

**Exhibit E**

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**PASSAIC PUBLIC SCHOOLS**  
**STUDENT CRISIS INTERVENTION**  
**POLICY AND PROCEDURES**

**SUICIDE**

**LEVEL I – AT RISK BEHAVIORS**

**Level I** – It is important that school personnel and the population in general be aware of warning signs so the appropriate steps can be taken.

Warning signs may include:

1. Indications of depression;
2. Changes in “personality”;
3. Inability to concentrate;
4. A downward trend in school;
5. Preoccupation;
6. Risk-taking behavior or appearing to be “accident-prone”;
7. Quietness;
8. Indications that the person is making final arrangements;
9. Withdrawn appearance;
10. A sense of not belonging in school;
11. A sense of having a restricted future because of doing poorly in school;
12. Isolation;
13. Low level of family support; and
14. Substance abuse.

Remember that a number of warning signs are characteristic of the turmoil adolescence making it difficult for adults to know by observation whether a young person is suicidal or not. However, it is critical to be on guard when several warning signs occur together or when a key sign persists over time.

School person because of their extensive contact with young people, are an especially important resource in identifying potentially suicidal youngsters. Once warning signs have been identified and there is suspicion that a given individual may be suicidal, the following steps must be take:

1. Staff member shall notify the building administrator or designee.
2. Administrator assembles at least 2 members of the SCIT. Members of the SCIT may include the following personnel:
  - o School Counselor
  - o Social Worker
  - o Student Assistance Coordinator (SAC)

- Child Study Team Member
  - Intervention/Prevention Personnel
  - School-Based Youth Services personnel
  - School Administrator
  - School Nurse
  - Teacher
3. Team members will assess the level of risk by interviewing the student, interviewing the referral source and using the Suicide Questionnaire. The team will also contact the parent and, if the student is classified, the CST case manager.
  4. If the team determines that the student is suicidal, St. Joseph's Hospital Crisis Unit will be called immediately. The SCIT Questionnaire will provide the necessary information for the St. Joseph's. If the student is not at risk for self-harm, the team may decide that a referral to a school based support program or community resource is appropriate.
  5. A designated team shall document the incident. (See Exhibits A and B).

### **LEVEL II – Written or Verbal Intent**

**Level II** – Student has voiced or written intent to engage in a suicidal act.

**As with Level I, the following steps must be taken:**

1. Staff member shall notify the building administrator or designee.
2. Administrator assembles at least 2 members of the SCIT.
3. Team members will assess the level of risk of by interviewing the student and/or interviewing the referral source and using the Suicide Questionnaire. The teams will also contact the parent and if the student is classified, the CST case manager.
4. If the team determines that the student is suicidal, St. Joseph's Crisis Unit will be called immediately. The SCIT Questionnaire will provide the necessary information for St. Joseph's. The parent/guardian will be asked to sign a Release of Records form to provide feedback to the school. If the student is not at risk for self-harm, the team may decide that a referral to a school based support program or a community resource is appropriate.
5. A designated team member shall document the incident (See SCIT INFORMATION FORM)

<p><b>THE STUDENT IS TO BE KEPT UNDER CONTINUOUS ADULT SUPERVISION AS ASSIGNED BY THE BUILDING PRINCIPAL OR HIS/HER DESIGNEE UNTIL THE INTERVIEW AND QUESTIONNAIRE HAVE BEEN COMPLETED AND THE APPROPRIATE ACTION TAKEN.</b></p>
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## **LEVEL III – Attempted Suicide**

**Level III** – Suicidal act -- any self-inflicted act with the intent to terminate one's life.

1. Staff member shall immediately notify the principal or his/her designee. The principal or his/her designee shall notify the police and call for an ambulance. The school nurse shall be called to monitor and provide first aid until the police and ambulance arrive.
2. The parent/guardian shall be notified to report the school or hospital. If the parent is not available at the time the student is transported to the hospital, a staff member must accompany the student and remain until the parent/guardian arrives.
3. If the parent/guardian is contacted and refuses to follow the recommendations for medical assistance, the administrator or designated staff member shall contact Division of Child Protection and Permanency (DCP&P).
4. If the student is not classified, the principal or his/her designee will appoint a case manager to follow-up and act as a liaison between the family and the school. The parent/guardian will be asked to sign Release of Records form to provide feedback to the school.
5. A discharge plan must be present to the school nurse for re-admittance to school.
6. The school will make every effort to work with the family and the student in identifying and providing follow-up support services upon return to school