



Youth Suicide Prevention Policy

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The Governing Board of Pivot Charter School recognizes that suicide is a leading cause of death among youth and that an even greater amount of California's high school students report having considered and attempted suicide. During 2019, 15 percent of California seventh graders and 16 percent of ninth and eleventh graders reported they seriously considered attempting suicide. (California Healthy Kids Survey 2019).

Suicide prevention requires vigilant attention from school communities (all school staff, students, parents/guardians/caregivers) and public members. As a result, school communities have an ethical and legal responsibility to provide appropriate and timely responses to suicidal ideation, attempts, and deaths. School leaders and staff must ensure their campuses are safe and nurturing environments that mitigate suicidal ideation and behaviors in students and staff and that appropriate procedures, protocols, and supports are well promulgated and easily accessible to all.

Recognizing that it is the responsibility of Pivot Charter School to protect the health, safety, and welfare of its students and staff, this policy aims to safeguard against suicide attempts, deaths, and other trauma associated with suicide, including ensuring adequate supports for students, staff, and families affected by suicidal behavior, attempts, and loss. It is a known fact that emotional wellness is central to all functioning, therefore, it is recommended this policy be paired with other policies that support the emotional and behavioral well-being of students and staff.

This policy is based on research and best practices in suicide prevention and has been adopted with the understanding that positive and nurturing school climates coupled with suicide prevention activities decrease suicide risk, increase help-seeking behavior, identify those who may be suicidal, and help decrease such behaviors. Empirical evidence refutes a common misconception that talking about suicide can increase risk or "place the idea in someone's mind." Therefore, it is critical to address all behaviors directly and in a timely manner. Of significant importance is the education of students to recognize their own mental health, equip them with information and knowledge to solicit help, and learn to recognize symptoms within themselves and their peers.

Understanding the impact school climate has on suicidality is critically important as positive school climates have been linked to lower levels of violence, bullying victimization, and greater

perceived safety. School climate is of particular importance since it affects the risk of suicidality among youth. Existing studies reveal adolescents who report perceptions of a more positive school climate are less likely to report suicidality (Cornell & Huang, 2016; La Salle et al., 2017; Marraccini & Brier, 2017). This is most likely due to positive peer and teacher relationships that are promoted in schools with positive school climates along with high levels of safety and social support. Pivot Charter School leaders underscore the importance of all staff and students working together to create safe, respectful, nurturing, and welcoming campuses in which students feel comfortable seeking help for themselves or their peers. Leaders provide opportunities for continuous improvement and monitoring of school climate.

In an attempt to reduce suicidal behavior and its impact on students and families, Pivot Charter School has developed strategies for suicide prevention, intervention, and postvention, and the identification of the mental health challenges frequently associated with suicidal thinking and behavior. These strategies include professional development for all school personnel (certificated and classified) in all job categories who regularly interact with students or are in a position to recognize the risk factors and warning signs of suicide.

Recognizing that early prevention and intervention can drastically reduce the risk of suicide, Pivot Charter School has developed and implemented preventive strategies and intervention procedures that include the following:

Overall Strategic Plan for Suicide Prevention

Pivot Charter School consults with the Executive Director or their designees, school-employed professionals (e.g. school counselors, psychologists, social workers, nurses), administrators, other school staff members, and/or parents/guardians/caregivers, students, local health agencies and mental health professionals, first responders, and community organizations in planning, implementing, evaluating, and updating the schools strategies for suicide prevention and intervention as and when appropriate. Pivot Charter School also regularly convenes to review the policy, at a minimum every five years, and update as necessary as required by *EC* Section 215.

Pivot Charter School works in conjunction with local government agencies, community-based organizations, and other community supports to identify additional resources and to ensure the local suicide prevention plans and district suicide prevention policies align and include similar research and resources. The California Alliance for Children and Family Services has developed an interactive Behavioral Health Resource Map which is intended to be a tool for providers, policy makers, education partners, youth, families, and others who are looking for services in their community. Each of the interactive "pins" on the map contains additional information about that organization including location, types of services offered, contact information, and budget. To see the map, please visit <https://www.catalyst-center.org/resources>.

Pivot Charter School collaborates with local community resources such as local police department, emergency services, and mobile crisis units as appropriate per school county.

Suicide Prevention Crisis Team

To ensure the policies regarding suicide prevention are properly adopted, implemented, and updated, Pivot Charter School created an in-house suicide prevention crisis team consisting of administrators, relevant staff, or school-employed professionals (e.g. Executive Director or their designee, school counselors, psychologists, social workers, nurses, mental health professionals). Pivot Charter School identifies at least one staff member to serve as the liaison to the suicide prevention crisis team.

The functions of this crisis team and other school-employed professionals (e.g. Executive Director or their designee, school counselors, psychologists, social workers, nurses, mental health professionals) are to review mental health related school policies and procedures; provide annual updates on school data and trends; review and revise school prevention policies; review and select general and specialized mental health and suicide prevention training; review and oversee staff, parent/guardian, and student trainings; ensuring the suicide prevention policy, protocols, and resources are posted on the district and school websites; and general compliance with *EC* Section 215.

This crisis team and other school-employed professionals (e.g. Executive Director or their designee, school counselors, psychologists, social workers, nurses, mental health professionals) also collaborate with community mental health organizations, identifies resources and agencies that provide evidence-based or evidence-informed treatment, helps inform law enforcement and other relevant partners, and collaborates to build community response as appropriate

Additional information and guidance developed by the National Association of School Psychologists can be found on the Preventing Suicide: Guidelines for Administrators and Crisis Teams web page at

<https://www.nasponline.org/resources-and-publications/resources-and-podcasts/school-safety-and-crisis/mental-health-resources/preventing-youth-suicide/preventing-suicide-guidelines-for-administrators-and-crisis-teams>.

Pivot Charter School collaborates with local community resources such as local police department, emergency services, and mobile crisis units as appropriate per county.

Employee Qualifications and Scope of Services

Pivot Charter School has ensured school employees adhere to *EC* Section 215 which mandates district and school employees and their partners to 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, screen and assess to identify suicide risk, and to provide

ongoing supports to youth identified at risk, the care or treatment for suicidal ideation is typically beyond the scope of services offered in the school setting.

Prevention

Messaging about Suicide Prevention

The manner in which we develop messages about suicide and suicide prevention can impact thoughts and behaviors related to suicide. Research has shown that talking about suicide prevention does not increase risk of suicide as long as those messages are aligned with the National Action Alliance for Suicide Prevention’s Framework for Successful Messaging for suicide prevention. The National Action Alliance for Suicide Prevention’s Framework for Successful Messaging website can be seen here: <https://suicidepreventionmessaging.org/>. In fact, positive messages about suicide prevention may have protective effects such as increased help-seeking. However, unsafe messages on the topic of suicide may influence a vulnerable person towards suicidal behavior such as those that oversimplify the causes of suicide or attribute suicide to identification with a population or group.

Therefore, it is vital that all messaging about suicide prevention be aligned with the *Skills Building: Messaging for Suicide Prevention* as designated by subject matter experts in the suicide prevention field. The Skills Building: Messaging for Suicide Prevention web page can be seen here: <https://emmresourcecenter.org/resources/skills-building-messaging-suicide-prevention>.

Pivot Charter School, along with its partners, have thoroughly and regularly reviewed all materials and resources used in awareness efforts to ensure they align with best practices for safe and effective messaging about suicide.

This policy and all related communication, documents, materials, etc. include clear, respectful, people-first language that encourages an environment free of stigma. As part of safe messaging for suicide, we use specific terminology when referring to actions related to suicide or suicidal behavior:

Use	Do Not Use
“Died by suicide” or “Took their own life”	“Committed suicide” Note: Use of the word “commit” can imply crime/sin

<p>“Attempted suicide”</p>	<p>“Successful” or “unsuccessful”</p> <p>Note: There is no success, or lack of success, when dealing with suicide</p>
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Examples of people-first language, include:

- People with (...mental illness, personality disorder, depression, etc.)
- Person who has died by suicide
- Person thinking about suicide
- People who have experienced a suicide attempt

Tips for Safe and Effective Messaging on Suicide Prevention:

- Always provide suicide prevention resources in parent/student handbooks, district or school-issued identification cards for staff and students, on district and school websites, and during any mental health or suicide prevention skill-building activity for students or parents/families and professional development for staff. The following are suggested resources to include:
 - National Suicide Prevention Lifeline: 988
 - Crisis Text Line: Text “help” to 741-741
 - Teen Line: Text “TEEN” to 839863
 - Trevor Project 1-866-488-7386 or text “START” to 678678
 - Trans Lifeline 1-877-565-8860

Additional crisis line numbers can be found on the CDE’s Help for Students in Crisis web page at: <https://www.cde.ca.gov/ls/mh/studentcrisishelp.asp>.

- Include information on warning signs as well as risk and protective factors.
- Avoid discussing details about methods of suicide.
- Explain complexity of suicide and avoid oversimplifying (i.e., identifying singular cause of suicide).
- Focus on prevention and protective factors.
- Avoid sensational language (e.g., using terms as epidemic, skyrocketing, etc.) and graphic images.

Suicide Awareness and Prevention Training for School Staff

Pivot Charter School along with its partners have carefully reviewed available staff training to ensure the selected curriculum is evidence-based, evidence-informed, and aligned with best practices in suicide prevention.

EC Section 215 mandates LEAs to provide training for staff. Pivot Charter School has provided professional development for all school staff members (certificated and classified) and other school-employed adults. Trainings include general mental health trainings and trainings that focus on suicide especially for youth.

Efforts shall be made to align staff trainings with county (if applicable) and/or the [Striving for Zero: California's Strategic Plan for Suicide Prevention 2020–25](#).

- At least annually, all staff receive training on mental health awareness and suicide prevention that includes risk and protective factors, warning signs of suicide, intervention, referral processes, and postvention. The program(s) or training(s) selected is left at the discretion of the Pivot Charter School
- All suicide prevention trainings are to be offered under the direction of school-employed student mental health professionals (e.g., school counselors, psychologists, social workers, nurses, etc.), who have received advanced training specific in suicide prevention.
- Staff training is reviewed and adjusted annually based on previous professional development activities, emerging best practices, and feedback.
- At a minimum, all staff participate in training on the core components of suicide prevention (identification of suicide risk and protective factors and warning signs, prevention, intervention, referral, and postvention) at the beginning of their employment prior to working with youth.
- Pivot Charter School has ensured training is available for new hires during the school year.
- Previously employed staff members attend a minimum of one-hour general suicide prevention training. Core components of the general suicide prevention training shall include:
 - How to identify youth who may be at risk for suicide including suicide warning signs, risk, and protective factors.

It is important to recognize that even if a staff member has been through mental health and suicide prevention training, they may not be, for a myriad of reasons, available to support a youth who may be struggling emotionally. In this case, they shall connect the student with another staff member in a “warm hand off.” A warm handoff is a transfer of care between two members of a team, where the handoff occurs immediately and in front of the student or family. Students should not be left to connect with another staff member on their own but rather should be accompanied to meet the staff to whom they are being transferred.

- Appropriate ways to approach, interact, and respond to a youth who is demonstrating emotional distress or having thoughts of suicide including skill building to ask directly about suicide thoughts.
- Pivot Charter School procedures for responding to suicide risk (including programs and services in a Multi-tiered System of Support (MTSS) and referral protocols). Such procedures will emphasize the student should be under constant supervision and immediately referred for a suicide risk assessment.
- Pivot Charter School procedures identifying the role educators, school staff, and volunteers play in supporting youth and staff after a suicide or suicide death or attempt (postvention).
- In addition to the core components of suicide prevention, ongoing annual professional development for all staff should include the following:
 - The impact of traumatic stress on emotional and mental health with an emphasis on reducing stigma associated with mental illness and that early prevention and intervention can drastically reduce the risk of suicide.
 - Common misconceptions about suicide.
 - School and community mental health and suicide prevention resources.
 - Appropriate messaging about suicide (correct terminology, safe messaging guidelines).
 - Ways to identify youth who may be at risk for suicide including suicide warning signs, risk, and protective factors.
 - Appropriate ways to approach, interact, and respond to a youth who is demonstrating emotional distress or having thoughts of suicide including skill building to ask directly about suicide thoughts and warm handoffs.
 - District-approved procedures for responding to suicide risk (including MTSS and referrals). Such procedures will emphasize that the student should be constantly supervised and immediately referred for a suicide risk assessment.
 - District-approved procedures identifying the role educators play in supporting youth and staff after a suicide or suicide death or attempt (postvention).
- The professional development includes additional information regarding groups of students who may be at elevated risk for suicide or groups disproportionately affected by suicide thoughts and behaviors. These groups include, but are not limited to, the following:

- Youth impacted by suicide and youth with a history of suicidal thoughts or behavior.
- Youth with disabilities, mental illness, or substance use disorders.
- Youth experiencing homelessness or in out-of-home settings, such as foster care.
- Youth identifying as LGBTQ.

Pivot Charter School reviews data and other relevant information (ex. school data or other survey data) to determine the prevalence of suicidal ideation and behaviors, including patterns or trends, among all students, particularly among identified high-risk populations.

Additional data resources may include CalSCHLS, YRBS, or other survey (e.g., Project CoVitality) data to determine the prevalence of suicidal ideation and behaviors, including patterns or trends, among all students, particularly among identified high-risk populations at their schools and district. For a curated list of staff trainings, please visit Mental Health and Suicide Prevention Trainings/Programs for School Communities. See the CalSCHLS website at <https://calschls.org/>, the YRBS web page at <https://www.cdc.gov/healthyyouth/data/yrbs/index.htm>, and the University of Santa Barbara's Project CoVitality web page at <https://www.covitalityucsb.info/>

Specialized Professional Development for school-based Mental Health Staff (Screening and/or Assessment)

Additional professional development in suicide risk assessment (SRA) and crisis intervention is provided to designated student mental health professionals, including but not limited to school counselors, psychologists, social workers, administrators, and nurses employed by the Pivot Charter School Training for staff is specific to conducting SRAs, intervening during a crisis, de-escalating situations, interventions specific to preventing suicide, making referrals, safety planning, and re-entry.

Specialized Professional Training for targeted Pivot Charter School mental health staff includes the following components:

- Best practices and skill building on how to conduct an effective suicide risk screening/SRA using an evidence-based, school-approved tool such as the [Columbia—Suicide Severity Rating Scale \(C-SSRS\)](https://cssrs.columbia.edu/the-columbia-scale-c-ssrs/cssrs-for-communities-and-healthcare/#filter=.healthcare.english) (can be accessed here: <https://cssrs.columbia.edu/the-columbia-scale-c-ssrs/cssrs-for-communities-and-healthcare/#filter=.healthcare.english>); Patient Health Questionnaire 9 (PHQ-9) Depression Scale (can be accessed here: <https://www.phqscreener.com/select-screener>); BSS Beck Scale for Suicide Ideation (can be accessed here: <https://www.pearsonassessments.com/store/usassessments/en/Store/Professional-Assessments/Personality-%26-Biopsychosocial/Beck-Scale-for-Suicide-Ideation/p/100000157>)

[.html](#)); National Institute of Mental Health (NIMH)'s Ask Suicide-Screening Questions (ASQ) Toolkit (can be accessed here: <https://www.nimh.nih.gov/research/research-conducted-at-nimh/asq-toolkit-materials>); and the Adolescent Suicide Assessment Protocol – 20 (this PDF can be accessed here: <https://preventsuicidewv.com/wp-content/uploads/2021/04/ADOLESCENT-SUICIDE-ASSESSMENT-PROTOCOL.pdf>).

- Best practices on approaching and talking with a student about their thoughts of suicide and how to respond to such thinking, based on district guidelines and protocols.
- Best practices on how to talk with a student about thoughts of suicide and appropriately respond and provide support based on district guidelines and protocols.
- Best practices on follow up with parents/caregivers.
- Best practices on re-entry.

Virtual Screenings for Suicide Risk

As we consider recent natural disasters that have led to school closures, Pivot Charter School has developed virtual service protocols in an effort to maintain connection with students while campuses are closed.

Additionally, Pivot Charter School serves both in-person and virtual learners; therefore, policies and procedures align with supporting multiple learning options. Virtual suicide prevention efforts include checking in with all students, promoting access to school and community-based resources that support mental well-being and those that address mental illness and give specific guidance on suicide prevention.

Pivot Charter School has established a protocol for assigning school staff to connect with students for distance learning and school closures. In the event of a school closure, Pivot Charter School has determined a process and protocols to establish regular contact with all students. Staff understand that any concern about a student's emotional well-being and/or safety must be communicated to the appropriate school staff, according to Pivot Charter School protocols.

Pivot Charter School has determined a process and protocols for school-based mental health professionals to establish regular contact with high-risk students, students who are on their caseloads, and those who are identified by staff as demonstrating need. When connecting with students, staff are directed to begin each conversation by identifying the location of the student and the availability of parents or caregivers. This practice allows for the staff member to ensure the safety of the student, particularly if they have expressed suicidal thoughts.

Resources: The National Association of School Psychologists' (NASP's) [Comprehensive School Suicide Prevention in a Time of Distance Learning](#) Preparing for Virtual School Suicide Assessment Checklist (which can be accessed here: <https://www.nasponline.org/resources-and-publications/resources-and-podcasts/covid-19-resource-center/crisis-and-mental-health-resources/preparing-for-virtual-school-suicide-assessment-checklist>), and Conducting a Virtual Suicide Assessment Checklist (can be accessed here:

<https://www.nasponline.org/resources-and-publications/resources-and-podcasts/covid-19-resource-center/crisis-and-mental-health-resources/conducting-virtual-suicide-assessment-checklist>) for guidance on virtual suicide practices and assessments to help keep students safe.

Parents, Guardians, and Caregivers Participation and Education

In an effort to include parents/guardians/caregivers in all suicide prevention efforts, Pivot Charter School has shared this suicide prevention policy and procedures widely and included in the parent/student handbooks.

This suicide prevention policy is also prominently displayed on Pivot Charter School web page for all schools .

Parents/guardians/caregivers are invited to provide input on the development and implementation of this policy. Parents/guardians/caregivers are provided crisis resources including the National Suicide Prevention Lifeline, Crisis text line, and local crisis hotlines and includes information that hotlines/resources are not just for crisis but also for friends/family and referral.

- All parents/guardians/caregivers have access to suicide prevention training that addresses the following:
 - Suicide warning signs, risk factors, and protective factors
 - How to approach and talk with their children about thoughts of suicide
 - How to respond appropriately to the youth who has suicidal thoughts

Appropriate responses include the requirement of constant supervision of any child/youth considered to be suicidal and referral for an immediate SRA. To help parents/guardians and families on mental wellbeing, Pivot Charter School posts information and guidance on addressing mental health issues. For example, Directing Change's What I Wish My Parents Knew (the PDF can be accessed here:

<https://www.directingchange.org/wp-content/uploads/What-I-Wish-My-Parents-Knew-Toolkit.pdf>), NASP's Anxiety and Anxiety Disorders in Children and Preventing Youth Suicide (see:

<https://www.nasponline.org/resources-and-publications/resources-and-podcasts/school-safety-and-crisis/mental-health-resources/preventing-youth-suicide>), as well as sharing NASP's comprehensive collection of resources included in the *Helping Handouts: Supporting Students at School and Home* (accessed here:

<https://www.nasponline.org/books-and-products/products/books/titles/helping-handouts-supporting-children-at-home-and-at-school>) and *Suicidal Thinking and Threats: Helping Handout for Home* (PDF can be downloaded here:

https://www.nasponline.org/Documents/S3H14_Brock_Reeves_Parents_Suicide.pdf). For a curated list of parent/caregiver trainings, please visit Mental Health and Suicide Prevention Trainings/Programs for School Communities.

Communication with Parents, Caregivers, and Families:

Parents, guardians, caregivers, and families play a vital role in the prevention of youth suicide.

Pivot Charter School has included parents/guardians in the development, review, and implementation of this policy.

Pivot Charter School provides various training opportunities for parents, families, and caregivers to help them learn how to recognize and identify suicide risk, protective factors, as well as the school's referral processes and how they or their children can reach out for help, etc.

All parents are provided with information on suicide prevention resources including crisis hotlines, local warmlines, and also school and community-based supports. If parents, families, and/or caregivers identify or suspect a suicide risk, they are strongly encouraged to communicate with appropriate school staff (counselor, administration, nurse, school-employed mental health professional, etc.) for assistance. The school-based mental health professionals are equipped to help identify and support a student at risk of suicide and are trained to ensure the safety of all students. This may include collaborating with other professionals (primary care doctors, marriage and family therapists, etc.) to develop a course of action and/or safety plan. Parents, caregivers, and families are reminded that mental health and academic records are kept separately to ensure confidentiality and to help protect the privacy of education records.

FERPA's health or safety emergency provision permits the disclosure of personally identifiable information from a student's education records, to appropriate parties, in order to address a health or safety emergency when the disclosure is necessary to protect the health or safety of the student or other individuals. See 34 CFR §§ 99.31(a)(10) and 99.36. Pivot Charter School is required to adhere to the Family Educational Rights and Privacy Act (FERPA). FERPA applies to all LEAs and schools that receive funds under applicable programs administered by the U.S. Department of Education. Any LEA or school that is subject to FERPA may not disclose students' education records, including mental health records, or any personally identifying information derived from such records, without the written consent of a parent/guardian or the student, who is eighteen years of age or older. See the US Department of Education's FERPA web page here: <https://www2.ed.gov/policy/gen/guid/fpco/ferpa/index.html>.

Student Participation and Education

Effective suicide prevention efforts must also include student education and engagement. Pivot Charter School and its partners have and will continue to carefully review potential student curricula to ensure it includes information on recognizing and responding to signs and symptoms (within themselves and friends), learning coping skills, encourage help-seeking behavior and being knowledgeable of supports and resources.

Pivot Charter School provides instruction to middle and high school students on general mental health and suicide prevention. The instruction is provided under the supervision of school-employed mental health professionals, with input from county and community mental

health agencies, and middle and high school students. The instruction is developmentally appropriate, student-centered, and includes:

- Recognizing behaviors (signs and symptoms) of mental health challenges and emotional distress.
- Recognizing life issues (risk factors) associated with suicide and mental health issues in oneself and others.
- Learning coping strategies for dealing with stress and trauma.
- Learning about protective factors.
- Learning 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.
- Guidance regarding the district's suicide prevention, intervention, and referral procedures.

Pivot Charter School maintains a list of current student trainings and is available upon request.

Resources: For a curated list of student trainings, please visit Mental Health and Suicide Prevention Trainings/Programs for School Communities. Student-focused suicide prevention instruction should be incorporated into classroom curricula (e.g., health classes, freshman orientation, science, and/or physical education). The curriculum should be supplemented with additional information about the effects of collective traumatic experiences and their impact on mental health and wellness. For example, communities experiencing natural disasters can utilize Psychological First Aid with their students or for concerns related to the pandemic, LEAs can utilize Stress and COVID-19: A Course for Teens. See the Readiness and Emergency Management for Schools' Psychological First Aid web page at [https://rems.ed.gov/K12PFAS.aspx#:~:text=Psychological%20First%20Aid%20for%20Schools%20\(PFA%2DS\)%20is%20an,have%20a%20long%2Dterm%20impact](https://rems.ed.gov/K12PFAS.aspx#:~:text=Psychological%20First%20Aid%20for%20Schools%20(PFA%2DS)%20is%20an,have%20a%20long%2Dterm%20impact), and the Stress and COVID-19: A Course for Teens web page at <http://www.jennifergreen.com/stress/#/lessons/FINR8igj-iUmzbTtKUFZOJIOviTXBqkf>.

Pivot Charter School has shared school-based supports and self-reporting procedures, so students are able to seek help if they are experiencing thoughts of suicide or if they recognize signs with peers. Although confidentiality and privacy are important, students should understand safety is a priority and if there is a risk of suicide, school staff are required to report. School-based mental health professionals are legally and ethically required to report suicide

risk. When reporting suicidal ideation or an attempt, school staff must maintain confidentiality and only share information limited to the risk or attempt.

Pivot Charter School supports the creation and implementation of programs and/or activities on campuses that increase awareness about mental wellness and suicide prevention (e.g., Mental Health Awareness Weeks, Peer Counseling Programs, Freshman Success Programs, and National Alliance on Mental Illness on Campus High School Clubs [NCHS], and hotline numbers on student identification cards).

Intervention, Screening/Assessment, Referral

Intervention and Referral for Suicide Screening or Risk Assessment

Pivot Charter School ensures the school suicide prevention crisis team members receive advanced training in suicide prevention, intervention and postvention. The crisis team is responsible for immediately establishing contact with the student and after assessment, shall contact their parents/guardians, if deemed safe. Whenever a staff member suspects or has knowledge of a student's suicidal intentions, they are required to promptly notify the appropriate school staff, as outlined in the protocol.

Whenever a staff member has knowledge of a student's suicidal intentions or potential risk of suicide, they are required to promptly notify the suicide prevention crisis team through a formal referral process for immediate assessment of the student. Pivot Charter School has developed and disseminated protocols for screening, assessing, and referring students who may be experiencing suicidal thoughts and/or behavior. The following is included in the protocol:

- Students experiencing suicidal ideation shall not be left unsupervised; students with ideation or suicidal behaviors should be respectfully escorted to the office for an assessment and never sent alone or without staff supervision.
- Collaboration and communication between the teacher/staff and the suicide prevention crisis team is critical during the supervision, referral, and assessment processes.
- A referral process is prominently disseminated to all staff members (classified, certificated, volunteers, interns, etc.) so all know how to respond to a crisis, refer students for further screening/assessment, understand the safety issues of escorting a student, and are knowledgeable about school and community-based resources.
- The referral process includes steps to properly coordinate, consult and make a referral to the local county mental health plan (MHP) on behalf of any student.

- The Pivot Charter School has established crisis intervention procedures to ensure student safety and appropriate communications if a suicide death occurs or an attempt is made by a student or adult on campus or at a school-sponsored activity.
- The crisis team is required to 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.**
- The names, titles, and contact information of suicide prevention crisis team members are communicated to staff, parents/guardians/caregivers, and students.

Imminent Danger

Pivot Charter School recognizes that student safety is a priority. If the student is in imminent danger (e.g., has access to a gun, is on a rooftop, or in other unsafe conditions, etc.) staff members are required to request assistance from other school staff and call 911. The call shall **NOT** be made in the presence of the student and the student shall not be left unsupervised. Staff shall **NOT** physically restrain or block an exit.

Parents, Guardians, and Caregivers

Pivot Charter School has established and widely disseminated a referral process to all parents/guardians/caregivers, so they are aware of how to respond to a crisis and are knowledgeable about protocols and school, community-based, and crisis resources.

Community-based organizations that provide evidence-based suicide-specific treatments are highlighted on the school's website with treatment referral options marked accordingly.

Resources are prominently displayed on school websites. School staff autoreplies during vacations or absences should include links to resources and phone/text numbers so parents and students have information readily available.

Students

Pivot Charter School has established and widely disseminated a referral process to all students, so they know how to access support through school, community-based, and crisis services.

Students shall be encouraged to notify a staff member when they are experiencing emotional distress or suicidal ideation, or when they have knowledge or concerns of another student's emotional distress, suicidal ideation, or attempt. (Pivot Charter School to include crisis intervention procedures, including resources such as mental health counseling and other support services).

Parental Notification and Involvement

Pivot Charter School has identified a process for ensuring parent/guardian/caregiver/family notification when a student has been screened or screened/assessed for suicide risk regardless of outcome (no present risk to high-risk).

Pivot Charter School has identified a process to ensure continuing care for the student identified to have suicidal ideation. The following steps should be followed to ensure continuity of care:

- After a referral is made for a student, school staff are request verification from the the parent/guardian/caregiver that follow-up treatment has been accessed. Parents/guardians/caregivers are requested to provide documentation of care to the school.
- 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/caregiversto identify barriers to treatment (e.g., cultural stigma, financial issues), work to rectify the situation, and build understanding of the importance of care. If follow-up care for the student is not provided, school staff should consider contacting Child Protective Services (CPS) to report neglect of the youth.
 - [Child Abuse Identification & Reporting Guidelines - Child Abuse Prevention Training and Resources \(CA Dept of Education\)](#)
 - Riverside County: [Suspected Child Abuse Report \(SCAR\) | Riverside County Office of Education](#)
 - Sonoma County: [Mandated Reporter Resources](#)
 - Butte County: [Report Abuse / Neglect | Butte County, CA](#)
 - San Diego County: [Mandated Reporting](#)

Action Plan for In-School or During School Sponsored Activities 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 them is critical. The following steps should be implemented for a suicide attempt on campus:

- Remain calm, remember the student is overwhelmed, confused, and emotionally distressed.
- Move all other students out of the immediate area.
- Immediately contact the administrator and crisis team. .

- 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.
- Students should only be released to parents/guardians/caregivers or to a person who is qualified and trained to provide help.

Action Plan for Out-of-School Suicide Attempts

If a suicide attempt by a student is outside of school the following steps should be implemented (it is critical for the school to protect the privacy of the student and maintain a confidential record of the actions taken to intervene, support, and protect the student):

- Contact the parents/guardians/caregivers and offer support.
- Discuss with the family strategies for responding to the attempt while minimizing widespread rumors among teachers, staff, and students.
- Obtain permission from the parents/guardians/caregivers to share information and ensure the facts regarding the crisis is correct.
- Provide care and determine appropriate support to affected students.
- Offer to the student and parents/guardians/caregivers steps for re-integration to school.

Action Plan for Off Campus Suicide Attempt (e.g. off-site, virtual services, school to student communication, etc.)

- Remain calm, remember the student is overwhelmed, confused, and emotionally distressed.
- Immediately contact the administrator and crisis team or suicide prevention liaison.
- Call 911 and give them as much information about any suicide note, medications taken, and access to weapons, if applicable.
- Parents/guardians/caregivers should be contacted as soon as possible.
- Try to maintain contact with the student. 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.

Re-Entry and Supporting Students after Mental Health Crisis

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. Pivot Charter School has determined the following steps be implemented after the crisis:

- Treat every threat with seriousness and approach with a calm manner; make the student a priority.
- Listen actively and non-judgmentally to the student. Let the student express their 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 available. Do not promise confidentiality or cause stress.
- Explain calmly and get the student to a skilled mental health professional or designated staff to further support the student.

- Keep close contact with the parents/guardians/caregivers and mental health professionals working with the student.

Re-Entry to School After a Suicide Attempt

A student who has verbalized ideation 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.

Pivot Charter School has determined the following steps be implemented upon the student's re-entry:

- The school administrator shall obtain a written release of information signed by parents/guardians/caregivers and providers.
- School-based mental health professionals (e.g. school counselors) and/or other designated school professionals (e.g. administrators, crisis team) as appropriate shall confer with the student and parents/guardians/caregivers about any specific requests on how to handle the situation.
- School-based mental health professionals (e.g. school counselors) and/or other designated school professionals (e.g. administrators, crisis team) as appropriate shall confer with the student and parents/guardians/caregivers to develop a safety or support plan.
- School-based mental health professionals (e.g. school counselors) and/or other designated school professionals (e.g. administrators, crisis team) as appropriate shall inform the student's teachers about possible days of absences.
- Teachers and administrators shall allow accommodations for the student to make up work (understanding that missed assignments may add stress to the student).
- A Support Plan meeting will be held as part of the re-entry process to develop a safety and support plan.
- Mental health professionals (e.g. school counselors) or trusted staff members shall maintain ongoing contact to monitor student's actions and mood.
- School based mental health professionals (e.g. school counselors) shall work with parents/guardians/caregivers to involve the student in an aftercare plan.

- School-based mental health professionals (e.g. school counselors) shall provide parents/guardians/caregivers local emergency numbers for after school and weekend emergency contacts.

Responding After a Suicide Death (Postvention)

It is important to remember that staff members are likely grieving as well and consider the capacity of staff members to engage in sensitive discourse with students. When possible, provide additional support to staff to lead conversations in response to suicide deaths.

A death by suicide of a student or staff member can have devastating consequences on the school community. Therefore, it is vital that we are prepared ahead of time in the event of such a tragedy. To help Pivot Charter School prepare for postvention, the Crisis Team and other school-employed professionals as appropriate (e.g. Executive Director or their designee, school counselors, psychologists, social workers, nurses, mental health professionals) have reviewed the American Foundation for Suicide Prevention's (AFSP's) After a Suicide: A Toolkit for Schools (which can be accessed at the After a Suicide: A Toolkit for Schools' web page here: <https://afsp.org/after-a-suicide-a-toolkit-for-schools>) to develop our own suicide postvention response action plan for responding to a suicide death. This plan incorporates both immediate and long-term steps and objectives, including:

- Identification of a staff member to confirm death and cause (usually school site administrator).
- Identification of a staff member (administrator or school--based mental health professional) to contact the deceased's family (within 24 hours).
- Conduct an initial meeting of the school Crisis Team and school-employed professionals as appropriate (e.g. Executive Director or their designee, school counselors, psychologists, social workers, nurses, mental health professionals) ● Notification to all staff members (ideally in-person or via phone, not via e-mail or mass notification).
- Coordinate an all-staff meeting, to include:
 - Notification (if not already conducted) to staff about suicide death.
 - Emotional support and resources available to staff.
 - Notification to students about suicide death and the availability of support services.

Best practices suggest to respond to deaths by suicide similar to any death, regardless of the cause, but with special considerations to reduce risk of contagion. For example, it is recommended to avoid permanent memorials for any death but especially in response to suicide due to potential glamorization of the individual.

It is important to incorporate procedures with specific actions ahead of time to respond to suicide incidents.

- Share limited information and ensure that is relevant and for which you have permission to disclose. Staff shall not share explicit, graphic, or dramatic content, including the manner of death.
- Remind and direct staff to respond to needs of students regarding the following:
 - Review signs of emotional distress and suicide ideation.
 - Review of protocols for referring students for support/assessment.
 - Develop and provide support to staff in responding to student reactions.
 - Share school and community-based resources available to students.
- Identify students significantly affected by suicide death and other students that may be considering imitative behavior.
 - Staff shall immediately refer students who they suspect are considering imitative behavior to a school-based mental health professional.
 - If deemed safe, staff shall contact the students' parents/guardians/caregivers.
- Identify students affected by suicide death but not at risk of imitative behavior.
 - Staff shall immediately refer students who are affected by the suicide to school-based mental health professional.
 - If deemed safe, staff shall contact the students' parents/guardians/caregivers.
- Notification to larger school community about suicide death and the availability of support services.
- Consider, as appropriate, working with the family regarding funeral arrangements for the family and school community.
 - If possible, suggest the funeral occur outside of school hours.
 - Encourage parents/guardians of students to attend funeral/memorial with their children.
 - Request family approval to attend and staff a table for resources to be available at the funeral, if possible, to remind students and the community of available resources.
 - Offer a safe space on campus for students to utilize if needed before/after funeral or memorial service.

- Acknowledge there may be a high rate of absenteeism on the day of the funeral and school officials should make appropriate accommodations for staff and students to attend.
- Respond to memorial requests in respectful and non-harmful manner; responses should be given in a thoughtful way and their impact on other students should be considered.
- Executive Director or their designee will be or identify media spokesperson skilled to cover story without the use of explicit, graphic, or dramatic content (visit <https://reportingonsuicide.org/> for recommendations on safe messaging). Research has proven that sensationalized media coverage can lead to contagious suicidal behaviors.
- Utilize and respond to social media outlets:
 - Identify what platforms students are using to respond to suicide death.
 - Identify and encourage staff and students to monitor social media outlets.
- Include long-term suicide postvention responses:
 - Consider important dates (i.e., anniversary of death, deceased birthday, graduation, or other significant events) and how these will be addressed.
 - Support siblings, close friends, teachers, and/or students of the deceased.
 - Consider long-term memorials and how they may impact students who are emotionally vulnerable and suicidal.

Pivot Charter School believes the practices outlined in this policy will assist in reducing the suicidal ideation and attempts of our school community members. As a partner in the community, we always welcome feedback and input on our policies and encourage you to share them as appropriate.

Appendix A: Resources

Supporting Students During a Local, Regional, or National Crisis:

- Psychological First Aid for Schools (PFA-S) is an evidence-informed intervention model to assist students, families, school personnel, and school partners in the immediate aftermath of an emergency. PFA-S is designed to reduce the initial distress caused by emergencies, and to foster short- and long-term adaptive functioning and coping. For more information, see the PFA-S web page at <https://www.nctsn.org/resources/psychological-first-aid-schools-pfa-s-field-operations-guide>.

General Resources:

- The K–12 Toolkit for Mental Health Promotion and Suicide Prevention has been created to help schools comply with and implement AB 2246, the Pupil Suicide Prevention Policies. The Toolkit includes resources for schools as they promote youth mental wellness, intervene in a mental health crisis, and support members of a school community after the loss of someone to suicide. To access the toolkit, please visit <http://www.heardalliance.org/help-toolkit/>.
- Substance Abuse and Mental Health Services Administration’s (SAMHSA) Preventing Suicide: A Toolkit for High Schools; to access the toolkit, please visit the product’s web page at: <https://store.samhsa.gov/product/Preventing-Suicide-A-Toolkit-for-High-Schools/SMA12-4669>.
- Trevor Project Model Suicide Prevention Policy; for more information, please visit The Trevor Project’s Public Education web page at: <https://www.thetrevorproject.org/public-education/>.
- Signs of Suicide Depression Screening Program (SOS); for more information, please visit the SOS web page at <https://www.mindwise.org/sos-signs-of-suicide/>.

Safe and Effective Messaging for Suicide Prevention:

- For information on public messaging on suicide prevention, see the *Framework for Successful Messaging* web page from the National Action Alliance for Suicide Prevention website: <http://suicidepreventionmessaging.org/>.
- Preventing Suicide: A Resource for Media Professionals is a resource booklet addressed to media professionals who play a role particularly relevant to the prevention of suicide. The booklet was written by the World Health Organization and the International Association for Suicide Prevention. See the resource guide at <https://apps.who.int/iris/bitstream/handle/10665/258814/WHO-MSD-MER-17.5-eng.pdf;jsessionid=6FC6A56E272B0A4A3C2C38379488F1D8?sequence=1>.
- For information on engaging the media regarding suicide prevention visit www.reportingonsuicide.org.

- SAVE (Suicide Awareness Voices of Education); see SAVE's Responsible Media Reporting web page at <https://save.org/about-suicide/preventing-suicide/reporting-on-suicide/>.
- For more information regarding blogging on suicide, please visit <https://www.bloggingonsuicide.org/>.
- Entertainment Industries Council; for more information, you can access the Social Media Guidelines for Mental Health Promotion and Suicide Prevention PDF here: https://www.eiconline.org/files/ugd/aec3fc_9b403ff020b24489aa7f8a90d058ea07.pdf.

Staff Trainings:

- Youth Mental Health First Aid (YMHFA) teaches a 5-step action plan to offer initial help to young people showing signs of a mental illness or in a crisis, and connect them with the appropriate professional, peer, social, or self-help care. YMHFA is an eight-hour interactive training for youth-serving adults without a mental health background. See the Mental Health First Aid's YMHFA web page at <https://www.mentalhealthfirstaid.org/cs/take-a-course/course-types/youth/>.
- Free YMHFA Training is available on the CDE Mental Health web page at <http://www.cde.ca.gov/ls/cg/mh/projectcalwell.asp>.
- Question, Persuade, and Refer (QPR) is a gatekeeper training that can be taught online. Just as people trained in cardiopulmonary resuscitation (CPR) and the Heimlich Maneuver help save thousands of lives each year, people trained in QPR learn how to recognize the warning signs of a suicide crisis and how to question, persuade, and refer someone to help. See the QPR website at <http://qprinstitute.com>.
- SafeTALK is a half-day alertness training that prepares anyone over the age of fifteen, regardless of prior experience or training, to become a suicide-alert helper. See the LivingWorks' safeTALK web page at <https://legacy.livingworks.net/programs/safetalk/>.
- Kognito At-Risk is an evidence-based series of three online interactive professional development modules designed for use by individuals, schools, districts, and statewide agencies. It includes tools and templates to ensure that the program is easy to disseminate and measures success at the elementary, middle, and high school levels. See the Kognito's All Solutions for PK-12 web page at <https://kognito.com/pk-12/all-solutions/>.

Specialized Training, Assessment:

- Applied Suicide Intervention Skills Training (ASIST) is a two-day interactive workshop in suicide first aid. ASIST teaches participants to recognize when someone may have thoughts of suicide and work with them to create a plan that will support their immediate safety. See the LivingWorks' ASIST web page at <https://legacy.livingworks.net/programs/asist/>.

- School-based Suicide Risk Screening: This 2.5-hour training is available for free and provides guidance on effective screening for suicide risk and suggestions to increase safety for students utilizing evidence-based tools such as safety planning as well as steps for re-entry. To register or for more information regarding training on suicide risk screening in schools, visit the Mental Health Services Oversight & Accountability Commission website at: <https://mhsoac.ca.gov/initiatives/suicide-prevention/school-suicide-risk-screening/>. Assessing and Managing Suicide Risk (AMSR) is a one-day training workshop for behavioral health professionals based on the latest research and designed to help participants provide safer suicide care. See the Suicide Prevention Resource Center's AMSR web page at <http://www.sprc.org/training-events/amsr>.
- For the SAMHSA's Suicide Safe application for suicide assessment, visit the application's product web page at: <https://store.samhsa.gov/product/suicide-safe>.

Parent Resources:

- 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 suicidal. It is available from Suicide Awareness Voices of Education (SAVE) website here: <https://www.save.org/product/parents-as-partners/>.
- What I Wish My Parents Knew: This toolkit provides step-by-step instructions on how to implement activities to engage parents/guardians on topics related to mental health; access this toolkit here: <https://www.directingchange.ca.org/wp-content/uploads/What-I-Wish-My-Parents-Knew-Toolkit.pdf>.
- Know the Signs website: This website provides information on recognizing suicide risk, how to have a conversation about suicide and resources to support loved ones. See the Know the Signs website at <https://www.suicideispreventable.org/>.
 - Take Action for Mental Health: Take Action for Mental Health is the campaign for California's ongoing mental health movement. It builds upon established approaches and provides resources to support Californians' mental health needs. You can find more information on the Take Action for Mental Health website at: <https://takeaction4mh.com/>.
- Depression: What is Depression? For more information, please visit the NIMH's Depression web page at: <https://www.nimh.nih.gov/health/publications/depression>.
- 12 Things Parents Can Do to Prevent Suicide; guide and video can be accessed here: <https://www.healthychildren.org/English/health-issues/conditions/emotional-problems/Pages/ten-things-parents-can-do-to-prevent-suicide.aspx>.
- Teens and Suicide: What Parents Should Know; for more information, visit: <https://afsp.org/teens-and-suicide-what-parents-should-know/>.

Student Training Resources:

- LivingWorks Start; see the LivingWorks Start web page at <https://www.livingworks.net/start>.
- More Than Sad is school-ready and evidence-based training material, listed on the national Suicide Prevention Resource Center's best practices list, specifically designed for teen-level suicide prevention. You can find more information on the American Foundation for Suicide Prevention's More Than Sad web page at <https://afsp.org/our-work/education/more-than-sad/>.
- Break Free from Depression (BFFD) is a 4-module curriculum focused on increasing awareness about adolescent depression and designed for use in high school classrooms. See the Boston Children's Hospital's BFFD program web page at <https://www.childrenshospital.org/programs/boston-childrens-hospital-neighborhood-partnerships-program/tap-online-trainings/break-free-depression-program>.
- Coping and Support Training (CAST) is an evidence-based life-skills training and social support program to help at-risk youth. See the Reconnecting Youth Inc.'s CAST program web page at <http://www.reconnectingyouth.com/programs/cast/>.
- Students Mobilizing Awareness and Reducing Tragedies (SMART) is a program comprised of student-led groups in high schools designed to give students the freedom to implement a suicide prevention on their campus that best fits their school's needs. See SAVE's SMART Schools web page at <https://www.save.org/what-we-do/education/smart-schools-program-2/>.
- Linking Education and Awareness for Depression and Suicide (LEADS) for Youth is a school-based suicide prevention curriculum designed for high schools and educators that links depression awareness and secondary suicide prevention. LEADS for Youth is an informative and interactive opportunity for students and teachers to increase knowledge and awareness of depression and suicide. See SAVE's LEADS web page at <https://www.save.org/what-we-do/education/leads-for-youth-program/>.
- The Youth Aware of Mental health (YAM) program is a program developed for teenagers aged 14–16 that uses interactive dialogue and role-playing to teach adolescents about the risk and protective factors associated with suicide (including knowledge about depression and anxiety) and enhances their problem-solving skills for dealing with adverse life events, stress, school, and other problems. For more information, visit the YAM website at <https://www.y-a-m.org/>.
- CDC's Suicide Prevention Resource for Action; please visit: <https://www.cdc.gov/suicide/resources/prevention.html>.

Re-entry After an Attempt or Leave of Absence for Mental Health:

- The School Reentry for a Student Who Has Attempted Suicide or Made Serious Suicidal Threats is a guide that will assist in school re-entry 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/

- Virtual Hope Box; the product web page can be accessed here: <https://apps.apple.com/us/app/virtual-hope-box/id825099621>.
- A Friend Asks from Jason Foundation; the product web page can be accessed here: <https://jasonfoundation.com/get-involved/student/a-friend-asks-app/>.

Postvention:

- 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. This guide can be accessed here: <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; this guide can be accessed here: <http://www.sprc.org/resources-programs/help-hope-survivors-suicide-loss>.
- Kognito Resilient Together Coping with Loss at School is an interactive role-play simulation to prepare schools for responding to a death in the school community. Teachers and administrators learn key elements of a crisis response plan, including postvention, and best practices for communicating with students and colleagues impacted by a loss in the school. See the Kognito's Coping with Loss at School web page at <https://kognito.com/solution/resilient-together-coping-with-loss-at-school/>.
- PREPaRE 3rd edition Training helps train the crisis staff who respond to the students and staff in the immediate follow up and over time. It also provides forms for use and documentation. Also, considerations of compassion fatigue with staff providing such services. See the PREPaRE training web page at <https://www.nasponline.org/professional-development/prepare-training-curriculum>.
- For additional information on suicide prevention, intervention, and postvention, see the Mental Health Recovery Services Model Protocol web page at <https://www.mhrbwcc.org/prevention-and-resources/>.
- Information on school climate and school safety is available on the CDE Safe Schools Planning web page at <https://www.cde.ca.gov/lr/ss/vp/safeschlplanning.asp>.
- Collaborative for Academic, Social, and Emotional Learning (CASEL); see the CASEL program guide web page at <https://casel.org/guide/programs/>.

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