

SUICIDE PREVENTION PLAN

The Governing Board of The Central Academy of Arts and Technology recognizes that suicide is a leading cause of death among youth and that an even greater number of youth consider (17 percent of high school students) and attempt suicide (over 8 percent of high school students) (Centers for Disease Control and Prevention, 2017).

The possibility of suicide and suicidal ideation requires vigilant attention from our school staff. As a result, we are ethically and legally responsible for providing an appropriate and timely response in preventing suicidal ideation, attempts, and deaths. We also must work to create a safe and nurturing campus that minimizes suicidal ideation in students. Recognizing that it is the duty of the school to protect the health, safety, and welfare of its students, this policy aims to safeguard students and staff against suicide attempts, deaths and other trauma associated with suicide, including ensuring adequate supports for students, staff, and families affected by suicide attempts and loss. As it is known that the emotional wellness of students greatly impacts school attendance and educational success, this policy shall be paired with other policies that support the emotional and behavioral wellness of students.

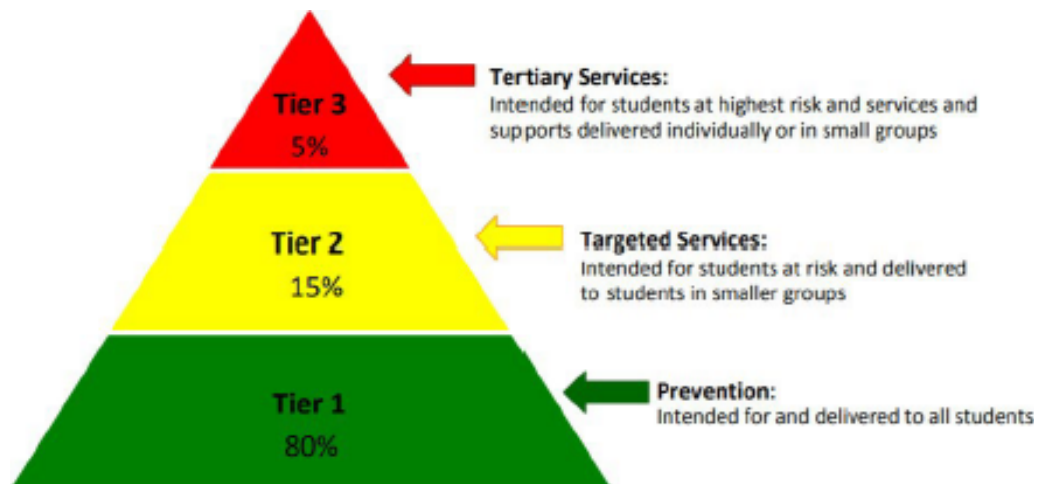
This policy is based on research and best practices in suicide prevention, and has been adopted with the understanding that suicide prevention activities decrease suicide risk, increase help-seeking behavior, identify those at risk of suicide, and decrease suicidal behaviors. Empirical evidence refutes a common belief that talking about suicide can increase risk or “place the idea in someone’s mind.”

In an attempt to reduce suicidal behavior and its impact on students and families, the Suicide Prevention team shall develop strategies for suicide prevention, intervention, and postvention, and the identification of the mental health challenges frequently associated with suicidal thinking and behavior. These strategies for prevention, intervention, and postvention shall include professional development for all school personnel in all job categories who regularly interact with students or are in a position to recognize the risk factors and warning signs of suicide, including substitute teachers, volunteers, expanded learning staff (after school) and other individuals in regular contact with students such as crossing guards, tutors, and coaches.

The Suicide Prevention team (Assistant Principal, designated teacher, and a psychologist), shall develop and implement preventive strategies and intervention procedures using the response to intervention triangle that include the following:

Prevention activities fall into Tier 1 and are intended for all students, whether at risk or not. Intervention activities, depending on the situation and level of risk, fall into Tier 2 or Tier 3.

Postvention activities engage all three levels, with some actions targeting the entire staff and student body, others focusing on those more affected by the crisis, and some interventions targeting students in an emergency situation after the loss of a classmate or friend.



This plan is part of CAAT's overall approach to prevention, intervention and response to students experiencing emotional and behavioral crises in our schools.

The Principal, Assistant Principal or a representative of CAAT shall involve school-employed mental health professionals (e.g., school counselors, psychologists, social workers, nurses), administrators, other school staff members, parents/guardians/caregivers, students, local health agencies and professionals, law enforcement, and community organizations in planning, implementing, and evaluating the school's strategies for suicide prevention and intervention. CAAT will work in conjunction with local government agencies, community-based organizations, and other community supports to identify additional resources.

- Bakersfield Police: 661-327-7111
- Kern Behavioral Health and Recovery Services Crisis Hotline: 1-800-991-5272

- CA Youth Crisis Hotline: 1-800-843.5200

This policy shall be reviewed and revised as indicated, at least annually in conjunction with the previously mentioned community stakeholders.

Prevention

A. Messaging about Suicide Prevention

Messaging about suicide has an effect on suicidal thinking and behaviors. Consequently, the Principal and Assistant Principal along with its partners has critically reviewed and will continue to review all materials and resources used in awareness efforts to ensure they align with best practices for safe messaging about suicide.

B. Suicide Prevention Training and Education- Staff Development

Training shall be provided for all school staff members and other adults on campus (including substitutes, yard duty staff, tutors, learning lab aides, classroom aides, kitchen staff and afterschool staff).

- All staff shall receive training annually on the risk factors and warning signs of suicide, suicide prevention, intervention, referral, and postvention.
- All suicide prevention trainings shall be offered under the direction of school-employed mental health professionals (e.g., school counselors, psychologists, or social workers) who have received advanced training specific to suicide and may benefit from collaboration with one or more county and/or community mental health agencies.
- At a minimum, all staff shall participate in training on the core components of suicide prevention (identification of suicide risk factors and warning signs, prevention, intervention, referral, and postvention) at the beginning of their employment.
- Previously employed staff members shall attend a minimum of one-hour general suicide prevention training; core components of the general suicide prevention training shall include:
 - Suicide risk factors, warning signs, and protective factors;
 - How to talk with a student about thoughts of suicide;
 - How to respond appropriately to the youth who has suicidal thoughts. Such responses shall include constant supervision of any student judged to be at risk for suicide and an immediate referral for a suicide risk assessment;
 - Emphasis on immediately referring (same day) any student who is identified to be at risk of suicide for assessment to a Psychologist or School Counselor while staying under constant monitoring by staff member;

- Emphasis on reducing stigma associated with mental illness and that early prevention and intervention can drastically reduce the risk of suicide;
 - Reviewing available data annually to look for any patterns or trends of the prevalence or occurrence of suicide ideation, attempts, or death. See the Cal-SCHLS Web site at <http://cal-schls.wested.org/>.
- The impact of traumatic stress on emotional and mental health;
 - Common misconceptions about suicide;
 - School and community suicide prevention resources;
 - Appropriate messaging about suicide (correct terminology, safe messaging guidelines);
 - The factors associated with suicide (risk factors, warning signs, protective factors);
 - How to identify youth who may be at risk of suicide;
 - Appropriate ways to interact with a youth who is demonstrating emotional distress or is suicidal.
 - School-approved procedures for responding to suicide risk (including systems of support and referrals). Such procedures should emphasize that the suicidal student should be constantly supervised until a suicide risk assessment is completed;
 - School-approved procedures for responding to the aftermath of suicidal behavior (suicidal behavior postvention);
 - Responding after a suicide occurs (suicide postvention);
 - Resources regarding youth suicide prevention;
 - Emphasis on stigma reduction and the fact that early prevention and intervention can drastically reduce the risk of suicide;
 - Emphasis on immediately referring (same day) any student who is identified to be at risk of suicide for assessment to a School Psychologist or School Counselor while staying under constant monitoring by staff member;

The professional development also shall include additional information regarding groups of students judged by the school, and available research, to be at elevated risk for suicide. These groups include, but are not limited to, the following:

Youth affected by suicide;

- Youth with a history of suicide ideation or attempts;
- Youth with disabilities, mental illness, or substance abuse disorders;
- Lesbian, gay, bisexual, transgender, or questioning youth;
- Youth experiencing homelessness or in out-of-home settings, such as foster care;
- Youth who have suffered traumatic experiences;

C. Employee Qualifications and Scope of Services

School employees must act only within the authorization and scope of their credential or license. While it is expected that school professionals are able to identify suicide risk factors and warning signs, and to prevent the immediate risk of a suicidal behavior, treatment of suicidal ideation is typically beyond the scope of services offered in the school setting. In addition, treatment of the mental health challenges often associated with suicidal thinking typically requires mental health resources beyond what schools are able to provide.

D. Specialized Staff Training (Assessment)

Professional development in Applied Suicide Intervention Skills Training (Assist) and the Columbia Suicide Severity Rating Scale (C-SSRS) suicide risk assessment and crisis intervention shall be provided to (Assistant Principal, School Nurse, and designated teacher) staff employed by CAAT.

- In addition, staff will use a safety plan to help support the student. This includes: recognizing the signs of crisis, identifying coping strategies, having social contacts who may distract from the crisis, contacting friends and family for crisis support, and contacting health professionals, including 911 or crisis hotlines.
- If a referral was made for a student, a member of the multidisciplinary crisis team will verify with the parent/guardian/caregiver that follow-up treatment has been accessed and will be required to provide documentation of care for the student.

E. Parents, Guardians, and Caregivers Participation and Education

To the extent possible, parents/guardians/caregivers will be included in all suicide prevention efforts. At a minimum, schools shall share with parents/guardians/caregivers the CAAT suicide prevention policy and procedures.

- This suicide prevention policy will be prominently displayed on the CAAT Web page and be included in the parent handbook.
- Parents/guardians/caregivers will be invited to provide input on the continued development and implementation of the youth suicide prevention plan.
- All parents/guardians/caregivers will have access to suicide prevention training that addresses the following:
 - Suicide risk factors, warning signs, and protective factors;
 - How to talk with a student about thoughts of suicide;

- How to respond appropriately to the student who has suicidal thoughts. Such responses shall include constant supervision of any student judged to be at risk for suicide and referral for an immediate suicide risk assessment.

F. Student Participation and Education

Under the supervision of the Principal; the Assistant Principal, School Nurse, designated teacher, and community mental health agencies, students shall:

- Receive developmentally appropriate, student-centered education about the warning signs of mental health challenges and emotional distress;
- Receive developmentally appropriate guidance regarding the school's suicide prevention, Intervention, and referral procedures.
- The content of the education shall include:
 - Coping strategies for dealing with stress and trauma;
 - How to recognize behaviors (warning signs) and life issues (risk factors) associated with suicide and mental health issues in oneself and others;
 - Help-seeking strategies for oneself and others, including how to engage school-based and community resources and refer peers for help;
 - Emphasis on reducing the stigma associated with mental illness and the fact that early prevention and intervention can drastically reduce the risk of suicide.

CAAT will support the creation and implementation of programs and/or activities on both campuses that raise awareness about mental wellness and suicide prevention.

Intervention, Assessment, Referral

A. Staff

The Assistant Principal in consultation with a psychologist, who have received advanced training in suicide intervention shall be designated as the primary and secondary suicide prevention liaisons as part of the multidisciplinary crisis team.

Whenever a staff member suspects or has knowledge of a student's suicidal intentions, they shall promptly notify the primary designated suicide prevention liaison. If this primary suicide prevention liaison is unavailable, the staff shall promptly notify the secondary suicide prevention liaison. The designated teacher, who has also received advanced training in suicide intervention will serve as an alternative suicide prevention liaison if primary or secondary are unavailable.

- Under normal circumstances, the primary and/or secondary contact persons shall notify the Principal, another school administrator if different from the primary and secondary contact persons. The names, titles, and contact information of multidisciplinary crisis team members shall be distributed to all students, staff, parents/guardians/caregivers and be prominently available on school and district websites.

- CAAT Primary: Brandon Smith - Assistant Principal; CAAT second Amy Noall-Psychologist (contracted employee); Alternate Team Member: Dorrian Sanchez-designated teacher

The Principal, Assistant Principal, designated teacher, psychologist, or nurse shall then notify, if appropriate and in the best interest of the student, the student's parents/guardians/caregivers as soon as possible and shall refer the student to mental health resources in the school or community. Determination of notification to parents/guardians/caregivers should follow a formal initial assessment to ensure that the student is not endangered by parental notification.

A member of the multidisciplinary crisis team will assess a student's risk level as high, moderate, or low. The team will utilize the youth suicide prevention plan to provide an appropriate response and action in accordance with the risk level. If the student is at high risk, an indication of imminent danger (has access to a gun, is on a rooftop, or in other unsafe conditions), a call shall be made to 911.

- Whenever a staff member suspects or has knowledge of a student's suicidal intentions, they shall promptly notify the primary or secondary suicide prevention liaisons.
- Students experiencing suicidal ideation shall not be left unsupervised.
- A referral process should be prominently disseminated to all staff members, so they know how to respond to a crisis and are knowledgeable about the school and community-based resources.
- The Assistant Principal shall establish crisis intervention procedures to ensure student safety and appropriate communications if a suicide occurs or an attempt is made by a student or adult on campus or at a school-sponsored activity.
- All staff members will be provided with names and numbers of people on campus trained to conduct risk assessments and safety planning; primary and secondary point of contact on campus regarding potential suicidal intentions, the local crisis hotline number, information about what to do and who to contact if someone is at-risk.

B. Parents, Guardians, and Caregivers

A referral process will be prominently disseminated to all parents/guardians/caregivers, so they know how to respond to a crisis and are knowledgeable about the school and community-based resources.

Resource: Parents as Partners: A Suicide Prevention Guide for Parents that contains useful information for parents/guardians/caregivers who are concerned that their children may be at risk for suicide. It is available from Suicide Awareness Voices of Education (SAVE). See the SAVE Web page at <https://www.save.org/product/parents-as-partners/>

C. Students

Students will be encouraged to notify a staff member when they are experiencing emotional distress or suicidal ideation, or when they suspect or have knowledge of another student's emotional distress, suicidal ideation, or attempt. Below are prevention plans that will be implemented within the school:

- Classroom Presentations: The Assistant Principal will inform students on how to be advocates for each other, identifying warning signs when someone is in danger, coping strategies of dealing with stress, help seeking strategies for oneself and others, and internet/social media safety.
- Student Box: Students are encouraged to write personal notes to meet with the school Assistant Principal for academic, career, personal/social assistance.
- Social Emotional Learning (SEL) curriculum: Students will receive developmentally appropriate lessons in advisory/crew class to foster knowledge, skills and attitudes in all five SEL competency areas, self-awareness, self-management, social awareness, relationship skills and responsible decision-making.
- Homeroom/ Class Councils: Through homeroom and class councils' students will participate in discussions and create a safety web of peers and adults that they trust.
- Two-way student/teacher Communication: Students will also have access to two-way communication with teachers in their homeroom class.

D. Parental Notification and Involvement

The multidisciplinary crisis team shall identify a process to ensure continuing care for the student identified to be at risk of suicide. The following steps should be followed to ensure continuity of care:

- After a referral is made for a student, the Assistant Principal shall verify with the parent/guardian/caregiver that follow-up treatment has been accessed.
- Families will be provided with a list of resources and the crisis hotline number to report if a student is an immediate danger.
- In addition, parents will be notified if their student is in danger and has been identified as at-risk. Parent contact will be documented in the school student information system and will be given resources for continued support for their student.
- If parents/guardians/caregivers refuse or neglect to access treatment for a student who has been identified to be at-risk for suicide or in emotional distress, the suicide point of contact (or other appropriate school staff member) will meet with the parents/guardians/caregivers to identify barriers to treatment (e.g., cultural stigma, financial issues) and work to rectify the situation and build understanding of the importance of care.

If follow-up care for the student is still not provided, school staff should consider contacting Child Protective Services (CPS) to report neglect of the youth.

Phone Number: 661-631-6011

E. Action Plan for In-School Suicide Attempts

If a suicide attempt is made during the school day on campus, it is important to remember that the health and safety of the student and those around him/her is critical. The following steps should be implemented:

- Remain calm, remember the student is overwhelmed, confused, and emotionally distressed;
- Move all other students out of the immediate area;
- Immediately contact the administrator or suicide prevention liaison;
- Call 911 and give them as much information about any suicide note, medications taken, and access to weapons, if applicable;
- If needed, provide medical first aid until a medical professional is available;
- Parents/guardians/caregivers should be contacted as soon as possible;
- Do not send the student away or leave them alone, even if they need to go to the restroom;
- Listen and prompt the student to talk;
- Review options and resources of people who can help;
- Be comfortable with moments of silence as you and the student will need time to process the situation;
- Provide comfort to the student;

- Promise privacy and help, and be respectful, but do not promise confidentiality;
- Student should only be released to parents/guardians/caregivers or to a person who is qualified and trained to provide help.

F. Action Plan for Out-of-School Suicide Attempts

If a suicide attempt by a student is outside of CAAT' property the crisis management plan will be initiated. It is crucial that the Principal and multidisciplinary crisis team protects the privacy of the student and maintain a confidential record of the actions taken to intervene, support, and protect the student. The following steps should be implemented:

- Contact the parents/guardians/caregivers and offer support to the family;
- Discuss with the family how they would like the school to respond to the attempt while minimizing widespread rumors among teachers, staff, and students;
- Obtain permission from the parents/guardians/caregivers to share information to ensure the facts regarding the crisis is correct;
- Designate a staff member to handle media requests;
- Provide care and determine appropriate support to affected students;
- Offer to the student and parents/guardians/caregivers' steps for reintegration to school.

G. Supporting Students after a Mental Health Crisis

It is crucial that careful steps are taken to help provide the mental health support for the student and to monitor their actions for any signs of suicide. The following steps should be implemented after the crisis has happened:

- Treat every threat with seriousness and approach with a calm manner; make the student a priority;
- Listen actively and non-judgmental to the student. Let the student express his or her feelings;
- Acknowledge the feelings and do not argue with the student;
- Offer hope and let the student know they are safe and that help is provided. Do not promise confidentiality or cause stress;
- Explain calmly and get the student to a trained professional, guidance counselor, or designated staff to further support the student;
- Keep close contact with the parents/guardians/caregivers and mental health professionals working with the student.

H. Re-Entry to School After a Suicide Attempt

A student who threatened or attempted suicide is at a higher risk for suicide in the months following the crisis. Having a streamlined and well-planned re-entry process ensures the safety and wellbeing of students who have previously attempted suicide and reduces the risk of another attempt. An appropriate re-entry process is an important component of suicide prevention. Involving students in planning for their return to school provides them with a sense of control, personal responsibility, and empowerment. The following steps shall be implemented upon re- entry:

- Obtain a written release of information signed by parents/guardians/caregivers and providers;
- Confer with student and parents/guardians/caregivers about any specific requests on how to handle the situation;
- Inform the student's teachers about possible days of absences;
- Allow accommodations for student to make up work (be understanding that missed assignments may add stress to student);
- Mental health professionals or members of the multidisciplinary crisis team should maintain ongoing contact to monitor student's actions and mood;
- Work with parents/guardians/caregivers to involve the student in an aftercare plan

Resource:

The School Reentry for a Student Who Has Attempted Suicide or Made Serious Suicidal Threats is a guide that will assist in school reentry for students after an attempted suicide. See the Mental Health Recovery Services Resource Web page at [http://www.mhrsonline.org/resources/suicide%5Cattempted_suicide_resources_for_schools- 9/](http://www.mhrsonline.org/resources/suicide%5Cattempted_suicide_resources_for_schools-9/)

I. Postvention- Responding After a Suicide Death

A death by suicide in the school community (whether by a student or staff member) can have devastating consequences on students and staff. Therefore, it is vital that we are prepared ahead of time in the event of such a tragedy. The Suicide Death Response Action Plan (Suicide Postvention Response Plan) needs to incorporate both immediate and long-term steps and objectives.

- Suicide Postvention Response Plan shall include:
 - Principal/Assistant Principal will confirm death and cause;
 - Principal/Assistant Principal will contact deceased's family (within 24 hours);

- Assistant Principal will enact the Suicide Postvention Response Plan, include an initial meeting of the school Suicide Postvention Response Team;
- Assistant Principal will notify KCSOS Prevention Coordinator and additional school counselors in the surrounding areas for additional counseling support.
- Principal/Assistant Principal will notify all staff members (ideally in- person or via phone, not via e-mail or mass notification).
- Coordinate an all-staff meeting, to include: (Principal/Assistant Principal)
 - Notification (if not already conducted) to staff about death;
 - Emotional support and resources available to staff;
 - Notification to students about suicide death and the availability of support services (if this is the protocol that is decided by administration);
 - Share information that is relevant and that which you have permission to disclose.
- Prepare staff to respond to needs of students regarding the following: (Psychologist)
 - Psychologist will review protocols for referring students for support/assessment;
 - Talking points for staff to notify students; resources available on and off campus
- Identify students significantly affected by suicide death and other students at risk of imitative behavior;
- Identify students affected by suicide death but not at risk of imitative behavior;
- Communicate with the larger school community about the suicide death;
- Consider funeral arrangements for family and school community;
- Respond to memorial requests in respectful and non-harmful manner; responses should be handed in a thoughtful way and their impact on other students should be considered;
- Identify media spokesperson skilled to cover a story without the use of explicit, graphic, or dramatic content. Research has proven that sensationalized media coverage can lead to contagious suicidal behaviors.

Utilize and respond to social media outlets: (Assistant Principal)

- Identify what platforms students are using to respond to suicide death
- Identify/train staff and students to monitor social media outlets

Include long-term suicide postvention responses: (Assistant Principal)

- Consider important dates (i.e., anniversary of death, deceased birthday, graduation, or other significant event) and how these will be addressed
- Support siblings, close friends, teachers, and/or students of deceased
- Consider long-term memorials and how they may impact students who are emotionally vulnerable and at risk of suicide

Resources:

- After a Suicide: A Toolkit for School is a comprehensive guide that will assist schools on what to do if a suicide death takes place in the school community. See the Suicide Prevention Resource Center Web page at <http://www.sprc.org/comprehensive-approach/postvention>
- Help & Hope for Survivors of Suicide Loss is a guide to help those during the bereavement process and who were greatly affected by the death of a suicide. See the Suicide Prevention Resource Center Web page at <http://www.sprc.org/resources-programs/help-hope-survivors-suicide-loss>
- For additional information on suicide prevention, intervention, and postvention, see the Mental Health Recovery Services Model Protocol Web page at http://www.mhrsonline.org/resources/suicide%5Cattempted_suicide_resources_for_schools-9/
- Parents as Partners: A Suicide Prevention Guide for Parents is a booklet that contains useful information for parents/guardians/caregivers who are concerned that their children may be at risk for suicide. It is available from Suicide Awareness Voices of Education (SAVE). See the SAVE Web page at <https://www.save.org/product/parents-as-partners/>
- Save a Life Today (SALT) Kern County: non profit that works to education Kern County about suicide prevention and aiding those affected, <https://saltkc.com/>