

VENTURA COUNTY BOARD OF EDUCATION

ADMINISTRATIVE REGULATION NO. 5141.52

ADOPTED: 12/11/17

CLASSIFICATION: Students

REVISED: 03/15/21

SUBJECT: Suicide Prevention

STAFF DEVELOPMENT

Ventura County Office of Education (VCOE) shall provide suicide awareness and prevention training to teachers, counselors, and other employees who interact with any students. The training shall be offered under the direction of VCOE personnel and/or in cooperation with one or more community mental health agencies.

Materials for training shall include how to identify appropriate mental health services at the school site and within the community, and when and how to refer youth and their families to those services. Suicide awareness and prevention materials also may include programs that can be completed through self-review.

Staff development shall include research and information related to the following topics:

1. The higher risk of suicide among certain student populations, including, but not limited to; living with mental illness, living in out-of-home settings, experiencing homelessness, bereaved by suicide, have chronic illness or disability, students who are lesbian, gay, bisexual, transgender, or questioning, or other sub-groups
2. Individual risk factors, such as, previous suicide attempt(s) or self-harm, history of depression or mental illness, family history of suicide, instability, violence, feelings of isolation, interpersonal conflicts, a recent severe stressor or loss, intense unstable relationships, impulsivity, substance abuse, and other factors
3. Warning signs that may indicate depression, emotional distress, or suicidal intentions, such as, changes in student's personality or behavior and verbalizations of hopelessness or suicidal intent
4. Protective factors that may help to decrease a person's suicide risk, such as resiliency, problem-solving ability, access to mental health care, and positive connections to family, peers, school, and community
5. Instructional strategies for teaching suicide awareness and prevention and promoting mental and emotional health, including but not limited to:

- a. Appropriate ways to interact with students about thoughts of suicide or exhibiting emotional distress
 - b. Common misconceptions about suicide
 - c. Appropriate messaging and correct terminology about suicide
 - d. Emphasis on stigma reduction about suicide and mental illness early intervention
6. When and how to provide school and community resources and mental health services, including resources and services that meet the specific needs of high-risk groups
 7. Screening, intervening, and monitoring when a student attempts, threatens, or discloses the desire to die by suicide
 8. Procedure for responding after a suicide has occurred

INSTRUCTION

The VCOE's comprehensive health education program shall promote the healthy mental, emotional, and social development of students and shall be aligned with the state content standards and curriculum framework. Suicide prevention instruction shall be incorporated into health education in an age appropriate manner and shall be designed to help students:

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. Develop coping and resiliency skills and self-esteem
3. Learn to listen, be honest, share feelings, and get help when communicating with friends who show signs of suicidal intent
4. Identify trusted adults, school resources, and/or community crisis intervention resources where youth can get help and recognize that there is no stigma associated with seeking services for mental health, substance abuse, and/or suicide prevention

STUDENT IDENTIFICATION CARDS

When issuing student identification cards for students in grades 7-12, they shall include the National Suicide Prevention Lifeline telephone number (1-800-273-8255), Crisis Text Line (texting HOME to 741741), and/or a local suicide prevention hotline telephone number and National Domestic Violence Hotline telephone number (1-800-799-7233).

INTERVENTION

Intervention toward suicide awareness and prevention shall include, but not limited to:

1. Students shall be encouraged to notify a teacher, principal, counselor, or other adult when they are experiencing thoughts of suicide or when they suspect or have knowledge of another student's suicidal intentions
2. Methods for promoting a positive school climate that enhance students' feelings of connectedness with the school and that are characterized by caring staff and harmonious interrelationships among students
3. The provision of information to parents/guardians regarding risk factors and warning signs of suicide, the impact of the youth suicide problem, VCOE's suicide prevention policy, basic steps for helping suicidal youth, and/or school and community resources that can help youth in crisis
4. Crisis intervention for addressing suicide threats or attempts
5. The creation and implementation of programs and/or activities on campus that raise awareness about mental wellness and suicide awareness and prevention

Every statement regarding suicidal intent shall be taken seriously. Whenever a staff member suspects or has knowledge of a student's suicidal intentions based on the student's verbalization or act of self-harm, he/she shall promptly notify the principal, as well as, the school counselor, school psychologist, or school therapist.

A school employee shall act only within the authorization and scope of his/her credential or license. An employee is not authorized to diagnose or treat mental illness unless he/she is specifically licensed and employed to diagnose or treat mental illness.

Any personal information that a student discloses to licensed or credentialed personnel, shall generally not be revealed, released, referenced, or discussed with any third party, unless he/she has reasonable cause to believe that disclosure is necessary to avert a clear and present danger to the health, safety, or welfare of the student or others. In this case, the counselor, therapist, or licensed personnel shall report this information to the principal and student's parents/guardians. In addition, the school's counselor or psychologist may disclose information of a personal nature to psychotherapists, other health care providers, or the school nurse for the sole purpose of referring the student for mental health services and/or treatment.

When a suicide attempt or threat is reported, the principal or designee shall ensure student safety by taking the following actions:

1. Immediately securing medical treatment and/or mental health services as necessary

2. Notifying law enforcement and/or other emergency community assistance if a suicidal act is being actively threatened
3. Keeping the student under continuous adult supervision until the parent/guardian and/or appropriate support agent or agency can be contacted and intervenes to take over physical care and supervision
4. Removing other students from the immediate area as soon as possible

The principal or designee shall document the incident, including the steps that the school took in response to the suicide attempt or threat.

The principal or designee shall follow up with the parents/guardians and student in a timely manner to provide referrals to appropriate mental health services as needed. In the event of a suicide attempt, the principal or designee shall discuss with the family how they would like to respond to the attempt, while minimizing misinformation among staff and students.

For any student returning to school after a mental health crisis, the principal or designee and/or school counselor or psychologist may meet with the parents/guardians and, if appropriate, with the student to discuss re-entry and appropriate next steps to safely ensure the student's readiness for return to school. VCOE may require a physician's release to return to school. Parental/guardian consent shall be obtained to share pertinent information to ensure the facts regarding the crisis are correct, to support re-entry, and to provide accommodations as necessary.

If the parents/guardians do not access treatment for the student, the Principal or designee may meet with the parents/guardians to identify barriers to treatment and assist the family in providing follow-up care for the student. If follow-up care is still not provided, the principal or designee shall consider whether he/she is required, pursuant to laws for mandated reporters of child neglect, to refer the matter to the local child protective services agency.

POSTVENTION

In the event that a student dies by suicide, the Superintendent or designee shall communicate with the student's parents/guardians to offer condolences, assistance, and resources. In accordance with the laws governing confidentiality of student information, the Superintendent or designee shall obtain consent from the parents/guardians regarding facts that may be divulged to notify students, parents/guardians, and staff.

The Superintendent or designee shall implement interventions to address the grief of students and staff and to identify those significantly affected by the suicide to minimize the risk of imitative suicide or suicide contagion. He/she shall provide students, parents/guardians, and staff with information on support services, counseling, and/or referrals to community agencies as needed. School staff may receive assistance from school counselors or other mental health professionals in determining how best to discuss the suicide or attempted suicide with students.

Any response to media inquiries shall be handled by the Communications Director who shall not divulge confidential information. The response shall not sensationalize death by suicide and shall focus on the postvention plan and available resources.

After any suicide or attempted suicide by a student, the Superintendent or designee shall provide an opportunity for all staff who responded to the incident to debrief and receive support.

Long-term suicide postvention responses, which should be considered include:

1. Important dates (anniversary of death, deceased's birthday, or graduation)
2. Support for siblings, close friends, teachers, and staff
3. The impact of long-term memorials, which could glamorize suicide or impact emotionally vulnerable students at risk for suicide