Model Youth Suicide Awareness and Prevention Policy

Pursuant to section 1526 of the School Code, 24 P.S. §15-1526, the PA Department of Education (Department) hereby publishes the following Model Youth Suicide Awareness and Prevention Policy. This model is not intended to be adopted as written. Each school entity should consider the policy below as a reference to use when developing its own unique policy. As used throughout the document, the terms “school entity” and “school” refer to a school district, joint school district, charter school, regional charter school, cyber charter school, intermediate unit and/or area vocational-technical school.

A school entity’s Youth Suicide Awareness and Prevention Policy must include the following:

- A statement on youth suicide awareness and prevention;
- Protocols for administering youth suicide awareness and prevention education to staff and students;
- Methods of prevention, including procedures for early identification and referral of students at risk of suicide;
- Methods of intervention, including procedures that address a safety plan for students identified as being at increased risk of suicide;
- Methods of responding to a student or staff suicide attempt or suicide death;
- Reporting procedures; and
- Recommended current resources on youth suicide awareness and prevention programs, including current contact information for such programs.

Purpose

The school entity adopts this policy in acknowledgment of the school entity’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’ behavioral health on their academic performance and the effect of behavioral 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 entity will work to educate school personnel, contracted and other staff and students on the actions and resources necessary to promote well-being and prevent suicide.
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 public vehicle providing transportation to or from a school, or portal to portal, or school-sponsored activity. This policy shall also apply following a 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.

Publication

The school entity will notify its employees, students and parents/guardians of this policy and will post the policy on the school entity’s website.

Definitions

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

Chief School Administrator shall mean the superintendent of a school district or joint school district, the chief executive officer of a charter school, regional charter school or cyber charter school, and/or the executive director of an intermediate unit or area vocational technical school.

Crisis Response Team shall include but may not be limited to the administrators, school counselors, school nurses, school psychologists, school social workers, school resource officers, and/or other members of the Student Assistance Program (SAP) and may include other members as deemed appropriate by the chief school administrator/school entity. Community behavioral health agency resources may be called for assistance to be a part of the team.

Postvention shall mean activities which reduce risk and promote healing after a suicide death.

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 refers to characteristics associated with a lower likelihood of negative outcomes or that reduces a risk factor’s impact. Protective factors may be seen as positive countering events.

Resilience is the process of adapting well in the face of adversity, trauma, tragedy, threats, or significant sources of stress or “bouncing back” from difficult experiences.

Risk Factors refers to characteristics at the biological, psychological, family, community, or cultural level that precede and are associated with a higher likelihood of negative outcomes, including suicide.
**School and School Entity** shall mean school district, joint school district, charter school, regional charter school, cyber charter school, intermediate unit and/or area vocational-technical school.

**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, school-based mental health professionals (e.g., school counselor, school psychologist, school social worker), paraprofessionals, support staff, coaches, bus drivers, custodians and cafeteria workers.

**Suicide** shall refer to death caused by self-directed injurious behavior with 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 intended to kill him/herself; a suicidal act may result in death, injuries, or no injuries.

**Suicide Threat** 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.

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

### Suicide Awareness and Prevention

The school entity shall establish a crisis response team(s). The crisis response team(s) may include, but is not limited to, administrators, school counselors, school psychologists, school nurses, school social workers, school police officers or school resource officers, and/or teachers and other members of the school’s Student Assistance Program team. [Community behavioral health agency resources may also be called upon for assistance, but a letter of agreement between the school entity 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.¹

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¹ Please see U.S. Department of Education, Office for Civil Rights (OCR), guidance related to disability discrimination and sex discrimination for more information: [https://www2.ed.gov/about/offices/list/ocr/frontpage/faq/readingroom.html](https://www2.ed.gov/about/offices/list/ocr/frontpage/faq/readingroom.html)
The school entity shall utilize a multifaceted approach to suicide awareness and prevention, which includes the following:

**Staff Development**

All school personnel shall receive information, in writing, regarding the school’s protocols for suicide awareness and prevention. Youth suicide awareness and prevention education will be provided for all school personnel about the importance of suicide prevention, the recognition of suicide risk factors and warning signs, and how to respond. Staff education should also include strategies to enhance protective factors, resilience, and school connectedness.

As part of the school entity’s Professional Development Plan, professional staff in all school buildings serving students in grades six (6) through twelve (12) shall participate in four (4) hours of youth suicide awareness and prevention training every five (5) years. This training may also be provided to professional staff in grades K-5, as well as ancillary school-wide staff, and may extend beyond four (4) hours within a five (5) year period.

**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. These lessons may be taught by health and physical education teachers, classroom teachers, student services staff, or community service providers. Students shall be taught not to make promises of confidence when they are concerned about a peer or significant other. Students who are in need of intervention shall be referred in accordance with the school entity’s referral procedures for screening and recommendations.

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

1. Adherence to safe and effective messaging guidelines, avoiding graphic testimonials, and inclusion of reputable suicide prevention resources;
   - Recommendations for Reporting on Suicide: [http://reportingonsuicide.org/](http://reportingonsuicide.org/)
2. Informing students about broader behavioral health issues such as depression and substance abuse, as well as specific risk/protective factors and warning signs for suicide;
3. Encouraging students to seek help for themselves or their peers, including when concerns arise via social media or other online forum, and to avoid making promises of confidence when they are concerned about the safety of a peer; and/or
4. Promoting a healthy school climate where students feel connected to and can identify trusted adults in the building.
Intervention/Prevention – 22 Pa Code. 12.12

Intervention/Prevention

In compliance with state regulations and in support of the school’s suicide prevention protocols, 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 observes a student exhibiting a warning sign for suicide, or who has another indication that a student may be contemplating suicide, shall refer the student for risk assessment and intervention in accordance with the school entity’s referral procedures. In the absence of an immediate warning sign for suicide, students demonstrating suicide risk factors that appear to be adversely impacting the student should be referred through an appropriate mechanism (e.g., Student Assistance Program) for follow-up.

If the student has been identified as being at increased risk of suicide, the school entity shall create a safety plan to support the student (unless a safety plan was previously developed, in which case the plan may be reviewed and/or revised). The safety plan should be developed collaboratively with input from the student and reviewed with the student’s family.

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 school entity’s 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.

Any school personnel who is 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 designee. Any threat in any form shall be treated as real and dealt with immediately. No student should be left alone, nor confidences promised. In cases of suicidal thoughts and behaviors, a student’s confidentiality will be waived. The school entity’s crisis response procedures shall be implemented.

If an expressed suicide thought or intention is made known to any school personnel during a before or afterschool program, school-sponsored event or sport team and the principal or designee are not available, call [number for County Emergency Services], 1-800-SUICIDE, or 1-800-273-TALK for help. Inform the principal of the incident and actions taken.

Procedures for Parental Involvement

Parents or guardians of a student identified as being at risk of suicide must be immediately notified by the school and must be involved in consequent actions and provided with crisis and
community resources. 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 parents or guardians 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 behavioral health assessment by calling County Emergency Services at [provide number] and ask for a delegate. The delegate will listen to concerns and advise on the course of action. If a 302 involuntary behavioral health assessment is granted, the first-hand witness will need to be the petitioner, with support from the principal or other central office administrator.

Response to Suicide Attempt

The first school personnel on the scene of a suicide attempt on campus must follow the school entity’s crisis response procedures, and shall immediately notify the principal or designee.

The school entity will immediately notify the parents or guardians of the affected student(s).

If a suicide attempt occurs off campus, then the school entity will follow the following reentry procedures upon the student’s return to school.

A student’s excusal from school attendance after a behavioral health crisis and the student’s return to school shall be consistent with state and federal laws and regulations.

The building principal or designee shall meet with the parents/guardians of a student returning to school after a behavioral health crisis, and, if appropriate, meet with the student to discuss re-entry and applicable next steps to ensure the student’s readiness to return to school.

When authorized by the student’s parent/guardian, a designated school employee shall coordinate with the appropriate outside behavioral health care providers.

A 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.

Response to Suicide (Postvention)

The first school personnel on the scene of a suicide on campus must follow the school entity’s crisis response procedures and shall immediately notify the principal or designee.

The school entity will immediately notify the parents or guardians of the affected student(s).

Upon confirmation of death, the school entity will immediately implement established postvention procedures, which shall include methods for informing the school community, identifying and monitoring at risk youth, and providing resources and supports for students, staff, and families. The school will review any requests for memorials in accordance with school policy.
If a suicide occurs off campus, the school will obtain confirmation of the death prior to initiating postvention procedures.

**Resources for Youth Suicide Awareness and Prevention**

A comprehensive set of resources for youth suicide awareness and prevention is accessible at: [PDE Suicide Prevention & Awareness](http://www2.ed.gov/about/offices/list/ocr/publications.html#Section504)

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


SAMHSA’s Preventing Suicide: A Toolkit for High Schools – [http://store.samhsa.gov/shin/content/SMA12-4669/SMA12-4669.pdg](http://store.samhsa.gov/shin/content/SMA12-4669/SMA12-4669.pdg)

Services for Teens at Risk (STAR-Center) – [http://www.starcenter.pitt.edu/](http://www.starcenter.pitt.edu/)

**Reference:**

2012 National Strategy for Suicide Prevention: Goals and Objectives for Action