

Chapter 3.00 – School Administration

Suicide Prevention: 3.14 Procedures

- I. Each school administrator works in collaboration with the district Youth Mental Health First Aide trainer to develop a roll out plan which ensures that at least 80% of their staff receives the Youth Mental Health First Aide Training, a trauma informed care professional learning experience teaching staff to identify students at risk of self-harm and suicide.
- II. One-page flyer is distributed to principal or designee to disseminate to all school staff prior to students returning to campus. Information page is also posted on the school district website, located in the Student Services section under Suicide Prevention.
- III. All School Based Mental Health Service Providers (SBMHSP) are trained Suicide Risk Assessors, annually prior to the students returning to school (staff to include, but not limited to: school counselors, school social workers, home school liaisons, and school psychologists).
 - a. SBMHSP develops a Safety Plan for any student who has demonstrated self- harm behavior or suicidal ideation and refers the student to the School Wide Support Team to ensure that the student is receiving all necessary supports, services, and interventions.
 - b. Prior to returning to classes, any student who has received an Involuntary Examination participates in a re-entry meeting with the school team and parent. During this time, safety plan is created and/or updated.
- IV. Opportunities for staff to complete two hour continuing education programs of youth suicide awareness and prevention training is located on the district website → Student Services → Suicide Prevention.
- V. All students in grades 6-12 receive 5 hours of Resiliency Education: Civic and Character Education and Life Skills Education (Rule 6A-1.09401)
 - a. Monthly meetings held with all Student Service admins to review required instruction completion.
- VI. Upon a report of self-injury or suicidal ideation is brought to the attention of a School Based Mental Health Service Provider (SBMHSP). SBMHSP notifies the parent/guardian of the received report. Verbal consent for Mobile Response Team (MRT) obtained.
 - a. SBMHSP screens student using Columbia Severity Rating Scale (C-SSRS)
 - b. After de-escalation strategies have been implemented by SBMHSP. If further de-escalation support MRT is notified.
 - c. Prior to the School Resource Officer making an Involuntary Examination determination, de-escalation strategies must be provided to the student, unless imminent danger is present.
 - d. Mental Health Coordinator and Mobile Response Team supervisor meet annually to ensure same screening instrument is being used.

lightshare

MOBILE RESPONSE TEAM

941-364-9355

SUICIDE RISK ASSESSMENT

A REPORT OF SELF-INJURY OR SUICIDAL IDEATION HAS BEEN BROUGHT TO THE ATTENTION OF A SCHOOL BASED MENTAL **HEALTH SERVICE PROVIDER (SBMHSP).** (Rule 6A-4.0010(1))



SBMHSP WILL NOTIFY PARENT/GUARDIAN OF REPORT THAT WAS RECEIVED. VERBAL CONSENT FOR MOBILE RESPONSE TEAM IS OBTAINED AT THIS TIME. (HB 945)

SBMHSP SCREENS THE STUDENT USING THE COLUMBIA SEVERITY RATING SCALE (C-SSRS) TO DETERMINE THE RISK LEVEL AND PROVIDES DE-ESACLATION STRATEGIES. (HB 1421)

Notify Administration

IF DETERMINED MRT IS NECESSARY, NOTIFY SCHOOL RESOURCE OFFICER

If C-SSR indicates Low Risk

*Direct contact with parent/ guardian Duty to Inform mailed to parent/guardian. De-escalation attempts are made.

Safety plan

If C-SSRS

 Suicide Risk Assessor attempts de-escalation strategies. If the attempts were unsuccessful, the Mobile Response Team should be initiated. Obtain verbal consent prior to calling MRT. (941)364-9355.

Notify School Resource Officer

Did the student meet the SRO

criteria for an Involuntary Examination?

Notify Administration

Direct contact with Parent/Guardian.

Copy of Duty to Inform mailed to parent or guardian.

If student remains on campus they must be monitored at all times.

All parental communication and attempts have been logged into Edplan.

Safety Plan completed by Team.

Student placed on SWST agenda.

Mental Health referral MUST have parent/guardian signature indicating consent or declining services. Referral documented in Edplan.

All documentation uploaded to Axiom within 48 hours of event occurring. (Safety Plan, Duty to Inform, Mental Health Referral).

Best practice - release student to parent/guardian with Duty to inform letter and referral resources.

Begin Interventions or monitoring of student. (Signed Nol)

Mobile Response Team Lightshare 941 - 364 - 9355

School Resource Officer arranges transport. (Parent CAN NOT transport)

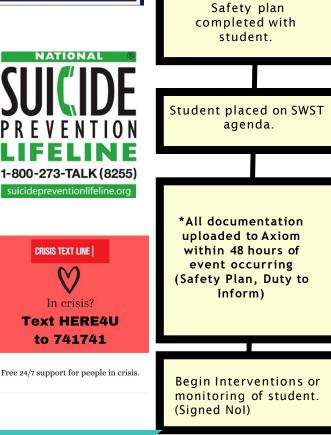
If abuse, neglect or abandonment is suspected, it is mandatory to make a report to the abuse hotline at 1-800-962-2873 or online at www.MyFLFamilies.co m. Upon completion of the report with the hotline, school based administration must be notified of report in accordance with School Board Policy 2.80

- Notify Administration of Involuntary Examination.
- Parent/Guardian notified PRIOR to transport by SRO. (Unless delaying transport could cause additional harm/student in imminent danger.)
- Duty to Inform mailed home.
- Student placed on SWST agenda.
- Upon student returning to school:
 - * Re-Entry Meeting
 - * Safety Plan completed by Team.
- Mental Health referral MUST have parent/guardian signature indicating consent or declining services. Referral documented in Edplan.
- All documentation uploaded to Axiom within 48 hours of student returning to school (Safety Plan, Duty to Inform, Mental Health Referral and Re-Entry Meeting).
- Admin. and SRO within 24 hours of event occurring must complete documentation in the FLDOE single sign on for Involuntary Examinations and Restraint.
- Begin Interventions or monitoring of student. (Signed NoI)

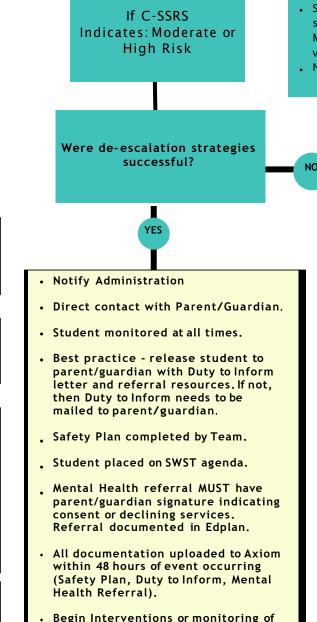


CRISIS TEXT LINE In crisis? **Text HERE4U** to 741741

UPDATED 7/17/23







student. (Signed Nol)

SUICIDE RISK ASSESSOR REQUIRED STEPS IN EDPLAN FOR A SUICIDE RISK ASSESSMENT

THE PROCESS BEGINS ONCE THE REPORT OF SELF INJURY OR SUICIDAL IDEATION HAS BEEN BROUGHT TO THE ATTENTION OF A SCHOOL BASED MENTAL HEALTH PROVIDER AND PARENT/GUARDIAN IS NOTIFIED.





UNFOUNDED

- Direct communication with parent/guardian.
- · De-escalation attempts noted in Edplan.
- Duty to Inform sent home and uploaded into Axiom.



LOW SUICIDE RISK

- Direct communication with parent/guardian.
- De-escalation attempts noted in Edplan.
- Duty to Inform sent home and uploaded into AXIOM.
- Inform administration of outcome and next steps.
- Student referred to School Wide Support Team
- Safety plan created with student and shared with pertinent staff members.
- Complete Edplan documentation and upload into student's digital cumulative folder in Axiom.



MODERATE OR HIGH RISK

- Direct contact with parents.
- De-escalation attempts noted in Edplan.
- Duty to inform sent home and uploaded into document section in Axiom.
- Informs administration of outcome and next steps.
- Referred to school wide support team
- Safety plan created with student and shared with pertinent staff members.
- Complete Edplan documentation and upload into student's digital cumulative folder in Axiom.
- High Risk- If student meets Involuntary Examination Criteria Verify re-entry plan requirement.

SUICIDE RISK ASSESSOR

NOTIFIES

PARENT/GUARDIAN PRIOR

TO SCREENING, UNLESS IN

IMMINENT DANGER IS

PRESENT.

IF A MENTAL HEALTH REFERRAL IS NEEDED -

- 1.) STUDENT IS REFERRED TO SWST.
- 2.) MUST OBTAIN PARENT/GUARDIAN SIGNATURE INDICATING CONSENT OR DECLINING SERVICES.
- 3.) DOCUMENT MENTAL HEALTH REFERRALS IN EDPLAN.
- 4.) UPLOAD SIGNED MH REFERRAL TO AXIOM

REFER TO MENTAL HEALTH REFERRAL FLOW CHART