

HOW TO DEVELOP A COMPREHENSIVE SCHOOL SUICIDE PREVENTION PROGRAM:

**A TRAINING MANUAL TO ASSIST
SCHOOLS IN PROVIDING EFFECTIVE
SCHOOL SUICIDE PREVENTION**

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Manual Developed for the
Ohio Department of Mental Health and Addiction Services

April 1, 2020

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MANUAL PURPOSE

This training manual provides critical information on how to develop and implement a Comprehensive School Suicide Prevention Program in your school.

WHAT IS COMPREHENSIVE SCHOOL SUICIDE PREVENTION AND WHY IS IT IMPORTANT?

Comprehensive School Suicide Prevention describes a set of school-based strategies aimed at preventing and addressing adolescent suicide on multiple levels. Effective comprehensive school suicide prevention programs consist of three levels: Primary Prevention (prevention), Secondary Prevention (intervention), and Tertiary Prevention (postvention). All three levels are needed for schools to comprehensively address adolescent suicide. This manual provides an overview of these prevention levels and provides practical steps to ensure that each level is effectively addressed by a school system.

Comprehensive school suicide prevention is important because efforts can be made within the school to protect adolescents from suicide as well as to quickly detect warning signs and risk factors in adolescents who are suicidal. This ensures that adolescents at risk receive the help they need. Since adolescents spend such a large amount of time at school, the school serves an ideal setting for prevention efforts. Research indicates that many adolescents first turn to a peer when experiencing personal problems or emotional distress. In addition, the overwhelming majority of adolescents contemplating suicide shows warning signs. Oftentimes, these warning signs are displayed at school. Thus, it is imperative for schools to have faculty, staff and students educated regarding suicide warning signs as well as the appropriate steps to take for assistance.

HOW TO DEVELOP A COMPREHENSIVE SCHOOL SUICIDE PREVENTION PROGRAM

The following steps are key to effectively developing and implementing a Comprehensive School Suicide Prevention Program:

- **PRIMARY PREVENTION**
 - Develop a School Suicide Prevention Policy
 - Educate School Faculty and Staff on Warning Signs
 - Ensure School Faculty and Staff Collaboration
 - Include Suicide Prevention Education in Curriculum
 - Develop a Peer Assistance Program
 - Implement Activities that Increase School Connectedness
 - Develop School, Family and Community Partnerships
 - Establish a Crisis Intervention Team

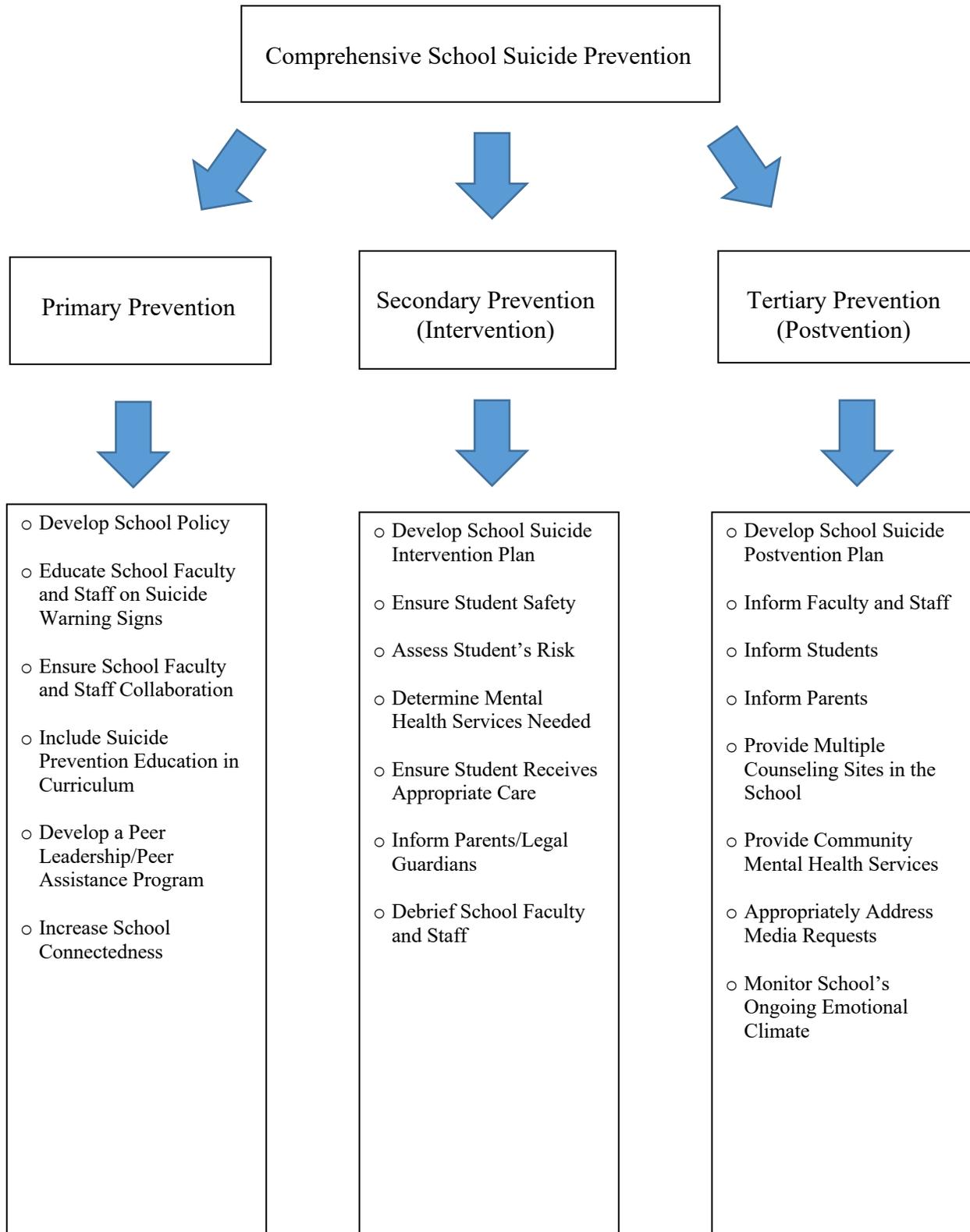
- **SECONDARY PREVENTION**
 - Develop School Suicide Intervention Plan
 - Ensure Student Safety
 - Assess Student's Risk
 - Determine Mental Health Services Needed
 - Ensure the Student Receives Appropriate Care

- Inform Parents/Legal Guardians
- Debrief School Faculty and Staff

- **TERTIARY PREVENTION**

- Develop a School Postvention Plan
- Provide Immediate Response
- Inform Faculty and Staff
- Inform Students and Parents
- Provide Counseling Sites in the School
- Provide Additional Mental Health Services
- Appropriately Handle Media Requests
- Follow-up with Student, Family and Mental Health Services
- Monitor School's Ongoing Emotional Climate

COMPREHENSIVE SCHOOL SUICIDE PREVENTION PROGRAM



PRIMARY PREVENTION

School Suicide Primary Prevention refers to all school programs and activities aimed at preventing student suicide thoughts, attempts and completions. These activities should focus on raising faculty, staff and student awareness of suicide warning signs, risk factors and referral steps. In addition, faculty and staff should know the appropriate protocol and plan regarding what to do when they identify a student at risk. This requires much planning and training in order for all individuals to feel prepared and confident in effectively addressing suicide prevention.

Prevention is the most direct method for saving student lives from completed suicide and therefore should receive much attention. Being proactive in developing a suicide policy, plan and overall steps will help to ensure that the entire school community is mobilized to effectively prevent student suicide.

All school faculty and staff should share responsibility in identifying and helping students in need. The first step in developing a comprehensive school suicide prevention program is to establish primary prevention strategies. Such strategies set the stage for an effective and coordinated effort within the school.

The steps to establishing School Suicide Primary Prevention include the following:

- Develop a School Suicide Prevention Policy
- Educate School Faculty and Staff on Warning Signs
- Ensure School Faculty and Staff Collaboration
- Include Suicide Prevention Education in Curriculum
- Develop a Peer Leadership/Peer Assistance Program
- Implement Activities that Increase School Connectedness

DEVELOP A SCHOOL SUICIDE PREVENTION POLICY

WHY IS IT IMPORTANT TO DEVELOP A SCHOOL PREVENTION POLICY?

A school suicide prevention policy formally recognizes that the school is committed to student suicide prevention. A districtwide policy increases the likelihood that school suicide prevention programs will be effectively and consistently implemented throughout the entire school system. Without a school policy and support from district-level leaders, school programs are not likely to survive for the long-term. A proactive approach to suicide prevention will only be achieved when a district-level policy is in place. School-based suicide prevention and intervention programs increases significantly when schools have a written suicide policy.

HOW DO WE DEVELOP A SCHOOL SUICIDE PREVENTION POLICY?

Schools should develop specific written suicide policy that formally state that the school considers suicide prevention to be a priority. This is essential because it asserts that the school recognizes suicide as a major problem among youth which warrants considerable attention. For optimal success, school programs and policies should occur concurrently at the school level and district level.

The policy should state specific strategies that the school will use to build protective factors in youth that help to prevent engagement in suicidal thoughts and behaviors. Students who have a high level of school connectedness (feel positively connected to their school) are significantly less likely to engage in suicidal behavior. Therefore, the policy should state that connectedness strategies will be developed and implemented. Establishing a plan on how the school will build a sense of school connectedness among students is essential in preventing suicide.

The policy should clearly describe the specific procedures faculty and staff are to take when a student at-risk for suicide is identified. School faculty and staff need to understand steps to follow after detecting a student at-risk. In so doing, students can be referred to the appropriate professionals and receive the help they need.

The policy should also describe the procedures faculty and staff should take when a student threatens or attempts suicide on school grounds. It is essential that faculty, staff and students all feel safe on school grounds. Therefore, when a student threatens suicide on grounds, a detailed set of steps should be followed.

Specific criteria should be established that will be utilized by school counselors and school mental health professionals to assess the lethality of a potential suicide attempt. Such information is used to determine next steps in assisting the student.

The policy should describe the procedures faculty and staff should take the day after a student has completed a suicide. Various logistical steps need to be carefully considered and determined. A clear plan that is developed proactively will ensure that faculty and staff are prepared to carry out agreed upon steps with students the day after a suicide completion.

The policy should detail how the suicide prevention program will be evaluated. Evaluating the suicide prevention program will help to assess the overall efficacy of all prevention efforts.

EDUCATE SCHOOL PROFESSIONALS ABOUT SUICIDE WARNING SIGNS

Effective school-based suicide prevention programs identify students at risk for suicide. Therefore, school professionals (teachers, principals, nurses, counselors, and school staff) should be educated about the warning signs to youth suicide. School professionals believe addressing students' mental health needs is part of their role and that identifying students at suicide risk is one of the most important things they could ever do within the school. Nevertheless, a sizeable percentage of school professionals do not feel confident in identifying suicide warning signs.

Training on warning signs and risk factors is needed. School professionals who work at a school that has offered a recent in-service on suicide prevention are four times more likely to feel confident in identifying at-risk students. Ongoing faculty and staff in-services addressing suicide warning signs should be delivered. In this manner, at-risk students can be more quickly identified and receive the help that they need.

Schools should provide annual in-service trainings to faculty and staff regarding suicide warning signs and risk factors. Such trainings will ensure that professionals in the school are current and up-to-date regarding adolescent suicide.

School professionals need to be aware of common warning signs to adolescent signs. Suicide warning signs include behavioral warning signs, verbal warning signs and stressful life events. Listed below is a table providing examples:

SUICIDE WARNING SIGNS

Behavioral Warning Signs	Verbal Warning Signs	Stressful Life Events
Experiencing sadness, unhappiness and crying spells	"I am going to kill myself."	Experiencing changes in close relationships
Showing feelings of helplessness/hopelessness	"I want to die."	Having previously attempted suicide
Having changes in school performance and grades	"I can't stand living anymore."	Having a previous suicide in the family
Displaying irritability	"Don't worry about me, I won't be around much longer."	Experiencing recent disappointments (loss of job)
Showing feelings of restlessness and agitation	"I don't want to be a burden anymore."	Experiencing recent losses (death of a loved one)
Experiencing sudden weight loss or weight gain	"I've had it; I don't want to bother anyone with my troubles anymore."	Having a serious illness or believing one is seriously ill
Having loss of energy or feeling fatigued	"My family would be better off without me."	
Having problems concentrating, remembering and making decisions	"I've had enough; I'm ending it all."	
Showing no interest in once pleasurable activities		
Abusing alcohol or other substances		
Withdrawing and isolating from		

others		
Giving away cherished possessions		
Talking persistently lot about death or suicide (morbid ideation)		

ENSURE COLLABORATION AMONG TEACHERS, NURSES, AND COUNSELORS

While it certainly is not the role of faculty to diagnose and treat suicidal adolescents, it is their role, as well as the role of other school professionals, to assist in recognizing students at risk and convey that information to school counselors and school psychologists.

School faculty and staff have been found to be good informants concerning student mental health issues. Therefore, school professionals should collaborate with one another to help prevent adolescent suicide.

Teachers, school nurses, school counselors, school psychologists and all school staff should work together to prevent suicide. A coordinated and comprehensive program requires all professionals in the school to collaborate and communicate.

Examples of such collaborations include teachers and nurses referring at-risk students to counselors, counselors visiting classrooms to talk about mental health issues and psychologists facilitating staff training programs regarding the warning signs and risk factors for adolescent suicide and the appropriate staff intervention steps.

Suicide prevention training programs for school professionals have consistently resulted in increased participant awareness of suicide warning signs, knowledge of treatment resources, and willingness to make referrals.

INCLUDE SUICIDE PREVENTION EDUCATION IN THE TEACHING CURRICULUM

Due to the prevalence of adolescent suicide, school districts nationwide are beginning to require teaching about suicide in the curriculum. Greater than half of all schools teach about suicide prevention. More prevention education is needed.

Since adolescents spend a great amount of time in school, the school can serve as an ideal venue for prevention education. Most adolescents who are suicidal will tend to show suicide warning signs to others, including their peers. In addition, peers are the individuals who adolescents most often turn to in confiding their feelings and problems. Thus, all students should be aware of suicide warning signs and appropriate steps to take when a friend shows signs or states that they are contemplating suicide.

Many school professionals fear that teaching about suicide prevention provides students with ideas and methods about killing themselves and therefore leads to increased suicide attempts. However, research studies show that when issues concerning suicide are taught in a sensitive and educational manner students tend to show significant gains in knowledge about suicidal warning signs and more positive attitudes toward help-seeking behaviors with troubled peers.

Suicide education provided in the curriculum provides adolescents with information regarding the signs and appropriate steps to take when a friend is suicidal. Students need to be educated regarding behavioral warning signs, verbal warning signs and stressful life events that place adolescents at elevated risk for suicide.

Suicide prevention education should also include information on protective factors and resiliency skills that can be bolstered to protect against suicide. Educational lessons on prevention that include emotional health promotion, resiliency building, stress management and effective interpersonal communication are essential to overall students' health.

By including suicide education within the curriculum, schools are stating that suicide prevention is a priority. In addition, inclusion in the curriculum ensures that the information will be taught as opposed to "possibly being taught if there is time left."

DEVELOP A PEER LEADERSHIP/PEER ASSISTANCE PROGRAM

More than half of high school students report that they would not feel comfortable talking to a school professional about a personal problem and only one in three state that they would feel comfortable talking to a counselor if they had problems. However, three out of four adolescents state that they would first turn to a friend for help if they were contemplating suicide.

Therefore, schools should be proactive in implementing peer assistance programs. These programs educate students about the warning signs of suicide and how to refer troubled friends to school counselors and mental health professionals.

The most effective peer assistance programs in schools tend to be peer-led in nature. Students lead in the delivery of information and educational materials. In addition, students determine how their peers will receive suicide prevention information and the overall processes that will be utilized. Students will lead communication efforts to enhance peer awareness of suicide prevention.

An adult school professional (teacher, counselor, nurse, etc.) serves as the mentor of the program. This individual will help guide students and mentor students regarding effective educational strategies, awareness enhancement techniques, and communication skills. The adult mentor also assists students in determining their overall plan on how they will increase awareness and enhance prevention.

Results of peer assistance programs have consistently shown increases in student knowledge and awareness regarding warning signs and help resources, as well as greater likelihood to refer at-risk peers to school counselors and mental health professionals.

IMPLEMENT ACTIVITIES THAT INCREASE SCHOOL CONNECTEDNESS

Research has consistently shown that school connectedness helps to protect adolescents against depression and suicide. The National Longitudinal Study on Adolescent Health surveyed over 90,000 students in grades 7 through 12 and found that adolescents' perceived school connectedness is the leading protective factor against student suicidal behavior. More specifically, students who feel connected to their school (e.g., feel their teachers treat them fairly, feel close to people at school, and feel a part of their school) are significantly less likely than students who did not feel connected to their school to seriously consider or attempt suicide.

School professionals should strive to provide an emotionally supportive environment in which students feel that they fit in, are cared for and are encouraged to approaching staff members for help when problems arise.

In order to achieve an emotionally supportive environment, schools should provide in-services to faculty and staff underscoring the importance of building a positive sense of school connectedness. Faculty and staff should be encouraged to consistently act in a caring and nurturing manner to students and remain attentive to students' needs and wishes.

Faculty and staff should consider multiple approaches and activities in which they can help to build positive connections. Some strategies will work for some students while others will work for other students. Thus, it is imperative for schools to use an array of approaches. Some examples of connection-building strategies include:

- o Positive teacher-student interactions
- o Icebreaker activities and boundary breakers
- o Responsibilities in class and school
- o Academic organizations and groups
- o Athletic teams and school clubs
- o Empowerment activities
- o Positive role-modeling
- o Mentoring programs
- o Team-building efforts
- o Peer teaching
- o Active listening

School professionals should seek to involve students in school decisions, develop peer mentoring programs, offer after-school student clubs, organizations and activities and create small-sized student learning groups. Creating small-sized learning groups allow for stronger connections among students.

In addition, the relationship between a school's physical appearance and its emotional climate should not be ignored. Flaky ceilings, graffiti-tainted walls, scuffed-up floors, dirty bathrooms and crumbling sidewalks can promote a "Why bother, no one cares" attitude among students. In turn, students may feel disconnected and isolated from their school. School professionals can overcome these issues by 1) acknowledging the message a school's physical appearance sends to

students, faculty and staff and 2) taking steps to clean up the physical appearance of the building, thus creating a positive environment conducive to student learning, growth and development.

DEVELOP SCHOOL, FAMILY AND COMMUNITY PARTNERSHIPS

DEVELOP SUPPORTIVE SCHOOL-FAMILY PARTNERSHIPS

Most parents want to be involved in their children's education and adoption of healthy behaviors. Schools should ensure that there are opportunities for parents to become involved. When schools have good relationships with parents, parents are more likely to support and cooperate with school health programs.

Students feel most competent when their schools involve families in their educational programming and support. In addition, students thrive when schools and families deliver clear and consistent messages.

Therefore, schools should inform parents of suicide prevention programs and seek their assistance in determining needed prevention activities. Parents can assist in distributing program announcements via social media. In so doing, broader community support for school suicide prevention may be gained.

Schools and families should work together to determine strategies to establish positive student connections at school and at home. Through collaboration, adolescents can experience a firm foundation of connectedness.

DEVELOP SUPPORTIVE SCHOOL-COMMUNITY PARTNERSHIPS

The school should work at building and maintaining healthy relationships with other community agencies. A comprehensive suicide prevention program cannot fully function without attaining outside support.

Schools should be aware of the existing agencies and services that they will contact following a student suicide threat or attempt. By establishing positive relationships with community agencies (e.g., police, hospital emergency department, youth health services, psychiatric facilities) well in advance, schools can most effectively respond to a student suicide threat or attempt.

In addition, community agencies can assist in school suicide prevention by having representatives present on the warning signs, prevention steps, and available help resources regarding adolescent suicide.

Schools should work with nearby schools to share strategies and prevention plans. In so doing, schools develop a network of support throughout the community.

ESTABLISH A SCHOOL CRISIS INTERVENTION TEAM

Comprehensive school suicide prevention programs must have a well-developed and coordinated team of professionals. Such a team should be proactively established in order to effectively address suicide threats or attempts.

School crisis intervention teams should include a diverse group of school professionals (e.g., principal, counselor, teacher, school nurse, etc.). Each team should have a leader as well as a backup leader to ensure that there is at least one team leader in the building at all times.

This team should develop a formal school suicide intervention plan which specifically identifies the steps to be carried out when a student threatens or attempts suicide.

The School Crisis Intervention Team should:

- Determine members of the response team
- Identify a crisis response coordinator and back-up coordinator
- Develop the overall school plan following a student suicide
- Detail the procedures faculty and staff are to take following a student suicide
- Detail the plan for contacting the surviving family to determine the school communication steps
- Detail the overall communication plan for students, faculty, staff, and parents
- Detail the overall communication plan for the media and community
- Establish community partners to assist in school efforts
- Describe intervention steps to take when identifying students at increased risk
- Detail the team debriefing process to evaluate steps taken following a crisis response
- Describe postvention steps to take after a suicide occurs
- Provide annual postvention trainings

Annual suicide intervention trainings should be conducted by the crisis intervention team. Team members need to feel confident and comfortable in successfully carrying out the specific steps outlined on the intervention plan.

It is unfortunately, ironic that while every school routinely practices fire drills, few practice annual suicide intervention rehearsals among faculty and staff, even though significantly more adolescents die each year from suicide than from fire.

SECONDARY PREVENTION (INTERVENTION)

School Suicide Secondary Prevention (Intervention) refers to the appropriate steps school professionals should take when a student shows warning signs, threatens suicide, or attempts suicide. When an adolescent student shows warning signs or makes a suicidal threat to a school professional it is crucial that the school professional follow the steps outlined in the school suicide intervention plan.

School suicide secondary prevention requires a proactively developed plan to address suicide warning signs, threats and attempts. A crisis intervention team should be established to lead all steps. The crisis intervention team should consist of a diverse array of school professionals (e.g., principal, counselor, teacher, school nurse, etc.) who are all fully interested and invested in being a member of this team. The crisis intervention team develops the suicide intervention plan. Each crisis intervention team should have a Team Leader to oversee the situation and ensure that all appropriate actions are taken. The Team Leader coordinates trainings, assigns team member roles and responsibilities, and communicates with school administrators.

All school staff should be familiar with the following crisis intervention steps to take when a student threatens suicide. A specific set of strategies should be used for secondary prevention efforts within the school.

The steps to establishing School Suicide Secondary Prevention (Intervention) include the following:

- Develop a School Suicide Intervention Plan
- Ensure Student Safety
- Assess Student's Risk
- Determine Mental Health Services Needed
- Ensure Student Receives Appropriate Care
- Inform Parents/Legal Guardians
- Debrief School Faculty and Staff
- Follow-up with Student, Family and Mental Health Services

DEVELOP A SCHOOL SUICIDE INTERVENTION PLAN

School suicide secondary prevention begins with establishing a clear and specific plan on how the school will address suicide warning signs, threats and attempts. The plan needs to be proactively developed and should outline the appropriate steps to follow when a student:

- Displays suicidal warning signs
- Threatens to attempt suicide
- Attempts suicide on school grounds

A crisis intervention team should be developed which consists of an array of school professionals (e.g., principal, counselor, teacher, school nurse, etc.). The crisis intervention team develops the suicide intervention plan. The suicide intervention plan needs to be clear, detailed, and straightforward to follow.

Each crisis intervention team should have a Team Leader as well as a backup leader to ensure that there is at least one team leader in the building at all times. The Team Leader should oversee the situation and ensure that all appropriate actions are taken. The Team Leader coordinates trainings, assigns team member roles and responsibilities, and communicates with school administrators.

The intervention steps should focus on securing the surrounding area, maintaining student body safety and referring the suicidal student to the necessary mental health professionals.

All school faculty and staff should be made aware of the crisis intervention plan and appropriate steps to take when a student displays suicide warning signs, threatens suicide, or attempts suicide on school grounds. Annual in-service trainings should be provided to train faculty and staff on the crisis intervention plan.

Faculty and staff need to feel confident and competent in carrying out the intervention steps in order for the student at-risk to receive the appropriate help and care. In addition, by following the intervention steps, faculty and staff help to secure the safety of other students throughout the school.

The absence of a clear suicide intervention plan can contribute to unwanted suicide contagion, copycat suicidal behavior, and unnecessary grief and anxiety. Thus, it is critical for schools to establish a detailed plan in order to address crises in a disorganized manner.

The remaining intervention steps to the crisis intervention plan detail appropriate actions to take in suicide situations.

ENSURE STUDENT SAFETY

When a school professional confronts an adolescent who has expressed suicidal thoughts the main objective is to prevent the act. A school professional should always remain with the suicidal youth. At this time the school professional should remain calm, actively listen, ask questions for clarity, encourage open expression of feelings, and refrain from promising confidentiality or secrecy.

School professionals should be empathetic and direct with the student and talk openly about his/her suicidal thoughts. Faculty and staff should not be afraid to use the word *suicide*. Using the word *suicide* is not leading and does not place ideas in the student's head

School professionals need to be honest with the student at all times. Students can be offered hope but unrealistic should be avoided. School professionals should refrain from offering advice.

School professionals should ensure that the student is aware of what is happening during this intervention. This can help to reduce anxiety that the student may be experiencing and bring ease to the situation. The student needs to know that the situation is being taken seriously and is in the hands of responsible professionals.

STEPS TO TAKE WHEN A STUDENT THREATENS SUICIDE

What School Professionals Should Do	What School Professionals Should Not Do
<ul style="list-style-type: none"> • Actively listen • Ask direct questions • Stay with the student • Focus on the present • Alert the crisis intervention team • Refer the student to a mental health professional 	<ul style="list-style-type: none"> • Deny the student's feelings • Beat around the bush • Leave the student alone • Promise to keep secrets • Try to be a hero • Handle the situation alone

The school professional should take the student to a prearranged place which is nonthreatening and away from other students. At this time, the school professional should continue to engage in active listening, encourage the student to verbalize his/her feelings and to

The school professional with the student should ask the student if he/she has a specific suicidal

plan, when the plan is to take place, and if he/she has access to carrying out that plan. Such information is critical to assessing the risk level of the situation.

Another school professional should be informed of the situation. This school professional should then alert the crisis intervention team. Once this school crisis intervention team is activated then the crisis intervention team leader should begin carrying out the predetermined steps for the crisis.

The rest of the student body should be kept away from this student in order to secure the safety of the suicidal student as well as the safety of all other students, faculty and staff.

ASSESS THE STUDENT'S SUICIDAL RISK

During this intervention step, the crisis intervention team leader should take the lead in properly assessing the student's risk. As aforementioned, the student should be asked if he/she has a specific suicidal plan, when the plan is to take place, and if he/she has access to carrying out that plan.

The Schools Suicide Intervention Plan should account for three different levels of risk:

- Moderate risk situation
- Severe risk situation
- Extreme risk situation

Moderate Risk Situation occurs when: 1) a faculty member or staff member identifies suicidal warning signs in a student or 2) when a student verbalizes suicidal thoughts but has no specific suicide plan and does not have access to a dangerous or lethal weapon. Appropriate assessment of the risk of the situation is crucial since it determines the specific services needed.

Severe Risk Situation occurs when a student verbalizes suicidal thoughts and has a specific suicide plan but does not have access to a dangerous or lethal weapon presently at hand. This student however may possibly have access to lethal means at home. This is a critical situation since the student has progressed from suicidal thoughts to planned suicidal actions. Immediate intervention is needed.

Extreme Risk Situation occurs when a student verbalizes suicidal thoughts, has a specific suicide plan, presently has access to a dangerous or lethal weapon (has the lethal weapon at hand) to carry out the plan, and will not relinquish the dangerous or lethal weapon. This is the highest risk situation since the student has progressed from suicidal thoughts to planned suicide to planned suicide with action to carry out the plan. Immediate intervention is needed.

Steps should be in place to address each of these different risk situations. The specific actions to follow for each of these risk situations is provided on the following page.

DETERMINE THE MENTAL HEALTH SERVICES NEEDED

Mental health services will need to be determined for each of the different risk situations. These service needs should be decided upon well in advance of any potential suicide crisis situation. Again, having the plan proactively developed is critical to an effective and coordinated intervention process. For each of these different risk situations, it is critical that the student is not left alone until he/she receive the appropriate help that is needed.

During a **Moderate Risk Situation**, the school professional should remain with the student, stay calm, and encourage the student to talk and express his/her feelings. The school professional should continue talking with the student to gather more information regarding whether or not the student has considered a specific suicide plan and has access to lethal means.

If the student does not have any specific plan or access to lethal means, then this situation remains at the moderate risk level. The Crisis Team Leader should be notified immediately. The parents should subsequently be informed of the situation and recommended and referred to seek help from a community mental health professional.

During the **Severe Risk Situation**, the school professional should remain with the student, stay calm, and encourage the student to talk and express his/her feelings. The school professional should continue talking with the student to gather information regarding the specificity of the student's suicide plan and whether the student has immediate access to the lethal means. The Crisis Team Leader should be notified immediately. The Team Leader should subsequently activate the Suicide Intervention Team and alert the school administrators. The student's parents or legal guardians should be notified and informed of the situation. A community mental health agency should be contacted and requested to assist in intervening. The school professional and an assigned Intervention Team Member should remain with the student until the mental health agency arrives and cares for the student. The mental health agency or parents/legal guardians should transport the student to a mental health facility or hospital. If a mental health agency or the parents/legal guardians will not transport the student, then the student should be transported by the crisis intervention team to the nearest hospital emergency room. Prior to this transportation, the Crisis Team Leader, assigned team members, and administrators should meet with the parents/legal guardians to agree upon a specific treatment plan.

During the **Extreme Risk Situation**, the school professional with the student should remain with the youth, stay calm, and encourage the student to talk and express his/her feelings. The school professional should not attempt to take the lethal means away by force but should ask the student to relinquish it. The Crisis Team Leader should be notified immediately. The Team Leader should subsequently activate the Suicide Intervention Team and alert the school administrators. The student's parents or legal guardians should be notified and informed of the situation. A community mental health agency and law enforcement should be contacted and activated. The school professional and Crisis Team Leader should continue calmly talking with the student, focusing on the present, and encouraging the student to relinquish the lethal weapon. Once the student has relinquished the lethal weapon to the school professional, the situation becomes a severe risk situation. The Crisis Team Leader, assigned team members, administrators and mental health agency should discuss with the parents/legal guardians the immediate intervention

protocol. The mental health agency should transport the student to a mental health facility or hospital. If a mental health agency will not transport the student, then the student should be transported by the crisis intervention team to the nearest hospital emergency room. There are two basic goals during an extreme risk situation: 1) to prevent the student from completing suicide, and 2) move others to safety.

ENSURE THAT THE STUDENT RECEIVES APPROPRIATE CARE

The school should determine whether emergency or short-term procedures were followed through as planned. In addition, the school should be aware of the long-term services that were arranged.

If long-term services were not arranged, then the school should contact a community mental health agency for assistance. The suicide intervention plan begins with detection of the situation and proceeds with mental health care for the student. Concern for the student should be consistently demonstrated.

To most effectively help students at-risk, schools need to remain vigilant in making sure that appropriate referrals were made and that the student is receiving the needed mental health assistance. The Crisis Intervention Team Leader should take the lead in this effort. For many schools, the school counselor or school nurse acts to determine that the needed referral was made.

Consistent communication with the student's parents or legal guardians is required. The Crisis Intervention Team Leader or assigned intervention team member who handles family communication should inform the intervention team and school administration of the mental health care that is utilized.

DEBRIEF SCHOOL FACULTY AND STAFF

School Suicide Intervention steps should be followed by a debriefing of all faculty and staff involved. This will allow participants an opportunity to process their feelings, concerns, and suggestions. At this time, the crisis intervention team should also assess whether any of the strategies actually exacerbated the situation. Strategies can then be maintained or modified based on their perceived effectiveness.

In addition to the faculty and staff directly involved, all faculty, staff and students should be informed of the situation. This information should be general in nature and aimed to simply convey that the event occurred and that all individuals are safe. Confidentiality should be maintained. It is imperative that all individuals feel safe and supported. Students who observed the situation or who are emotionally distressed by the situation should be encouraged to verbalize their thoughts and feelings with school professionals. School professionals should inform students where they can receive help to process any feelings of anxiety, grief, guilt or distress.

School faculty and staff should be active in observing the behaviors of peers of the student who displayed suicidal behavior since they are now at elevated risk for suicide. The potential for copycat suicide attempts should be prevented.

In addition to students, faculty and staff should also be encouraged to verbalize their feelings regarding the situation. Pre-arranged venues should be utilized to allow faculty and staff to share their thoughts and concerns. These process groups are often facilitated by a school counselor or other mental health professional within the school.

TERTIARY PREVENTION (POSTVENTION)

School Suicide Tertiary Prevention (Postvention) refers to school activities which occur after a student has attempted suicide or died due to suicide. When a suicide occurs, it is a traumatic event for many survivors. This includes students, faculty, staff, parents, families, and the overall community. Many survivors are at increased risk for suicide themselves.

Suicide clusters are well established among adolescents. Thus, the school response to an actual suicide is crucial. The goal of postvention is to minimize the trauma to students, faculty, staff, parents, families, and community residents. Effective postvention strategies can reduce the likelihood of further suicides and ensure individuals receive the help they need.

School Suicide Postvention activities are most effective when they are planned out well in advance of any actual emergency. It is worthy to note that the manner in which school professionals respond to a school suicide can help to serve as a line of prevention for future suicidal thoughts and behaviors among students, faculty and staff. In this manner, further trauma can be averted.

School Suicide Postvention strategies are critical to appropriately addressing feelings of grief, ensuring that individuals receive the help they need. Being prepared and making certain that all strategies are proactively in place greatly helps to provide for an organized and efficient response.

School Suicide Postvention requires a proactively developed plan to address specific postvention steps and strategies. The crisis intervention team should develop the suicide postvention plan. Once established, all school staff should be familiar with the postvention plan.

The steps to establishing School Suicide Postvention include the following:

- Develop School Suicide Postvention Plan
- Inform Faculty and Staff
- Inform Students
- Inform Parents
- Provide Multiple Counseling Sites in the School
- Provide Community Mental Health Services
- Appropriately Address Media Requests
- Monitor School's Ongoing Emotional Climate

DEVELOP A SCHOOL SUICIDE POSTVENTION PLAN

Suicide is a highly emotional and traumatic situation for many individuals associated with the school. Therefore, it is imperative to appropriately respond to the suicide by following an established school suicide postvention plan.

The goal of the school suicide postvention plan is to minimize trauma to students, faculty and staff and to reduce the likelihood of further suicides. Being prepared and making certain that all steps are proactively in place greatly helps to provide for an organized and efficient response.

School suicide postvention plans are an important part of comprehensive prevention since, when carried out properly, they can prevent potential cluster and copycat suicides. School Suicide Postvention plans should begin with a prompt response following a suicide (within 24 hours of the suicide). The School Crisis Intervention Team should be activated following a suicide and lead school postvention efforts. The Team should work with the surviving family regarding communication to faculty, staff, students, parents and the community.

The School Suicide Postvention Plan should highlight the importance of acting in a concerned and professional manner and provide information to faculty, staff, students, parents, families and the community. Multiple counseling should be made available for individuals who need to process their feelings. The school should provide small groups for students to express their feelings.

The school should enact the team of community of mental health professionals to assist with school efforts. The school should also provide specific school and community resources to students, faculty, staff and parents

Specific media guidelines should be adhered and a school liaison should be assigned to address media inquiries. Glorification of the suicide should be avoided. The School Postvention Plan should address a memorialization plan.

Finally, the overall school's ongoing emotional climate should be monitored closely. To help prevent suicide contagion, school professionals should seek to identify students at risk for suicide or who are displaying warning signs for suicide. Upon detection, students should be referred to school mental health professionals for assistance.

INFORM FACULTY AND STAFF

To ensure an effective school response to a suicide, school faculty and staff need to be informed of the facts and appropriate steps. Faculty and staff should be encouraged to implement the preplanned postvention steps developed by the crisis response team. The goal of these steps is to assist students in minimizing trauma and reducing further distress and suicides.

Being prepared ahead of time, will aid faculty and staff to respond in an organized and effective manner. Faculty and staff should be informed of the event and the overall school response.

POSTVENTION STEPS FOR INFORMING FACULTY AND STAFF

These Postvention Steps should be followed after a suicide occurs:

- Provide general facts and overall plan to faculty and staff
- Inform faculty and staff that the crisis response team has been mobilized
- Provide faculty and staff with a plan on addressing student questions/concerns
- Inform faculty and staff to refer community questions to crisis response team leader
- Inform faculty and staff to refer media inquiries to school media liaison
- Inform faculty and staff that there will be multiple counseling sites for students, faculty and staff
- Encourage faculty and staff to refer students at risk or in distress to school counseling sites
- Provide school and community resources to faculty and staff
- Encourage faculty and staff to share school/community resources with students
- Encourage faculty and staff to identify students at risk
- Encourage faculty and staff to seek to prevent suicide contagion
- Encourage faculty and staff to assist in identifying students at risk

INFORM STUDENTS

Following a suicide, a major concern is to provide factual information and emotional support to students. Schools should seek to reduce the potential for misinformation, rumors, speculation or miscommunication among students. Therefore, students need to be provided with accurate facts regarding the issue that are general in nature.

Schools should provide students with opportunities to express their emotions and identify strategies for managing them. Providing group and individual counseling sessions to students will help students to verbalize and process their feelings.

Students should also be informed by school faculty and staff regarding available counseling sites and where to go to process feelings of grief or distress. School faculty and staff should be available to provide emotional support and referrals to school counselors.

Schools should proactively determine the specific steps as to how students will be informed of the suicide. This will help to ensure that accurate, factual and beneficial information is disseminated.

POSTVENTION STEPS FOR INFORMING STUDENTS

These Postvention Steps should be followed after a suicide occurs:

- Provide students with accurate information
- Educate students regarding varied emotional responses to the loss
- Help to dispel misinformation and rumors
- Provide students with effective coping strategies
- Provide small groups in which students can express their feelings and learn about coping strategies
- Inform students that there will be multiple counseling sites available for them
- Provide students with emotional support
- Encourage students to refer peers at risk or in distress to a school counselor and school counseling sites
- Provide students with school and community resources
- Seek to prevent suicide contagion

INFORM PARENTS

Following a suicide, it is important to provide factual information to parents. Schools should promptly inform parents regarding the suicide as a means to reduce the potential for misinformation, rumors, and miscommunication. Parents need to be provided with accurate facts regarding the suicide as well as tips to follow in discussing suicide with their child.

Schools should inform parents on how the school will provide students with opportunities to express their emotions and receive emotional support. Counseling sites should be made available for parents to verbalize and process their feelings.

School should proactively determine the specific steps as to how parents will be informed regarding the suicide. Proactive and prepared steps will help to ensure that accurate and beneficial information is delivered to parents. This in turn will help parents and students to process their feelings.

POSTVENTION STEPS FOR INFORMING PARENTS

These Postvention Steps should be followed after a suicide occurs:

- Provide parents with accurate and factual information
- Inform parents regarding varied emotional responses children experience to loss
- Help to dispel misinformation and rumors
- Provide parents with effective coping strategies that they can share with their child
- Inform parents on how students will be informed of the suicide
- Inform parents how the school will provide small groups in which students can express their feelings and learn about coping strategies
- Inform parents how the school will provide students with multiple counseling sites
- Provide parents with tips on how to effectively provide their child with emotional support
- Encourage parents to refer students at risk or in distress to a school counselor and school counseling sites
- Provide parents with school and community resources
- Seek to prevent suicide contagion

PROVIDE MULTIPLE COUNSELING SITES IN THE SCHOOL

Experiencing a student suicide can be an extremely emotional and traumatic situation for many individuals. A primary goal of the school suicide postvention plan is to reduce trauma to students, faculty and staff. In addition, suicide contagion is well established among adolescents. Thus, multiple strategies should be utilized to reduce the likelihood of further suicides and ensure individuals receive the help they need.

Schools should therefore provide multiple counseling sites in the school which allow students to verbalize and process their feelings. Reaching out and contacting community mental health professionals as well as school counselors from nearby schools can assist the school in providing multiple counseling sites.

The use of small process groups for students are quite effective in allowing students to express their feelings, share their overall thoughts and concerns and learn about effective coping strategies.

School professionals should encourage students to continue processing their feelings with their parents.

Students should be educated regarding the fact that different people respond to trauma differently and that different people grieve differently. Each individual may handle and cope with the situation in a different manner. The most important point is for each individual to find ways that are comfortable, safe and effective in expressing their feelings.

Counselors in each of the counseling sites should provide students with school and community resources regarding suicide, grieving, trauma and coping.

Counseling sites in the school should also be used for faculty, staff and parents. All individuals who wish to share their feelings should be encouraged to attend.

POSTVENTION STEPS FOR PROVIDING MULTIPLE COUNSELING SITES IN THE SCHOOL

These Postvention Steps should be followed after a suicide occurs:

- Provide students with multiple counseling sites within the school
- Provide group counseling sites
- Provide one-to-one counseling sites
- Encourage students to express and verbalize their feelings
- Provide small groups in which students can express their feelings and learn about coping
- Encourage students to continue processing their feelings with their parents
- Educate students regarding the fact that different people respond to trauma differently and that different people grieve differently
- Provide students with school and community resources
- Provide counseling sites for faculty, staff and parents
- Seek to prevent suicide contagion

PROVIDE COMMUNITY MENTAL HEALTH SERVICES

The importance of providing multiple counseling sites in the school cannot be overstated. However, not all students will feel comfortable attending such sites. In addition, faculty, staff, parents and community residents may feel much more comfortable in seeking help from outside community mental health services.

Therefore, schools should provide information on mental health resources that are available throughout the community. It is thus critical that schools develop ongoing partnerships with community agencies and community professionals prior to any traumatic situation.

Schools should provide a listing of available mental health services as well informing students, faculty, staff and families regarding the types of resources that are available. Assigning a school professional to take the lead in these efforts is especially helpful. Many schools will have a school counselor, nurse, psychologist, social worker or other mental health professional to identify community professionals and build a community mental health resource guide.

Community mental health resource guides can be distributed to students, parents, families, faculty and staff via social media. In so doing, individuals may receive the help that they need.

APPROPRIATELY ADDRESS MEDIA REQUESTS

Essential goals of School Suicide Postvention are to minimize trauma and reduce the risk for additional suicides.

Schools should develop safe and appropriate messages in order to prevent suicide contagion (the process by which a suicide increase the risk of suicidal behavior in others). A school professional should be assigned as the school liaison and spokesperson to the media. This can ensure that messages are accurate, consistent and appropriate.

The manner with which the media covers a suicide can have deleterious consequences and contribute to increased suicidal behavior if improperly handled. Research indicates that the risk for suicide contagion is directly related to the content, amount, and duration of media coverage.

Therefore, schools should strongly encourage media professionals to follow the Ohio suicide reporting guidelines. These guidelines recommend professionals to 1) Limit contagion, 2) Frame the story ethically, 3) Use appropriate language, and 4) Provide suicide prevention resources. These guidelines can be found at: <https://suicideprevention.ohio.gov/Postvention/Media-Guidelines>.

Limit Suicide Contagion When Covering Suicide:

- Cover the story in a non-sensationalistic, sensitive way that respects the individual who died by suicide and those surviving this painful loss.
- If you include narrative that could cause intense emotional distress, use the phrase “Content Warning.”

Frame a Story Ethically:

- Consider the purpose of the story and how the narrative will impact your audience.
- Avoid reporting on the method of suicide

Use Appropriate Language:

- Do not use the term “committed suicide.” because of its association with moral failing.
- Instead, use objective terms such as “died by suicide,” “suicide death,” or “suicide attempt.”

Provide Suicide Prevention Resources:

- Include the message that those recovering can find support and treatments for depression.
- Highlight protective factors that lower the risk of suicide as well as effective coping strategies to manage crises.

School professionals should encourage the media to provide the National Suicide Prevention Lifeline telephone number (800-273-8255) and information on local mental health resources.

MONITOR SCHOOL'S ONGOING EMOTIONAL CLIMATE

Schools should remain aware of the elevated risk that students are at following a student suicide. Suicide contagion is a serious concern especially among adolescents. Thus, school professionals should continuously monitor the school's ongoing emotional climate.

This entails school professionals seeking to identify and detect warning signs for suicide in students. If a student displays warning signs, then the student should be encouraged to talk about his/her feelings and there should be a referral to the school counselor.

Students should be educated regarding suicide warning signs in their peers. Should they recognize these warning signs, then they should alert a school professional who can assist in referring the student to a school counselor.

Faculty, staff and students need to work collectively in helping to monitor to the emotional climate of the school following a suicide. Many schools will develop heightened suicide awareness campaigns and programs to assist in detecting those at risk, with the overall aim of getting students the help they need.

A main emphasis of mental health promotion programs in the school should be to inform students that there are resources to go to for help when feeling depressed, helpless or hopeless. The school mental health team can provide students with additional information on who and where to go for mental health assistance or to talk regarding their feelings and life situation.

The school should also seek opportunities to further build positive connections among students. Implementing strategies to get students positively connected to the school, faculty, staff and one another are key protective factors against suicide and many other risky health behaviors (e.g., violence, depression, alcohol and other substance use, etc.). Connection-building strategies should be developed and utilized.