



**Bruce Grey Catholic District School Board**

**Suicide Prevention**

**Protocol**

*September 2014*

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Sincere appreciation must be extended to the dedicated people of the Hamilton-Wentworth Catholic District School Board, the Adolescent Suicide Prevention Task Force of Santa Clara County and the Vancouver Health Authority for sharing their SUICIDE PREVENTION PROTOCOLS with us. They saw a need for a Suicide Protocol, took up the challenge and thus our task was made much easier.

## Protocol Overview

In Canada 2014, suicide was the 2<sup>nd</sup> leading cause of death for young people between the ages of 14 – 25. As a Catholic faith Community, we believe ‘we are stewards, not owners, of the life God has entrusted to us’ and it is our duty to assist young people in recognizing that ‘Life’ is God’s gift to us.

We believe in affirming the God-given potential of each person.

We believe that we are called to be the hands, feet, and eyes of Christ to those in our schools who experience isolation, illness, powerlessness, or poverty in any form.

As educators we are in the unique position of being able to detect a troubled young person and possible suicidal situation quickly. We stand in ‘loco parentis’ during school hours and must always be prepared to provide our students with care and assistance during their moments of need. Our Catholic faith calls us to share the message of God’s profound love, with all students, even in their darkest times.

It is the purpose of this protocol to assist staff in **recognizing** and **responding** to students who present with suicidal ideation and to establish a clear path of **referral** for further assessment and/or support. This protocol will be reviewed and amended, as necessary, every two years.

### Student Support Team, Response Procedure

Teachers and other Board staff stand “**in loco parentis**” of students while they are at school or are engaged in school-related activities. This means that we must act in a fashion that is congruent with the actions of a prudent, judicious and caring parent. We are therefore obliged, regardless of the age of the student, to advise the parent/guardian of any concerns that may pertain to the physical or mental well-being of their son or daughter and to do so in as timely a fashion as possible. When responding to a possible suicide situation, it is important that both staff and students feel supported, therefore, responding to the situation requires a qualified team approach. The Student Support Team will be comprised of:

1. The school Principal and/or Designate
2. The School Board Social Worker, Child and Youth Worker, Mental Health Nurse or Mental Health Lead either in person or via a telephone consult
3. The reporting staff person
4. A staff person identified by the student
5. The student

Where possible, the student should have input into at least one member of the Student Support Team. Any adult employed by the Board can become a member of the Support Team and will be involved in developing a ‘Student Support Plan’ (**Appendix 2, Page 9, 10, 11**) with the student.

**If a student you know is experiencing suicidal thoughts, your ability to recognize the signs and your willingness to help could mean the difference between life and death.**

## Speaking To A Student About Suicide

WHILE CLINICAL ASSESSMENTS AND THE DEVELOPMENT OF TREATMENT PLANS REMAIN THE RESPONSIBILITY OF PROFESSIONAL MENTAL HEALTH PRACTITIONERS, SCHOOL-BASED PERSONNEL DO HAVE A RESPONSIBILITY IN 'LOCO PARENTIS' TO TAKE PROMPT AND EFFECTIVE ACTION WHEN FACED WITH A STUDENT AT RISK FOR SUICIDE

**'PROMISE PRIVACY, NOT CONFIDENTIALITY'** – You should not promise confidentiality since the information may need to be shared with other authorized individuals who will respect privacy

<b>DO...</b>	<b>DON'T...</b>
<ul style="list-style-type: none"><li>○ Stay calm</li><li>○ Take it seriously</li><li>○ Physically get at the student's level, i.e., sitting</li><li>○ Present as caring</li><li>○ Establish rapport both verbally and non-verbally</li><li>○ Explore thoughts and feelings</li><li>○ Ask clear and concise questions, i.e., "Do you plan to kill yourself?"</li><li>○ Identify and prioritize immediate stressors</li><li>○ Seek assistance from colleagues</li><li>○ Make a consult telephone call to Board Social Worker or Keystone Child, Youth and Family Services (Appendix 3)</li><li>○ Promise privacy</li></ul>	<ul style="list-style-type: none"><li>○ Panic!</li><li>○ Ignore the person's need to talk</li><li>○ Allow external interruptions</li><li>○ Minimize the student's distress</li><li>○ Moralize about the student's thoughts or actions</li><li>○ Focus on solving difficulties presented in the interview</li><li>○ Be reluctant to draw on the expertise of others</li><li>○ Leave the student alone</li><li>○ Promise confidentiality</li></ul>

ANY SUSPICION THAT A STUDENT MAY BE CONSIDERING SUICIDE MUST BE TREATED SERIOUSLY. WHEN THE STUDENT'S ACTIONS OR WORDS ARE CAUSE FOR CONCERN, IT IS REQUIRED THAT THE STUDENT BE INTERVIEWED AT THE MOST IMMEDIATE OPPORTUNITY. NEVER MINIMIZE WHAT A STUDENT IS SHARING AND FEELING.

## **Red Flag Questions**

During the course of interviewing the student, a positive response to any of these three questions would usually indicate 'imminent risk' and the youth should be referred for a more detailed assessment. Asking these questions will not make them more likely to attempt suicide.

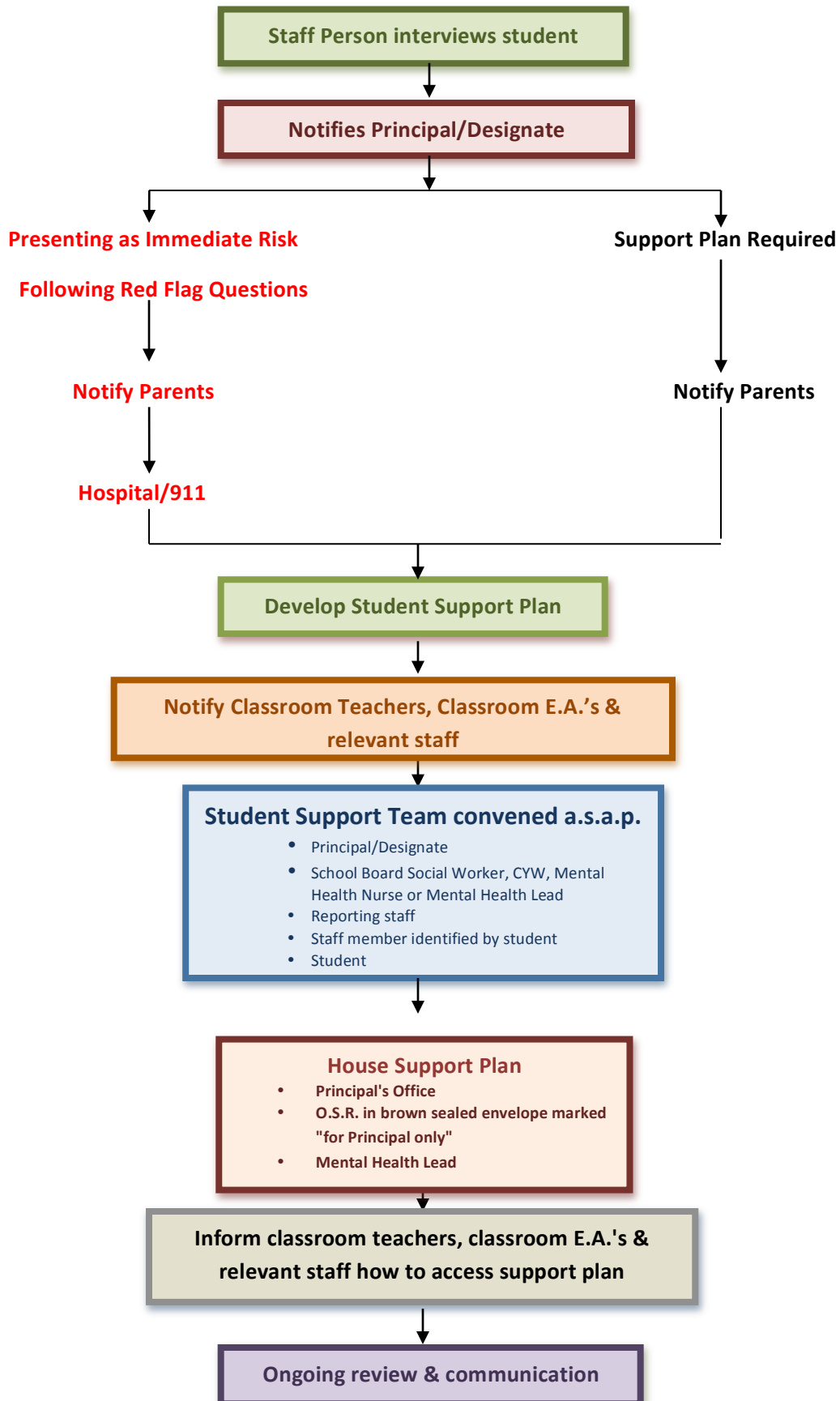
- **Are you thinking seriously about killing yourself?**
- **Do you have a plan for killing yourself?**
- **If you have been considering suicide, do you have the means to take your own life?**

## **Risk Factors**

The following risk factors are often associated with suicide intent and while a cluster of warning signs should signal cause for immediate concern and action even one such indicator by itself should not be dismissed. In addition to asking the red flag questions, consider the following:

- Family history of suicide
- previous suicide attempt
- Presence of specific plan to harm oneself
- Making final arrangements, i.e., giving away possessions
- Disclosure of suicidal intent (notes etc.)
- Preoccupation with death and suicidal thoughts or threats (i.e., writing notes, theme of death in art work or literature)
- Precipitating crisis
  - recent death of a loved one or friend
  - breakdown of family/friend relations
  - recent break up with boyfriend/girlfriend
- Sudden changes in behavior and affect
  - Withdrawal from activities and/or friends
  - Uncooperativeness
  - Running away
  - Neglect of appearance
  - Anger
  - Loss of self-esteem
  - Signs of depression which may include; sadness or hopelessness, irritability, anger, or hostility, tearfulness or frequent crying, withdrawal from friends and family, restlessness and agitation, feelings of worthlessness and guilt, lack of enthusiasm and motivation, fatigue or lack of energy, loss of interest in activities, difficulty concentrating, changes of eating and sleeping habits, thoughts of death or suicide.
  - Change in school performance
  - Difficulty concentrating
  - Poor marks
  - Truancy
- Substance abuse
- Noticeable self-abuse
- Physical/somatic complaints

## Flow Chart of Steps



## Roles & Responsibilities of the Student Support Team

### Staff persons suspecting suicidal intent shall:

- ✓ If necessary call the police or 911 if danger appears imminent or the student cannot be located.
- ✓ Report the situation to the principal/designate.
- ✓ Become a member of the Student Support Team.
- ✓ With the Student Support Team, contact the parent/guardian immediately and request that they come to school to take responsibility for their son/daughter.  
**See Things to Consider When Calling Parents - Page 7**
- ✓ If necessary and with one other staff person, escort the student to a hospital emergency department and remain with the student until the responsibility for the student can be transferred to the parent/guardian.
- ✓ With the Student Support Team, encourage the parent/guardian to contact the Family Physician, Hospital Emergency Department, Keystone Child, Youth and Family Services or Other Support Services. **(See Appendix 3, Page 12)**
- ✓ Ask the parent/guardian to sign a consent form which will enable the school to consult with the doctor or the mental health facility. **(Appendix 4, Page 13)**
- ✓ Work with the Student Support Team to develop a Student Support Plan for the student.
- ✓ Contact the Bruce Grey Child and Family Services (CAS) should a parent/guardian fail to respond to the medical needs of their son/daughter who is under 16 years of age. **(Child and Family Services Act Section 72)**

### Principal/Administrator shall:

- ✓ Support the staff person with whom suicidal ideation has been shared.
- ✓ Provide/arrange coverage for staff persons involved in the situation and who may be involved in the Student Support Team.
- ✓ Convene the Student Support Team.
- ✓ Support in communicating to parents the concern about suicidal ideation of their child.
- ✓ Work with the Student Support Team to develop a Student Support Plan.
- ✓ Support the transportation of a student to the local hospital and/or police involvement in gaining support for the student, if required.
- ✓ With the Student Support Team, provide feedback and follow-up to classroom teachers and appropriate staff.
- ✓ Document all actions and complete and store the Student Support Plan in the Office.

- ✓ Store a copy of the Student Support Plan in a sealed envelope marked 'Confidential and only to be opened by the Principal' in the student's OSR.
- ✓ Send a copy to the Mental Health Lead.

**Staff Person identified by Student shall:**

- ✓ Support the staff person with whom the suicidal ideation has been shared.
- ✓ Provide resources and materials to staff person, including Suicide Prevention Protocol.
- ✓ If necessary assist in the transportation of the student to a hospital emergency department and remain with the student until the responsibility for the student can be transferred to the parent/guardian.
- ✓ Work with the Student Support Team and the student to develop a Student Support Plan.
- ✓ With the Student Support Team, provide feedback and follow-up to classroom teachers and appropriate staff.

**Social Worker, Child & Youth Worker, Mental Health Nurse or Mental Health Lead, either in person or via phone shall:**

- ✓ Support the staff person with whom suicidal ideation has been shared.
- ✓ Provide resources and materials to staff person, including Suicide Prevention Protocol.
- ✓ As a member of the Student Support Team, assist with the development of a Student Support Plan.
- ✓ With the Student Support Team, provide feedback and follow-up to classroom teachers, classroom E.A.'s and relevant staff.

**If further support is required the team may consult with Keystone Child, Youth and Family Services.**

Keystone Child, Youth & Family Services, Supervisor on call 519-371-4773



## Things to Consider When Calling Parents

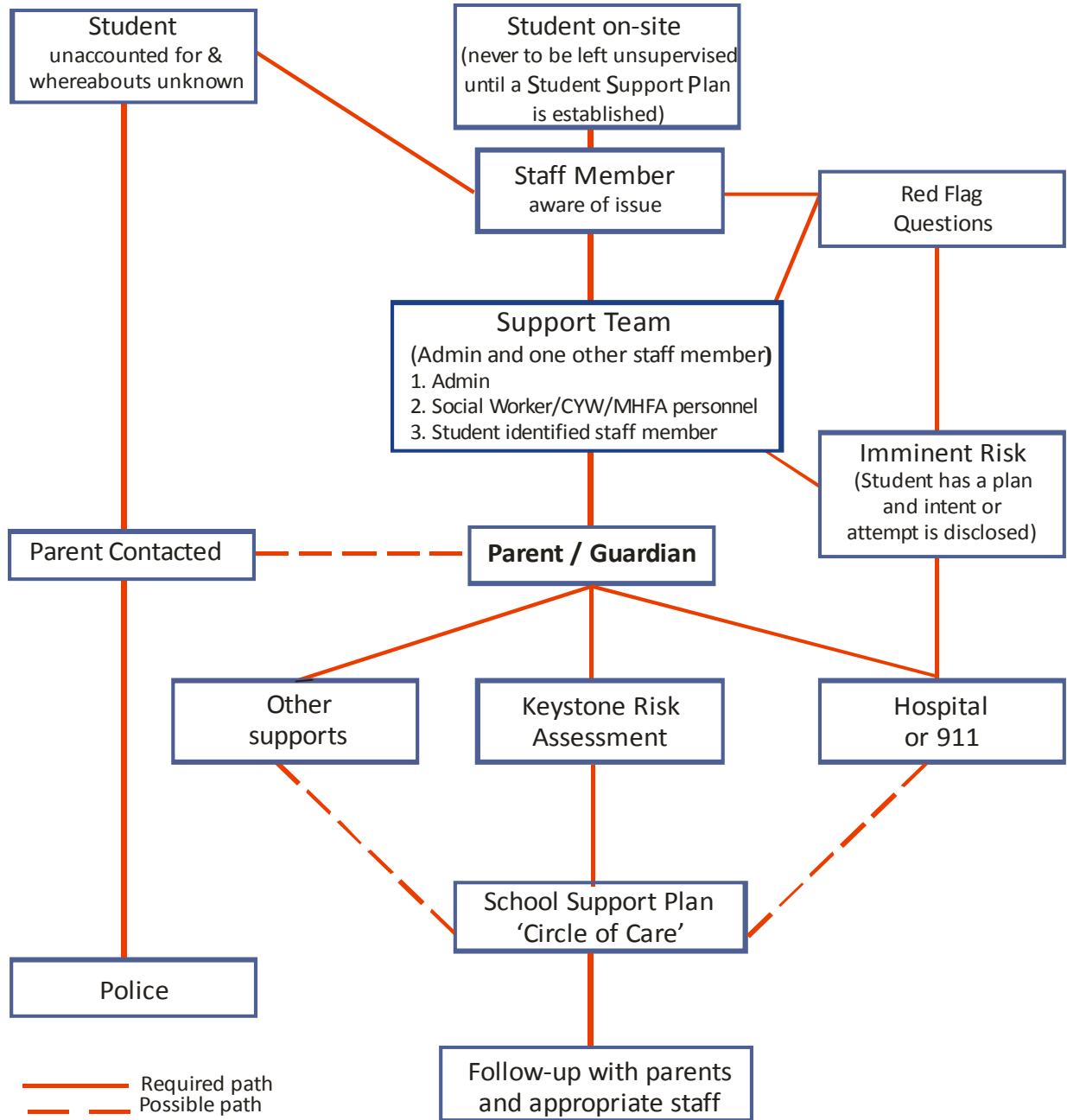
1. Begin by telling the student that you need to call his or her parents because you are concerned about his or her safety and because you are required to let parents know when their son/daughter is in any danger.
2. Ask for the student's input about what to expect during the phone call.
3. Explain to the student what you are going to say to the parents, and keep the student in the room with you while you make the call.
4. When you call the parents, summarize your concerns briefly and ask the parents to meet you and the student at the school. Although all situations are different, the following is a sample of how a parent telephone conversation may proceed. Understand, however, that parents will react differently and these reactions may include, denial, shock, defensiveness, self-blame, anger, becoming over-whelmed and/or grateful to name a few.

***"...this is (name), I'm calling to let you know that I have (son/daughter) here with me right now and we have just had a very sensitive conversation. We have been talking about (name's) current difficulties which seem to be very overwhelming and which have lead to thoughts of self-harm. I know this must be very difficult for you to hear but (name) has experienced thoughts of suicide. As I mentioned, (name) is with me right now and I'm very pleased that he/she has opened up and shared these thoughts and feelings. It is our school Protocol to let parents know right away when we become aware of situations like this and I would like to meet with you at the school as soon as possible to discuss how to proceed."***

5. If the parents seem reluctant to come in, provide a little more detail.
6. If necessary, state that school protocol requires parents to come to the school to meet with staff when their child has made a statement /action regarding possible suicide. If the parents are not able to come to the school immediately, remember that safety of the student is paramount. Don't release the student back to class or let him or her sit alone without supervision by an adult.

*Adapted from: Lifelines: Helping Students At Risk For Suicide,  
Underwood, Springer & Scott,*

## Suspected Suicidal Intent



**CONFIDENTIAL**



**Bruce-Grey Catholic District School Board  
STUDENT SUPPORT PLAN  
for Suicide Prevention**

Date: \_\_\_\_\_

Student:	_____	_____
	First Name	Last Name
School:	_____	
Date of Birth:	_____	Grade: _____
	Month      Day      Year	
Parent/Guardian:	_____	
Contact Numbers:	_____	_____
	Work	Home      Cell

**Support Team**

Administrator: \_\_\_\_\_

Mental Health Staff: \_\_\_\_\_

Reporting Staff: \_\_\_\_\_

Other Support Staff (role): \_\_\_\_\_

Presenting Concern:

Presenting as Imminent risk: Yes  No

**Parent Contact**

Who: \_\_\_\_\_  
 In person  By phone  Other \_\_\_\_\_

Date: \_\_\_\_\_

Time: \_\_\_\_\_

Parent Response:  
 \_\_\_\_\_

Emergency numbers provided to parent? Yes  No

In-School 'Circle of Support' identified with student:

Name:	Relationship:	Supportive Action:
Name:	Relationship:	Supportive Action:
Name:	Relationship:	Supportive Action:

Emergency numbers provided to student? Yes  No

Caring adults at home provide by student:

Name:	Relationship:	Supportive Action:
Name:	Relationship:	Supportive Action:
Name:	Relationship:	Supportive Action:

Identified ways to minimize risk/coping skills for parent and / or student:  
*(ie. remove access to means, provide supervision, reduce stress/work load, engage in activities)*

- #1. Student 'Go To' adult: \_\_\_\_\_
- #2. Safe Space at School: \_\_\_\_\_
- #3. Course load accommodations: \_\_\_\_\_
- #4. Calming activities identified: \_\_\_\_\_
- #5. Handling medication: \_\_\_\_\_
- #6. Making the school environment safe: \_\_\_\_\_
- #7. Other: \_\_\_\_\_

**Next Steps:**

School:

Home:

**The success of the plan relies on good communication and regular follow-up, this section identifies who will do the necessary follow-up and when:**

<b>Follow –Up</b>	<b>By Whom</b>	<b>Date</b>	<b>Follow-up Action</b>
Parents			
Classroom Teachers			
Student			
Other			

**Emergency Contact Numbers:**

Bruce-Grey Catholic District School Board Social Work Staff	519-364-5820
Keystone Child, Youth & Family Services	519-371-4773
Local Hospital	
Grey Bruce Mental Health Crisis Line	1-877-470-5200
Local Services Information	211
Kid’s Help Phone	1-800-668-6868

*Administrator to complete and file in a secure location with a plan for access. Send a copy to Mental Health Lead.*

Review date: \_\_\_\_\_

Sept. 2014

Appendix 3

SUPPORT SERVICES IN BRUCE GREY AREA

September 2014

<b>Bruce-Grey C. D.S.B. Social Work Services</b>	<b>519-364-5820</b>
<b>Keystone Child, Youth &amp; Family Services</b>	<b>519-371-4773</b>
	<b>1-800-567-2384</b>
<b>Bruce Grey Child &amp; Family Services</b>	<b>519-371-4453</b>
<b>(formally CAS)</b>	<b>1-855-322-4453</b>
<b>Victim's Services of Bruce Grey</b>	<b>519-376-7474</b>
	<b>1-888-577-3111</b>
<b>Grey Bruce Mental Health Crisis Line</b>	<b>519-371-3642</b>
	<b>1-877-470-5200</b>
<b>Kid's Help Phone</b>	<b>1-800-668-6868</b>
<b>Hope Grey Bruce (Youth Addiction Services)</b>	<b>519-371-5487</b>
	<b>1-800-265-3133</b>
<b>Local Services Information (United Way)</b>	<b>211</b>
<b>Emergency Services</b>	<b>911</b>
<b>Family Health Team (access through family doctor)</b>	<b>Family Doctor #</b>

***LOCAL HOSPITAL*** Emergency Department

[www.kidshelpphone.ca](http://www.kidshelpphone.ca)

<http://teenmentalhealth.org>

[www.helpguide.org/mental/depression\\_teen.htm](http://www.helpguide.org/mental/depression_teen.htm)

# Appendix 4



Bruce-Grey Catholic District School Board  
799 - 16th Avenue  
Hanover, Ontario N4N 3A1  
(Tel): 519-364-5820 (Fax): 519-364-5882

## Consent for Exchange of Information

Student: \_\_\_\_\_ Gr. / Placement: \_\_\_\_\_  
Last Name First Name

Student Number: \_\_\_\_\_ Date of Birth: \_\_\_\_\_  
Year Month Day

Parent/Guardian: \_\_\_\_\_  
Last Name First Name

Address: \_\_\_\_\_  
Town Postal Code

911# Address: \_\_\_\_\_

Date: \_\_\_\_\_  
Year Month Day

I authorize the Bruce-Grey Catholic District School Board to obtain information relevant to the education of my child, from ~  
\_\_\_\_\_  
Appropriate Agency/Individual  
If deemed appropriate, such information will become part o my child's Ontario Student Record.

Signature(s): \_\_\_\_\_  
\_\_\_\_\_

Witnessed/Verified By: \_\_\_\_\_

Date: \_\_\_\_\_

I authorize the Bruce-Grey Catholic District School Board to convey information relevant to the education of my child, from ~  
\_\_\_\_\_  
Appropriate Agency/Individual  
If deemed appropriate, such information will become part o my child's Ontario Student Record.

Signature(s): \_\_\_\_\_  
\_\_\_\_\_

Witnessed/Verified By: \_\_\_\_\_

Date: \_\_\_\_\_

FREEDOM OF INFORMATION ACT  
Personal information on this is form is collected under the Education Act and will be transferred to the Student Record Folder (OSR).  
Questions about this collection should be directed to the school Principal or Superintendent of Education.