2015 Webinar on Act 71
Suicide Prevention Policy

PRESENTED BY
THE PA YOUTH SUICIDE PREVENTION INITIATIVE

WWW.PAYSPI.ORG
Introduction

Erich Batra, MD, FAAP, FACP
Assistant Professor, Pediatrics and Family and Community Medicine
Pennsylvania State University College of Medicine

Medical Director, Pennsylvania Child Death Review
Co-Chair, PA Youth Suicide Prevention Initiative
PA Youth Suicide Prevention Initiative

- Multi-system collaboration to reduce youth suicide.
- Administered by PA Department of Human Services
  - Office of Mental Health and Substance Abuse Services

www.payspi.org
PAYSPI Vision

Youth suicide prevention will be embraced and incorporated into the fabric of every community in Pennsylvania to address the social and emotional needs of youth at risk and survivors of suicide.
How big is the problem of suicide?

- 2013 – 1,636 youth in US age 10-18 died by suicide
- 2013 – 72 youth in PA age 10-18 died by suicide

2nd leading cause of death in this age group!

- 2013 Youth Risk Behavior Survey
- High school students in 12 month period before survey
  - 17% seriously considered suicide
  - 13.6% made a plan about how they would attempt suicide
  - 8% attempted suicide one or more times
  - 2.7% made suicide attempt that resulted in treatment by doctor or nurse
2012 NATIONAL STRATEGY FOR SUICIDE PREVENTION

- Goal 7: Provide training to community (including educators and school personnel) and clinical service providers on the prevention of suicide and related behaviors
- Protecting the health and well-being of students is in line with school mandates
Act 71 of 2014

WHY NECESSARY?

- Many schools not doing anything related to suicide prevention.
- Generic crisis plan does not address specific nuances of suicide prevention, intervention, and postvention.
Beginning with 2015-2016 school year

- Each school entity SHALL:
  - Adopt an age appropriate youth suicide awareness and prevention policy, inform each school entity employee and parent of each student, and post policy on website. Policy may be based on policy developed by PDE
  - Include in professional development plan four hours of training in youth suicide awareness and prevention every five years for professional educators in school buildings serving students in grades 6-12
Act 71

- Department of Education SHALL:
  - Develop a model youth suicide awareness and prevention policy
  - Compile, develop, and post on its website
    - Recommended guidelines and educational materials for training of educators
    - Recommended resources and age-appropriate educational materials on youth suicide awareness and prevention
  - Develop a model youth suicide awareness and prevention curriculum and make such curriculum available to all school entities. A school entity MAY incorporate it into its existing instructional program
Model policy developed by PDE shall include:

- Statement on youth suicide awareness and prevention
- Protocols for administering youth suicide awareness and prevention education to staff and students
- Methods of prevention
- Methods of intervention
- Methods of responding to student or staff suicide or suicide attempt
- Reporting procedures
Act 71 Policy

Best Practices

Brenda Becker, Ed.D.
Former Superintendent of Schools
Hempfield School District
School District Priorities

Save student lives

Protect liability of district
Best Practices

- Train entire staff in suicide prevention strategies
- Incorporate lesson(s) into existing curriculum
- Develop comprehensive board policy
Suggestions

- Make use of existing free resources
- Pool expertise/ideas of districts within your intermediate unit
- List emergency call numbers on back of student photo IDs
- Do not underestimate ability of young students to have suicidal ideation
Act 71 Policy

Definitions and Nomenclature

Matthew Wintersteen, PhD
Associate Professor, Department of Psychiatry & Human Behavior
Director of Research, Division of Child & Adolescent Psychiatry
Sidney Kimmel Medical College
Thomas Jefferson University

Co-Chair, PA Youth Suicide Prevention Initiative
• Common language across settings
• Terms may have different contexts based on setting:
  o Schools
  o Behavioral health community
**Definitions and Nomenclature**

<table>
<thead>
<tr>
<th>At-Risk for Suicide</th>
<th>Behavioral Health</th>
</tr>
</thead>
<tbody>
<tr>
<td>Any youth with risk factors or warning signs that increase the likelihood of suicidal behavior</td>
<td>The promotion of emotional health; the prevention of mental illness and substance use disorders; and treatments and services for substance abuse, addiction, substance abuse disorders, behavioral/mental illnesses, and/or mental disorders</td>
</tr>
<tr>
<td>Definitions and Nomenclature</td>
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<tr>
<td>-----------------------------</td>
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<tr>
<td><strong>Nonsuicidal Morbid Ideation</strong></td>
<td><strong>Nonsuicidal Self-Injury (NSSI)</strong></td>
</tr>
<tr>
<td>Thoughts or communicated thoughts whereby one expresses thoughts of being dead. These thoughts are <strong>not</strong> connected to any intention of harming oneself. For example, “people would be better off without me,” and “I’m not sure I would care if I didn’t wake up tomorrow.”</td>
<td>A self-directed injurious behavior with which there is no intent to die. It is important to note that NSSI and a suicide attempt are only distinguishable by intent. The severity of the injury does not matter.</td>
</tr>
</tbody>
</table>
### Definitions and Nomenclature

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<tr>
<th>Postvention</th>
<th>Preparatory Acts</th>
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<tbody>
<tr>
<td>Programs and interventions for survivors following a death by suicide. These activities help alleviate the suffering and emotional distress of suicide survivors and help prevent suicide contagion.</td>
<td>Acts or preparation towards making a suicide attempt, but before the potential for harm has begun. This can include anything beyond a verbalization or thought, such as assembling a method (e.g., buying a gun, collecting pills) or preparing for death by suicide (e.g., writing a suicide note, giving things away).</td>
</tr>
</tbody>
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Definitions and Nomenclature

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<th>Risk Factor</th>
<th>Warning Sign</th>
</tr>
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<tbody>
<tr>
<td>The personal or environmental characteristics associated with suicide. People affected by one or more of these risk factors have a greater probability of suicidal behavior.</td>
<td>Evidence-based indicators that someone may be in danger of suicide, either immediately or in the very near future.</td>
</tr>
</tbody>
</table>

However, risk factors are generally not predictive of behavior.
## Definitions and Nomenclature

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<th>Suicide Attempt</th>
<th>Suicide Death</th>
</tr>
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<tbody>
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<td>A self-injurious behavior for which there is evidence that the person probably <strong>intended</strong> to kill him/herself; a suicidal act may result in death, injuries, or no injuries.</td>
<td>Death cause by self-directed injurious behavior with any intent to die as a result of the behavior.</td>
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# Definitions and Nomenclature

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<th>Suicide Death</th>
<th>Suicidal Ideation</th>
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</thead>
<tbody>
<tr>
<td>Death cause by self-directed injurious behavior with any intent to die as a result of the behavior.</td>
<td>Any thoughts of suicide for which an individual is considering taking action that could result in his/her own death.</td>
</tr>
</tbody>
</table>
## Definitions and Nomenclature

<table>
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<tr>
<th>Suicide Attempt Survivor</th>
<th>Suicide Loss Survivor</th>
</tr>
</thead>
<tbody>
<tr>
<td>An individual who engaged in a self-directed behavior with the intent to die and survived.</td>
<td>A person who has experienced the suicide of a family member, friend, or colleague.</td>
</tr>
</tbody>
</table>
Suicide Crisis Response Team

The administrators, guidance counselors, the school nurse, social worker, and school resource officers, and/or other members of the Student Assistance Program (SAP), as designated. Community mental agency resources may be called for assistance.
Act 71 Policy

Prevention

Matthew Wintersteen, PhD
Associate Professor, Department of Psychiatry & Human Behavior
Director of Research, Division of Child & Adolescent Psychiatry
Sidney Kimmel Medical College
Thomas Jefferson University

Co-Chair, PA Youth Suicide Prevention Initiative
Elements of Prevention

• Training and education
  ○ Teachers and staff
  ○ Students
  ○ Parents

• School climate and culture

• Early identification and referral
Training and Education

• Teachers
  o Act 71 requires 4 hours of training on suicide prevention for educators in grades 6-12 every 5 years
    ▪ School districts to describe proposal in Annual Professional Development Plan submitted to PDE
    ▪ Word of caution – space out training!
  o List of vetted trainings on PAYSPI and PDE websites

• Counselors/Crisis Team
  o Risk assessment and crisis intervention

• Support staff
  o Policy must include protocol for staff education
  o Training improves school safety and climate
  o Risk factors, warning signs, response procedures, referrals, and resources regarding youth suicide prevention
Training and Education

- **Students**
  - Policy requires protocol for student education
  - Act 71 *recommends* building in suicide prevention in student curricula
  - Outcomes more effective if students are included
  - Risk factors, warning signs, help seeking, how to help a friend, addressing related problems (depression, alcohol and drug use, etc.), avoid keeping secrets

- **Parents**
  - Neither *required* nor *recommended* by Act 71, but it is always a good practice
  - Risk factors, warning signs, health promotion, how to respond, where help is available
  - Resource list
School Climate and Culture

- Creating a safe environment for students to express their concerns
  - Method to communicate to trusted adults in school
  - Student clubs focused on health and behavioral health promotion
- Suicide prevention coordinators
  - District-wide
  - Building-specific
Early Identification and Referral

- Training on risk factors and warning signs
  - Video on risk factors and warning signs on [www.payspi.org](http://www.payspi.org)
  - See resources for comprehensive list
- Procedure for referring students who may be at increased risk for suicide for further assessment and evaluation
  - SAP or Behavioral Health Liaison
- Documentation of reason for referral and communication with family and follow-up source
Act 71

Intervention

Terri Erbacher, Ph.D.
School Psychologist, DCIU
Clinical Assistant Professor, PCOM

Author, Suicide in Schools: A Practitioner's Guide to Multi-level Prevention, Assessment, Intervention, and Postvention
Intervention

Focus on:

- PSBA 819 & 891-AR-0
- PDE’s Model Suicide Awareness and Prevention Administrative Regulation

SAMPLE DOCUMENTS – Seek legal counsel

*Every school and district is unique.*
The methods of intervention utilized by the district include, but are not limited to, responding to suicide threats, suicide attempts in school, suicide attempts outside of school, and completed suicide. Suicide intervention procedures shall address the development of an emotional or mental health safety plan for students identified as being at increased risk of suicide.
The school entity shall approve intervention and assessment procedures that contain:

- Procedures for responding to various risk scenarios;
- A suicide assessment instrument to be used by trained school and or mental health staff;
- Guidelines for staff after conducting suicide assessment;
- Guidelines for collaborating with community mental health agencies;
- Guidelines for emergency evaluation referrals; and
- Guidelines for notification of parents/guardians.
Procedures for Students at Risk:

- A district-approved suicide assessment instrument may be used by trained mental health staff such as counselors, psychologists, social workers.

- Parents/Guardians of a student identified as being at risk of suicide shall be notified by the school. If the school suspects that the student’s risk status is the result of abuse or neglect, school staff shall immediately notify Children and Youth Services.

- The district shall identify mental health service providers to whom students can be referred for further assessment and assistance.
Procedures for Students at Risk continued:

- **Mental health service providers** – may include, but not be limited to, hospital emergency departments, psychiatric hospitals, community mental health centers, psychiatrists, psychologists, social workers, and primary care providers.

- The district shall create an emotional or mental health safety plan to support a student and the student’s family if the student has been identified as being at increased risk of suicide.
PSBA 819

Students With Disabilities

- For students with disabilities who are identified as being at risk for suicide or who attempt suicide, the appropriate team shall be notified and shall address the student’s needs in accordance with applicable law, regulations and Board policy.

- If a student is identified as being at risk for suicide or attempts suicide and the student may require special education services or accommodations, the Director of Special Education shall be notified and shall take action to address the student’s needs in accordance with applicable law, regulations and Board policy.
Procedures for facilitating a student’s return to school for members of the crisis response team:

- Prior to the student returning to school, schedule a meeting with designated school staff from the crisis team and parent or guardian to discuss possible arrangements for support services and to create an individual re-entry plan.
- Be familiar with the basic information of the case.
- Maintain regular contact with the family.
- Serve as a liaison between the student, family, and teachers.
- Monitor the student’s progress.
- Closely monitor the student’s re-entry into school and maintain contact with the student’s parent or guardian and mental health provider.
- If the student is unable to attend school for an extended period of time, determine how to help them complete course requirements. Assistance can include, but is not limited to, homebound instruction and/or a 504 plan to assist with accommodations.
Re-Entry Procedures:

• A student’s excusal from school attendance after a mental health crisis and the student’s return to school shall be consistent with state and federal laws and regulations.

• A district-employed mental health professional, the building principal or suicide prevention coordinator shall meet with the parents/guardians of a student returning to school after a mental health crisis, and, if appropriate, meet with the student to discuss re-entry and applicable next steps to ensure the student’s readiness to return to school.

• When authorized by the student’s parent/guardian, the designated district employee shall coordinate with the appropriate outside mental health care providers.

• The designated district employee will periodically check in, as needed, with the student to facilitate the transition back into the school community and address any concerns.
Documentation

- The district shall document observations, recommendations and actions conducted throughout the intervention and assessment process including verbal and written communications with students, parents/guardians and mental health service providers.

- The Superintendent or designee shall develop administrative regulations providing recommended guidelines for responding to a suicide threat.
Report Procedures

- Effective documentation assists in preserving the safety of the student and ensuring communication among school staff, parents/guardians and mental health service providers.
- When a district employee takes notes on any conversations or situations involving or relating to an at-risk student, the notes should contain only factual or directly observed information, not opinions or hearsay.
- As stated in this policy, district employees shall be responsible for effective documentation of incidents involving suicide prevention, intervention and response.
- The suicide prevention coordinator shall provide the Superintendent with a copy of all reports and documentation regarding the at-risk student. Information and reports shall be provided, as appropriate, to guidance counselors, district mental health professionals and school nurses.
Suicide Threat - a verbal or nonverbal communication that the individual intends to harm him/herself with the intention to die but has not acted on the behavior.

When responding to a suicide threat, the district recommends that the staff use the following guidelines if the circumstances warrant such action:

- The staff member who learns of the threat should locate the individual and arrange for or provide constant adult supervision.
- The above-mentioned staff member should then inform the suicide prevention coordinator.
- The suicide prevention coordinator should involve staff; school nurse practitioner or in their absence, [Insert appropriate position for school and non-school hours.]
- The appropriate staff or approved agency provider should determine risk and intervention needed by interviewing the student and gathering appropriate supportive documentation from teachers or others who witnessed the threat.
The suicide prevention coordinator should:

- Contact the parent/guardian, apprise him/her of the situation and make recommendations.
- Put all recommendations in writing to the parent/guardian.
- Mail the recommendations through certified mail.
- Maintain a file copy of the letter in a secure and appropriate location.
- If the student is known to be currently in counseling, the suicide prevention coordinator should attempt to inform his/her treatment provider of what occurred and the actions taken.
- Involve the Student Assistance Program (SAP) team for follow-up and support.
- Pursue a 302 involuntary mental health assessment if parents refuse to cooperate and there is concern about safety.
- PDE adds: Notify the chief school administrator or central office.
Note: If a threat is made during an after-school program and no school or district personnel are available, call your county crisis services or 1-800-273-TALK(8255) for help. Inform the suicide prevention coordinator of the incident and actions taken.

Visit www.payspi.org/task-force-resources/county-initiatives to find your county crisis number
Methods/Procedures for Community Support/Outreach

- If an expressed suicidal thought or intention is made during an afterschool program and no school personnel are available, call [number for County Emergency Services], 1-800-SUICIDE, or 1-800-273-TALK for help. Inform the principal of the incident and actions taken.
Postvention

Paula S. McCommons, Ed.D.

Director of Star Center Outreach and Behavioral Health Liaison for Allegheny County Student Assistance Program, Western Psychiatric Institute, and Clinic of UPMC Presbyterian Shadyside
Six Steps to Comprehensive Suicide Prevention in Schools

- Identification & Response
- Postvention
- Staff Education
- Parent Education
- Student Education & Advocacy
- Screening

SAMHSA, 2012
A Lesson from Loss

Let us not look backward in anger or forward in fear but around us in awareness.

JAMES THURBER
Rationale for Including Postvention within District Policies

- Sadly, although rare, deaths of students and staff due occur
- A tragic opportunity to offer support and intervention to those who are impacted and left to grieve
- Postvention as possible prevention, especially with regard to suicide deaths and minimizing contagion
Specifically, after a youth suicide Dr. Brent and others have found...

- Teens are more vulnerable to the media coverage of a teen suicide than adults (6.9% increase versus .5%)
- Those closest to victim may be “inhibited” due to the pain, anger, “cost” of their friend’s death
- Imitative suicidal behavior more often among acquaintances of the victim
- Although close friends may not attempt, at 6 mo. after a friend’s completion, they met the criteria for MDD (29%) and PTSD (6%)
Implications for Postvention

• Screen, ASAP, not only siblings, close friends, and those directly exposed, but also acquaintances and those in the general student body who are:
  ○ Experiencing issues with other losses/deaths
  ○ Using drugs and alcohol
  ○ Have an affective disorder (e.g. anxiety)
  ○ Appear upset

• Conduct follow up screenings at 1, 3, 6, 9 and 12 months out and possibly longer.
Implications for Postvention (continued)

- Train *all* school personnel (e.g. faculty, aides, administrators, bus drivers, secretaries, crossing guards, coaches, janitors, POs, nurses, counselors etc.), parents & other “gatekeepers” on youth highest at risk for suicide:
  - Males 16 – 19
  - Youth with mental health/ drug & alcohol problems
  - Unsupported GLBTQ youth
  - Youth who have attempted suicide in the past
  - Teens with an impending disciplinary action and other risk factors
Overview of Key Postvention Activities

Postvention is the array of services we offer following a tragedy. The goals of postvention are to:

- support those grieving the loss of a classmate, teacher, or colleague
- return the school to its normal routines
- identify and assist those at risk for unhealthy behaviors, and reactions
- refer those who may be at risk for psychiatric disorders
- reduce the risk of contagion for those at risk for suicidal behavior
Key Components of Postvention Policy

- Identifying School Postvention Coordinator & Mental Health Consultant
- Communications
  - Internal – i.e. teachers, students, parents/guardians
  - External – i.e. law enforcement, clergy, coroner
  - Online
- Screening Students, Appropriate Referral, & Follow up
- Supporting Adults
  - School Staff
  - Responders
  - Caregivers
- Memorials
Both PDE and PSBA are to be commended for taking the lead on producing such groundbreaking policies and procedures. As with any pioneering efforts there may be a need to revise and revisit.

PDE states that a school policy must include:
- Methods of responding to a student or staff suicide or attempt
- Reporting procedures

PDE refers to school personnel following a crisis response to a suicide or suicide attempt on campus. No specific mention of postvention efforts in the administrative regulation.
Recommendations from PSBA Sample Suicide Policies for Postvention

- PSBA offers methods of response within their policy:
  - Identify and train crisis team
  - Determine roles and responsibilities
  - Notification of parents, students and staff
  - Work with families
  - Respond to the media
  - Collaborate with community providers

- PSBA also provides detailed “suicide crisis response guidelines” and refers to identifying a suicide prevention coordinator

- As with PDE, PSBA refers to the District following their Crisis Management Plan in response to a suicide death or attempt on or off campus
Postvention Checklists/Guidelines:

- Maine Youth Suicide Prevention Guide, pages 4-10 and 47:
  maine.gov/suicide/docs/Guidelines%2010-2009--w%20discl.pdf

- STAR Center Postvention Manual pages 57-60
  www.starcenter.pitt.edu/Files/PDF/Manuals/Postvention.pdf
Suicide Reporting Guidelines for District Spokesperson

- Avoid focusing on the details of the death, difficulties of the deceased or their perceived lack of problems
- Focus on prevention and survivors getting support
- Emphasize that suicide is not a typical or healthy response to stress
- Advertise crisis and behavioral health resources in communications whenever possible
Memorials, Graduation, and Anniversary Dates

- *Ideally,* have a policy already in place to address the commemoration of any death
- Involve a representative committee of stakeholders for decision-making regarding requests ("take all options into consideration")
- Encourage "living memorials", i.e. scholarships, donations to suicide prevention organizations
- Include considerations for graduation, anniversary, and extracurricular activities
- Remember, schools live "their past precedents."
Additional Assistance with Reviewing Policies on Suicide Prevention:

- Model School District Policy on Suicide Prevention – Collaboration between, The Trevor Project, NASP, ASCA & AFSP
  
  http://b.3cdn.net/trevor/10a65fa42e6ebddc24_qem6bvseu.pdf

  ○ Trevor Project’s Government Affair’s Department – 202-204-4730 or advocacy www.thetrevorproject.org

  ○ Nicole Gibson from AFSP – 202-449-3600 or ngibson@afsp.org
The Role of the Student Assistance Program (SAP) Team in Suicide Awareness, Prevention, and Response

Beth Sprentz
Region X Coordinator
Pennsylvania Network for Student Assistance Services (PNSAS)
When writing your District’s Suicide prevention policy and procedures don’t forget about...

your Student Assistance Program as a resource.
The SAP Team’s Role in Suicide Awareness and Prevention

Each year the school/SAP team should in-service their staff, students, and parents on:

- Early identification of observable at-risk behaviors.
- Process for referring students to SAP.
- Other in-school supports/resources.
- Community supports/resources.
- The districts crisis response policy and procedures for responding to suicidal behaviors or ideation.
Some or all members of SAP team(s) may be part of the district’s crisis response team.

SAP team members may gather information from staff and/or students to ascertain the student’s possible suicidal ideation.

The SAP liaison(s) may assist the school by providing screening and linkage to crisis response services and other resources.
The SAP Team’s Response to Suicidal Ideation Continued

- There should be coordination between the SAP team(s), SAP liaison(s), and community crisis services.
- The SAP team(s) should be made aware of and how to access 201 and 302 hospitalization commitment procedures.
- SAP team(s) can provide follow-up support for students that are returning from treatment and those that are continuing with another level of treatment.
The SAP Team’s Role in Postvention

SAP team(s) may assist other school staff and agency providers in postvention.

- They may help to inform school staff and students.
- They may help with the preparation of correspondence that will be sent home to parents/guardians.
- They may go into classrooms to check-in with teachers and students and let them know there is help available.
SAP Team’s Role in Postvention Continued

SAP team members could touch base with the students who are most at risk including:

- Those close to deceased.
- Students who are currently participating in SAP and who are in need of support. (They may or may not have known the deceased.)
- Students who are visibly upset.
- Those who indicate they are having a hard time or who are concerned about someone else.
## SAP Team Checklist

- Has(Have) your SAP team(s) been in-serviced on your suicide prevention policy and procedures?
- Have your SAP team members received any training in suicide awareness/prevention?
- Has(Have) your team(s) revisited your postvention procedures?
- Is(Are) your SAP team(s) clear on its role with crisis response within your school?
Resources

- General Act 71
  - www.payspi.org
  - www.education.pa.gov/K-12/Safe%20Schools/Pages/Act-71.aspx#.VZVbzHrD_Gh

- Prevention
  - Suicide Prevention Resource Center (2012). The Role of High School Teachers in Preventing Suicide. Available at www.sprc.org/sites/sprc.org/files/Teachers.pdf
Resources

- Prevention continued
  - Public Service Announcements
    - [www.payspi.org/psa](http://www.payspi.org/psa)
    - Ad Council “We Can Help Us” [www.youtube.com/watch?v=jpfdfMy3FgCs](http://www.youtube.com/watch?v=jpfdfMy3FgCs)

- Intervention
  - National Suicide Prevention Lifeline 1-800-273 TALK(8255) [www.suicidepreventionlifeline.org](http://www.suicidepreventionlifeline.org)
  - PAYSPI County Initiatives pages with local crisis line information [www.payspi.org/task-force-resources/county-initiatives](http://www.payspi.org/task-force-resources/county-initiatives)
Resources

- **Postvention**
  - Model School District Policy on Suicide Prevention – Collaboration between, The Trevor Project, NASP, ASCA & AFSP
    [http://b.3cdn.net/trevor/10a65fa42e6ebddc24_qem6bvseu.pdf](http://b.3cdn.net/trevor/10a65fa42e6ebddc24_qem6bvseu.pdf)
  - Maine Youth Suicide Prevention Guide, pages 4 -10 and 47:
  - STAR Center Postvention Manual, pages 57-60
    [http://www.starcenter.pitt.edu/Files/PDF-Manuals/Postvention.pdf](http://www.starcenter.pitt.edu/Files/PDF-Manuals/Postvention.pdf)
  - Reporting on Postvention
  - STAR Center Postvention Manual
    [www.starcenter.pitt.edu/Manuals/14/default.aspx](http://www.starcenter.pitt.edu/Manuals/14/default.aspx)
  - Suicide in Schools: A Practioner’s Guide to Multi-Level Prevention, Assessment, and Postvention
Resources

• Postvention continued

• Student Assistance Program: www.sap.state.pa.us
  ○ SAP Team Maintenance Checklist
  ○ Regional Coordinator Map
    www.sap.state.pa.us/uploadedfiles/PNSASmap1-28-15.pdf
Q & A

Frequently Asked Questions answered by our panel of experts
Any suggestions for how to fill certain roles at school districts/local education agencies that are under resourced? For instance, schools that do not have full-time counselors/social workers?
Q&A

What are some recommendations on how to communicate the policies and procedures to staff?
What are the criteria for and responsibilities of the suicide prevention coordinator?
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