



## District 24 Harm to Self or Others Procedures

Among the increasing numbers of at-risk children included in the school-age population are those who consider or attempt harm to themselves or others. School personnel need to be prepared to handle potential crises related to these issues.

The following guidelines have been drafted to assist school personnel in identifying those situations that might require parental notification and/or mental health intervention. The school district recognizes that counseling services provided by school personnel do not substitute for professional psychiatric evaluations or a comprehensive intervention plan.

### Identification

If the student exhibits any behavior, verbal or non-verbal, which suggests suicidal thoughts or intent to harm self or others:

- The teacher immediately informs the school social worker or school psychologist.

### Assessment

- A. During the process the student should remain under direct adult supervision at all times.
  - B. School social worker or school psychologist interviews the student immediately to assess the level of risk and overt potential danger. Appropriate action is then taken.
- If it is felt there is a risk behavior dangerous to self or others, student is informed that the content of the interview must be shared with parents. Parents will then be informed about the interview as well as the impressions gained through that interview.

The school social worker or school psychologist notifies and consults with the principal and/or the Director of Special Services.

## Levels of Risk and Intervention

- A. During the process the student should remain under direct adult supervision at all times.
- B. **Level 1** Student may not be directly talking or writing about suicide but exhibits behaviors such as:
1. Disregard for personal safety or other unusual risk-taking including: engaging in self-harming\* behaviors (such as cutting, burning, scratching, biting, etc.)
  2. Expressions of hopelessness
  3. Giving away personal possessions or saying goodbye in some way
  4. Depression of unusual depth or duration
  5. Depression that disappears and is replaced by a sense of calm when no change in essential circumstances is observed
  6. A sudden religious interest focusing on the afterlife
  7. Isolation and detachment
  8. Change in eating, sleeping habits
  9. Death themes expressed verbally, in writing, or through artwork

If **Level 1** is assessed:

1. After conducting an interview with the student and/or talking with the parents, the Social worker or psychologist will determine if the student is at immediate risk.
  - a. If no immediate risk, then events are summarized in writing by the Social worker or psychologist and copied to the Principal and Director of Special Services.
  - b. If student appears to be at risk after **Level 1** assessment, the Social worker or psychologist will assess at a **Level 2** and proceed with Level 2 procedures.

\*If this is an initial report of self-harm (such as cutting, burning, scratching, biting, etc.) the Social worker or psychologist will assess at a Level 2 and proceed with Level 2 procedures. If this is a repeat report of self-harm, Social worker or psychologist may choose to assess at a Level 2. Social worker or psychologist will contact the parents to inform them of the continued behavior.

- C. **Level 2** The student talks or writes directly about suicide or harming others, but does not appear to have a plan, appears at risk after the Level 1 assessment, or this is a first report of self-harming behaviors.
1. Content of student interview is reported to the principal and/or the Director of Special Services by the Social worker or psychologist;
  2. Parents are contacted by Social worker or psychologist and are requested to come to school to arrange for intervention with the evaluator and student (if appropriate). An administrator will be asked to attend if the evaluator deems necessary or if it is requested by the parent(s);
  3. During the parent conference it will be determined if a referral needs to be made to a mental health provider or medical professional qualified to assess suicidal risk;
  4. Social worker or psychologist sends a letter to parents documenting concerns, summarizing the conference, and outlining the plan of intervention. A copy will be sent to the principal and the Director of Special Services.
- D. **Level 3** The student has made a suicidal attempt or gesture, or threat of harm against others, and has a plan, or is in possession of a means to commit suicide or carry out the threat of harm.

If **Level 3** is assessed:

1. If there is reason at school to believe that the student has made a suicidal attempt or gesture, or threat of harm against others, and has a plan, or is in possession of a means to commit suicide or carry out the threat of harm, the principal will request that police transport the student to the emergency room of the nearest hospital or request 911 assistance.
  - a. Every effort is made to locate and inform the parent and /or to call the emergency contact number provided by the parent.
  - b. The Principal or the Director of Special Services informs the Superintendent.
2. If the student has a formulated plan to harm self or others and has the means:
3. Parents are contacted by Social worker or psychologist and are requested to come to school to arrange for intervention with the evaluator and student (if appropriate). An administrator will be asked to attend if the evaluator deems necessary or if it is requested by the parent(s);

- a. If parents cannot be located before the end of the day, the principal or the Director of Special Services will determine whether the police will transport the student to the emergency room for psychiatric evaluation. Efforts to contact the parents will continue and the emergency number provided by the parents will be notified.
  - b. The principal or the Director of Special Services informs the superintendent.
4. The principal or the Director of Special Services will notify the parents that the child may not return to school without written verification from a medical or mental health provider verifying the child has been assessed and is not at risk of harming themselves or others and is safe to return to school.
5. Social worker or psychologist will follow up with parents within 24 hours to determine what actions they have taken. If parents have obtained an appropriate evaluation:
  - a. Permission is requested to contact referral sources and coordinate services;
  - b. If the students has been hospitalized, a meeting is conducted with parents at school with the team to determine the needs of the student and to develop a plan for re-entry into school;
  - c. When the student has returned to school, the social worker or psychologist will follow-up with the student according to the re-entry plan.
6. If parents do not obtain an evaluation by a qualified medical or mental health provider within 24 hours, they will be informed that the school district is required to file a report with DCFS. Principal or designee files a report.
7. Social worker or psychologist sends a letter to the parents summarizing the concerns and the actions taken. A copy is sent to the principal.

### **Follow-up**

Social worker or psychologist determines appropriate long-term follow-up activities, which may include:

- Coordination and liaison with community agencies and professionals; counseling at school for the student; consultation with staff and family.

### **Confidentiality**

The student's right to confidentiality must be maintained. Faculty and school staff will be informed only on a "need to know" basis.