. using the "Parent Acknowledgement Form for Students at Risk of Suicide". Students over the age of 14 should also sign the form.
- Request information from the parent regarding the emergency evaluation contact and any recommendations made by the mental health professional(s). If parent refuses to provide information this should be documented.
- The "Student Suicide Risk Documentation Form" can be utilized to document all pertinent information.
- Documentation of the emergency evaluation should be received from the mental health provider prior to student's return to school; if the parent/guardian refuses, this should also be documented.
- Maintain student confidentiality.
- Discussion of the case among personnel directly involved in supporting the student should be specifically related to the student's treatment and support needs. Discussion of the student among other staff should be strictly on a "need to know" basis. That is, information directly related to what staff has to know in order to work with the student.

Responding to suicide attempt occurring at school:

- Do not leave the student alone.
- Call 911.
- Contact the crisis response team.
- Notify the parent or emergency contact person of record.

Facilitating a student's return to school (by a member of the crisis response team):

- Be familiar with the basic information of the case.
- Maintain regular contact with the family.

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- Serve as a liaison between student, family, and teachers with family permission.
- Monitor the student's progress.
- Prior to the student returning to school, a meeting between a designated school staff from the crisis team and parents/guardians should be scheduled to discuss possible arrangements for support services and to create an individual reentry plan.
- If the student is unable to attend school for an extended period of time, determine how to help him or her complete course requirements.
- Closely monitor the student's re-entry into school and maintain contact with the student's parent/guardians and mental health provider.
- Responding to a suicide death (will be directed by administration)
- Verify the death.
- Reach out to and work with the family.
- Notify school crisis team.
- Contact and coordinate with external mental health professionals.
- Keep informed of the types of information – and misinformation – students may be sharing in social media networks.
- Notify all faculty and staff and provide guidance in talking to students.
- Provide support to staff.
- Identify, monitor, and support students who may be at risk.
- Set up crisis stations at the school.
- Participate in and/or advise on appropriate tribute in the immediate aftermath.
- Work with press/media will be done by Administration or his/her designee.

Staff education and training:

- Education will be provided for all staff about the importance of suicide prevention and recognition of suicide risks.
- Education will be provided on strategies to enhance protective factors, resilience, and school connectedness.
- Select staff will be trained to assess and refer students at risk of suicide to appropriate services.

Parent education:

- Educate parents about behavioral health promotion and suicide risk.
- Integrate information about mental health and suicide into existing programs and activities.
- Support and guide parents in the event of crisis which causes the parent to experience a complex set of conflicting emotions.

Student education:

- Provide information about suicide prevention.
- Promote positive attitudes and school connectedness.
- Increase students' ability to recognize if they or their peers are at risk for suicide.
- Encourage students to seek help for themselves or their peers.
- Address problems that can lead to suicide, such as depression and other mental health issues, anger, and drug use.

Screening:

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- Screening may be offered to identify students at risk for suicide, suicidal behaviors, and suicidal ideation.
- Screening will be completely confidential.
- Parental support and consent and student consent must be obtained prior to screening.
- Students identified with a behavioral health concern or suicide-related problem will be referred to a mental health provider for further evaluation.

School Code – 24 P.S. Sec. 1526

State Board of Education Regulations – 22 PA Code Sec. 12.12