

## EE. Suicide Prevention Policy

### Counselor Procedures for Students Who Have Threatened Suicide

Threats to harm self may range from casual references to death often expressed with disgust about the conditions of one's life, or another person, to a specific reference or threat. The threats are often disclosed, discovered, or suspected through obvious physical signs, talk, open threats, notes, poetry, artwork or other communication themes involving suicide or self-injury.

- Never ignore a suicide threat or attempted suicide.
- All suicidal threats or statements should be taken very seriously, even if the person makes jokes about it.
- Threatening suicide or to harm oneself is always a sign of someone who's troubled.
- Almost everyone who commits suicide gives some warning sign before committing the act.
- Teen suicide is a substantial problem, and although it's more uncommon, suicide does occur among younger children.
- School failure can increase the risk of suicide.

**Take all threats seriously. No matter what the situation, do not ignore any mention of suicide.**

\*\*\*Please let common sense dictate your behaviors in the case of an actively hostile/aggressive student. Specifically, DO NOT ATTEMPT TO BLOCK THE STUDENT'S EXIT. Rather, get out of harm's way and apprise your administrators of the situation Immediately.\*\*\*

If a student threatens to harm themselves, you are to immediately take the following actions:

1. Document the date, time, and manner you were made aware of the threat.
2. Request immediate assistance from your Principal or Assistant Principal. If you are not near a telephone, ask another faculty member to contact your Principal or Assistant Principal immediately.
3. Do not leave the student alone at any time. The student is to remain in your custody. The student should not be further from you than arms' reach. The student can be released into the custody of your Principal or Assistant Principal. Do not allow the student to leave campus.
4. Assess the lethality of the situation by completing the "Suicide Risk Assessment Instrument".  
\*\*\*Please note that while the assessment instrument is a guide for assessing lethality, it is not the sole indicator and should not be treated as such. Often times what the child does not say, but indicates covertly or nonverbally, is a critical indicator. Use your experience and judgement; if you feel the student is critical, whether or not this is supported by the assessment instrument, assume that they are, the Principal or Assistant Principal needs should contact Behavioral Health Services assigned to your school.

### For Students Who Are NOT Considered Critical Risk

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If the student is not at the Critical Risk Range, procedures as written should be followed:

**\*\*\*Remain with the student until custody is transferred to the parent/guardian.\*\*\***

- 1. Provide to your Principal of Assistant Principal the following information:**
  - a. Results of the Suicide Risk Assessment**
  - b. Events preceding the threat**
  - c. Academic and discipline history**
  - d. Any other salient information related to the event**
- 2. Have the student sign a "Student Contract of Agreement of No Harm to Self". Make a copy of the signed No Harm to Self" contract. Give the original to the student and retain the copy.**
- 3. Contact the parent/legal guardian and advise them that they will need to pick up the student immediately. Do not discuss the situation over the telephone. Just inform them that there has been a problem, and we need them to come to the school immediately.**

**\*\*\*When speaking with the parent, it is critical that you maintain a low-key dispassionate demeanor. Imposing more emotion on an already emotionally distressed child is neither helpful nor compassionate.\*\*\***

- 4. When the parent/guardian arrives at the school, the counselor and the Principal or Assistant principal will meet with the parents/guardians and briefly discuss the situation, offer a referral for seeking additional assistance, and have them sign the "Harm-to-Self" acknowledgement letter. If requested by the parents/guardians, a copy of the "Harm to Self" acknowledgment letter can be provided.**

**\*\*\*If they have questions regarding the functions of harm-to self, advise them that those are questions only a trained mental health professional can provide. \*\*\***

**\*\*\*Do not in any way suggest or indicate that we require them to seek outside support. Rather, simply say that Du Bois Integrity Academy takes threats to harm oneself very seriously and hope that they will too. In an effort to support them a list of referrals can be offered. \*\*\***

- 5. Following the meeting with the parent/guardian and the Principal or the Assistant Principal, the student is to be released to the parent/guardian.**
  - 6. The counselor completes a documentation form and forwards a copy to the Principal or Assistant Principal.**
  - 7. The Counselor should maintain records that reflect frequency or repetition of threats and make the administrators aware of individuals who make repeated threats.**
  - 8. The next day provide the student with a 30-minute counseling lesson on coping with stress. Provide the student with counseling sessions for a minimum of four weeks.**
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### For Students Who are at Critical Risk

**\*\*\*Any student who has made two or more threats to harm themselves is to be automatically considered as being at Critical Risk. \*\*\***

**If the student is at Critical Risk, advise your Principal or Assistant Principal of the status and immediately call Behavior Services assigned to your school. Have the following information ready to be provided when you call:**

- a. Results of the Suicide Risk Assessment
  - b. Events preceding the threat
  - c. Academic and discipline history
  - d. Any other salient information related to the event
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1. Fully document the instructions given to you by Behavioral Services and/or your Principal or Assistant Principal.
  2. If advised that a member of Behavioral Services is being dispatched to your school then retain custody of the student until they arrive. Other than maintaining custody of the student, take no further actions until they arrive and you are instructed to do so. Do not call the parent/guardian until instructed to do so by a member of Behavioral Services.
  3. When the student returns to school, provide counseling sessions for a minimum of four weeks. At the third week of counseling sessions, contact a member of Behavior Services to provide an update and discuss the student's progress, and counseling sessions.

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**Individual who maintained custody of student until released to parent, guardian, police, DHS etc.:**

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**(Printed Name)**

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**(Signature)**

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**Time Parent/Guardian Contacted:** \_\_\_\_\_

**Parent/Guardian Response:**

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**DHS Contacted?    Yes    No**

**Time Picked up by parents, police, DHS, etc. From school:** \_\_\_\_\_

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**DIA "Threat to Harm Self" Counseling Documentation Form**

**Student's Name:** \_\_\_\_\_ **Date** \_\_\_\_\_

**Grade** \_\_\_\_\_

**Time you were made aware of the threat:** \_\_\_\_\_

**Who advised you of the threat?** \_\_\_\_\_

**Description of Threat:**

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**If contacted, Directions given by Behavioral Services:**

\_\_\_\_\_  
\_\_\_\_\_

**Time parent/guardian contacted:** \_\_\_\_\_

**Time parent picked the child up from school:** \_\_\_\_\_

**The following people were involved in deposition of the threat:**

\_\_\_\_\_, **Principal or Assistant Principal**  
\_\_\_\_\_, **Counselor**

**Counselor's Signature** \_\_\_\_\_

**Principal/Assistant Principal Signature** \_\_\_\_\_

<p><b>Complete this section at the conclusion of 4 weeks of counseling sessions and forward to administrator.</b></p> <p><b>Date of Counseling Sessions:</b> _____</p> <p><b>Disposition:</b> _____</p> <p><b>Contract Dates and lengths:</b> _____</p> <p><b>Date forwarded to administrator:</b> _____</p>
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### Suicide Risk Assessment (Grades K-5)

Student's name

School:

Grade:

Date:

Your name:

1. Are you currently thinking about hurting yourself?  
If yes, how? Why?
  
2. Do you have a plan to hurt yourself?
  
3. Do you know what dying means? Are you thinking about dying?
  
4. Do you know if there are any guns, knives, or other things that could hurt you at your house?  
Can you get to them?  
Do you know where your parent's medicine is?
  
5. Have you ever hurt yourself on purpose or tried to hurt yourself on purpose in the past?  
If yes, how? Why?
  
6. Have you told anyone about this? (Remind them that we will have to tell parent/guardian)
  
7. How would your family, friends, and teacher feel if you hurt yourself on purpose?
  
8. What are some things you could do instead of hurting yourself on purpose?
  
9. Do you think you are being bullied? If yes, where and by whom?  
Have you told anyone that you are being bullied? Who?

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**If the student answers "yes" to questions one and two and/or this is their 3<sup>rd</sup> or more suicide threat, they are considered as being at Critical Risk and Behavior Services should be notified immediately to meet with the student and the student's guardian.**

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Student Contract and Promise to  
**Not Harm Themselves in Any Way**  
(Grades PreK-5)

Name: \_\_\_\_\_ Date: \_\_\_\_\_

I promise not to do anything on purpose to hurt myself in any way, which includes trying to kill myself. I also promise to contact \_\_\_\_\_, my school counselor right away if I feel sad, or if I feel like I want to hurt myself, or am thinking about hurting myself in any way. If \_\_\_\_\_ is not at school or is busy, I promise that I will go and see \_\_\_\_\_, my school Principal or Asst. Principal and tell him/her how I am feeling, what I am thinking, and what I am planning on doing to myself.

If I am **not at school** and I begin feeling sad or start feeling or thinking about hurting myself in anyway, I promise to IMMEDIATELY tell an adult. If there is no adult I can talk to, I promise to call 911, or National Suicide Prevention Lifeline at 1-800-273-8255; the Suicide Hotline at 1-800-784-2433; or the Crisis Hotline at \_\_\_\_\_.

This agreement is good for the time period of:

\_\_\_\_\_ through \_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Witness

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Parent Letter:

Re: Student Threat to Self-Harm

Date: \_\_\_\_\_

Dear Parent/Guardian:

You have been called today and asked to pick up your child because they have threatened to harm or kill themselves. We at Du Bois Integrity Academy take threats of self-harm very seriously, and hope you will do the same.

In an effort to support you and your child, we can assist in providing a list of agencies that can help provide emergency service. Many may offer emergency support at no charge; however, should there be fees involved, they will be the responsibility of the parent/guardian.

If we can provide further support to you and/or your child, please do not hesitate to let us know.

Please sign and date the following statement:

I, \_\_\_\_\_, as parent/legal guardian of \_\_\_\_\_, student at Du Bois Integrity Academy acknowledge that I have been asked to pick up my child because they have threatened to harm and/or kill themselves. I also acknowledge that I have been encouraged to take this threat seriously. I understand that if I have any questions and/or concerns that I can contact Du Bois Integrity Academy, and I will be directed to the individual who can best answer my questions.

Parent/Guardian Signature: \_\_\_\_\_ Date: \_\_\_\_\_

Witness Signature: \_\_\_\_\_ Date: \_\_\_\_\_

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