## 252. – YOUTH SUICIDE AWARENESS AND PREVENTION

### 1. Purpose

The Board of School Directors of the Catasauqua Area School District adopts this policy in acknowledgment of the School District’s commitment to maintaining a safe school environment; to protect the health, safety, and welfare of its students; to promote healthy development; and to safeguard against the threat or attempt of suicide among school-aged youth. 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 are significant. Therefore, in order to ensure the safety and welfare of students, the School District will work to educate school personnel and students on the actions and resources necessary to prevent suicide and promote mental well-being.

### 2. Authority

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 school 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.

### 3. Publication

The School District Administration shall notify all school personnel, students, and parents/guardians of this policy and will post the policy on the School District website.

### 4. Definitions

When used in this policy, the terms described in this part 4 shall have the following meanings:

- **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 not be limited to, the administrators, counselors, school nurse, psychologist, social workers, and school police officers or resource officers (if any), 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 risks 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 greater 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, bus drivers, 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 of suicide, either immediately or in the very near future.

Crisis Response Teams

Administration shall establish crisis response team(s). The crisis response team(s) may include, but is/are not limited to, administrators, school counselors, school nurse, school psychologist, social worker, school police officers or resource officers (if any), and/or teachers and other members of the school’s Student Assistance Program team. Community mental agency resources may also be called upon for assistance, provided that a letter of agreement between the School District and any community provider is signed 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. (See U.S. Department of Education, Office for Civil Rights (OCR) guidance related to disability discrimination and sex discrimination for more information: [http://www2.ed.gov/about/offices/list/ocr/index.html](http://www2.ed.gov/about/offices/list/ocr/index.html).)

The School District shall utilize a multifaceted approach to suicide awareness and prevention, which includes the following:

**Staff Development**

All school personnel, including, but not limited to, administrators, teachers, paraprofessionals, support staff, coaches, bus drivers, custodians, and cafeteria workers, shall receive information regarding the School District’s protocols for suicide awareness and prevention. Education will be provided for all school personnel about the importance of suicide prevention and recognition of suicide risk factors, as well as strategies to enhance protective factors, resilience, and school connectedness. In addition, all school personnel will be educated about the warning signs and risk factors for youth depression and suicide.

As part of the School District’s Professional Development Plan, professional staff in all school buildings (not just those serving students in grades six (6) through twelve (12) as required by state law) shall participate in four (4) hours of youth suicide awareness and prevention training every five (5) years.

**Prevention Education for Students**

Students shall receive age-appropriate lessons in their classrooms through health education or other appropriate curricula on the importance of safe and healthy choices as well as help seeking strategies for self and/or others. Lessons shall contain information on comprehensive health and wellness, including emotional, behavioral, and social skills development. Students shall be taught not to make promises of confidence when they are concerned about a peer or significant other. These lessons may be taught by health and physical education teachers, community service providers, classroom teachers, or student services staff. Students who are in need of intervention shall be referred in accordance with the School District’s referral procedures for screening and recommendations.

**Student education may include, but is not limited to, the following:**

2. Help-seeking approaches among students, promoting a climate that encourages peer referral and emphasizes school connectedness.
3. Increasing students’ ability to recognize if they or their peers are at-risk for suicide.
4. Addressing problems that can lead to suicide, such as depression and other mental health issues, anger, and drug use.

**Intervention/Prevention**

In compliance with state regulations, and in support of the School District’s suicide prevention methods, information received in confidence from a student may be revealed to the student’s parents or guardians, the building principal, or other appropriate authority when the health, welfare, or safety of the student or other persons is clearly in jeopardy.

Any school personnel who has identified a student with one or more risk factors, or warning signs, or who has an indication that a student may be contemplating suicide, shall refer the student for further assessment and intervention in accordance with the School District’s referral procedures.

The School District 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.

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 policies.

If a student is identified as being at-risk for suicide or attempts suicide and requires special education services or accommodations, the Coordinator of Student Services shall be notified and shall take action to address the student’s needs in accordance with applicable law, regulations, and Board policy.

Any school personnel who are made aware of any threat or witnesses any attempt towards self-harm that is written, drawn, spoken, or threatened shall immediately notify the principal or his/her designee. Any threat in any form shall be treated as real and dealt with immediately. No such student should be left alone, nor should any confidences be promised. In life-threatening situations, a student’s confidentiality will be waived. The School District’s crisis response procedures shall be implemented.
If an expressed suicide thought or intention is made known to any school personnel during an after school program, and the principal or his/her designee are not available, call Lehigh County Crisis Intervention 610-782-3127, Northampton County Emergency Services 610-829-4801 or 610-252-9060, the National Suicide Prevention Lifeline 1-800-273-TALK (1-800-273-8255), or the National Hopeline Network 1-800-SUICIDE (1-800-784-2433). Thereafter, immediately inform the principal of the incident and actions taken.

Procedures for Parental Involvement

A parent or guardian of a student identified as being at risk of suicide must be immediately notified by the School District and must be involved in consequent actions. If any mandated reporter suspects 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 refuses to cooperate or cannot be contacted in a timely manner, and there is any doubt regarding the child’s safety, a member of the crisis response team involved with the situation (preferably a school counselor, school nurse, school psychologist, or administrator), or if none, the school personnel who directly witnessed the expressed suicide thought or intention, shall pursue a 302 involuntary mental health assessment by calling Lehigh County Crisis Intervention 610-782-3127 or Northampton County Emergency Services 610-829-4801 or 610-252-9060. The delegate will listen to concerns and advise on the course of action. If a 302 involuntary mental health assessment is granted, the first-hand witness may need to be the petitioner, with support and input from the principal or other administrator and any teachers or crisis response team members involved. In that case, the local police and emergency transport services may be contacted as well.

Response to Suicide or Suicide Attempt on Campus

The first school personnel on the scene of a suicide or suicide attempt must follow the School District’s crisis response procedures, and shall immediately notify the principal or his/her designee.

The School District will immediately notify the parents or guardians of the affected student(s).

Resources for Youth Suicide Awareness and Prevention

A comprehensive set of resources for youth suicide awareness and prevention is accessible through the Pa. Department of Education’s website – www.education.pa.gov


Suicide Prevention Resource Center – [http://www.sprc.org](http://www.sprc.org)
