### SOUTH ORANGE MAPLEWOOD BOARD OF EDUCATION

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#### 5350 STUDENT SUICIDE PREVENTION (M)

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The Board of Education recognizes that <u>depression and self-destruction are problems of increasing severity among students suicide is a serious public health problem that causes pain, suffering and can have a profound effect on the entire community. Suicide is one of the top 10 causes of death in the United States and the second leading cause of death for youth age 10-19. Depression and self-destruction are problems of increasing severity among children and adolescents. <u>Students A student</u> under severe stress cannot benefit fully from the educational program and may pose a threat to themselves or others. <u>The Board of Education understands that it has a legal and ethical responsibility to recognize and respond to suicidal thinking and behavior.</u></u>

The Board directs all school district staff members to be alert to a student who exhibits warning signs of self-destruction or who threatens or attempts suicide. Any such warning signs or the report of such warning signs from another student or staff member shall be taken with the utmost seriousness and reported immediately to the Principal or designee.each school to develop a Crisis Response Team responsible for developing and implementing suicide risk assessment, intervention, re-entry and post-intervention procedures when a student exhibits suicidal thinking and/or behavior. The Crisis Team will include but not be limited to, an Administrator, Student Assistance Coordinator, Psychologist, Social Worker, Nurse, School Counselor and CST. The building principal or designee will lead this team and ensure each member is apprised of their duties and responsibilities.

The Principal or designee shall immediately contact the parent(s)/guardian(s) of the student exhibiting warning signs of suicide to inform the parent(s)/guardian(s) the student will be referred to the Child Study Team or a Suicide Intervention Team, appointed by the Superintendent or designee, for a preliminary assessment. Upon completion of the preliminary assessment, the Principal or designee shall meet with the parent(s)/guardian(s) to review the assessment. Based on the preliminary assessment, the parent(s) may be required to obtain medical or psychiatric services for the student. In the event the parent(s)/guardian(s) objects to the recommendation or indicates an unwillingness to cooperate in the best interests of the student, the Principal or designee will contact the New Jersey Department of Children and Families, Division of Child Protection and Permanency to request intervention on the student's behalf.

In the event the student is required to obtain medical or psychiatric services, the parent(s)/guardian(s) will be required to submit to the Superintendent a written medical clearance from a licensed medical professional, selected by the parent(s)/guardian(s) and



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approved by the Superintendent, indicating the student has received medical services, does not present a risk to themselves or others, and is cleared to return to school. The written medical clearance may be reviewed by a Board of Education healthcare professional before the student is permitted to return to school. The parent(s)/guardian(s) shall be required to authorize their healthcare professional(s) to release relevant medical information to the school district's healthcare professional, if requested.

In accordance with N.J.A.C. 6A:14-1.1(d), special education and related services shall be provided to students with disabilities at public expense, with no charge to the parent(s)/guardian(s). A clearance by a psychiatrist or other medical professional as a requirement to return to school is considered an assessment provided at public expense. The district shall not require the parent(s)/guardian(s) to incur the cost of psychiatric clearance.

In accordance with the provisions of N.J.S.A. 18A:6-111 and 18A:6-112, as part of the required professional development for teachers as outlined in N.J.A.C. 6A:9C-3 et seq., every teaching staff member must complete at least two hours of instruction in suicide prevention, to be provided by a licensed health care professional with training and experience in mental health issues, in each professional development period. The instruction in suicide prevention shall include information on the relationship between the risk of suicide and incidents of harassment, intimidation, and bullying and information on reducing the risk of suicide in students who are members of communities identified as having members at high risk of suicide.

Not including teaching staff members subject to the requirements of N.J.S.A. 18A:6-112.a. and not including licensed mental health care professionals, a school employee or an employee of a contracted service provider who has regular and direct contact with students, as determined by the Board, shall complete a one-time training program in suicide prevention, awareness, and response identified by the New Jersey Department of Education (NJDOE) pursuant to N.J.S.A. 18A:6-112.c. A person subject to the requirements of N.J.S.A. 18A:6-112.b. shall complete the required training program not less than twelve months from the date of the identification by the NJDOE of training programs or twelve months from the person's date of hire, whichever occurs later.

Not less than twelve months following the date of the identification by the NJDOE of the training programs or not less than twelve months from the person's date of hire, and annually thereafter, the district shall provide to their employees who are subject to the requirements of N.J.S.A. 18A:6-112.a. or b., in a hard copy paper form or in an electronic form, guidelines on the district's reporting and suicide prevention, awareness, and response protocols including, but not limited to, contact information for each school's



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designated staff who should be notified whenever an employee believes a student may be at risk for suicide.

Each person who is required pursuant to N.J.S.A. 18A:6-112.a. or b. to complete a suicide prevention training program shall have a duty to warn and protect when the following conditions exist:

- 1. A student has communicated to that person a clearly identifiable threat of imminent, serious physical violence against oneself and the circumstances are such that a reasonable person would believe the student intended to carry out the threat; or
- 2. The circumstances are such that a reasonable person would believe the student intended to carry out an act of imminent, serious physical violence against oneself.

A person acting in good faith and who takes reasonable steps to discharge a duty to warn and protect shall be immune from civil and criminal liability in regard to that disclosure.

Any school district staff member, volunteer, or intern with reasonable cause to suspect or believe that a student has attempted or completed suicide, shall immediately report the information to the Principal or designee or their immediate supervisor who will immediately report it to the Superintendent or designee. The Superintendent or designee shall promptly report it online to the New Jersey Department of Children and Families, or as otherwise required by the Department of Children and Families in accordance with N.J.S.A. 30:9A-24. In accordance with N.J.S.A. 30:9A-24.i., any person who reports an attempted or completed suicide shall have immunity from any civil or criminal liability on account of the report, unless the person has acted in bad faith or with malicious purpose.

The Board directs each school to integrate developmentally appropriate, student-centered education materials into the curriculum of all K-12 health classes and other classes as appropriate.

The Board directs all school personnel (including employees, volunteers and interns) to be alert to the student who exhibits behavioral warning signs of potential self-destruction or who threatens or attempts suicide. Any such signs or the report of any such signs received from any source should be taken with the utmost seriousness and reported immediately to the building principal or designee, who shall notify the student's parent(s) or legal guardian(s) and other professional staff members in accordance with administrative regulations.



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A potentially suicidal student shall be interviewed by a designated Crisis Team Member, such as, but not limited to the Student Assistance Coordinator, the Psychologist and/or Social Worker for appropriate evaluation and/or recommendation for independent medical or psychiatric services, in accordance with law. A list of designated psychologists and social workers will be developed in consultation with the Director of Special Services at the beginning of each school year and will be maintained in each school building. Upon completion of the appropriate evaluation and/or recommendation for independent medical or psychiatric services, the parent/guardian and student will meet with the designated Crisis Team Members to develop a plan for supporting the student in school. In the event that the parent(s) or legal guardian(s) objects to the recommended evaluation or indicates an unwillingness to cooperate in the best interests of the student, the principal or designee may contact the New Jersey Department of Children and Families, Division of Child Protection and Permanency (DCP&P), to request the agency's intervention on the student's behalf.

A re-entry plan shall be developed and implemented by the Crisis Team, student, parent(s) or legal guardian(s) and other professional personnel in accordance with administrative regulations.

The Board directs each school to develop a plan for Post intervention. The Crisis Response Team, led by the School Principal or designee, shall develop a crisis response plan to guide school response following a death by suicide. A meeting of the crisis team to implement the plan shall take place immediately following word of the suicide death.

Any school personnel with reasonable cause to suspect or believe that a student has attempted or died by suicide must report the information to the Department of Human Services, Division of Mental Health and Addition Services pursuant to N.J.S.A. 30:9A-24.a. School personnel must also report the information to the school principal or other designee. The school principal or designee will meet with the Crisis Team to develop a plan to support the students, staff, family and school community.

In accordance with the provision of N.J.S.A 18A:6-111 and 18A:6-112, as part of the required professional development for teachers as outlined in the N.J.A.C. 6A:9-15.1 et seq., every teaching staff member must complete at least two hours of instruction in suicide prevention, to be provided by a licensed health care professional with experience in mental health issues, in each professional development period. Training will include but not be limited to: warning signs and referral procedures for students who display signs of suicidal thinking and behavior, prevention measures, confidentiality, bullying and other suicide-related behaviors. Training will emphasize the importance of providing a safe, positive and caring school environment that ensures students develop trusting relationships with staff.



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This policy will be distributed annually in all student and teacher handbooks and on the school website. Students, parents and staff will have access to resources for additional support.

The District will maintain a list of resources on the website that relate to student suicide prevention. The list will be updated in accordance with policy and regulation guidelines.

The Superintendent shall prepare and disseminate <u>guidelines to assist school district staff</u> <u>members regulations for the guidance of staff members in recognizing the <u>warning signs</u> <u>of a student who <u>may be</u> contemplating es—suicide, <u>to respond in responding</u> to <u>a</u> threatened or attempted suicide, and <u>to in preventing</u> contagion when a student <u>commits</u> suicide. or other community member dies by suicide.</u></u>

N.J.S.A. 18A:6-111; 18A:6-112; 18A:6-113;

N.J.S.A. 30:9A-23; 30:9A-24a.

N.J.A.C. 6A:16-11.1(b)

N.J.A.C. 6A:9C-3, et. seq.; 6A:14-1.1

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