

<p align="center">DANBURY PUBLIC SCHOOLS Danbury, Connecticut</p>	<p align="center">REGULATIONS</p>	
<p><i>SUICIDE PREVENTION/INTERVENTION</i></p>	<p>Reviewed: 4/9/08</p>	<p>Policy No. 7-131.4 Page</p>

Management of Suicidal Risk

The Board of Education is committed to respond aggressively and immediately to a student who has verbalized intent, seriously considered, or attempted suicide. This includes suicidal ideation, talk of suicide, signs of depression associated with self-harm, plan to harm oneself, or any other signs or behaviors that may be associated with suicide risk factors.

Education and Prevention

The Board of Education is additionally committed to prevention and education of staff to understand and respond appropriately to signs of suicide with students. Annually, all faculty will receive an in-service in their respective buildings to discuss suicide risk factors, danger signals, and procedures to be followed. Pupil services staff (school psychologists and social workers) will assist building principal in the design and presentation of this training. The building principal in conjunction with pupil services staff will insure that all staff have copies or access to these regulations.

Procedures

A. Intervention

1. Any staff member who becomes aware of a student who may be at risk of suicide must immediately notify the principal or his/her designee. This must be done even if the student has confided in the staff person and asked that their communication be kept confidential. Any communication between student and staff may not be kept confidential if the student is at risk of danger to himself or is at risk of danger to others. The principal or designee will then notify the appropriate pupil service staff (school psychologist, school social worker, school counselor or school nurse).
2. The pupil services staff member will interview the student, consider available background information and determine whether the student is demonstrating risk factors associated with suicide.
3. If the pupil services staff member and the building principal determine that the student is NOT “at risk” or in “imminent danger” of suicide, the parent/guardian is notified and a conference is scheduled for the earliest available time. At that meeting, the events are reviewed with the parent/guardian and resources are identified (i.e. Individual and/or family counseling, support groups, DCF Voluntary

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<p>Services, and parent education).</p> <p>Implement “Follow Up and Case Management” Procedures</p> <ol style="list-style-type: none"> 4. If the pupil services staff and the building principal determine that the student IS “at risk” or in “imminent danger” of suicide, the pupil services staff member or the principal will notify the parent/guardian immediately. Student will remain in school until parent/guardian arrives to confer with staff. The building principal or the designee is responsible to insure that the student is safe and supervised until the parent/guardian arrives to transport the student for a mental health evaluation. <ol style="list-style-type: none"> a. Mental Health Evaluation – The pupil services staff member will refer the student/family for an immediate mental health evaluation. The Pupil services staff member may use this time to educate parents/guardians about suicide risk to increase their motivation to fully participate in the process. This evaluation must include an assessment of the student’s risk of suicide, depression, and other psychosocial factors associated with suicide including the use of anti-depressants. The pupil services staff member is encouraged to have a confidential release of information signed by the parent/guardian at this time so he/she may communicate with the mental health professional prior to and after the evaluation. 5. In the event that a parent/guardian refuses to either pick up their child/adolescent or follow through with the school’s recommendations, leaving the student at risk for suicide, a referral is made to the Department of Children and Families (DCF) on the basis of neglect. The building principal, in conjunction with the pupil services staff may decide to have an emergency vehicle transport the student to the local hospital’s crisis intervention unit or request that Emergency Mobile Psychiatric Services come to the school for the evaluation. 6. For students who are 18 years of age or older, a family member will be notified to transport the student for the evaluation. In the event that the student or family does not cooperate with the recommendations, the police may be notified to transport the student to an appropriate mental health facility. <p>B. <u>Follow Up and Case Management</u></p> <ol style="list-style-type: none"> 1. After the safe return to school, the pupil services staff member may consider the following options to provide a supportive structure for the student. These may include, but are not limited to, referral to the building child or student assistance team, Planning and Placement Team, or regular contact with the school counselor, school psychologist, school social 		

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<p>worker, or crisis counselor.</p> <ol style="list-style-type: none"> 2. A member of the pupil services staff or principal will be designated as the “case manager” for the student upon his/her return to school. The case manager will be responsible to communicate with the community mental health professional who completed the risk assessment and the treating mental health professional; community resources such as DCF, family, and teachers, in addition to remaining connected with the student and overseeing the student’s school intervention program. 3. The plan needs to be fully documented, including the incident, outcome, follow-up, and is the responsibility of the building principal and the pupil services staff member. 4. The building principal, pupil services staff member, and/or the case manager communicate and inform other appropriate staff, such as the school nurse and other professional staff. 		