

SUICIDE PREVENTION AND MENTAL HEALTH PROMOTION

The Board of Education recognizes that suicide is a major cause of death among youth and should be taken seriously. In order to attempt to reduce suicidal behavior and its impact on students and families, the Superintendent or designee shall develop preventive strategies and intervention procedures.

The Superintendent or designee may involve school health professionals, school counselors, administrators, other staff, parents/guardians, students, local health agencies and professionals, and community organizations in planning, implementing, and evaluating the district's strategies for suicide prevention and intervention.

Prevention and Instruction

Suicide prevention strategies may include, but not be limited to, efforts to promote a positive school climate that enhances students' feelings of connectedness with the school and is characterized by caring staff and harmonious interrelationships among students.

The district's instructional and student support program shall promote the healthy mental, emotional, and social development of students including, but not limited to, the development of problem-solving skills, coping skills, and resilience.

The Superintendent or designee may offer parents/guardians education or information which describes the severity of the youth suicide problem, the district's suicide prevention efforts, risk factors and warning signs of suicide, basic steps for helping suicidal youth, reducing the stigma of mental illness, and/or school and community resources that can help youth in crisis.

Staff Development

Suicide prevention training for staff shall be designed to help staff identify and find help for students at risk of suicide. The training shall be offered under the direction of district staff and/or in cooperation with one or more community mental health agencies and may include information on:

1. Research identifying risk factors, such as previous suicide attempt(s), history of depression or mental illness, substance use problems, family history of suicide or violence, feelings of isolation, interpersonal conflicts, a recent severe stressor or loss, family instability, and other factors.
2. Warning signs that may indicate suicidal intentions, including changes in students' appearance, personality, or behavior.
3. Research-based instructional strategies for teaching the suicide prevention curriculum and promoting mental and emotional health.
4. School and community resources and services for students and families in crisis and ways to access them.
5. District procedures for intervening when a student attempts, threatens, or discloses the desire to die by suicide.

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Intervention

Whenever a staff member suspects or has knowledge of a student's suicidal intentions, he/she shall promptly notify the principal, another school administrator, psychologist, or school counselor. The principal, another school administrator, psychologist, or counselor shall then notify the student's parents/guardians as soon as possible and may refer the student to mental health resources in the school or community.

Students shall be encouraged through the education program and in school activities to notify a teacher, principal, another school administrator, counselor, or other adult when they are experiencing thoughts of suicide or when they suspect or have knowledge of another student's suicidal intentions.

The Superintendent or designee shall establish crisis intervention procedures to ensure student safety and appropriate communications in the event that a suicide occurs or an attempt is made by a member of the student body or staff on campus or at a school-sponsored activity.

Policy adopted:

SUICIDE PREVENTION AND MENTAL HEALTH PROMOTION

Prevention and Instruction

The District's suicide prevention curriculum shall be designed to help students to:

1. Identify and analyze signs of depression and self-destructive behaviors and understand how feelings of depression, loss, isolation, inadequacy, and anxiety can lead to thoughts of suicide.
2. Identify alternatives to suicide and develop coping and resiliency skills.
3. Learn to share feelings and get help when friends are showing signs of suicidal intent.
4. Identify community crisis intervention resources where help is available and recognize that there is no stigma associated with seeking mental health, substance abuse, gender identity, or other support services.

Staff Development

1. Annual in-service suicide prevention training will be conducted in order for the district staff to learn to recognize the warning signs of suicidal crisis, to understand how to help suicidal youths, and to identify community resources. All staff will learn to identify potentially suicidal students, to take preventative precautions, and to report suicide threats to the appropriate authorities. Training will be offered under the direction of trained district counselors/psychologists.
2. Staff shall promptly report suicidal threats or statements to the principal or to a trained district counselor/psychologist, who shall promptly report threats or statements to the student's parents/guardians and take appropriate action until the parent or guardian arrives.

Intervention

Immediate Intervention for a Suicide Threat or Attempt

When a suicide attempt or threat is reported, the principal or designee shall:

1. Ensure the student's physical safety by one of the following, as appropriate:
 - a. Securing immediate medical treatment if a suicide attempt has occurred.
 - b. Securing law enforcement and/or other emergency assistance if a suicidal act is being actively threatened.
 - c. Keeping the student under continuous adult supervision until the parent/guardian and/or appropriate support agent or agency can be contacted and has the opportunity to intervene.
THE STUDENT MUST NOT BE LEFT ALONE.

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2. Designate specific individuals to be promptly contacted, including the school counselor, psychologist, nurse, superintendent, and/or the student's parent/guardian, and as necessary, local law enforcement or mental health agencies.
3. Document the incident in writing as soon as feasible.
4. Follow up with the parent/guardian and student in a timely manner to provide referrals to appropriate services as needed.
5. Provide access to counselors or other appropriate personnel to listen to and support students and staff who are directly or indirectly involved with the incident at the school.
6. Provide an opportunity for all who respond to the incident to debrief, evaluate the effectiveness of the strategies used, and make recommendations for future actions.
7. Document the steps taken in the student's record.
8. Develop an effective plan for reintegration of the student into school following the crisis.

Intervention after a Death Suggested to be Suicide

When a tragedy occurs and a student dies, the principal or designee shall:

1. Contact the Superintendent. District Office staff will contact other schools and remind them to identify and provide counseling to any student who might have known or been connected in any way with the student who died.
2. Call an emergency staff meeting to relay known information and formulate appropriate procedures for supporting students, staff, and parents. The death should not be called a suicide. This is a legal determination that can only be made by the coroner's office. It should be referred to as a death or a tragic death.
3. Talk with students who were in class with the student by going to that classroom.
4. Contact other students who might know the student in direct, one-to-one conversations.
5. Provide counseling support to students. Contact additional psychologists/counselors to increase the available support. Have a place available for students to go to (Support Room) and walk around campus to be available for any student needing support. Counselors should follow the student's schedule and be available to assist the students and teachers in those classes. Students must be allowed to grieve, but there should be no large group gatherings such as an assembly. Students should not be allowed to congregate in groups without adult supervision. Identify any students who might be at risk and call them in to talk.
6. Contact the family to express condolences and to let them know what the school is doing. Ask when the family would like the student's personal items returned to them. The student's locker should be cleaned out and contents returned to the parents at an appropriate time.

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7. Designate a spokesperson who will respond to questions and inquiries from the media.
8. School will be conducted as usual to the greatest extent possible. In no case should school be canceled.
9. Prepare a note to send home to parents indicating that a tragic death has occurred and that post intervention procedures and counseling has begun.
10. Schedule a parent meeting as soon as possible to help parents deal with the issue and to advise them how to help students.

Approved:

Trainings:

ONLINE TRAINING:

QPR Question, Persuade and Refer (45 minutes to 1 hour) for suicide prevention. Available to anyone 18 years or older who lives or works in Santa Clara County.

QPR, modeled after CPR training, provides an introduction to suicide that empowers the participant to recognize the possible cues that someone is suicidal. It is an emergency response to someone in crisis. You will learn: myths and facts about suicide; warning signs of suicide; to question or talk with suicidal people; to persuade them to seek help; to refer them to resources.

This program is made possible by our Mental Health Services Act (MHSA) funds.

Schools or districts can get bulk accounts by designating a point person.

Contact: Jean Kaelin
jean.kaelin@hhs.sccgov.org.
408-885-3723

SMALL GROUP TRAINING:

QPR Question, Persuade and Refer (maximum of 40 participants: 1 hour) for suicide prevention. Available to anyone 18 years or older who lives or works in Santa Clara County.

QPR, modeled after CPR training, provides an introduction to suicide that empowers the participant to recognize the possible cues that someone is suicidal. It is an emergency response to someone in crisis. You will learn: myths and facts about suicide; warning signs of suicide; to question or talk with suicidal people; to persuade them to seek help; to refer them to resources.

This program is made possible by our Mental Health Services Act (MHSA) funds.

Schools or districts can schedule trainings at mutually agreed upon times.

Contact: Jean Kaelin
jean.kaelin@hhs.sccgov.org.
408-885-3723

**Suicide & Crisis Hotline
Need Help? We Care!**

1-855-278-4204 (Toll-free)

A live counselor is available 24-hours a day.

**EMQ Mobile Crisis intervention
(for children under 18):
408-379-9085**

Additional Santa Clara County Resources

Mental Health Urgent Care (408) 885-7855 is located at 871 Enborg Court, in the southeast corner of the same building that houses Emergency Psychiatric Services (EPS). Mental Health Urgent Care is a walk-in outpatient clinic, providing screening, assessment, crisis intervention, referral and short-term treatment (up to 60 days) to voluntary mentally ill. Open Monday – Sunday (including holidays) from 8am – 10pm. From ages 13+.

Survivors of Suicide Services (408) 885-6216 A cost-free drop-in Support Group where adults who have lost a loved one to suicide can meet weekly to find support in their grief with others experiencing a similar loss. For more information call.

Drug/alcohol linkage services:
GATEWAY 800-488-9919

Crisis and Parental stress hotline:
Contact Cares 408-850-6125

North County

Project Safety Net: Project Safety Net's mission is to develop and implement an effective, comprehensive, community-based mental health plan for overall youth well-being in Palo Alto. To learn more about this grass-roots community coalition, what's available, and how you can participate, please visit their website:
<http://www.psnpaloalto.com/>

HEARD Alliance- (Health Care Alliance for Response to Adolescent Depression). The HEARD Alliance is a community alliance of health care professionals, including primary care and mental health providers. The HEARD Alliance's mission is to increase collaboration among primary care, mental health and educational professionals, to enhance the community's ability to respond to adolescent depression. To learn more about services available visit their website at
<http://www.heardalliance.org/>

Youth and Young Adults Resources

24 hour Youth Crisis and Teen Health Hotline

1-888-247-7717

Onyourmind.net_(for residents of the Bay Area, CA) This local, live chat room is available Monday-Thursday 4:30-9:30 p.m. during the school year. It provides a safe and anonymous place for teens to get information and support from other teens. You can talk about anything that's on your mind, including relationships, school, depression, stress, suicide, friends, parents, cutting, identity, and health. You can also submit a question to be answered on the Q&A page, or connect to resources for additional information and support.

www.OnYourMind.net/

Facebook Has Become Actively Engaged in Suicide Intervention and Prevention!

Spread the word! In partnership with the National Action Alliance for Suicide Prevention, Facebook is announcing a new service that harnesses the power of social networking and crisis support to help prevent suicides across the Nation and Canada. The new service enables Facebook users to report a suicidal comment they see posted by a friend to Facebook using either the [Report Suicidal Content link](#) or the report links found throughout the site.

The person who posted the suicidal comment will then immediately receive an email from Facebook encouraging them to call the [National Suicide Prevention Lifeline](#) at 1-800-273-TALK (8255) or to click on a link to begin a confidential chat session with a crisis worker.

SUICIDE & CRISIS HOTLINES

In case of emergency, contact 9-1-1

**Santa Clara County Suicide/Crisis Hot Lines:
1-855-278-4204 (Toll-free)**

**Santa Clara County EMQ Mobile Crisis intervention
(for children under 18): 408-379-9085**

**County Mental Health Services CALL CENTER
Santa Clara County Crisis Outreach Referral Education Services
or "CORE"**

24-hour emergency/crisis intervention.
English, Spanish, Vietnamese.
800-704-0900 (Toll-free)

**Santa Clara County GATEWAY (drug/alcohol linkage services)
800-488-9919**

**Santa Clara County Contact Cares
(Crisis and Parental stress hotline)
408-850-6125**

**National Suicide Hotline
1-800-SUICIDE
1-800-784-2433**

**California Youth Crisis Line
1-800-843-5200**

NOTE: Crisis Intervention Team (CIT) Police are trained officers who can recognize and understand the seriousness and sensitivity of the mentally ill during a crisis situation. ***Request a CIT officer during all mental health emergencies.***

**Emergency: call 911 & request a CIT Officer
Non-Emergency: call 311 & request a CIT Office**