E. EXTREMELY HIGH (IMMINENT) RISK LEVEL OF SUICIDE

Students with an extremely high risk level of suicide have voiced the intent to engage in a suicidal act, have access to the lethal means needed to carry out the act, and may have lethal means on their person. Do the following:

- **1.** Ensure that a school staff member remains with the student at all times.
- **2.** Clear the area and ensure that all other students are safe.
- 3. Alert nearest adult to recruit Crisis Response Team (CRT) member.
- **4.** Mobilize community links (e.g. Uplift Family Services and/or 911)
 - If a life threatening emergency, call 911.
 - If not life threatening, call **UFS** Suicide Assessment at 1.877-412-7474

Note: 911-responder will determine if emergency treatment or hospitalization is required and will arrange transport

- **5.** Principal or designee to notify parents about the seriousness of the situation unless this will exacerbate the situation. In certain cases, it may be necessary to wait to notify parents due to clinical circumstances as determined by Psychologist, UFS or other mental health provider.
- **6.** If the student has lethal means on their person:
 - a. Do not attempt to take a weapon by

force b. Talk with the student calmly

- c. Have someone call 911
- d. Clear area for student safety
- e. Once the student gives up the potentially lethal means, stay with the student until the CRT or 911 emergency support arrives.
- **7.** At this level of risk the student may require hospitalization.
- **8.** Case manager (school psychologist or counselor) will work with student's doctor and therapist treating the student. Frequency of check-in with the student, family, doctor and/or therapist will be determined by the individual situation.
- **9.** Before student returns to school, initiate re-entry plan.

F. PROCESS FOR RE-ENTRY TO SCHOOL AFTER EXTENDED ABSENCE OR HOSPITALIZATION

Students "need considerable support and monitoring, especially during the first several months they are back at school, during any school crisis, or near the anniversary of their attempt or mental health crisis" (SAMHSA Toolkit). It is critical to create or review the Safety Plan at the first 'return to school meeting' with the student and parents. (See Attachment 2.14, "Guidelines for Facilitating a Student's Return to School", and Attachment 2.15, "Guidelines for When a Student Returns to School Following Absence for Suicidal Behavior") A student is at increased risk of attempting suicide in the days and weeks immediately following discharge from the ER, hospital or care facility.

Important points to remember in facilitating a successful student re-entry:

- 1. Work with student, family, and relevant staff (counselor and school psychologist) to create an individualized re-entry plan (IRP) before the students return. A meeting with family and student is strongly recommended before the student returns to school.
- **2.** Ensure that the appropriate staff (school psychologist, counselor, administrator) has the pertinent information from the student's doctor, psychiatrist, psychologist or therapist necessary to create the student's IRP.
- **3.** The IRP will be based on Doctor or Mental Health Provider recommendation using Attachment 2.10, "Health and Education Plan Physician Report" to support the student's psychological and educational needs.
- **4.** Details of the student's mental health history should be shared only as needed to support the student's successful re-entry.
- **5.** A completion of Attachment 2.10, "Health and Education Plan Physician Report and Attachment 2.9, "Referral, Consent and Follow-Up Form" is strongly recommended before reentry.