

# Suicide Prevention and Intervention

Jefferson Local Schools

West Jefferson Staff Guide

Revised: 1/9/2024



# Table of Contents

## 1. Policies and Procedures

Emergency Management and Safety Plans EBC – Suicide Intervention Process

## 2. Suicide Intervention Staff Responsibilities

Staff Response to Initial Concerns of Suicide Risk

Suicide Response: Special Circumstances

Suicide Prevention / Intervention Steps Check Sheet

## 3. Screening for Suicide Risk at School

Conducting a School-Based Screening of Suicide Risk

C-SSRS Tip Sheet

Columbia Suicide Severity Rating Scale Question - Response Guide

Columbia Suicide Severity Rating Scale Screen Version -- Recent

Columbia Suicide Severity Rating Scale Pediatric/Cognitively Impaired Lifetime Recent - Clinical

Suicide Screening Report Form (SPI F1)

Parent Notification of Mental Health Emergency Form (SPI F2)

## 4. Parent Collaboration

Contacting the Parent / Guardian

Parent/Guardian Conference

Parent Consent for Records Release Form

## 5. Re-entry to School

Preparing for Re-entry to School

Student Re-entry Meeting Parent Notification Letter

Student Re-entry Team Meeting Form (SPI F3)

Student Safety Plan Procedures

Safety Plan Student Reflection Guide

Student Safety Plan / Intervention Plan (SPI F4)

Student Coping Plan

Staff Guidelines for Facilitating a Student's Return to School

Safety Plan Parent Summer Letter

## 6. Parent Resource Guide

Healthychildren.org 10 things Parents Can Do to Prevent Suicide

County Psychiatric Crisis Lines

Nationwide Children's Hospital Your Child Has Thought About Ending Their Life - What's Next

Nationwide Children's Hospital Suicide Warning Signs and How to Respond

ACT Youth Depression and Suicide Myths and Facts

Community Mental Health Professionals: Who They Are and How to Find One

Parent Book and Website Resources - Social, Emotional and Behavioral Topics

## 7. Appendix

JLSD Policy EBC/EBC-P Emergency Management and Safety Plans

JLSD Policy GBCB Staff Conduct

JLSD Policy JHF Student Safety

JLSD Policy JHG Reporting Child Abuse

JLSD Policy JM Staff and Student Relations

JLSD Policy JO-P Student Records

Suicide Prevention / Intervention Steps Check Sheet

Parent Notification of Mental Health Emergency Form (SPI F2)

Suicide Screening Report Form (SPI F1)

Parent Consent for Records Release Form

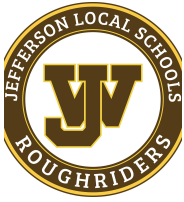
Student Safety Plan / Intervention Plan (SPI F4)

Staff Guidelines for Facilitating a Student's Return to School

Student Coping Plan

Safety Plan Parent Summer Letter

Columbia Suicide Severity Rating Scale Pediatric - Since Last Contact--Communities and Healthcare



## Jefferson Local School District Administrative Guidelines

### SUICIDE INTERVENTION PROCESS

In compliance with the Emergency Operation Plan and School Board Policy (BOE Policy EBC), any time a staff member encounters a situation in which a student appears to be contemplating suicide, the following process should be followed carefully.

A Under no circumstances is a suicidal student to be left alone.

E Keep students safe from self, others and the environment by removing weapons, objects such as pencils, scissors, or other sharp or dangerous objects

**If the student will not relinquish possession of a dangerous weapon or is in imminent danger of harming himself/herself or others**

- Contact the police.
- Keep the student engaged in conversation as well as reassuring him/her until the police arrive.
- After the police arrive, and if good rapport has been established with the student, remain present to provide continuity and support as the police attempt to get the student to relinquish the dangerous instrumentality.
- Contact the student's parents and inform them of what has transpired and of the actions being taken.

Call the office and ask for an administrator or counselor to assist, indicate you have a student in cri

**Step One - Stabilize the Situation** Either a member of the Administration, Guidance, or Crisis Response team should proceed to Step Two

#### Step Two - Assess the Risk

- A. Stay relaxed and talk calmly to the student to assess the risk of the student harming himself/herself. Listen intently to what the student is saying and avoid giving advice. Keep questions nonjudgmental.
- B. Complete the Columbia Suicide Severity Rating Scale - Screener
- C. First paragraph page 15

#### Step Three - Take Appropriate Action

- A. Take action in accordance with the results.

#### Step Four - Communicate

Inform the appropriate members of the District staff of the facts and the actions being taken. Alert them that they need to observe the District's confidentiality requirements (JO-P).

- B. Complete the Suicide Screening Report Form (SPI F1) as needed
- C. Email staff letting them know that the student was sent to community based services and can not return until reentry meeting is held.

#### Step Five - Follow-Up

- A. Determine the extent to which emergency or short-term procedures were completed.
- B. Find out if arrangements have been made for long-term clinical and/or support services.

- C If neither short-term procedures nor long-term services were properly conducted or pursued, consult with the building administration to determine appropriate action.
- D Maintain continuing contact with the student and/or family to communicate interest in his/her welfare and support of the long-term services being provided.
- E. Remain alert to the possibility of "copycat" suicide attempts by other students.

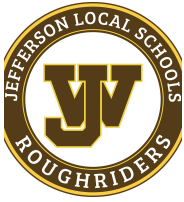
### **Re-entry Procedure**

For students returning to school after a mental health crisis, a school employed School Counselor and/or School Social Worker, Principal or designee and teachers will meet with the student's parent or guardian, and student to discuss re-entry and appropriate next steps to assess the student's readiness for and facilitate his/her return to school.

- A. Schedule a meeting to include key members from the school and treatment team, parents and the student.
- B. Require that parents provide appropriate documentation from a mental health provider stating that the student is not at imminent risk for harming him/herself or others and that it is safe for the student to return to school.
- C. Consider the need for home instruction in situations that require prolonged absence from school.
- D. During the meeting, complete the following steps:
  - a. Create the Student Safety/Intervention Plan (SPI F4)
  - b. Identify the main point of contact at school and establish a schedule for follow-up
  - c. Obtain a release of information for outside providers (if applicable)
  - d. Consider any necessary changes to the student's schedule
- E. For special education students, the IEP team should consider whether an IEP team meeting is necessary to support the needs of the student.

### **SUICIDE POSTVENTION PROCESS**

If, in spite of all intervention efforts, a suicide should occur, implement the District's Crisis Intervention Plan. If additional guidance is needed, contact Nationwide Children's Center for Suicide Prevention and Research, 614-355-0850 or Madison County Crisis Response Team (CRT) 740-852-4200.



## Staff Response to Initial Concerns of Suicide Risk

Responsibilities of staff members in response to a suicide concern differ according to staff role. This list indicates the response staff members should take in accordance with their role.

- ☐ Administration
  - ☐ Consult with guidance counselor, school social worker, or school psychologist as available
  - ☐ Contact parents and follow recommendations from response guide
  - ☐ Create follow-up plan as needed
- ☐ Teacher/Clinic Substitute/Paraprofessional
  - ☐ Contact the office; let them know you have a student in crisis and need an admin, school counselor, or school social worker
  - ☐ Do NOT leave the child alone
- ☐ Guidance Counselor, School Social Worker, School Psychologist
  - ☐ Complete Columbia Suicide Severity Rating Scale (C-SSRS)
  - ☐ Contact parents and follow recommendations from response guide
  - ☐ Create follow-up plan as needed
- ☐ School Nurse
  - ☐ Consult with guidance counselor, school social worker, or school psychologist as available
  - ☐ Complete brief screener if guidance counselor is not available
  - ☐ Contact parents and follow recommendations from response guide
  - ☐ Create follow-up plan as needed

### **With Whom Do We Collaborate?**

Administrators

School Counselors

School Social Worker

School Nurse

School Psychologist

Ohio Guidestone

\*Can always contact Franklin County Youth Psychiatric Crisis Line - 614-722-1800

## **Suicide Response: Special Circumstances**

### **After Hours**

- Call / text or chat with the National Suicide Hotline at 988 or call 911.
- If a Jefferson Local Schools employee learns of concerns involving a student's safety, he/she should immediately contact their building administrator.
- The administrator will share the information received with available counselors/mental health providers and discuss options to address the student's needs.
- An administrator or a designated staff member will contact the family to discuss the concern and the resources available to help the student.
- Contact Children's Services if there is concern that the parent is not responsive or if abuse and/or neglect is suspected.
- Law enforcement can be contacted to do a wellness check if necessary.
- Follow-up with the family within 24 hours after initial contact has been made.

### **Imminent Risk and Emergency Medical Care**

- If the parent/guardian refuses to obtain an emergency evaluation for a student who is considered to be at imminent risk for suicide, inform the parent/guardian that school staff are mandated reporters. School employees are legally required to call CPS and report the safety concern if a parent/guardian refuses to access the services that are necessary to ensure the student's safety.

### **Students Over the Age of 18**

- The safety of the student is our first priority. Intervene with adult students in the same manner which you would minors.
- If the student has been legally emancipated from the parents, we may not be able to contact parents without the student's consent.
- Law enforcement may need to be involved if there is a high risk.

### **Students with Developmental Disabilities**

- Intervene with developmentally delayed students in a similar manner as typical students
- Collaborate with the student's teacher/intervention specialist

### **Unable To Reach Parent(s) or Guardian**

- Try all emergency contacts. Maintain confidentiality.
- Ask student if there is an outside mental health professional involved. Attempt to call the counselor if we have a release of information on file.
- Contact Children Services 740-852-4770
- Contact law enforcement to discuss transporting the student for a mental health evaluation, if necessary. EMS may need to be called if it is determined that law enforcement would be unable to transport. (nonemergency number (614) 879-7672)
- Call / text or chat with the National Suicide Hotline at 988

### **Knowledge or Suspicion of Abuse/Neglect**

- Contact Children Services 740-852-4770
- Contact law enforcement (non emergency number (614) 879-7672)

### **Breaking Confidentiality**

- The FERPA Health and Safety Exception allows district employees to share information learned as long as it is believed that that information is necessary to protect the health or safety of the student.
- Please note that, whenever information is disclosed under the FERPA Health and Safety Exception, it must be documented in the student's education record. The law requires you to document (1) The articulable and significant threat to the health or safety of a student or other individuals that formed the basis for the disclosure; and (2) The parties to whom the information was disclosed.

# Suicide Prevention / Intervention Steps Check Sheet

Suicide Intervention Staff Responsibilities  
Use Suicide Response: Special Circumstances guide, if needed

## **Screening**

- ☐ Complete Columbia Suicide Severity Rating Scale C-SSRS Screen Version (pg. 10)
- ☐ Complete Parent Notification of Mental Health Emergency Form (SPI F2) (pg. 13) as appropriate
- ☐ Complete Suicide Screening Report Form (SPI F1) (pg. 12) as appropriate

## **Collaboration with Parents**

- ☐ Contact parent and initiate parent meeting
- ☐ Provide parent with the Parent Notification of Mental Health Emergency Form (SPI F2)
- ☐ Provide parent with Parent Resource Guide (pg. 22-33)

### **If student is referred for emergency assessment or works with an independent provider**

- ☐ Complete Parent Consent for Records Release Form (pg. 16)
- ☐ Send copy of the C-SSRS and the Parent Notification of Mental Health Emergency Form (SPI F2) to the hospital or provider

### **If student is removed from school**

- ☐ Provide parent/guardian with the Student Re-entry Meeting Parent Notification Letter. (pg. 12)

## **Re-entry**

### **Prior to the student's return, conduct a re-entry to school meeting**

- ☐ Complete a Student Safety Plan / Intervention Plan (SPI F4) or a Student Coping Plan. (pg. 18-20)
- ☐ If student is on an IEP or a 504 consider conducting an IEP or 504 meeting
- ☐ Send staff an email about student re-entry

## **Conducting a School-Based Screening of Suicide Risk**

The C-SSRS is a tool that can be used in addition to considering information from various sources, weighing the impact of known DSM-5 disorders and applying professional judgment. Members of the school team should discuss all the information and determine the level of risk that is most appropriate based on that information.

- Identify staff who are qualified to screen the level of risk
- Write specifics on the screening tool, Attempt to include direct quotes from the student that are significant
- Complete the Suicide Screening Report Form
- If the student is going to have an emergency evaluation done, send a copy of the Parent Notification of Mental Health Emergency form with the parent.
  - Fax the Parent Notification of Mental Health Emergency form and a copy of the C-SSR to the hospital
- Consider whether the need exists to disclose information to outside parties in order to ensure safety (ex. site of emergency evaluation, mental health professional, etc.). The FERPA Health and Safety Exception allows district employees to share information learned as long as it is believed that that information is necessary to protect the health or safety of the student. Please note, whenever information is disclosed under the FERPA Health and Safety Exception, it must be documented in the student's education record. The law requires you to document (1) The articulable and significant threat to the health or safety of a student or other individuals that formed the basis for the disclosure; and (2) The parties to whom the information was disclosed.

Completed suicide screenings and accompanying forms are filed in a confidential student file separate from the student's curriculum folder.



# COLUMBIA-SUICIDE SEVERITY RATING SCALE *Screen Version - Recent*

SUICIDE IDEATION DEFINITIONS AND PROMPTS	Past month	
Ask questions that are bolded and <u>underlined</u> .	YES	NO
<b>Ask Questions 1 and 2</b>		
<b>1) Wish to be Dead:</b> Person endorses thoughts about a wish to be dead or not alive anymore, or wish to fall asleep and not wake up. <u><b>Have you wished you were dead or wished you could go to sleep and not wake up?</b></u>		
<b>2) Suicidal Thoughts:</b> General non-specific thoughts of wanting to end one's life/die by suicide, <i>"I've thought about killing myself"</i> without general thoughts of ways to kill oneself/associated methods, intent, or plan. <u><b>Have you actually had any thoughts of killing yourself?</b></u>		
If YES to 2, ask questions 3, 4, 5, and 6. If NO to 2, go directly to question 6.		
<b>3) Suicidal Thoughts with Method (without Specific Plan or Intent to Act):</b> Person endorses thoughts of suicide and has thought of a least one method during the assessment period. This is different than a specific plan with time, place or method details worked out. <i>"I thought about taking an overdose but I never made a specific plan as to when, where or how I would actually do it....and I would never go through with it."</i> <u><b>Have you been thinking about how you might do this?</b></u>		
<b>4) Suicidal Intent (without Specific Plan):</b> Active suicidal thoughts of killing oneself and patient reports having <u>some intent to act on such thoughts</u> , as opposed to <i>"I have the thoughts but I definitely will not do anything about them."</i> <u><b>Have you had these thoughts and had some intention of acting on them?</b></u>		
<b>5) Suicide Intent with Specific Plan:</b> Thoughts of killing oneself with details of plan fully or partially worked out and person has some intent to carry it out. <u><b>Have you started to work out or worked out the details of how to kill yourself? Do you intend to carry out this plan?</b></u>		
<b>6) Suicide Behavior Question:</b> <u><b>Have you ever done anything, started to do anything, or prepared to do anything to end your life?</b></u> Examples: Collected pills, obtained a gun, gave away valuables, wrote a will or suicide note, took out pills but didn't swallow any, held a gun but changed your mind or it was grabbed from your hand, went to the roof but didn't jump; or actually took pills, tried to shoot yourself, cut yourself, tried to hang yourself, etc. If YES, ask: <u><b>Were any of these in the past 3 months?</b></u>	Lifetime	
	Past 3 Months	

- Low Risk
- Moderate Risk
- High Risk

## **Columbia Suicide Severity Rating Scale (C-SSRS)**

### **Question Response Guide**

**Response is based on the intensity of ideation. If student answered "yes" to one item: follow the actions steps associated with that item.**

**If student answered "yes" to multiple items: complete the action steps associated with the highest numbered item (items 1-5).**

**Item 1:** Develop coping plan (to be shared with immediate school team, such as teachers, counselor, clinic, administration) and contact parent to inform them of at-risk youth. Consider whether a school safety plan should be developed.

**Item 2:** Develop school safety plan (to be shared with student's school based team), contact parent, explore community mental health resources and supports with parents, consider emergency mental health care options in consultation with team.

**Item 3:** Contact parent and discuss options for parent to obtain emergency mental health care for student. Consult with Crisis Hotline. Refer to student re-entry process (including development of school safety plan) upon return to school.

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#### **Item 4, C-SSRS Screening Version**

- If student answered "yes" in **past 3 months**: Consider if emergency mental health care is needed - consult with team members, crisis line and parents. Develop safety plan (to be shared with student's school based team), contact parent, explore community mental health resources and supports with parents.
- If student answered "yes" for **lifetime**: Develop student safety (to be shared with student's school based team) and coping plan, contact parent, explore community mental health resources and supports with parents.

Complete Parent Notification of Mental Health Emergency Form (SPI F2), review with parents and obtain signature. If the form is reviewed by phone, document the time and day on the form. If emergency mental health care is recommended, provide parent/guardian with Reentry Form.

#### **Imminent Risk and Emergency Medical Care**

- If the parent/guardian refuses to obtain an emergency evaluation for a student who is considered to be at imminent risk for suicide, inform the parent/guardian that school staff are mandated reporters. School employees are legally required to call CPS and report the safety concern if a parent/guardian refuses to access the services that are necessary to ensure the student's safety.

#### **If the student's distress is the result of parental abuse, neglect, or exploitation.**

1. Notify Children's Services immediately, give them the facts, request them to intervene, and follow their instructions.
2. If Children's Services does not intervene before the end of the school day, contact the police.

#### **Communication**

Inform the appropriate members of the District staff of the facts and the actions being taken. Alert them that they need to observe the District's confidentiality requirements (JO-P).

Complete the Suicide Screening Report Form (SPI F1) as needed

Email staff letting them know that the student was sent to community based services and can not return until reentry meeting is held.



**Jefferson Local School District  
Suicide Screening Report Form**

Student Name \_\_\_\_\_ Date \_\_\_\_\_

Name of person making initial report: \_\_\_\_\_

Name and position of person handling case: \_\_\_\_\_

Student interviewed by: \_\_\_\_\_

Comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Parent or responsible person contacted: \_\_\_\_\_

(name)

Parent contact made by: \_\_\_\_\_ Date: \_\_\_\_\_

Parent contact witnessed by: \_\_\_\_\_

Follow-up taken: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Comments: \_\_\_\_\_

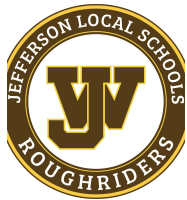
\_\_\_\_\_

\_\_\_\_\_

Other people/services called: \_\_\_\_\_

\_\_\_\_\_

**This form is to be filed in the student's confidential file separate from the student's curriculum folder.**



## Jefferson Local Schools Parent Notification of Mental Health Emergency

Date: \_\_\_\_\_

Student: \_\_\_\_\_ DOB: \_\_\_\_\_

Form Completed By: \_\_\_\_\_ Phone: \_\_\_\_\_  
(Name and Title)

The parent/guardian of the student noted above has been conferenced with and advised regarding potential risk due to harm to self or others. It has been identified through direct report from the student that the following concerns are evident:

- ☐ Thoughts of death
- ☐ Suicidal intent with specific plan
- ☐ Threat to others

In an effort to keep the student safe, the parent/guardian has been advised to proceed with the following services:

- ☐ In-school Services
- ☐ In-school School Counselor/School Social Worker
- ☐ Community Mental Health Services
- ☐ Current treating private provider: \_\_\_\_\_
- ☐ Emergency Room

The following additional information has been shared with the family:

- ☐ The school district is not financially responsible for any psychiatric/psychological evaluation or treatment provided.
- ☐ The parent/guardian has been advised of home safety and the need for supervision (student not to be left alone).
- ☐ The parent/guardian has been provided the following resources for supporting student safety:
  - ☐ Parent Resource Packet

Prior to returning to school the following will occur:

- ☐ A re-entry meeting will be held with student, parent(s)/guardian, and school support staff (including but not limited to School Counselor, School Social Worker, Teacher, Administration, School Nurse, School Psychologist)
- ☐ Parent(s)/Guardian will provide medical documentation of school absence if applicable.
- ☐ Parent(s)/Guardian are required to provide discharge summary and student created safety plan if a hospitalization has occurred.

Additional notes:

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I acknowledge that the above information was presented and reviewed.

Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Staff Signature/Position: \_\_\_\_\_ Date: \_\_\_\_\_

Phone: \_\_\_\_\_

## Contacting the Parent/Guardian

If it is determined that a student is at risk for suicide, or is expressing suicidal thoughts, the parent/guardian shall immediately be contacted. When notifying the parent/guardian regarding the potential for suicide, the following guidelines should be applied:

- Do not contact the parent/guardian if the risk for suicide is related to parent/guardian abuse or neglect. Instead, contact Children's Services and the building principal immediately.

When calling the parent/guardian, the staff member will:

1. **Identify self and position** within the school.
2. **Explain the purpose of the call**, including the warning signs and observed behavior that supports the level of concern. Express concern regarding the student's mental health status.
3. **Inform the parent/guardian that you believe the student is at risk of suicide** based on the information obtained, including the results of the C-SSRS. Discuss whether the parent/guardian is aware of the student's mental health status and inquire whether the student has received counseling in the past and/or present.
4. **Discuss** with the parent/guardian **whether there is a need for an emergency assessment** and **whether they intend to obtain an immediate evaluation/counseling** appointment for the student, if necessary.
5. If there is a need for emergency assessment, staff member will **request the presence of the parent/guardian at the school**. Parents will be notified of the situation and the team and family will discuss the appropriateness of having the parent come to the school. The team member will inform the parent/guardian that the safety of the student will be maintained until the parent/guardian arrives.
6. **The parent/guardian should be required to provide documentation to the school** pertaining to the outcome of any emergency evaluation. JLS staff may request consent for release of information for the school to directly communicate with the location where the emergency evaluation occurred and/or the outside mental health provider regarding the present signs of suicide and/or observed behaviors related to suicide. The staff member shall indicate to the parent that communication with the therapist would be helpful to ensure safety. The building administrator may require appropriate documentation from a mental health provider stating that it is safe for the student to return to school.
7. If the **parent/guardian refuses to obtain an emergency evaluation for a student** who is considered to be at risk for attempting suicide, **inform the parent/guardian that school staff are mandated reporters**. School employees are legally required to call CPS and report neglect if a parent/guardian refuses to access the services that are necessary to ensure the student's safety.
8. **Emphasize the importance of reducing potential risks** within the student's environment. It is recommended that both the home and school be secured and all guns, poisons, medications, and sharp objects be removed or made inaccessible.
9. School personnel may **ask parents if they need assistance linking** with appropriate services for counseling/evaluation resources emphasizing that all services would be at the parent/guardian's own expense. Information is included in the Parent Resource Guide.
10. **Document the details of the phone call** to the parent/guardian, including the date/time, the response from the parent/guardian, and any information pertaining to the follow-up on the Parent Notification of Mental Health Emergency form. Keep a copy of all documentation.
11. Inform the parent/guardian that a **Parent Resource Guide** is available and can be given to them at their earliest convenience.
12. **If the staff member is unable to make successful contact with at least one parent/guardian** of the student in a reasonable amount of time, **contact the building administrator**.

## Parent/Guardian Conference

When a student is at risk for suicide, the parent/guardian may be asked to come to the school to pick up the student. It is best practice for the parent/guardian to meet with an administrator or designee and the member of the team who conducted the suicide lethality assessment.

The following items may help guide the meeting with the parent/guardian:

- When appropriate, **inform the parent/guardian that the student is at risk for suicide and needs an immediate mental health evaluation at the parent/guardian's expense.**
- **Provide the parent/guardian with information** about local mental health centers at which the student may be evaluated (See Parent Resource Guide). When possible, have the parent/guardian call to make an appointment during the conference or before leaving the school. If the child is already engaged in counseling, the family is encouraged to share the contact of the provider.
- **Consider safety precautions** pertaining to **transporting the student** for an emergency evaluation. This may include having another adult passenger in the vehicle, a request that law enforcement escort the family, request for EMS, etc..
- If the student is **currently receiving therapy** for suicidal concerns, the parent/guardian is strongly encouraged to **provide a copy of the current treatment plan.**
- Require that parents provide **appropriate documentation** from a mental health provider stating that the **student is not at imminent risk for harming him/herself or others** and that it is safe for the student to return to school.
- **Provide the parent/guardian with the name and contact information of the primary contact at the school.**
- **Inform the parent/guardian** that a reentry meeting will be held prior to the student's return to school to develop the Student Safety Plan.
- **Attempt to obtain consent for release of information** from the parent/guardian in order to facilitate planning for the student's reentry into school. The release shall specify that the mental health provider (emergency evaluation and ongoing therapist) and appropriate school personnel can communicate (see release of information page in Appendix).
- In cases where **emergency treatment** will be provided **fax copy of C-SSRS and Parent Notification of Mental Health Emergency form to the hospital.**



# RELEASER OF INFORMATION

Parent / Guardian consent for release of information

I authorize this release of information between the identified parties listed below for the purpose of educational decision making or to provide information for medical decision making or other similar reasons.

Student Name: \_\_\_\_\_

Student DOB: \_\_\_\_\_

School District

Jefferson Local Schools  
906 W. Main St.  
West Jefferson, OH. 43162  
614-879-7654

Releasing Agency / Person

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

District Contact Name: \_\_\_\_\_  
District Contact Building: \_\_\_\_\_  
District Contact Phone: \_\_\_\_\_  
District Contact Fax: \_\_\_\_\_  
District Contact Email: \_\_\_\_\_

Contact Name: \_\_\_\_\_  
Contact Phone: \_\_\_\_\_  
Contact Fax: \_\_\_\_\_  
Contact Email: \_\_\_\_\_

I understand that I have the right to revoke the authorization for release of information at any time by providing written notice to both parties. I understand that the revocation is not effective to the extent that the school or releasing agency has already acted upon the authorization.

This authorization shall expire 1 calendar year from date of signature or at a specific date listed here: \_\_\_\_\_

Parent Signature: \_\_\_\_\_  
Date: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_

## **Preparing for Re-entry to School**

Helping a student prepare for re-entry to school after a crisis is a critical step in supporting his/her return. Depending on the severity of the situation, a student may be returning to class the same day or may miss one or more days of school. The Suicide Intervention Team (may be comprised of school administration, guidance counselor, school social worker, or school psychologist) along with the student and his/her family, will meet prior to the student starting back in order to develop a Student Safety Plan. This may not be necessary in lower risk cases, in which case a student Coping Plan should be developed with the student.

- Inform the parent/guardian the district will be requiring appropriate documentation from a mental health provider stating that the student is not at imminent risk for harming him/herself or others and that it is safe for the student to return to school.
- Consider the need for home instruction in situations that require prolonged absence from school.
- For special education students, the IEP/504 team should consider whether an IEP/504 team meeting is necessary to support the needs of the student.
- During the meeting, complete the following steps:
  - You may use the Team Re-Entry Meeting Form as a guide for the meeting (not required)
  - Create the Student Safety Plan
  - Identify the main point of contact at school and establish a schedule for follow-up
  - Obtain a release of information for outside providers (if applicable)
  - Consider any necessary changes to the student's schedule





## Jefferson Local Schools Student Safety/ Intervention Plan

### Student Safety Plan Procedures

- Safety plans are created in collaboration of the school, student and guardian.
- Safety plans are in place during the academic year they are developed.
- The summer notification letter must be sent to the parent at the end of the school year. This letter notifies the parent that the plan has ended and provides guidance on who should be contacted during the summer if the student participates in summer activities.
- Parent and/or guardian and student must be contacted at the start of the following school year to determine if a new safety plan should be developed.

The school safety plan is in place for the current school year and ends with the current school year. It is the parent/guardian's responsibility to notify advisors, coaches, or summer school administrators of school-sponsored summer activities, regarding the safety concerns of the student. This plan has been developed in collaboration with school, student, guardian, and community partners.

Student name: \_\_\_\_\_ ID#: \_\_\_\_\_ Date completed: \_\_\_\_\_  
\_\_\_\_\_ 504 \_\_\_\_\_ IEP \_\_\_\_\_ ELL

Student Stressors and Triggers (people, places, events, classes, etc.-edit)

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Warning signs that a crisis might be developing: What you experience when your mood starts to shift or you begin feeling extremely depressed/down/sad? (thoughts, images, situations, moods, or behaviors)

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Safety plan for school: Specific school-related guidelines:

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Include timeline for follow-up and designated person to follow-up.

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---

Coping strategies: What can you do on your own, if a crisis develops in order to keep yourself safe? (Relaxation, techniques, distractions, etc)

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---

Things that are important to me: Who are the people, places, and things that are very important to you and worth living for?

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Safe place(s) for student: \_\_\_\_\_

Places/area safety may be an issues: \_\_\_\_\_

---

People from who you can ask for help: Who can you contact that will help you during a crisis (must be over 21 years old)

1. _____	Contact Information: _____
2. _____	Contact Information: _____
3. _____	Contact Information: _____

Is there a safety plan for home?      Yes      No

All student Safety Plans terminate at the end of each school year. It is the parent/guardian’s responsibility to notify advisors, coaches, or summer school administrators of school-sponsored activities regarding the safety concerns of the student.

Please contact your student’s school guidance counselor in August to update him/her on your child’s progress.

Parent signature and date: \_\_\_\_\_

Guidance Counselor or School Social Worker signature and date: \_\_\_\_\_

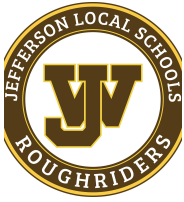
Student signature and date: \_\_\_\_\_

Principal signature and date: \_\_\_\_\_

Teacher signature and date: \_\_\_\_\_

School Psychologist signature and date: \_\_\_\_\_

Other signature and date: \_\_\_\_\_



## Student Coping Plan

(a prioritized list of strategies/supports that students can use)

**Warning Signs that I'm Stressed:** (physical signs, thoughts, images, situations, moods, or behaviors)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**Internal Coping Strategies:** What can you do on your own when you feel stressed or your mood shifts? (relaxation techniques, distractions, etc.)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**People or Places that Provide Distraction from Stressors:** Who or what places help you take your mind off your problems at least for a little while?

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**People whom you can ask for help from:** Who can you contact that will help you? (above age of 21)

Name: _____	Contact Information: _____
Name: _____	Contact Information: _____
Name: _____	Contact Information: _____

### Professionals/Agencies to Contact for Help:

**Outpatient Provider:** \_\_\_\_\_

**Emergency Services: 9-1-1**

**Crisis Hotline: NCH Psychiatric Crisis Line: 614-722-1800**

**Suicide and Crisis Lifeline: 988 (call or text)**

**Suicide Prevention Hotline: 614-221-5445**

**List two things that are very important to you:**

1. \_\_\_\_\_
2. \_\_\_\_\_

## Staff Guidelines for Facilitating a Student's Return to School

These guidelines will help staff plan for a student's return to school after a suicide attempt or mental health crisis. In addition to meeting regularly with the student, the staff member facilitating the student's return consider doing the following:

1. Become familiar with the basic information about the student, including:
  - How the student's risk status was identified.
  - What precipitated the student's high-risk status or suicide attempt?
  - What medication(s) the student is taking.
2. Serve as the school's primary link to the parents and maintain regular contact with the family.
  - Call or meet frequently with the family.
  - Facilitate referral of the family for counseling, if appropriate.
  - Re-entry meeting with the student and his or her family and relevant school staff (e.g., the school psychologist, guidance counselor, or school social worker, etc.) about what services the student will need upon returning to school.
3. Serve as liaison to other teachers and staff members, with permission of the family, regarding the student, which could involve the following:
  - Ask the student about his or her academic concerns and discuss potential options.
  - Educate teachers and other relevant staff members about warning signs of another suicide crisis.
  - Modify the student's schedule and course load to relieve stress, if necessary.
  - Arrange tutoring from peers or teachers, if necessary.
  - Work with teachers to allow makeup work to be extended or excused without penalty.
  - Monitor the student's progress.
  - Inform teachers and other relevant staff members about the possible side effects of the medication(s) being taken by the student and the procedures for notifying the appropriate staff member (e.g., the school nurse, school psychologist, guidance counselor, school social worker, etc.) if these side effects are observed. When sharing information about medical treatment, you need to comply with FERPA (The Family Educational Rights and Privacy Act) and HIPAA (which protects release of an individual's health information).
4. Follow up regarding behavioral and/or attendance problems of the student :
  - Meet with teachers to help them understand appropriate limits and consequences of behavior.
  - Discuss concerns and options with the student.
  - Consult with the student's administrator.
  - Consult with the student's mental health service provider to understand whether, for example, these behaviors could be associated with medication being taken by the student.
  - Communicate any behavior and/or attendance concerns with parents/guardians.
5. If the student is hospitalized, attempt to obtain the family's agreement to consult with the hospital staff regarding issues such as:
  - Coordinate class work assignments to be completed in the hospital or at home, as appropriate.
  - Collaborate with treatment staff to best support the student.
6. Establish a plan for periodic contact with the parent while the student is away from school.
7. If the student is unable to attend school for an extended period of time, determine how to help him or her complete course requirements and consider home instruction.

Adapted from:

[Compiled with information from DiCara, C., O'Halloran, S., Williams, L., & Canty-Brooks, C. (2009). *Youth suicide prevention, intervention & postvention guidelines*. Augusta, ME: Maine Youth Suicide Prevention Program. Retrieved from <http://www.maine.gov/suicide/docs/Guidelines%2010-2009--w%20discl.p>

# Parent Resource Guide

County Psychiatric Crisis Help Lines

Nationwide Children's Hospital Your Child Has Thought About Ending Their Life - What's Next

Community Resources

# Psychiatric Crisis Help Lines

**In an emergency call 911 or go to an Emergency Department**

Nationwide Children's Hospital Psychiatric Crisis Line: 614-722-1800 (ages 17 and under)

Netcare Access Crisis Line: 614-276-2273 (ages 18 and older)

Mental Health And Recovery Board of Clark, Greene, & Madison Counties  
1055 East High Street  
Springfield, OH 45505  
**Crisis Line: 740-852-6256**  
Web site: [mhrb.org/](http://mhrb.org/)

Mental Health Services for Clark and Madison Counties, Inc.  
210 N. Main Street  
London, OH 43140  
Crisis Hotline: 937-399-9500  
Web site: <https://mhsc.org/>

Suicide Crisis Hotline: 988 (Call or Text)

Suicide Prevention Hotline: 614-221-5445

# Your Child Has Thought About Ending Their Life – What’s Next?

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If you learn your child has been thinking of suicide, you may feel shocked, numb, afraid or confused. You may think to yourself, “How can I help my child?” and “How do I keep my child safe?”

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**Here are some things to remember during this stressful time:**

**You are not alone.**

- o About 17 percent of high school students report having seriously considered suicide in the past year. Twelve percent of children age 6 to 12 have thoughts about suicide.

**Thinking about suicide does not mean that you or your child has done anything wrong.**

- o Thoughts of suicide are often related to illnesses such as depression and anxiety. These can improve with mental health treatment.

**Check in regularly with your child and ask directly about suicidal thoughts. Listening to your child (even if you do nothing else) is the best way to increase their comfort in expressing upsetting thoughts and feelings.**

- o Discuss changes that you have noticed and why it concerns you.
- o Ask your child directly, “Have you been thinking about killing yourself?”
- o Do not try to “solve” your child’s issues. Show compassion and support.
- o Let them know that you will be there for them. Give them time to manage intensely painful emotions.

**Try to stay calm. Getting support from a mental health professional can help your child. It can give you a sense of hope.**

**Work with mental health professionals to develop a safety plan. Some important pieces of a safety plan:**

- o Your child should have a list of trusted adults to contact for when they are in crisis.
- o Keep crisis hotline and text line numbers in easy to find places (e.g., phone, refrigerator).
- o Prompt your child to practice coping skills.

- o Lock up or remove items in your home that could prove deadly, especially if your child has considered them as a way to end their life. This includes prescription and over-the-counter medicines, alcohol, cleaning supplies, sharp objects, belts, cords, ropes, and especially, guns and bullets.
- o In a crisis, constant, direct supervision of your child may be needed to keep them safe.
- o Consider using phone apps and other technology to make safety plans easy to access. Safety plans should be shared with trusted adults and updated if risk factors change.

**You are in charge of who receives or shares your child’s medical information.**

- o Think about letting a small group of supportive adults across different settings share information by signing releases of information.
- o This group of supportive adults may include teachers, school counselors, mental health therapists, doctors and family members.

**• If you have depression or anxiety yourself, be aware that your child’s mental health concerns may raise your level of distress. If your child thinks about suicide often, it is common to become frustrated and feel worn out. You may find it harder to be supportive and patient.**

- o It can be helpful for parents to get counseling for themselves to manage difficult emotions and to be in a position to provide effective care.
- o You do not have to go through this alone.
- o All thoughts of suicide, statements about death or dying, or behaviors taken to injure oneself or to end one’s life should be taken seriously.

**Here are some additional helpful resources:**

- o The Center for Suicide Prevention and Research website includes tips and blogs that support caregivers: **NationwideChildrens.org/Suicide-Research**
- o Franklin County Crisis Hotline for youth (under 18): (614) 722-1800
- o Crisis text support: Text “4HOPE” to 741-741
- o Helpful suicide prevention and safety planning apps: MY3, Mood Tools





# Community Counseling Resources

Please note these are community resources families in the district have used over the years. The school or district does not endorse any particular person or practice.

Contacting your insurance for a list of covered providers in your area is recommended

## **Darby Creek Counseling**

1375 US Hwy 42 London, OH 43140  
740-845-8652  
[www.counselingandneurotherapy.com](http://www.counselingandneurotherapy.com)

## **Columbus Springs Dublin – Changes Outpatient Program**

6810 Perimeter West, Suite 100B Dublin, Ohio 43016  
614-379-3878  
[www.columbussprings.com](http://www.columbussprings.com)

## **Chrysalis Health Ohio**

5250 Strawberry Farms Blvd Columbus, Oh 43230  
1-800-691-6113  
[www.chrysalishealthohio.com](http://www.chrysalishealthohio.com)

## **Rocking Horse Community Health Center**

Behavioral/Therapeutic Services  
651 S. Limestone St. Springfield, OH 45505 - SOUTH ENTRANCE  
937-324-1111 ext. 162 for appointments  
[www.rockinghorsecenter.org](http://www.rockinghorsecenter.org)

## **Mental Health Services for Clark and Madison Counties, Inc.**

210 N. Main Street London, OH 43140  
740-852-6256  
<https://mhscc.org>

## **Buckeye Ranch**

2865 W. Broad Street Columbus, Ohio 43204  
(614) 875-2371  
[www.buckeyeranch.org](http://www.buckeyeranch.org)

## **Nationwide Children's Hospital Big Lots Behavioral Health Pavilion**

444 Butterfly Gardens Drive  
Columbus, OH 43215  
(614) 722-2000  
[www.nationwidechildrens.org](http://www.nationwidechildrens.org)

If you need any assistance accessing resources, please contact:

Jessica Thompson School Social Worker at 614-879-7642 ext. 4302 or [Jthompson@westjeff.org](mailto:Jthompson@westjeff.org)

## **Syntero**

299 Cramer Creek Court  
Dublin, OH 43017  
614-889-5722 x 133  
[www.syntero.org](http://www.syntero.org)

## **Nemeth Counseling and Consultation LLC**

5123 Norwich St.  
Hilliard, Ohio 43026  
614-849-8204

## **Bluestone Counseling**

4937 West Broad Street  
Columbus, OH 43228  
614-406-0299  
[www.bluestonecounseling.com](http://www.bluestonecounseling.com)

## **Providers for Healthy Living**

3535 Fishinger Blvd. Suite 110  
Hilliard, OH 43026  
614-664-3595  
[www.providersforhealthyliving.com](http://www.providersforhealthyliving.com)

## **Ohio Guidestone**

195 N. Grant Ave suite 250  
Columbus, Oh 43215  
1-800-639-4974  
[www.ohioguidestone.org](http://www.ohioguidestone.org)

## **Franklin County Psychiatric Crisis Line for Youth and Adolescents**

614-722-1800 (ages 17 and under)

## **National Suicide Prevention Lifeline**

1-800-273-8255

## **National Suicide Crisis Hotline:**

988 (call or text)

## **HandsOn Central Ohio**

211  
<http://www.211centralohio.org>  
<http://www.uwccmc.org/2-1-1>

# Appendix

JLSD Policy EBC/EBC-P Emergency Management and Safety Plans  
JLSD Policy GBCB Staff Conduct  
JLSD Policy JHF Student Safety  
JLSD Policy JHG Reporting Child Abuse  
JLSD Policy JM Staff and Student Relations  
JLSD Policy JO-P Student Records  
Suicide Prevention / Intervention Steps Check Sheet  
Parent Notification of Mental Health Emergency Form (SPI F2)  
Suicide Screening Report Form (SPI F1)  
Parent Consent for Records Release Form  
Student Safety Plan / Intervention Plan (SPI F4)  
Staff Guidelines for Facilitating a Student's Return to School  
Student Coping Plan  
Safety Plan Parent Summer Letter  
Columbia Suicide Severity Rating Scale Pediatric - Since Last Contact--Communities and Healthcare

## **EMERGENCY MANAGEMENT AND SAFETY PLANS   File: EBC**

The Board acknowledges that the safety and well-being of students and staff are high priorities. Although emergencies cannot be predicted, effective prevention and management strategies are used to minimize the effects of emergency situations arising in the District.

An emergency is defined as an event that threatens the actual safety and security of students, employees or visitors of the District or whose impact threatens the feeling of safety and security, both of which are detrimental to a positive learning environment. Emergencies include, but are not limited to, fire, natural disasters, medical emergencies, industrial accidents, suicide, death of a student or employee, acts of violence, trauma and terrorism.

### **Comprehensive Emergency Management and School Safety Plans and Drills**

The Board directs the Superintendent/designee to prepare emergency/safety plans for use by staff and students. The plans are posted in each classroom and other areas accessible to staff and students.

The comprehensive emergency management plan sets a protocol for addressing and responding to serious threats to the safety of the school property, students, staff, volunteers and visitors. Each protocol includes procedures deemed appropriate by the Board or governing authority for responding to threats and emergency events including, but not limited to, notification of appropriate law enforcement personnel, calling upon specified emergency response personnel for assistance and informing parents of affected students.

State law determines the type and number of drills the District must conduct in order to adequately prepare staff and students for emergency situations. Drills provide both students and staff with practice in responding to emergency conditions should such conditions occur.

A copy of each school building's current comprehensive emergency management plan and blueprint is filed with the Ohio Department of Education, the law enforcement agency that has jurisdiction over the school building and, upon request, the fire department and emergency medical service organization that serves the political subdivision in which the school building is located. The floor plan is used solely by first responders responding to an emergency in the building and is not a public record.

The administration reviews the plan annually, considering the most current information dealing with the subjects, as well as making relevant information about the plan known to the community. When the comprehensive emergency management plan is used, assessment of the way the emergency was handled is completed by the Board and the administration. Suggestions for improvement, if necessary, are solicited from all stakeholders.

Although the plan is reviewed annually, State law requires the District's comprehensive emergency management plan to be updated every three years and whenever a major modification to an individual school building requires changes in that building's procedures or whenever information on the emergency contact information sheet changes.

[Adoption date: August 18, 1986]

[Re-adoption date: September 16, 1996]

[Re-adoption date: June 19, 2000]

[Re-adoption date: July 23, 2007]

[Re-adoption date: November 13, 2017]

LEGAL REFS.: ORC [149.433](#)  
[2305.235](#)  
[2923.11](#)  
[3301.56](#)  
[3313.20](#); [3313.536](#); [3313.717](#); [3313.719](#)  
[3314.03](#); [3314.16](#)  
[3701.85](#)  
[3737.73](#); [3737.99](#)  
OAC [3301-35-06](#)

CROSS REFS.: [EBAA](#), Reporting of Hazards  
[EBBA](#), First Aid  
[EBBC](#), Bloodborne Pathogens  
[ECA](#), Buildings and Grounds Security  
[EEAC](#), School Bus Safety Program  
[EF](#), Food Services Management  
[EFB](#), Free and Reduced-Price Food Services  
[EFH](#), Food Allergies  
[GBE](#), Staff Health and Safety  
[JHCD](#), Administering Medicines to Students  
[JHE](#), Student Safety  
[KBCA](#), News Releases  
[KK](#), Visitors to the Schools  
Emergency Management and Safety Plans Handbook

## **EMERGENCY MANAGEMENT AND SAFETY PLANS   File: EBC-P**

### **(Administrative Rules/Protocols)**

The Board directs the Superintendent/designee to prepare and maintain comprehensive emergency management and safety plans and administrative rules/protocols regarding the topics listed below. The rules/protocols are kept in the central office in a secure location.

#### **Administrative Rules/Protocols**

1. A list of dangerous or recalled products.
2. Radon rules or protocols including evidence that each school has been built radon resistant or has been tested for radon within the past five years.
3. An asbestos management plan including evidence of inspection for asbestos within three years, evidence of periodic surveillance within the past six months and a copy of the yearly written notice to the public referencing asbestos inspection and the availability of the asbestos management plan for review.
4. A schoolwide safety or crisis management plan, which provides a protocol for responding to any emergency events and a protocol providing for immediate notification to the appropriate fire department and board of health in the event of any spill or release of a hazardous substance on school grounds.
5. Guidance regarding bloodborne pathogen risk reduction.
6. Procedures for administering medications to students.
7. A written comprehensive safety plan addressing:
  - A. safety management accountabilities and strategies;
  - B. safe work practices;
  - C. accident analysis procedures;
  - D. job safety analysis procedures;
  - E. safety committees and employee involvement strategies;
  - F. employee safety and health training;
  - G. treatment of sick or injured workers;
  - H. safety and health hazard audits;
  - I. ergonomics;
  - J. transportation safety;
  - K. identification and control of physical hazards;
  - L. substance abuse;
  - M. school violence prevention and
  - N. personal protective equipment.

8. A written chemical hygiene plan, which sets forth procedures, equipment, personal protective equipment and work practices that are capable of protecting employees and students from the health hazards of chemicals in the school.
9. Safety data sheets for every hazardous chemical used in each school building or on the school grounds for cleaning, maintenance or instruction. (These must be kept where the chemicals are stored in addition to the main office of each building.)
10. Protocols on staff and student hand washing.
11. No-smoking signs.
12. The District's integrated pest management policy.
13. Protocols for using automated external defibrillators (AEDs).
14. Protocols for responding to in-school crises, including student crime, suicide, death of a student or employee, acts of violence (including bomb threats and school intruders), trauma, accidents and/or terrorism.
15. Protocols for the management of students with life-threatening allergies.

(Approval date: November 13, 2017)

## **STAFF CONDUCT     File: GBCB**

All staff members have a responsibility to make themselves familiar with, and to abide by, the laws of the state of Ohio and the negotiated agreement, the policies of the Board and the administrative procedures designed to implement them.

The Board expects staff members to conduct themselves in a manner that not only reflects credit to the District, but also presents a model worthy of emulation by students. Unless otherwise permitted by law, staff members are not permitted to bring a deadly weapon or dangerous ordnance into a school safety zone.

All staff members are expected to carry out their assigned responsibilities. Essential to the success of ongoing operations and the instructional program are the following specific responsibilities, which are required of all personnel:

1. faithfulness and promptness in attendance at work;
2. support and enforcement of policies of the Board and procedures of the administration;
3. diligence in submitting required reports promptly at the times specified;
4. care and protection of District property and
5. concern and attention toward their own and the District's legal responsibility for the safety and welfare of students, including the need to ensure that students are under supervision at all times.

[Adoption date: August 18, 1986]

[Re-adoption date: September 16, 1996]

[Re-adoption date: June 19, 2000]

[Re-adoption date: July 23, 2007]

[Re-adoption date: November 13, 2017]

LEGAL REFS.: Gun-Free Schools Act; 20 USC 7151  
Gun-Free School Zones Act; 18 USC 922  
ORC [124.34](#)

[2923.1210](#); 2923.1212; [2923.122](#)  
[3319.081](#); [3319.16](#); [3319.31](#); [3319.36](#)

CROSS REFS.: [GBCA](#), Staff Conflict of Interest  
[GBCC](#), Staff Dress and Grooming  
[GBH](#), Staff-Student Relations (Also [JM](#))  
[JFC](#), Student Conduct (Zero Tolerance)  
[JHF](#), Student Safety  
[KGB](#), Public Conduct on District Property

## **STUDENT SAFETY File: JHF**

The Board believes that students have the right to be protected in all facets of the education program and directs the Superintendent/designee to develop and maintain a safety instruction program for all students. Safety instruction in the District includes:

1. establishing appropriate safety rules;
2. learning how to practice safety and prevent accidents;
3. learning how to safely use and properly care for tools and equipment so as to reduce the potential for accidents;
4. developing habits of good housekeeping, proper storage and handling of materials, and sanitation;
5. becoming familiar with personal protection devices and the proper clothing to be worn for safety purposes;
6. learning how to cooperate with others in the promotion and operation of a safety program in the schools, on school grounds and in school vehicles;
7. instructing students not to accept gifts or automobile rides from strangers. Students are also instructed to tell staff members, parents or law enforcement officials of any suspicious strangers in or around school property;
8. providing instruction in personal safety and assault prevention in grades kindergarten through 6. Upon the written request of a parent, a student shall be excused from such instruction and
9. providing age-appropriate instruction in dating violence prevention in grades 7-12.

In an attempt to further ensure student safety, staff members:

1. shall not send students on errands that would require the student to leave school property and/or drive a vehicle;
2. shall not attempt to diagnose or treat a student's personal problem relating to sexual behavior, substance abuse, mental or physical health and/or family relationships but, instead, should refer the student to the appropriate individual or agency for assistance;
3. shall not disclose information concerning a student, other than directory information, to any person not authorized to receive such information. This includes, but is not limited to, information concerning assessments, ability scores, grades, behavior, mental or physical health and/or family background and
4. shall immediately report any suspected signs of child abuse or neglect.

In addition to instruction in safety, buildings are inspected annually to detect and remedy health and safety hazards. Staff members shall immediately report to the building administrator any accident or safety hazard he/she detects. The Superintendent is authorized and directed to develop appropriate means for the implementation of this policy.

[Adoption date: August 18, 1986]

[Re-adoption date: September 16, 1996]

[Re-adoption date: June 19, 2000]

[Re-adoption date: July 23, 2007]

[Re-adoption date: November 13, 2017]

LEGAL REFS.: ORC [3313.60](#); [3313.643](#); [3313.96](#)

[3737.73](#)

OAC [3301-35-06](#)



CROSS REFS.: [AFI](#), Evaluation of Educational Resources  
[EB](#), Safety Program  
[GBH](#), Staff-Student Relations (Also [JM](#))  
[IGAE](#), Health Education  
[JEE](#), Student Attendance Accounting (Missing and Absent Children)  
[JFCF](#), Hazing and Bullying (Harassment, Intimidation and Dating Violence)  
[JFCH](#), Alcohol Use by Students  
[JFCI](#), Student Drug Abuse  
[JHG](#), Reporting Child Abuse  
[JHH](#), Notification About Sex Offenders  
[JO](#), Student Records

## **REPORTING CHILD ABUSE**

**File: JHG**

All employees of the District who know or have reasonable cause to suspect that a child under 18 years of age or a disabled child under 21 years of age has suffered, is suffering or faces a threat of suffering any type of abuse or neglect are required to immediately report such information to the public children services agency or the local law enforcement agency.

To ensure prompt reports, procedures for reporting are made known to the school staff. A person who participates in making such reports is immune from any civil or criminal liability, provided the report is made in good faith.

The Board directs the Superintendent/designee to develop a program of in-service training in child abuse prevention for all school nurses, teachers, counselors, school psychologists and administrators. This program is developed in consultation with public or private agencies or persons involved in child abuse prevention or intervention programs.

Each person employed by the Board to work as a school nurse, teacher, counselor, school psychologist or administrator shall complete at least four hours of in-service training in the prevention of child abuse, violence and substance abuse, school safety and the promotion of positive youth development within two years of commencing employment with the District, and every five years thereafter.

In addition, middle and high school employees who work as teachers, counselors, nurses, school psychologists and administrators must receive training in dating violence prevention. The curriculum for training in dating violence prevention is developed by the Superintendent/designee and training must occur within two years of commencing employment and every five years thereafter.

Conversely, public children services agencies must notify the Superintendent of any allegations of child abuse and neglect reported to them involving the District, as well as the disposition of the investigation.

[Adoption date: August 18, 1986]  
[Re-adoption date: September 16, 1996]  
[Re-adoption date: June 19, 2000]  
[Re-adoption date: July 23, 2007]  
[Re-adoption date: November 13, 2017]

LEGAL REFS.: ORC [2151.011](#); [2151.421](#)  
[3313.662](#); [3313.666](#)  
[3319.073](#)

CROSS REFS.: [EB](#), Safety Program  
[EBC](#), Emergency Management and Safety Plans  
[IGAE](#), Health Education  
[JFCF](#), Hazing and Bullying (Harassment, Intimidation and Dating Violence)

## **STAFF-STUDENT RELATIONS**

**File: JM**

The relationship between the District's staff and students must be one of cooperation, understanding and mutual respect. Staff members have a responsibility to provide an atmosphere conducive to learning and to motivate each student to perform to his/her capacity.

Staff members should strive to secure individual and group discipline, and should be treated with respect by students at all times. By the same token, staff members should extend to students the same respect and courtesy that they, as staff members, have a right to demand.

Although it is desired that staff members have a sincere interest in students as individuals, partiality and the appearance of impropriety must be avoided. Excessive informal and/or social involvement with students is prohibited. Such conduct is not compatible with professional ethics and, as such, will not be tolerated.

Staff members are expected to use good judgment in their relationships with students both inside and outside of the school context including, but not limited to, the following guidelines.

1. Staff members shall not make derogatory comments to students regarding the school, its staff and/or other students.
2. The exchange of purchased gifts between staff members and students is discouraged.
3. Staff-sponsored parties at which students are in attendance, unless they are a part of the school's extracurricular program and are properly supervised, are prohibited.
4. Staff members shall not fraternize, written or verbally, with students except on matters that pertain to school-related issues.
5. Staff members shall not associate with students at any time in any situation or activity that could be considered sexually suggestive or involve the presence or use of tobacco, alcohol or drugs.
6. Dating between staff members and students is prohibited.
7. Staff members shall not use insults or sarcasm against students as a method of forcing compliance with requirements or expectations.
8. Staff members shall maintain a reasonable standard of care for the supervision, control and protection of students commensurate with their assigned duties and responsibilities.
9. Staff members shall not send students on personal errands.
10. Staff members shall, pursuant to law and Board policy, immediately report any suspected signs of child abuse or neglect.
11. Staff members shall not attempt to diagnose or treat a student's personal problem relating to sexual behavior, substance abuse, mental or physical health and/or family relationships but, instead, should refer the student to the appropriate individual or agency for assistance.
12. Staff members shall not disclose information concerning a student, other than directory information, to any person not authorized to receive such information. This includes, but is not limited to, information concerning assessments, ability scores, grades, behavior, mental or physical health and/or family background.

## Social Networking Websites

1. District staff who have a presence on social networking websites are prohibited from posting data, documents, photographs or inappropriate information on any website that might result in a disruption of classroom activity. The Superintendent/designee has full discretion in determining when a disruption of classroom activity has occurred.
2. District staff is prohibited from providing personal social networking website passwords to students.
3. Fraternization between District staff and students via the Internet, personal email accounts, personal social networking websites and other modes of virtual technology is also prohibited.
4. Access of personal social networking websites during school hours is prohibited.

Violation of the prohibitions listed above will result in staff and/or student discipline in accordance with State law, Board policies and procedures, the staff and student codes of conduct and handbooks and/or staff negotiated agreements. Nothing in this policy prohibits District staff and students from the use of education websites and/or use of social networking websites created for curricular, co curricular or extracurricular purposes.

[Adoption date: July 23, 2007]

[Re-adoption date: November 13, 2017]

LEGAL REF.: ORC [3313.20](#)

CROSS REFS.: [GBCA](#), Staff Conflict of Interest  
[GBCB](#), Staff Conduct  
[GBI](#), Staff Gifts and Solicitations  
[IIBH](#), District Websites  
[JFC](#), Student Conduct (Zero Tolerance)  
[JG](#), Student Discipline  
[JHF](#), Student Safety  
[JHG](#), Reporting Child Abuse  
[JL](#), Student Gifts and Solicitations  
[JO](#), Student Records  
[KBA](#), Public's Right to Know  
Staff Handbooks  
Student Handbooks

CONTRACT REFS.: Teachers' Negotiated Agreement  
Classified Staff Negotiated Agreement

## USE OF STUDENT EDUCATION RECORDS

**File: JO-P**

To carry out their responsibilities, school officials have access to student education records for legitimate educational purposes. The District uses the following criteria to determine who are school officials. An official is a person:

1. duly elected to the Board;
2. certificated by the state and appointed by the Board to an administrative or supervisory position;
3. certificated by the state and under contract to the Board as an instructor;

4. employed by the Board as a temporary substitute for administrative, supervisory or teaching personnel for the period of his/her performance as a substitute;
5. employed by, or under contract to, the Board to perform a special task such as a secretary, a treasurer, Board attorney or auditor for the period of his/her performance as an employee or contractor or
6. a contractor, consultant, volunteer or other party to whom an agency or institution has outsourced institutional services or functions may be considered a school official provided that the outside party:
  - A. performs an institutional service or function for which the District would otherwise use employees;
  - B. is under the direct control of the District with respect to the use and maintenance of education records and
  - C. abides by the legal requirements governing the use and redisclosure of personally identifiable information from education records.

School officials who meet the criteria listed above have access to a student's records if they have a legitimate educational interest in those records. A "legitimate educational interest" is the person's need to know in order to perform:

1. an administrative task required in the school employee's position description approved by the Board;
2. a supervisory or instructional task directly related to the student's education or
3. a service or benefit for the student or the student's family such as health care, counseling, student job placement or student financial aid.

NOTE: The District must use reasonable methods to ensure that school officials obtain access to only those education records in which they have legitimate educational interests. A district that does not use physical or technological access controls to records must ensure that its administrative policy for controlling access to education records is effective and that it remains in compliance with the legitimate educational interest requirement.

The District releases information from or permits access to a student's education records only with a parent's or an eligible student's prior written consent, except that the Superintendent or a person designated in writing by the Superintendent may permit disclosure under the following conditions:

1. when students seek or intend to enroll in another school district or a postsecondary school. The District makes reasonable attempts to notify the parent or eligible student at their last known address unless the disclosure is initiated by the parent or eligible student or unless the District's annual notification includes notice that the District forwards education records to other education entities that request records in connection with a student's transfer or enrollment. Upon request, the District provides copies of the records and an opportunity for a hearing (upon the condition that the student's parents be notified of the transfer, receive a copy of the record and have an opportunity for a hearing to challenge the content of the record);
2. when certain federal and state officials need information in order to audit or enforce legal conditions related to federally supported education programs in the District;
3. when parties who provide, or may provide, financial aid for which a student has applied or received, need the information to:
  - A. establish the student's eligibility for the aid;
  - B. determine the amount of financial aid;
  - C. establish the conditions for the receipt of the financial aid or

- D. enforce the agreement between the provider and the receiver of financial aid;
4. if a State law adopted before November 19, 1974, required certain specific items of information to be disclosed in personally identifiable form from student records to state or local officials;
  5. when the District has entered into a written agreement or contract for an organization to conduct studies on the District's behalf to develop tests, administer student aid or improve instruction;
  6. when accrediting organizations need those records to carry out their accrediting functions;
  7. when parents of eligible students claim the student as a dependent;
  8. when it is necessary to comply with a judicial order or lawfully issued subpoena; the District makes a reasonable effort to notify the student's parent(s) or the eligible student before making a disclosure under this provision, except when a parent is party to a court proceeding involving child abuse or neglect or dependency, and the order is issued in the context of that proceeding;
  9. if the disclosure is an item of directory information and the student's parent(s) or the eligible student has not refused to allow the District to designate that item as directory information for that student;
  10. the disclosure is in connection with a health and safety emergency;
  11. the disclosure concerns sex offenders and other individuals required to register under section 170101 of the Violent Crime Control and Law Enforcement Act of 1994, 42 U.S.C. 14071, and the information was provided to the educational agency or institution under 42 U.S.C. 14071 and applicable federal guidelines and
  12. to an agency caseworker or other representative of a state or local child welfare agency when the agency is legally responsible for the care and protection of the child. Information obtained will not be disclosed by the agency to any other agency or individual, unless they are engaged in addressing the education needs of the child and authorized by the agency to have access and the disclosure is consistent with the State laws applicable to protecting the confidentiality of the student's education records.

The District discloses personally identifiable information from an education record to appropriate parties, including parents, in connection with an emergency if knowledge of the information is necessary to protect the health or safety of the student or other individuals.

When deciding whether to release personally identifiable information in a health or safety emergency, the District may take into account the totality of the circumstances pertaining to a threat to the health or safety of a student or other individuals. If the District determines that there is an articulable and significant threat to the health or safety of a student or other individuals, it may disclose information from education records to any person whose knowledge of the information is necessary to protect the health or safety of the student or other individuals.

The District records the following information when it discloses personally identifiable information from education records under the health or safety emergency exception:

1. the articulable and significant threat to the health or safety of a student or other individuals that formed the basis for the disclosure and
2. parties to whom the District disclosed the information.

The District is required to permit the Ohio Department of Education (ODE) to have access to personally identifiable information about a student if ODE needs the information to:

1. notify the District or school attended in the District of threats or descriptions of harm included in the student's response to an achievement test question;
2. verify the accuracy of the student's achievement test score or

3. determine whether the student satisfies the alternative conditions for a high school diploma.

District officials may release information from a student's education records if the student's parent(s) or the eligible student gives his/her prior written consent for the disclosure. The written consent must include at least:

1. a specification of the records to be released;
2. the reasons for the disclosure;
3. the person or the organization or the class of persons or organizations to whom the disclosure is to be made;
4. the parent(s) or student's signature and
5. the date of the consent and, if appropriate, a date when the consent is to be terminated.

The District uses reasonable methods to identify and authenticate the identity of parents, students, school officials and any other parties to whom the agency or institution discloses personally identifiable information from education records. The student's parent(s) or the eligible student may obtain a copy of any records disclosed under this provision.

The District does not release information contained in a student's education records, except directory information, to any third parties, except its own officials, unless those parties agree that the information is not redisclosed, without the parent(s)' or eligible student's prior written consent.



## **Suicide Prevention / Intervention Steps Check Sheet**

Suicide Intervention Staff Responsibilities  
Use Suicide Response: Special Circumstances guide, if needed

### **Screening**

- ☐ Complete Columbia Suicide Severity Rating Scale C-SSRS Screen Version (pg. 10)
- ☐ Complete Parent Notification of Mental Health Emergency Form (SPI F2) (pg. 13) as appropriate
- ☐ Complete Suicide Screening Report Form (SPI F1) (pg. 12) as appropriate

### **Collaboration with Parents**

- ☐ Contact parent and initiate parent meeting
- ☐ Provide parent with the Parent Notification of Mental Health Emergency Form (SPI F2)
- ☐ Provide parent with Parent Resource Guide (pg. 22-33)

#### **If student is referred for emergency assessment or works with an independent provider**

- ☐ Complete Parent Consent for Records Release Form (pg. 16)
- ☐ Send copy of the C-SSRS and the Parent Notification of Mental Health Emergency Form (SPI F2) to the hospital or provider

#### **If student is removed from school**

- ☐ Provide parent/guardian with the Student Re-entry Meeting Parent Notification Letter. (pg. 12)

### **Re-entry**

#### **Prior to the student's return, conduct a re-entry to school meeting**

- ☐ Complete a Student Safety Plan / Intervention Plan (SPI F4) or a Student Coping Plan. (pg. 18-20)
- ☐ If student is on an IEP or a 504 consider conducting an IEP or 504 meeting
- ☐ Send staff an email about student re-entry



## Jefferson Local Schools Parent Notification of Mental Health Emergency

Date: \_\_\_\_\_

Student: \_\_\_\_\_ DOB: \_\_\_\_\_

Form Completed By: \_\_\_\_\_ Phone: \_\_\_\_\_  
(Name and Title)

The parent/guardian of the student noted above has been conferenced with and advised regarding potential risk due to harm to self or others. It has been identified through direct report from the student that the following concerns are evident:

- ☐ Thoughts of death
- ☐ Suicidal intent with specific plan
- ☐ Threat to others

In an effort to keep the student safe, the parent/guardian has been advised to proceed with the following services:

- ☐ In-school Services
- ☐ In-school School Counselor/School Social Worker
- ☐ Community Mental Health Services
- ☐ Current treating private provider: \_\_\_\_\_
- ☐ Emergency Room

The following additional information has been shared with the family:

- ☐ The school district is not financially responsible for any psychiatric/psychological evaluation or treatment provided.
- ☐ The parent/guardian has been advised of home safety and the need for supervision (student not to be left alone).
- ☐ The parent/guardian has been provided the following resources for supporting student safety:
  - ☐ Parent Resource Packet

Prior to returning to school the following will occur:

- ☐ A re-entry meeting will be held with student, parent(s)/guardian, and school support staff (including but not limited to School Counselor, School Social Worker, Teacher, Administration, School Nurse, School Psychologist)
- ☐ Parent(s)/Guardian will provide medical documentation of school absence if applicable.
- ☐ Parent(s)/Guardian are required to provide discharge summary and student created safety plan if a hospitalization has occurred.

Additional notes:

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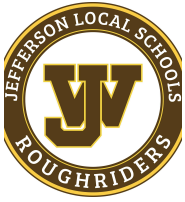
I acknowledge that the above information was presented and reviewed.

Parent/Guardian: \_\_\_\_\_ Date: \_\_\_\_\_

Staff Signature/Position: \_\_\_\_\_ Date: \_\_\_\_\_

Phone: \_\_\_\_\_





# RELEASER OF INFORMATION

Parent / Guardian consent for release of information

I authorize this release of information between the identified parties listed below for the purpose of educational decision making or to provide information for medical decision making or other similar reasons.

Student Name: \_\_\_\_\_

Student DOB: \_\_\_\_\_

School District

Jefferson Local Schools  
906 W. Main St.  
West Jefferson, OH. 43162  
614-879-7654

Releasing Agency / Person

Address: \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

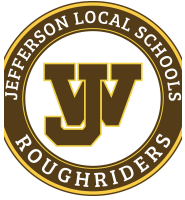
District Contact Name: \_\_\_\_\_  
District Contact Building: \_\_\_\_\_  
District Contact Phone: \_\_\_\_\_  
District Contact Fax: \_\_\_\_\_  
District Contact Email: \_\_\_\_\_

Contact Name: \_\_\_\_\_  
Contact Phone: \_\_\_\_\_  
Contact Fax: \_\_\_\_\_  
Contact Email: \_\_\_\_\_

I understand that I have the right to revoke the authorization for release of information at any time by providing written notice to both parties. I understand that the revocation is not effective to the extent that the school or releasing agency has already acted upon the authorization.

This authorization shall expire 1 calendar year from date of signature or at a specific date listed here: \_\_\_\_\_

Parent Signature: \_\_\_\_\_  
Date: \_\_\_\_\_  
Address: \_\_\_\_\_  
Phone: \_\_\_\_\_



## Jefferson Local Schools Student Safety/ Intervention Plan

### Student Safety Plan Procedures

- Safety plans are created in collaboration of the school, student and guardian.
- Safety plans are in place during the academic year they are developed.
- The summer notification letter must be sent to the parent at the end of the school year. This letter notifies the parent that the plan has ended and provides guidance on who should be contacted during the summer if the student participates in summer activities.
- Parent and/or guardian and student must be contacted at the start of the following school year to determine if a new safety plan should be developed.

The school safety plan is in place for the current school year and ends with the current school year. It is the parent/guardian's responsibility to notify advisors, coaches, or summer school administrators of school-sponsored summer activities, regarding the safety concerns of the student. This plan has been developed in collaboration with school, student, guardian, and community partners.

Student name: \_\_\_\_\_ ID#: \_\_\_\_\_ Date completed: \_\_\_\_\_

\_\_\_\_\_ 504 \_\_\_\_\_ IEP \_\_\_\_\_ ELL

Student Stressors and Triggers (people, places, events, classes, etc.-edit)

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Warning signs that a crisis might be developing: What you experience when your mood starts to shift or you begin feeling extremely depressed/down/sad? (thoughts, images, situations, moods, or behaviors)

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Safety plan for school: Specific school-related guidelines:

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Include timeline for follow-up and designated person to follow-up.

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Coping strategies: What can you do on your own, if a crisis develops in order to keep yourself safe? (Relaxation, techniques, distractions, etc)

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Things that are important to me: Who are the people, places, and things that are very important to you and worth living for?

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Safe place(s) for student: \_\_\_\_\_

Places/area safety may be an issues: \_\_\_\_\_

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People from who you can ask for help: Who can you contact that will help you during a crisis (must be over 21 years old)

1. \_\_\_\_\_ Contact Information: \_\_\_\_\_

2. \_\_\_\_\_ Contact Information: \_\_\_\_\_

3. \_\_\_\_\_ Contact Information: \_\_\_\_\_

Is there a safety plan for home? \_\_\_\_\_ Yes \_\_\_\_\_ No

All student Safety Plans terminate at the end of each school year. It is the parent/guardian’s responsibility to notify advisors, coaches, or summer school administrators of school-sponsored activities regarding the safety concerns of the student.

Please contact your student’s school guidance counselor in August to update him/her on your child’s progress.

Parent signature and date: \_\_\_\_\_

Guidance Counselor or School Social Worker signature and date: \_\_\_\_\_

Student signature and date: \_\_\_\_\_

Principal signature and date: \_\_\_\_\_

Teacher signature and date: \_\_\_\_\_

School Psychologist signature and date: \_\_\_\_\_

Other signature and date: \_\_\_\_\_

## Staff Guidelines for Facilitating a Student's Return to School

These guidelines will help staff plan for a student's return to school after a suicide attempt or mental health crisis. In addition to meeting regularly with the student, the staff member facilitating the student's return consider doing the following:

8. Become familiar with the basic information about the student, including:
  - How the student's risk status was identified.
  - What precipitated the student's high-risk status or suicide attempt?
  - What medication(s) the student is taking.
9. Serve as the school's primary link to the parents and maintain regular contact with the family.
  - Call or meet frequently with the family.
  - Facilitate referral of the family for counseling, if appropriate.
  - Re-entry meeting with the student and his or her family and relevant school staff (e.g., the school psychologist, guidance counselor, or school social worker, etc.) about what services the student will need upon returning to school.
10. Serve as liaison to other teachers and staff members, with permission of the family, regarding the student, which could involve the following:
  - Ask the student about his or her academic concerns and discuss potential options.
  - Educate teachers and other relevant staff members about warning signs of another suicide crisis.
  - Modify the student's schedule and course load to relieve stress, if necessary.
  - Arrange tutoring from peers or teachers, if necessary.
  - Work with teachers to allow makeup work to be extended or excused without penalty.
  - Monitor the student's progress.
  - Inform teachers and other relevant staff members about the possible side effects of the medication(s) being taken by the student and the procedures for notifying the appropriate staff member (e.g., the school nurse, school psychologist, guidance counselor, school social worker, etc.) if these side effects are observed. When sharing information about medical treatment, you need to comply with FERPA (The Family Educational Rights and Privacy Act) and HIPAA (which protects release of an individual's health information).
11. Follow up regarding behavioral and/or attendance problems of the student :
  - Meet with teachers to help them understand appropriate limits and consequences of behavior.
  - Discuss concerns and options with the student.
  - Consult with the student's administrator.
  - Consult with the student's mental health service provider to understand whether, for example, these behaviors could be associated with medication being taken by the student.
  - Communicate any behavior and/or attendance concerns with parents/guardians.
12. If the student is hospitalized, attempt to obtain the family's agreement to consult with the hospital staff regarding issues such as:
  - Coordinate class work assignments to be completed in the hospital or at home, as appropriate.
  - Collaborate with treatment staff to best support the student.
13. Establish a plan for periodic contact with the parent while the student is away from school.
14. If the student is unable to attend school for an extended period of time, determine how to help him or her complete course requirements and consider home instruction.

Adapted from:

[Compiled with information from DiCara, C., O'Halloran, S., Williams, L., & Canty-Brooks, C. (2009). *Youth suicide prevention, intervention & postvention guidelines*. Augusta, ME: Maine Youth Suicide Prevention Program. Retrieved from <http://www.maine.gov/suicide/docs/Guidelines%2010-2009--w%20discl.p>



## Student Coping Plan

(a prioritized list of strategies/supports that students can use)

**Warning Signs that I'm Stressed:** (physical signs, thoughts, images, situations, moods, or behaviors)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**Internal Coping Strategies:** What can you do on your own when you feel stressed or your mood shifts? (relaxation techniques, distractions, etc.)

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**People or Places that Provide Distraction from Stressors:** Who or what places help you take your mind off your problems at least for a little while?

1. \_\_\_\_\_
2. \_\_\_\_\_
3. \_\_\_\_\_

**People whom you can ask for help from:** Who can you contact that will help you? (above age of 21)

Name: _____	Contact Information: _____
Name: _____	Contact Information: _____
Name: _____	Contact Information: _____

### Professionals/Agencies to Contact for Help:

**Outpatient Provider:** \_\_\_\_\_

**Emergency Services: 9-1-1**

**Crisis Hotline: NCH Psychiatric Crisis Line: 614-722-1800**

**Suicide and Crisis Lifeline: 988 (call or text)**

**Suicide Prevention Hotline: 614-221-5445**

**List two things that are very important to you:**

1. \_\_\_\_\_
2. \_\_\_\_\_