



Suicide Intervention Procedures



A Guide for Educators Summer 2007

What We Know

- There is no typical suicide victim.
- There are no absolute reasons for suicide.
- There are no all-inclusive predictive lists of warning signs.
- Most people do not want to die.
- Ambivalence exists until the moment of death.
- Suicide is always multi-dimensional.
- Preventing suicide *must* involve many approaches.
- If we reduce the risk factors, we reduce the risk of suicide.
- If we enhance the protective factors, we reduce the risk of suicide.

For more information, refer to these resources:

Pasco County Crisis Procedures: A Guide for Schools
Youth Suicide Prevention School-Based Guide, University of South Florida. <http://cfs.fmhi.usf.edu/cfsinfo/hotpubs.cfm>
National Association of School Psychology: www.nasponline.org
Center for Disease Control and Prevention: www.cdc.gov

HOT LINES

School Safety Hotline: 1-877-723-2728
National Suicide Prevention Lifeline: 1-800-273-TALK (8255)

District School Board of Pasco County

7227 Land O'Lakes Boulevard • Land O'Lakes, FL • 34638
(813) 794-2000 (727) 774-2000 • (352) 524-2000
Heather Fiorentino, Superintendent

If you need more information, please call the
Department of Student Services
(813) 794-2363 • (727) 774-2363 • (352) 524-2363

www.pasco.k12.fl.us

FACTS About Suicide in Children and Adolescents

(Center for Disease Control and Prevention, 2002)

- In 2000, suicide was the 3rd leading cause of death for youth, ages 10 to 19 years old.
- Since 1950, there has been a 300% increase in the suicides among 15 to 19 year olds.
- In 2002, the US Department of Health and Human Services surveyed high school students and found that:
 - 1 out of 5 seriously considered suicide and most had a plan
 - Nearly 1 in 10 attempted suicide
 - 1 out of 3 suicide attempts were serious enough to require medical attention
- Although adolescents do not typically self-refer to school staff, 9 out of 10 give warning signs before attempting suicide.
- The most commonly reported reasons for attempting suicide are:
 - Family discord
 - Argument with a boyfriend or girlfriend
 - School-related problems
 - Other reasons include: sexual abuse, physical abuse, and substance abuse
- Contagion is also identified as a risk factor for suicide. Research has shown that “a surge in suicides occurs following reports of suicide in the mass media.”

Suicide Warning Signs

Seek help as soon as possible by contacting a mental health professional or by calling the National Suicide Prevention Lifeline at 1-800-273-TALK (8255) if you or someone you know exhibits any of the following signs.

- Threatening to hurt or kill oneself or talking about wanting to hurt or kill oneself
- Looking for ways to kill oneself by seeking access to firearms, available pills, or other means.
- Talking or writing about death, dying, or suicide when these actions are out of the ordinary for the person.
- Feeling hopeless
- Feeling rage or uncontrolled anger or seeking revenge.
- Acting restless or engaging in risky activities, seeming without thinking.
- Feeling trapped, like there's no way out.
- Increasing alcohol or drug use.
- Withdrawing from friends, family, and society.
- Feeling anxious or agitated being unable to sleep, or sleeping all the time.
- Experiencing dramatic mood changes.
- Seeing no reason for living or having

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PREVENTING AND RESPONDING TO SUICIDE IN SCHOOLS

SUICIDE PREVENTION

Understanding Risk Factors and Recognizing Warning Signs

Risk Factors are present at the time that the individual is suicidal and may act as a triggering event. Other risk factors may have occurred earlier in life. The greater number of risk factors, the greater the risk of suicide. It has been well documented that individuals who have been exposed to violence, life-threatening events, and/or traumatic losses are at greater risk for depression, substance abuse, and suicide. Individuals who have risk factors *and* have witnessed or have been directly impacted by another crisis are the most vulnerable.

Protective Factors are the positive conditions and personal resources that promote resiliency and reduce the potential for youth suicide, as well as other high-risk behaviors. Just as risk factors arise from the interaction of familial, genetic, and environmental factors, so do protective factors.

Warning Signs are changes in an individual's behaviors, feelings, and beliefs about oneself for a period of 2 weeks or longer, which are considered to be maladaptive or out-of-character for that individual.



Most youth suicides occur following a loss, conflict, or fight. However, others may occur after days, weeks, or months of contemplating self-destruction. Major warning signs include:

- Suicide Notes
- Previous Attempts
- Depression
- Threats
- Final Arrangements
- Efforts to Hurt Oneself
- Inability to Concentrate or Think Rationally
- Changes in Physical Habits/Appearance
- Themes of Death and Suicide
- A Plan and Access to the Method

"I wish I were dead."
"I'm so tired of it all."
"The world would be better off without me."

When multiple factors overlap in such a way that the pain becomes overwhelming, suicide may be viewed as a solution.

SUICIDE INTERVENTION

Following Guidelines and Procedures

When a student is identified as at-risk for suicide:

1. Notify Administration
2. Collaborate with colleagues and Student Services personnel. At least 2 staff should be involved.
3. *Closely* supervise the student. Inform the student of each step of the process and do not allow the student to leave school or be alone.
4. Assess the situation. Interview the student.
 - **C** = Is there a **C**urrent suicide plan?
 - **P** = Has there been **P**rior suicidal behavior?
 - **R** = Does the student have **R**esources?
5. Contact the parents. Ask 4 critical questions:
 - Is the parent available?
 - Is the parent cooperative?
 - What information does the parent have that could contribute to the risk assessment?
 - What is their mental health insurance plan?
5. Make a referral to a community health agency.
6. Initiate Baker Act procedures, if the assessment team identifies the student as **HIGH RISK**.



SUICIDE ASSESSMENT

Responding to Suicidal Behavior

Initial Contact. Introduce yourself and discuss confidentiality. Begin the interview process.

Step 1: Assess the risk of the situation. Use the **S.L.A.P.** scale as a measure of risk.

Step 2: Be open and honest.

Step 3: Acknowledge the seriousness of the student's feelings. Don't be judgmental.

Step 4: Persuade the student to get help.

Step 5: Encourage hopefulness

Step 6: Discuss alternative solutions to suicide.

Step 7: Establish a "plan for safety."

Step 8: Tap into available resources.

S.L.A.P. Scale

S: How **SPECIFIC** are the details of the plan?

L: How **LETHAL** is the method?

A: What is the **AVAILABILITY** of the proposed method?

P: What is **PROXIMITY** to helping resources?

Are you or someone you love at risk for suicide?

NATIONAL
SUICIDE PREVENTION
LIFELINE®
1-800-273-TALK

Get the facts and take appropriate action.

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