



KENNEDY CATHOLIC FAMILY OF SCHOOLS  
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**302.9 – Best Practices – SUICIDE AWARENESS AND PREVENTION**

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**Suicide Awareness and Prevention Policy and Procedures**

**Purpose**

The Kennedy Catholic Family of Schools system has adopted a Suicide Awareness policy in acknowledgement of our school’s commitment to:

- Maintain a safe school environment by having procedures in place to prevent, assess the risk of, intervene in and respond to suicide,
- Protect the health and well-being of our students and school community, and
- Safeguard against the threat or attempt of suicide among our school-aged youth, and
- Engage professional educators and students in regular educational experiences to gain knowledge related to youth suicide awareness and prevention methods.

**Definitions**

At-Risk for Suicide shall mean any youth with risk factors or warning signs that increase the likelihood of suicidal behavior.

Behavioral Health shall mean the emotion, behaviors and biology related to a person's mental well-being, their ability to function in everyday life and their concept of self.

Postvention shall mean activities which reduce risk and promote healing after a suicide death.

Prevention refers to efforts that seek to reduce the factors that increase the risk for suicidal thoughts and behaviors and increase the factors that help strengthen, support, and protect individuals from suicide.

Resilience is the process of adapting well in the face of adversity, trauma, tragedy, threats, or significant sources of stress or "bouncing back" from difficult experiences.

Suicide shall refer to death caused by self-directed injurious behavior with intent to die as a result of the behavior.

Suicidal Act or Suicide Attempt shall mean a potentially self-injurious behavior for which



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there is evidence that the person intended to kill him/herself; a suicidal act may result in death, injuries, or no injuries.

Suicide Threat shall mean a verbal or nonverbal communication that an individual intends to harm him/herself with the intention to die but has not acted on the behavior.

Warning Signs are evidence-based indicators, often observable, that someone may be in danger of suicide, either immediately or in the near future.

### **Confidentiality**

The Kennedy Catholic Family of Schools system believes students identified as at-risk of self-harm shall receive access to mental health support as quickly as possible. The primary responsibilities of school personnel working with students dealing suicidal thoughts or actions is to provide immediate support for the student, inform the parent/guardian, and request, or require when appropriate, the parent/ guardian make a referral to a qualified health professional or emergency service provider for an external mental health evaluation. In these life-threatening situations, school officials have a duty to report suicidal ideation to protect the student's well-being. Information about potential suicidal ideation will be shared with the building principal and other appropriate authorities when the health, welfare, or safety of the student or any other person is deemed to be at risk.

Any mental health records collected by the school must be kept in a confidential file separate from the student's permanent records and medical records. Students aged 14 and older legally control their mental health records. Therefore, a release of information from the student is required to share these records. This includes the student's parents.

### **Prevention Requirements**

- Each school/system employee and the parent/guardian of each student enrolled in the school/system shall be informed of the youth suicide awareness and prevention policy. This policy shall be included in the student/parent and faculty handbooks and posted on the school/system's website.
- Students grades 6-12 shall receive age-appropriate suicide awareness and prevention lessons in their classrooms through health education or other appropriate curricula annually. Curricula will include information about the myths and facts, importance of safe and healthy choices, coping strategies, how to recognize risk factors and warning



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signs, as well as help-seeking strategies for self or others, including how to engage school resources and refer friends for help.

- All professional educators in school buildings serving students in grade six (6) through grade twelve (12), shall receive one hour of training in youth suicide awareness and prevention every year.

#### Prevention Procedures and Resources

- Schools will communicate prevention policy and procedures to stakeholders via:
  - Student/parent handbooks
  - Faculty handbook
  - School website
- Age-appropriate Suicide Awareness and Prevention education
  - Research shows the most effective suicide awareness and prevention education occurs in small group settings. Therefore, all schools will include suicide awareness and prevention education as a part of a selected curriculum within the educational program. (i.e., health, wellness, Theology)
- Suicide Awareness and Prevention Resources:
  - [PDE Youth Suicide Education Awareness and Prevention Model Curriculum Guidelines](#)
  - [Prevent Suicide PA](#): Pre and postvention resources
  - [PA Suicide Awareness/Prevention: Guidelines and Educational Materials](#)
  - [PBS – In the Mix](#): Suicide lesson plans for grades 7-12
  - [Issues in Mental Health: Suicide Prevention Curriculum 7-12th](#)
  - [Mental Health Units of Instruction](#): Suicide prevention curriculum for grades 7-12
  - [National Institute of Mental Health](#): Resources to raise awareness about suicide prevention
  - [SAMHSA: Preventing Suicide](#): A toolkit for High Schools
  - [Suicide Prevention Resource Center](#): Resources and virtual learning labs
  - [Jason Foundation](#): Training as well as several valuable resources for educators
  - [The American Association of Suicidology](#): Offers a wide array of school resources
  - [The United States Conference of Catholic Bishops offers this analysis: Youth Suicidal](#)
- Professional Development for Professional Educational Staff
  - Professional educators shall complete a minimum of one hour of suicide awareness and prevention training annually and can utilize the following training options:
    - PDE approved: Prevent Suicide PA Learning: Free online courses including, “Suicide Prevention for Educators.” Prevent Suicide PA Learning ([pspalearning.com](http://pspalearning.com))

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- ◇ This program offers eight, 30-minute suicide awareness and prevention courses
- ◇ Educators shall complete a minimum of two (2) of the 30 minutes online courses list below annually and submit an end of course generated transcript showing progress to date.
- USDHHS/ SAMSHA approved: QPR Online Gatekeeper Training: This is a 1-hour training that can be provided in a face-to-face setting or online by a trained, certified, mental health specialist. More information can be found at <https://qprinstitute.com/individual-training>.

**Intervention Procedures: Response to a Student Suicide Threat**

A professional educator who becomes aware of suicidal ideation (i.e., verbalized thoughts about suicide, presents with risk factors such as agitation, intoxication, an act of self-harm, written threats, expressions about suicide and/or death in school assignments, another student reports concerns about a student, etc.) must view the situation with seriousness and immediately (within the same school day) report this information to the principal and school counselor (if applicable) immediately.

**Immediate Procedures:**

- The principal and school counselor shall see the identified student immediately.
- Ensure an adult always stays with the student. Do not leave the student alone.
- Assess the level of risk by collecting and documenting all pertinent information about the student, including an interview with the student. (See 302.9 BP-A Appendix)
- Notify parent or guardian immediately of the student's suicidal ideations and/or actions. If unable to contact parent or guardian, call the local mental health services. Mercer County BHC Crisis Hotline- Phone #: 724-662-2227, People can call, text, or chat with 988 to be connected to the National Suicide Prevention Lifeline. The Lifeline phone number is 1-800-273-8255.
- When appropriate, request an external mental health evaluation be conducted by a qualified mental health professional
- Conduct in-person parent/guardian conference and require parent/guardian to sign a form that includes: (See 302.9 BP-B Appendix)
  - Reason for parent conference
  - Date and time of the conference
  - Signatures of all present for meeting
  - Specific information about any recommendations for external mental health evaluations
  - A number for local mental health provider

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- Require a “school safety plan” for student’s return to school and share safety plan requirements with student’s teachers. (See 302.9 BP-C and D Appendices)

**Follow-Up Procedures:**

- Document all meetings and communications with student and family and on-going school actions, including dates and times.
- Request a copy of the mental health evaluation and recommendations made by a qualified mental health professional. Documentation is to be reviewed by principal.
- Before student returns to school, convene a conference with parents to discuss student’s readiness for return and devise a reentry safety plan. (See 302.9 BP-C Appendix)
  - Communicate on a regular basis with student’s parent/guardian about the student’s ongoing progress.
- Convene a meeting every three weeks to discuss current in-school safety plan to adjust as warranted. (See 302.9 BP-C Appendix)
- Inform appropriate school personnel of student’s return and communicate requirements of safety plan. (See 302.9 BP-D Appendix) School staff members who are likely to interact with the student should be verbally notified to be on alert for signs of on-going risk factors. (In the case of suicidal ideation school staff members who are likely to interact with students do have an “educational need to know,” however, these individuals should be aware that they need to maintain confidentiality for the student and the family being served.)
- Implement safety plan. (See 302.9 BP-C and BP-D Appendices) Document student’s ongoing progress.
- If parents do not comply with evaluation request or mental health recommendations, principal shall meet with the parent(s)/guardian(s) to discuss continued enrollment.
- If suicidal ideation continues, repeat the immediate intervention procedures.

**Response to an In-School Suicide Attempt**

In the event of a student attempting suicide during the school day, on school grounds, the following procedures will be followed:

**Immediate Procedures:**

- Call 911 for ambulance.
- Administer first aid until professional medical services arrive.
- Call the predetermined school personnel to assist with immediate needs of the student.
  - Always ensure an adult stay with the student. Do not leave student alone.
- Make an announcement asking all teachers and students to stay in their classrooms.
- The building Principal will notify:

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- Parent or guardian
- Police
- Pastor/president and superintendent
- Mental health services (as needed)
- Identify students who may have witnessed the event or who were in close physical or emotional proximity to the student. Arrange for opportunity for student to meet with a mental health provider to ensure safety and well-being.
- Principal and all involved personnel will document all actions and communications. This documentation should contain factual information and accurate timeframes and locations of school response to the crisis. (i.e., “At 1:25 (student name) was found unconscious in stairwell.”)

**Follow-Up Procedures:**

- A formal external mental health evaluation conducted by a qualified medical health professional shall be required for the student, as soon as possible.
- Request a copy of the mental health evaluation and recommendations made by a qualified mental health professional. Documentation is to be reviewed by principal.
- The student must have a completed mental health assessment prior to readmission to school.
  - If parents do not comply with evaluation request or mental health recommendations, principal shall meet with the parent(s)/guardian(s) to discuss continued enrollment.
- If a student requires hospitalization or medical absence, continued contact with the student’s parents should be maintained to extend support, encourage parental involvement, and monitor student’s progress.
- Before student returns to school, convene a conference with parents to discuss student’s readiness for return and devise a reentry safety plan. (See 302.9 BP-C Appendix)
  - Communicate on a regular basis with student’s parents/guardians about the student’s ongoing progress.
    - Convene a meeting every three weeks to discuss current in-school safety plan to make adjustments as warranted. (See 302.9 BP-C Appendix)
- Inform appropriate school personnel of student’s return and communicate requirements of safety plan. (See 302.9 BP-D Appendix) School staff members who are likely to interact with the student should be verbally notified to be on alert for signs of on-going risk factors. (In the case of suicidal ideation school staff members who are likely to interact with students do have an “educational need to know,” however, these individuals should be aware that they need to maintain confidentiality for the student and the family being served.)

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- Implement safety plan. (See 302.9 BP-C and BP-D Appendices) Document student's ongoing progress.
- If parents do not comply with evaluation request or mental health recommendations, principal shall meet with the parent(s)/guardian(s) to discuss continued enrollment.
- If suicidal ideation continues, repeat the intervention procedures.
- Continue to monitor other students who had close physical or emotional proximity to student who made the suicide attempt.

### Response to a Suicide Attempt Outside of School

#### Immediate Procedures:

- Principal will verify the validity of the report with parent/guardian.

#### Follow-Up Procedures:

- A formal external mental health evaluation conducted by a qualified medical health professional shall be required for the student, as soon as possible.
- Request a copy of the mental health evaluation and recommendations made by a qualified mental health professional. Documentation is to be reviewed by principal.
- The student must have a completed mental health assessment prior to readmission to school.
  - If parents do not comply with evaluation request or mental health recommendations, principal shall meet with the parent(s)/guardian(s) to discuss continued enrollment.
- If a student requires hospitalization or medical absence, continued contact with the student's parents should be maintained to extend support, encourage parental involvement, and monitor student's progress.
- Before student returns to school, convene a conference with parents to discuss student's readiness for return and devise a reentry safety plan. (See 302.9 BP-C and BP-F Appendices)
  - Communicate on a regular basis with student's parents/guardians about the student's ongoing progress.
    - Convene a meeting every three weeks to discuss current in-school safety plan to adjust as warranted.
- Inform appropriate school personnel of student's return and communicate requirements of safety plan. (See 302.9 BP-D Appendix) School staff members who are

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- likely to interact with the student should be verbally notified to be on alert for signs of on-going risk factors. (In the case of suicidal ideation school staff members who are likely to interact with students do have an “educational need to know,” however, these individuals should be aware that they need to maintain confidentiality for the student and the family being served.)
- Implement safety plan. (See 302.9 BP-C and BP-D Appendices) Document student’s ongoing progress.
- If parents do not comply with evaluation request or mental health recommendations, principal shall meet with the parent(s)/guardian(s) to discuss continued enrollment.
- If suicidal ideation continues, repeat the immediate intervention procedures.
- Continue to monitor other students who had close physical or emotional proximity to student who made the suicide attempt.

**Response to a Suicide Attempt on a School Bus**

The principal will communicate with sending schools to establish a communications plan regarding any issues related to student endangering themselves or others if incidents occur during transportation between home and school.

**Response to a Suicide**

If a suicide does occur, support will be provided for students, parents, and members of the school community.

**Immediate Procedures:**

- Principal will verify the report.
- Principal or designee will consult with student’s parents to determine what information they will allow to be released to the teachers, students, and wider school community.
- Principal or designee will consult with parents of deceased student to find out the names of students who were close to the deceased and who will need special attention.
- Principal will notify the pastor/president, superintendent, who will inform the Bishop and Communications Office.
- Principal will engage local mental health professionals to come to school and provide mental health services.
- If police wish to question students, call parents of those students to notify them and ask if they wish to be present for this questioning or have administration present at the questioning.





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- Notify staff of student's death, sharing only verified information that has been deemed permissible by the parents.
- Notify students of student's death, sharing only verified information that has been deemed permissible by the parents, and is developmentally appropriate.
- Announcement will be made to the students.
  - This must be a simultaneous announcement to prevent students texting others the news.
  - This announcement should begin with prayer and the reading of a prepared statement.
  - Mental health professionals will be in place to support students and to identify any students who may need additional mental health support.
  - Identify students who may have witnessed the event or who were in close physical or emotional proximity to the student. Arrange for opportunity for student to meet with a mental health provider to ensure safety and well-being.
- An announcement to parents, priests, pastoral center, and school should be drafted and approved by the director of communication and superintendent. Once approved, the announcement can be sent by email.
- Draft a letter of notification of a suicide that includes intervention and prevention information (See [After a Suicide: A Toolkit For Schools](#)), seek approval by the director of communications and superintendent, and send notification to the wider school community.
- Parents may pick up their children from school using all regular school attendance and school dismissal protocols.
- Students should not be permitted to leave in their own vehicles, with other students, or with other student's parent(s)/guardian(s).
- Principal will call a faculty meeting to explain post-suicide procedures.
- Document all actions and communications.

**Follow-Up Procedures:**

- Establish a schedule with mental health professionals to be present in the building for at least a period of 3-5 days, or longer as needed.
  - Students and staff needing additional mental health consultation should be encouraged to continue to meet with mental health professionals.
  - Emphasize help is available and people do care.
  - Emphasize no one is to blame.
  - Provide small group opportunities to discuss this incident.
    - Document all actions and communications.

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- Ensure students and families have access to suicide prevention information and suicide prevention hotlines via the school's website, handbooks, and printed materials.
- Maintain regular school schedule and activities.
- Teachers will monitor students' reactions and refer to mental health professional when appropriate. Remember not all students are invested in the situation.
- Meet with local members of religious communities to plan appropriate pastoral support to staff, students, and their families. ([Resource: After a suicide: Recommendations for religious services and other public memorial observances](#))
- Funerals and Memorial Services:
  - Do not hold funeral and memorial service at the school.
  - Do not demand attendance at the funeral or the funeral home.
  - Students will not attend the funeral as a school event, instead students can attend under the supervision of their parent/guardian following regular school protocols.

#### **Suicide Contagion and the Media/Social Media Response**

(For more information see: ["After a Suicide: Toolkit for Schools, Second Edition"](#))

Research has shown a link between certain kinds of suicide-related media (including social media) coverage and increases in suicide deaths. Suicide contagion has been observed when there is increased media coverage of an individual's suicide or when a particular death is reported in detail in the media or on social media.

#### **To avoid suicide contagion:**

- Triage students for contagion by monitoring students with a close emotional or physical proximity (e.g., siblings, friends, teammates, witness, or neighbor) or who have other pre-existing mental health issues or trauma.
- Refer any students who are exhibiting behavioral changes or presenting with suicide warning signs to the building administrator for screening and support.
- Administrators will remind all personnel that talking about suicide with students is an evidenced based practice that promotes open dialogue and increases help-seeking, it does not elevate risk.

#### **Working with the Media:**

- All contact with the media will be communicated through a designated spokesperson for the school. The local school spokesperson will communicate in conjunction with the Catholic Schools Office and the director of communications for the Diocese.

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- Schools will designate a media spokesperson to field media inquiries, prepare a media statement, and oversee the school's use of social media.
- Schools will advise staff that only the media spokesperson is authorized to speak to the media.

**Monitoring social media:**

- Students will turn to social media to express their feelings, create online memorials, and plan impromptu gatherings. Social media sites provide both safe and unsafe environments for students to do these things after a suicide.
  - Schools will utilize their own social media to share information about counseling resources, post information related to the warning signs of suicide, and provide direct access to local, state, and national suicide hotlines.
    - Local community mental health partner contact information
    - Hotline: PA – Safe2Say Something: Home - Safe2Say Something ([safe2saypa.org](http://safe2saypa.org))
    - Hotline: National Suicide Prevention Lifeline ([suicidepreventionlifeline.org](http://suicidepreventionlifeline.org))
  - Schools should also monitor social media to help identify at-risk youth.

**Memorials:**

Adolescents are especially vulnerable to the risk of suicide contagion. Schools must carefully consider how they will manage planned and spontaneous memorials at the school. (See 302.9 BP-E Appendix and [After a Suicide: Toolkit for Schools, Second Edition](#))

**Catechism of the Catholic Church:**

Suicide #2280 - Everyone is responsible for his life before God who has given it to him. It is God who remains the sovereign Master of life. We are obliged to accept life gratefully and preserve it for his honor and the salvation of our souls. We are stewards, not owners, of the life God has entrusted to us. It is not ours to dispose of.

#2281 - Suicide contradicts the natural inclination of the human being to preserve and perpetuate his life. It is gravely contrary to the just love of self. It likewise offends love of neighbor because it unjustly breaks the ties of solidarity with family, nation, and other human societies to which we continue to have obligations. Suicide is contrary to love for the living God.



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#2282 - If suicide is committed with the intention of setting an example, especially to the young, it also takes on the gravity of scandal. Voluntary co-operation in suicide is contrary to the moral law. Grave psychological disturbances, anguish, or grave fear of hardship, suffering, or torture can diminish the responsibility of the one committing suicide.

#2283 - We should not despair of the eternal salvation of persons who have taken their own lives. By ways known to him alone, God can provide the opportunity for salutary repentance. the Church prays for persons who have taken their own lives.

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