

The Seaford School District (hereinafter referred to as “the District”) recognizes the serious problem of youth suicide and acknowledges that providing this policy for youth suicide recognition and prevention is important. The District also acknowledges that youth suicide is a complex issue which cannot be addressed by the districts and schools alone. This Suicide Prevention Policy (“Policy”) meets the requirements of 14 *Del. C.* § 4124.

I. Suicide Prevention Training For Public School Employees

All of the District employees shall participate in at least one combined training each year totaling at least ninety (90) minutes in suicide prevention. The training materials shall be evidence-based and approved by the Department of Education, Department of Health and Social Services, and the Department of Services for Children, Youth and Their Families. More than one training program may be approved and, if so, the District has discretion on the training it requires for its employees. Any in-service training required by this section shall be provided within the contracted school year as provided in 14 *Del. C.* § 1305(e). All District employees shall provide evidence or proof of participation and completion.

II. Suicide Prevention Program

The District shall develop a Suicide Prevention Program (“the Program”). The components of the District’s Program may vary to address the needs of different grade levels. The Suicide Prevention Coordinating Committee established pursuant to Section III shall be responsible for the implementation of the Program.

III. Suicide Prevention Coordinating Committee

Each school shall establish a committee that is responsible for coordinating the Program within that school.

- A. When setting up the Committee, the principal may wish to consider including persons such as a school counselor, school psychologist or other school-based healthcare professional, a school resource officer, a school nurse, or representative from the medical community who might have insight into the prevention or recognition of the warning signs of youth suicide.
- B. The Committee shall:
 - 1. Hold regular meetings.
 - 2. Coordinate any required staff training. The Committee may determine additional training is required for its school.
 - 3. Create and maintain a training log (either paper or electronic) to record that all appropriate staff have been trained, as well as the specific training they received.
 - 4. Meet any of the requirements assigned in Section IV below.

IV. Other Requirements

A. Procedure For The Confidential And Anonymous Reporting Of Warning Signs Of Suicide

Each school’s Committee shall determine the process it will use to provide for confidential and anonymous reporting of a student demonstrating the warning signs of suicide. The procedure may be tailored to meet the school’s specific needs. Until such time a mental health counselor or practitioner determines the student does not present a threat, or the school’s administration determines the report concerning a potentially suicidal student was unfounded, the student is not to be alone in the school, and the student is not to be released from school unless the student is released to a parent or guardian, law enforcement, an outside mental health agency, or the Delaware Division of Services for Children, Youth and Their Families. The document outlining the process will be maintained by the principal and Director of Guidance Services. At a minimum, any privacy rules shall be followed, including any applicable Family Educational Rights and Privacy Act (FERPA).

B. Procedure For Communication Between School Staff Members And Medical Professional Who Are Involved In Treating Students For Suicide Issues

Each school's Committee shall determine the process it will use to provide for communication between school staff members and medical professionals (e.g. nurses, counselors, physicians) who are involved in treating students for suicide issues. The procedure may be tailored to meet the needs of each school. The document outlining the process will be maintained by the principal and Director of Student Services. At a minimum, any privacy rules shall be followed, including any applicable Family Educational Rights and Privacy Act (FERPA).

C. Posting of the Suicide Prevention Policy

The District shall post this Policy in all student and staff handbook(s) and on the District's website. Each school within the District may also post this Policy on its website.

D. Retaliation Restrictions

No employee, school volunteer or student shall be retaliated against for reporting a student thought to be demonstrating the warning signs of suicide.

Appendix A: Common Procedures for School Staff Members and Healthcare Professionals

The following procedures for communication between school staff members and healthcare professionals who are involved in treating students for self-harm, suicide attempt or threatening of either shall be followed:

1. The Seaford School District's ("the District") process is to immediately report any student thought to be demonstrating the warning signs of suicide to the school nurse, school counselor, or principal/head of school. This may be done verbally initially; however, a written record of the report shall be prepared. A school employee, school volunteer or student is individually immune from a cause of action for damages arising from reporting warning signs of suicide in accordance with these procedures unless that reporting constituted gross negligence and/or reckless, willful or intentional conduct.
2. Healthcare Professionals. The primary contacts at the District are identified in Section 1 above. For a student who has not reached the age of 18, Release of Information forms shall be signed by the parent, guardian, or relative caregiver in order for the primary care physician or healthcare professional to communicate with school personnel regarding any treatment of a student. Notwithstanding the foregoing, communications between healthcare professionals and school staff regarding any treatment of a student may occur for any student 14 years or older who has provided consent for voluntary outpatient treatment in accordance with 16 Del. C. § 5003. In accordance with FERPA guidelines, releases shall be signed before communication may take place. Communications without signed releases in emergency situation may occur in accordance with FERPA regulations and guidelines.
3. If a parent refuses to sign a release form at school, the school will review this policy with the parent, explaining the reasons the release would be advantageous to the student.
4. After confirmation that a student has been involved in a suicide ideation or suicidal behavior, the student shall be evaluated by a licensed healthcare professional or a non-licensed healthcare professional working under the supervision of a licensed healthcare professional.
5. The recommendations from the healthcare evaluation which are pertinent to managing the student's risk in school shall be shared at a meeting between the student, parent/guardian, school nurse, school counselor or principal (or his/her designee) prior to the student's return to school. Recommendations will be shared with school personnel who are responsible for their implementation.

6. Emergency evaluations can be obtained from hospital emergency departments; a licensed healthcare professional; a physician; or nurse practitioner; or from the state's Child Priority Response Mobile Crisis Service if the student is under 18 years of age, or from the Adult Mobile Crisis Service if student is between the ages of 18-21.

ADOPTED: 9/19/2016