

**NEW SHOREHAM SCHOOL DEPARTMENT  
BLOCK ISLAND SCHOOL**

**I. Purpose of Policy:**

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

- Physical and mental health as integral components of student outcomes, both educationally and throughout the lifespan;
- Suicide as a leading cause of death among young people locally, nationally, and globally;
- School's role in providing an environment that is sensitive to individual and societal factors that place youth at greater risk for suicide and helps to foster positive youth development and resilience;
- Comprehensive suicide prevention policies include prevention, intervention, and postvention components; and
- Alignment with other policies, programs and practices that support the overall social, emotional and behavioral health of students (American Foundation For Suicide Prevention, 2022).

This guidance is based on the [Model School District Policy on Suicide Prevention: Model Language, Commentary and Resources](#). It is published by the [American Foundation For Suicide Prevention](#) and represents a collaboration of the Foundation, [American School Counselor Association](#), National Association of School Psychologists, and [The Trevor Project](#).

This policy covers the entire school community defined as: in the school, on school property, at school-sponsored functions and activities, on school buses or vehicles and at bus stops, and at school-sponsored out-of-school events where school staff are present. This policy also includes school responses to suicidal or high-risk behaviors that take place outside of the school environment.

**II. RI General Laws;**

- 1 [Nathan Bruno Jason Flatt Act](#) (RIGL § 16-21.7)
- 2 [Rhode Island Safe Schools Act](#) (RIGL § 16-21-34) requires all school districts, charter schools, career and technical schools, approved private day or residential schools and collaborative schools to adopt the RI Statewide Bullying Policy. RIDE

produced additional bullying guidance in 2015 including a sample investigation response report form.

- 3 [Threat Assessment Teams and Oversight Committees](#) (RIGL §16-21-23.2)
- 4 [Suicide Prevention and Awareness](#) (RIGL §16-22-14)
- 5 [Right to a safe school](#) (RIGL §16-2-17)

### III. **Prevention and Training:**

Per The Nathan Bruno Act, suicide prevention curricula for grades 6-12 and staff professional development will be provided based on research-based programs recommended by RIDE. The content of the curricula will include:

- How to identify appropriate mental health services both within the school and the larger community; and,
- When and how to refer students and their families to those services. Additional content could include:
- Focusing on safe and healthy choices and coping strategies focused on resilience building;
- Recognizing risk factors and warning signs of mental health conditions and suicide in oneself and others; and,
- Identifying help seeking strategies for oneself and others (American Foundation for Suicide Prevention).

Per the Act, this training is required for all students in grades 6-12 every year. School leaders and teams are advised to use professional judgment in exempting a child from instruction. If a parent or school staff member feels that a student may be uncomfortable with the training, if a student expresses discomfort related to the training, or if the curriculum is not developmentally appropriate for a student, other support avenues will be pursued.

All public school personnel hired or contracted by the school district, including, but not limited to: teachers, administration, custodians, lunch personnel, substitutes, nurses, coaches and coaching staff, and volunteers will receive a training in suicide prevention every year. The District may choose from a list of recommended training materials from the RI Department of Education. The training will include:

- How to identify appropriate mental health services both within the school and the larger community, and
- When and how to refer youth and their families to those services.
- These materials and instruction are to be given by qualified suicide prevention instructors as determined by the entities and groups.

The RI Department of Behavioral Health Developmental Disabilities and Hospital developed the [Family Behavioral Health Crisis Plan](#). This is a prevention resource to help families plan in the event of a behavioral health crisis.

#### **IV. Intervention:**

##### **A. Assessment and Referral:**

The following referral process will be prominently disseminated to all staff members, so they know how to respond to a crisis and are knowledgeable about the school and community. This process will be shared with parents, caregivers and students.

1. Once a student has disclosed the need for help, whether directly, or indirectly through someone else, do not leave the student alone.
2. The student will be accompanied to a private area with a trusted adult.
3. A Social Worker, Student Interventionist (Certified as a Social Worker), and/or a Student Assistance Counselor will conduct a suicide risk assessment. If these staff members are not available in the school, the principal will reach out to the medical center for their availability to conduct the risk assessment..

##### **Students who are in immediate danger and crisis...**

1. The building administrator and parent/guardian will be contacted as soon as possible.
2. The student will be transported to the Block Island Medical Center if in immediate danger.
3. Recommendation and referral information for services will be provided to parents/guardians. For example, Kids Link RI at 1-855-543-5465. If the family is already working with a mental health provider outside of school they should be contacted as well.
4. The school-based team will meet with the family to establish a re-entry plan and support team that consists of the Social Worker, Student Interventionist, and/or Student Assistance Counselor, Principle and Nurse.

The Building Administrator or designee will document the process including the suicide risk assessment, contact with parents/guardians, and referral services recommended.

##### **If a student is not in immediate danger, but has an elevated level of risk...**

1. The building administrator and parent/guardian will be contacted as soon as possible.
2. The school support team will decide to create a safety plan in coordination with the student, parent/guardians, and the school-based mental health team. As a part of that plan, they will also connect the student and family to community agencies and resources.

The Building Administrator or designee will document the process including the suicide risk assessment, contact with parents/guardians, and referral services recommended.

**Follow-up:** School based Mental Health Providers will follow up with the parent/guardian, and student to check in with progress on accessing the recommended resources. The team may also follow up to assess how the student is managing. If the student is ever in crisis, but not in immediate danger, the school principal and parent should be contacted. Then, with parent permission, the school-based mental health professional may call Kids Link RI at 1-855-543-5465 to connect the student and family with support services.

**Parent Notification and Involvement:**

- Parents/guardians must be notified by school personnel if their child is in danger or in crisis.
- Parents may be required to provide documentation of care for the student to the school based mental health providers and principle following the student's mental health-related absence, this may be determined by the school district on a case-by-case basis.

**B. Special Considerations for In School and Out Of School Suicide Attempts:**

If a suicide attempt is made during the school day and on campus, it is important to remember that the health and safety of the student and those around him/her is critical. The following steps should be implemented:

- Remain calm;
- Move all other students out of the immediate area;
- Contact the administrator and school based mental health providers and nurse;
- Call 911 and give them as much information as possible, e.g. suicide note, medications taken, and access to weapons, if applicable;
- Provide medical first aid until a medical professional is available if needed;
- Contact parents/guardians/caregivers as soon as possible.
- Remain with the student and provide comfort, listen, and prompt the student to talk;
- Promise privacy and help. The student should have the right to reasonable confidentiality within the school based team;
- Provide support and resources to the parents/guardians; and

The student should only be released to parents/guardians or to a person who is qualified and trained to provide help.

- Superintendent to handle media requests;
- Provide care and determine appropriate support to affected students and staff; and,
- Discuss steps for continuation of school for the next day.

If a suicide attempt by a student is outside of the school day and off campus, the privacy of the student must be protected. Schools should maintain a confidential record of the actions taken to intervene, support, and protect the student. The following steps should be implemented:

- Contact the parents/guardians and offer support to the family;
- Discuss how the student/family would like the school to respond to the attempt to minimize misinformation and rumors.
- Obtain permission from the parents/guardians to share information to ensure the facts regarding the crisis are accurate;
- Designate a staff member to handle media requests;
- Provide care and determine appropriate support to affected students; and,
- Discuss steps for re-entry to school.

**V. Postvention:**

Postvention is an organized response in the aftermath of a suicide to accomplish any one or more of the following:

- To facilitate the healing of individuals from the grief and distress of suicide loss;
- To mitigate other negative effects of exposure to suicide;
- To prevent suicide among people who are at high risk after exposure to suicide.  
([Survivors of Suicide Taskforce](#))

Postvention includes counseling or other care given to students after another student's suicide or attempted suicide. It may include counseling to students that have made a suicide attempt or have reported ideation. This counseling shall consist of regular check ins, as determined by a mental health professional. Schools may delineate the roles and responsibilities of people on the school crisis team for postvention.

Adopted: April 17, 2023

*New Shoreham School District, Block Island School*