



# SUICIDE PREVENTION POLICY

BOS Manual, 3.6.2

Related policies:

- Child Protection Policy
- Critical Events Policy

## RATIONALE

Whilst this policy is aimed at providing support generally for “Students at Risk of Significant Harm”, it implicitly includes approaches to deal with issues relating to Youth Suicide Prevention.

There are several important principles at work in relation to this Policy:

- Student welfare is a shared responsibility between school, home and the community.
- School should be a positive environment in which all staff assume responsibility for student welfare and each student is provided with successful experiences.
- All students shall have access to welfare and support services.
- Clear, well known communication processes and protocols are critical to the effectiveness of student welfare support.

## AIM

The aim of this Policy is to promote a healthy, supportive and secure environment for students, with targeted support for students at risk of harm to self.

## IMPLEMENTATION

The Student Welfare Coordinators (Heads of Junior, Middle & High School) will be responsible for the implementation of this policy and for staff professional development with regard to student welfare & suicide prevention awareness, including:

- Maintaining staff awareness and information regarding suicide prevention and self-harm on a regular basis (at least once per annum) through staff professional development sessions. This must incorporate awareness information and “warning signs” listed in *Appendix1*.
- Ensuring all relevant staff members are aware of their responsibilities of reporting students who are identified as “at risk.”
- Addressing any issues concerned with the stages at which support may be provided:

- **Primary Prevention:** programs which develop resilience, through enhanced life skills and protective factors.
- **Early Intervention:** strategies and processes which assess and manage individuals and groups identified as 'at risk'.
- **Intervention:** provision of crisis support for individuals exhibiting 'at risk' behaviours.
- **Post-Intervention:** implement a critical incident response plan including counseling.

Refer also to the **Critical Events Policy**.

The school shall implement welfare support structures and programs that prioritise and address the identified needs of students.

Welfare programs and student services with regard to suicide prevention/intervention will be supported where possible, by provision of time release for staff to enable: -

- The conduct of support programs which focus on addressing student welfare issues
- Individual and group student counseling.
- Skill development for students, teachers and parents.

Protocols should include consideration and respect for the confidential nature of dealing with student welfare issues. It is noted, however, that students who disclose to staff a desire to harm themselves or others, must be reported by staff to the principal.

Where a decision needs to be made regarding the appropriate nature of curriculum content for the teaching and learning of issues which may relate to "student at risk behaviours" it shall be referred to the Student Welfare Coordinator (Head of High, Middle or Junior School) for the relevant campus. The coordinator will forward their recommendation to the principal for a final decision.

### **Important Note**

There is considerable evidence to recommend that Youth Suicide prevention is not taught in schools as a means of addressing 'at risk' behaviour, and it is our policy that we do not teach 'suicide prevention' as a curriculum topic.

In view of this our focus will be to:

- Promote staff awareness of suicide "warning signs"),
- Promote staff awareness of procedural protocols and reporting. Staff members are to report to Welfare Coordinators (school heads) or School Counselors.

For information on "what staff should know" see Appendix 1.

For school based case management of known students, a structure shall provide for continuity of care through a process of coordination with other appropriate agencies.

## APPENDIX 1

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## **WARNING SIGNS OF STUDENTS IDENTIFIED AS “AT RISK”.**

### **The extent of the problem**

- Suicide is the leading cause of death in young people aged 15-24 years. (For each completed suicide in the young there are about 100 suicide attempts reported.)
- Suicidal thoughts are common in young people.
- About half of the teenagers who attempt suicide once make further attempts.
- Suicide in the young is often not the result of a logical decision.
- Predicting suicide in individual cases is almost impossible. (You are not an expert. Immediate referral is essential.)

### **Risk Scale**

- Is the child a boy?
- Does the child have behavioural or emotional problems?
- Does the child drink alcohol or use drugs?
- Has the child suffered a loss, rejection, humiliation or disappointment recently?
- Is the child socially isolated, with no close friends?
- Has the child attempted suicide recently or self-harmed?

### **Warning Signs. (predisposition)**

- Talking, writing or joking about death.
- Talking about people who have died from suicide.
- Withdrawing or avoiding contact with other people.
- Giving away personal possessions.
- Saying goodbye in a meaningful way.
- Making arrangements for after their death.
- Risk-taking behaviour.
- Deliberate self-harm or a suicide attempt.
- Evidence of depression.
- Sudden calmness.
- “Terminal Malignant Alienation.” (Jargon referring to a person alienating those around them, often appearing angry and unappreciative of help.)

### **What to do**

- Be aware.
- Be alert
- Care (Ask direct questions about suicidal thoughts or behaviours, not vague or open-ended questions.)
- Refer.