

SUICIDE PREVENTION POLICY*Why adopt a policy on Suicide Prevention?*

Education Code section 215 mandates that all local educational agencies serving pupils in grades 7 to 12 adopt a policy on suicide prevention at a regularly scheduled meeting. It also requires charter schools serving kindergarten and grades 1-6 to adopt at a regularly scheduled meeting, a policy on pupil suicide prevention. At a minimum, every fifth year, the school shall review its policy and, if necessary, update its policy.

According to the Centers for Disease Control and Prevention (CDC), suicide is the second leading cause of death among young people aged 10-24. The CDC also reports that 17% of high school students have seriously considered attempting suicide – and 8% had attempted suicide – in the prior 12 months. Certain students are at higher risk of suicide, including those with disabilities, with mental health or substance abuse disorders, in foster care, and those who are lesbian, gay, bisexual, transgender, or questioning. Students who are bereaved by suicide are also at greater risk. School personnel who interact with students on a daily basis are in a prime position to recognize warning signs of suicide and make appropriate referrals.

In recent years, traditional schools have been sued for negligence for the following reasons: failure to notify parents if their child appears to be suicidal, failure to get assistance for a student at risk of suicide and failure to adequately supervise a student at risk of suicide.

According to Education Code section 215, the exact policy shall be developed in consultation with school and community stakeholders, school-employed mental health professionals, and suicide prevention experts and shall, at a minimum, address procedures relating to suicide prevention, intervention, and postvention.

The kindergarten and grades 1 to 6 policy shall be age appropriate and shall be delivered and discussed in a manner that is sensitive to the needs of young pupils. It shall also be written to ensure proper coordination and consultation with the county mental health plan if a referral is made for mental health or related services on behalf of a student who is a Medi-Cal beneficiary.

The policy is required to specifically address the needs of high-risk groups, including, but not limited to, all of the following: 1) Youth bereaved by suicide; 2) Youth with disabilities, mental illness, or substance use disorders; 3) Youth experiencing homelessness or youth in out-of-home settings, such as foster care; 4) Lesbian, gay, bisexual, transgender, or questioning youth.

The policy shall also address any training on suicide awareness and prevention to be provided to teachers of students in all of the grades served by the School. Materials approved by the

STUDENT POLICY #20– SUICIDE PREVENTION POLICY

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school for training shall include how to identify appropriate mental health services, both at the schoolsite and within the larger community, and when and how to refer youth and their families to those services. The approved training materials may also include programs that can be completed through self-review of suitable suicide prevention materials.

On or before January 1, 2025, the school shall revise its training materials to incorporate best practices identified by the California Department of Education in its model policy. Beginning the 2024-25 school year, schools are encouraged to provide suicide awareness and prevention training to teachers of students in all of the grades served.

The policy shall be written to ensure that a school employee acts only within the authorization and scope of the employee's credential or license. Nothing shall be construed as authorizing or encouraging a school employee to diagnose or treat mental illness unless the employee is specifically licensed and employed to do so.

The Governing Board recognizes that suicide is a leading cause of death among youth and that school personnel who regularly interact with students are often in a position to recognize the warning signs of suicide and to offer appropriate referral and/or assistance. To attempt to reduce suicidal behavior and its impact on students and families, the School Director or designee shall develop measures and strategies for suicide prevention, intervention, and postvention, to be adopted by the Governing Board at a regularly scheduled board meeting.

The purpose of this policy is to protect the health and well-being of all district students by having procedures in place to prevent, assess the risk of, intervene in, and respond to suicide.

[If your school serves any of grades 7 to 12, include the following.] In developing policies for use by the School for grades 7 to 12, the School Director or designee shall consult with school and community stakeholders, school health professionals, and suicide prevention experts.

[If your school serves any of kindergarten or grades 1 to 6, include the following.] In developing policies for use by the School for kindergarten and grades 1 to 6, the School Director or designee shall consult with school and community stakeholders, the county mental health plan, school mental health professionals and suicide prevention experts. This policy shall be age appropriate and delivered and discussed in a manner that is sensitive to the needs of young students. The policy shall also ensure proper coordination and consultation with the county mental health plan if a referral is made for mental health or related services on behalf of a student who is a Medi-Cal beneficiary.

The policy shall specifically address the needs of high-risk groups, including, but not limited to, all of the following: (A) Youth bereaved by suicide. (B) Youth with disabilities, mental illness, or substance use disorders. (C) Youth experiencing homelessness or in out-of-home settings, such as foster care. (D) Lesbian, gay, bisexual, transgender, or questioning youth.

The policy shall also address any training on suicide awareness and prevention to be provided to teachers of pupils in all of the grades served by the local educational agency. Materials approved by a local educational agency for training shall include how to identify appropriate mental health services, both at the schoolsite and within the larger community, and when and how to refer youth and their families to those services. Materials approved for training may also include programs that can be completed through self-review of suitable suicide prevention materials.

The policy shall be written to ensure that a school employee acts only within the authorization and scope of the employee's credential or license. Nothing in this section shall be construed as authorizing or encouraging a school employee to diagnose or treat mental illness unless the employee is specifically licensed and employed to do so.

The School's governing board shall review its policy on pupil suicide prevention at a minimum of every fifth year and, if necessary, update its policy.

WEB SITES

K-12 Toolkit for Mental Health Promotion and Suicide Prevention <http://www.heardalliance.org/wp-content/uploads/HEARDToolkit2017.pdf>

Trevor Project: <https://www.thetrevorproject.org/wp-content/uploads/2017/09/District-Policy.pdf>

U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration: <http://www.samhsa.gov>