

Protocol of action in case of suicidal behaviour



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Suicidal behaviour is a phenomenon that is based on a deep psychological suffering and discomfort that prevents the continuation of life and for which there is no alternative way out or solution in sight (WHO, 2001). In this complex and multi-causal phenomenon, the following environmental, family and individual risk factors are described as the basis.

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| ENVIRONMENTAL | <ul style="list-style-type: none"> • Low social support. • Inappropriate dissemination of suicides in the media and social media. • Discrimination (LGBTI, indigenous peoples, migrants, etc.). • Harsh or arbitrary educational practices. • High academic demands. • Laws and community norms favourable to the use of illegal substances, firearms. • Community disorganisation and/or conflict. • Barriers to accessing health care and stigma associated with seeking help. |
| FAMILY | <ul style="list-style-type: none"> • Mental disorders in the family. • Family history of suicide. • Socio-economic disadvantage. • Stressful events in the family. • Deconstructing or significant changes. • Problems and conflicts. |
| INDIVIDUALS | <ul style="list-style-type: none"> • Mental health disorders (mood disorders, schizophrenia, alcohol and other drug abuse). • Previous suicide attempt(s). • Stressful life events (break-up, bereavement). • Suicide of a significant peer or significant other. • Hopelessness, pessimistic cognitive style. • Physical and/or sexual abuse. • Victim of bullying. • Self-harming behaviours. • Persistent suicidal ideation. • Disability and/or chronic health problems. • Developmental difficulties and delays. • School difficulties and/or stress. |

Source: Prepared by the authors based on Barros et al., 2017; Manotiba's Youth Suicide Prevention Strategy & Team, 2014; Ministry of Health, 2012; WHO, 2001; PAHO & WHO, 2014, Recommendations for the prevention of suicidal behaviour in educational establishments. MINSAL 2019.

Suicidal behaviour can be expressed as suicidal ideation, attempted suicide and completed suicide.

Suicidal ideation involves thoughts and wishes to die, to harm oneself, as well as planning how to carry out the suicide.

Attempted suicide involves behaviours or acts in which the person intentionally seeks to cause harm to him/herself to the point of death, without actually committing suicide.

Suicide is the voluntary and intentional ending of life. The predominant characteristic is fatality and premeditation.

(MINSAL, 2013)

The following protocols for action in case of suicidal behaviour are described below.

- i. **Suicidal Ideation Action Protocol**
- ii. **Protocol for action in case of Attempted suicide**
- iii. **Protocol of action in case of Suicide**

i. Suicidal Ideation Action Protocol

1. Any member of the community who has become aware of the presence of suicidal ideation in a student shall immediately inform the Head or Deputy Head of the Section and the Director of the Formative Area or his or her deputy.
2. The Head of Section and/or the Director of the Formative Area must report to the Head of School of this situation as soon as they receive the information.
3. The student who presents suicidal ideation must remain in the offices of the Formation Area or in the school infirmary, accompanied by an adult who can contain him/her at this time (section psychologist, tutor, nurse) while the parents are contacted so that they can come to the school to pick him/her up.

4. The Formation Area Director or the Section psychologist must contact the parents immediately, either to meet in person, by telematic means or by telephone, to share the situation that is troubling the pupil.
 5. Parents should urgently consult a child and adolescent psychiatrist or go to an emergency department for a psychiatric evaluation of the student.
 6. The Head of Section or the Section Psychologist will inform the tutor of this situation.
 7. The Head of Section or Deputy Head of Section and the Section Psychologist will meet with the parents after the student has been assessed by a child and adolescent psychiatrist, agreeing the support that will be required from the school.
 8. Before the student returns to school, parents must present the Head of section and to the Formative Area Director or Section Psychologist a certificate from the treating psychiatrist, stating that the student is fit to return to school, his/her diagnosis and the support or measures that will be required from the school system.
 9. The Director of the Formative Area and the Section Psychologist will meet with the Coordinator Nurse to provide information regarding the pupil's situation and the support that she/he will require from the Nursing point of view.
 10. The Head or Deputy Head of section together with the Section Psychologist will meet with the tutor and the student's subject teachers to share relevant general information about the student's emotional state and the support that will be required.
 11. The Section Psychologist will contact the student's psychiatrist or psychologist in order to coordinate actions to support the student and share views regarding his/her evolution.
 12. The Section Psychologist will meet with the student on a regular basis to accompany him/her in this process. The frequency of these meetings will be defined jointly with the family and the external treatment team.
- ii. Protocol for action in the event of a Attempted Suicide**
- If it occurs at school:**
1. Any member of the community who has become aware of a attempted suicide of any kind by a student should go immediately with the pupil to the school infirmary. An assessment of the student's state of health will be made and action will be taken in accordance with the school infirmary regulations. Then the school nurse should immediately inform the Head of Section or Deputy Head of Section and the Director of the Formative Area or his replacement of the situation.
 2. The Director of the Formative Area or Section Psychologist, together with the school nurse, must telephone the parents to inform them of the emergency and that the pupil will be taken in case the parent is absent by ambulance to the Emergency of Clinica Alemana, accompanied by a nurse or paramedic. Subsequently, and once

- the emergency has been treated, and if the pupil is being treated by a child and adolescent psychiatrist, she/he may be evaluated by his/her treating specialist.
3. The Head of Section and/or the Director of the Formative Area must report to the Head of School immediately, as soon as they receive the information.
 4. The Head of Section or the Section Psychologist shall inform the tutor of this situation.
 5. The Head or Deputy Head of Section together with the section psychologist will meet with the parents after the pupil has been assessed by a child and adolescent psychiatrist, agreeing on the support required from the school.
 6. Before the student returns to school, parents must present to the Head of section and to the Formative Area Director or Section Psychologist a certificate from the treating psychiatrist, stating that the student is fit to return to school, his/her diagnosis and the support or measures that will be required from the school system.
 7. The Director of the Formative Area H or the Section Psychologist will meet with Nursering Coordinator to share information about the student's emotional state and the support that will be required from the Nursing point of view.
 8. The Head or Deputy Head of Section together with the Section Psychologist will meet with the tutor and the pupil's subject teachers to share relevant general information about the student's emotional state and the support that will be required.
 9. The Section Psychologist will contact the student's psychiatrist or psychologist in order to coordinate actions to support the student and share views regarding his/her evolution.
 10. The Section Psychologist will meet with the student on a regular basis to accompany him/her in this process. The frequency of these meetings will be defined jointly with the family and the external treatment team.

If it occurs outside school:

1. If a pupil at school presents an attempted suicide outside school, parents should immediately inform the Head or Deputy Head of Section and the Head of the Formative Area.
2. The Head of Section and/or the Head of Formative Area must report to the Head of School immediately, as soon as they receive the information.
3. The Head or Deputy Head of Section and the psychologist of the section shall meet in person or by telematic means with the parents to obtain further background information and to be informed of the assessment carried out by the child and adolescent psychiatrist.
4. Before the student returns to school, parents must present to the Head of section and to the Formative Area Director or Section Psychologist a certificate from the treating psychiatrist, stating that the student is able to return to school, his/her diagnosis and the support or measures that will be required from the school system.

5. The Director of the Formative Area o Section Psychologist with the Nursering Coordinator will meet to share relevant general information about the student's emotional state and the support that will be required from the Nursing point of view.
6. The Head or Deputy Head of Section together with the Section Psychologist will meet with the tutor and the pupil's subject teachers to share relevant general information about the student's emotional state and the support that will be required.
7. The Section Psychologist will contact the student's psychiatrist or psychologist in order to coordinate actions to support the student and share views regarding his/her evolution.
8. The Section Psychologist will meet with the student on a regular basis to accompany him/her in this process. The frequency of these meetings will be defined jointly with the family and the external treatment team.

iii. Action protocol in case of a suicide

1. In the event of a death at school, presumed suicide, the infirmary will be notified immediately and will contact the Emergency Department of the Clínica Alemana, so that a doctor can come and certify the death.
2. The Head of School, together with the Director of the Formative Area, will immediately contact the parents to inform them of what has happened, and will remain attentive to what the family may require.
3. In the event of death occurred outside the school, the Head of School and the Director of the Formative Area will meet with the parents of the pupil to obtain official information about the cause of death, and that it is suicide.
4. The Head of School will meet with the Director of the Formation Area and the relevant Section Head to determine the next steps to be taken with regards to the pupils of the school and the wider community.
5. The Head of School together with his team will determine whether it is necessary to work with an external institution specialised in crisis support.

REFERENCES

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3. OMS. (2001). Prevención del suicidio: un instrumento para docentes y demás personal institucional. Ginebra: Departamento de Salud Mental y Toxicomanías, Organización Mundial de la Salud.

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