1. Salem-Keizer School District is committed to health and safety of all members in our school community. This policy covers actions that take place in the school, on school property, at school-sponsored functions and activities, on school buses or vehicles and at bus stops, and at school sponsored out-of-school events where school staff are present. This policy applies to the entire school community, including educators, school and district staff, students, and parents/guardians. Volunteers will be directed by school or district staff as it pertains to this policy. This policy will also cover appropriate school responses to suicidal or high-risk behaviors that take place outside of the school environment when notified.

2. Prevention

2.1. District Policy Implementation – A district-level suicide prevention coordinator shall be designated by the Superintendent or their designee. This may be an existing staff person. The district suicide prevention coordinator will be responsible for planning and coordinating implementation of this policy for the school district.

2.2. Each school administrator shall designate a school employee to act as a point of contact in each school for issues relating to suicide prevention and policy implementation. This may be an existing staff person.

2.3. All staff members shall report the names of students they believe to be at elevated risk for suicide to the administrator and/or designated building staff.

2.4. School employees act only within the authorization and scope of their credentials or licenses. This policy does not authorize or encourage a school employee to diagnose or treat mental illness unless the employee is specifically licensed and employed to do so.

2.5. Staff Professional Development – All staff will receive a minimum of an initial two-hour, in-person training in suicide prevention.

2.6. After the initial training, subsequent annual professional development on risk factors, warning signs, protective factors, response procedures, referrals, postvention, and resources regarding youth suicide prevention will be offered. The professional development may include additional information regarding groups of students at elevated risk for suicide, including those living with mental and/or substance use disorders, those who engage in self-harm or have attempted suicide, those in out-of-home settings, those experiencing homelessness, American Indian/Alaska Native students, LGBTQ (lesbian, gay, bisexual, transgender, and questioning) students, students bereaved by suicide, and those with medical conditions or certain types of disabilities.

2.6.1. Additional professional development in risk assessment and crisis intervention will be provided to designated school suicide prevention points of contact.

2.7. Youth Suicide Prevention Programming – Developmentally appropriate, student-centered education materials will be integrated into the K-12 curriculum. The content of these age-appropriate materials will include: 1) the importance of safe and healthy choices and coping strategies, 2) how to recognize risk factors and warning signs of mental disorders and suicide in oneself and others, 3) help-seeking strategies for oneself or others, including how to engage school resources and refer friends for help. In addition, schools may provide supplemental small-group suicide prevention programming for students.
2.8. Publication and Distribution – This policy will be distributed annually and included in all student and teacher handbooks and on the school and district websites.

3. Assessment and Referral

3.1. When a student is identified by a staff person as potentially suicidal, i.e., verbalizes about suicide, presents overt risk factors such as agitation or intoxication, the act of self-harm occurs, or a student self-refers, the student will be seen by the administrator or designated school employee to perform a suicide risk assessment.

3.2. For youth at imminent risk of suicide or self-harm:

3.2.1. School staff will continuously supervise the student to ensure their safety.

3.2.2. The principal and school suicide prevention coordinator will be made aware of the situation as soon as reasonably possible.

3.2.3. The designated school employee or administrator will contact the student’s parent or guardian, as described in the Parental Notification and Involvement section.

3.2.4. The parent/guardian interview form will be completed, and the family will be assisted with safety planning based on the suicide risk assessment. When appropriate, this may include calling emergency services, bringing the student to the local emergency department, or utilizing partnerships with county mental health agencies to complete a Level 2 suicide risk assessment onsite.

3.2.5. Staff will ask the student’s parent or guardian for written permission to discuss the student’s health with outside care, if appropriate.

4. Re-Entry Procedure After Mental Health Crisis

4.1. For students returning to school after a mental health crisis (e.g., suicide attempt or psychiatric hospitalization), a school-employed mental health professional will meet with the student’s parent or guardian, and if appropriate, meet with the student to develop the student’s safety and support plan with school staff.

4.1.1. An administrator or designated school staff will be identified to coordinate re-entry with the student or their parent or guardian. The designated school staff and/or administrator will seek authorization to coordinate with any outside mental healthcare providers.

4.1.2. The parent or guardian will provide documentation from a mental health care provider that the student has undergone examination and that they are no longer a danger to themselves or others.

4.1.3. Confidentiality is critical in protecting the student and enabling school personnel to render assistance. The school-based mental health professional will discuss with the student and parent or guardian the information that identified staff need to know to support the student’s academic, social, emotional, and physical needs.

4.1.4. The designated staff person will periodically check in with student and parent or guardian to help the student readjust to the school community and address any ongoing concerns.

4.2. Students bereaved by suicide attempts will be supported by the school’s administrator and/or counseling staff.
5. Parent Notification and Involvement

5.1. In situations where a student is assessed at risk for suicide or has made a suicide attempt, the student’s parent or guardian will be informed as soon as practical by the administrator, designee, or mental health professional.

5.2. If the student has exhibited any kind of suicidal behavior, the parent or guardian should be counseled on “means restriction,” limiting the child’s access to mechanisms for carrying out a suicide attempt.

5.3. Staff will also seek parental permission to communicate with outside mental health care providers regarding their child.

5.4. Through discussion with the student, the administrator or designated staff will assess whether there is further risk of harm due to parent or guardian notification. If the administrator, designee, or mental health professional believes, in their professional capacity, that contacting the parent or guardian would endanger the health or well-being of the student, they may delay such contact as appropriate. If contact is delayed, the reasons for the delay should be documented.

6. Postvention in the Event of a Death by Suicide

6.1. Immediately following a student’s death by suicide, the administrator and crisis team will develop an action plan to guide the school’s response according to the Crisis Team Manual. The action plan may include, but is not limited to:

6.1.1. Administrator will contact the family of the deceased to provide support.

6.1.2. Administrator will contact the Office of Community Relations and Communications to notify appropriate offices and determine crisis team response.

6.1.3. The administrator, Office of Community Relations and Communications, and crisis team will assess the situation to determine postvention supports.

6.1.4. Designated staff will collaborate with county mental health organizations and administrators to initiate community support services for the impacted school(s).

7. Review of Suicide Intervention Actions

7.1. Persons may request a school district to review the actions of a school in responding to suicidal risk by contacting the appropriate level director.

7.2. Any review would be reflective of a student’s state and federal rights including those under HIPAA and FERPA as well as employee confidentiality laws.

Revision History:

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Approved By: Cabinet ____________________________________