After a critical incident involving a student with suicidal ideation, it is extremely important to generate an iSTAR that accurately reflects what happened, how the school responded, and what plans are in place to support the student. The following are recommendations for completing an iSTAR Incident Report when a student expresses suicidal ideation, including sample summaries and updates.

- Refer to BUL 2637.2 – Suicide Prevention, Intervention, and Postvention for policy, procedures, and helpful documents.
- Contact Local District Operations and/or the Local District Mental Health Consultant for training, support and consultation for you and your school staff regarding suicide prevention and documenting interventions.
- For consultation, contact School Mental Health, Crisis Counseling & Intervention Services at (213) 241-3841 Monday-Friday from 8:00am-4:30pm.

**Recommended Information to Include in the iSTAR Incident Report**

**Persons Involved**

1. Identify the student as a Victim, if they are exhibiting any of the categories in Suicidal Behavior.
2. Use the Student’s 10 Digit ID Number to enter the information of the student. Once you enter this ID number, the student’s information - Name, Gender, Grade, School and DOB - will auto-populate.
3. Entering the 10-digit Student ID will also populate any other incidents related to this student in this tab, just below the student’s information. If no incidents appear, there are no incidents reported in iSTAR using that student’s ID, however, this does not guarantee that there were never any previous incidents.

**Incident Summary**

1. Remember to maintain CONFIDENTIALITY at all times. The goal is to explain what happened and how the school responded, without reporting confidential information, such as the student’s mental health history, family history or other medical information protected by HIPPA laws. See below for Incident Summary Samples.
2. Explain exactly what the student stated (e.g., “I want to kill myself,” or “I don’t think life is worth living any more,” etc.), and/or explain the student’s actions (e.g., “Mark wrapped a computer cord around his neck.”).
3. Explain who conducted the Suicide Risk Assessment with the student, and note the student’s level of risk (e.g., “low, moderate, or high”).
4. Explain the short-term action plan taken by the school. This includes communication with parent(s)/guardian(s), and possibly contact with PMRT (Psychiatric Mobile Response Team) and/or law enforcement. If PMRT is involved, explain their actions and/or specific recommendations.
5. Explain the long-term action plan developed by school. This includes creating a Student Safety Plan – at home and school – identifying caring adults and appropriate communication and coping skills (see Attachment D2, Student Safety Plan). It also includes designating a staff member to carefully monitor student and check-in with student frequently until crisis has stabilized. Finally, the long-term action plan includes linking the student to appropriate mental health services.
6. If the student is hospitalized, explain the plan for re-entry (see Attachment E, Student Re-entry Guidelines).
7. Remember to UPDATE the iSTAR as the case evolves (e.g., document the outcome of the re-entry meeting).
8. Under Notify Details, be sure to indicate who you consulted with, adding individuals as appropriate.
Incident Summary Sample #1 ("Suicidal Behavior/Ideation - Non-Injury" Issue Type)

During 4th period, Math teacher Ms. Jones heard student say “I can’t take this anymore. I’m going to kill myself after-school.” PSA Counselor Mr. Smith and APCS Ms. Rodriguez conducted suicide risk assessment and concluded student was at low risk. Student’s parent was contacted. Mr. Smith met with mother to provide the Suicide Prevention Awareness for Parents/Caregivers handout, develop a Safety Plan for student at home and school, and to provide mother with referrals to both school-based and community-based counseling services. Mr. Smith will check-in with student and manage the case until crisis is stabilized.

Update (2 days later)
Mr. Smith contacted parent who reported making appointment with XYZ Mental Health Agency for Monday, May 5, 2016. Mr. Smith provided parent with an Exchange/Release of Information Form to be completed so that school and mental health provider can openly communicate about student’s treatment and progress.

Incident Summary Sample #2 ("5150/Hospitalization" Issue Type)

Student spoke with Magnet Coordinator Ms. Harris before school and said “my family is falling apart – I just don’t want to live anymore.” Principal Dr. Hill and School Psychologist Ms. Garcia completed suicide risk assessment and concluded student was at moderate risk. PMRT was contacted for consult. Team responded to school at approximately 10:00am, evaluated student, and decided to transport the student to Del Amo Hospital for evaluation. Student’s parent was contacted, and father came to school and accompanied student in ambulance transport. School Psychologist will follow-up with father tomorrow to gather more information about student’s release, and to schedule re-entry meeting with family.

Update (1 day later)
School Psychologist Ms. Garcia contacted father who stated student is set to be released after 72-hour hold. Father agreed to bring student for re-entry meeting Tuesday, May 5, 2016 at 8:30am, and will bring discharge paperwork from hospital.

Update: (4 days later)
Student and father met for re-entry meeting with Principal, School Psychologist, School Nurse, and Counselor. Discussed new medication student was prescribed, and developed Safety Plan for student at home and school. Modified student’s academic program, and obtained signed Exchange/Release of Information Form from father so that school can openly communicate with student’s new therapist about student’s treatment and progress. Counselor Mr. Jackson will check-in with student and manage the case until crisis is stabilized.

RARD

1. Complete the entire RARD Tab.
2. Check for previous incidents involving this student under the Persons Involved tab.
3. Make sure to include an explanation of any action boxes that are checked “no.”