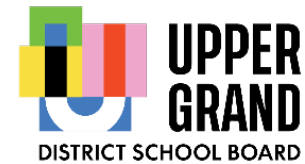


# P.12 Suicide Prevention, Intervention and Postvention Protocol



<b>Category:</b>	Protocol
<b>Administered by:</b>	Superintendent of Program
<b>First adopted:</b>	Sept 2014
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<b>Next review:</b>	2023-24 school year

## 1. General

The purpose of this protocol is to provide administrators and staff with information on suicide prevention, intervention and postvention. Suicide is a complex and multifaceted issue. Coping with suicide and creating suicide safer communities requires a combination of prevention initiatives, specific intervention procedures and postvention strategies. There is no single formula for preventing suicide. This protocol provides staff with best practice, step-by-step actions to respond sensitively and effectively to suicide risk.

## 2. Guiding Principles

- 2.1 All indicators of suicide risk or threat to self or others are taken seriously.
- 2.2 Where there is a concern about risk of suicide or threat of harm to self or others, the student must at all times remain in the presence of a staff member and, unless it is dangerous to do so, on school property until such time as other safety measures are in place or the risk has reduced.
- 2.3 The safety and well-being of all students is of primary importance when responding to risk of harm to self or others.
- 2.4 Students and their families are treated with respect and dignity in the course of investigating risk of suicide, threat to self or others, and/or responding to a tragic event.
- 2.5 Information regarding suicide risk or threat to self or others is private and treated with discretion and must be considered urgent. The principal or designate should be immediately notified, as should the appropriate support staff (i.e., ASIST-trained staff).
- 2.6 In the event of threat of violence or harm to others, the principal and/or designate and the board Violence Threat Risk Assessment (VTRA)

advisors will determine if the VTRA protocol also needs to be implemented.

### 3. Suicide Prevention

#### 3.1 Applied Suicide Intervention Skills Training (ASIST)

- 3.1.1 ASIST is required for all psychological consultants, attendance and counselling staff, and child and youth counsellors and specialized program staff.
- 3.1.2 ASIST is required for all elementary principals and vice principals.
- 3.1.3 ASIST is required for all secondary principals and a minimum of one vice principal at each school.
- 3.1.4 At the secondary level, at least one representative from student services (guidance, special education) and one teacher will be trained in ASIST.
- 3.1.5 Elementary administrators will select 2 teachers to be trained in ASIST. If the school is a JK-8 school, one of the teachers should be an intermediate teacher.
- 3.1.6 It is the principal's responsibility to ensure that there is a core group of ASIST-trained staff. ASIST staff who move between schools will become a member of the core group in the building.
- 3.1.7 The list of ASIST-trained staff will be available to both administrators and office coordinators. The administrator will ensure all school staff are aware of the ASIST team members in the building. (see Appendix A for the Suicide Prevention Team in your school form).

#### 3.2 safeTALK Training

- 3.2.1 SafeTALK half-day training can be provided on request and the training can include: staff and volunteers including administrators, teachers, educational assistants, lunchroom supervisors, hall monitors and custodians.
- 3.2.2 ASIST-trained staff do not need to be safeTALK-trained.

### 3.3 Protocol Training

- 3.3.1 Each fall at a staff meeting, a standardized presentation on suicide signs and prevention will be presented. This in-service is available centrally and presented by the school's psychological consultant, attendance and counselling staff, child and youth counsellor, and/or administrators.
- 3.3.2 Every year in the fall there will be a brief review provided by the mental health lead or designate to all administrators, psychological consultants, counselling and attendance staff, specialized mental health staff and child and youth counsellors.

## 4. Suicide Intervention (Practices involved in recognizing and responding to students with thoughts of suicide or behaviour related to suicide)

### 4.1 Imminent Risk

- 4.1.1 If a student is engaging in suicidal behaviour (e.g. active attempt) this is an **emergency** with **an immediate 911 call** and then a call to the parent/guardian.
- 4.1.2 Do not leave the student alone. Stay with the student or designate another staff member to stay with the student until the EMS arrives.
- 4.1.3 If the student has a weapon, call 911 immediately and don't attempt to have the student hand over the weapon.
- 4.1.4 **Protect yourself and the other students and keep the suicidal student calm.**
- 4.1.5 Do not let the student leave the school unless stopping them from leaving would put staff or students in harm's way.

### 4.2 Potential Risk (a disclosure of suicidal thoughts or behaviours requiring assessment (ASIST))

- 4.2.1 Remain calm. Do not leave the student alone. Alert an ASIST-trained staff member (e.g. child and youth counsellor, principal, vice principal, counselling and attendance staff, psychological consultant, student services staff or teacher) to determine the

level of risk. If an ASIST-trained staff is not available, call the Crisis Line (1 844 437 3247) or DCAFS 519 941 1530. If at any time the situation escalates and safety is not able to be managed, this should be an immediate 911 call.

- 4.2.2 The ASIST-trained professional will determine the necessary follow up after their assessment. Counselling and attendance staff and child and youth counsellors do not need consent for intervention as this is deemed an emergency.
- 4.2.3 The ASIST-trained staff and/or the administrator will contact the parents if they deem that there is a risk of suicide and preventative steps need to be taken. However, it is important to consider whether or not there is a perceived risk to the student caused by contacting the parents, in which case this would be a discussion with the administrator for next steps. (If there is a need for consultation, contact the Mental Health Lead.)
- 4.2.4 The ASIST-trained staff and a minimum of one other staff person (mental health staff, administrator, other ASIST-trained staff member) will develop an intervention plan which may consist of:
- connecting with community mental health
  - having the student see their local family physician
  - follow up with mental health services at school and in the community
  - going to the emergency department
- 4.2.5 A plan for close monitoring and follow up will be created and documented. See Section 4.3 of protocol.

### 4.3 Follow up and Monitoring

- 4.3.1 A follow up meeting will be held to plan for necessary supports and/or a re-entry to school. The meeting will include administrators, school-based mental health professionals and involved teachers. Community agencies will be involved as necessary.
- 4.3.2 The purpose of the meeting is to consolidate plans, develop a reintegration plan (if necessary) and assess mental health

supports, appropriateness of current academic work load and the student's ability to cope given current needs. Community mental health professionals can be invited to this meeting with appropriate consent. The outcome of this meeting will be a clear action plan for the student as well as appropriate communication to the staff members and family. Secondary students can work with the school mental health staff to complete a Mental Health Support Plan. Mental health staff in elementary schools can use the support plan (found on UGshare) for elementary when planning for next steps.

- 4.3.3 With appropriate consent, school-based mental health professionals will monitor the student to ensure they are receiving the necessary community and school-based mental health supports as well as follow up with parents/families.

## **5. Suicide Postvention (Practices involved after a death by suicide has occurred that provide support and reduce risk related thoughts and behaviours related to suicide)**

*"The largest public health problem is neither the prevention of suicide nor the management of suicide attempts, but the alleviation of the effects of stress on the survivors whose lives are forever altered."*

--E.S. Shneidman, American Suicideologist and Thanatologist

### **5.1 What to do when suicide occurs (Administrators)**

- 5.1.1 Once suicide has been confirmed, identify if there are any siblings or family members in other schools within the Upper Grand District School Board.
- 5.1.2 Call the Crisis Response Team Lead to evaluate the suicide's impact and the need for support. Often if there has been another traumatic event or exacerbating circumstances, more support may be needed.
- 5.1.3 Contact the Superintendent of Education.
- 5.1.4 Contact the Communications Manager or designate. It is always a good idea to be prepared in case media should approach. Consultation with the superintendent and/or Communications

Manager is ideal. However, if that is not possible, only the administrator should ever speak to media and can emphasize to the media the two major points:

- no one thing, event or person is to blame for death by suicide
- help is available

**It is important that no personal or identifying details about the deceased is provided to the media.**

**Note:** the Communications Manager or designate is always available to speak with the media if an administrator is not prepared to do so.

5.1.5 If appropriate, contact the family of the deceased student to offer condolences.

5.1.6 Talk with parents/guardians to determine what information about the death and/or the funeral can be shared.

5.1.7 It is required to have a staff meeting, in collaboration with the Crisis Response Team members and/or school mental health professionals, to:

- share information about the death and the funeral
- allow staff to express reactions and grief. Ensure staff have information for their Employee Assistance Program (EAP)
- explain the plans for the day. This is a joint plan developed with administrator and crisis team members (see Crisis Response Guidelines).
- remind staff of student dismissal protocol for a funeral
- provide a scripted death notification statement for students (as per parental direction)
- prepare for student reactions and questions
- remind staff to monitor students who are having difficulty and the availability of the Crisis Response Team for support
- **facilitate dis-identification with the student who died by suicide, including not glorifying or romanticizing the**

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**suicide and pointing out how the students are different from the student who died by suicide**

- 5.1.8 Contact the Student Information Manager to ensure automated messages are not sent via our SIS System and that arrangements are made to deactivate the student account.
- 5.1.9 Send a letter home to the parents/guardians in the school. Depending on the permissions given by the family, the letter may acknowledge suicide or it may address only that someone has died. (see Appendix B for sample letters).
- 5.1.10 **Do not release information to students announcing the suicide in a large assembly or over the intercom.** Instead, disseminate information to the staff and students in small groups, preferably in their regular classrooms and with the assistance of mental health professionals and/or the Crisis Response Team.
- 5.1.11 There are times when our community partners (e.g. CMHA or DCAFS) may be actively involved with the family and/or community already and they should be welcomed as a member of the support team as appropriate.
- 5.1.12 If parents have provided consent to share that death was by suicide, be truthful in verifying that the death was suicide, but do not mention the method or focus on why the suicide happened. Focus on general factors of suicide prevention, emphasize coping skills and resources that are available (see Appendix C for sample script).
- 5.1.13 Do not send all students from school to the funeral or stop classes for the funeral. Do let students know they can attend the funeral with their parents/guardians if they choose.
- 5.1.14 **Do not have a memorial or funeral service at school**
- 5.1.15 Ensure that staff members attend the funeral, as appropriate, to support the affected students and family members.
- 5.1.16 Include Employee Health and Wellness Department for staff specific support and to provide pathways to counselling.
- 5.1.17 **Work with Mental Health team to provide follow up services**

**to those most affected, with appropriate consents.**

5.1.18 Monitor close friends and classmates of the deceased and students at risk. Meet with these students individually if possible. **Note:** On anniversaries, the deceased's birthday and other dates of significance, be prepared to provide additional support to those affected. Do not hold memorial ceremonies or create memorials. Do not announce the date to the school but rather be prepared to respond to needs as they arise.

5.1.19 Coordinate with community mental health agencies as necessary to provide support to the school community in collaboration with the school board teams.

5.1.20 A week to 10 days following the death by suicide, review and evaluate the crisis intervention activities, make plans for follow up actions and provide an opportunity to help interveners cope.

## 5.2 **Memorials** (also refer to 5.1.18)

In terms of memorials, *"A delicate balance must be struck that creates opportunities for students to grieve but that does not increase suicide risk for other students by glorifying, romanticizing or sensationalizing suicide"*. (Centre for Suicide Prevention)

5.2.1 Do not dedicate a physical memorial to the student who died by suicide (e.g. yearbook, tree, bench, etc.).

5.2.2 Do not dedicate songs or sporting events to the student who died by suicide. Follow the board's Display of Flags policy 310.

5.2.3 Do not have assemblies that focus on the student who died by suicide or have a moment of silence in an assembly.

5.2.4 Creating a living memorial, such as a donation to an organization promoting suicide prevention made in the name of the victim, or engaging in fundraising projects in the student's name to promote suicide prevention awareness are recommended.

## 6. Resources

- Together to Live: A toolkit for addressing youth suicide in your community. <http://www.togethertolive.ca/>



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- After a Suicide: A Toolkit for Schools.  
<http://www.sprc.org/sites/sprc.org/files/library/AfteraSuicideToolkitforSchools.pdf>
  - Centre for Suicide Prevention Resource Toolkits  
<https://www.suicideinfo.ca/resources/>
  - Supporting Minds: An Educator's Guide to Promoting Students' Mental Health and Well-being. Chapter 8: Self-harm and Suicide.  
<http://www.edu.gov.on.ca/eng/document/reports/SupportingMinds.pdf>
  - The Grief Recovery Handbook by John James.