

## **Crisis Intervention Plan**

This information is to guide school staff as to the appropriate steps to take when responding to students in a possible suicidal or homicidal crisis. It is important for the reader(s) to understand, that in many crisis situations, the progression of the response steps may fluctuate according to the individual student's needs; some of the below steps may occur concurrently. *The most important piece to responding to a student in crisis is the safety of all those involved.*

Students may make a statement about suicide (in writing assignments, drawings or direct/indirect verbal expressions). Possible warning signs (American Academy of Child and Adolescent Psychiatry, 2008):

- Change in eating and sleeping habits
- Withdrawal from friends, family, and regular activities
- Violent actions, rebellious behavior, or running away
- Drug and alcohol use
- Unusual neglect of personal appearance
- Significant personality change
- Persistent boredom, difficulty concentrating, or a decline in the quality of schoolwork
- Frequent complaints about physical symptoms, often related to emotions, such as stomachaches, headaches, fatigue, etc.
- Loss of interest in pleasurable activities
- Not tolerating praise or rewards
- Complaining of being a bad person or feeling "rotten" inside
- Verbal hints with statements such as: "I won't be a problem for you much longer," "Nothing matters," "It's no use, and I won't see you again."
- Putting his/her affairs in order, for example, giving away favorite possessions, cleaning his/her room, throwing away important belongings, etc.
- Becoming suddenly cheerful after a period of depression
- Having signs of psychosis (hallucinations or bizarre thoughts)

Students may make a statement about homicide (in writing assignments, drawings or direct/indirect verbal expressions). Possible warning signs (Conner, 2007):

### **Early Warning Signs**

- Fire starting
- Cruelty to animals
- Bed wetting

### **General Warning Signs**

- Socially isolated, outcast or withdrawn.
- Feelings and behavior are easily influenced by peers.
- Victimized or treated badly by peers.
- Alcohol or other drug use.
- Dwelling on experiences of rejection, on injustices or unrealistic fears.
- Reacting to disappointments, criticisms or teasing with extreme and intense anger, blame or a desire for revenge.
- Increasing anger, aggression and destructive behavior.
- Associates with children known to be involved with morbid, destructive or violent behavior or fantasy.
- Preoccupation or interest in destructive or violent behavior.
- Has been cruel or violent towards pets or other animals.
- Fascination, interest or an obsession with weapons or potential weapons. Depicts violent or destructive behaviors in artistic or other creative expressions.

### **Immediate Risk or Danger**

- Recently assaulted another child or was recently assaulted.
- Brought a weapon to a place or situation that is inappropriate.
- Has or may have a weapon that is potentially lethal.
- Destructive, violent or threatening gestures or statements.
- Has or may have a plan for destructive, violent or suicidal behavior.
- Saying or implying they are suicidal.
- There is or may be an identified a target for destructive behavior or violence.

### **When a Student Talks of Harm to Self or Others . . .**

#### ***Teacher and Staff's Role:***

- Remain calm and nonjudgmental.
- Take all comments, actions and behaviors seriously. It is better to “overreact” than to under react.
- Don't promise confidentiality, but promise to offer unconditional support, help and privacy by reporting your concerns to only those who need to be aware to best help the student.
- Send someone to get a counseling staff member (social worker, psychologist counselor). Stay with the identified student until he/she is calm and/or until help arrives. Do not leave the identified student alone under any circumstances. The counselor on call will assume the responsibility for the crisis interview. If the teacher or other staff member, who first identified the need for intervention, is needed to remain with the situation, this should be allowed. The student may want this individual to stay.

## ***Counseling Staff's Role:***

\* Confidentiality does not apply if there is a suspicion of neglect or abuse of children, or when reporting probable danger to self or others. In the event of a homicidal threat, it will be determined on a case by case basis if parents of the threatened child will be notified of this threat.

## **Stabilize**

- **Inform:** Ask the referring staff member to inform the building principal of a possible suicidal/homicidal student.
- **Provide A Safe Environment:** Speak with the student privately away from others and provide him/her with your undivided attention.
- **Be Calm:** The student's behavior may follow yours. Try not to express your feelings about what the student is telling you. If the student senses a negative reaction from you, he/she may stop talking.
- **Talking and Listening:** Let the student to speak at his/her own pace. Listen carefully to the person in crisis; offer your support. Calmly talk to the student to determine if he/she has any life-threatening instruments or substances on or near his/her person. (i.e. drugs, gun, knife, etc.). If your safety and the safety of others is in jeopardy, direct someone to contact the building principal to inform law enforcement immediately. Do NOT struggle with the student or attempt to remove any life threatening instruments by yourself. Never leave a student unattended by any circumstances.
- **Acknowledge Feelings:** A person's reaction to a crisis situation is individualized. Let the student know that you hear they are angry, scared, frustrated, etc. Don't try to minimize the student's problem by saying: "I know how you feel." "Things will get better." "You are making a big deal out of nothing." You don't know how the student feels, things could get worse for him/her, and it is his/her problem and it is a big deal to them! It's ok to say: "I can't imagine how you feel right now."

## **Risk Assessment**

- The following method, based on the safeTALK model, will be employed if the student does not disclose suicidal ideation directly to the counseling staff member on call:
  - **Tell-** as clearly and directly as possible (name "invitations" given: i.e., suicidal or homicidal statement)
  - **Ask-** *"When someone is (name invitations), they are sometimes thinking about suicide. Are you thinking about suicide?"*
  - **Listen-** *"Let's talk about this. I am listening.... This is important."*
  - **Keep Safe-** *"We need extra help. I want to connect you with someone who can help you keep safe."*

- For communicated threats of self-harm or harm to others, the risk assessment will include:
  - **Threat Ideation**- history of threats, frequency of thoughts, and intensity of thoughts. “Do you think about suicide?” or “Are you thinking about killing yourself?” “Do you think about hurting...?” (when? how often?)
  - **Threat Plan**- presence of and content of a plan. “Do you have a plan to hurt \_\_\_\_\_ (self / others) now?” (If so, explore how detailed the plan is by asking about time, place, means).
  - **Access**- to resources needed to follow through on identified plans
  - **Intent**- to follow through on identified plans. “How likely is it you will try to kill (yourself/ others)?”
  - **Protective Factors**- preventing an individual from following through on any threats (resiliency, self-efficacy, problem-solving and coping skills, a sense of purpose/hope/connectedness, family and other social support/connectedness).
  - **History**- of past attempts (by this student and/or knowledge from others). “Have you attempted (suicide or to hurt others) before?”
  - **Objects of Harm**- does the student have life-threatening instruments/substances on their person or in the school?
- Let the student know what steps you are going to take to help him/her. Let him/her know who you are going to contact and why. If possible have him/her make a choice about what support people they feel can best help (ex. social worker vs. counselor, mom vs. dad, etc.).
- Don’t promise confidentiality, but promise to offer unconditional support, help and privacy by reporting your concerns to only those who need to be aware to best help the student.

#### *General Tips:*

- Staff will not touch an angry and potentially violent student.
- Do not make aggressive moves and provocative statements.
- One staff member will talk to the student at a time. Individuals that might trigger the aggression are to leave or will be asked to leave the immediate area. If it’s you, remind the student that you do care about them and ask a “neutral” staff to manage the incident.
- Try to have the student relinquish means of harming self or others. Discretely remove other objects which may cause harm to the student or others.
- Give your undivided attention to the student. Try to persuade the student to agree on a better course of action to be taken.
- Calm student by talking and reassuring until backup arrives.

**Imminent Risk Response** (student has life-threatening instruments/substances he/she will not give up and/or a well thought out plan,

access to resources need to follow through on identified plans and intent to follow through on identified plans):

- Alert building principal that backup is needed.
- The building principal or his designee will contact the police or 911 if an immediate threat exists to the safety of the student or others.
- Contact the school nurse in the event of overdose or injury requiring medical attention. The school nurse or her designee will call 911 in event of an overdose or injury requiring medical attention.
- A Crisis Intervention Team member not immediately involved in the crisis will contact the student's parent/guardian and inform them of the action(s) taken.
- Determine if the student's distress appears to be the result of parent or caretaker abuse or neglect. If allegations warrant, a referral will be made to New York State Central Register (SCR) Child Abuse and Maltreatment Hotline (Mandated Reporters: 1-800-635-1522), according to normal procedure.

**Moderate Risk Response** (student had life-threatening instruments/substances, but gave it up and/or a well thought out plan, access to resources need to follow through on identified plans and intent to follow through on identified plans):

- Alert building principal.
- Determine if the student's distress appears to be the result of parent or caretaker abuse or neglect. If allegations warrant, a referral will be made to New York State Central Register (SCR) Child Abuse and Maltreatment Hotline (Mandated Reporters: 1-800-635-1522), according to normal procedure.
- If distress is apparently not related to abuse or neglect, the parents will be contacted and strongly encouraged to have the child evaluated. A list of referral sources and telephone numbers will be provided for this purpose. The counselor on call will call a head to the assessment facility of the parent's choice.
- If the parents, emergency contact, or Child Protective Services can/will intervene before the end of the school day, the student should be taken to the nearest hospital emergency room.

**Low Risk Response** (student has/had NO life-threatening instruments, student does not have a well thought out plan, does not have access to resources need to follow through on identified plans and does not have intent to follow through on identified plans):

- Alert building principal.
- Determine if the student's distress appears to be the result of parent or caretaker abuse or neglect. If allegations warrant, a referral will be made to

New York State Central Register (SCR) Child Abuse and Maltreatment Hotline (Mandated Reporters: 1-800-635-1522), according to normal procedure.

- If distress is apparently not related to abuse or neglect, the parent/guardian will be called, advised of the situation, and it will be suggested to take the student for non-urgent mental health assessment at an appropriate agency. A list of referral sources and telephone numbers will be provided for this purpose. If the parent/guardian refuses, consideration for a referral will be made to New York State Central Register (SCR) Child Abuse and Maltreatment Hotline.

### **Parent Contact:**

Parents/guardians need to be notified if there is any indication that their child is suicidal/homicidal at any level of risk. If school staff have reasonable cause to believe that a student is a threat, they must start crisis intervention process immediately. Parents/guardians must always be contacted with concerns regarding possible suicide/homicide. When talking with parents/guardians:

- The goal of the notification is to maintain the welfare of the student.
- School personnel should do their best to elicit a supportive and proactive reaction from the parents.
- A safety plan will be created in instances when a suicide/homicide risk assessment has been conducted. The plan is created by the counseling staff member who has conducted the risk assessment. The plan may include the following:
  - Discuss the need for increased supervision of the student.
  - Referrals for additional assessment and 911 in a crisis situation
  - Removal of lethal means from student's environment
  - Personal safety agreement with the student
  - Time line to follow up
  - Parents/guardians who refuse to acknowledge the seriousness of a suicidal/homicidal threats will be advised of the potential for a referral to be made to the New York State Central Register (SCR) Child Abuse and Maltreatment Hotline.
- Document all steps taken and individuals involved and notified of this concern.

### **Debriefing:**

- Inform appropriate members of the administration.
- The counseling staff member involved will meet with the building principal and/or Crisis Team to determine if the procedures outlined in this guide were followed through and to critique the handling of the situation.

### **Follow Up:**

- Determine whether long-term services have been arranged.
- If emergency, short-term or long-term services have not been satisfactorily pursued, contact Child Protective Services.
- Follow up with the student when he/she returns to school and assure him/her you are still there for them and care about them.

**Other Situations Requiring Notification to Parent/Guardian:**

The following situations require parent contact, by counseling staff and/or administration. This contact may be made by telephone or by meeting personally with the parent/caretaker.

- Self-harm (cutting, etc.)
- Substance abuse/use
- Abuse or threats by significant other
- Weapons
- Symptoms of eating disorder
- Auto erotic asphyxiation or “The Choking Game”
- Statutory rape or other sexual offenses (by non-caretaker)

## **FOLLOW-THROUGH STEPS AFTER COMPLETING A RISK ASSESSMENT**

Notify building principal.

As part of the process of assessment, efforts will have been made to discuss the problem openly and nonjudgmentally with the student.

Explain to the student the importance of and your responsibility for breaking confidentiality in the case of suicidal risk. Explore whether the student would prefer taking the lead or at least be present during the process of informing parents and other concerned parties.

Contact parents by phone to:

- inform about concern

- gather additional information to assess risk

- provide information about problem and available resources

- offer help in connecting with appropriate resources

Note: if parents are uncooperative or unavailable, it may be necessary to report New York State Central Register (SCR) Child Abuse and Maltreatment Hotline

If a student is considered to be in danger, only release her/him to the parent or someone who is equipped to provide help. In high risk cases, if parents are unavailable (or uncooperative) and no one else is available to help, it becomes necessary to contact local public agencies (e.g., Child Protection Services, local law enforcement).

Agencies will want the following information:

- student's name/address/birthdate

- data indicating student is a danger to self

- stage of parent notification

- language spoken by parent/student

- health coverage plan if there is one

- where student is to be found

Have parents sign a release and contact agency that will do risk assessment with reasons of concern.

Follow-up with student and parents to determine what steps have been taken to minimize risk.

Follow-up with agency student went to for risk assessment to determine student's safety risk and on going needs.

Document all steps taken and outcomes. Plan for aftermath intervention and support for student.

Report parents to Child Protection Services if they have not follow through with plans and recommendations.

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