



Portsmouth School District

Protocol for Suicide Prevention, Intervention, and Postvention

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Introduction

The Portsmouth School District (PSD) is committed to the healthy development of all of our students. We understand that in order for students to learn in the classroom, their overall mental wellbeing needs to be a priority.

The Portsmouth School District has a Suicide Prevention Policy, JLDDB, posted, as part of the district policies on the district website. This policy frames the district plan for school district implementation. The goal of this document is to provide guidelines to all school district staff on how to respond to a suicidal event. A suicidal event is recognized as an attempt, gesture, or thoughts.

Suicide Prevention (a)

Messaging: “Suicide is Preventable; Mental Health Problems are Treatable.” Education on mental wellbeing and suicide prevention will take place across the school district, both at the student and staff level.

Student Education (c)

1. Portsmouth Elementary Schools implements a Social and Emotional Curriculum which focuses on the development of effective coping and problem-solving skills. **(Protective Factors)**
2. Portsmouth Middle School students will receive lessons on ACT (Acknowledge Care and Tell) which has demonstrated an improvement in students’ knowledge and adaptive attitudes about **suicide risk and depression**. This is implemented within their health curriculum at each grade level, annually. **(Risk Factors)**
3. Portsmouth High School trains a group of volunteer high school students to participate in Mental Health First AID that includes **risk factor, warning signs and where to refer to for help**
4. Portsmouth high school students receive the SOS (Signs of Suicide) curriculum as part of the health classes in grade 10 which identifies information on **safe and healthy choices, depression, risk factors for suicide, warning signs as well as where student can access help**.

Staff Education/Training (d)

All PSD staff receive annual training on suicide prevention and intervention. This training includes understanding the **warning signs/risk factors of suicide ([Appendix A](#)), protective factors, response procedure, referrals, post-intervention as well as resources within the school and the community resources.**

Response to Suicide Intent/Attempt (b)

At School

The following are the Portsmouth School District process to follow in the event that a student expresses intent and or attempts suicide while in school.

- Any sign or verbalization of suicidal intent or ideation received by any staff member, must be shared immediately with the school counselor or school administrator. If the student is with the staff member at the time, the student should stay with the staff member and be brought to the Counseling Office; at no point, should a student be left alone.
- A school counselor or designee will immediately meet with the student to gather more information.
- The student will be maintained in a safe place with support and supervision until the student is turned over to a legal guardian or responsible authority.
- In high risk situations, when a weapon is involved, the police will immediately be notified.
- The parents/guardians of a student who has expressed intent, will be contacted immediately, provided with details about the situation, and asked to come to the school. The school will also call the **NH Mobile Crisis Team/NH Rapid Response Access Team (833-710-6477)** who will come to the school to assess the student's risk level of suicidality and provide the parents with recommended next action steps for mental health care for their child.
- In the event of a suicide attempt, 911 will be called immediately, followed by notification of parent/guardian. If the student is not at immediate risk, parents will be called as soon as possible and provided with details of the situation.
- When parents/guardians cannot be contacted or if parents/guardians are unable or unwilling to respond, an administrator will be notified. The counselor will report to DCYF if the parents are refusing to comply with recommendations.
- A school administrator or a school counselor will remain with the student in the school until the student of concern is turned over to a legal guardian or responsible authority.
- The responding Counselor/Administrator will complete the [Notification of Suicide Risk, \(Appendix B\)](#) and a copy will be given to the parent/guardian. **When dealing with the threat of harm to self or others, notification of parent/guardian supersedes a student's right to confidentiality. (e)**
- Parents will be informed that in cases of student self-report of suicidal intent, ideation or plan, it is school policy that all threats are taken seriously and routinely reported to the parent.
- The school counselor will have available for parents/guardians a list of suicide warning signs and risk factors, including information on what to do if they observe these signs ([Appendix A](#)). A list of emergency and community resources will also be provided to the parent/guardian ([Appendix F](#)) (g)
- Administrator/Counselor will complete the Suicidal Intent or Attempt Incident Summary Form ([Appendix C](#)).

Out of School

If a report is made to school personnel regarding a student's risk of suicide after school hours or on the weekend the staff member will contact the local police department.

- Portsmouth Police Department Phone Number for emergencies is 911

The police department will take responsibility at that point to conduct a wellness check on the student and apply the police department's suicide response plan.

The staff member will follow up with an email to the school counselor and building administration after the report to the Police Department is made.

- Parents/guardians are encouraged to inform school personnel of any attempts that occur outside of school so that the school may be able to provide support to the student upon their return. The student and parent/guardian will be required to meet with a school counselor or administrator and complete a Student Re-Entry form (Appendix D).

Roles and Responsibilities of staff in the event of suicidal intent and/or attempt (f)

All School Personnel

- If a student expresses suicidal ideation during school hours, a report **must be made immediately, via phone or in person**, to the school counselor or school administrator. Under no circumstances should the student be left alone. The contact could be followed up with detailed information either in person or via email.

Suicidal ideation may include the following ([Appendix A](#)):

- any threats to harm or kill oneself, including threats which may be said in a joking manner
- any expressed desire to die, whether verbally, written or in art
- gestures that indicate possibility of self-harm

It is crucial for all school personnel to remember that it is not the responsibility of an individual to assess whether or not threats are of a serious nature. All threats are to be taken seriously and reported immediately.

School Counselor

- Counselor should call **Rapid Response (833-710-6477)** for mental health assessment. Maintain the student in a safe place with support and supervision until the student is turned over to a legal guardian or responsible authority. Prior to or after the regular school day, no staff member should remain alone in the building with a suicidal student.
- If it is determined that the student needs medical treatment, an ambulance will be called.
- Complete the [Suicidal Risk Summary form \(Appendix B\)](#). This will be maintained in a file available to school counselors and administrators.
- Inform the school administrator and parents/guardians.
- Develop a follow-up plan that includes parent consultation, re-entry and monitoring.

School Administrator or their designee

- Immediately consult with a school counselor upon receiving a report concerning suicidal ideation or intent.
- If a weapon is involved, the school administrator will notify the police.
- If it is determined that the student needs medical treatment, an ambulance will be called.

- In high risk situations, when parents/guardians cannot be contacted or if parents/guardians are unable or unwilling to respond, the administrator will notify the appropriate authorities (DCYF, 1-800-894-5533, before 4 PM or Portsmouth Police Department, 427-1500, after 4 PM). A school administrator will remain at the school until the student is turned over to a legal guardian or responsible authority.

Postvention (J)

After a suicidal incident, the parent will be requested to notify the school of the student's date of return. Prior to attending classes, the student and parent will be required to meet with a school counselor or administrator and complete a [Student Re-Entry form \(Appendix D\)](#) and a [Student Safety Plan \(Appendix E\)](#) to support the student's safety at school.

Staff involved in the crisis will go through an [After Action Review \(Appendix G\)](#), using the form as a guide for discussion as well as for improvement of overall crisis response. This will be conducted with appropriate support staff from inside and or outside of the school, including the NH Mobile Crisis Team/NH Rapid Response Access Team (833-710-6477).

Support staff will be available beyond the conclusion of the after action review to talk with any staff members in need of further support.

Dissemination of the Plan (H)

This suicide prevention plan will be shared widely on an annual basis. At the beginning of each school year, the district will ensure all school and district handbooks as well as websites have the most updated version of the plan, with appropriate links in handbooks. In addition, review of the district plan will be a component of the required annual staff suicide prevention training.

Appendix A: WARNING SIGNS

BEHAVIORS ASSOCIATED WITH DEPRESSION

- Sadness and crying
- Isolation and withdrawal from social contacts
- Loss of interest in once favored activities
- Inability to complete projects
- Loss of energy and ambition
- Compulsive pursuit of perfection
- Change in patterns of sleeping and/or eating
- Neglect of personal hygiene
- Self-mutilation, cutting, burning, etc.
- Acting out

SITUATIONS THAT CAN LEAD TO DEPRESSION

- Loss of a relationship with a loved one through break-up or death, including suicide of peer or family member
- Recent change that has caused a physical separation from familiar support and friends
- Family disruption caused by domestic violence, divorce or separation, loss of a job, financial crisis, or additions
- Trouble with the law leading to unexpected consequences
- Unwanted pregnancy
- Misuse of alcohol or other drugs
- Sexual identity/sexual orientation conflict
- Harassment
- Poor communication/difficult relationship with parents
- Serious illness or disability
- Major disappointments caused by failure or rejection
- Fear of failure to live up to the expectations of others
- Incidence of emotional, physical or sexual abuse

BEHAVIORS ASSOCIATED WITH SUICIDE

- Giving away prized possessions, making final arrangements
- Sudden sense of resolve and burst of energy following an extended period of despair
- Saying farewell to friends and family
- Loss of hope; Confusion and inability to see options
- Change of behavior or mood (attitude, eating, sleeping, etc.)
- Impatience or impulsivity, limited ability to control one's own actions and reactions
- Taking risks
- Increased use of alcohol or other drugs
- Disorientation, lack of organized thinking and action
- Recurrence of death themes in spoken, written, or other artistic expressions
- Prior suicide attempt

Appendix B: NOTIFICATION OF SUICIDAL RISK

Dear Parent/Guardian:

I/We _____, the parent(s) of _____ were notified by school personnel on _____ (date) that our child is at risk for suicide. We have been further advised that we should seek psychological/psychiatric consultation:

- immediately or
- as needed with Seacoast Mental Health Center, 431-6703 or Portsmouth Regional Hospital Emergency Room, 436-5110.

In order to ensure that your child is safe to return to school and participate in school at his/her previous status, we ask that you notify the school when your child is expected to return.

You and your child will:

- meet with an administrator or school counselor or
- complete a Student Re-Entry form prior to attending classes.

We request that you provide notification of any emergency services that have been rendered or other plans for services you may have.

Signature of Parent or Legal Guardian:

Signature of Parent or Legal Guardian:

Signature of School Representative:

Appendix C: Suicidal Intent or Attempt Incident Summary Form

Student Name: _____

Date: _____ Time: _____

Presenting Situation:

Intervention:

Outcome:

Follow-Up Plan:

Signature of Counselor _____

Notify the Following Individuals	Who was Notified?
Administrator	
Case Manager	
Grade Counselor	
Provide Student with Resources	

Appendix D: Student Re-Entry Plan

Student's Name:				Grade:			
Person Completing Form:							
Meeting Date:				Date Returning to School:			
Meeting Attendees:							
Signed ROI from MH Provider	Y	N					
MH Provider Present	Y	N					
Parent/Guardian Present	Y	N					
Daily Check-in	Y	N	With whom:	AM	PM	BOTH	
Family Concerns:							
Academic Concerns:							
Modification of course assignments/Schedule:							
Next Steps:							

Parent Signature

Date

School Administrator's Signature

Date

School Counselor's Signature

Date

Appendix E: Student School Safety Plan

Student Name: _____

Completed By (Staff): _____

Today's Date: _____

Things that tend to trigger me (make me feel mad, sad, upset):

Warning signs that I am mad, sad or upset:

How do I let others know?

I am responsible for my behavior and if life becomes overwhelming, I'm upset, and I want to harm myself in any way, I will do the following:

- *If in school I will see my school counselor immediately*
- *If I am having these thoughts outside of school I will tell a trusted adult.*
- *If I cannot reach a trusted adult I will call the Crisis Intervention Hotline at 988*

My Coping Strategies:

Things or activities I can do to help me calm myself at school:

1. _____

2. _____

Peers who are support of me and who I feel comfortable with:

Name: _____

Name: _____

While at school, the adults I can go to for help and support are:

Name: _____ Location: _____

Name: _____ Location: _____

While at home or away from home, the adults I can go to for help and support are:

Name: _____ Phone: _____

Name: _____ Phone: _____

If I feel suicidal, I will call 988 or Text #741741

*****Copy to student, school counselor, administration, school nurse, team leader, and keep confidential/central location.**

Appendix F: Local Community Mental Health Resources (g)

988 Suicide and Crisis Hotline - Dial 988 from any phone

Seacoast Mental Health Center
1145 Sagamore Ave
Portsmouth NH 03801
603-431-6703
www.smhc-nh.org

NH Rapid Response Access Point
Call or text, 833-710-6477
24 hours a day, 7 days a week – including holidays.
[NH Rapid Response](#)

Families First Health and Support Center
8 Greenleaf Woods Drive
Portsmouth, NH 03801
603-422-8208
[Families First](#)

Children and Youth Services
30 Maplewood Ave # 101
Portsmouth, NH 03801
(603) 433-8300

Tradeport Counseling Associates
200 International Dr, Suite 120
Portsmouth, NH 03801
603-957-1877
[Tradeport Counseling Associates](#)

Olde Port Counseling
406 The Hill
Portsmouth, NH 03801
[Olde Port Counseling](#)

Appendix G: After Action Review

Name: _____ **Date:** _____

Event: _____

1. Identify your role in responding to this incident

2. What services were provided and to whom?

3. What went right? What worked?

4. What may have not worked? What could have been improved?

5. Did the school policies and procedures assist or impede the response and delivery of services?

6. What did you learn from your participation in this event?