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VMCS BOARD POLICY

SUICIDE PREVENTION, INTERVENTION, POSTVENTION, AND SELF-INJURY POLICY

Vibrant Minds Charter School (VMCS) is committed to providing a safe, civil, and secure learning environment for all scholars. It is VMCS's responsibility to respond appropriately to a scholar expressing or exhibiting suicidal ideation or behaviors and to follow-up in the aftermath of a suicide.

The likelihood of scholars, staff, and families encountering a suicidal scholar is real, even at the elementary school level. Few events are more painful or potentially disruptive than the suicide of a scholar. Suicide is an issue for people from all educational and socioeconomic backgrounds. Contrary to popular belief, talking about suicide or asking someone if they are feeling suicidal will NOT put the idea in their head or cause them to kill themselves. There is evidence that suicide is preventable in many cases. Appropriate and timely prevention, intervention, and postvention (after a suicide) help school administrators to maintain control in a crisis and may help prevent suicide contagion.

This policy reflects the reality that suicide is not the result of one issue, but is a manifestation of multiple, complex problems of child/adolescent development and adjustment. Its purpose is to advise school staff that they are instrumental in helping to save lives by identifying scholars at-risk and linking them to essential school and community mental health resources. The guidelines provided in this policy do not anticipate every situation that might occur.

Purpose

The purpose of this policy is to:

- Outline administrative procedures for intervening with suicidal and self-injurious scholars and offer guidelines to school site crisis teams in the aftermath of a scholar death by suicide.
- Understand the nature of youth suicide; risk and protective factors; warning signs and clues; and appropriate intervention steps.
- Establish school-based protocols for suicide prevention, crisis intervention, and postvention.
- Build connections within a community and among regional support services.

Scope

This policy covers conduct that takes place in the school, on any school property, at school-sponsored functions and activities, on school buses or vehicles, and at bus stops. This policy also pertains to usage of electronic technology and electronic communication that occurs in the school, on any school property, at school-sponsored functions and activities, on school buses or vehicles, at bus stops, and on school computers, networks, forums, and mailing lists. This policy applies to the entire school community, including educators, school, and school staff, scholars, parents, and volunteers.

Definitions

The following definitions are provided not for the purpose of labeling scholars, but rather to assist in understanding this policy and the legal obligations of school staff. Scholars may or may not use these terms to describe themselves. These definitions are intended as functional descriptors.

Self-Injury -- Self-injury is the act of deliberately harming one's own body, such as cutting or burning oneself. Although self-injury often lacks suicidal intent, youth who self-injure are more likely to attempt suicide. Self-injury is an unhealthy way to cope with emotional pain, intense anger and/or frustration.

Warning Signs -- Warning signs are behaviors that may signal the presence of suicidal thinking. They might be considered "cries for help" or "invitations to intervene." Warning signs indicate the need to inquire directly about whether the individual has thoughts of suicide or self-injury. Warning signs include the following: suicide threat; suicide notes and plans; prior suicidal behavior; making final arrangements; preoccupation with death; and/or changes in behavior, appearance, thoughts and/or feelings.

General information

- Self-injury is a complex behavior, separate and distinct from suicide.
- Self-injury is defined as intentional tissue damage that can include cutting, severe scratching, pinching, stabbing, puncturing, ripping or pulling skin or hair, and burning.
- The majority of scholars who engage in self-injury are adolescent females, though research indicates that there are minimal gender differences. Scholars of all ages and socioeconomic backgrounds engage in self-injury behavior, and it is commonly mentioned in media, social networks, and other means of communication.
- Individual mental health services can be effective when focused on reducing the negative thoughts and environmental factors that trigger self-injury.
- Tattoos and body piercing are not usually considered self-injurious behaviors, unless they are done with the intention to hurt the body.

Signs of Self-Injury

- Frequent or unexplained bruises, scars, cuts, or burns.
- Frequent inappropriate use of clothing designed to conceal wounds (often found on the arms, thighs or abdomen).
- Unwillingness to participate in activities that require less body coverage (swimming, physical education class).
- Secretive behaviors, spending unusual amounts of time in the bedroom, bathroom or isolated areas.
- Bruises on the neck, headaches, red eyes, ropes/clothing/belts tied in knots (signs of the “choking game”).
- General signs of depression, social-emotional isolation, and disconnectedness.
- Possession of sharp implements (razor blades, shards of glass, thumb tacks).
- Evidence of self-injury in drawings, journals, pictures, texts, and social networking sites.
- Risk taking behaviors such as gun play, sexual acting out, jumping from high places or running into traffic.

Responsibilities of VMCS Employees

All VMCS employees are expected to:

- Inform the school site administrator/designee immediately or as soon as possible of any concerns, reports or behaviors relating to scholar suicide or self-injury.
 - Adhere to the Suicide Prevention, Intervention, and Postvention (SPIP) Policy and act in accordance with the policy.

Administrator or Designee must:

- Respond to reports of scholars at risk for suicide immediately or as soon as possible.
- Monitor and follow-up to ensure that the risk has been mitigated through support and resources.
- Establish a safe, respectful, and welcoming school environment.
- Ensure that the SPIP policy is implemented.

Employee Qualifications and Scope of Services

Employees of VMCS must act only within the authorization and scope of their credential or

license. While it is expected that school professionals are able to identify suicide risk factors and warning signs, and to prevent the immediate risk of a suicidal behavior, treatment of suicidal ideation is typically beyond the scope of services offered in the school setting. In addition, treatment of the mental health challenges often associated with suicidal thinking typically requires mental health resources beyond what schools are able to provide.

Guidelines

Prevention

Suicide prevention involves school-wide activities and programs that enhance connectedness, contribute to a safe and nurturing environment, and strengthen protective factors that reduce risk for scholars. Prevention includes:

- Promoting and reinforcing the development of desirable behavior such as help seeking behaviors and healthy problem-solving skills.
- Increasing staff, scholar, and parent/guardian knowledge and awareness of risk factors and warning signs of youth suicide and self-injury.
- Monitoring and being involved in young people’s lives by giving structure, guidance, and consistent, fair discipline.
- Modeling and teaching desirable skills and behavior.
- Promoting access to school and community resources.

Messaging About Suicide Prevention

This policy and all related communication, documents, materials, etc. include clear, respectful, people-first language that encourages an environment free of stigma. As part of safe messaging for suicide, we use specific terminology when referring to actions related to suicide or suicidal behavior:

Use	Do Not Use
<p>“Died by suicide”</p> <p>or</p> <p>“Took their own life”</p>	<p>“Committed suicide”</p> <p>Note: Use of the word “commit” can imply crime/sin</p>
<p>“Attempted suicide”</p>	<p>“Successful” or “unsuccessful”</p> <p>Note: There is no success, or lack of success, when dealing with suicide</p>

Suicide Prevention Crisis Team

To ensure the policies regarding suicide prevention are properly adopted, implemented, and updated, VMCS created an in-house Suicide Prevention Crisis Team (“crisis team”) consisting of administrators, mental health professionals, relevant staff, and parents, and middle school scholars.

VMCS designates the following administrators to act as the primary and secondary suicide prevention liaisons to lead the crisis team:

- School Psychologist
- School Counselor
- Executive Director
- Assistant Director

The functions of the crisis team are to:

- Review mental health related school policies and procedures;
- Provide annual updates on school data and trends;
- Review and revise school prevention policies;
- Review and select general and specialized mental health and suicide prevention training;
- Review and oversee staff, parent/guardian, and scholar trainings;
- Ensuring the suicide prevention policy, protocols, and resources are posted on the school website;
- Collaborate with community mental health organizations;
- Identify resources and agencies that provide evidence-based or evidence-informed treatment;
- Help inform and build skills among law enforcement and other relevant partners; and
- Collaborate to build community response.

Staff Development

VMCS, along with its partners, has carefully reviewed available staff training to ensure it promotes the mental health model of suicide prevention and does not encourage the use of the stress model to explain suicide.

Training shall be provided for all school staff members. It may also be provided, when appropriate, for other adults on campus (such as volunteers, interns, tutors, coaches, and afterschool staff). Training shall include the following:

- All suicide prevention trainings shall be offered under the direction of mental health professionals (e.g., school counselors, school psychologists, other public entity professionals, such as psychologists or social workers) who have received advanced training specific to suicide. VMCS will collaborate with the Orange County Health Care Agency and LivingWorks to review the training materials and content to ensure it is evidence-based, evidence-informed, and aligned with best practices.
- Staff training may be adjusted year-to-year based on previous professional development activities and emerging best practices.
- VMCS shall ensure that training is available for new hires during the school year.
- At least annually, all staff shall receive training on the risk factors and warning signs of suicide, suicide prevention, intervention, referral, and postvention.
- At a minimum, all staff shall participate in training on the core components of suicide prevention (identification of suicide risk factors and warning signs, prevention, intervention, referral, and postvention) at the beginning of their employment or annually. Core components of the general suicide prevention training shall include:
 - Suicide risk factors, warning signs, and protective factors.
 - How to talk with a scholar about thoughts of suicide.
 - How to respond appropriately to the youth who has suicidal thoughts. Such responses shall include constant supervision of any scholar judged to be at risk for suicide and an immediate referral for a suicide risk assessment.
 - Emphasis on immediately referring (same day) any scholar who is identified to be at risk of suicide for assessment while staying under constant monitoring by staff member.
 - Emphasis on reducing stigma associated with mental illness and that early prevention and intervention can drastically reduce the risk of suicide.
 - Reviewing the data annually to look for any patterns or trends of the prevalence or occurrence of suicide ideation, attempts, or death. Data from the California School Climate, Health, and Learning Survey (Cal-SCHLS) should also be analyzed to identify school climate deficits and drive program development. See the Cal-SCHLS Web site at <http://cal-schls.wested.org/>.
 - Information regarding groups of scholars judged by the school, and available research, to be at elevated risk for suicide. These groups include, but are not limited to, the following:
 - Youth affected by suicide.
 - Youth with a history of suicide ideation or attempts.
 - Youth with disabilities, mental illness, or substance abuse disorders.
 - Lesbian, gay, bisexual, transgender, or questioning youth.
 - Youth experiencing homelessness or in out-of-home settings, such as foster care.
 - Youth who have suffered traumatic experiences.

- In addition to initial orientations to the core components of suicide prevention, ongoing annual staff professional development for all staff may include the following components:
 - The impact of traumatic stress on emotional and mental health.
 - Common misconceptions about suicide.
 - VMCS and community suicide prevention resources.
 - Appropriate messaging about suicide (correct terminology, safe messaging guidelines).
 - The factors associated with suicide (risk factors, warning signs, protective factors).
 - How to identify youth who may be at risk of suicide.
 - Appropriate ways to interact with a youth who is demonstrating emotional distress or is suicidal. Specifically, how to talk with a scholar about their thoughts of suicide and (based on VMCS guidelines) how to respond to such thinking; how to talk with a scholar about thoughts of suicide and appropriately respond and provide support based on VMCS guidelines.
 - VMCS-approved procedures for responding to suicide risk (including multi-tiered systems of support and referrals). Such procedures should emphasize that the suicidal scholar should be constantly supervised until a suicide risk assessment is completed.
 - VMCS-approved procedures for responding to the aftermath of suicidal behavior (suicidal behavior postvention).
 - Responding after a suicide occurs (suicide postvention).
 - Resources regarding youth suicide prevention.
 - Emphasis on stigma reduction and the fact that early prevention and intervention can drastically reduce the risk of suicide.
 - Emphasis that any scholar who is identified to be at risk of suicide is to be immediately referred (same day) for assessment while being constantly monitored by a staff member.

Specialized Professional Development for School-Based Mental Health Staff (Screening and/or Assessment)

Additional professional development in suicide risk assessment (SRA) and crisis intervention is provided to designated school mental health professionals, including but not limited to school counselors, psychologists, social workers, administrators, and nurses employed by VMCS. Training for these staff is specific to conducting SRAs, intervening during a crisis, de-escalating situations, interventions specific to preventing suicide, making referrals, safety planning, and re-entry.

Specialized professional training for targeted school-based mental health staff includes the following components:

- Best practices and skill building on how to conduct an effective suicide risk screening/SRA using an evidence-based, VMCS-approved tool; Patient Health Questionnaire 9 (PHQ-9) Depression Scale; BSS Beck Scale for Suicide Ideation; National Institute of Mental

Health (NIMH)'s Ask Suicide-Screening Questions (ASQ) Toolkit; and the Adolescent Suicide Assessment Protocol – 20.

- Best practices on approaching and talking with scholars about their thoughts of suicide and how to respond to such thinking, based on school guidelines and protocols.
- Best practices on how to talk with scholars about thoughts of suicide and appropriately respond and provide support based on school guidelines and protocols.
- Best practices on follow up with parents/caregivers.
- Best practices on re-entry.

Virtual Screenings for Suicide Risk

Virtual suicide prevention efforts include checking in with all scholars, promoting access to school and community-based resources that support mental wellbeing and those that address mental illness and give specific guidance on suicide prevention.

VMCS has established a protocol for assigning school staff to connect with scholars during distance learning and school closures. In the event of a school closure, VMCS has determined a process and protocols to establish daily or regular contact with all scholars. Staff understand that any concern about a scholar's emotional wellbeing and/or safety must be communicated to the appropriate school staff, according to VMCS protocols.

VMCS has determined a process and protocols for school-based mental health professionals to establish regular contact with high-risk scholars, scholars who are on their caseloads, and those who are identified by staff as demonstrating need. When connecting with scholars, staff are directed to begin each conversation by identifying the location of the scholar and the availability of parents or caregivers. This practice allows the staff member to ensure the safety of the scholar, particularly if they have expressed suicidal thoughts.

Parents, Guardians, and Caregivers Participation and Education

- Parents/guardians/caregivers may be included in suicide prevention efforts. At a minimum, VMCS shall share this Policy with parents/guardians/caregivers by notifying them where a complete copy of the policy is available.
- This Suicide Prevention Policy shall be easily accessible and prominently displayed on the VMCS Web page and included in the Home/School Handbook.
- Parents/guardians/caregivers should be invited to provide input on the development and implementation of this policy.
- VMCS shall establish and widely disseminate a referral process to all parents/guardians/caregivers/families, so they are aware of how to respond to a crisis and are knowledgeable about protocols and school, community-based, and crisis resources.

- Community-based organizations that provide evidence-based suicide-specific treatments shall be highlighted on the VMCS’s website with treatment referral options marked accordingly.
- Staff autoreplies during vacations or absences shall include links to resources and phone/text numbers so parents and scholars have information readily available.
- All parents/guardians/caregivers may have access to suicide prevention training that addresses the following:
 - Suicide risk factors, warning signs, and protective factors.
 - How to talk with a scholar about thoughts of suicide.
 - How to respond appropriately to the scholar who has suicidal thoughts. Such responses shall include constant supervision of any scholar judged to be at risk for suicide and referral for an immediate suicide risk assessment.
 - VMCS’s referral processes and how they or their children can reach out for help, etc.
- Parents/guardians/caregivers are reminded that the Family Educational Rights and Privacy Act (“FERPA”) generally protects the confidentiality of scholar records, which may sometimes include counseling or crisis intervention records. However, FERPA’s health or safety emergency provision permits the disclosure of personally identifiable information from a scholar’s education records to appropriate parties, in order to address a health or safety emergency when the disclosure is necessary to protect the health or safety of the scholar or other individuals.

Scholar Participation and Education

Messaging about suicide has an effect on suicidal thinking and behaviors. Consequently, VMCS along with its partners, has carefully reviewed and will continue to review all materials and resources used in awareness efforts to ensure they align with best practices for safe messaging about suicide. Suicide prevention strategies may include, but not be limited to, efforts to promote a positive school climate that enhances scholars’ feelings of connectedness with VMCS and is characterized by caring staff and harmonious interrelationships among scholars.

VMCS’s instructional and scholar support program shall promote the healthy mental, emotional, and social development of scholars including, but not limited to, the development of problem-solving skills, coping skills, and resilience. The instruction shall not use the stress model to explain suicide.

VMCS’s instructional curriculum may include information about suicide prevention, as appropriate or needed. If suicide prevention is included in VMCS’s instructional curriculum, it shall consider the grade level and age of the scholars and be delivered and discussed in a manner that is sensitive to the needs of young scholars. Under the supervision of an appropriately trained individual acting within the scope of her/his credential or license, scholars shall:

- Receive developmentally appropriate, scholar-centered education about the warning signs of mental health challenges and emotional distress. The content of the education may include:
 - Coping strategies for dealing with stress and trauma.
 - How to recognize behaviors (warning signs) and life issues (risk factors) associated with suicide and mental health issues in oneself and others.
 - Help-seeking strategies for oneself and others, including how to engage school-based and community resources and refer peers for help.
 - Emphasis on reducing the stigma associated with mental illness and the fact that early prevention and intervention can drastically reduce the risk of suicide.

- Receive developmentally appropriate guidance regarding VMCS's suicide prevention, intervention, and referral procedures.
 - Scholar-focused suicide prevention education can be incorporated into classroom curricula (e.g., health classes, orientation classes, science, and physical education).
 - VMCS will support the creation and implementation of programs and/or activities on campus that raise awareness about mental wellness and suicide prevention (e.g., Mental Health Awareness Week).
 - VMCS maintains a list of current scholar trainings, which is available upon request. VMCS has shared school-based supports and self-reporting procedures, so scholars are able to seek help if they are experiencing thoughts of suicide or if they recognize signs with peers. Although confidentiality and privacy are important, scholars should understand safety is a priority and if there is a risk of suicide, school staff are required to report. VMCS-based mental health professionals are legally and ethically required to report suicide risk. **When reporting suicidal ideation or an attempt, school staff must maintain confidentiality and only share information limited to the risk or attempt.**
 - VMCS shall establish and widely disseminate a referral process to all scholars, so they know how to access support through school, community-based, and crisis services. Scholars shall be encouraged to notify a staff member when they are experiencing emotional distress or suicidal ideation, or when they have knowledge or concerns of another scholar's emotional distress, suicidal ideation, or attempt.

Intervention: Protocol for Responding to Scholars at Risk for Suicide and/or Self-Injury

The following are general procedures for the administrator/designee to respond to any reports of scholars at risk for suicide and/or exhibiting self-injurious behaviors in school, at VMCS and school-related activities, and in all areas within VMCS's jurisdiction.

The urgency of the situation will dictate the order and applicability in which the subsequent steps are followed.

- Respond Immediately
 - Report concerns or incidents to the administrator/designee immediately or as soon as possible. Make direct contact with the designated suicide prevention liaison. For example, do not leave a note in their mailbox, send an e-mail, leave a voicemail, or wait until the end of the day to report concerns about a scholar at risk for suicide.

- Ensure that any scholar sent to the office for assessment is accompanied by a staff member, not a scholar. Do not leave the scholar unsupervised.
- Secure the Safety of the Scholar
 - Supervise the scholar at all times.
 - For immediate, emergency life threatening situations call 911. The call shall NOT be made in the presence of the scholar. Staff shall NOT physically restrain or block an exit. Secure immediate medical treatment if a suicide attempt has occurred.
 - If a scholar is agitated, unable to be contained, or for immediate assistance, contact the Anaheim Police Department (714) 765-1900 or the local law enforcement agency. VMCS should not transport scholars exhibiting these behaviors. This does not pertain to police officers.
 - Contact law enforcement to conduct a welfare check, as appropriate.
 - For technical assistance and consultation, contact the Orange County Health Care Agency's Suicide Prevention Lifeline at 988.
 - Remaining calm, keeping in mind the scholar is overwhelmed, confused, and emotionally distressed.
 - Move all other scholars out of the immediate area.
 - Provide comfort to the scholar, listening and allowing the scholar to talk and being comfortable with moments of silence. Promising privacy and help, but not promising confidentiality.
- Assess for Suicide Risk
 - The scholar should be supervised at all times by another designated staff member.
 - The suicide prevention liaison or designated crisis team member should gather essential background information that will help with assessing the scholar's risk for suicide (e.g., what the scholar said or did, information that prompted concern or suspicion, copies of any concerning writings or drawings).
 - Phone calls for consultation should be made in a confidential setting and not in the presence of the scholar of concern.
 - The suicide prevention liaison or the designated school site crisis team member should meet with the scholar to complete a risk assessment using Attachment B, "Suicide Risk Assessment Checklist." The questions should be used as a guide while assessing the scholar and should not be read directly to them.
- Suspected Child Abuse or Neglect

If child abuse by a parent/guardian is suspected or there is reasonable suspicion that contacting the parent may escalate the scholar's current level of risk, and/or the parents/guardians are contacted and unwilling to respond, report the incident to the appropriate Child Protective Services Agency. This report should include information about the scholar's suicide risk level and any concerning ideations or behaviors. The reporting party must follow directives, as indicated by the child protective services agency personnel.
- Determine Appropriate Action Plan
 - The suicide prevention liaison should collaborate with the designated school site crisis team member and at least one other school site crisis team member to determine

- appropriate action.
- If a determination is made that the scholar will be transported to an emergency mental health hospital, the school site administrator should designate a certificated staff member to accompany the scholar.
- The suicide prevention liaison or designated school site crisis team member should contact the parent/guardian or consult the emergency card for an appropriate third party as soon as possible if appropriate and in the best interest of the scholar. Determination of notification to parents/guardians/caregivers should follow a formal initial assessment to ensure that the student is not endangered by parental notification. Communication with parent/guardian may include:
 - Communicating concerns and making recommendations for safety in the home (e.g., securing firearms, medications, cleaning supplies, cutlery, razor blades).
 - Providing school and/or local community mental health resources. Scholars with private health insurance should be referred to their provider. Coordinate and consult with the county mental health plan if a referral is made for mental health or related services on behalf of a scholar who is a Medi-Cal beneficiary.
 - Facilitating contact with community agencies and following-up to ensure access to services.
- Determine Appropriate Follow-up Plan

The follow-up plan will be based upon severity and potential risk. There are circumstances that might increase a scholar's suicide risk. Examples may include bullying, suspension, expulsion, relationship problems, significant loss, interpersonal conflict, or sexual orientation/gender bias.

The follow-up plan determined by the crisis team should be documented and managed by the suicide prevention liaison. Actions may include:

- Develop a safety plan.
 - Identify caring adults in the school, home, and community environment.
 - Discuss and identify helpful coping skills.
 - Provide after-hours resource numbers, Suicide Prevention Crisis Line 988.
- Mobilize a support system and provide resources.
 - Connect scholar and family with social, school, and community supports.
 - For mental/physical health services, refer the scholar to School Mental Health, a community resource provider, or their health care provider.
- Monitor and manage.
 - The administrator/designee should monitor and manage the case as it develops and until it has been determined that the individual no longer poses an immediate threat to self.
 - Maintain consistent communication with appropriate parties on a need to know basis.
 - Plan for re-entry, as needed (see Section for Scholar Re-entry Guidelines).
 - Provide an opportunity for all who respond to the incident to debrief, evaluate the effectiveness of the strategies used, and make recommendations for future actions.
- Scholar Re-entry Guidelines

- Parents/guardians of a scholar returning to school following hospitalization, including psychiatric and drug or alcohol inpatient treatment, will be asked to provide a signed release of information to enable VMCS to confer with the scholar's health care provider.
 - If the scholar has been out of school for any length of time, including mental health hospitalization, the school site administrator/designee may consider holding a re-entry meeting with key support staff, parents, and scholar to facilitate a successful transition.
 - As appropriate, consider an assessment for Special Education for a scholar whose behavioral and emotional needs effect the ability to benefit from the educational program.
 - If the scholar is transferred to another school or location, the site administrator/designee should communicate with the receiving school to assist with the transition and ensure continued support services for the scholar.
- Document All Actions
 - The administrator/designee shall maintain records and documentation of actions taken at the school for each case by completing an incident report.
 - Notes, documents, and records related to the incident are considered confidential information and remain privileged to authorized personnel. These notes should be kept in a confidential file separate and apart from the scholar's cumulative records.

Responding to Scholars who Self-Injure

Self-injury is the act of deliberately harming one's own body, such as cutting or burning oneself. Although self-injury often lacks suicidal intent, youth who self-injure are more likely to attempt suicide. Therefore, it is important to assess scholars who cut or exhibit other types of self-injurious behaviors for suicidal ideation.

- Indicators of Self-Injury
 - Frequent or unexplained bruises, scars, cuts, or burns.
 - Consistent, inappropriate use of clothing to conceal wounds (e.g., long sleeves or turtlenecks, especially in hot weather; bracelets to cover the wrists; not wanting to change for P.E.)
 - Possession of sharp implements (e.g., razor blades, shards of glass, thumb tacks)
 - Evidence of self-injury (e.g., journals, drawings, social networking sites)
- Protocol for Responding to a Scholar who Self-Injures
 - Respond immediately or as soon as possible.
 - Supervise the scholar.
 - Assess for suicide risk using the protocol outlined in Section IV.
 - Communicate with and involve the parent/guardian, even if the scholar is not suicidal, so the behavior may be addressed as soon as possible.
 - Encourage appropriate coping and problem-solving skills; do not discourage self-injury.
 - Listen with calm and caring; reacting in an angry or shocked manner or using punishment may inadvertently increase self-injurious behaviors.
 - Provide resources.
 - Identify a support system at home and at school.

- Document all actions
- Self-Injury and Contagion

Self-injurious behaviors may be imitated by other scholars and can spread across grade levels, peer groups, and schools. The following are guidelines for addressing self-injurious behaviors among a group of scholars:

- Respond immediately or as soon as possible.
- Respond individually to scholars, but try to identify peers and friends who may also be engaging in self-injurious behaviors.
- As scholars are identified, they should be supervised in separate locations.
- Each scholar should be assessed for suicide risk individually.
- If the self-injurious behavior involves a group of scholars, the assessment of each scholar individually will often identify a scholar whose behaviors have encouraged the behaviors of others. This behavior may be indicative of more complex mental health issues for this particular scholar.

- Other Considerations for Response to Self-Injury and Contagion

The following are guidelines for how to respond as a school community when addressing self-injurious behaviors among a group of scholars:

- Self-injury should be addressed with scholars individually and never in settings, such as scholar assemblies, public announcements, school newspapers, the classroom, or even in groups.
- When self-injurious behaviors are impacting the larger school community, schools may respond by inviting parent(s)/guardian(s) to an information parent meeting at the school. Considerations should be made for supervising scholars and children during this time; the meeting should be reserved for parent(s)/guardian(s) only (see sample parent letter).

Postvention: Protocol for Responding to a Scholar Death by Suicide

The following are general procedures for the administrator/designee in the event of a completed suicide.

- Gather Pertinent Information
 - Confirm cause of death is the result of suicide, if this information is available.
 - The administrator/designee should designate a certificated staff member to be the point of contact with the family of the deceased. Information about the cause of death should not be disclosed to the school community until the family has been consulted and has consented to disclosure. Share limited information and ensure that is relevant and for which you have permission to disclose. Staff shall not share explicit, graphic, or dramatic content, including the manner of death.
- Notify on a Need to Know Basis
 - Vibrant Minds Charter School Administration and Staff
 - Parent(s)/Guardian(s)
 - Scholars
- Mobilize the School Site Crisis Team

Concerns and wishes of family members regarding disclosure of the death and cause of death should always be taken into consideration when providing facts to scholars, staff, and parents.

- Assess the extent and degree of psychological trauma and impact to the school community
 - Develop an action plan and assign responsibilities.
 - Establish a plan to notify staff of the death, once consent is obtained by the family of the deceased.
 - Notification of staff is recommended as soon as possible (e.g., emergency meeting before school or after school).
 - To dispel rumors, share accurate information and all known facts about the death excluding explicit, graphic, or dramatic content, including the manner of death.
 - Emphasize that no one person or event is to blame for suicide. Suicide is complex and cannot be simplified by blaming individuals, drugs, music, and/or school.
 - Allow staff to express their own reactions and grief; identify anyone who may need additional support and provide resources.
- Establish a plan to notify scholars of the death, once consent is obtained from the family of the deceased.
 - Discuss plan for notification of scholars in small group settings, such as the classroom. Do not notify scholars using a public announcement system.
 - Provide staff with a scripted notification of death for scholars, including possible reactions, questions, and activities scholars may engage in (e.g., writing, drawing, referral to crisis counselor).
 - Review signs of emotional distress and suicide ideation with staff.
 - Review scholar support plan, making sure to clarify procedures and locations for crisis counseling
 - Establish a plan to notify other parents/guardians of the death, once consent is obtained from the family of the deceased. Prepare and disseminate a death notification letter for parents.
 - Define triage procedures for scholars and staff who may need additional support in coping with the death. Some actions to consider:
 - Identify a lead crisis response staff member to assist with coordination of crisis counseling and support services.
 - Identify locations on campus to provide crisis counseling to scholars, staff, and parents, as needed.
 - Request substitute teachers, as needed.
 - Maintain sign-in sheets and documentation on individuals serviced for follow-up, as needed.
 - Provide scholars, staff, or parents with after-hour resource numbers such as the 24/7 Suicide Prevention Crisis Line
 - Request crisis counseling support, as needed.
 - Refer scholars or staff who require a higher level of care for additional services such as School Mental Health, a community mental health provider, or their health care provider. Indicators of scholars and staff in need of additional support and/or referral may include the following:
 - Persons with close connections to the deceased (e.g., siblings, by the family of the deceased).

- To dispel rumors, share accurate information and all known facts about the death excluding explicit, graphic, or dramatic content, including the manner of death.
- Emphasize that no one person or event is to blame for suicide. Suicide is complex and cannot be simplified by blaming individuals, drugs, music and/or school.
- Allow staff to express their own reactions and grief; identify anyone who may need additional support and provide resources.

Confidentiality

All scholar matters are confidential and may not be shared, except with those persons who need to know. Personnel with the need to know shall not re-disclose scholar information without appropriate legal authorization. Information sharing should be within the confines of Vibrant Minds Charter School's reporting procedures and investigative process. The school will not tolerate retaliation against anyone for filing.

Suggestions for Parents

Listen

- Address the behavior as soon as possible by asking open questions and listening to what they say and how they act.
- Talk to your child with compassion, calm and caring.
- Understand that this is his/her/their way of coping with pain.

Protect

- Foster a protective home environment by maintaining structure, stability, and consistency.
- Maintain high expectations for behavior and achievement.
- Set limits and provide supervision and consistency to encourage successful outcomes.
- Provide firm guidelines and set limits around technology usage.
- Be cautious about giving out punishments or negative consequences as a result of the suicidal ideation behavior, as these may inadvertently encourage the behavior to continue.

Connect

- Check in with your child on a regular basis.
- Become familiar with the support services at your child's school. Contact appropriate person(s) at the school, for example, the school social worker, school psychologist, school

counselor, or school nurse.

Model

- Model healthy and safe ways of managing stress and engage your child in these activities, such as taking walks, deep breathing, journal writing, or listening to music.
- Be aware of your thoughts, feelings and reactions about this behavior. Lecturing, expressing anger or shock can cause your child to feel guilt or shame.

Teach

- Teach about normal changes that can occur when experiencing stressful events.
- Teach your child about common reactions to stress and help them identify alternative ways to cope.
- Teach your child help seeking behaviors and help them identify adults they can trust at home and at school when they need assistance.

Review of Policy

This policy may be reviewed periodically (at least every 5 years) by the VMCS Board.

Adopted: June 12, 2024

Amended: August 21, 2024



VIBRANT MINDS CHARTER SCHOOL

TK-6 Grade, Free, Public Education

412 W. Carl Karcher Way
Anaheim, California 92801

Office: 714-563-2390

FAX: 714-563-2401

<https://www.vibrantminds.us/>

<https://www.facebook.com/VMCharterSchool/>

Date:

Dear Parent(s)/Guardian(s):

On _____, a group of scholars in a ___ grade classroom was involved in hurting themselves outside of their classrooms. These scholars were involved in using razor blades to cut themselves. Our mental health staff has advised us that this is known as a “rite of togetherness” in which scholars choose to bond together by hurting themselves. The Vibrant Minds Charter School staff are working collaboratively with the Department of Mental Health and local law enforcement. We believe we have identified all the scholars involved and have responded to each individually.

I would like to take this opportunity invite you to attend an important informational meeting for parents regarding youth who self-injure and how we can help our children. We hope you can join us. The parent meeting will be held as follows:

Location:

Date:

Time:

Also, please see the attached handout “Self-Injury and Youth – General Guidelines for Parents” for suggestions on how to respond to your scholar. At Vibrant Minds Charter School, the safety of every scholar and staff member is very important to us. Should you or your scholar have any concerns, please feel free to contact Chammarra Nguyen (Assistant Director) or Debra J. Schroeder (Executive Director) at (714) 563-2390. We are all involved in creating a safe environment for our scholars.

Sincerely,

Chammarra Nguyen
Assistant Director

Debra J. Schroeder, Ed.D.
Founding/Executive Director

POSTVENTION: PROTOCOL FOR RESPONDING TO A SCHOLAR DEATH BY SUICIDE

The following is a summary checklist of general procedures for the administrator/designated crisis team member to respond in the event of a scholar death by suicide.

A. GATHER PERTINENT INFORMATION

- Confirm death and cause of death, if this information is available.
- Contact family of the deceased.

B. NOTIFY

- VMCS staff
- Other offices

C. MOBILIZE THE SCHOOL SITE CRISIS TEAM

- Review information and assess impact.
- Develop an action plan and assign responsibilities.
- Establish a plan to notify staff, scholars and parents of the death and the availability of support services.
- Share limited information and ensure that is relevant and for which you have permission to disclose. Staff shall not share explicit, graphic, or dramatic content, including the manner of death.
- Review protocols for referring scholars for support/assessment.
- Develop and provide supports to staff in responding to scholar reactions.
- Define triage procedures.
- Know indicators of those who may need additional support.
- Staff shall identify and immediately refer scholars who they suspect are affected or considering imitative behavior to a school-based mental health professional. If deemed safe, staff shall contact the scholar's parents/guardians/caregivers/families.
- Consult with Crisis Counseling and Intervention Services, School Mental Health, as needed.

D. MONITOR AND MANAGE (When reporting child abuse, include information about the scholar's suicide risk)

E. IMPORTANT CONSIDERATIONS

- Memorials (CDE recommends against permanent memorials)
- Social Networking
- Suicide Contagion
- School Culture and Events