

Students

SUICIDE PREVENTION AND POSTVENTION

5141.5(a)

The Fairfield Board of Education recognizes the need for a comprehensive suicide prevention, intervention, and postvention policy given that suicide is the third leading cause of death among young people and that school, a structure in which students have frequent contact with caring adults, has a unique role to play in suicide prevention and postvention. The purpose of this policy is to protect the health and well-being of all students by having established processes in place to prevent, assess risk of, intervene in, and respond to suicide. The district:

- Recognizes that physical and mental health are integral components of student outcomes, both educationally and beyond graduation;
- Further recognizes that suicide is a leading cause of death among young people;
- Has an ethical responsibility to take a proactive approach in preventing deaths by suicide;
- Acknowledges the school's role in providing an environment that is sensitive to individual and societal factors that place youth at greater risk for suicide;
- Aims to foster positive social-emotional development and resilience; and
- Acknowledges that comprehensive suicide prevention policies include prevention, intervention, and postvention components.

It is the policy of the Fairfield Public Schools to respond actively and responsibly to any situation where a student verbally or behaviorally indicates intent to attempt suicide or to inflict self-injury or harm. The Board recognizes the need for established suicide prevention practices that assist staff in identifying risk factors, vulnerable populations, intervention procedures, and postvention activities. The Board acknowledges that suicide is a complex issue, and that while school staff members may collect information to preliminarily determine level of risk, they cannot unilaterally make clinical assessments of risk.

Any Board employee who has knowledge of suicidal ideation, suicidal threat, or attempt must immediately report this information to the building principal, or his/her designee, who will, in turn, notify a school-based mental health professional (e.g., school psychologist, school counselor, school social worker, school nurse) and if appropriate, members of the School Crisis Response Team.

School-based mental health professionals may recognize a potentially suicidal youth and, in such cases, will make a preliminary determination of level of risk. The student will not be left alone at any time during the assessment process. A designated member of the School Crisis Response Team, with administrative support, will contact the student's family as soon as possible. The student will remain under close supervision until released to the care of a parent/guardian or emergency medical personnel. School staff will collaborate with parents/guardians to connect them to resources, including further assessment and/or treatment (e.g., community, medically based, school-based). The Board directs school staff to refer students who come to their attention as being at high risk of attempting suicide for professional assessment and treatment services outside of the school.

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5141.5(b)
(continued)

Information concerning a student's suicide attempt, threat, or risk will be shared with others only to the degree necessary to protect that student and others.

This suicide prevention and postvention policy will help to protect all students through the following steps:

- All staff shall receive professional development on risk factors, warning signs, protective factors, response procedures, referrals, and resources regarding youth suicide prevention on an annual basis.
- As part of the Fairfield Public Schools Health Curriculum, students will be educated regarding suicide risk factors, and how to respond if confronted with suicidal behavior, verbalizations, or thoughts.
- School-based mental health professionals (e.g., school psychologists, school counselors, school social workers) ~~are~~ shall be equipped to preliminarily assess risk, identify appropriate resources, and facilitate building level response and follow up when a student is identified as at-risk.
- In the event of a completed suicide, postvention activities that a) promote healing, and b) aim to reduce contagion and decrease risk, will be facilitated at the building, district, and/or community level.
- Students and parents can access local and national resources for additional information and support, including:
 - In Connecticut, dial: 211
 - www.preventsuicidect.org
 - National Suicide Prevention Lifeline: 1-800-273-TALK (8255)
 - Suicidepreventionlifeline.org
 - The Trevor Lifeline: 1-866-488-7386 thetrevorproject.org/get-help-now
 - Trevor Lifeline Text/Chat Services, available 24/7 Text “TREVOR” to 678-678
 - Crisis Text Line: Text TALK to 741-741 (crisistextline.org)

In alignment with the efforts of the School Climate Committee, all school personnel and students will be expected to help create a school culture of respect and support, in which students feel comfortable seeking help for themselves or friends. Students are encouraged to tell any staff member if they, or a friend, are feeling suicidal, or in need of help. While confidentiality and privacy are important, students should know that when there is risk of suicide, safety comes first

This policy covers actions that take place in school, on school property, at school-sponsored functions and activities, on school buses or vehicles, at bus stops, and at school-sponsored out-of-school events where school staff are present. This policy applies to the entire school community, including educators, school and district staff, students, parents/guardians, and volunteers. This policy also addresses the need for a school response to suicidal or high-risk behaviors that take place outside of the school environment.

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5141.5(c)
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Legal Reference: Connecticut General Statutes
10-221 Boards of education to prescribe rules, policies, and procedures. (e) Re
"policy and procedures for dealing with youth suicide prevention and youth suicide
attempts."

Adopted 5/24/2011
Revised and Adopted 10/27/2020