



TITLE: Suicide Prevention, Intervention, and Postvention (Students)

NUMBER: BUL-2637.5

ISSUER: Andrés E. Chait,
Chief of School Operations
Division of School Operations

DATE: July 31, 2023

POLICY: The Los Angeles Unified School District (LAUSD) is committed to providing safe, healthy, welcoming, and affirming learning and working environments. LAUSD recognizes that in the United States, suicide is the second leading cause of death among youth ages 10-14 and the 3rd leading cause of death for young people ages 15-24 (Centers for Disease Control and Prevention, National Center for Health Statistics, 2020). The possibility of suicide and suicidal ideation requires vigilant attention from our school staff. It is each employee’s responsibility, as well as the District’s charge to know the signs that a student may be heading down a pathway towards violence or self-harm, provide an appropriate and timely response in preventing and addressing suicidal ideation, suicide attempts, and deaths by suicide. Suicide prevention involves school-wide activities and programs that enhance connectedness, build community, contribute to a safe and nurturing environment, and strengthen protective factors that reduce risk for students.

This policy is applicable to all schools, District and school-related activities, and in all areas within the District’s jurisdiction.

MAJOR CHANGES: This bulletin replaces BUL-2637.4 *Suicide Prevention, Intervention and Postvention*, on the same subject issued by Student Health and Human Services, dated October 15, 2019.

The following are major changes included in this bulletin:

- The protocols for suicide risk assessment are described in the following four stages:
 - Stage I: Immediate Risk Reducing Interventions
 - Stage II: Assess for Suicide Risk
 - Stage III: Communicate with Parent/Guardian
 - Stage IV: Implementing Action Plan
- All previous attachments have been converted to Supplemental Tools and are available in Schoology (see Attachment B).

ROUTING
All Employees
All Locations
Co-located Charter Schools



- There are two attachments in this policy:
 - Attachment A – Suicide Prevention, Intervention, and Postvention (SPIP) and Risk Assessment (RA) Supplemental Tools List
 - Attachment B – How to Access SPIP and RA Supplemental Tools
- Supplemental Tools referenced as “RA Supplemental Tool” are applicable to this policy, as well as [BUL-5799.2 Threat Assessment and Management \(Student-to-Student, Student-to-Adult, Student-to-School\)](#).
 - The supplemental tool previously titled Adult Gatekeeper is now titled Trusted Adult.
 - The supplemental tool previously titled Student Gatekeeper is now titled Student Upstander.
 - Safe Gun Storage information for parents/caregivers is available in Supplemental Tool F – Handouts and Resources.

GUIDELINES:

I. BACKGROUND

In 2021, the Centers for Disease Control and Prevention’s Youth Risk Behavior Surveillance System (YRBSS) for LAUSD students indicated that: 42% of high school students reported a prolonged sense of sadness or hopelessness every day for two or more continuous weeks; 22% of middle school and 18% of high school students seriously considered attempting suicide; and over 9% of middle school and 10% of high school students attempted suicide.

Suicide is a serious public health problem that takes an enormous toll on families, students, employees, and communities. Suicide prevention involves the collective efforts of families/caregivers, the school community, mental health practitioners, local community organizations, and related professionals to reduce the incidence of suicide through education, awareness, and services. School personnel are instrumental in helping students and their families by identifying students at-risk and linking them to school and community mental health resources.

II. ACRONYMS AND DEFINITIONS

A. Acronyms

The following acronyms will be used throughout this policy:

ACRONYM	TERMINOLOGY
ISSP	Integrated Safe School Plan
iSTAR	Incident System Tracking Accountability Report
LASPD	Los Angeles School Police Department
MHET	Mental Health Evaluation Team



PMRT	Psychiatric Mobile Response Team
PSA	Pupil Services and Attendance
PSW	Psychiatric Social Worker
RA	Risk Assessment (suicide and threat assessment)
RARD	Risk Assessment Referral Data
SHHS	Student Health and Human Services
SPIP	Suicide Prevention, Intervention, and Postvention
STPL	Suicide/Threat Prevention Liaison

B. Definitions

The terminology referenced throughout the policy are defined as follows:

Action Plan

An *action plan* is a framework of interventions that the school has or will implement to mitigate the suicide risk. The *action plan* developed should reflect the level of risk determined by the STPL or the assessing party. For example, an *action plan* for a person of concern deemed low risk will look different than one for a person deemed high risk. The actions/interventions recommended should be reasonable, have a designated person, and be completed.

Baseline Behavior

Baseline behavior refers to behavior that is typical for the person of concern. Any significant increase or shift in previously identified baseline behavior may indicate that an individual is on a pathway towards serious violence towards themselves or others.

Fluidity

Students who verbalize threats to self may also be experiencing homicidal ideation. *Fluidity* refers to the way a person can move from thoughts of suicide to thoughts of homicide, indicating a need to assess for homicidal ideation whenever a student poses a threat to others.

Person of Concern

The student expressing suicidal ideation/behaviors is referred to as the *person of concern*.

Risk Factors for Suicide

Risk factors are characteristics or conditions that may increase the chance that a person may try to take their life. Suicide risk tends to be highest when someone has several risk factors at the same time.



Risk factors may encompass biological, psychological, and/or social factors in the individual, family, and environment. *Risk factors* include:

- Access to means (e.g., firearms, knives, medication)
- Stressors (e.g., loss, peer relations, school, gender identity issues)
- History of depression, mental illness, or substance/alcohol abuse disorders
- History of suicide in the family or of a close friend
- History of mental illness in the family

Safety Plan

A *safety plan* is a set of personalized interventions and strategies identified to mitigate suicide and support the well-being and safety of the student. Similar to an action plan, the *safety plan* should be reasonable and individualized to meet the student's needs. The *safety plan* should be developed in collaboration with the student, parents/guardians, and school staff, and should include strategies to reduce safety concerns for the individual, as well as the identification of their social-emotional support system at home and at school. The *safety plan* may be modified to meet the needs of the individual as the situation evolves.

Self-Injury

Self-injury is the deliberate act of harming one's own body, through means such as cutting, burning, inciting physical fights with others who can cause them significant harm, or intentionally wearing provocative paraphernalia to draw attention to themselves and solicit harm from others. *Self-injury* is an unhealthy way to cope with emotional pain, intense anger, or frustration.

Suicide Contagion

Suicide contagion is the process by which exposure to suicidal behavior or death by suicide increases the suicidal behaviors of others. Guilt about a loved one's death, identification with the person who has died, and modeling of suicidal behaviors may play a role in contagion.

Suicide Risk Assessment

A *suicide risk assessment* is an evaluation of a student who may be at risk for suicide. *Suicide risk assessments* may be conducted by the administrator/designee, crisis team member, and/or STPL. This assessment is designed to elicit information regarding: the student's



intent to die by suicide; previous history of suicide attempts; presence of a suicide plan and availability of lethal means; presence of support systems; level of hopelessness and helplessness; mental status; and other relevant risk factors.

Suicide/Threat Prevention Liaison (STPL)

STPL(s) are the administrator/designee and/or behavioral health professionals (e.g., PSW, PSA Counselor, School Psychologist, or Counselor) identified in the ISSP School Site Suicide/Threat Assessment Team. The school site administrator designates these individuals annually. School staff may seek support from the *STPL* when they are concerned about a student’s suicidal/homicidal ideation/behavior(s).

Warning Signs for Suicide

Warning signs are when someone says or does something that indicates they may be planning to harm themselves. They might be considered cries for help or opportunities to intervene. *Warning signs* indicate the need for an adult to inquire directly about whether the student has thoughts of suicide. *Warning signs* include:

- Feelings of sadness, hopelessness, helplessness
- Significant changes in baseline behavior, appearance, thoughts, and/or feelings (For example, if someone suddenly seems to be doing a lot better, this may be a warning sign.)
- Sudden use of substances/alcohol
- Social withdrawal and isolation
- Suicide threats (direct and indirect)
- Suicide notes and plans
- History of suicidal ideation/behavior
- Self-injurious behavior (e.g., cutting, burning, inciting physical fights with others who can cause them significant harm, intentionally wearing provocative paraphernalia to draw attention to themselves and solicit harm from others)
- Preoccupation with death
- Making final arrangements (e.g., giving away prized possessions, posting plans on social media, sending text messages to friends)

III. RESPONSIBILITY FOR POLICY IMPLEMENTATION

A. All Employee Responsibilities

1. All District employees must complete the online Suicide Prevention and Awareness Training annually. The training



certifies that employees know the warning signs and risk factors for suicide, as well as what to do if they are concerned about a student who might be suicidal. See [MEM-6910.6 Annual Suicide Prevention and Awareness Training](#). If you have questions or concerns regarding the training, please contact your administrator.

2. Report any concerns or behaviors relating to students who might be suicidal and/or engaging in self-injury to the school site administrator/designee, crisis team member, and/or STPL immediately or as soon as practically possible.

B. School Site Administrator/Designee Responsibilities

1. Designate Crisis Team Members/STPL(s) in the ISSP's *School Site Suicide/Threat Assessment Team*.
2. Respond to reports of students at risk for suicide or exhibiting self-injurious behaviors immediately or as soon as practically possible.
3. Monitor and follow-up to ensure that the risk has been mitigated through support and resources.
4. Provide follow-up to relevant staff such as Region Operations and Instructional Directors, as needed.
5. Report incident in iSTAR as appropriate and update as needed.

C. Region Administrators and Staff Responsibilities

1. Facilitate suicide risk assessment and intervention training by SHHS personnel for school site crisis team members and STPL(s) to ensure adherence of the SPIP policy.
2. Designate Region staff to ensure the implementation of the SPIP policy and provide guidance/support to school sites, as needed.

D. SHHS District Office Staff Responsibilities

1. Support the school site implementation of the SPIP policy by assisting Regions and schools with guidance/consultation, as needed.
2. Assist school and office administrators to ensure all employees complete the online Annual Suicide Prevention and Awareness Training.

E. Co-located Independent Charter School Administrator/Designee Responsibilities

Independent charter schools that are co-located on a District site must abide by the District's health and safety policies, including the SPIP policy.



1. Identify personnel at their school sites who will assess students.
2. Monitor and follow-up to ensure that the risk has been mitigated through support and resources.
3. Follow the established protocol for reporting incidents and providing updates to the District Principal and Charter Schools Division by providing a written report when there are safety concerns and/or significant incidents that happen on their campus.

Schools following this policy must also follow [BUL-5532.1 Policy on Co-Locations for District School Facilities' Use Pursuant to Education Code Section 47614 \(Proposition 39\)](#), which informs co-located charters about the ISSP, as well as requirements to report incidents.

IV. PREVENTION

Youth suicide is a serious public health problem. Suicide prevention is the collective effort of all adults that support and work with students, including parents/guardians, families, local community organizations, mental health practitioners, and related professionals. Children and teens spend a significant amount of their young lives in school; the personnel who interact with them daily are in a prime position to recognize the warning signs of suicide and make the appropriate referrals for help (California Education Code §215). The online Suicide Prevention and Awareness Training must be completed annually by all District employees. For more information, see [MEM-6910.6 Annual Suicide Prevention and Awareness Training](#).

Additionally, pursuant to California Education Code §215.5, contractors that issue student identification cards shall ensure that the following information is printed on either side of each student identification card for all students in grades 7-12: 988 Suicide and Crisis Lifeline – 988 or (800) 273-8255.

Suicide prevention involves school-wide activities and programs that enhance connectedness, build community, contribute to a safe and nurturing environment, and strengthen protective factors that reduce risk for students.

Suicide prevention includes:

- Promoting a climate of positive behavior intervention and support –



- [BUL-133307.0 Discipline Foundation Policy: Multi-Tiered Systems of Support for Behavior and Social-Emotional Well-Being using Positive Behavior Interventions and Supports/Restorative Practices \(PBIS/RP\).](#)
- Increasing staff, student, and parent/guardian knowledge of warning signs and risk factors for suicide and what to do when a student is expressing suicidal ideation/behavior.
- Engaging students by providing structure, guidance, and fair discipline.
- Monitoring students' emotional state and well-being and making referrals for support, as needed.
- Modeling and teaching desirable skills and behavior.
- Promoting access to school and community resources.

V. PROTOCOL FOR RESPONDING TO STUDENTS AT RISK FOR SUICIDE

Suicide is death caused by self-directed injurious behavior with the intent to die. Sometimes there may be a precipitating event, such as a break-up or recent death of a loved one, prior to the death by suicide. However, it is important to remember that suicide is a complex phenomenon that cannot be attributed to one single cause.

The primary purpose of a suicide risk assessment is to determine if a person of concern poses a risk to themselves. The following are general protocols and procedures for the administrator/designee, crisis team member, and/or STPL to respond to reports of students at risk for suicide. For an abbreviated version of the protocol outlined below, see SPIP Supplemental Tool A1 - Protocol for Responding to Students at Risk for Suicide and Self-Injury.

There are four stages for the suicide risk assessment process:

- Stage I: Immediate Risk Reducing Interventions
- Stage II: Assess for Suicide Risk
- Stage III: Communicate with Parent/Guardian
- Stage IV: Implementing Action Plan

Within each stage, the urgency of the situation may dictate the order in which the subsequent protocols are followed and necessary.



STAGE I: IMMEDIATE RISK REDUCING INTERVENTIONS

A. Respond Immediately

1. For immediate, emergency life-threatening situations, call 911. This includes non-fatal suicide attempts (e.g., ingesting pills or unknown substances, cutting that requires medical attention, strangulation).
2. Report concerns or incidents directly to the administrator/designee, crisis team member, and/or STPL(s) immediately or as soon as practically possible. For example, do not wait until the end of the day or leave a note, send an e-mail, or leave a voicemail without ensuring that the message was received.

B. Secure the Safety of the Student

1. Ensure that a staff member, not a student, accompanies the student sent to the office for an assessment.
2. When meeting with the student, ensure the physical environment is free of any items/objects that could potentially be harmful, such as scissors, letter openers, staplers, pushpins, and/or pencil sharpeners.
3. Supervise the student at all times, including if the student needs to retrieve their belongings or go to the restroom. Ensure that they utilize a student restroom with stalls, rather than a restroom that can be locked from the inside.
4. School administrators may conduct searches of individual students or relevant areas of the school when they have reasonable suspicion that the search will turn up evidence related to the immediate threat to self.
5. District employees should not transport students. Only LASPD, local law enforcement, or designated Department of Mental Health clinicians, including Psychiatric Mobile Response Team (PMRT) staff, are authorized to transport an individual for a psychiatric evaluation (5150/5585) if the current circumstances meet the criteria.
6. If the school receives information that a student may pose a danger to self and/or others, but the student is not in attendance and school attempts to reach parent/guardian and/or emergency contacts have been unsuccessful, contact LASPD or local law enforcement to conduct a welfare check to determine the safety and well-being of the student, as well as others.



STAGE II: ASSESS FOR SUICIDE RISK

An individual's behaviors and emotional state can be influenced by a number of factors, including triggers, internal/external stimuli, relationship dynamics, protective factors, and risk factors. Therefore, to effectively evaluate for suicide risk, the assessing party should have as much past and present information about the person of concern, as well as details regarding the incident.

A. Gather Relevant Information

The administrator/designee, crisis team member, or designated STPL(s) should gather essential background information that will help with assessing the student's risk for suicide (e.g., what the student said or did, information that prompted concern or suspicion, copies of any concerning writings, drawings, text messages, social media, or previous iSTAR history).

B. Assess for Suicide Risk

1. The trained administrator/designee, crisis team member, or designated STPL should meet with the student in a confidential setting to complete a suicide risk assessment. The following supplemental tools may be utilized to interview the person of concern and other relevant parties:
 - SPIP Supplemental Tool B1 – Suicide Risk Assessment
 - SPIP Supplemental Tool D1 – Parent/Caregiver Conversation Guide
2. Based on the information gathered and assessment of the student, the assessing party should collaborate with at least one other designated school site crisis team member to determine the level of risk. Consult with the respective Region Operations Administrator, as needed. See SPIP Supplemental Tool B2 – Suicide Risk Assessment Levels, Indicators, & Action Plan Options.
3. Any consultations made by the assessing party should be in a confidential setting and not in the presence of the person of concern. Another designated staff member should supervise the student at all times.
4. If the level of risk is determined to be high, contact LASPD (213) 625-6631 **or** PMRT (800) 854-7771 for an assessment and possible transport to a hospital for a mental health evaluation. Only **one** agency should be contacted for a response. Either agency is authorized to assess, determine if the current



circumstances meet criteria for a hold, and transport an individual for a psychiatric evaluation (5150/5585), if needed.

C. Additional Considerations

The following are important to consider when intervening with youth who are exhibiting suicidal ideation/behavior:

1. **When Certificated Staff Accompany a Student to the Hospital**

If LASPD, PMRT, or other local law enforcement determines that the student will be transported to an emergency hospital/medical facility, the school site administrator may designate a certificated staff member to accompany the student if:

- a. The student requests the presence of a staff member who agrees to accompany them;
- b. The school is unable to make contact with the parent/guardian;
- c. Parent/guardian is unavailable to meet the student at the hospital; or
- d. The school site administrator deems this is appropriate based on considerations such as age, developmental level, or pertinent historical student information.

2. **Providing Information for a Psychiatric Evaluation**

If the student will be transported, the assessing party should complete RA Supplemental Tool C2 – Summary of Relevant Student Information, indicating a summary of the incident and pertinent historical information. A copy of this document should be provided to MHET, PMRT, law enforcement, or the transporting agency prior to transporting to a hospital emergency room. For guidelines on how to complete RA Supplemental Tool C2, refer to RA Supplemental Tool C1 – How to Complete the Summary of Relevant Student Information.

3. **Suspected Child Abuse or Neglect**

Report the incident to the appropriate child protective services agency, following [BUL-1347.5 Child Abuse and Neglect Reporting Requirements](#) if the District Employee, as a mandated reporter, reasonably suspects child abuse or neglect by a parent/guardian. A mandated reporter may have reasonable suspicion, depending on the facts, when:

- contacting the parent/guardian regarding the suicidal ideation/behavior may escalate the student's current level of risk
- the parent/guardian is contacted and unwilling to respond



- the parent/guardian refuses treatment for the student of concern
- the parent/guardian is unable to safeguard the student
- the student has access to weapons
- when additional minors are in the home and therefore may be at risk

The report should include information about any concerning suicidal ideations or behaviors exhibited by the student.

STAGE III: COMMUNICATE WITH PARENT/GUARDIAN

The Crisis Team Member, STPL, or assessing party should communicate concerns with the parent/guardian or emergency contact identified in MiSIS. Note: The initial level of risk may change as a result of the information gathered. For guidance and prompts when speaking with parent/guardian refer to SPIP Supplemental Tool D1 – Parent/Caregiver Conversation Guide.

Guidelines when communicating with parent/guardian:

1. Share concerns and provide recommendations for establishing safety in the home with “means restriction” (e.g., securing/removing firearms, medications, cleaning supplies, cutlery, razor blades).
2. If the student is transported to the hospital, communicate a plan for a re-entry meeting pursuant to RA Supplemental Tool E5 – Student Reentry Guidelines. Complete and provide parent/guardian RA Supplemental Tool E6 – Return to School Information for Parent/Guardian, which outlines steps to facilitate a transition back to school.
3. Provide school and/or local community mental health resources, such as the nearest District Mental Health Clinic or Wellness Center. Students with private health insurance should be referred to their provider.
4. Facilitate contact with community agencies.
5. Provide a copy of SPIP Supplemental Tool F5 - Suicide Prevention and Self-Injury Awareness for Parents/Caregivers.
6. Obtain parent/guardian permission to communicate with outside mental health care providers regarding their child using RA Supplemental Tool E7 – Parent/Guardian Authorization for Release/Exchange of Information.
7. If necessary, obtain parent/guardian consent to search using the template in RA Supplemental Tool E8 – Parent/Guardian Consent to Search.



STAGE IV: IMPLEMENTING ACTION PLAN

The assessing party should collaborate with at least one other designated school site crisis team member to determine appropriate action(s) based on the level of risk. Refer to SPIP Supplemental Tool B2 - Suicide Risk Assessment Levels, Indicators, & Action Plan Options.

There are circumstances that might increase a student's suicide risk. Examples may include suspension, expulsion, relationship problems, significant loss, interpersonal conflict, or being identified as a student of a vulnerable population (see Section VI – Considerations for Supporting Vulnerable Student Populations). Consider the following options when developing a student safety plan and conducting a reentry meeting:

A. Student Safety Planning

Develop a safety plan. A safety plan is a list of coping strategies and resources that a student may use before, during, or after a suicidal crisis. See RA Supplemental Tool E – Safety Planning & Reentry for recommendations and templates for developing a student safety plan.

1. Throughout the safety planning process, a collaborative problem-solving approach should be used to assess and address any potential barriers the student may have with following through with the safety plan.
2. Review the developed safety plan with the parent/guardian, specifically the trusted adults identified for support. Discuss the suitability of adults identified at home/community. Inform parent/guardian that the identified adults at school may receive the Trusted Adult handout and that they may share this with the identified home/community adults, as well. See RA Supplemental Tools F2 – Trusted Adult.
3. Provide and review RA Supplemental Tools F2 – Trusted Adult handout with the identified trusted adults in school, as appropriate. Written parental consent is required to notify trusted adults identified in the home/community section of the student's safety plan. Parents/guardians may consent by writing their initials on the consent line at the end of the signature section of the safety plan. See RA Supplemental Tools E2 or E4, Student Safety Plan.
4. If the student enrolls in a new school, the safety plan should be reviewed with the new school site crisis team to ensure



continuity of care and appropriate updates/revisions, as needed.

B. Student Reentry Meeting

Follow student reentry guidelines. See RA Supplemental Tool E5 - Student Reentry Guidelines for a checklist of action items to consider.

1. If the student is absent or out of school due to a mental health evaluation/hospitalization, the school site administrator/designee, crisis team member, or STPL should hold a reentry meeting with key support staff, parents/guardians, and student upon the student's return to facilitate a successful transition.
2. It is strongly encouraged that a student returning to school following a serious or prolonged illness, injury, surgery, or other hospitalization (including psychiatric and drug or alcohol inpatient treatment), have written permission by a licensed California health care provider to attend school, including any recommendations regarding physical activity. See SPIP Supplemental Tool A3 – FAQs Regarding Suicide Risk Assessment.

C. Provide Resources

Mobilize a support system and provide resources. See RA Supplemental Tool F1 - Resource Guide.

1. Connect student and family with social, school, and community supports.
2. Refer the student to the nearest District Mental Health Clinic or Wellness Center, a community resource provider, or their health care provider for mental/physical health services.
3. Provide parents/guardians, staff, and witnesses the appropriate handouts. See SPIP & RA Supplemental Tool F – Handouts and Resources

D. Monitor and Manage

1. The administrator/designee, crisis team member, and/or STPL(s) should monitor and manage the case as it develops and until it has been determined that the student no longer poses an immediate threat to self.
2. If deemed appropriate/necessary, request consent from parent/guardian to conduct a search of the student, as needed. See RA Supplemental Tool E8 – Parent/Guardian Consent to Search template.
3. Maintain consistent communication with appropriate parties on a need-to-know basis. See section VIII. Confidentiality.



4. If the parent/guardian is not following the safety recommendations, a suspected child abuse report may be filed. See [BUL-1347.5 Child Abuse and Neglect Reporting Requirements](#).

E. Document Actions

1. Notes, Documents, and Records

- a. Notes, documents and records related to the incident are considered confidential information. These notes should be kept in a confidential file separate and apart from the student's cumulative records.

2. Documenting on iSTAR

- a. The administrator/designee shall maintain records and documentation of actions taken at the school by completing an incident report and RARD in iSTAR. For information on completing iSTAR reports with the issue type *Suicidal Risk* and *Threat*, see RA Supplemental Tool G1 – Completing the RARD on iSTAR.
- b. Do not upload SPIP Supplemental Tool B1 – Suicide Risk Assessment or any other notes in iSTAR. See SPIP Supplemental Tool A3 – FAQs Regarding Suicide Risk Assessment.
- c. When documenting in iSTAR, include the 10-digit student identification number for the student in the *Persons Involved* tab. Any previous reports involving the student will be displayed in this tab, which may influence additional safety and action planning.
- d. If the student is assessed by a crisis team member who does not have reporting access to iSTAR, they should complete RA Supplemental Tool G2 – RARD and submit it to the school site administrator/designee within 24 hours or by the end of the next school day, for submission on iSTAR. The RARD should not be mailed.

VI. CONSIDERATIONS FOR SUPPORTING VULNERABLE STUDENT POPULATIONS

Factors such as discrimination, traumatic life circumstances, stigma, familial and community rejection, mental illness, and other factors that compromise life functioning may result in elevated suicide risk, particularly for vulnerable student populations. Suicide risk may increase when an individual experiences several risk factors at the same time. See SPIP Supplemental Tool F9 – Vulnerable Student



Populations for a detailed description of aspects to consider when working with students:

- With adverse childhood experiences
- Bereaved by suicide
- Who identify as Black or African American
- With disabilities
- Experiencing housing insecurities or homelessness
- Who experience human trafficking
- Who may be lesbian, gay, bisexual, transgender, queer, or questioning
- With mental illness
- With substance use disorders
- Who identify as newcomer or immigrant
- Experiencing out-of-home placement, such as foster care

VII. POSTVENTION: PROTOCOL FOR RESPONDING TO A STUDENT DEATH BY SUICIDE

After a student death by suicide in the school community, it is important to implement a coordinated crisis response to assist students, staff, and families who are impacted by the death and to restore an environment focused on education. For information about how to respond to a student death by suicide, see SPIP Supplemental Tool A2 – Postvention: Protocol for Responding to a Student Death by Suicide.

VIII. CONFIDENTIALITY

All student matters are confidential and may not be shared, except with those persons who need to know, and only disclose the information necessary to protect the health and safety of the student/others. Personnel who “need to know” shall not disclose student information without appropriate legal authorization. Information sharing should be within the confines of the District’s reporting procedures and investigative process. The District will not tolerate retaliation against anyone for reporting threatening behaviors and/or cooperating in an investigation.

IX. RESPONDING TO STUDENTS WITH DISABILITIES

This bulletin applies to all students. After implementing the steps outlined in this policy, there are additional considerations for students with disabilities. For matters related to students with disabilities whose



behavioral and emotional needs are documented to be more intense in frequency, duration, or intensity; affect their ability to benefit from their special education program; and are manifested at the school, at home, and in the community, follow guidelines as indicated in [BUL-5577.1 Counseling and Educationally Related Intensive Counseling Services \(ERICs\) for Students with Disabilities](#) and contact the Division of Special Education (213) 241-6701 for further assistance.

For matters related to students with disabilities who are self-injurious, but the behavior is not related to suicide or suicidal ideation, follow guidelines as indicated in [BUL-6269.1 Multi-Tiered System \(MTSS\) of Behavior Support for Students with Disabilities](#) and contact the Division of Special Education (213) 241-6701 for further assistance.

X. RESPONDING TO BULLYING AND HAZING

For matters of student-to-student and student-to-adult bullying or hazing follow guidelines as indicated in [BUL-5212.3 Bullying and Hazing Policy \(Student-to-Student\)](#) or contact the appropriate Region Operations Administrators.

XI. RESPONDING TO HATE VIOLENCE

For incidents or threats related to hate-motivated violence, follow guidelines as indicated in [BUL-2047.2 Hate-Motivated Incidents and Crimes - Response and Reporting](#) or contact the appropriate Region Operations Administrators.

XII. RESPONDING TO THREATS AND SCHOOL VIOLENCE

For matters related to students exhibiting threatening or violent behaviors towards others, follow guidelines as indicated in [BUL-5799.1 Threat Assessment and Management \(Student-to-Student, Student-to-Adult, Student-to-School\)](#). If immediate assistance is needed, contact LASPD at (213) 625-6631 or local law enforcement.

AUTHORITY: This is a policy of the Superintendent of Schools. The following legal authorities are applied in this policy:
California Civil Code sections 56-56.10, 1798;
California Constitution Article 1, §28(c);
California Education Code §215;
California Education Code §32210 et seq.;
California Education Code §35160;



California Education Code §44808;
California Education Code §48900 et seq.;
California Education Code §48950;
California Education Code sections 49060 et seq.;
California Health & Safety Code section 123100-123149.5, 124260;
California Penal Code §626 et seq.;
California Code of Civil Procedure §527.6;
Family Educational Rights and Privacy Act;
Health Insurance Portability and Accountability Act; and
Los Angeles Municipal Code §63.94.

ATTACHMENTS: A. SPIP and RA Supplemental Tools List
B. How to Access SPIP and RA Supplemental Tools

RELATED RESOURCES: [BUL-1347.5, *Child Abuse and Neglect Reporting Requirements*](#), March 27, 2023.

[BUL-2047.2, *Hate-Motivated Incidents and Crimes – Response and Reporting*](#), September 4, 2018.

[BUL-5212.3, *Bullying and Hazing Policy \(Student-to-Student\)*](#), April 25, 2022.

[BUL-5269.3, *Incident System Tracking Accountability Report \(iSTAR\)*](#), June 20, 2022.

[REF-5511, *Completing and Updating the Integrated Safe School Plan*](#), revised annually.

[BUL-5532.1, *Policy on Co-Locations for District School Facilities' Use Pursuant to Education Code Section 47614 \(Proposition 39\)*](#), December 4, 2017.

[BUL-5577.1, *Counseling and Educationally Related Intensive Counseling Services \(ERICs\) for Students with Disabilities*](#), July 21, 2014.

[BUL-5799.2, *Threat Assessment and Management \(Student-to-Student, Student-to-Adult, Student-to-School\)*](#), July 3, 2023.

[BUL-5800.1, *Crisis Preparedness, Response and Recovery*](#), July 3, 2023.

[MEM-6910, *Annual Suicide Prevention and Awareness Training*](#), revised annually.



[BUL-6269.1, *Multi-Tiered System \(MTSS\) of Behavior Support for Students with Disabilities*, March 6, 2017.](#)

[BUL-133307.0, *Discipline Foundation Policy: Multi-Tiered Systems of Support for Behavior and Social-Emotional Well-Being using Positive Behavior Interventions and Supports/Restorative Practices \(PBIS/RP\)*, November 21, 2022.](#)

Los Angeles Unified School District Board Resolution, "Core Values to Keep our Students Safe," passed April 8, 2008.

Los Angeles Unified School District Board Resolution, "Safeguarding Our Schools: Demanding Common Sense Gun Laws and Best Practices to Protect our Students and Staff," passed March 13, 2018.

ASSISTANCE: For assistance and information, please contact any of the following offices:
For support and consultation, contact the SHHS Student and Family Wellness Hotline at (213) 241-3840 Monday-Friday (8:00 am-4:30 pm).
In case of an emergency, call 911. For law enforcement and/or after-hours response, contact LASPD at (213) 625-6631 or the respective local law enforcement department.

L.A. UNIFIED RESOURCES

Division of School Operations (213) 241-5337 – for assistance with school operations and procedures concerning students and employees.

Division of Special Education (213) 241-6701– for assistance with cases involving students with disabilities.

Education Equity Compliance Office (213) 241-7682 – for assistance with alleged student discrimination and harassment complaints.

Office of General Counsel (213) 241-7600 – for assistance/consultation regarding legal issues.

Office of Communications (213) 241-6766 – for assistance with media requests.



EMERGENCY RESOURCES (NON-L.A. UNIFIED)

988 Suicide & Crisis Lifeline (24/7) – For individuals who are experiencing mental health-related distress or are worried about a loved one who may need crisis support, call or text 988, chat at 988lifeline.org, or call (800) 273-8255.

Los Angeles County Department of Mental Health ACCESS 24/7 (800) 854-7771 – Psychiatric Mobile Response Team (PMRT) – access to mental health services in LA County. Services include deployment of crisis evaluation teams, information and referrals, gatekeeping of acute inpatient psychiatric beds, interpreter services and patient transport.

Los Angeles Police Department Mental Evaluation Unit (MEU), including Systemwide Mental Assessment Response Team (SMART) (213) 996-1300 – for law enforcement and mental health response, when an individual is a flight risk, violent, or high risk for harm to self or others.

For additional resources and information, including emergency services, crisis lines, and online resources, see RA Supplemental Tool F1 – Resource Guide.



**SUICIDE PREVENTION, INTERVENTION, AND POSTVENTION (SPIP)
AND RISK ASSESSMENT (RA) SUPPLEMENTAL TOOLS LIST**

- Supplemental Tool A – Protocols & FAQ for Responding to Students at Risk for Suicide and Self-Injury**
 - SPIP A1 – Prevention & Intervention: Protocol for Responding to Students at Risk for Suicide and Self-Injury
 - SPIP A2 – Postvention: Protocol for Responding to a Student Death by Suicide
 - SPIP A3 – Frequently Asked Questions Regarding Suicide Risk Assessment

- Supplemental Tool B – Suicide Risk Assessment**
 - SPIP B1 – Suicide Risk Assessment
 - SPIP B2 – Suicide Risk Assessment Levels, Indicators, & Action Plan Options

- Supplemental Tool C – Summary of Relevant Information**
 - RA C1 – How to Complete the Summary of Relevant Student Information
 - RA C2 – Summary of Relevant Student Information

- Supplemental Tool D – Communicating with Parent/Guardian**
 - SPIP D1 – Parent/Caregiver Conversation Guide

- Supplemental Tool E – Safety Planning and Reentry**
 - RA E1 – Guidelines for Developing a Safety Plan for an Elementary School Student
 - RA E2 – Student Safety Plan (Elementary School)
 - RA E3 – Guidelines for Developing a Safety Plan for a Secondary School Student
 - RA E4 – Student Safety Plan (Secondary School)
 - RA E5 – Student Reentry Guidelines
 - RA E6 – Return to School Information for Parent/Guardian
 - RA E7 – Parent/Guardian Authorization for Release/Exchange Information
 - RA E8 – Parent/Guardian Consent to Search Template



- Supplemental Tool F – Handouts and Resources**
 - RA F1 – Resource Guide
 - RA F2 – Trusted Adult
 - RA F3 – Student Upstander
 - RA F4 – Safe Gun Storage Information for Parents/Caregivers
 - SPIP F5 – Suicide Prevention and Self-Injury Awareness for Parents/Caregivers
 - SPIP F6 – Suicide Prevention and Self-Injury Awareness for Staff
 - SPIP F7 – Suicide Prevention Awareness for Crisis Team Members
 - SPIP F8 – Self-Injury Awareness for Crisis Team Members
 - SPIP F9 – Vulnerable Student Populations

- Supplemental Tool G – Documentation on iSTAR**
 - RA G1 – Completing the Risk Assessment Referral Data (RARD) on iSTAR
 - RA G2 – Risk Assessment Referral Data (RARD)



HOW TO ACCESS THE SPIP AND RA SUPPLEMENTAL TOOLS

To access the Supplemental Tools listed above and referenced throughout this policy:

- Join Schoology group, School-Site Crisis Teams. Go to: lms.lausd.net
- Click Employees. Log in with your single sign-on (SSO)
- On the top bar, click on GROUPS (NOT Course), then click JOIN or MY GROUPS in the top right corner of the page. You will be prompted to enter the access code:

C45W-76V2-XR5JF

- After joining GROUPS, click on RESOURCES (on the menu on the left side of the screen, under the Members icon).
 - Click on District Policies and Bulletins
 - Click on BUL-2637.5 Suicide Prevention, Intervention, and Postvention to access all the Supplemental Tools.
 - Materials in the Resources folder will be organized by topic and will be uploaded as they become available.