



Suicide Prevention and Intervention Protocol

A School-Based Approach to Suicide Prevention
& Resource Documents

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Purpose of A Suicide Prevention Protocol

Suicide can be prevented. Following these simple steps will help ensure a comprehensive school based approach to suicide prevention for students and staff.

Staff

Staff will receive district information and/or trainings once a year on the policies and procedures and best practices for intervening with students and/or staff at risk for suicide.

Recommendations:

- Review prevention and intervention protocols with all staff
- Train all School and Department Staff in QPR (Question Persuade Refer). Staff will learn how to recognize the warning signs of a suicide crisis and how to question, persuade, and refer someone for help.
- ASIST: Applied Suicide Intervention Skills Training for Administrators, counselors and identified school/department staff.
- Identify at least two ASIST trained staff to be “Screeners”
- Ensure all staff know who the Screeners are within the school (refer to flow chart) and how to access them.

Students

Students will receive information about suicide prevention in health classes. The purpose of this is to teach students how to access help at their schools for themselves, their peers, or others in the community.

Recommendation:

- Use curriculum in line with the Oregon State Standards for Health annually.
- Annually engage students to increase awareness of warning signs and resources available to them.
- Annually inform students of staff having received specialized training to help students at risk for suicide.
- District will schedule annual visits from Lines for Life in grades 6-12.

Parents/Community

Provide parents with informational materials to help them identify whether their child or another person is at risk for suicide. Information should include how to access school and community resources to support students or others in their community that may be at risk for suicide.

Recommendations:

- List resources in the school handbook, social media, website, or newsletter.
- Partner with community agencies or other school districts to offer parent information nights using research-based programs such as QPR or RESPONSE
- Ensure cross communication between community agencies and schools within bounds of confidentiality
- Utilize Family Focus Forum as a way to share mental health resources and to educate parents regarding warning signs.
- Participate in social media campaigns, i.e. “Zero Suicide”.

Warning Signs for Suicide

There is no definitive list of warning signs for suicide.

Ideation - Thoughts of Suicide	Expressing suicidal feelings or thoughts through talking, gesturing, writing, or drawing. Desire to die, or thoughts about dying.
Suicide Plan	Having a plan for suicide and/or to obtain the means to follow through on a suicidal attempt.
Unbearable Pain	Often as the result of a loss/crisis. Expressing they are suffering a great deal emotionally, feeling hopeless, and/or feeling like a burden to others.
Displaying Signs of Depression	Such as a loss of pleasure in activities they used to enjoy, prolonged sad mood, changes in eating or sleeping patterns.
Making Final Arrangements	Saying goodbye as if they won't be seeing someone again. Giving away favorite possessions.
Self-Destructive Behavior	Such as the start of or increase in alcohol or drug use, risky sexual behavior, reckless driving, etc.
Changes in Behavior	Such as pulling away from family, friends, or social groups; anger or hostility.

Risk Factors for Suicide

There is no definitive list of risk factors for suicidal ideation.

Previous Suicide Attempt	This significantly increases the likelihood that someone will complete suicide.
Exposure to Suicide	Friend or family member who attempted or completed suicide.
Abuse	Physical or sexual abuse, being mistreated.
Social Isolation	May lead to feelings of helplessness and depression. Lack of support. Unwilling to seek help.
Depression, Anxiety, Agitation	Primarily Major Depressive Disorder. Feeling trapped or hopeless.
Access to Lethal Means	Such as guns, weapons, knives, medications in the house.
Perceived Major Trouble	Such as trouble at school, at home, or with the law.
Peer Victimization	Bullying, extreme embarrassment, humiliation, or shame.

5 Steps to Help a Suicidal Student

Take all suicidal behavior seriously. **You are required to make an in-person report to a School Screener for any student who reports suicidal ideation.**

1	Establish rapport	Express your concern about what you are observing in their behavior.
2	Ask the question	“Are you thinking about suicide?”
3	If “Yes”, then do not leave this student alone.	Stay with student.
4	Offer comforting things to say	Such as, “Thanks for telling me, I am here to help.”
5	Escort student to a School Screener for a warm handoff	School Screener is the School Counselor, Administrator, or identified ASIST-trained staff.

Suicide Intervention Protocol for School Screeners

School Screener completes **Level 1 Suicide Risk Screening Form**, consults with other School Screener to determine need for Level 2 Assessment



Decision: Do we need to proceed to a Level 2 Suicide Risk Assessment? Decision must be made in consultation with another School Screener or Clackamas County Crisis Line 503-655-8585	
If NO, proceed below	If YES, proceed below
<p>Steps to take to complete Level 1 Assessment:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Communicate with parent/guardian <input type="checkbox"/> Share risk factors present for child <input type="checkbox"/> If determined appropriate give or mail parent/guardian the <i>Parent/Guardian Letter/Info Sheet (found on District Website>Departments>Special Services>Counselors)</i>. <input type="checkbox"/> Consider completing/sharing <i>Student Safety Plan (found on District Website>Departments>Special Services>Counselors)</i>. <input type="checkbox"/> Request parent/guardian sign Release of Information forms for providers (if applicable) <input type="checkbox"/> If needed, develop a school safety protocol (e.g. check ins with counselor, environmental safeguards such as removing scissors from classroom, etc.) <input type="checkbox"/> File original in District identified location with copy in school counselor’s working file 	<p>Level 2 Assessment - In collaboration with School Screener, parent/guardian is referred to one of the Qualified Mental Health Providers (QMHP) below for Suicide Risk Assessment. Options available:</p> <ol style="list-style-type: none"> 1. Contact with <u>student’s mental health therapist/agency</u> <ul style="list-style-type: none"> <input type="checkbox"/> Immediate phone conversation (voicemail not acceptable) <input type="checkbox"/> If parent/guardian unavailable, therapist comes to school <input type="checkbox"/> If parent/guardian available, student transported from school to therapist 2. Consult with <u>Clackamas County Crisis Line (503-655-8585)</u> <ul style="list-style-type: none"> <input type="checkbox"/> Phone consultation <input type="checkbox"/> Crisis Line recommends student be seen at Clackamas County Mental Health Clinic (MHC) (11211 SE 82nd Ave, Happy Valley, OR) <input type="checkbox"/> Crisis Line recommends student be seen by QMHP within their private insurance network 3. Transportation to <u>hospital</u> <ul style="list-style-type: none"> <input type="checkbox"/> Parent/guardian transports <input type="checkbox"/> SRO/law enforcement transports <input type="checkbox"/> Ambulance transports

Level 1 Suicide Risk Screening

(Student interview done by a School Screener)

Risk Is Identified. A concern for risk of suicide is brought to the attention of the School Screener by a staff member, student’s peers, or from direct referral by the student. **If the student is in possession of lethal means (such as guns, weapons, knives, medications) and is attempting life-threatening suicidal action:**

- Secure the area and prevent other students from accessing this area.
- Call 911 to remove lethal means.

Use Supervision. A school staff person must stay with the student in a quiet and private setting to provide supervision and appropriate support until the School Screener meets with the student. If possible, this should be the person who identified the student at risk. All efforts should be taken to avoid sending the student home to an empty house.

Use the Suicide Risk Screening Form. The School Screener interviews the student and conducts a basic Level 1 Suicide Risk Screening. The Suicide Screening Form (located in this document and on District Website>Departments>Special Services>Counselors) is used by the School Screener to document the suicide risk level and to ensure that the Oregon City School District protocol is followed and appropriate actions are taken. It is also used by the School Screener to document the referral, if needed, for Level 2 Suicide Risk Assessment. **When completed, file original in District identified location with copy in school counselor’s working file.*

Consult with other professionals. Upon completion of the Level 1 Suicide Risk Screening, the School Screener consults with another School Screener or with the Clackamas County Crisis Line to determine if a Level 2 Suicide Risk Assessment is warranted.

At any point during the Level 1 Suicide Risk Screening, the School Screener can call the Clackamas County Crisis Line at 503-655-8585 to consult about the student or the situation. *Sharing decision-making with another professional is best practice.*

The outcome of the consultation will be one of the following:

<p>Level 2 Suicide Risk Assessment IS NOT warranted</p>	<p>School Screener develops a Safety Plan with student and parent.</p>
<p>Level 2 Suicide Risk Assessment IS warranted</p>	<p>After consultation, if concerns about suicide are sufficiently high, the student is referred for a Level 2 Suicide Risk Assessment by a Qualified Mental Health Professional*. School counselor and administrator will refer to re-entry documents on pages 11 and 12 for re-entry process.</p>

***See Decision and Action for Level 2 assessment in Suicide Risk Screening Form: Level 1 for list of acceptable Qualified Mental Health Professionals.**

Level 1 Suicide Risk Screening (Continued)

****Parents/guardians must always be notified when there are concerns for risk of suicide****

- If a student discloses thoughts of suicide or if the School Screener has reason to believe there is current risk of suicide, the School Screener will contact the parent/guardian to share concerns. School Screener must have immediate phone conversation with parent/guardian before the student leaves for the day. The student's emergency contacts may be tried if you are unable to reach parent/guardian. **Voicemails, emails, etc. are not acceptable.**
- If all methods to reach the student's parent/guardian are exhausted and contact cannot be made, alert school SRO, call the **Clackamas County Crisis Line at 503-655-8585**, or **Clackamas County Child Abuse Hotline at 971-673-7112** to consult regarding next steps. **Use 911 if the risk of self-harm is imminent.**
- If a student denies having thoughts of suicide and the School Screener does not have reason to believe there is current risk of suicide, it is still recommended that the Screener document the screening and notify parent/guardian to share concerns.
- The Parent/Guardian Letter should be reviewed with and provided to parents or guardians (hard copy or electronic).

Child abuse or neglect. If there is reasonable cause to suspect that a student has been or is likely to be abused or neglected, the School Screener or delegate must make a report of suspected abuse or neglect to the Department of Human Services **Clackamas County Child Abuse Hotline at 971-673-7112.**

Level 2 Suicide Risk Assessment (by a Qualified Mental Health Professional)

If after consultation with another School Screener or the Clackamas County Crisis Line the School Screener determines that it is appropriate to proceed with a Level 2 Suicide Risk Assessment, then the School Screener facilitates a referral to one of the Qualified Mental Health Professionals below (listed in order of preference).

- **Student’s primary mental health therapist:** The School Screener calls the therapist, provider, or agency. If School Screener cannot reach the therapist, the School Screener will utilize other options listed below. *It is not sufficient to leave a voicemail, email, etc. for the therapist.*
- **Clackamas County Crisis Line at 503-655-8585:** The School Screener calls the Crisis Line (with student, if appropriate) and requests assistance and support with determining level of risk and next steps. Make sure to indicate if an interpreter is needed. Possible Crisis Line actions may include:
 - Triage of safety concerns to better understand level of risk and assistance with the development of a safety plan with school staff, student, and parents over the phone.
 - Crisis Line may indicate that face-to-face assessment is needed and suggest that student and family go to Clackamas Mental Health Clinic located at 1121 SE 82nd Avenue, Suite O, Happy Valley, OR 97086.
 - The walk-in clinic provides short term crisis services to those individuals who do not have an existing mental health provider and are experiencing a mental health crisis. This clinic serves individuals that have private insurance, those that are not insured, and those that have OHP. Private insurance will be billed.
- **Hospital Emergency Department:** Assist with arranging transportation to a hospital. Note: presenting to an emergency room is for further assessment only and does not automatically mean the individual will be admitted “to a bed.” For an individual to be admitted to a psychiatric unit, they will be screened by the ED and medical necessity must first be met. It is recommended that you call the hospital ED to talk with a social worker if sending a student there from school. The only child/adolescent psychiatric units in the Portland area are:

Providence Willamette Falls Medical Center Emergency Room

1500 Division St, Oregon City, OR 97045
503-722-3730

Legacy Emmanuel – Randall Children’s Hospital Emergency Room

2801 N Gantenbein Ave, Portland, OR 97227
503-413-2200

Possible transportation options include:

- **Parent/Guardian.** School staff and parent/guardian should consider if this is a safe option (e.g. will student remain safe in car, will parents actually go directly to Emergency Room, etc.)
- **School Resource Officer (SRO) or other police officer (OCPD 503-657-4964).** Police have, at times, been willing to transport to Emergency Rooms but this cannot be guaranteed and is largely dependent on availability. Note: law enforcement protocol is to handcuff and place any individual in the backseat of car for safety reasons.

- **Ambulance.** Call 911 to use this service.

**Note: Permission to see a mental health provider requires parental permission unless the student is 14 years of age or older.* If a parent/guardian is unavailable or unwilling to consent to a Level 2 Suicide Risk Assessment, the School Screener should contact the Clackamas County Department of Human Services Child Abuse Hotline at 971-673-7112 for consultation. It may also be necessary to contact the Clackamas County Crisis Line at 503-655-8585.

Confidentiality

HIPAA and FERPA

All school employees are bound by laws of The Family Education Rights and Privacy Act of 1974; commonly known as FERPA.

Outside partners providing services like mental health or primary care who are working in OCSD schools with students are bound by HIPAA. Both, school staff and outside partners working in schools, are mandatory reporters.

There are situations when confidentially must NOT BE MAINTAINED; if at any time, a student has shared information that indicates the student is an imminent risk of harm/danger to self or others, that information MUST BE shared. The details regarding the student can be discussed with those who need to intervene to keep the student safe. This is in compliance with the spirit of FERPA and HIPAA known as “minimum necessary disclosure.”

Request from Student to Withhold from Parents

The School Screener can say “I know that this is scary to you, and I care, but this is too big for me to handle alone.” If the student still doesn’t want to tell his/her parents, the School Screener can address the fear by asking, “What is your biggest fear?” This helps reduce anxiety and the student gains confidence to tell parents. It also increases the likelihood that the student will come to that school staff again if s/he needs additional help.

EXCEPTIONS for Parental Notification: Abuse or Neglect

Parents need to know about a student’s suicidal ideation unless a result of parental abuse or neglect is possible. The counselor or School Screener is in the best position to make the determination. The school staff will need to let the student know that other people would need to get involved on a need to know basis.

If a student makes a statement such as “My dad/mom would kill me” as a reason to refuse, the school staff can ask questions to determine if parental abuse or neglect is involved. If there is no indication that abuse or neglect is involved, compassionately disclose that the parent needs to be involved.

POSTVENTION Suicide Protocol

Regardless of how comprehensive suicide prevention and intervention may be in a community, not all suicidal behavior can be prevented. It is equally as important to be prepared for prevention and intervention of suicide, as it is to be prepared in the event of attempts or completed suicides.

The school's primary responsibility in these cases is to respond to the tragedy in a manner which appropriately supports students and the school community that has been impacted. This includes having a system in place to work with the multitude of groups that may eventually be involved, such as students, staff, parents, community, media, law enforcement, etc.

Key Points (derived from *After a Suicide: A Toolkit for Schools*, 2011):

- ◆ Prevention after a suicide attempt or completion is very important. Schools should be aware that adolescents and others associated with the event are at an increased risk for suicide.
- ◆ It is important to not “glorify” the suicide and to treat it sensitively when speaking about the event, particularly with the media.
- ◆ It is important to address all deaths in a similar manner. Having one approach for a student who dies of cancer, for example and a different approach for a student who dies by suicide reinforces the stigma that still surrounds suicide.
- ◆ Families and communities can be especially sensitive to the suicide event.
- ◆ Know your resources.

POSTVENTION: What Should a School Do?

- Identify staff that will take the lead in the event of a suicide attempt or completion.
- Identified staff should review and discuss the resource, *After a Suicide: A Toolkit for Schools*, 2011. This resource is the latest comprehensive document dealing with this subject. It can be found at: www.sprc.org or www.afsp.org.
- Identified staff should meet once a year to establish roles and responsibilities in the event that there is an attempt or completion.
- After an attempt or completion, consult the website resources referenced above. In addition, communicate with appropriate community partners for assistance and resources.
- Work with community partners to address the immediate needs of students, staff and parents.
- Be aware that persons may still be traumatized months after an event. Refresh staff on prevention protocols and be responsive to signs of risk.

Reentry from Short-Term Absence due to Suicidal Ideation or Attempted Suicide

School Screeners should follow these steps when the student returns to school after they have been **absent 0-5 days without need for inpatient psychiatric hospitalization**:

<input type="checkbox"/> Obtain relevant Releases of Information	<i>i.e. mental health therapist, parents, medical providers (form at ocsd62.org/special-services/counselors)</i>
<input type="checkbox"/> Review Student Safety Plan located in Suicide Intervention Protocol Resources	<i>Specifically emphasize reviewing identified triggers that may occur in the school setting and access to lethal means</i>
<input type="checkbox"/> Inform/involve relevant staff, as needed	<i>Inform staff that student may need added support and request that staff notify counselor if they notice changes in student's behavior</i>
<input type="checkbox"/> Discuss plan for follow-up mental health supports	<i>i.e. check ins with school counselor, family sets up therapy/follow-up with ongoing therapist</i>
<input type="checkbox"/> Determine if student needs medical evaluation	<i>Non-emergency, no cost medical services available to all students in district at the School-Based Health Center (503-785-8770)</i>
<input type="checkbox"/> Make a plan for student to check in with school counselor in the next week	

Reentry from Long-Term Absence due to Mental Health Concern

School Screeners should follow these steps when the student has been **absent following inpatient psychiatric hospitalization (average length of inpatient hospitalization is 14 days)**:

<i>During Student Absence</i>	
<input type="checkbox"/> Coordinate with student's parent or guardian	<i>Offer support and check-in for discharge updates</i>
<input type="checkbox"/> Obtain relevant Releases of Information	<i>i.e. outpatient therapist, inpatient psychiatric unit (form at ocsd62.org/special-services/counselors)</i>
<input type="checkbox"/> Review Student Safety Plan located in Suicide Intervention Protocol Resources	<i>Specifically emphasize reviewing identified triggers that may occur in the school setting and access to lethal means</i>
<input type="checkbox"/> Inform/involve relevant staff, as needed, within the limits of confidentiality	<i>Inform staff that student may need added support and request that staff notify counselor if they notice changes in student's behavior</i>
<input type="checkbox"/> Follow up with other students who may be impacted	<i>Assess students for risk and determine if other supports are needed</i>
<input type="checkbox"/> Coordinate reentry meeting	<i>Include student, guardians, relevant school staff, and mental health supports, as appropriate</i>
<i>Before Student Returns to School</i>	
<i>Reentry Meeting</i>	
<input type="checkbox"/> Discuss follow-up mental health supports	<i>i.e. check ins with school counselor, family sets up therapy/follow-up with ongoing therapist</i>
<input type="checkbox"/> Determine if health protocol is needed with district nurse	<i>Reach out to district nurse, as needed</i>
<input type="checkbox"/> Review Student Safety Plan located in Suicide Intervention Protocol Resources	<i>Specifically emphasize reviewing identified triggers that may occur in the school setting and access to lethal means</i>
<input type="checkbox"/> Agree upon "safe spaces" at school and support adults in the building	
<input type="checkbox"/> Discuss student's concerns (if any) about returning to school and create a plan for reintegration	<i>Create a plan for what students will say to staff and students regarding their absence. Have an answer prepared for the question: "Where have you been?"</i>
<input type="checkbox"/> Make a follow-up plan for return to school	<i>Schedule initial student check-in appointments and follow-up team meeting OR plan to communicate with team if no plan for a meeting</i>
<i>Coordinate with Staff</i>	
<input type="checkbox"/> Inform/involve relevant staff, as needed	<i>Relevant staff may need to know that student is returning and that they may need additional support and flexibility regarding missing assignments. Request that staff notify counselor if they notice changes in behavior.</i>
<i>When Student Returns to School</i>	
<input type="checkbox"/> Follow up with student first day back and as needed	<i>Per plan created in reentry meeting</i>
<input type="checkbox"/> Contact student's parent or guardian within the first week that student returns to school	<i>Follow-up regarding student's progress adjusting to school. If mental health care was pending, check in regularly to ensure that student is connected with appropriate services.</i>



Resources

Suicide Risk Screening Form: Level 1

To be used for every Level 1 Suicide Risk Screening



I. STUDENT INFORMATION

Date of Initial Contact	Student Name		OCS D Student ID#
D.O.B.	Age	Grade	Name of School Screener
Parents/Guardians		Best Contact Number	
Second/Additional Contact		Best Contact Number	
Language of student		Language of Parent/Guardian	Interpreter Name

II. REFERRAL INFORMATION

<input type="checkbox"/> Student Self-referred	<input type="checkbox"/> School Staff:	<input type="checkbox"/> Parent:	<input type="checkbox"/> Friend:	<input type="checkbox"/> Other:
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What information was shared that raises the concern about suicide risk?

III. INTERVIEW WITH STUDENT

Yes <input type="checkbox"/> No <input type="checkbox"/> Does the student report thinking about suicide?	! In addition to suicidal thoughts, be listening for other risk factors. See page 6 & 7 for examples
Risk Factors:	Things to keep in mind:
Yes <input type="checkbox"/> No <input type="checkbox"/> Does the student report having a plan? Further information: (How student plans to do it, how prepared student is, how soon it may happen) <i>Do you have a plan of how you would kill yourself?</i>	Discuss ways to disable the plan. What can be done about the means, timing, and supervision?
Yes <input type="checkbox"/> No <input type="checkbox"/> Are the means available to carry out the plan? (Rope, guns, weapons, pills, medication, knives, etc.) If yes, describe: <i>Do you have what you would need to carry out the plan?</i> <i>Do you have access to guns? Access to pills?</i>	
Yes <input type="checkbox"/> No <input type="checkbox"/> Does the student report alcohol or drug use? <i>Do you use any drugs or alcohol?</i> Describe:	Use of alcohol and drugs elevates risk due to increased impulsivity and reduced inhibitions.

INTERVIEW WITH STUDENT, continued

Things to keep in mind:

Emotional Pain	<p>Does the student report emotional pain that feels unbearable?</p> <input type="checkbox"/> On a scale of 1-10 (10 being the highest), how does your pain feel right now? <input type="checkbox"/> Has there been a recent personal or family loss including death by suicide? <input type="checkbox"/> Do you feel that you have withdrawn from others or had changes in your behavior? <input type="checkbox"/> Are you experiencing feelings of hopelessness? <input type="checkbox"/> Is there any conflict in your family right now? <input type="checkbox"/> Have you engaged in self-harm or thought about it? <input type="checkbox"/> Have you had any serious peer conflict or loss of romantic attachment? <input type="checkbox"/> Do you have any recent problems with friends?	<p>What does the student identify as things that ease the emotional pain? Think about ideas such as talking, walking, listening to music, art, reading, writing, etc.</p>
Physical Pain	<p>Does the student report physical pain that feels unbearable? Consider asking about the following to assess current level of pain:</p> <input type="checkbox"/> Are you feeling any physical pain? <input type="checkbox"/> On a scale of 1-10 (with 10 being the highest), how does your pain feel right now?	<p>What does the student identify as things that ease the physical pain?</p>
Previous Attempt	<p>Does the student report any previous suicide attempts?</p> <input type="checkbox"/> Do you have any previous suicide attempts? <input type="checkbox"/> When was it? <input type="checkbox"/> What did you do? Describe:	<p>Support past survival skills. Do they have the means they had before? How did they survive after the previous attempts?</p>
Support	<p>Do you have resources or a trusted support system you can turn to when you are feeling suicidal? Describe:</p>	<p>Explore relationships with family members, friends, other adults (coaches, teachers, pastors, etc.).</p>
Mental Health	<p>Yes <input type="checkbox"/> No <input type="checkbox"/> Do you have a mental health therapist? Yes <input type="checkbox"/> No <input type="checkbox"/> Have you ever worked with a therapist?</p> <p>Therapist Name: _____ Comments:</p>	<p>Consider diagnosis, stigma, and/or medication. Was mental health treatment helpful? Why? Why not?</p>

IV. PARENT/GUARDIAN CONTACT

Name of parent/guardian contacted	Date/Time of contact	Parent/Guardian could not be reached <input type="checkbox"/>
<p>Yes <input type="checkbox"/> No <input type="checkbox"/> Was parent/guardian aware of suicidal thoughts/plans? Yes <input type="checkbox"/> No <input type="checkbox"/> Does student have a mental health therapist or counselor? Therapist Name/#: _____ Other student health concerns/medications? _____ Parent/Guardian perception of suicidal risk: _____</p>		



V. INFORMATION GATHERED FROM ADDITIONAL SOURCES (OPTIONAL)

(Student’s Therapist/Agency, Clackamas County Crisis Line 503-655-8585, School Resource Officer, Family Physician, DHS, etc.)

VI. DECISION and ACTION

Decision: Do we proceed to Level 2 Suicide Risk Assessment?

Decision must be made in consultation with another School Screener or the Clackamas County Crisis Line, 503-655-8585

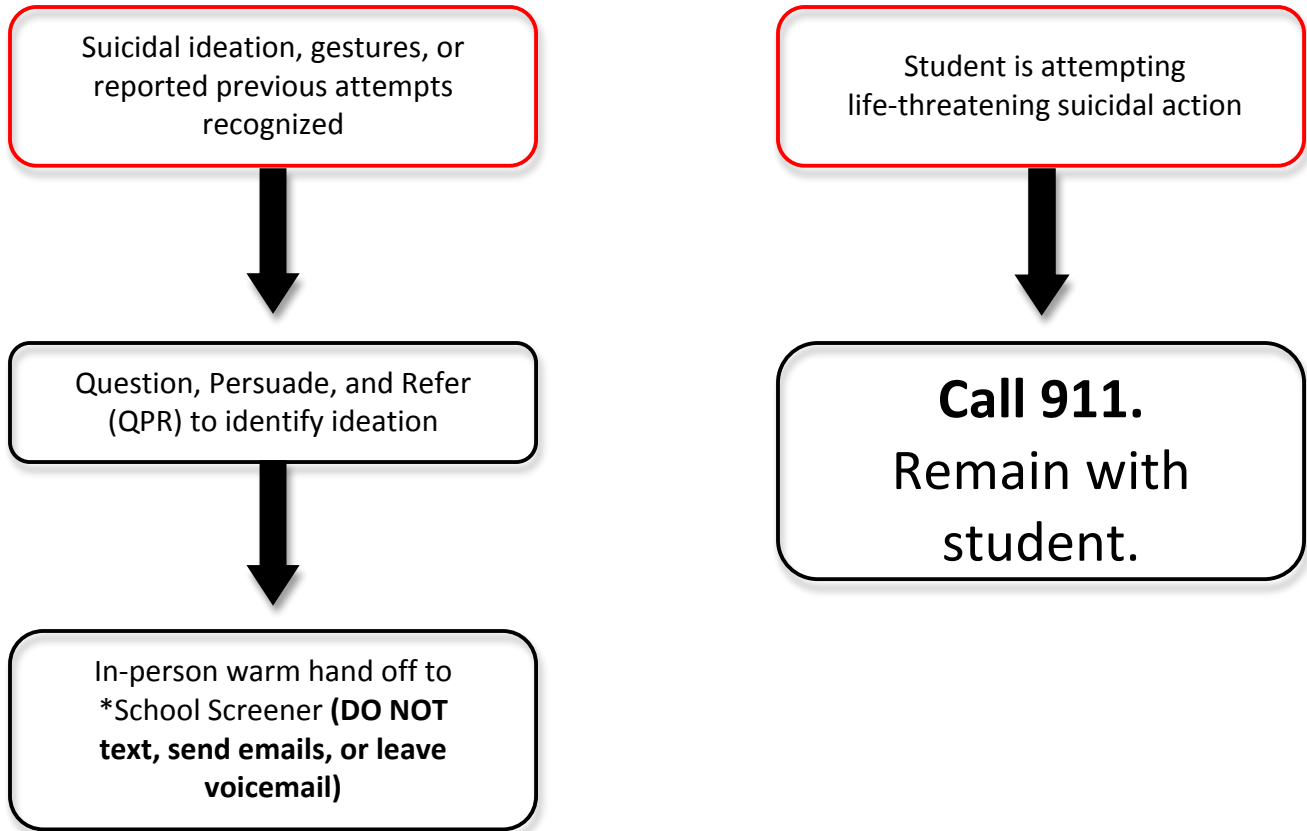
If No, proceed below	If Yes, proceed below.
<p style="text-align: center;"></p> <p>Steps to take to complete Level 1:</p> <ul style="list-style-type: none"> <input type="checkbox"/> Communicate with Parent/Guardian <input type="checkbox"/> Share risk factors present for child <input type="checkbox"/> Give parent the <i>Parent Letter/Info Sheet</i> (can mail, send with student) <input type="checkbox"/> Complete/share Student Resource Document (Safety Plan) <input type="checkbox"/> Request that parents sign release of information forms for providers <input type="checkbox"/> If needed develop a school safety plan (e.g. check ins with counselor, environmental safeguards, such as removing scissors from classroom, etc.) <input type="checkbox"/> File original form with a copy to Counselor’s working file 	<p style="text-align: center;"></p> <p>Level 2 – In collaboration with School Screener, parent/guardian is referred to one of the Qualified Mental Health Providers below for Suicide Risk Assessment. Options available:</p> <p>1) Contact with <u>Student’s mental health therapist/agency</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Immediate phone conversation (leaving a voicemail not acceptable) <input type="checkbox"/> Therapist comes to school <input type="checkbox"/> Student transported from school to therapist <p>Name of Therapist: _____ Phone: _____</p> <p>2) Consult with <u>Clackamas County Crisis Line (503-655-8585)</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Phone consultation <input type="checkbox"/> Crisis Line recommends student be seen at Clackamas County Mental Health Clinic at 11211 SE 82nd Ave Happy Valley <input type="checkbox"/> Crisis Line recommends student be seen by Qualified Mental Health Provider within their private insurance network <p>3) Transportation to <u>hospital</u></p> <ul style="list-style-type: none"> <input type="checkbox"/> Parent transports <input type="checkbox"/> SRO/Law Enforcement transports <input type="checkbox"/> Ambulance transports
<ul style="list-style-type: none"> <input type="checkbox"/> Give parent/guardian the Parent Letter/Info Sheet <input type="checkbox"/> Request parents sign release of information form <input type="checkbox"/> Schedule time/meeting to complete Student Support Plan <input type="checkbox"/> Notify school administrator and file original form with copy to counselor’s working file. <input type="checkbox"/> Consider filling out the Student Resource Document <input type="checkbox"/> Consider providing copy of screening Form to parents 	

The School Screener serves as a school point person for follow up communication with parents and identified community providers, and schedules meeting with student and parent to complete *Student Support & Safety Plan* upon student’s return to school.

Level 1 Screening Completed	School Screener: _____ <div style="display: flex; justify-content: space-around; font-size: small;"> Print Name Signature Date </div> Consulted with: _____ <div style="display: flex; justify-content: center; font-size: small;"> Print Name </div>
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Copies to: School Counselor School Screener Building File

Suicide Intervention Protocol Flow Chart for All Staff



***School Screeners:**

Listed below are the names of ASIST trained School Screeners in your building who staff members should contact **during the school day**.

Contact 1st: _____ Ext. _____ Cell _____

Contact 2nd: _____ Ext. _____ Cell _____

Contact 3rd: _____ Ext. _____ Cell _____

***Other District Screeners:**

Name _____ Dept. _____ Ext. _____ Cell _____

Name _____ Dept. _____ Ext. _____ Cell _____

***After Hours Contacts for your Building:**

Name _____ Cell _____

Name _____ Cell _____

Date of Last Update:

Suicide Risk Quick Reference Cards for All Staff

Warning Signs for Suicide

*This is not a definitive list**

- **Ideation** - thoughts of suicide
- **Suicide Plans**
- **Unbearable Pain**
- **Displaying Signs of Depression**
- **Making Final Arrangements**
- **Self-Destructive Behavior**
- **Changes in Behavior**

**Also refer to Question, Persuade, Refer (QPR) Booklet for more warning signs*

Risk Factors for Suicide

This is not a definitive list

- **Previous Suicide Attempt**
- **Exposure to Suicide**
- **Abuse**
- **Social Isolation**
- **Depression, Anxiety, Agitation**
- **Access to Lethal Means**
- **Perceived Major Trouble**
- **Peer Victimization**

5 Steps to Help a Suicidal Student

Take all suicidal behavior seriously

1. **Establish rapport** - Express your concern about what you are seeing in their behavior.
2. **Ask the question** - "Are you thinking about suicide?"
3. **If "Yes," then do not leave this student alone.**
4. **Offer comforting things to say** - Such as "Thanks for telling me, I'm here to help."
5. **Escort student to a School Screener. Tell an administrator.**

Resources for Students

This is not a definitive list

- **Clackamas County Crisis Line** - 503-655-8585
- **National Suicide Prevention Lifeline** - 1-800-273-TALK
- **Trevor Project Lifeline for LGBTQ+** - 1-866-488-7386
- **Oregon Youthline** - Call 877-968-8491 or text 839863

Student Safety Plan

Student Name:

Completed By:

Date:

Warning signs that I might be having a crisis:

- 1.
- 2.
- 3.

Coping strategies that help me when I'm struggling:

- 1.
- 2.
- 3.

People, places & activities that provide a positive distraction to me when I'm struggling:

- 1.
- 2.
- 3.

People who I can ask for help:

Name: _____ Phone: _____

Name: _____ Phone: _____

Name: _____ Phone: _____

Professionals or agencies I can contact during a crisis:

Clinician Name: _____ Phone: _____

Emergency Contact Number: _____

Local Urgent Care Services Name: _____ Phone: _____

Clackamas County Crisis Line: 503-655-8585

National Suicide Prevention Lifeline: 1-800-273-TALK (8255)

Trevor Project Lifeline: 1-866-488-7386

Oregon Youthline: 1-877-968-8491 or text teen to teen to 839863

Things I can do to make my environment safe:

- 1.
- 2.

One thing that is most important to me and worth living for is:



Dear Parent/Guardian:

As a follow-up to our discussion earlier today, we are concerned about your student's safety and welfare. All expressions of suicidal behavior are taken very seriously within the Oregon City School District and we would like to support you and your student as much as possible during this crisis. To assure the safety of your student, we suggest the following:

- Assure that your student does not have access to firearms or other lethal means, including medications and other weapons at your house or at the home of neighbors, friends, or other family members. Research shows that risk of suicide doubles if a firearm is in the house, even if the firearm is locked up. Your local police department or the District School Resource Officer at your student's school can discuss with you different ways of removing, storing, or disposing of firearms.

- Seek professional help for your student. When a student is at risk for suicide, it is extremely important that they be seen by a Qualified Mental Health Professional for assessment and, if appropriate, ongoing counseling. We can assist you in finding these resources, or you can contact your insurance company directly by calling the number listed on the back of your insurance card. The Clackamas County Crisis Line at 503-655-8585 can assist with locating resources for students (and adults).

- Your student will need support during this crisis including reassurance that you love them and will get them the care they need. Experts recommend being sensitive to their needs by being patient and calm, conveying concern and showing love with no strings attached. Avoid teasing and sarcasm during this time. Take all threats and gestures seriously. Encourage open communication by being non-judgmental and conveying empathy, warmth and respect. Be careful not to display anger toward your student for bringing up this concern, or show resentment because you had to leave work or face other inconveniences in order to ensure your student's safety.

We may need to develop a re-entry plan with you before your student returns to school. A representative from the school may contact you to schedule a meeting to discuss a plan that meets your student's needs. This is to ensure your student's safety while at school.

If you have an immediate concern for your student's safety, please call the Clackamas County Crisis Line at 503-655-8585. Counselors are available 24 hours a day and can advise you on the most appropriate action to help keep your student safe. **In case of emergency, call 911 or go to a hospital emergency room.**

If you have questions or need further assistance from the school, please contact your student's School Counselor:

Name: _____ Phone: _____ Email: _____



Estimado Padre/Guardián:

Como seguimiento a nuestra plática del día de hoy, estamos preocupados por la seguridad y bienestar de su hijo(a). El Distrito Escolar de Oregon City toma muy seriamente las expresiones de la conducta suicida, y nos gustaría apoyarle tanto como sea posible, a usted y a su estudiante durante esta crisis. Para asegurar la seguridad de su estudiante, tenemos las siguientes sugerencias:

- Su estudiante necesita ser supervisado de cerca.
- Asegúrese de que su hijo(a) no tenga acceso a un arma de fuego u otros medios letales, incluyendo medicamentos u otras armas en su casa o en la casa de los vecinos, amigos, u otros miembros de la familia. Las investigaciones muestran que el riesgo de suicidio es doble si hay un arma de fuego en la casa, aún si el arma de fuego está bajo llave. Su departamento local de policía o el Oficial de Recursos Escolares en la Preparatoria de su estudiante puede hablar con usted de las diferentes maneras de deshacerse de las armas de fuego, almacenarlas, o eliminarlas.
- Busque ayuda profesional para su estudiante. Cuando un estudiante está en riesgo de suicidio, es extremadamente importante que sea visto y evaluado por un Profesional de Salud Mental calificado, y si es apropiado, tener consejería continua. Le podemos ayudar en encontrar estos recursos, o puede comunicarse directamente con su compañía de seguros llamando al número que aparece en la parte de atrás de su tarjeta de seguros. La Línea telefónica del Condado de Clackamas 503-655-8585 puede asistir localizando recursos para estudiantes (y adultos).

Durante esta crisis su hijo(a) necesita apoyo incluyendo reafirmación de que usted le quiere y que le proporcionará el cuidado que necesita. Los expertos recomiendan ser sensibles a sus necesidades siendo pacientes y teniendo calma, expresando su preocupación y mostrando su amor sin condiciones. Evite burlas y sarcasmo durante este tiempo. Tome en serio todos los gestos y las amenazas. Mantenga una comunicación abierta no juzgando y transmitiendo empatía, cordialidad y respeto. Tenga cuidado de no mostrar enojo hacia su estudiante por haber tenido esta preocupación, o mostrar resentimiento porque tuvo que salirse del trabajo o por enfrentar otros inconvenientes para poder asegurarse de la seguridad de su estudiante.

Es posible que necesitemos desarrollar un plan de reingreso con usted antes de que su estudiante regrese a la escuela. Un representante de la escuela podrá contactarlo para hacer una reunión y hablar de un plan que cubra las necesidades de su estudiante. Esto es para asegurarnos de la seguridad de su estudiante mientras está en la escuela.

Si tiene una preocupación inmediata acerca de la seguridad de su estudiante, por favor llame a la Línea de Crisis del Condado de Clackamas al teléfono 503-655-8585. Los consejeros están disponibles las 24 horas del día y pueden aconsejarlo en la medida más apropiada para ayudar a mantener seguro a su estudiante. **En caso de emergencia, llame al 911 o vaya al servicio de emergencias de cualquier hospital.**

Si tiene preguntas o necesita ayuda adicional de la escuela, por favor contacte al consejero(a) de la escuela de su estudiante:

Nombre: _____ Teléfono: _____ Email: _____

Otro contacto:

Título: _____ Nombre: _____

Teléfono: _____ Email: _____



Уважаемый родитель / опекун:

В продолжение нашего сегодняшнего обсуждения, мы высказываем заботу о безопасности и благосостоянии вашего ребёнка. Все выражения суицидального поведения принимаются очень серьёзно в школьном округе Орегон Сити, и мы хотели бы как можно более поддержать вас и вашего ребёнка во время этого кризиса. Для обеспечения безопасности ученика мы предлагаем следующее:

- Ваш ребёнок должен находиться под пристальным наблюдением.
- Убедитесь, что ребёнок не имеет доступа к огнестрельному оружию или другим смертоносным средствам, включая лекарства и другое оружие в вашем доме или в доме соседей, друзей или других членов семьи. Исследования показывают, что риск самоубийства удваивается, если огнестрельное оружие находится в доме, даже если это оружие заперто. Ваш местный отдел полиции или специалист по школьным ресурсам в школе вашего ребёнка может обсудить с вами различные способы удаления, хранения или утилизации огнестрельного оружия.
- Обращайтесь за профессиональной помощью. Когда учащийся подвергается риску самоубийства, чрезвычайно важно, чтобы его проверяли квалифицированные специалисты в области психического здоровья для оценки и, при необходимости, постоянного консультирования. Мы можем помочь вам найти эти ресурсы, или вы можете напрямую связаться со своей страховой компанией, позвонив по номеру, указанному на оборотной стороне вашей страховой карточки. Кризисная линия округа Клакамас: 503-655-8585 может помочь найти ресурсы для учеников (и взрослых).

Вашему ребёнку очень нужна поддержка во время этого кризиса, включая заверения, что вы его/её любите и всегда готовы оказать необходимую помощь. Эксперты рекомендуют быть восприимчивыми к потребностям ребёнка, быть терпеливыми и спокойными, показывать заботу и проявлять любовь, не навязывая её. Избегайте дразнить и высказывать сарказм в это время. Принимайте всерьёз все угрозы и жесты. Поощряйте открытое общение, будучи непредвзятыми, показывая сочувствие, теплоту и уважение. Будьте осторожны, чтобы не проявлять гнев по отношению к своему ребёнку касательно этой проблемы или высказывать негодование, что вам пришлось оставить работу или столкнуться с другими неудобствами, чтобы обеспечить его/её безопасность.

Возможно, нам понадобится разработать план восстановления, прежде чем ваш ученик вернётся в школу. Представитель школы может связаться с вами, чтобы запланировать встречу и обсудить план, соответствующий потребностям ученика. Это делается для обеспечения безопасности вашего ребёнка в школе.

Если у вас есть срочные вопросы касательно безопасности вашего ребёнка, пожалуйста, позвоните в Кризисную линию округа Клакамас по телефону 503-655-8585. Консультанты доступны 24 часа в сутки и могут посоветовать вам наиболее подходящие действия, чтобы спасти ребёнка. В случае возникновения чрезвычайной ситуации позвоните 911 или обратитесь в отделение неотложной помощи больницы.

Если у вас есть вопросы или нужна дополнительная помощь от школы, обратитесь к школьному советнику своего ребёнка:

Имя: _____ Телефон: _____ Электронная почта: _____

Другие контакты:

Титул: _____ Имя: _____

Телефон: _____ Электронная почта: _____

County and Oregon Resources



Clackamas County Crisis Line

503-655-8585

<http://www.clackamas.us/behavioralhealth/crisis.html>



National Suicide Prevention Lifeline

1-800-273-TALK (8255)

<http://www.suicidepreventionlifeline.org/>

National Suicide Prevention - Learn the Warning Signs
wallet card or [brochure](#)



Trevor Project Lifeline – LGBTQ

1-866-488-7386

<http://www.thetrevorproject.org/>

Trevor Project brochure

http://b3cdn.net/trevor/6986cb6b7b4fa11e01_g0m6i2xr1.pdf



Oregon Youthline

1-877-968-8491

OregonYouthLine.org

Text teen2teen to 839863 for text support

Teen to teen text, chat and phone line support for teens



Clackamas County Department of Human Services Child Abuse Hotline

971-673-7112



Passport To Languages

Dial 866-533-4998

Enter your three digit Unit/Bldg. # with a 50 in front
and a 0 at the end.



Clackamas County Non-Emergency Police and Fire Dispatch

503-655-8211