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Suicide Prevention: BP 5141.52

Students

The Board of Trustees 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. In an effort to reduce suicidal behavior and its impact on students and families, the Superintendent or designee shall develop measures and strategies for suicide prevention, intervention, and postvention.

In developing measures and strategies for use by the district, the Superintendent or designee may consult with school health professionals, school counselors, school psychologists, school social workers, administrators, other staff, parents/guardians, students, suicide prevention experts, local health agencies, mental health professionals, and community organizations.

(cf. 1220 - Citizen Advisory Committees)
(cf. 1400 - Relations Between Other Governmental Agencies and the Schools)

Such measures and strategies shall include, but are not limited to:

1. Staff development on suicide awareness and prevention for teachers, school counselors, and other district employees who interact with students

(cf. 4131 - Staff Development)
(cf. 4231 - Staff Development)
(cf. 4331 - Staff Development)

2. Instruction to students in problem-solving and coping skills to promote students’ mental, emotional, and social health and well-being, as well as instruction in recognizing and appropriately responding to warning signs of suicidal intent in others

(cf. 6142.8 - Comprehensive Health Education)

3. Methods for promoting a positive school climate that enhances students’ feelings of connectedness with the school and that is characterized by caring staff and harmonious interrelationships among students

(cf. 5131 - Conduct)
(cf. 5131.2 - Bullying)
(cf. 5137 - Positive School Climate)
(cf. 5145.3 - Nondiscrimination/Harassment)
(cf. 5145.7 - Sexual Harassment)
(cf. 5145.9 - Hate-Motivated Behavior)

4. The provision of information to parents/guardians regarding risk factors and warning signs of suicide, the severity of the suicide problem among youth, the district’s suicide prevention curriculum, basic steps for helping suicidal youth, and/or school and community resources that can help youth in crisis

5. Encouragement for students to notify appropriate school personnel or other adults when they are experiencing thoughts of suicide or when they suspect or have knowledge of another student's suicidal intentions

6. Crisis intervention procedures for addressing suicide threats or attempts

7. Counseling and other postvention strategies for helping students, staff, and others cope in the aftermath of a student's suicide

As appropriate, these measures and strategies shall specifically address the needs of students who are at high risk of suicide, including, but not limited to, students who are bereaved by suicide; students with disabilities, mental illness, or substance use disorders; students who are experiencing homelessness or who are in out-of-home settings such as foster care; and students who are lesbian, gay, bisexual, transgender, or questioning youth.

(Education Code 215)

The Board shall review, and update as necessary, this policy at least every five years.

(Education Code 215)

Legal Reference:
EDUCATION CODE
215 Student suicide prevention policies
215.5 Suicide prevention hotline contact information on student identification cards
216 Suicide prevention online training programs
32280-32289 Comprehensive safety plan
49060-49079 Student records
49602 Confidentiality of student information
49604 Suicide prevention training for school counselors
GOVERNMENT CODE
810-996.6 Government Claims Act
PENAL CODE
11164-11174.3 Child Abuse and Neglect Reporting Act
WELFARE AND INSTITUTIONS CODE
5698 Emotionally disturbed youth; legislative intent
5850-5883 Children's Mental Health Services Act
COURT DECISIONS
Management Resources:
CALIFORNIA DEPARTMENT OF EDUCATION PUBLICATIONS
Health Education Content Standards for California Public Schools, Kindergarten Through Grade Twelve, 2008
Health Framework for California Public Schools, Kindergarten Through Grade Twelve, 2003
CENTERS FOR DISEASE CONTROL AND PREVENTION PUBLICATIONS
School Connectedness: Strategies for Increasing Protective Factors Among Youth, 2009
NATIONAL ASSOCIATION OF SCHOOL PSYCHOLOGISTS PUBLICATIONS
Preventing Suicide: Guidelines for Administrators and Crisis Teams, 2015
U.S. DEPARTMENT OF HEALTH AND HUMAN SERVICES PUBLICATIONS
WEB SITES
American Association of Suicidology: http://www.suicidology.org
American Foundation for Suicide Prevention: https://afsp.org
American Psychological Association: http://www.apa.org
American School Counselor Association: https://www.schoolcounselor.org
California Department of Education, Mental Health: http://www.cde.ca.gov/ls/cg/mh
California Department of Health Care Services, Suicide Prevention Program: http://www.dhcs.ca.gov/services/MH/Pages/SuicidePrevention.aspx
Centers for Disease Control and Prevention, Mental Health: http://www.cdc.gov/mentalhealth
National Association of School Psychologists: https://www.nasponline.org
National Institute for Mental Health: http://www.nimh.nih.gov
Trevor Project: http://thetrevorproject.org
U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration: http://www.samhsa.gov

Policy WHEATLAND UNION HIGH SCHOOL DISTRICT
adopted: February 13, 2019 Wheatland, California
Wheatland Union High School Board Policy

Suicide Prevention: AR 5141.52
Students

Student identification cards shall include the National Suicide Prevention Lifeline telephone number and may also include the Crisis Text Line and/or a local suicide prevention hotline telephone number. (Education Code 215.5)

Staff Development

Suicide prevention training shall be provided to teachers, counselors, and other district employees who interact with students. The training shall be offered under the direction of a district counselor/psychologist and/or in cooperation with one or more community mental health agencies.

(cf. 4131 - Staff Development)
(cf. 4231 - Staff Development)
(cf. 4331 - Staff Development)

Materials for training shall include how to identify appropriate mental health services at the school site and within the community, and when and how to refer youth and their families to those services. Materials also may include programs that can be completed through self-review of suitable suicide prevention materials. (Education Code 215)

Staff development shall include research and information related to the following topics:

1. The higher risk of suicide among certain groups, including, but not limited to, students who are bereaved by suicide; students with disabilities, mental illness, or substance use disorders; students who are experiencing homelessness or who are in out-of-home settings such as foster care; and students who are lesbian, gay, bisexual, transgender, or questioning youth

2. Individual risk factors such as previous suicide attempt(s) or self-harm, history of depression or mental illness, family history of suicide or violence, feelings of isolation, interpersonal conflicts, a recent severe stressor or loss, family instability, impulsivity, and other factors

(cf. 5131.6 - Alcohol and Other Drugs)

3. Warning signs that may indicate depression, emotional distress, or suicidal intentions, such as changes in students' personality or behavior and verbalizations of hopelessness or suicidal intent

4. Protective factors that may help to decrease a student's suicide risk, such as resiliency, problem-solving ability, access to mental health care, and positive connections to family, peers, school, and community

5. Instructional strategies for teaching the suicide prevention curriculum and promoting mental and emotional health
6. School and community resources and services, including resources and services that meet the specific needs of high-risk groups
   (cf. 5141.6 - School Health Services)
   (cf. 6164.2 - Guidance/Counseling Services)

7. Appropriate ways to interact with a student who is demonstrating emotional distress or is suicidal and procedures for intervening when a student attempts, threatens, or discloses the desire to die by suicide, including, but not limited to, appropriate protocols for monitoring the student while the immediate referral of the student to medical or mental health services is being processed

8. District procedures for responding after a suicide has occurred

Instruction

The district's comprehensive health education program shall promote the healthy mental, emotional, and social development of students and shall be aligned with the state content standards and curriculum framework. Suicide prevention instruction shall be incorporated into the health education curriculum at appropriate secondary grades and shall be designed to help students:

1. Identify and analyze signs of depression and self-destructive behaviors and understand how feelings of depression, loss, isolation, inadequacy, and anxiety can lead to thoughts of suicide
2. Develop coping and resiliency skills and self-esteem
3. Learn to listen, be honest, share feelings, and get help when communicating with friends who show signs of suicidal intent
4. Identify trusted adults, school resources, and/or community crisis intervention resources where youth can get help and recognize that there is no stigma associated with seeking services for mental health, substance abuse, and/or suicide prevention
   (cf. 5131.6 - Alcohol and Other Drugs)
   (cf. 5141.6 - School Health Services)
   (cf. 6142.8 - Comprehensive Health Education)
   (cf. 6164.2 - Guidance/Counseling Services)

Intervention

Students shall be encouraged to notify a teacher, principal, counselor, or other adult when they are experiencing thoughts of suicide or when they suspect or have knowledge of another student's suicidal intentions.

Every statement regarding suicidal intent shall be taken seriously. Whenever a staff member suspects or has knowledge of a student's suicidal intentions based on the student's verbalizations or act of self-harm, the staff member shall promptly notify the principal or school counselor, who shall implement district intervention protocols as appropriate.
Although any personal information that a student discloses to a school counselor shall generally not be revealed, released, referenced, or discussed with third parties, the counselor may report to the principal or student’s parents/guardians when there is reasonable cause to believe that disclosure is necessary to avert a clear and present danger to the health, safety, or welfare of the student or others within the school community. In addition, the counselor may disclose information of a personal nature to psychotherapists, other health care providers, or the school nurse for the sole purpose of referring the student for treatment. (Education Code 49602)

(cf. 5141 - Health Care and Emergencies)

School employees shall act only within the authorization and scope of their credential or license. An employee is not authorized to diagnose or treat mental illness unless specifically licensed and employed to do so. (Education Code 215)

Whenever schools establish a peer counseling system to provide support for students, peer counselors shall receive training that includes identification of the warning signs of suicidal behavior and referral of a suicidal student to appropriate adults.

(cf. 5138 - Conflict Resolution/Peer Mediation)

When a suicide attempt or threat is reported, the principal or designee shall ensure student safety by taking the following actions:

1. Immediately securing medical treatment and/or mental health services as necessary
2. Notifying law enforcement and/or other emergency assistance if a suicidal act is being actively threatened
3. Keeping the student under continuous adult supervision until the parent/guardian and/or appropriate support agent or agency can be contacted and has the opportunity to intervene
4. Removing other students from the immediate area as soon as possible

(cf. 0450 - Comprehensive Safety Plan)
(cf. 5141 - Health Care and Emergencies)

The principal or designee shall document the incident in writing, including the steps that the school took in response to the suicide attempt or threat.

(cf. 5125 - Student Records)

The Superintendent or designee shall follow up with the parent/guardian and student in a timely manner to provide referrals to appropriate services as needed. If the parent/guardian does not access treatment for the student, the Superintendent or designee may meet with the parent/guardian to identify barriers to treatment and assist the family in providing follow-up care for the student. If follow-up care is still not provided, the Superintendent or designee shall consider whether it is necessary, pursuant to laws for mandated reporters of child neglect, to refer the matter to the local child protective services agency.
For any student returning to school after a mental health crisis, the principal or designee and/or school counselor may meet with the parents/guardians and, if appropriate, with the student to discuss re-entry and appropriate next steps to ensure the student's readiness for return to school and determine the need for ongoing support.

Postvention

In the event that a student dies by suicide, the Superintendent or designee shall communicate with the student’s parents/guardians to offer condolences, assistance, and resources. In accordance with the laws governing confidentiality of student record information, the Superintendent or designee shall consult with the parents/guardians regarding facts that may be divulged to other students, parents/guardians, and staff.

The Superintendent or designee shall implement procedures to address students’ and staff's grief and to minimize the risk of imitative suicide or suicide contagion. The Superintendent or designee shall provide students, parents/guardians, and staff with information, counseling, and/or referrals to community agencies as needed. School staff may receive assistance from school counselors or other mental health professionals in determining how best to discuss the suicide or attempted suicide with students.

Any response to media inquiries shall be handled by the district-designated spokesperson who shall not divulge confidential information. The district's response shall not sensationalize suicide and shall focus on the district's postvention plan and available resources.

After any suicide or attempted suicide by a student, the Superintendent or designee shall provide an opportunity for all staff who responded to the incident to debrief, evaluate the effectiveness of the strategies used, and make recommendations for future actions.

Regulation   WHEATLAND UNION HIGH SCHOOL DISTRICT
approved: February 13, 2019   Wheatland, California
Bullying: BP 5131.2

Students

The Board of Trustees recognizes the harmful effects of bullying on student well-being, student learning, and school attendance and desires to provide a safe school environment that protects students from physical and emotional harm. No individual or group shall, through physical, written, verbal, visual, or other means, harass, sexually harass, threaten, intimidate, cyberbully, cause bodily injury to, or commit hate violence against any student or school personnel, or retaliate against them for filing a complaint or participating in the complaint resolution process.

(cf. 5131 - Conduct)
(cf. 5136 - Gangs)
(cf. 5145.3 - Nondiscrimination/Harassment)
(cf. 5145.7 - Sexual Harassment)
(cf. 5145.9 - Hate-Motivated Behavior)

The Superintendent or designee shall develop strategies for addressing bullying in district schools with the involvement of students, parents/guardians, and staff. As appropriate, the Superintendent or designee may also collaborate with social services, mental health services, law enforcement, courts, and other agencies and community organizations in the development and implementation of effective strategies to promote safety in schools and the community.

(cf. 1220 - Citizen Advisory Committees)
(cf. 1400 - Relations Between Other Governmental Agencies and the Schools)
(cf. 6020 - Parent Involvement)

Such strategies shall be incorporated into the comprehensive safety plan and, to the extent possible, into the local control and accountability plan and other applicable district and school plans.

(cf. 0420 - School Plans/Site Councils)
(cf. 0450 - Comprehensive Safety Plan)
(cf. 0460 - Local Control and Accountability Plan)

Any complaint of bullying shall be investigated and, if determined to be discriminatory, resolved in accordance with law and the district's uniform complaint procedures specified in AR 1312.3. If, during the investigation, it is determined that a complaint is about nondiscriminatory bullying, the principal or designee shall inform the complainant and shall take all necessary actions to resolve the complaint.

(cf. 1312.3 - Uniform Complaint Procedures)
Any employee who permits or engages in bullying or retaliation related to bullying shall be subject to disciplinary action, up to and including dismissal.

(cf. 4118 - Dismissal/Suspension/Disciplinary Action)
(cf. 4119.21/4219.21/4319.21 - Professional Standards)
(cf. 4218 - Dismissal/Suspension/Disciplinary Action)

Legal Reference:
EDUCATION CODE
200-262.4 Prohibition of discrimination
32282 Comprehensive safety plan
32283.5 Bullying; online training
35181 Governing board policy on responsibilities of students
35291-35291.5 Rules
48900-48925 Suspension or expulsion
48985 Translation of notices
52060-52077 Local control and accountability plan

PENAL CODE
422.55 Definition of hate crime
647 Use of camera or other instrument to invade person's privacy; misdemeanor
647.7 Use of camera or other instrument to invade person's privacy; punishment
653.2 Electronic communication devices, threats to safety

CODE OF REGULATIONS, TITLE 5
4600-4670 Uniform complaint procedures

UNITED STATES CODE, TITLE 47
254 Universal service discounts (e-rate)

CODE OF FEDERAL REGULATIONS, TITLE 28
35.107 Nondiscrimination on basis of disability; complaints

CODE OF FEDERAL REGULATIONS, TITLE 34
104.7 Designation of responsible employee for Section 504
106.8 Designation of responsible employee for Title IX
110.25 Notification of nondiscrimination on the basis of age

COURT DECISIONS

Management Resources:
CSBA PUBLICATIONS
Final Guidance: AB 1266, Transgender and Gender Nonconforming Students, Privacy, Programs, Activities & Facilities, Legal Guidance, March 2014
Providing a Safe, Nondiscriminatory School Environment for Transgender and Gender-Nonconforming Students, Policy Brief, February 2014
Addressing the Conditions of Children: Focus on Bullying, Governance Brief, December 2012
Safe Schools: Strategies for Governing Boards to Ensure Student Success, 2011
Cyberbullying: Policy Considerations for Boards, Policy Brief, rev. July 2010
Building Healthy Communities: A School Leaders Guide to Collaboration and Community Engagement, 2009

CALIFORNIA DEPARTMENT OF EDUCATION PUBLICATIONS
Bullying Module
California's Social and Emotional Learning: Guiding Principles, 2018
Social and Emotional Learning in California: A Guide to Resources, 2018
Health Education Content Standards for California Public Schools: Kindergarten Through Grade Twelve, 2008
Bullying at School, 2003

CALIFORNIA OFFICE OF THE ATTORNEY GENERAL PUBLICATIONS
Promoting a Safe and Secure Learning Environment for All: Guidance and Model Policies to Assist California K-12 Schools in Responding to Immigration Issues, April 2018

U.S. DEPARTMENT OF EDUCATION, OFFICE FOR CIVIL RIGHTS PUBLICATIONS
Dear Colleague Letter: Responding to Bullying of Students with Disabilities, October 2014
Guidance to America's Schools: Bullying of Students with Disabilities, October 2014
Dear Colleague Letter: Guidance on Schools' Obligations to Protect Students from Student-on-Student Harassment on the Basis of Sex; Race, Color and National Origin; and Disability, October 26, 2010
Dear Colleague Letter: Harassment and Bullying, October 2010

WEB SITES
CSBA: http://www.csba.org
California Department of Education, Safe Schools Office: http://www.cde.ca.gov/ls/ss
Center on Great Teachers and Leaders: https://gtlcenter.org
Collaborative for Academic Social and Emotional Learning: https://casel.org
Common Sense Media: http://www.commonsensemedia.org
National School Safety Center: http://www.schoolsafety.us
Partnership for Children and Youth: https://www.partnerforchildren.org

Policy WHEATLAND UNION HIGH SCHOOL DISTRICT
adopted: August 14, 2019 Wheatland, California
Wheatland Union High School Board Policy

Bullying: AR 5131.2

Students

Definitions

Bullying is an unwanted, aggressive behavior that involves a real or perceived imbalance of power between individuals with the intent to cause emotional or physical harm. Bullying can be physical, verbal, or social/relational and involves repetition or potential repetition of a deliberate act.

Cyberbullying includes the electronic creation or transmission of harassing communications, direct threats, or other harmful texts, sounds, or images. Cyberbullying also includes breaking into another person’s electronic account or assuming that person's online identity in order to damage that person's reputation.

(c.f. 5145.2 - Freedom of Speech/Expression)
(c.f. 6163.4 - Student Use of Technology)

Examples of the types of conduct that may constitute bullying and are prohibited by the district include, but are not limited to:

1. Physical bullying that inflicts harm upon a person's body or possessions, such as hitting, kicking, pinching, spitting, tripping, pushing, taking or breaking someone's possessions, or making cruel or rude hand gestures

2. Verbal bullying that includes saying or writing hurtful things, such as teasing, name-calling, inappropriate sexual comments, taunting, or threats to cause harm

3. Social/relational bullying that harms a person's reputation or relationships, such as leaving a person out of an activity on purpose, influencing others not to be friends with someone, spreading rumors, or embarrassing someone in public

4. Cyberbullying, such as sending demeaning or hateful text messages or emails, sending rumors by email or by posting on social networking sites, or posting embarrassing photos, videos, web site, or fake profiles

Measures to Prevent Bullying

The Superintendent or designee shall implement measures to prevent bullying in district schools, including, but not limited to, the following:

1. Ensuring that each school establishes clear rules for student conduct and implements strategies to promote a positive, collaborative school climate

(c.f. 5131 - Conduct)
(c.f. 5137 - Positive School Climate)
2. Providing to students, through student handbooks and other age-appropriate means, information about district and school rules related to bullying, mechanisms available for reporting incidents or threats, and the consequences for engaging in bullying

3. Encouraging students to notify school staff when they are being bullied or when they suspect that another student is being bullied, and providing means by which students may report threats or incidents confidentially and anonymously

4. Conducting an assessment of bullying incidents at each school and, if necessary, increasing supervision and security in areas where bullying most often occurs, such as classrooms, playgrounds, hallways, restrooms, and cafeterias

5. Annually notifying district employees that, pursuant to Education Code 234.1, any school staff who witnesses an act of bullying against a student has a responsibility to immediately intervene to stop the incident when it is safe to do so

Staff Development

The Superintendent or designee shall make the California Department of Education’s online training module on the dynamics of bullying and cyberbullying, which includes the identification of bullying and cyberbullying and the implementation of strategies to address bullying, available annually to all certificated staff and to other employees who have regular interaction with students. (Education Code 32283.5)

(cf. 4131 - Staff Development)
(cf. 4231 - Staff Development)
(cf. 4331 - Staff Development)

The Superintendent or designee shall provide training to teachers and other school staff to raise their awareness about the legal obligation of the district and its employees to prevent discrimination, harassment, intimidation, and bullying of district students. Such training shall be designed to provide staff with the skills to:

1. Discuss the diversity of the student body and school community, including their varying immigration experiences

2. Discuss bullying prevention strategies with students, and teach students to recognize the behavior and characteristics of bullying perpetrators and victims

3. Identify the signs of bullying or harassing behavior

4. Take immediate corrective action when bullying is observed

5. Report incidents to the appropriate authorities, including law enforcement in instances of criminal behavior
Student Instruction

As appropriate, the district shall provide students with instruction, in the classroom or other educational settings, that promotes social-emotional learning, effective communication and conflict resolution skills, character/values education, respect for cultural and individual differences, self-esteem development, assertiveness skills, and appropriate online behavior.

(cf. 6142.8 - Comprehensive Health Education)
(cf. 6142.94 - History-Social Science Instruction)

The district shall also educate students about the negative impact of bullying, discrimination, intimidation, and harassment based on actual or perceived immigration status, religious beliefs and customs, or any other individual bias or prejudice.

Students should be taught the difference between appropriate and inappropriate behaviors, how to advocate for themselves, how to help another student who is being bullied, and when to seek assistance from a trusted adult. As role models for students, staff shall be expected to demonstrate effective problem-solving and anger management skills.

To discourage cyberbullying, teachers may advise students to be cautious about sharing passwords, personal data, or private photos online and to consider the consequences of making negative comments about others online.

Reporting and Filing of Complaints

Any student, parent/guardian, or other individual who believes that a student has been subjected to bullying or who has witnessed bullying may report the incident to a teacher, the principal, a compliance officer, or any other available school employee.

When a report of bullying is submitted, the principal or a district compliance officer shall inform the student or parent/guardian of the right to file a formal written complaint in accordance with AR 1312.3 - Uniform Complaint Procedures. The student who is the alleged victim of the bullying shall be given an opportunity to describe the incident, identify witnesses who may have relevant information, and provide other evidence of bullying.

(cf. 1312.3 - Uniform Complaint Procedures)

Within one business day of receiving such a report, a staff member shall notify the principal of the report, whether or not a uniform complaint is filed. In addition, any school employee who observes an incident of bullying involving a student shall, within one business day, report such observation to the principal or a district compliance officer, whether or not the alleged victim files a complaint.

Within two business days of receiving a report of bullying, the principal shall notify the district compliance officer identified in AR 1312.3.
When the circumstances involve cyberbullying, individuals with information about the activity shall be encouraged to save and print any electronic or digital messages that they feel constitute cyberbullying and to notify a teacher, the principal, or other employee so that the matter may be investigated. When a student uses a social networking site or service to bully or harass another student, the Superintendent or designee may file a request with the networking site or service to suspend the privileges of the student and to have the material removed.

Discipline/Corrective Actions

Corrective actions for a student who commits an act of bullying of any type may include counseling, behavioral intervention and education, and, if the behavior is severe or pervasive as defined in Education Code 48900, may include suspension or expulsion in accordance with district policies and regulations.

(cf. 5138 - Conflict Resolution/Peer Mediation)
(cf. 5144 - Discipline)
(cf. 5144.1 - Suspension and Expulsion/Due Process)
(cf. 5144.2 - Suspension and Expulsion/Due Process (Students with Disabilities))
(cf. 6159.4 - Behavioral Interventions for Special Education Students)

When appropriate based on the severity or pervasiveness of the bullying, the Superintendent or designee shall notify the parents/guardians of victims and perpetrators and may contact law enforcement.

The Superintendent, principal, or principal's designee may refer a victim, witness, perpetrator, or other student affected by an act of bullying to a school counselor, school psychologist, social worker, child welfare attendance personnel, school nurse, or other school support service personnel for case management, counseling, and/or participation in a restorative justice program as appropriate. (Education Code 48900.9)

(cf. 6164.2 - Guidance/Counseling Services)

If any student involved in bullying exhibits warning signs of suicidal thought or intention or of intent to harm another person, the Superintendent or designee shall, as appropriate, implement district intervention protocols which may include, but are not limited to, referral to district or community mental health services, other health professionals, and/or law enforcement.

(cf. 5141.52 - Suicide Prevention)
PREVENTION

Wheatland Union High School District recognizes that prevention of youth suicide, violence, and substance abuse and the early identification and treatment of mental health disorders are most effective when students, staff, parents, and community members have access to prevention information and resources.

Suicide Prevention Training for Staff Shall Include the Following:

1. Research identifying risk factors, such as previous suicide attempt(s), history of depression or mental illness, substance use problems, family history of suicide or violence, feelings of isolation, interpersonal conflicts, a recent severe stress or loss, family instability, and other factors

2. Warning signs that may indicate suicidal intentions, including changes in student’s appearance, personality, or behavior particularly among:
   - Youth bereaved by suicide
   - Youth with disabilities, mental illness, or substance abuse
   - Homeless / Foster / Military / Adopted Youth
   - LGBTQ youth
   - Youth in the juvenile justice or welfare system
   - Native American youth
   - Youth on the fringes of mainstream social groups

3. Research-based instructional strategies for teaching the suicide prevention curriculum and promoting mental and emotional health

4. School and community resources and services

5. District procedures for intervening when a student attempts, threatens, or discloses the desire to commit suicide

Training will be provided annually for all teachers and staff through TCSIG. TSCIG Public School Works

More information on evidence-based programs and practices can be found on the following websites:

- MODEL SCHOOL DISTRICT POLICY ON SUICIDE PREVENTION: Model Language, Commentary, and Resources - The Trevor Project can be found at: www.thetrevorproject.org
- Alex Project Website, text/listen 741741, 24 hours a day, 7 days a week, 365 days a year
Suicide Prevention Curriculum for Students
Shall Include the Following:

The following process should be followed throughout the year to inform and educate the Wheatland Union High School Student Body:

1. Suicide Awareness incorporated in Pirate Focus (9th grade), World History (10th grade), U.S. History (11th grade), and Civics/Economics (12th grade);

2. Include Yuba Sutter Behavioral Health as guest speakers in classroom and assemblies
INTERVENTION

The following process should be followed when a staff member becomes aware that a student is experiencing a crisis that may involve risk of harm to self or others:

- Students shall be encouraged to notify a teacher, principal, counselor, or other adult when they are experiencing thoughts of suicide or when they suspect or have knowledge of another student’s suicidal intentions.

- When a staff member suspects or has knowledge of a student’s suicidal ideations, he/she shall promptly notify an administrator / designee / student’s counselor, who shall assess for Imminent Risk or At Risk using Appendix E, Suicide Risk Assessment and then follow protocol in document based on results of assessment.
IMMINENT RISK

➢ There is immediate danger to the student’s self or others (for example, possible presence of a weapon or other means the student intends to use to harm self or others).

➢ There is a suicide attempt in progress (for example, the student has taken a drug or medication overdose).

The staff member who suspects or has knowledge of imminent risk will do the following:

- Provide for continuous supervision of the student at risk until an emergency responder arrives, keeping personal safety in mind. Evaluate the environment for safety and remove access to methods or lethal means.
- Call 911.
- Activate Emergency Plan.
- Notify the administrator or designee.

The administrator or other designee will do the following:

- Call 911 or designate a person to call (if the staff member with the student is unable to call). Be mindful that in the presence of a weapon or danger to others, emergency medical personnel will need the scene secured by law enforcement personnel before they can intervene.
- Activate Emergency Plan.
- Notify the Superintendent.

Depending on the situation, the administrator or designee will:

- Even with no danger to others, if a suicide attempt is imminent or in progress, other students need to be removed quickly and calmly from the vicinity. (Execute emergency plan.)
- Notify the student’s guardian and/or emergency contact and document the time and content of the conversation.
- Fill out the district’s incident report forms.
  - Wheatland Union High School – 5150 Mental Health Evaluation Referral (Appendix A)
  - Wheatland Union High School District Safety Plan (Appendix B)
  - Student Suicide Risk Documentation Form (Appendix C)
  - Discipline Report (if necessary)
IMMINENT RISK
Suicide and Threat to Others

Call 911

- Notify Superintendent
- Notify Administration/Designee
- Provide Continuous Supervision
- Activate Emergency Plan
- Contact Family
- Check in with Staff

Complete Incident Reports

- 5150 Mental Health Evaluation Referral (Appendix A)
- Student Suicide Risk Documentation Form (Appendix C)
  - Support Team to follow up when form is returned and submit to file in room D-1.
- Safety Plan (Appendix B)
- Discipline if Necessary
**AT RISK**

- The student identifies thoughts of death but has no plan, intent to die, or suicidal behavior.
- The student identifies thoughts of death and may have a plan, intent to die or suicidal behavior.
- The student is experiencing some stressors.

The administrator or designee will do the following:

- Remain with the student and provide support, safety, and continuous supervision.
- Contact Support Team member(s) (school counselor and/or behavioral counselor, school psychologist, Yuba County Behavioral Health, Yuba County Victim Services) to stabilize and assess.
- Support Team conducts assessment
  - Support Team Member conducts assessment *(Appendix D)*
  - Suicide Risk Assessment *(Appendix E)*
    - If results are inconclusive and/or there is a threat to others (clear threat), another team member assesses the student and team members collaborate.
- If risk is found:
  - Contact Parent
  - Support Team will complete:
    - Wheatland Union High School – 5150 Mental Health Evaluation Referral *(Appendix A)* for moderate/high risk
    - If low risk per assessment – Parent Notification of Student at Risk *(Appendix F)*
    - Wheatland Union School District Safety Plan *(Appendix B)*
    - Student Suicide Risk Documentation Form *(Appendix C)*
- If no risk is found:
  - Support Team will complete:
    - Wheatland Union School District Safety Plan *(Appendix B)*
    - Student Suicide Risk Documentation Form *(Appendix C)*
    - Support Team will continue to check in with student.
AT RISK

Maintain Support, Safety and Continue Supervising Student

Contact Support Team (ST) to Stabilize and Assess

Support Team: Counselors Administration

Support Team Conducts
⇒ Student Self-Assessment (Appendix D)
⇒ Suicide Risk Assessment (Appendix E)
⇒ If inconclusive then two (2) person assessment

Risk Found

Safety Plan (Appendix B)
Support Team Follow Up

Contact Parent

Low Risk
⇒ Parent Notification of Student at Risk (Appendix F)
⇒ Safety Plan (Appendix E)

Moderate or High Risk
⇒ 5180 Mental Health Evaluation Referral (Appendix A)
⇒ Safety Plan (Appendix E)

Support Team Member Completes
Student Suicide Risk Documentation Form (Appendix C)
POSTVENTION

Wheatland Union High School District recognizes that the death of a student, whether by suicide or other means, is a crisis that affects the entire school and community. In the event of a student’s death, it is critical that the school’s response be swift, consistent, and intended to protect the student body and community. In the case of a death by suicide, other concerns such as the prevention of suicide contagion will be taken into account.

Confirming the News and Convening the Education Support Team

Upon receiving news of a student’s death, including an unconfirmed rumor, a staff member must immediately contact the Superintendent or Principal, and/or designee. Contact must be made whether this is during or outside school hours.

- The Superintendent, or designee will contact:
  - Wheatland Union High School District Board of Education
  - Superintendent and Principal will identify key staff to comprise the support team; i.e., teaching and classified staff, parents, students, and/or community members.
  - Compose a potential “blanket statement” to share with students and staff so the same message is disseminated to everyone.

- The Superintendent or Principal will convene the educational support team which may include:
  - Administrators
  - Behavioral Counselors
  - School Psychologists

Reference: After a Suicide Toolkit for Schools
www.sprc.org/resources-programs/after-suicide-toolkit-schools
GUIDELINES FOR NOTIFYING PARENTS

Parents or guardians should be contacted as soon as possible after a student has been identified as being at risk for suicide. The person who contacts the family is typically the principal, counselor, school psychologist, or a staff member with a special relationship with the student or family. Staff need to be sensitive toward the family’s culture, including attitudes toward suicide, mental health, privacy, and help-seeking.

1. Notify the parents/guardians about the situation and ask that they come to the school immediately.

2. When the parents/guardians arrive at the school, explain why you think their child is at risk for suicide.

3. Explain the importance of removing from the home (or locking up) firearms and other dangerous items, including over-the-counter and/or prescription medications and alcohol.

4. If the student is at risk and does not need to be hospitalized, discuss available options for individual and/or family therapy. Provide the parents/guardians with the contact information of mental health service providers in the community. If possible, call and make an appointment while the parents are with you. *(Appendix F)*

5. Ask the parents/guardians to sign the Wheatland Union High School District – 5150 Mental Health Evaluation Form confirming that they were notified of their child’s risk and received referrals to treatment. They will need to seek mental health services in order for the student to return to school. *(Appendix A)*

6. Tell the parents/guardians that you will follow-up with them in a few days.

7. If the parents/guardians refuse to seek services for a child under the age of 18 who you believe is in danger of self-harm, you will need to notify law enforcement.

8. Document all contacts with the parents.
RE-ENTRY PROCEDURE

Before School Begins on the First Day Student Returns after an Imminent Risk Situation

The Principal or designee will:

- Release accurate and concise information according to district policy.
  - Convene a schoolwide staff meeting to provide accurate information and to identify any potential high-risk students.
- Notify the other school districts or call the District Office for assistance.

Example of Items for Staff Meeting Agenda

- Assign personnel to identify and address high-risk students.
- Provide accurate information.
- Manage suicide contagion.
- Provide appropriate support to staff or send someone to his/her classroom.
- Make and set a time for debriefing.

Debriefing:

- Debriefing is critical to handling the next crisis better.

Students Returning After Mental Health Crisis (At Risk Situation)

For students returning to school after a mental health crisis (e.g., suicide attempt or psychiatric hospitalization), a support team member will meet with the student (and the parent or guardian if appropriate) to discuss re-entry and appropriate next steps to ensure the student’s readiness for return to school.

1. The support team or other designee will be identified to coordinate with the student, their parent or guardian, and any outside care providers.

2. The parent or guardian will provide documentation from a mental health care provider that the student has undergone examination and that they are no longer a danger to themselves or others. Wheatland Union High School District – 5150 Mental Health Evaluation Referral (Appendix A)

3. The designated staff person will periodically check in with the student to help the student readjust to the school community and address any ongoing concerns.
Appendix A: 5150 Mental Health Evaluation Referral

Wheatland Union High School
5150 Mental Health Evaluation Referral

_______________________________________  ____________
Student Name                                Date

I _________________________, parent/guardian of ____________________________________________
have been made aware that my child has indicated thoughts, plans, ideations and/or current actions of self-
harm, harm to others (or destruction of property) and/or plans of suicide. I will take my child in for psychiatric
evaluation.

_______________________________________  _________________
Parent/Guardian Signature                  Date

The above-named student was seen at: __________________________________, on ____________.

I have attached the following documentation verifying our visit.

Possible Mental Health Resources
Please check with your local insurance carrier for approved providers.

Kaiser Permanente Facility
1600 Eureka Rd
Roseville, CA 95661
(916) 784-4000

Sutter Roseville
1 Medical Plaza 1st Floor
Roseville CA 95661
(916) 781-1800

Sutter Yuba Mental Health
1965 Live Oak Blvd
Yuba City, CA 95991
(530) 673-8255

UC Davis Children’s Hospital
2315 Stockton Blvd.
Sacramento, CA 95817
(800) UCD-4-KIDS
(916) 734-2011 [24-hour operator]

If you have MediCal please call 530-673-8255 for resources or 1-800-923-3800 toll free
Appendix B: Safety Plan

Wheatland Union High School District
Safety Plan

STEP 1: KNOW WHEN TO FIND HELP
What are the warning signs when you begin thinking of suicide or when you feel very distressed? These can include thoughts, moods, images, or behaviors.

STEP 2: COPING SKILLS
What can you do by yourself to take your mind off the problem? What obstacles might there be to using these coping skills?

STEP 3: SOCIALIZING WITH FRIENDS AND FAMILY
If you are unable to deal with your distressed mood alone, contact trusted family members or friends. List several people in case your first choices are not available.

<table>
<thead>
<tr>
<th>Name</th>
<th>Phone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

STEP 4: CONTACT PROFESSIONALS AND AGENCIES
Contact local professionals or emergency services if you continue to have suicidal thoughts or serious distress.

<table>
<thead>
<tr>
<th>Local Emergency Number</th>
<th>Local Professional or Agency</th>
</tr>
</thead>
<tbody>
<tr>
<td>Suicide Hotlines in the United States</td>
<td>1-800-SUICIDE</td>
</tr>
<tr>
<td></td>
<td>1-800-273-TALK</td>
</tr>
<tr>
<td></td>
<td>1-800-799-4889 (for deaf or hard of hearing)</td>
</tr>
</tbody>
</table>
Appendix C: Student Suicide Risk Documentation Form

<table>
<thead>
<tr>
<th>STUDENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date student was identified as possible at risk:</td>
</tr>
<tr>
<td>Name:</td>
</tr>
<tr>
<td>Date of Birth:</td>
</tr>
<tr>
<td>Name of Parent/Guardian:</td>
</tr>
<tr>
<td>Parent/Guardian’s Phone Number(s):</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>IDENTIFICATION OF SUICIDE</th>
</tr>
</thead>
<tbody>
<tr>
<td>Who identified student as being at risk? Indicate name where appropriate.</td>
</tr>
<tr>
<td>☐ Student (him/herself):</td>
</tr>
<tr>
<td>☐ Parent:</td>
</tr>
<tr>
<td>☐ Teacher:</td>
</tr>
<tr>
<td>☐ Other staff:</td>
</tr>
<tr>
<td>☐ Student/Friend:</td>
</tr>
<tr>
<td>☐ Other:</td>
</tr>
<tr>
<td>Reason for concern:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>RISK</th>
</tr>
</thead>
<tbody>
<tr>
<td>Assessment conducted by:</td>
</tr>
<tr>
<td>Date of assessment:</td>
</tr>
<tr>
<td>Type of assessment conducted:</td>
</tr>
<tr>
<td>Results of assessment:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>NOTIFICATION OF PARENT/GUARDIAN</th>
</tr>
</thead>
<tbody>
<tr>
<td>Staff who notified parent/guardian:</td>
</tr>
<tr>
<td>Date/time notified:</td>
</tr>
<tr>
<td>Parent Contact Acknowledgement Form signed:</td>
</tr>
<tr>
<td>Yes</td>
</tr>
<tr>
<td>If no, provide reason:</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>MENTAL HEALTH</th>
</tr>
</thead>
<tbody>
<tr>
<td>Student referred to:</td>
</tr>
<tr>
<td>Date 5150 Mental Health Evaluation Referral Returned:</td>
</tr>
<tr>
<td>Safety Plan developed with student and parent: __________________________ (date)</td>
</tr>
<tr>
<td>Mental Health Resources List and Student/Parent given to:</td>
</tr>
<tr>
<td>☐ Student __________________________ (date)</td>
</tr>
<tr>
<td>Staff member to conduct follow-up:</td>
</tr>
</tbody>
</table>
Appendix D: Student Self-Assessment

Student Self-Assessment

1. How is your energy?
   - [ ] 1 Best day ever
   - [ ] 2
   - [ ] 3
   - [ ] 4
   - [ ] 5 Hard to get out of bed

2. How stressed do you feel?
   - [ ] 1 Relaxed
   - [ ] 2
   - [ ] 3
   - [ ] 4
   - [ ] 5 Overwhelmed

3. Do you have hope?
   - [ ] 1 I will get better
   - [ ] 2
   - [ ] 3
   - [ ] 4
   - [ ] 5 I will always feel this bad

4. Have you thought about ways you could hurt yourself?
   - [ ] 1 No
   - [ ] 2
   - [ ] 3
   - [ ] 4
   - [ ] 5 I have a detailed plan

5. How often have you thought about hurting yourself?
   - [ ] 1 Almost Never
   - [ ] 2
   - [ ] 3
   - [ ] 4
   - [ ] 5 Almost always

6. How do you feel right now?
   - [ ] 1 Strong
   - [ ] 2
   - [ ] 3
   - [ ] 4
   - [ ] 5 Weak

7. How are you sleeping?
   - [ ] 1 Very well
   - [ ] 2
   - [ ] 3
   - [ ] 4
   - [ ] 5 Not at all
Suicide Risk Assessment
(Must be completed by 2 members of the Support Team)

The risk of suicide by a young person is raised when any peer, teacher, or other school employee identifies someone (a young person) who is potentially suicidal because she/he has directly or indirectly expressed suicidal thoughts (ideation) or demonstrated warning signs. When the risk is recognized, the student should be brought by school personnel to the designated school support team member to be assessed for level of risk. The student should be supervised at all times. Remove any weapons or objects that could be used to cause harm.

Student: __________________________________________ School: __________________________
Date of Birth: __________________________ Age: __________ Gender: ___________ Grade: ______
Parent/Guardian Names: _________________________ Phone: __________________________

Assessing for Level of Risk

Use professional judgment and rely on training in conducting a comprehensive and sensitive interview with the student. The following questions are intentionally designed as yes/no questions to help determine level of risk. Depending on the student’s response, ask clarifying questions to help gain a better understanding of what is going on with the student.

<table>
<thead>
<tr>
<th>Category</th>
<th>Assessment Questions</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intent</td>
<td>Are you thinking of killing yourself?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Are you currently thinking about suicide?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Have you been thinking of taking your own life?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Details:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Plan</td>
<td>Do you have a plan on how you would kill yourself?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Have you thought about how to make yourself die?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Have you thought about how you would hurt yourself?</td>
<td></td>
<td></td>
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<tr>
<td></td>
<td>Details:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Means/Access</td>
<td>Do you have access to weapons or pills?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Do you have what you would need to carry out your plan?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Where would you get what you need to carry out your plan?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Details:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Past Ideation</td>
<td>How long have you had these thoughts?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Have you previously had thoughts of suicide?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Is suicide something you have thought of before?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Details:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Previous Attempts</td>
<td>Have you attempted suicide before?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Have you ever tried to kill yourself?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Do you have a previous suicide attempt?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Details:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
If the student answered “yes” to any of the questions above or if the interviewer suspects the student was not honest in his/her responses, consider the student to be high risk and follow the action steps of moderate to high risk.

If the student is not at high risk, continue to assess the student to determine if he/she is low risk or moderate risk by asking the following questions about current changes in behavior or recent trauma and stressors.

Some of the questions might be better answered by school personnel or by the student’s parent or guardian based on first-hand observation. Consider consulting with key adults in the student’s life as part of the assessment.

<table>
<thead>
<tr>
<th>Category</th>
<th>Assessment Questions</th>
<th>Yes</th>
<th>No</th>
</tr>
</thead>
<tbody>
<tr>
<td>Changes in Mood/Behavior</td>
<td>In the past year, have you ever felt so sad that you stopped doing regular activities (sports, dance, art, hanging out with friends, school)? Details:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Has anyone noticed or commented on your behavior being really different lately? Details:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Have you noticed a dramatic change in your mood lately? Details:</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Trauma or Stressors</td>
<td>Have you ever lost someone to suicide?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Have you had a recent death of a family member or loved one?</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Have you experienced a recent loss, a relationship break-up, parents’ separation/divorce? Details:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Have you recently been involved in a traumatic or stressful experience? Details:</td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td>Are you being bullied/harassed or discriminated against here at school, at home, or in your community? Details:</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Other considerations: Does the student have a history of mental illness and or alcohol/substance abuse? Is the student currently on medication as treatment for mental illness?

Based on the student’s responses to the above, determine the level of risk, low or moderate and follow the action steps below.
<table>
<thead>
<tr>
<th>Risk Levels</th>
<th>Definition</th>
<th>Indicators</th>
<th>Actions</th>
</tr>
</thead>
<tbody>
<tr>
<td>Low Risk</td>
<td>The student appears to be at low risk for harming him/herself. The student is in distress but has positive supports. The student's concern and needs may be readily addressed. The student does not appear serious about harming him/herself right now.</td>
<td>Passing thoughts of suicide; no plan; no previous suicide attempts; no access to weapons or means; no recent losses; support system in place; no alcohol/substance abuse. Depressed mood/affect; evidence of thoughts in notebooks, internet positions, drawings; sudden changes in personality/behavior (e.g., distracted, hopeless, academically disengaged).</td>
<td>Reassure and supervise student; communicate concerns with parent/guardian, if appropriate/safe; assist in connecting to resources, including crisis lines; mobilize a support system; develop a safety plan that identifies caring adults, appropriate coping skills; establish a follow-up plan and monitor, as needed.</td>
</tr>
<tr>
<td>Moderate Risk</td>
<td>The student may pose imminent danger to self, but there is insufficient evidence to demonstrate a viable plan of action to do harm right now but has other risk factors.</td>
<td>Thoughts of suicide; plan with some specifics; unsure of intent; previous suicide attempts and/or hospitalizations; difficulty naming future plans; past history of substance abuse, with possible current intoxication; recent trauma (e.g., loss, victimization).</td>
<td>HIGH RISK *Document all actions.</td>
</tr>
</tbody>
</table>

**Guidelines for Moderate to High Risk Situations**

Based on the Suicide Assessment, the student has been identified as being at moderate to high risk of suicide. Further assessment by law enforcement or hospital staff is needed to determine next steps.

If the student is in possession of lethal means, secure the area and prevent other students from accessing this area. Lethal means should be removed whenever possible. It is best to call a trained law enforcement officer to remove lethal means.

**NO STUDENT SHOULD BE SENT HOME ALONE OR TO AN EMPTY HOUSE!**

Determining who will transport the student to the hospital for further assessment will depend on the student's age, developmental phase, level of risk, parent's responsiveness to the situation and parent's ability to keep their child safe during transport. All of the factors should be carefully considered.
Guidelines for Low Risk Situations

Based on the Suicide Assessment, the student has been identified as being at low risk of suicide at this time. This means the student is struggling with some serious social, emotional or behavioral issues that have gone unaddressed and can lead to an imminent situation. This is an opportunity to connect the student with on campus or off campus supports and resources, identify a support system (including parents/guardian, school staff, community providers, supportive adults and friends) and formulate a safety-plan to help increase the student’s ability to cope with the distress they are experiencing.

If the student is in possession of any objects that could be used to self-injure, remove the objects from the student’s possession.

NO STUDENT SHOULD BE SENT HOME ALONE OR TO AN EMPTY HOUSE!
- Contact parent/guardian and notify them of the current situation, requesting they come to the school, if possible, for a meeting regarding their student’s safety. If they cannot, set up a time that may work in the next few days to meet in person
- Explain to the student their parent/guardian has been notified and is enroute to the school
- Describe what will happen next (using age-appropriate language)
- In person or over the phone, communicate concerns and make recommendations for safety in the home (e.g., securing firearms, medications, cleaning supplies, cutlery, and razor blades)
- Provide school and/or local community mental health resources. Provide the school’s MTSS (Multi-Tiered Systems of Support) document to highlight resources on and off campus
- Offer to facilitate contact with community agencies and offer follow-up to ensure access to services
- Obtain parent/guardian permission to release and exchange information with community agency
- Document everything

Develop a Safety Plan (Wheatland Union High School District Safety Plan)

This should be done with the student and encouraged that the student shares this with his/her parent/guardian.
- Identify caring adults in the school, home and community environment
- Discuss what information the student would like to share with other school employees and discuss who on campus the student would like the mental health professional to share this information with
- Discuss and identify helpful coping skills for at school and at home
- Provide after-hours resource numbers
- Let the student know that an identified support person on campus will check in with the student regularly, until the student no longer poses a risk.
Appendix F: Parent Notification of Student at Risk

Wheatland Union High School
Parent Notification of Student at Risk

_______________________________________                     _____________________
Student Name                                                                                              Date

I _____________________________, parent/guardian of __________________________ have been made aware that my child has indicated thoughts/ideations and/or current actions of self-harm or harm to others. WUHS staff explained that my child has not shared or given specific details of a plan for suicide nor danger to others. WUHS staff have met with me and my child to discuss the concern regarding my child’s safety risk and provided a list of resources.

_______________________________________                     _____________________
Parent/Guardian Signature                                                                                     Date

Possible Mental Health Resources

Please check with your local insurance carrier for approved providers.

Kaiser Permanente                                                Sutter Roseville
1600 Eureka                                                   1 Medical Plaza 1st floor
Roseville, CA 95661                                             Roseville CA 95661
(916) 784-4000                                                  (916)-781-1800

Sutter Yuba Mental Health                                      UC Davis Children’s Hospital
1965 Live Oak Blvd                                             2315 Stockton Blvd.
Yuba City, CA 95991                                            Sacramento, CA 95817
(530) 673-8255                                                  (800) UCD-4-KIDS
                                      (916) 734-2011 [24-hour operator]

If you have MediCal please call 530-673-8255 or 1-800-923-3800 roll free.