



Recommendations for Developing a Student Safety Plan for Secondary School Students



A student safety plan should be completed after an incident involving a student who expresses suicidal ideation, is engaging in self-harm, receives a psychiatric evaluation or is hospitalized. Initial safety planning should be developed in collaboration with the student's input and should emphasize strategies that are practical. Complete a safety plan (**Attachment D4**) when the suicide risk assessment level is deemed low, moderate or high. Notify identified adults in the safety plan and provide **Attachment E –Adult Gatekeeper** handout, as appropriate. Update the safety plan as needed.

Refer to the definitions and examples below as a guide to help a student complete their safety plan (Attachment D4):

Triggers: Any situation, person, place or thing that may elicit a negative reaction or cause the student to engage in negative behaviors/self-harm. Some examples include *being alone at home, English class-writing about myself, seeing my ex best friend, gossip on social media.*

Warning Signs: These are the actions, behaviors, and observations that inform adults/staff that a student might be feeling suicidal and needs help. These can be thoughts, images, moods, situations, or behaviors. Some warning signs in students include talking, writings, posting or thinking about death; displaying dramatic mood swings; alcohol and drug use; socially withdrawing from friends, family and the community; drastic personality changes; and neglect of personal appearance. Students may indicate some of the following warning signs: *can't get out of bed, heavy breathing, failing my classes, agitated by my friends and family, feeling like I can't express myself, not wanting to do the things I used to enjoy, not caring what I look like, and/or sleeping too much/not enough.*

Coping Skills/Healthy Behaviors: These are positive actions and behaviors that a student engages in to help them through their struggles on a daily basis. Some coping strategies include activities that students can do in order to regulate his/her emotions (include some things he/she can do in classroom and on the school yard, and some things he/she can do at home); ask the student for input, and teach him/her additional strategies if necessary. Strategies may include *slow breathing, yoga, play basketball, draw, write in journal, take a break from class to drink water, listen to music.*

Places I Feel Safe: These are places that the student feels most comfortable. It should be a safe, healthy, and generally supportive environment. This can be a physical location, an imaginary happy place, or being in the presence of safe people. Help students identify a physical and/or emotional state of being. Places may include *my 2nd period class, health office, with my friends, youth group at church, imagining I am on a beach watching the waves.*

School Support: Any school staff member or administrator can reach out and check in with a student regularly. Notify student's teacher(s) and request monitoring and supervision of the student (keeping in mind not to share confidential information). Emphasize that teacher(s) must notify school-site crisis team members about any safety issues or concerns. Some examples of school support may include *Counselor Mr. Jones, Teacher Mr. Doe, Teacher Assistant Ms. Jane, and After-School Staff Ms. Smith.*

Adult Support: It is important that a student feels connected with trusted adults at home or in their community. The student should trust these adults and feel comfortable asking for help during a crisis. Identify how student will communicate with these individuals and include a phone number when available. Some adults may include *family members (e.g., grandparent, aunt, uncle, and adult sister), family friends, and religious leaders (e.g., clergy, youth pastor).*

Parent/Guardian Support:

- Parent(s)/guardian(s) should follow-up with hospitalization discharge, medications and recommendations.
- Parent(s)/guardian(s) should be mindful of the following warning signs: suicidal ideation, talking, writing posts and thinking about death, dramatic mood changes, impulsive or reckless behavior, withdrawal from friends, family or community, and previous attempt.
- Parent(s)/guardian(s) should:
 - Secure all objects and materials that could be dangerous to student. If student states she would kill herself with a knife, then plan should include securing knives and sharp objects in home. If student states she would use a gun, then plan should include removing/securing firearms from home.
 - Alter home environment to maintain safety (e.g., if student talks about killing herself by jumping out a window, plan should include recommending ways to secure).
 - Monitor and supervise the student. Help parent/guardian think about who will monitor the child when they cannot (e.g., while parent/guardian is at work student will stay with a trusted adult; student will accompany parent to run errands), and parents/guardians should have access to students' social media accounts.
- Ask for ideas from the student regarding ways their parent/guardian can support them, such as *spending time with family and friend; watching movies with mom; dad will pick me up from school; or going to counseling with mom once a month.*

Case Carrier Support: The case carrier is a school-site crisis team member who has been identified by the administrator/designee to follow-up with the student and monitor action/safety plans developed for the student. The support offered may include strategies to manage, monitor, and check-in with the student. The case carrier may collaborate with the outside mental health agency providing services and ensure that there is a Release/Exchange of Information form signed and on file. Additional case carrier support may include: *monitor daily logs; check-in meeting with student twice a week for the first month, then reassess safety and determine appropriateness of meeting once per week; monitor grades and attendance; maintain weekly contact with community agency/therapist that may be providing services.*

Signatures: The student, case carrier, and parent/guardian should review and sign to acknowledge the safety plan. Written parental consent is required to reach out to trusted adults identified on the student's safety plan from the home/community, in the Adult Support section. Parents/guardians may consent by initialing the consent line in this section.