

Wongan Hills District High School



Positive Behaviour Support Policy

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Wongan Hills District High School

Behaviour Support Policy and Procedures

Introduction

This policy aims to foster a positive attitude towards learning and the development of social skills in a caring community. It is our intention that this will help create a school culture of consistency and that is based on a common language which is used by all; leading to improved educational outcomes. The policy articulates our school beliefs, expectations, and processes for behaviour support at Wongan Hills District High School (WHDHS) in alignment and compliance with the Department of Education's Student Behaviour in Public Schools policy and procedures.

We will be working to achieve our school vision of 'Pursuing Excellence' and create and maintain a safe learning environment for students that minimises disruptions to learning.

At Wongan Hills District High School we provide a safe, inclusive and stimulating environment. This is crucial to support the development of the whole child. Positive student behaviour is essential to promote engagement in learning and to maximise the impact of classroom teaching.

Our purpose is to develop, implement, review then embed a schoolwide behaviour support policy that fosters a consistent whole school understanding of expected behaviour through clear and explicit expectations, language and actions. Differentiation through age-appropriateness is also required at times. This also means that, at times, some students on Individual Behaviour Support Plans (IBSP) or with certain disabilities, may operate outside of this policy.

Links to Department of Education Policy

The Department of Education (DoE) overarching policy requests schools to create a safe, orderly, inclusive, supportive, and culturally responsive environments that enable students to fulfil their learning potential. This is a responsibility shared by all members of the public schooling system and each school community.

Schools endeavour to provide every student with the support they need to learn and maintain positive behaviour. WHDHS seeks to implement this through consistent and clear expectations and a school wide approach to managing and responding to unproductive student behaviour.

School Beliefs

At Wongan Hills District High School we believe in:

- Building and sustaining positive relationships with the community
- A school culture of high expectations
- Ensuring a safe and supportive school environment
- Leadership being shared
- A whole school approach to support positive behaviour
- A commitment to environmental responsibility and sustainability

The Wongan Way – Whole School Expectations

Our school community has explicit expectations for behaviour of all members with a view to creating a school that is a safe, positive learning environment where our students are engaged and successful.

The Wongan Way outlines the key expectations that are expected across all areas of the school.

The Wongan Way expectations are:

- BE RESPECTFUL
- BE SAFE
- BE POSITIVE
- BE AN ACTIVE LEARNER

The premise for these expectations includes:

- All students have a right to learn
- All teachers have a right to teach
- Each person is responsible for their own behaviour
- Each person has the right to work out problems which arise
- Each person has the right to have their property respected and work in a safe and attractive environment

Positive Support Strategies

Our staff focus will always be to encourage and recognise positive behaviour and develop and maintain positive relationships within the WHDHS school community. This applies equally in and out of the classroom. Strategies and incentives, such as the following, are some of the strategies used at Wongan Hills DHS.

- Challenging and engaging lessons
- Modelling of desired behaviours to students by staff as per the Wongan Way
- Student recognition in class
- Development of positive relationships through getting to know students
- Positive communication with parents - phone calls/emails
- Opportunities for student voice and student leadership
- Honour certificates
- Aussie of the Month
- Wongan Way positive recognition process (Wongan Way Points)
- Student Council Rewards
- Public recognition through newsletter, Facebook and assemblies
- Staff trained in Classroom Management Instructional Strategies (CMS)
- Consistency across all staff with rules and expectations
- Classroom reward systems
- Incursions, excursions and camps

Processes and Procedures – Positive Behaviour Support

Positive Behaviour Support is a whole school framework for enhancing, adopting and implementing a continuum of evidenced based interventions to achieve academically and behaviourally important outcomes for all students. It is a collaborative, community owned, approach to behaviour, individualised to meet the

specific needs of our school and grow with Wongan Hills DHS. The framework is designed to be dynamic and evolving, changing where required to meet areas of need determined by data collected within the school.

Our policy is built around a core belief that positive behaviour can be taught. At our school, behaviour is viewed as another teachable aspect of the school curriculum. We offer students a supportive environment with consistent behavioural expectations where positive behaviour is part of the explicit teaching and learning program within the school.



Research has shown that the effective implementation of a Behaviour Support Policy can achieve:

- Improved student attendance
- Students viewing school as a more positive and calmer environment
- Teachers reporting a more positive and calmer environment and improved relationship with students
- A reduction in the proportion and number of behavioural disruptions to student learning
- An increase in student academic performance

Wongan Hills DHS has a **three tiered approach** to managing student behaviour. We acknowledge that different levels, and types, of behaviour require different management and support strategies. We also recognise that all children are different and one plan does not fit all students. Therefore, some children will require Individual Behaviour Support Plans (IBSPs) that help target their individual needs.

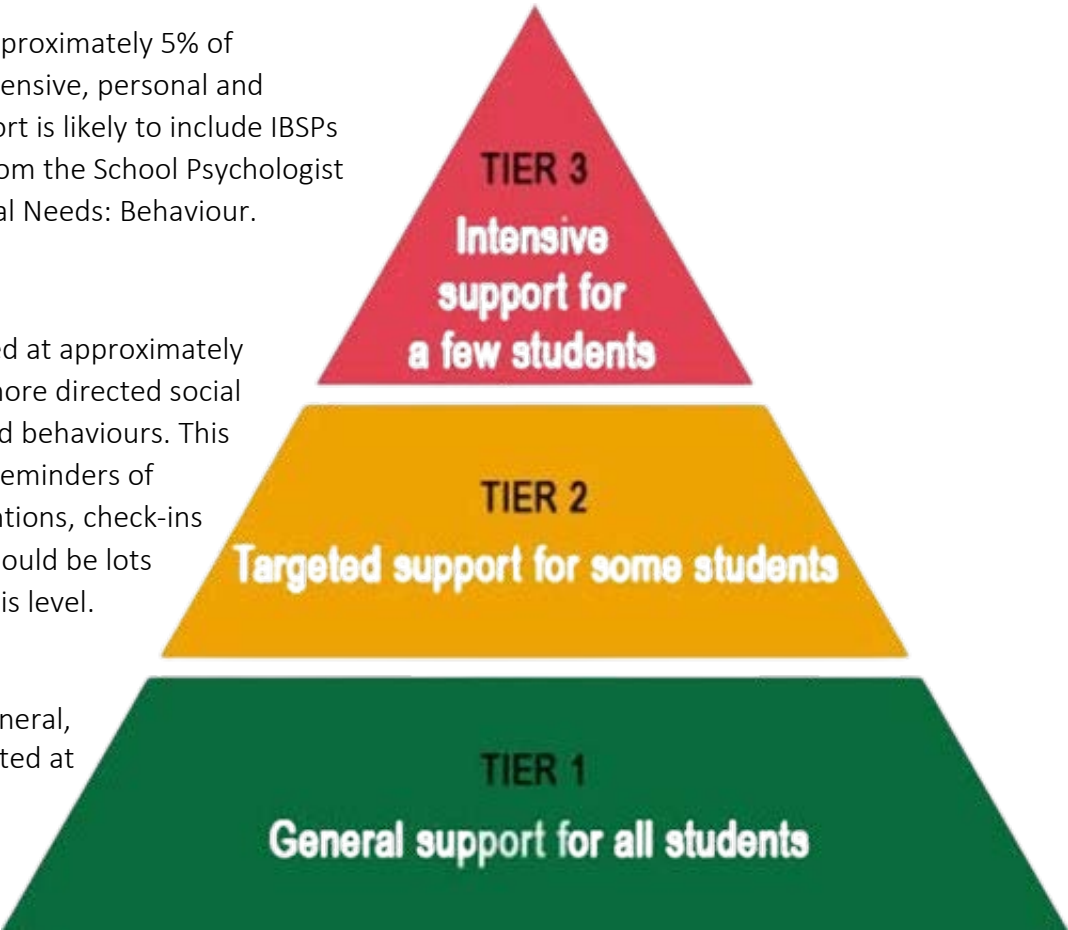
Three-tiered levels of support

Tier 3 support is directed at approximately 5% of students who require more intensive, personal and specialised support. This support is likely to include IBSPs and external school support from the School Psychologist or School of Special Educational Needs: Behaviour.

Tier 2 targeted support is aimed at approximately 15% of learners who require more directed social support to display the expected behaviours. This support may look like regular reminders of expectations, scripted interventions, check-ins or monitoring sheets. There should be lots of positive reinforcement at this level.

Tier 1 support embraces a general, whole-school approach targeted at the majority of students. It is effective for over 80% of students. Examples of Tier 1 supports

look like explicit teaching of behavioural expectations and social-emotional competencies, clear and consistent boundaries in place, high rates of acknowledgement for expected behaviours, active supervision, quality instruction and effective use of classroom management strategies.



In summary:

Tier 3 involves intensive intervention for students with the most complex needs.

Tier 2 involves the school having a plan to notice and intervene when students demonstrate risk factors.

Tier 1 represents practices that enable most students to experience success.

Each level, all three tiers, can be effectively implemented using the cyclical process described on the next page.



Five-steps for implementing Positive Behaviour Support

1. **Expectations** – setting and communicating clear expectations eliminates uncertainty and sets targets.
2. **Modelling** – staff should model and reinforce positive behaviours, illustrating what the behaviour looks and feels like.
3. **Consistency** – maintain consistency of processes so that students know what to expect. When there is consistency; students view this as fair.
4. **Acknowledgement** – positively acknowledge attempts that students make toward their target behaviours.
5. **Evaluation** – Evaluate the merit of each strategy regularly to ensure that it is working the way it should be.

THE PROVISION OF INDIVIDUAL STUDENT BEHAVIOUR SUPPORT

WHDHS will provide individual student behaviour support where the need is identified through:

1. Monitoring students whose behaviour needs are not adequately met by the whole school support policy.
2. Utilising information received from the student and parent(s) to inform any Behaviour Support Plans.
3. Accessing the School Psychology service.
4. Utilising Chaplain support.
5. Classroom observation (mostly by staff trained in Functional Behaviour Analysis and Classroom Management and Instructional Strategies).
6. Reviewing records of enhancements in behaviour support and their outcomes.
7. Liaising with external agencies or experts (e.g Child & Adolescent Mental Health Services).
8. Seeking advice from regional office, Statewide Services staff or the Schools of Special Educational Need.

INCENTIVES TO ACKNOWLEDGE POSITIVE BEHAVIOUR

Verbal Feedback

Students displaying our behaviour expectations are given verbal feedback, reinforcing positive behaviour choices.

Wongan Way Points

Wongan Way points are issued by any staff member who 'catches' a student demonstrating the Wongan Way values without prompting (safe, active learner, positive, respectful). The points are dropped into the phase of learning tubes for weekly prize draws. Each week individual points are tallied, going towards a big end of term reward. Extra draws will occur at assemblies twice a term.



In-Class Rewards:

Class teachers must implement reward systems for students in their class, e.g. stickers, stamps, certificates, Wongan Way points, extra IT time, cooking activity, outside games.

Classroom and Office Visits:

Students that demonstrate effort into their work, vast improvement or good achievement can be sent to other classes, Deputy Principals or Principal to showcase their work where they will likely receive a sticker/prize.

Contact with Parents/Caregivers:

At WHDHS we value communication with parents/caregivers. Some of the ways we provide positive feedback to parents/caregivers include:

- Verbal feedback
- Phone calls
- Emails

Honour Certificates:

Honour certificates are handed out at assemblies in recognition of either academic achievement, progress or positive behaviour.

Aussie of the Month:

Aussie of the Month is an award given for students who consistently demonstrate exemplary behaviour, as nominated by staff. Each phase of learning recognises one student from their phase at each assembly. At the end of the year, this commendation is celebrated with an invitation to a celebratory luncheon with their peers and the principal.

BEHAVIOUR MANAGEMENT IN THE CLASSROOM - FLOWCHART

PRESERVATION

- Encourage, teach, model and reward positive behaviour.
- Reinforce classroom expectations/Wongan Way
- Expected behaviour demonstrated?

NO

LOW KEY BEHAVIOURS

- Use of CMS strategies including proximity, gestures, use of name, eye contact
- Explicitly state expected behaviour and what the next stage will be
- Expected behaviour demonstrated?

NO

NOTIFICATION STAGE – 1st WARNING

- Verbally give student first warning
- Visual Cue (e.g name moved)
- Restate expected behaviour and ask if they need help to move forward.
- Expected behaviour demonstrated?

NO

ISOLATION STAGE – 2nd Warning

- 2nd warning
- Student isolated within the class (5-10 min)
- Private dialogue of expectations and strategies to move forward.
- Expect student to be calm and to acknowledge expected behaviour before re-joining class.
- Expected behaviour demonstrated?

NO

REFLECTION STAGE IN BUDDY CLASS

- 3rd warning, explain what expectations were not met and refer student to buddy class (10-15 minutes)
- Student to complete reflective behaviour sheet (RBS).
- RBS discussed and Restorative Practice completed with teacher (when appropriate)
- Parent Notified
- Expected behaviour demonstrated?

NO

INTERVENTION STAGE

- Student to meet with Deputy or Principal
- Parents notified.
- Development of Individual Behaviour Management Plan and/or Daily Behaviour Monitoring Sheet
- Documented review and monitoring of behaviour.

ESCALATION

Depending on the level of the severity of their behaviour, students may be escalated to a high level of intervention at the discretion of the school staff.

SEVERE OR ONGOING BEHAVIOURS

- Further sanctions as determined by the Principal or Deputy Principal.
- Sanctions will be in alignment with the DET policies.
- Engagement of Support Service such as School Psychologist, SSENBE
- Parent conferences
- Continued monitoring of student behaviour.
- Further development and review of Individual Behaviour Management Plan.
- IBMP's will be developed with the student and parents/carers.

RESTORATIVE PRACTICES

- Using RBS as a prompt, or during a return from suspension, the following questions will be discussed.

WHEN STUDENT CAUSES HARM

- What happened?
- What were you thinking at the time?
- What have you been thinking about since?
- Who has been affected by your actions? In what way?
- What do need to do to make things right?

WHEN SOMEONE HAS BEEN HURT (PHYSICALLY OR EMOTIONALLY)

- What did you think when you realised what had happened?
- What impact has this incident had on you? Others?
- What has been the hardest thing for you?
- Who else was involved?
- What do you think needs to happen to make this right?

Staff will support students to restore relationships.

Levels, and examples, of Unexpected Behaviour

These lists are examples of just some of the behaviours that may be observed, and at what level these behaviours are dealt with. Please note that different circumstances may apply at times, and all factors need to be considered in each situation.

Minor Behaviours Teacher Managed	Major Behaviours Administration Managed
<p>Classroom:</p> <ul style="list-style-type: none"> • Calling out • Distracting/annoying others • Off task / distracted • Work avoidance • Damaging peer property (minor) • Being disrespectful • Being late for class • Not following/ignoring instructions • Interrupting • Not using equipment appropriately • Answering back / back chat • Poor attitude/tone • Careless use of school furniture • Not being prepared • Incomplete work • Out of their seat • Taking equipment without asking • Indirect swearing- inappropriate language • Physical contact (accidental & low level) • Harassment <p>Outside the classroom:</p> <ul style="list-style-type: none"> • Out of bounds • Littering • Toilet: being silly • No hat out of structural shade • Eating in a non-designated area • Playing in the wrong phase area • Unkind, exclusion of others • Annoying others • Harassment or being disrespectful • Taking peoples' hats • Unsafe games/rough play • Arguing over games • Leaving undercover area before they have been dismissed • Physical contact (accidental & low level) 	<ul style="list-style-type: none"> • Physical aggression with intent to cause harm • Minor behaviours have continued after returning from buddy class and completing reflection sheet • Ongoing minor behaviours over more than a day • Verbal abuse of others (including use of offensive language, direct swearing) • Repeated work avoidance • Deliberate disruption to classroom • Repeatedly refusing to go to a lesson • Leaving the class without permission (out of sight) • Repeated defiance, which may or may not result in unsafe behaviour • Stealing • Leaving school grounds • Drugs / weapons, other illegal activity • Inappropriate use of technology on school site. • Deliberate damage of school, or others, property • Bullying • Repeated non-compliance • Intimidation and threatening behaviour towards other students or staff

School and Playground Expectations



1. Chewing gum is not permitted by staff or students
2. Energy drinks, caffeinated drinks and high sugar drinks (eg softdrink) are not permitted to be brought to, or consumed at, school by students
3. During class time, students are not to be out of class without a red pass
4. Balls are not to be kicked in the quadrangles or undercover area
5. Balls are not to be kicked out of line of sight (over trees, structures, buildings)
6. Hats are to be worn when not under structural shade
7. Shoes may be removed for outdoor play, including on the oval in breaks
8. The first ten minutes of eating at lunchtime must see students seated in designated areas and all rubbish needs to be cleaned away before dismissal
9. Rooms should be left in a neat, tidy and orderly state of presentation
10. The Zones Room should be left the same way it was found, or better
11. Squirting and spitting of water is unacceptable
12. Students are to attend class with the necessary materials, and if this is not possible, promptly request assistance from staff to be prepared
13. Students are expected to participate in all lessons, unless there is a medical or cultural reason provided by a parent/carers

WHDHS Behaviour Support and Links to The Circle of Courage



The Circle of Courage identifies four universal growth needs as **belonging, mastery, independence, and generosity**. These provide a safe, respectful, and disciplined learning environment for students and staff, where students have opportunities to engage in quality learning experiences and acquire values supportive of their lifelong wellbeing. The Circle of Courage is a Wheatbelt Education Region priority.

Belonging: Fostering a sense of belonging in children at school is paramount for their overall wellbeing and academic success. When children feel that they are an integral part of the school community, they are more likely to engage actively in learning, exhibit positive behaviours, and develop essential social and emotional skills. A strong sense of belonging can also act as a buffer against mental health challenges, as children who feel connected and valued are less prone to feelings of isolation, depression, and anxiety.

How do we try and meet this need?

- Through setting clear expectations for positive behaviour
- By the school community taking an active approach to decreasing bullying
- Through celebrating student's contributions, their uniqueness and individuality
- By incorporating cooperative learning strategies
- By having students work together in diverse groups, helping promote mutual respect and understanding.
- Through providing opportunities for students to share about their backgrounds, interests, and experiences.

Mastery: When we talk about mastery, we are not talking about perfection but rather the engagement in activities and tasks, with sufficient supports in place to allow individuals to feel good about both their efforts and accomplishments. This builds confidence to be more prepared to have a go. Students will require various levels of support to reach their unique potential. Without support, there can be frustration, giving up easily and not enjoying the learning process. This is true with new rules, academics, sports, hobbies, and even social situations.

How do we try and meet this need?

- Allowing students opportunity to 'fail safely' and experiment in their learning.
- Viewing failure as a learning experience and helping them to reflect on the next time.
- Scaffolding new ideas; I do, we do, you do.
- Teaching problem solving, rather than problem solving for them.
- Encouraging persistence by not letting students just give up or see things as too hard.
- Celebrating success when mastery is achieved and letting them share it by helping others.
- Encouraging students to then further their knowledge, seek new pathways.

Independence: Independence allows our students to be involved in determining their own futures while still understanding the consequences of their behaviours. Children need opportunities to develop self-sufficiency and self-governance. This is accomplished by being given opportunities to accept responsibility and prove themselves trustworthy. From these learning experiences, our students can develop the ability to self-manage their actions and make good choices. They learn how their decisions influence their destiny. Students

with a strong sense of 'independence' feel in control of themselves, their behaviour, and their lives and believe they can think and do for and by themselves.

How do we try and meet this need?

- Restorative conversations and practices
- Through our Zones of Regulation Social/Emotional Learning program and teaching self-regulation strategies (including how their behaviours affect others)
- Behaviour Monitoring Sheets to restore responsibility for behaviour and Good Standing.
- Giving opportunities for responsibility and trust
- Through classroom 'circle' discussions, giving opportunities for assertiveness and confidence.
- Linking our Wongan Way values to the importance of these in everyday situations; safety, respect, positivity, active learning
- Offering and encouraging student leadership through different forms

Generosity: By promoting selflessness in our students, we are developing empathy and engaging them in caring for others. By allowing students to experience feeling valuable when they can have empathy for and provide support to others.

How do we try and meet this need?

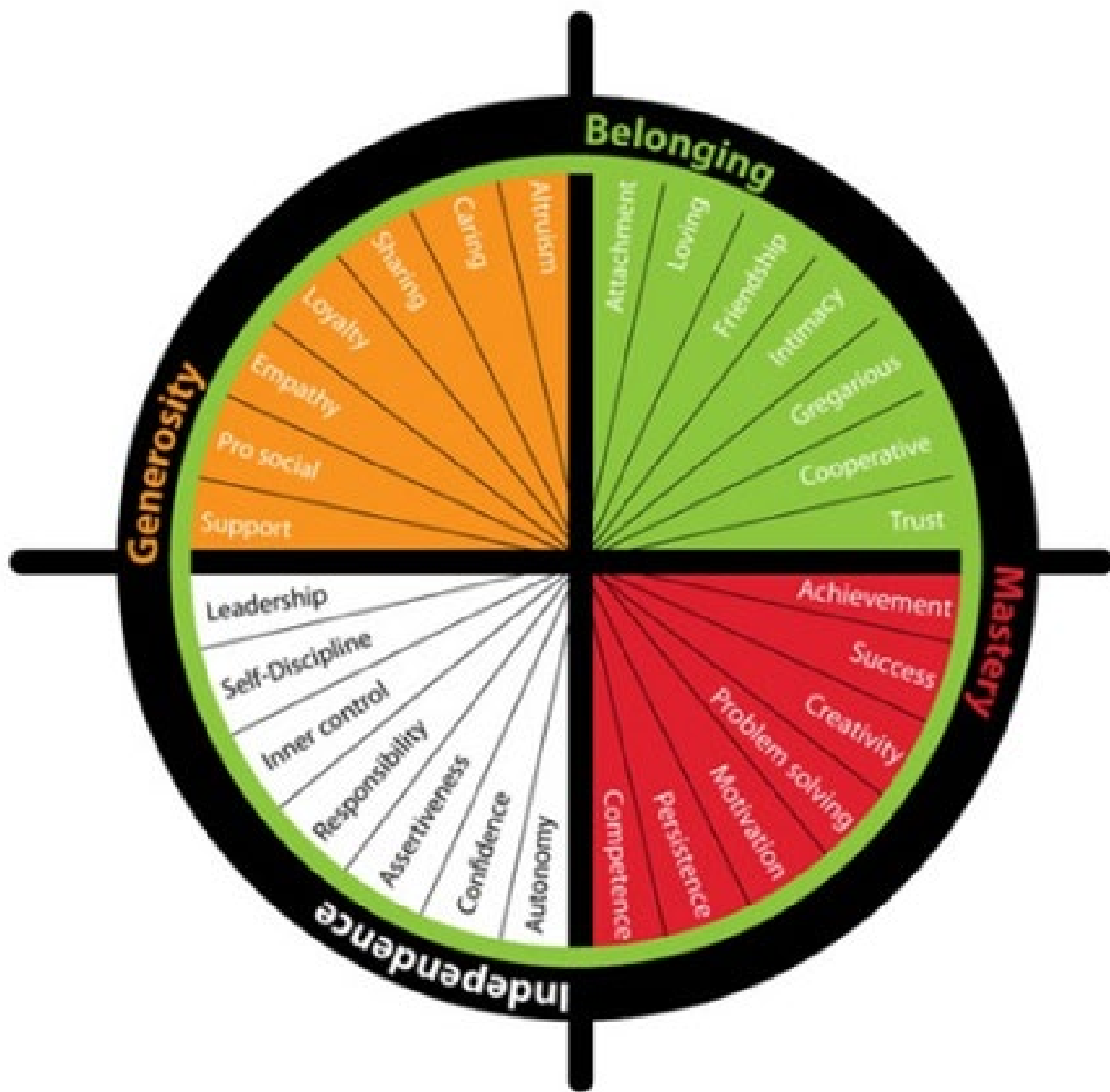
- Through employing restorative conversations and practices to build empathy
- By promoting peer teaching moments to allow students to support others
- Through the incorporation of service programs that promote volunteering and giving of time, such as Cadets
- Through the explicit teaching of social skills
- Through the lessons used in the Zones of Regulation program

Belonging at school is when every student believes they are valued, seen, heard, and cared for.

Mastery at school is when every student believes they can achieve despite their challenges.

Independence at school is when every student believes they have the power to make decisions that will impact their own lives.

Generosity at school is when every student believes they have a purpose for their lives that can positively contribute to the world.



Students, Educators, Parents and Leadership - Roles and Responsibilities

Rights	Responsibilities
<p><i>Be Respectful</i> Everyone has the right to be treated with Respect</p> <p><i>Be Safe</i> Everyone has the right to feel safe within our school</p> <p><i>Be Positive</i> Everyone has the right to work in a positive environment</p> <p><i>Be an Active Learner</i> Everyone has the right to educate and be educated. They have the right to be collaborate, communicate and participate in the learning.</p>	<p><u>Students</u> have the responsibility to:</p> <ul style="list-style-type: none"> Model respectful, courteous and honest behaviours Establish positive partnerships with the school Demonstrate courtesy, respect and care towards others and themselves To care for property To care for their learning and play environment Engage openly and honestly in restorative sessions with staff and students when harm has been done Accept responsibility for their actions and approach conflict with a solution focus and intent to repair harm Be tolerant of others Respect others' rights Behave in a way that protects the safety and wellbeing of others Report unsafe behaviour and environment issues Participate actively in the school education program and their learning Cooperate with staff and other students Behave in a manner that respects the rights of others, including the right to learn and the right to feel safe Reflect on their own behaviour and learning goals Acknowledge the role of teachers and staff to provide direction and maintain expectations <p><u>Educators</u> have the responsibility to:</p> <ul style="list-style-type: none"> Model respectful, courteous and honest behaviours Establish positive partnerships with the school and staff Build positive relationships with students, parents and community Develop a classroom based behaviour and reward system to support the Behaviour Support Policy. Model respectful, courteous and honest behaviours Explicitly teach behavioural, resiliency, social and emotional skills Promote safe behaviours Respond to harmful behaviours with a solution focus to repair damage and repair harm Address occurrences where behaviour expectations are not met, promptly Develop and maintain a positive classroom environment Acknowledge consistent application of the Department of Education Code of Conduct Maintain appropriate records of student behaviour using the WHDHS school processes Consistently apply the WHDHS Student Behaviour Support Policy Provide inclusive and engaging curriculum and teaching Differentiate curriculum for students, catering for individual needs and differences Demonstrate culturally inclusive practices Initiate and maintain communication and relationships with parents regarding their child's learning, wellbeing and behaviour Treat all students with respect Develop, teach and maintain familiar school and class routines Communicate with students and parents/carers constructively, and in a timely manner. Face to face or by phone as a first option Consistently use Classroom Management and Instructional Strategies (CMS) training to promote engagement and inclusion and reduce unexpected behaviours

<p>Be Respectful Everyone has the right to be treated with Respect</p> <p>Be Safe Everyone has the right to feel safe within our school</p> <p>Be Positive Everyone has the right to work in a positive environment</p> <p>Be an Active Learner Everyone has the right to educate and be educated. They have the right to be collaborate, communicate and participate in the learning</p>	<p>Parents have the responsibility to:</p> <ul style="list-style-type: none"> Model respectful, courteous and honest behaviours Establish positive partnerships with the school Ensure that their child attends school daily, unless genuinely unwell Ensure that their child is provided with appropriate materials to make effective use of the learning environment, and liaise with the school for support if unable to do this Support the school in providing a high-quality education to ensure the life-long success of their children Respond to harmful behaviours with a solution focus to repair damage and repair harm Communicate to the school relevant information that may affect their child's learning and wellbeing Show an active interest in their child's schooling and progress Work in a partnership with the school to achieve the best outcomes for their child (social, emotional and educative) Initiate and maintain communication and relationships with school staff regarding their child's learning, wellbeing and behaviour Contribute positively to support plans concerning their child (Individual Education/Behaviour Plans, Risk Management Plans) Contribute actively towards a positive environment through volunteering in the classroom and school events where possible and displaying an interest in their child's education <p>Leadership Team have the responsibility to:</p> <ul style="list-style-type: none"> Model respectful, courteous and honest behaviours Establish and maintain positive partnerships with parents and staff Ensure all staff consistently model and reinforce this policy, the WHDHS Expected Behaviours, Positive Behaviour Support Plans, and procedures through school accountability processes, including classroom observation and feedback Respond to unexpected behaviours with a solution focus and intent to repair harm Maintain and support the Behaviour Support Policy committee. Recognise and encourage positive behaviours. Support teachers when responding to harmful behaviours. Ensure that IBSP/Risk Management plans are in place, and communicated to staff, for students at risk or with significant behavioural concerns, including students who are at risk of suicidal behaviour and/or non-suicidal self-injury. Ensure the above plans are developed and implemented promptly where required, and revised and communicated with necessary stakeholders on a regular basis
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Expectations for Start of Day and Lesson Transitions

At Wongan Hills DHS it is expected that all students at the start of the school day will,

- 1) In Nyingarn to Yaakan 3, start their classroom learning at 8:50am, students may enter from 8:30am to set up for the day. May attend Breakfast Club from Kwilena 1 – Yaakan 3 under teacher direction
- 2) Koolbardi, Kwilena 1 and Yaakan 3 are expected to complete Daily Reading with parent volunteers on roster from 8.30-8.50, in class.
- 3) From Maali 6 – Yongka 8, students will come to the classroom, set up their learning space and complete morning classroom routines before attending Breakfast Club or joining in morning play. At 8:50am they are expected to be in the classroom ready to learn.
- 4) Secondary students can attend Breakfast Club and play in the Senior quadrangle before school. At 8:45am students will line up outside TAG rooms. Yr 11/12 students may be in their classroom prior to school and are expected to attend any early online lessons.

At Wongan Hills DHS it is expected that all staff responsible for students at the start of the school day will:

- 1) Be at their classrooms when appropriate for their Phase of Learning (K-3) (4-6) (Secondary)
- 2) Use start of day interactions to positively help students prepare for the day ahead
- 3) Use before school duty to engage with students and develop positive relationships

Transition expectations.

Throughout each day students across all phases of learning will need to transition at some point – to library, music, art, other DOTT (duties other than teaching) teachers or from lesson to lesson in the secondary.

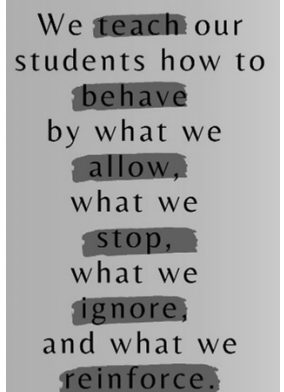
It is the expectation that during transitions that students:

- a) Proceed in a quiet and safe manner from class to class (showing respect for classes not in transition)
- b) Line up at each classroom and be greeted, and greet, the classroom teacher before entering
- c) In K- 3, will wait at the classroom for DOTT providers to come and collect them
- d) Are prepared for their lesson with all necessary equipment
- e) Inform the teacher of any issues of importance

It is the expectation that during transitions that all staff will be responsible for:

- a) Being at their classroom on time
- b) Dismissing students from classes on time to get to their next class on time
- c) Greeting students in a positive manner outside the room
- d) Lining students up and using the opportunity to minimise percolation, build rapport, ensure students are equipped for the lesson and check for issues
- e) Ensuring that students enter the room in an orderly and safe manner

At the end of the day Kwilena 1 to Yongka 8 do not place items in their bag until the siren has gone and they are dismissed for the day by their teacher.



We **teach** our students how to **behave** by what we **allow**, what we **stop**, what we **ignore**, and what we **reinforce**.

Good Standing

At Wongan Hills DHS we provide a safe, inclusive and stimulating environment as this is crucial in the development of the whole child. The Good Standing Policy has been designed for all students. ***Good Standing emphasises the importance of taking responsibility for choices students may make which may adversely affect their safety and learning and the learning and safety of others.***

This policy has been developed in alignment with Dept of Education policy and with a focus on rewarding safety, fairness and equity. Students doing the right thing are able to fully participate in all school extra-curricular activities. This policy works in conjunction with our whole school Behaviour Support Policy. What is expected of students in terms of maintaining their Good Standing and the consequences of losing their Good Standing is clearly communicated to students at the start of each year or upon enrolment.

Good Standing guidelines:

- All students commence each term with Good Standing
- To maintain 'Good Standing' a student complies with the School's Behaviour Support Policy behaviour expectations.
- An incident that involves intervention by the Leadership Team will be considered a breach. This includes severe breaches which are direct office referrals, frequent buddy class referrals and withdrawal
- Three Breaches in a term (incidents involving leadership team intervention or red forms that outline high level unacceptable behaviour) can result in 'Good Standing' being lost, therefore losing the right to participate in the school extra-curriculum programs for a period of 10 full days. An invitation to represent our school and attend special events in the local community is a privilege - it is not a right.
- An automatic loss of Good Standing will occur when a student is suspended.

Consequences of Loss of Good Standing may include:

- suspension of Leadership Roles (more than twice, loss of badge)
- Loss of classroom privileges (eg class reward activities)
- Attendance at Student Council Events
- Representation of the school and inter-school events
- Excursions and camps (at the discretion of the Principal, if safety is of concern)

Please note that off school site, whole class or school educational programs are not considered extra curriculum (e.g. in-term swimming lessons, interhouse carnivals, presentation assembly)

Good Standing is reinstated, and celebrated, after the 10 day period for Yr 4 and up (for Y3 and under this is 1 week), so long as during that period expected behaviours are displayed and the student completes a daily behaviour monitoring sheet to show this.

- Parents will be advised if their child has lost their 'Good Standing'
- Loss of Good Standing does NOT continue over school holiday periods. Each term is a clean slate.

Each classroom has a clearly displayed plan for behaviour support which has been discussed, negotiated and shared with the students and parents at the beginning and throughout the school year.

Restorative Practices at Wongan Hills DHS

Restorative Practice is an approach to behaviour management and conflict resolution that focuses on building and repairing relationships, fostering empathy, and promoting accountability. It is implemented in schools to create a positive and inclusive school climate.

At Wongan Hills District High School, our Restorative Practice involves managing a conflict by focusing on repairing harm and strengthening relationships. It endeavours to replace punitive disciplinary processes with those which support the student and restore relationships harmed by their behaviour. However, there are times when consequences will still be applied alongside restorative practices. Restorative conversations can be anything from 30 seconds between a teacher and student to 9 minutes between peers, teachers, administrative staff and/or independent facilitator.



The benefit of a restorative approach is that students gain a better understanding of the impact that their actions have had on others. It is a fairer process, although more confronting, as students are led through the questioning sequence to take responsibility for what they have done. Students are also likely to be more cooperative as they are included in deciding how to repair the harm.

1. **Philosophy:** Restorative Practice approaches are rooted in the belief that people are happier, more cooperative, and more likely to make positive changes when those in authority do things with them rather than to them or for them. It emphasises the importance of relationships, respect and repairing harm caused by conflicts or misbehaviour.
2. **Dialogue and Empathy:** Restorative Practice encourages open and honest dialogue, active listening, and empathy. It provides a structured framework for individuals to express their feelings, concerns, and perspectives in a safe and supportive environment.
3. **Accountability and Responsibility:** Restorative Practice promotes a sense of personal accountability and responsibility for one's actions.
4. **Restorative Circles and Conferences:** Restorative Practice may involve the use of restorative circles or conferences, where participants gather in a circle to discuss issues, address conflicts, and find resolutions collaboratively.
5. **Building a Positive School Climate:** Restorative Practice aims to create a positive and supportive school climate by fostering a sense of belonging, empathy, and mutual respect among students, staff, and the wider school community.

During break times, an incident may require more time or unpacking than duty staff have time to dedicate to seeing it resolved. In these instances, students will be asked to attend the office area to conduct the restorative process with a member of the administration team.

Restorative discussions have a future focus on where to next. We will ask questions that avoid shame. Staff will use the following general format in a restorative conversation to ask students:

1. What happened?
2. What were you thinking at the time?
3. What have you been thinking about since?
4. Who has been affected? In what way?
5. What needs to happen to make things right?

For a student who was harmed (affected) in an incident with others, questioning that focuses on assisting the student to move on and move forward from the incident will be used.

1. What happened?
2. What impact has this had on yourself and others?
3. What has been the hardest thing for you?
4. Who else was involved?
5. What do you think needs to happen to make things right? *

*Proposed acts of vengeance, punitive consequences, or outcomes a student does not have power to enforce will be redirected by staff facilitating the meeting.

9 Minutes of Restorative Practice

This method involves structuring a restorative session to take up no more than 9 minutes of time. The format is as follows:

3 minutes to explain what went wrong. Ensure all parties have an opportunity to contribute but stick to the time.

3 minutes to unpack how the students are feeling about the situation.

3 minutes to come up with actions to repair the relationship and resolve the problem. It is important that students only contribute *I will...* or *I can...* statements and avoid suggesting what they feel other students need to do.

Note: Restorative Practices do not preclude the use of sanctions. These are necessary and proper and will be imposed as required and sometimes will be used in conjunction with a restorative conversation.

The following sanctions can include:

- reprimand
- in-class isolation/ desk allocation
- buddy class referral
- phone call/ letter of concern to parent
- detention (recess, lunch or after school*) *after school only with parent permission, used rarely
- behaviour monitoring sheet (self and admin imposed)
- formal withdrawal to the administration area
- suspension

Cultural Responsiveness

Wongan Hills District High School staff strive towards recognising the full educational potential of each student and providing the support and challenges necessary for them to achieve that potential. We will endeavour to ensure culturally responsive practices align with the aspirations of Aboriginal families and communities and respond to individual student needs. As a culturally responsive school we aim to:

- Embed teaching and learning programs that provide Aboriginal students with the ability to see themselves, their identities and cultures reflected in the curriculum
- Embed programs that have a positive impact on Aboriginal students' cultural safety, wellbeing, engagement and achievement.
- use the knowledge and experiences of students as resources for teaching and learning
- build strong relationships between the school, families and wider Aboriginal community
- always have high expectations for Aboriginal students
- enrich the curriculum through a two-way approach with Aboriginal knowledge, identities and world views in collaboration with our Aboriginal and Islander Education Officer, parents, elders etc
- develop respectful, culturally affirming relationships with students
- create a caring, culturally safe and structured learning environment that values and respects all Aboriginal students' cultural and linguistic backgrounds and learning needs.
- Work with our Aboriginal and Islander Officer to help build relationships with families.

Individual Behaviour Support Plans

Individual Behaviour Support Plans aim to increase a student's understanding and demonstration of the productive, prosocial behaviours which are required for successful learning and participation in the school community. They will be developed when a student's behaviour is such that the school's Tier 1 and 2 management and support strategies have been ineffective.

These plans must:

- be developed with school staff, the student and parent/s (where possible)
- outline behaviours of concerns
- identify triggers and warning signs to alert to impending behaviour
- describe the expected behaviours of the student
- outline positive and negative consequences required to shape the desired behaviour
- outline changes required to the learning environment (for example, seating plan, Individual Education Plans) to support the student to modify their behaviour
- outline other support available to the student, including outside agencies
- contain a review date and process to assess and modify the plan as necessary.

Secondary student Individual Behaviour Support Plans should be developed with classroom teachers. However, in some instances where a student's behaviour is challenging in most or all learning areas, then a whole school Individual Behaviour Support Plan would be written by the deputy principal in collaboration with classroom teachers.

[IBSP Template Appendix](#)

Physical Restraint

In accordance with DoE Code of Conduct Handbook, Section 1.3.6 Physical Contact with Students WHDHS encourages an ethos where physical restraint or contact with students is unnecessary. Staff, are to only use physical restraint if the student is putting themselves or others in immediate physical danger as per Regulation 38c of the School Education Regulations 2000.

Staff will only consider the physical restraint of students when other less intrusive alternatives have failed or are deemed inappropriate. Physical restraint will only be used if a student is acting in a manner that places at risk the safety of any person and, where possible, will only be undertaken by staff who have undergone Team Teach training in positive behaviour management including verbal and non-verbal communication, diversion and de-escalation skills.

When restraint is used:

- it can only be used to prevent the student injuring themselves or others
- staff members will maintain communication with the student to de-escalate the situation
- it will cease as soon as staff determine that the student no longer presents a risk to safety
- the Principal will provide appropriate support to staff, students and parents as required.
- It will be documented on Integris and an Online Incident Notification completed

Physical Contact

Staff may, in circumstances, use physical contact to provide care, provide first aid for a student or support a student to learn a specific physical technique such as in Physical Education. Contact may be used to prompt, give reassurance or offer support in a variety of situations. However, staff need to be aware that some students find the use of physical contact unwelcome or inappropriate.

Before any form of physical contact is used staff should consider the:

- age of the student
- situation in which contact is being used
- purpose of the physical contact
- likely response of the student

In very rare cases, a principal will authorise a plan to apply physical restraint as an ongoing strategy for a student when the documented plan:

- involves a hierarchy of planned, less restrictive responses;
- provides information about the use and type of restraint;
- defines the situations in which restraint will, and will not, be considered;
- is developed and reviewed in regular consultation with appropriate student support services, such as the School Psychology Service and Schools of Special Educational Needs Behaviour or Disability, as well as any participating external agencies or practitioners;
- has been developed in consultation with and agreed by parents/carers;
- includes consideration of how to minimise embarrassment for the student and mitigate the risk of distress to other students who witness the restraint;
- identifies the staff who are willing and able to apply the physical restraint; and
- identifies when and how often the plan will be reviewed.

The principal will take reasonable measures to:

- ensure that staff who apply restraint are appropriately informed and skilled; and
- make available assistance to staff involved in the application of restraint.
- ensure that Team Teach training remains current.

The principal will monitor the effectiveness of physical restraint as part of the behaviour support strategy.

At WHDHS we recognise that some behaviour incidents can negatively affect our staff. Below are some of the supports available to staff involved or targeted in more severe behaviour incidents, should they choose to access them:

- The affected staff member will be offered an immediate break to recuperate following an incident. This may look like access to a coffee break or a quiet space.
- The affected staff member will be provided with an opportunity to unpack the incident and reflect with the leadership team to explore any necessary changes to practice, policy or procedures concerning the student/incident
- Individual Behaviour Support Plans and Risk Management Plans may need to be developed or revised.
- The School Psychologist or Chaplain can be available to offer Psychological First Aid (an immediate check-in) post-incident.
- All staff may access counselling and psychological support through PeopleSense. This is a free professional and confidential service that can be used for work and personal issues that are impacting on wellbeing.
PeopleSense: 1300 307 912

Physical restraint and/or physical contact is NOT to be used for discipline.

Suspension

Wongan Hills DHS and the Department of Education accepts the use of student suspension procedures as an effective behaviour management strategy for students who breach the school's Code of Conduct and Wongan Way Expectations.

In a situation where there has been a severe and deliberate breach of the WHDHS Behaviour Support Policy a student may be suspended. Students involved with/in a fight or any illegal activity will be automatically suspended. During a period of suspension, the suspended student is, in most cases, not permitted to re-enter school grounds until a return from suspension case conference with a parent/carer and the student has occurred, as well as restorative practices with relevant staff and/or students (as applicable).

Suspension removes the student from the school environment, reduces the opportunity for reinforcement of their behaviour, provides a period of reflection between the incident and the resolution process and gives the school time to implement specific plans where required.

It provides an opportunity for students, parents and staff to think about the incident and behaviours, enabling a considered, positive resolution and re-entry plan. The suspension also allows time for the school to establish support programs or interventions that may be required or enacted upon a student's return to school.

Reasons for Suspension (extracted from DoE Policy Document). The following behaviours are most likely to result in a period of suspension:

- Physical assault, intimidation, verbal abuse or harassment of staff
- Physical assault, intimidation, verbal abuse or harassment of other students
- Willful offence against property
- Substance misuse
- Illegal or restricted sale substance offences – eg alcohol, drugs, cigarettes, vape devices

Processes of Imposing a Period of Suspension

- Students can be suspended from between 1 and 10 days depending on the type, frequency and severity of the offence.
- Prior to imposing a proposed period of suspension the behaviour/incident will be fully investigated and discussed by two members of the leadership team where possible
- The student/s is to be given the opportunity to respond to the behaviour/incident: and
- The parent will be notified and given the reason/s for the proposed suspension

Support strategies post suspension may include;

- Case Conferences
- Regular review meetings
- Escalation Profiles developed
- Individual Behaviour Support Plans and/or a Behaviour Monitoring Sheet
- Students who are continually suspended will have increased interventions, including internal and external agency support.

Students who reach 10 suspensions or accumulate 20 days of suspension in a school year will be automatically discussed by the Principal with the Wheatbelt Director of Education and the Principal of SSSEN:BE in accordance with DoE policy. This will likely result in referral to the School of Special Educational Need: Behaviour, and for students with disability the School of Special Educational Need: Disability.

Exclusion

The Principal may recommend to the Director General of Education that a student be excluded from attending the school. Only the Director General may exclude a student. Full documentation of the school's efforts to effect behaviour modification will be submitted to the Regional Executive Director in support of such a recommendation.

Behaviour that leads to a recommendation for exclusion can be either a very serious isolated incident or a persistent pattern of behaviour.

Drugs, prohibited and illicit substances

Prohibited and Illicit Substances/Items at Wongan Hills District High School are not permitted on school grounds. This includes alcohol, tobacco, vapes and associated paraphernalia. Chewing gum, and aerosol cans (including deodorant) are not permitted on grounds. Illegal drugs such marijuana are classified as a Class A illicit substance. If any student brings any illegal drugs or drug paraphilia to the school, police will be notified.

Drug and alcohol education will form part of the school's Health Education Curriculum in line with WA School Curriculum and Standards Authority requirements. Resources to teach these will be in line with DoE and relevant health authority evidence-based approaches. The school will seek support from SDERA (School Drug Education and Road Aware), where necessary, for additional resources. These programs will be re-evaluated and revised as updates become available.

The possession or use of illegal substances by students at school is not acceptable under any circumstances. Being intoxicated does not excuse a breach of school discipline by a student. However, a breach of school discipline committed by an intoxicated student must be dealt with only after the safety and wellbeing of the student has been secured. Student intoxication on school sites or at school off-site activities is unacceptable.

Staff will respond swiftly and consistently wherever a student is reasonably suspected of being intoxicated. These requirements relate to school disciplinary considerations only and are not a complete guide for dealing with drugs or alcohol use by students.

Drug and alcohol use by students will be responded to through health and education frameworks and in accordance with the steps in the behaviour flowchart. In circumstances where school staff have reasonable grounds for belief that a student is intoxicated, the immediate priority will be the health and welfare of the student. A follow up priority is support and education for the student. It is the responsibility of the principal to report relevant matters to the police.

Mobile Phones and Portable Technologies

‘When at school, put it away.’ The school has a policy which restricts the use of mobile telephones, smart watches and electronic devices. Measures are in place for the safe keeping of these during the school hours should they be necessary to have at school. Sanctions will apply to those students in possession of these as per the policy. See [Appendix B](#)

Risks of suicidal behaviour and/or non-suicidal self-injury

Some young people will experience emotional and/or psychological distress during their school years. This could lead to an increase in the risk of mental health problems and, in some cases, suicidal behaviour and/or non-suicidal self-injury (NSSI). It is therefore of significant concern when suicide and self-harming behaviour is seen in students, and it is important to take action. The school response will be in line with current DoE policies:

- Immediately contact the school psychologist (and/or Lead School Psychologist) and other members of the school student support team.
- Contact the Consulting School Psychologist – Suicide Prevention for expert advice if needed.
- Action the school response plan Appendix to non-suicidal self-injury and suicidal behaviour to enable appropriate risk assessment, planning and support.
- Be alert to, record and respond to changes in the student’s behaviour.
- Develop risk management plans in conjunction with school psychologist
- Share relevant Risk Management Plans with relevant staff only

Bullying and Harassment

At Wongan Hills District High School (WHDHS) we value respect and showing tolerance of others in a safe and supportive environment. We foster positive relationships through our Social and Emotional Learning programs and our Behaviour Support Policy. Our Anti-Bullying Policy aims to deal effectively with, and prevent incidences of, bullying.

Bullying and harassment is not acceptable in any form. As per the Rights and Responsibilities section of this policy, students and staff have the right to expect that they will be safe at school and spend each day free from the fear of bullying, harassment, and intimidation. Teachers, staff, students, parents, carers, and members of the wider community have a responsibility to work together to address bullying.

Harassment is when an individual or group targets another individual or group to intentionally threaten or harm them on one occasion. This may involve verbal, physical, relational, and psychological forms. It can also include racial and religious comments, sexual harassment, rude gestures/noises, intimidation, and extortion.

Bullying is when this is repeated or ongoing.

Increasingly, bullying is done online, especially through social media.

[See Appendix C](#)

Appendix A: Classroom Management Strategies

Low key skills are the things that teachers say and/or do to prevent or respond to unproductive behaviour when it first occurs. They are used to quickly and efficiently control or diffuse a problem with a minimum of fuss and without interrupting the flow of the lesson. They involve 'non' or 'minimal verbal' responses. They do not stop the flow of the lesson – they are quick/quiet. They do not invite escalation – low emotional content. As with all strategies to address inappropriate behaviour, they are done privately with dignity. Staff use these pervasively throughout the school day as the main focus for classroom management.

Preventing Unproductive Behaviour

Winning Over

Definition: The skills employed to encourage students to bond positively with the educator.

How to use it: Learn students' names, smile, be polite, show an interest in the student as an individual, say 'hello' outside the classroom.

This will increase the chances the student will comply with your directions and turn to you for educational support.

Active Scan

Definition: When an educator overtly monitors student behaviour through visual scanning.

Rationale: By positioning to achieve maximum visual overview of the students you can be continually aware of student behaviour. This allows you to pick up unproductive behaviour before it builds to obvious levels.

Nuance: Use continuously.

Proximity

Definition: Moving around the room during a task to prevent or respond to unproductive behaviour.

Rationale: Moving near students increases the chances that they will participate. Position yourself near the students most likely to demonstrate unproductive behaviour OR move towards the students who are demonstrating off task behaviour.

Nuance: Use calm and neutral body language. It is often combined with visual scanning. Be aware of personal space.

Modelling and Acknowledging Appropriate Behaviour

Definition: The public, positive acknowledgement of a specific appropriate behaviour of a student or group of students to influence the behaviours of others.

Rationale: Friendly and encouraging tone. Overt use of voice so that other students hear it

Nuance: The difference between the responding and modelling is in the educator's intent.

Private Dialogue

Definition: The educator (might be) crouching low and having a quiet conversation with a particular student while the other students are working.

How to use it: Can be used after a Planned Ignore, be sure not to draw attention to this. Ensure all other students are focused on an activity first. Be aware when the teacher is expecting silence from the students.

When: When more public interventions will interrupt the flow of the lesson.

Type of Response

Definition: To explicitly indicate to students how they should respond during class interactions.

Rationale: Increases accountability and helps to prevent uncontrolled interactions. The teacher can control the distribution of questioning. Reduces opportunities for attention seeking students.

Attributes: Hands up; No hands, I will choose; Call out; Choral; Tell your partner; Think to yourself; Write it down

Note: You do not have to signal the type of response for each question. Signal for a series of questions. Without Type of Response the default is, calling out.

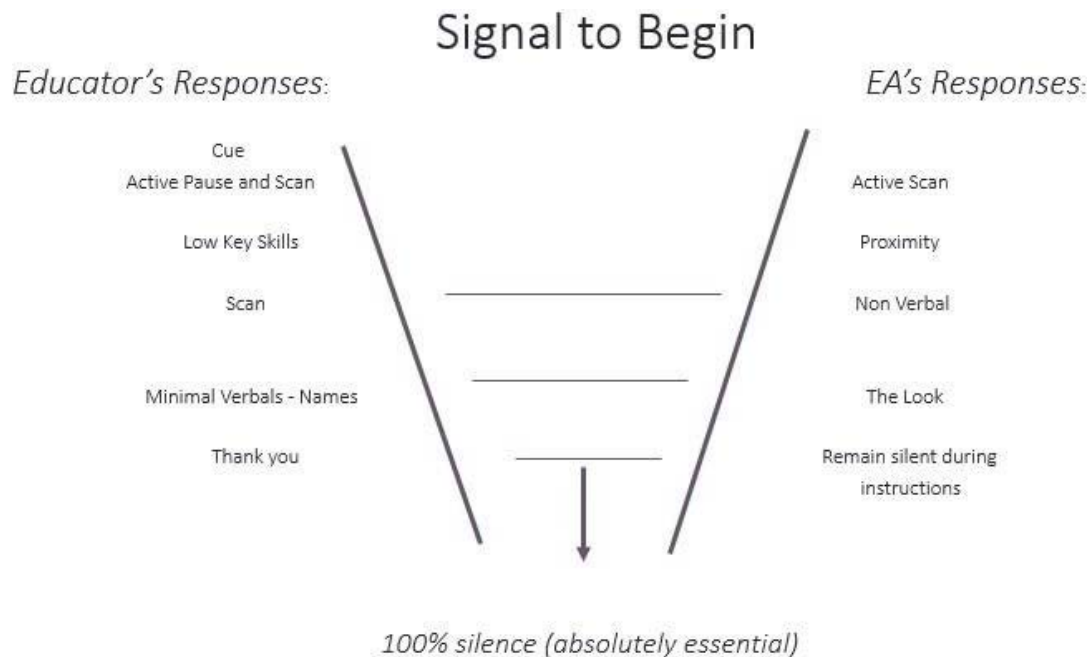
Signal to Begin.

Definition: A routine sequence of educators' behaviours that results in whole class attention on the educator.

1. The cue
2. Pause
3. Active Scan
4. Low Key Skills
5. *100% attention*
6. *Thank you.*

Rationale: By efficiently bringing a class to quiet the educator is reducing the opportunity for unproductive student behaviour.

Nuance: May be used at the start of an instruction or whenever the class is off task and needs to be refocused.



Transition

Definition: a sequence of educator behaviours that increase the chance that student behaviour is orderly and efficient. It usually involves three components.

Rationale: anytime student movement is required.

Nuance: When - What – Who

Responding to Unproductive Behaviour

Non-Verbal: The Look

Definition: The deliberate use of extended eye contact towards a specific student

Rationale: Eye contact with the student that conveys your awareness of their behaviour and a message to stop. Can be combined with a nonverbal gesture to enhance communication.

Nuance: Use as soon as an unproductive behaviour occurs. May be used with different levels of intent. Avoid the stare.

Non-Verbal: Gesture

Definition: Use of gestures to communicate that a behaviour is unproductive.

Rationale: Use a gesture to communicate to a student that the behaviour is unproductive or required behaviour in a way that causes minimal disruption to the lesson. It does not encourage the student to verbally respond and avoids confrontation.

Nuance: Use as soon as an unproductive behaviour occurs. Student needs to be looking at the educator.

Non-Verbal: Pause

Definition: An intentional pause during verbal instructions or discussion.

Rationale: The pause signals to the student the educator is aware of unproductive or disruptive behaviour. It also communicates the appropriate behaviour to listen attentively. It does not encourage the student to verbally respond and avoids confrontation.

Nuance: Use as soon as an unproductive behaviour occurs. Can be used in combination with another Low-Key Skill for emphasis.

Minimal Verbal

Definition: As few words as possible communicating that a behaviour is unproductive.

Rationale: Select no more than 3 words to say to the student to bring the students attention to their behaviour. Can be used with a Look and a Non-Verbal to enhance communication.

Nuance: Use as soon as an unproductive behaviour occurs. Be aware of the power of intonation and syllable emphasis.

Planned Ignore

Definition: Withholding visual and verbal cues to intentionally ignore unproductive behaviour.

Rationale: The educator intentionally ignores a behaviour which is not impacting on the lesson to maintain the lesson flow. The educator actively responds to appropriate behaviour when the student is being productive.

Nuance: Only useful if the behaviour is not interfering with the learning of others.

Responding to Appropriate Behaviour

Definition: The public or private positive acknowledgement of a specific appropriate behaviour to reinforce that behaviour.

Rationale: Use a friendly and encouraging tone, let the student know that they are displaying appropriate behaviour.

Nuance: Especially useful if a student rarely demonstrates the appropriate behaviour.

Appendix B: Stage Two - Classroom Management Bumps

WHDHS recognises the importance of the classroom teacher's role in dealing with students. At stage two it is the teacher's responsibility to ensure they have maintained behaviour management processes both in and outside of the classroom, before referring the student on to higher stages. This is from the Classroom Management and Instructional Strategies program of professional learning.

Bump 1 Low Key Response	Bump 2 Squaring Off	Bump 3 Either/or Choices	Bump 4 Consequence	Bump 5
Win students over Meet students at the door Show interest Be polite Use Signal to begin. Proximity - move about the room while teaching Be on alert. Stop things before they go too far. Deal with the problem not the student Transitions who what when Deal with allies first When asking questions, signal the type of response you want Use minimal or non-verbal Student's name Gesture The "look" Pause Planned ignore	Pause or stop Turn body square Intensify eye contact Use minimal verbal response Complete interaction with a "thank you"	Stop Pause Intensify eye contact Give an either/or statement Use firm, neutral, calm voice Given a choice which student sees as related to the misbehaviour Restore social order As immediate as possible Keep statement free of moral judgement Deal only with the present Ask for a student response Listen for student's answer Complete interaction with a "Thank you"	Follow through on Bump 3 "You have made your choice. Please _____" "Thank you"	Recognise the move to power Respond by: Ignoring it Short circuit it—diversion Describe the situation Language of attribution Provide a new choice Ask them to leave (to buddy) or call for assistance from admin if severe enough
Maintain the flow of the lesson	Maintain the flow of the lesson.	Maintain the flow of the lesson.	Student may be isolated in class Or sent to buddy	Student may be isolated in class Or sent to buddy
	At teacher discretion: Red form to admin Contact parent	At teacher discretion: Red form to admin Contact parent	At teacher discretion: Ensure student has work to continue with Red form to office Contact parent	

Reviewed November 2022

At Wongan Hills DHS we recognise that mobile phones and other electronic devices are now regular items of daily use in the lives of our students. To support appropriate use of these devices during the school day and reduce the potential for 'cyber' bullying through text messages and social media apps, Wongan Hills DHS has implemented the following policy:

Mobile Phones and electronic devices:

- May be brought to school by students who may need to maintain contact with parents before or after school due to commitments, health issues or travel safety.
- We request that any parent who needs to leave a message for a student during the school day contact the office rather than using the student's mobile.
- Phones are to be secured in student bags during the day. **The school accepts no responsibility for the safe keeping of these devices if brought to school**
- Students may hand their phone into the front office at the start of the day if concerned about leaving their phone in the bag and collect after the final siren
- Mobile Phones are to be either turned off or placed on silent during the school day whilst in bags.
- No phone is to be taken into a classroom unless with prior permission of the class teacher and then only in consultation with administration.
- Mobile phones are not to be used by students during the school day (including recess and lunch periods)
- Any phone used inappropriately by students during the school day will be removed from the student and secured in the administration office until the end of the school day.
- In the case of repeated incidents concerning the inappropriate use of a mobile phone or electronic device, the administration will confiscate the device and hold for safekeeping for a parent/caregiver to collect and request it no longer be brought to school

Exemptions:

- Senior School students are permitted mobile phones in the Yr 11/12 room

Smart Watches

Are permitted at school, but primary students must have smart watches in aeroplane mode during the school day.

Normal behaviour management strategies apply if the misuse of a phone or device impacts on the calm, caring and respectful running of the school and if a student refuses to follow direct instructions from a staff member.

Electronic Devices – iPods, Smartwatches, MP3's, Game Boys, handheld games, etc

- We discourage any student bringing any of these devices to school.
- If a student brings such a device to school, it must remain in the student's bag and not be used during the school day.
- Inappropriate use or display of these devices will lead to the staff removing the device and it being secured in the administration office until the end of the school day.
- Parents/caregivers will be contacted if repeated incidents occur and the device will be held at the administration until it is collected by a parent/caregiver.
- **WHDHS takes no responsibility for the safety of these devices if bought to school.**

CAMERAS AND VIDEO CAMERAS (Including Mobile Phones with Image Capture Capabilities)

Using cameras (including mobile phones with image capture capabilities) on the school campus, teaching and recreational areas, school functions, excursions etc is not permitted. Permission from the Principal must be sought:

- where photographs may be considered as harassment, intimidation or threatening.
- when use threatens or is likely to threaten the safety or well-being of any person.
- when use is likely to be in breach of any law. (Summary Offences Act 1988)



Department of
Education

Shaping the future

Connect and Respect

Every student, staff member, parent or carer has the right to feel safe and be safe in our schools.

We all share a responsibility for providing a safe, supportive and productive environment, free from bullying, harassment, discrimination and violence.

What we can all expect:



mutual
respect



good
behaviour



open
communication



respect for each
other's time

We will not tolerate:



offensive, insulting
or aggressive
language



malicious or
judgemental
gossip



using
social media
disrespectfully



any form
of violence

Shared and respectful expectations and values will enable us to work together in the best interests of our children.

For more information please refer to the Department of Education's website:

Connect and Respect: [Connect and respect - Department of Education](#)

Say no to Violence: [Violence - Department of Education](#)



Individual Behaviour Support Plan

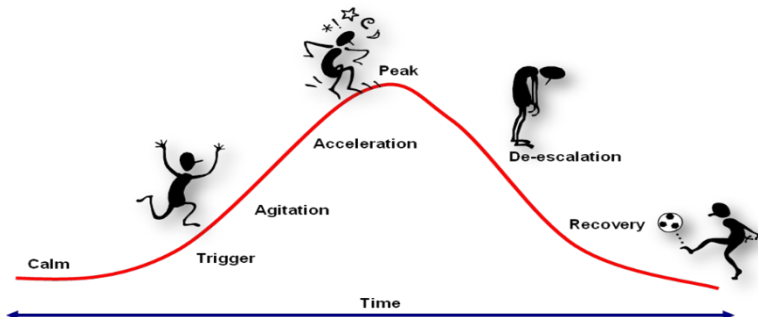
STUDENT: _____ **DATE** _____
TEACHER: _____ **YEAR** _____

Background: Discuss the child's previous school, incidents of trauma, family background, any diagnosis and medications, external supports previous or current, attendance history and academic function.

Management of Minor Behaviours

Classroom – Normal low key classroom management strategies can be used for most minor behaviour issues. Some things to think about when using these strategies include;

- Using a calm voice
- Keep instructions simple and be specific (avoid over-verbalising or vague instructions).
- Only give 1 instruction at a time or have a visual to help with instructions
- Check that instruction is understood (e.g. ask them to repeat)
- Allow take up time for instructions (avoid hovering).
- Offer Student to use their Tool Kit if struggling to regulate (snack, walk, heavy work/job, Zones)
- Deal with allies - students who tend to also agitate at these times
- Use attached plan and script when student is escalating
- Look for opportunities to acknowledge Student when compliant; use of the classroom incentive program; lots of positives wherever possible (work or personal)



Higher level behaviours

What it looks like	When/Where it happens	How often
Complete shutdown with refusal to leave room	In class – goes under desk	Infrequent
Refusal to follow staff instructions/defiance	In class and out of class.	Infrequently when script used properly
Negative self-talk	Classroom	Infrequent
Throws objects, overturns furniture	In and out of class	Infrequent
"Mouthing off" aggressively	In and out of class	Infrequent
Self-harming behaviours	Once they have already "dug a hole" and feels trapped	Infrequent

Important things to note:

- How Student enters the room in the morning, is often a great indicator for how much support and intervention may be needed.
- If Student is doing the right thing, it is extremely important to acknowledge them and particularly if they have bounced back and showing expected behaviour.

Triggers

- Returning after an absence (almost an injustice done to them by the class continuing without them present) – unsettled
- Perceived injustice – where they feel they has been done wrong by
- Perceived injustice towards others (where they think something is unfair)
- Lengthy instruction time/teacher talk (needs I do, we do, you do style)
- Follow up activities – especially writing tasks
- Transitions (between activities &/or classes), coming in after lunch, changing teacher
- Being told no/not being able to do what they want to do immediately
- Consequences for actions- isolation, buddy etc
- Hunger (let them eat whatever they can from their lunchbox, do not worry about the foods)
- Fatigue
- Monday mornings
- Being ignored (if they have an answer or a hand up, call on them!)
- Discussing what they have done wrong (reflection)

Management of Major Issues

- Use a calm voice (use a low tone) – “*Student, do you need something?*”
- Minimal instructions (avoid ‘going on’ at them).
- Give them more take up time (time to listen and understand instruction and respond; give instruction and walk away). (No more than 1 minute)
- Remove audience – re-direct other students away from the area, re-direct their attention; or if escalation remove others from room/area completely.
- If they make moves to remove themselves from the situation, allow this and monitor from afar (self-management and self-calming is to be encouraged).
- Advise admin
- Give Student time to follow you outside
- Student needs time and space to calm down; time and space will depend on the severity of the escalating event/s.

When Student enters *Recovery*:

- Problem solve the situation with them, considering what actions they need to take to ‘make amends’ for any offence/harm resulting from the incidents (restorative practices); and
- When ***Calm*** again, return them to where they are supposed to be and ensure the original task is still completed.

Target Behaviours (Alternative behaviour we want to see). Student to:

- follow teacher instructions
- Produce work
- Work quietly in class
- Remain in class for the required time.

Action Plan

When giving Student a task (independent work) remind Student of these steps:

1. Try themselves first
2. Ask for help if it is too difficult
3. Teacher or EA will assist and then they will be asked again to try themselves

When Student is refusing to complete or attempt work.

Ask Student about Tool kit “Student what do you need to get yourself into the green zone?”

If Student chooses to use Zones to regulate, when they come back, they need to be reminded that per block, they do not go back again, they will now progress to warning system.

If staff recognise they are heading towards needing Zones to try and avoid buddy, code word to Student is **Zone Stage** (this means they will be sent to Zones to help them avoid Buddy)

“Welcome back Student/great to have you back Student” If they make another poor choice or shows escalation remind them “Student, you have had your chance in Zones, now you need to make better choices”

Student continues to shut down and be defiant

1. First Warning is issued explicitly

“Student, this is your first warning. I am happy to help you but if you don’t try the work yourself or accept help before I come back around, you will be moved to in class isolation”

Allow approximately 15-20 seconds to get back on track.

2. If they do not continue with work, class isolation

“Student, you still have not followed the instruction and need to move to isolation. This is your chance now to get on and do what needs to be done. Next step will be buddy room”

3. Student moves to isolation – let them know that they are at impending buddy stage and only they can make the right choices now. Let them know they can ask for support if needed.

“Student, you have 2 choices: you have 15 seconds to continue with your work. You can still ask for help if you need it. Or you are off to buddy.”

4. Important when Student reaches Buddy stage that they know, it is just for 15 minutes to regulate and reflect. They do not have detention unless they choose to continue to make poor choices.

Script when coming back from transitions.

“Student, you don’t seem in the Green Zone. You will need an inside voice. You need to sit on the bench and get yourself ready to learn.”

Student’s tool kit:


1. Walk (with an adult)
2. Zones
3. Ask for help again

When Student returns from Zones or Buddy please ensure that they are welcomed back and feels included.

<i>ROLE</i>	<i>NAME</i>	<i>SIGNATURE</i>	<i>DATE</i>
Deputy Principal			
School Psychologist			
Teacher			
Parent			

Review Date: _____

This Behaviour Referral Record is used by teachers to record incidents. Students sometimes refer to this as the 'red form' as it is printed on red paper. There may be follow up by administration for more information or to clarify details with students, witnesses to an incident or staff.

 Wongan Hills District High School Behaviour Referral Record		Time: Before School [] Period 1 [] Period 2 [] Recess [] Period 3 [] Period 4 [] Lunch [] Period 5 [] After School []	
		Referred by: _____ Date _____	
Student (1) _____ Year/Form _____ Student (2) _____ Year/Form _____ Student (3) _____ Year/Form _____			
<input type="checkbox"/> CR- Primary <input type="checkbox"/> CR-Secondary <input type="checkbox"/> CR-Front Grass <input type="checkbox"/> CR-Courts <input type="checkbox"/> CR-Outside	<input type="checkbox"/> CR-Library <input type="checkbox"/> CR-Art/Mus <input type="checkbox"/> CR-Oval <input type="checkbox"/> PG-Oval <input type="checkbox"/> PG-Courts <input type="checkbox"/> PG- Jun Quad <input type="checkbox"/> PG- Assembly	<input type="checkbox"/> PG-Astro Turf <input type="checkbox"/> PG-Sec Quad <input type="checkbox"/> PG-Front Grass <input type="checkbox"/> PG-PP/Kindy	<input type="checkbox"/> Other <input type="checkbox"/> Off School Site <input type="checkbox"/> Transition between classes

2. Behaviour – please number in order of seriousness of behaviour

- | | |
|---|--|
| <input type="checkbox"/> Interference to others/school property | <input type="checkbox"/> Teasing/verbal harassment of other students |
| <input type="checkbox"/> Not following instructions/non-compliant | <input type="checkbox"/> Physical assault/intimidation of other students |
| <input type="checkbox"/> Disruptive in Class | <input type="checkbox"/> Fighting |
| <input type="checkbox"/> Defiance | <input type="checkbox"/> Verbal/physical abuse of staff |
| <input type="checkbox"/> Inappropriate language | <input type="checkbox"/> Late (without legitimate reason) _____ mins |
| <input type="checkbox"/> Other eg. Uncharacteristic behaviours: _____ | |

3. Details: _____

□ P.T.O.

4. Teacher Actions (to date)

- | | |
|---|--|
| <input type="checkbox"/> Applied Low Key Skills | <input type="checkbox"/> Buddy Class |
| <input type="checkbox"/> Official warning/Reprimand | <input type="checkbox"/> Parent contact - Verbal/Written |
| <input type="checkbox"/> Square Off/Re-Direction | <input type="checkbox"/> Interview / coaching |
| <input type="checkbox"/> Choice | <input type="checkbox"/> Time owed _____ mins |
| <input type="checkbox"/> In Class Isolation | <input type="checkbox"/> Other (e.g. detention) _____ |

☐ Further action required

☐ Information only

5. Admin Action

- | | |
|--|--|
| <input type="checkbox"/> Coaching/Mediation | <input type="checkbox"/> Withdrawal |
| <input type="checkbox"/> Restorative Practice | <input type="checkbox"/> Suspension |
| <input type="checkbox"/> Apology – Verbal/Written | <input type="checkbox"/> Referral to another agency |
| <input type="checkbox"/> Reprimand | <input type="checkbox"/> Loss of School Representation (1) (2) (3) |
| <input type="checkbox"/> Detention | <input type="checkbox"/> Loss of Reward Eligibility (1) (2) (3) |
| <input type="checkbox"/> Parent contact - Verbal/Written | <input type="checkbox"/> Other _____ |

Admin signature: _____

Date: _____

cc. Student File, Principal, Deputies, Secondary Teachers, Teachers

Other _____

☐ Integris ☐ Emailed ☐ Other: _____

GLOSSARY OF TERMS

Behaviour

The way in which a student acts in response to a particular situation or stimulus at school and/or in the community.

Cultural responsiveness

The ability to understand, interact and communicate effectively and sensitively with people from a cultural background that is different from one's own. It is characterised by respect for culture, ongoing self-reflection, expansion of knowledge and commitment to improving practices and relationships, and is responsive to the diverse needs, backgrounds, experiences and knowledge of all students. In the Western Australian context, this is first and foremost for Aboriginal students.

Multi-tiered system of support

A multi-tiered system of support holistically considers student needs and provides tiered and interconnected interventions, so students receive the appropriate level of support. This includes intensive support that is individualised and provided alongside effective case management for students with complex behaviour support needs.

Parent

In relation to a child, means a person who at law has responsibility for the long-term care, welfare and development of the child; or the day-to-day, welfare and development of the child.

Positive Behaviour

A student's competence and capacity in their context of the school community's expectations and values to:

- establish and build positive connections with adults and peers
- develop empathy for others and understand relationships
- recognise and regulate their own emotions
- make responsible decisions
- work effectively with others
- cope with challenging situations constructively.

Restorative Approaches

Restorative approaches are a way of thinking and interacting that puts relationships at the centre of all actions and decisions. Restorative approaches are empathic, responsive to need, view conflict as opportunities to learn and grow, and build accountability for actions and processes to repair harm.

School Community

Local people, groups and organisations in and around schools in remote, regional and metropolitan areas. This includes, but not limited to, students, families, principals, teachers and other school staff, community leaders, local government agencies and not-for-profit organisations.

Staff

A person who is currently employed by the Department of Education under the School Education Act 1999 or the Public Sector Management Act 1994.

Student

A person who is enrolled at a Western Australian public school.

Student engagement

Student engagement is multi-dimensional and combines observable indicators such as achievement, behaviour and attendance with internal emotional and cognitive states (feelings and thoughts). Student engagement is viewed and responded to in a holistic way.

Whole school approach

A whole school approach involves addressing the needs of students, staff and other members of the school community through a collective and collaborative approach to improving student learning, behaviour and wellbeing, and the conditions that support these.

Monitoring Sheet

Is used to monitor students during times when they have lost Good Standing. There are also times where students will request to be placed on a Monitoring Sheet.

REVIEW PROCESS

All behaviour data will be recorded on our school's management system, Integris, in the behaviour section. Each semester the administration team in consultation with the Behaviour Support committee will review the school's behaviour data. The School Board will be regularly informed of behaviour data trends. The School Board will NOT have access to student names, but will see year level summary data.

School response and planning guidelines for students with suicidal behaviour and non-suicidal self-injury



Government of **Western Australia**
Department of **Education**



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151 Royal Street
EAST PERTH WA 6004

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School response and planning guidelines for students with suicidal behaviour and non-suicidal self-injury

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SECTION 1

School response to suicidal behaviour and non-suicidal self-injury

“Every life lost to suicide is one too many; we must all work together to prevent these tragic events.”

Suicide Prevention 2020: Together we can save lives
Mental Health Commission, Western Australia

Glossary

The following terms are defined in the context of schools:

- **Suicidal ideation** refers to an individual's thoughts about ending their life.
- **Suicidal behaviour** includes suicidal ideation, communications, attempts and suicide.
- **Communications** refer to direct or indirect expressions of suicidal ideation, through verbalisation, behaviour or planning actions.
- **Imminent risk** suggests a crisis or urgency which requires constant supervision and immediate action.
- An **attempt** refers to an individual deliberately harming themselves with the intent to die but not resulting in death.
- **Suicide** is a deliberate act to end one's life resulting in death.
- **Contagion** is when one suicide can increase the risk of further suicides or suicidal behaviour in the community. A cluster refers to a number of suicides occurring within geographic or psychosocial proximity.

Of the people who think about suicide, a proportion will go on to attempt suicide; a much smaller number will take their own life.

Non-suicidal self-injury (NSSI) is a deliberate act to harm oneself without the intent to die, usually to reduce uncomfortable or distressing emotions and often repetitive in nature. NSSI can be referred to as self-harm (the term deliberate self-harm is also used by health care professionals).

- A **Safety Plan** is a tool developed collaboratively between the student and their health practitioner, with an aim to maintain safety and support recovery. **The strategies and supports outlined in the plan are matched to the needs of the student.**
- A **Risk Management Plan (RMP)** is an organisational plan developed by the school which identifies foreseeable circumstances where a student may be at risk of harm and outlines strategies to manage this risk.
- A **Risk Management Memo** is used in less complex cases to inform school staff of concerns regarding a student's mental health and wellbeing and provide strategies to support student safety at school.
- **Postvention** refers to steps taken after a death by suicide and forms part of an overall response to suicide, comprising of prevention, intervention and postvention measures¹.
- **Cultural safety** is an environment that is safe for people; where there is no assault, challenge or denial of their identity, of who they are and what they need. It is about shared respect, shared meaning, shared knowledge and experience of learning, living and working together with dignity and truly listening². Clients are the only people who can determine what is culturally safe for them³.

¹ Andriessen K. (2009). Can Postvention be prevention? *Crisis*, 30, 43-7.

² Williams, R. (2008). Cultural safety: What does it mean for our work practice? *Australian and New Zealand Journal of Public Health*, vol. 23, no. 2, pp.213-214.

³ Vadeloo, D. and Edwardson, R. (22 July 2020). Cultural safety in education is the key to reaching all our students. *ABC Education* [online]. Available at: <https://education.abc.net.au/newsandarticles/blog/-/b/3613644/cultural-safety-in-education-is-the-key-to-reaching-all-our-students>

1.1 Introduction

The School Response and Planning Guidelines for Students with Suicidal Behaviour and Non-Suicidal Self-Injury (NSSI)

support school staff to identify and effectively respond to suicidal behaviour and/or NSSI in students. It should be used in conjunction with existing school-based policies and in consultation with professionals who have specialist knowledge in the area of mental health.

These guidelines complement but do not replace skills and knowledge gained through attending training such as Youth Mental Health First Aid and Gatekeeper Suicide Prevention.

Maximising the social and emotional outcomes for students by providing engaging, safe and supportive learning environments is a priority for all school staff.

Many children and young people will navigate their school years with few concerns regarding their own mental health and wellbeing. However, some children and young people will have experiences that may affect their functioning including serious emotional or psychological distress and exposure to trauma and cumulative harm. Without support, these factors can lead to an increase in the risk of mental health problems and, in some cases, suicidal behaviour or NSSI.

Encouraging understanding of mental health issues amongst students and staff, promoting help seeking options with caring adults and working in collaboration with external services, families and communities, supports student care and protection whilst at school.

1.2 Mental health promotion

The World Health Organisation defines mental health as 'a state of wellbeing in which the individual realises his or her own abilities, can cope with the normal stresses of life, can work productively, and is able to make a contribution to his or her community.'⁴

School leaders can adopt a whole-school approach to promoting mental health and wellbeing to raise awareness of the importance of good mental health, promote positive relationships, reduce stigma, develop helpful coping strategies and instill values such as care for self and others.

Whole school approaches may involve:

- Implementing overarching frameworks that promote mental health and wellbeing.
- Promoting programs to reduce the stigma of poor mental health, or encouraging help seeking such as Youth Mental Health First Aid for staff and Teen Mental Health First Aid for students.
- Implementing social and emotional programs such as Friendly Schools Plus, Promoting Alternative Thinking Strategies (PATHS) and Aussie Optimism.

Resources available to guide schools include the [Student Wellbeing Hub](#), the [Australian Student Wellbeing Framework](#) and [Be You](#).

1.3 Indicators of concern

Most people considering suicide indicate that they are not coping, however in some circumstances there are few or no observable signs. Ignoring any signs or interpreting signs as attention seeking behaviour becomes a barrier for students expressing their needs to someone who can help.

As students spend a significant amount of time at school, school staff play an important role in identifying indicators of concern and supporting students who may be at risk of suicidal behaviour or NSSI.

While indicators of concern do not always mean a student may be at risk of suicidal behaviour or NSSI, they could be indicative of other wellbeing concerns requiring the implementation of support or intervention.

⁴ World Health Organization (2018). *Mental health: strengthening our response* (fact sheet - Updated March 2018). Retrieved from World Health

Organization website: <http://www.who.int/en/news-room/fact-sheets/detail/mental-health-strengthening-our-response>

Some examples of common indicators of concern are:

- changes in activity and mood
- poor emotional regulation
- withdrawal from usual or previously enjoyed activities and daily interactions
- decrease in academic performance
- difficulty concentrating or making decisions
- communications of thoughts about death or suicide
- negative view of self or world
- significant tiredness or loss of energy
- grief and loss responses
- peer conflict or withdrawal
- persistent or sudden absence from school
- sudden weight loss or gain
- change in appearance (no care or sudden care for clothes, hair, makeup etc.)
- unexplained injuries such as cuts, burns, bruises
- wearing long sleeves or covering up (not due to religious or cultural reasons)
- changes in eating or sleeping
- trauma responses
- risk-taking behaviours
- alcohol and/or other drug use
- any other sudden, unexpected or concerning changes.

1.3.1 Non-suicidal self-injury (NSSI)

Research indicates that NSSI is a significant issue, with 17.2% of adolescents reporting that they have engaged in NSSI at some point.⁵

NSSI is often referred to as self-harm (the term deliberate self-harm is often used by health care professionals).

- Injuries from NSSI can vary from very mild to severe.⁵
- It is difficult to determine whether an individual's behaviour is a result of suicidal ideation or NSSI without thorough assessment. To add to the complexity, NSSI and suicidal thoughts and behaviours can occur at the same time.

Reasons people give for why they self-injure include:

- Intensely personal or internal psychological reasons are most often given when people are asked why they self-injure.
- Other less frequently reported reasons for self-injury include interpersonal or social motivation, for example letting others know how they feel or coercing others to behave as desired.
- Direct peer-to-peer modelling of self-injurious behaviour, an atmosphere of encouragement and competition has also been identified as reasons for self-injury.⁶

1.4 Suicide risk assessment

Any suspicion or evidence of suicidal behaviour or NSSI needs to be taken seriously.

Responding, asking questions and gathering further information helps to clarify the concerns and identify the actions needed to improve the safety and wellbeing of a student.

When there is concern a student may be at risk of suicidal behaviour or NSSI, a risk assessment by a staff member with appropriate training (Gatekeeper Suicide Prevention or equivalent) or by an external provider needs to be immediately considered.

A **suicide risk assessment** requires the exploration of thoughts, feelings and actions of an individual, in a safe and culturally responsive way, to gain an understanding of their current

⁵ Swannell, S., Martin, G., Page, A., Hasking, P., & St John, N. (2014). Prevalence of Non-Suicidal Self-Injury in nonclinical samples: Systematic review, meta-analysis and meta-regression. *Suicide and Life-Threatening Behavior*, 44(3). DOI: 10.1111/sltb.12070

⁶ Walsh, B. W. (2012). *Treating self-injury: A practical guide (2nd ed.)*. The Guilford Press.

situation, ascertain suicide risk at the present time, identify actions to maintain safety and to plan ongoing support needs.

As the risk of suicide is dynamic and can change rapidly, risks cannot be eliminated, only minimised. Risk assessments are limited to a 'snapshot' of presenting issues which are sensitive to triggers in the environment as well as current individual presentation.⁷ Consultation with a Gatekeeper trained person is an important part of any risk assessment (see Appendix 2 for consultation contacts).

Information gathered in a suicide risk assessment assists to determine actions to support the young person immediately as well as in the longer term and provides information to inform a school's Risk Management Plan.

Underlying the risk assessment framework is the crucial assumption that suicide is preventable. It may not be possible to prevent every suicide, however, assessing risk, sharing information, coordinating actions and planning enhances positive outcomes.

1.5 Guidelines for staff

1.5.1 Establishing roles and responsibilities

Coordinated school responses include:

- clarifying the roles and responsibilities of all staff in identifying and responding to suicidal behaviour and NSSI;
- preparing in advance and clearly establishing processes including responsibility for case coordination; and
- providing school wide staff education about mental health and wellbeing, suicidal behaviour and NSSI.⁸

The term '**nominated staff member**' is used in this guideline to refer to the school-based staff member/s who need to be informed when there is a concern. The nominated staff member is routinely on the school site and will vary from

school to school and may include, for example, the principal, deputy principal, student services or other support staff, class teacher or a combination of these.

1.5.2 Sharing Information

Respecting student confidentiality is an important professional consideration in the care of a young person. Gaining consent to exchange information allows school staff, parents, students and external providers to collaborate for the purpose of making decisions and developing plans with a shared understanding of who has access to this information. An example form for schools to use when seeking consent to exchange information with external providers is available ([Appendix 1: Consent for schools to exchange information with external providers](#)).

There are times when informed consent is not able to be obtained or is withheld. In general, there is sufficient reason to share information without consent when maintaining confidentiality puts the wellbeing of a young person at further risk and disclosure minimises the threat of harm. Both the *Children and Community Services Act*⁹ and *Mental Health Act*¹⁰ allow for information to be exchanged for the purpose of establishing and maintaining the safety of a young person.

In these specific cases, the information shared is directly related to planning for safety and is connected to continuous communication. The decision to share information is recorded.¹¹ If there is disagreement about information sharing despite goodwill further advice should be sought through the principal (or nominee) and/or other appropriate channels within your organisation (see [Appendix 2 - Emergency and consultation contacts for school staff use](#)).

⁷ Mental Health Division (2008). *Clinical Risk Assessment and Management (CRAM) in West Australian Mental Health Services: Policy and Standards*. Government of Western Australia Department of Health, Mental Health Division.

⁸ Hasking, P., Heath, N. (2016). Position paper for guiding response to non-suicidal self-injury in schools. *School Psychology International* 37(6). DOI: 10.1177/0143034316678656

⁹ Government of Western Australia (2004). *Children and Community Services Act 2004*. Western Australian State Law Publications.

¹⁰ Government of Western Australia (2014). *Mental Health Act 2014*. Western Australian State Law Publications.

¹¹ Ombudsman South Australia (2014). *Information sharing guidelines for promoting safety and wellbeing*. State of South Australia

1.5.3 Training

Training is recommended for key staff across all school settings. This may be particularly relevant in roles and responsibilities such as those undertaken as part of student services teams.

Enhancing knowledge and skills that match an individual staff member's roles and responsibilities in following up or responding to disclosures could include training in:

- cultural competency to build culturally responsive and culturally safe practices;
- trauma informed practices;
- mental health awareness (e.g. Youth Mental Health First Aid); and
- suicide risk assessment and prevention (e.g. Gatekeeper Suicide Prevention).

In determining training needs at a whole school and individual staff level, principals are encouraged to consider:

- staff understanding of mental health;
- preparedness to respond to disclosures of suicidal behaviour and NSSI, including availability of staff trained in risk assessment; and
- preparedness to respond to a student sudden death or suspected suicide.

1.5.4 Responding to disclosures (All Staff)

A **direct disclosure** is when a student informs a school staff member of any thoughts, feelings or actions related to suicidal behaviour or NSSI.

This may include a verbal disclosure, observations of a concern (e.g. self-injury or other behaviour) or communication through a task such as an essay or a piece of artwork.

An **indirect disclosure** is when a school staff member is informed by a third person including information from another student, school or community member.

If a student discloses suicidal behaviour or NSSI, calm, caring and non-judgmental responses are most effective. The staff member should listen and reassure the student that talking about their feelings is positive and helpful. Avoid expressing overly emotional responses such as pity, anger and disgust or taking punitive action. It is critical that the student is linked to appropriate support and safety is maintained.

It is helpful to develop an awareness in students early on that there are limits to the confidentiality of information relating to suicidal behaviour and NSSI and that there is a duty of care to pass on these concerns to people in a position to help (nominated staff member; support staff; parent/carer), while at the same time providing reassurance that this will be done in a collaborative and supportive way.

A quick reference guide for staff to use following a disclosure is available at [Appendix 3: School response to student suicidal behaviour and non-suicidal self-injury quick reference](#).

Staff cannot keep disclosures of suicidal behaviour or NSSI confidential.

Example supportive response following a disclosure: Actions will depend on staff member's role and responsibilities.

- Use protective interrupting techniques if disclosure occurs in front of peers.
- Find an appropriate place to discuss the concern.
- Listen, gather information and summarise what the student has disclosed or share the information you have received.

"I appreciate it is difficult to let me know these thoughts and feelings. So, what you're telling me is.... Have I got that right?"

or

"I have heard that you said 'I wish I wasn't here' to your teacher, what did you mean by that?"

- Discuss your next actions with the student remembering the limits to your confidentiality.

"It is important that we discuss this with someone who can help get you the right support."

- Link the student to appropriate support.

"There are a few people we can go to. Who would you rather?" "Let's go together now."

- Identify others who may be impacted and ascertain support requirements.
- Follow up with the student to reinforce belonging and connection.

"I just wanted to check in and see how you are going."

1.5.5 Direct disclosures

Student directly discloses suicidal behaviour or NSSI to staff member.

When the disclosure occurs verbally the staff member listens and responds to the student in a calm, caring and non-judgmental way. If the student discloses during a lesson/in front of peers, the teacher is advised to protectively interrupt and follow-up with the student individually. This should happen without delay

and may include directing them gently away from peers, following up at an appropriate gap in teaching or at the end of the current lesson. The staff member reminds the student that in order to best support them the concerns have to be shared with appropriate school staff.

When a student does not disclose verbally but information indicates there is concern about suicidal behaviour or NSSI (e.g. observable self-injury, communication via school work) the staff member takes actions such as discussing the concern with the student if appropriate, and informing appropriate school staff.

If the disclosure or concern indicates that the student is at **imminent risk**, the staff member keeps the student safe and informs the principal (or nominee) **immediately**. The staff member does not leave the student unsupervised. The principal (or nominee) contacts the parent/carer and if necessary, follows incident management procedures.

Where there is an existing plan in place (such as a Risk Management Plan), follow the actions outlined. If the plan does not address current student need, seek support from the principal (or nominee). See [Appendix 4 - Risk Management Plan example template](#) or [Appendix 5 - Risk Management Memo example template](#).

In all other cases, the staff member supports student safety by:

- arranging for the student to receive first aid if injured;
- linking the student to the nominated staff member – judge whether to take the student immediately or following current class/activity. This needs to occur as soon as practical following the disclosure;
- providing information to nominated staff member to assist in identifying and supporting peers and staff who may have been impacted by the disclosure; and
- Document actions in line with school and system requirements.

1.5.6 Indirect disclosures

Staff member is informed of concern regarding student suicidal behaviour or NSSI by a third

party (may be information from another student, school or community member).

The staff member advises that the information will be shared with appropriate school staff so the student is supported and reassures them that they have taken the right action.

The staff member ascertains the impact on the individual who made the indirect disclosure, links with appropriate support and provides them with contact information, including emergency response numbers (see [Appendix 6 – Emergency, consultation and support contacts for sharing with parent/carer/student](#)), if necessary.

If disclosure indicates that the identified student is at **imminent** risk, the staff member informs the principal (or nominee) **immediately** so that steps can be taken to locate and keep the student safe. Once located, the student is not left unsupervised. The principal (or nominee) contacts the parent/carer and if necessary, follows incident management procedures.

Where there is an existing plan in place, follow the actions outlined. This is commonly referred to as a Risk Management Plan (see [Appendix 4 - Risk Management Plan example template](#) or [Appendix 5 - Risk Management Memo example template](#)).

In all other cases, the staff member supports student safety by:

- checking the student is at school and in class by following normal school processes; and
- informing the nominated staff member of the indirect disclosure as soon as practical.

Document actions in line with school and system requirements.

1.5.7 Process for nominated staff members following a disclosure

Following a disclosure, the nominated staff member may take or delegate the following actions as soon as practical:

- Follow the RMP if there is one in place.
- Gather further information from the student and/or others as necessary.
- Discuss and prepare the student for actions that are likely to form part of the response,

such as support, referral options and involvement of parent/carer.

- Provide the student with emergency response numbers (see [Appendix 6 – Emergency, consultation and support contacts for parent/carer/student](#)).
- Consult with appropriate staff such as an onsite colleague or a contact on the consultation list (see [Appendix 2 - Emergency and consultation contacts for school staff use](#)).
- Arrange ongoing monitoring of the student while they are at school.
- Contact the parent/carer to tell them about the concern.
 - Identify the appropriate parent/carer contact, checking for family information such as court orders.
 - Contact the student's emergency contacts if parent/carer cannot be reached.
 - Emphasise the need for parent/carer to be supportive in their response to their child's disclosure.
 - Gain consent from parent/carer for a suicide risk assessment to be undertaken by appropriately trained staff if one has not already taken place. Note: where there is a direct disclosure to a staff member trained in suicide risk assessment, the staff member may have completed the assessment prior to contacting the parent/carer, if appropriate.
 - Recommend external suicide risk assessment in cases where a staff member is not available to undertake one or the parent/carer declines one at school.
 - Provide the parent/carer with emergency response numbers (see [Appendix 6 – Emergency, consultation and support contacts for parent/carer/student](#)).
- If it is not possible to contact a suitable adult, consult further with appropriate staff such as an onsite colleague (including principal or nominee) or a contact on the consultation list to ascertain next steps (see [Appendix 3 - Emergency and consultation contacts for staff use](#)).

- Depending on the urgency of the situation and nature of the disclosure, the following actions may also be considered:
 - Consult with or refer to the Department of Communities (Communities) where there are child protection concerns;
 - in the metro area, consult with CAMHS Crisis Connect;
 - in rural, regional and remote areas, consult with the local WACHS CAMHS or hospital emergency department;
 - conduct a home visit;
 - contact emergency services; and/or
 - contact WA Police.

Document actions in line with school and system requirements.

1.5.8 Where there is concern about contacting home

- Consult with appropriate staff such as an onsite colleague (including principal or nominee) or a contact on the consultation list to ascertain next steps (see [Appendix 2 - Emergency and consultation contacts for staff use](#)).
- Consult with and/or refer to Communities if there is reason to believe that notifying the parent/carer will put the student at greater risk due to child protections concerns.
- Take actions based on any additional information received through consultation.

Document actions in line with school and system requirements.

1.6 Completing a suicide risk assessment at school

In cases where a suicide risk assessment is completed at school, the student is linked with an appropriately trained staff member (Gatekeeper Suicide Prevention or equivalent). The staff member conducting the suicide risk assessment makes sure the student is aware that where information is shared, it is for the purpose of keeping them safe and engaging them with appropriate supports.

The staff member conducting the suicide risk

assessment provides the student with support information, including emergency response numbers (see [Appendix 6 – Emergency, consultation and support contacts for parent/carer/student](#)) and explores with the student suitable adults who can support them at school, in the community and at home. Providing basic support information and emergency response numbers can be seen as part of safety planning for a student.

A Safety Plan involves the young person – ideally with support from a health professional or their local supports – identifying coping and help-seeking strategies that are tailored for their needs, situation and personal relationships. [Be You: Suicide Safety Planning for Young People](#)

Following the suicide risk assessment, the parent/carer is notified of supporting actions and recommendations before the student leaves school. This may include one or more of the following:

- ongoing monitoring of the student
- strategies to increase safety
- providing emergency response numbers
- linking the student with appropriate services through referral
- gaining consent to exchange information regarding the incident or disclosure with involved external agencies and private service providers, as appropriate (See [Appendix 1 – Consent for schools to exchange information with external providers](#))
- recommending the student is taken to a hospital emergency department for further assessment.
 - If the student is being taken for further assessment by ambulance or parent/carer (e.g. to hospital), gain consent to provide relevant information to the external agency, unless it is an emergency.

- Information regarding the urgency of the student's presentation should be provided to the agency by whatever means possible.
- schools are discouraged from transporting a student to an emergency setting, however if this is the only option they should collaborate with parent/carer and school leadership and ensure the student is accompanied by more than one staff member.

1.7 Limited parent/carer support

If the student has limited parent/carer support, reiterate concerns to the parent/carer and emphasise the need for collaboration, ongoing monitoring of the student at home and provide emergency contacts in case of a change in the presentation of their child (see [Appendix 6 - Emergency and consultation contacts for parent/carer/student support](#)).

In consultation with the principal (or nominee), the following actions may also be considered:

- Consult with appropriate staff such as an onsite colleague or a contact on the consultation list to ascertain next steps (see [Appendix 2 - Emergency and consultation contacts for staff use](#)).
- Contact the parent/carer directly (preferably by phone), with follow up through email, or a formal letter to confirm the school's concerns, discussion and recommendations.
- If Communities is currently involved, consult with or refer to the case worker .
- Consult with or refer to Communities through Central Intake Team (1800 273 889) during business hours or Crisis Care (1800 199 008) out of hours where there are child protection concerns, including when a parent/carer's response may put the student at further risk of harm.

1.8 Actions for consideration in all cases

- Keep the principal (or nominee) updated on actions and outcome.
- Follow-up with and offer support to any students and staff impacted by the disclosure or incident.
- Consider potential social media activity and plan or respond as needed.
- Obtain consent to inform any external service providers of the incident or disclosure, as appropriate.
- Confirm with the parent/carer if any recommended actions have occurred, such as an external suicide risk assessment.
- Develop or review an individually tailored RMP, confidential memo or other plan for support, to enhance student safety at school.
- Distribute the plan to appropriate staff (including teachers of the student) so they can manage the safety of the student when at school.
- Where necessary, organise a return to school meeting with relevant school staff, the parent/carer, external agencies and the student, as needed.
- Document and securely store information.
- Non-Government Schools consider whether a Reportable Incident needs to be lodged.
- Public schools consider whether an Online Incident Notification (OIN) needs to be lodged. Refer to IKON for information.
- Consider self-care and determine whether an opportunity to debrief with a colleague or access to professional support is needed.

1.9 Additional considerations for schools

Consider the individual differences, needs and environment when responding to and planning for cases of suicidal behaviour and NSSI.

1.9.1 Aboriginal and Torres Strait Islander students

The term 'Aboriginal' respectfully refers to Aboriginal and Torres Strait Islander people.

Suicide is the leading cause of death in young Aboriginal people. Aboriginal people aged 15-19 years are four times more likely to die by suicide than non-Aboriginal young people.¹²

The *Commitment to Aboriginal Youth Wellbeing* released in March 2020 is the Government of Western Australia's response to the State Coroner's *Inquest into the deaths of thirteen children and young persons in the Kimberley and Learnings from the Message Stick: The report of the Inquiry into Aboriginal youth suicide in remote areas*. The following statements are attributed to the Premier of Western Australia.

"To significantly reduce Aboriginal youth suicide, we must commit to making clinical and community services more accessible and effective, and at the same time address a broader range of factors.

Our goal must be to build young Aboriginal People up to be strong in culture, resilient in mind and body, and confident of a future in which they are valued, supported and have the capacity to thrive."

Commitment to Aboriginal Youth Wellbeing, March 2020, Department of the Premier and Cabinet Western Australia

Staff responsible for following up or responding to disclosures made by Aboriginal

young people would benefit from formal training in suicide risk assessment and prevention, cultural competency training delivered by local Aboriginal people and professional learning to embed culturally responsive practices. They would also benefit from the advice and guidance of Aboriginal mental health practitioners, particularly when culture-bound syndromes may be indicated.

Cultural safety and cultural responsiveness is the ability to understand, interact and communicate effectively and sensitively with people from a cultural background that is different to one's own, and demonstrating this ability with proficiency. It is characterised by respect for culture, ongoing self-reflection, expansion of knowledge and commitment to improving practices and relationships.

Culturally safe and responsive staff establish and maintain mutually respectful and trusting relationships with Aboriginal students, their parents and families. They support Aboriginal students to feel a sense of belonging and connection and create culturally safe environments, including undertaking a process of informed cultural consent when appropriate.

Public schools have access to the Aboriginal Cultural Standards Framework¹³ to guide the incorporation of culturally responsive and safe practices into their everyday work.

It is helpful to understand that the high rate of Aboriginal youth suicide is attributed to complex and interrelated factors including historical and political factors and the impact of these on traditional cultures and languages, economic and educational disadvantage, social determinants including racism, disproportionate exposure to grief and loss, as well as the impact of intergenerational trauma. These factors result in Aboriginal people having consistently higher levels of psychological distress than other Australians.¹⁴

For Aboriginal children and young people,

¹² Dudgeon, P., et al. (2016). *Solutions that work: What the evidence and the people tell us. Aboriginal and Torres Strait Islander Suicide Prevention Evaluation Project Report*. University of Western Australia, Perth.

¹³ Department of Education Western Australia (2015). *Aboriginal Cultural Standards Framework*. Retrieved from [http://www.det.wa.edu.au/policies/detcms/policyplanning-and-](http://www.det.wa.edu.au/policies/detcms/policyplanning-and-accountability/policies-framework/strategic-documents/aboriginal-cultural-standards-framework-.en?cat-id=3457058)

[accountability/policies-framework/strategic-documents/aboriginal-cultural-standards-framework-.en?cat-id=3457058](http://www.det.wa.edu.au/policies/detcms/policyplanning-and-accountability/policies-framework/strategic-documents/aboriginal-cultural-standards-framework-.en?cat-id=3457058)

¹⁴ Dudgeon, P., et al. (2016). *Solutions that work: What the evidence and the people tell us. Aboriginal and Torres Strait Islander Suicide Prevention Evaluation Project Report*. University of Western Australia, Perth.

culture plays a key role in their development, identity and sense of belonging, and is a pre-determinant and a contributing factor for their health, wellbeing and resilience. Providing opportunities for Aboriginal children and young people to strengthen their cultural and linguistic identities and providing culturally safe environments are protective factors against suicidal behaviour and NSSI.¹⁵ It is important that cultural identity is explored in a safe way when undertaking a suicide risk assessment.

For some Aboriginal students, Standard Australian English is an additional language/dialect. Consider the need to seek the support of an Aboriginal person, and/or significant adult familiar with the student's language and cultural background, as part of the communication, engagement and referral process.

The Aboriginal and Torres Strait Islander Suicide Prevention and Evaluation Project (ATSISPEP) Program Evaluation Framework¹⁶ provides a framework for choosing appropriate programs and strategies in the prevention of suicide and postvention following a death by suicide. This framework recognises the important role of cultural healing in the prevention of suicide and postvention responses.

Respecting the diversity of Aboriginal people includes understanding and being responsive to local cultural protocols and kinship structures, culturally sanctioned behaviours and social explanations of mental illness and wellbeing, culturally sanctioned self-harming behaviours, and cultural resources to promote healing and resolution of cultural issues.¹⁷

Seeking the expertise of local Aboriginal community representatives who have an understanding of specific contexts and situations is crucial to ensuring practices and approaches are culturally responsive.

1.9.2 Culturally and Linguistically Diverse students

Understand the importance of using culturally responsive practices when engaging with culturally and linguistically diverse students and their parents, families and communities in the management of student suicidal behaviour and NSSI.

Consider the need to seek the support of an appropriate and suitably experienced person who is connected with the student's language and cultural background as part of the communication, engagement and referral process.

Consider using the translating and interpreting service where the student and/or family has a language background other than English.

Consider cultural competency training such as the online *Diverse WA Cultural Competency Training* (accessible to public schools) to help staff work effectively with students.

1.9.3 Lesbian Gay Bisexual Trans Intersex Queer/Questioning Asexual and other sexualities and gender identities (LGBTIQA+)

LGBTIQA+ is used in this guideline to encompass all people whose sexual orientation, gender identity or sex differ from heterosexual or male/female sex and gender norms, regardless of the identity labels people use. Sometimes the terms same sex attracted or gender diverse are used to describe feelings, experiences and behaviours rather than fixed identities. Whatever term is used, it is important to note that this might change over time.

Students identifying as LGBTIQA+ can experience increased vulnerability to poor mental health outcomes due to exposure to peer rejection, bullying, lack of family support, physical and verbal abuse, school issues and homelessness.¹⁸

¹⁵ Commissioner for Children and Young People Western Australia (2015). "Listen to us": Using the views of WA Aboriginal and Torres Strait Islander children and young people to improve policy and service delivery. Retrieved from: <https://www.cyp.wa.gov.au/our-work/resources/aboriginal-and-torres-strait-islander/>

¹⁶ Dudgeon, P., et al. (2016). *Solutions that work: What the evidence and the people tell us. Aboriginal and Torres Strait Islander Suicide Prevention Evaluation Project Report*. University of Western Australia, Perth.

¹⁷ Leckning, B., Ringbauer, A., Robinson, G., Carey, T.A., Hirvonen, T., Armstrong, G. (2019) *Guidelines for best practice psychosocial assessment of Aboriginal and Torres Strait Islander people presenting to hospital with self-harm and suicidal thoughts*. Menzies School of Health Research: Darwin

¹⁸ Rosenstreich, G. (2013). *LGBTI People Mental Health and Suicide*. Revised 2nd Edition. National LGBTI Health Alliance. Sydney.

LGBTIQA+ young people are five times more likely to attempt suicide and twice as likely to engage in self-injury than their peers. People who identify as transgender are 11 times more likely to attempt suicide than the general population.¹⁹

LGBTIQA+ people are also disproportionately affected by suicide deaths, attempts and ideation of friends, family and the wider community.²⁰

Homophobic or transphobic verbal and physical abuse of same sex attracted, gender diverse and gender questioning young people occurred at school in 80% of the instances reported in a study by La Trobe University. There is a strong relationship between abuse and the incidence of self-harm with twice the number of LGBTIQA+ young people who suffered verbal abuse and four and a half times the number of LGBTIQA+ young people who experienced physical abuse having attempted suicide compared to those who did not experience either verbal or physical abuse.²¹

Consider whole school practices that promote safe, inclusive and supportive learning environments which value diversity.

Consult with colleagues and other professionals who have experience in supporting LGBTIQA+ students.

Consider additional planning to support the identified needs of LGBTIQA+ students. This may be represented in an individualised documented plan for a student.

1.9.4 Students exposed to cumulative harm

Understand that harm and trauma, especially during early childhood, increase risk of adverse mental health issues, suicidal ideation and behaviours, and NSSI in later development.

Understand that those children who have been exposed to trauma during childhood may require

special consideration in risk management planning as they may exhibit maladaptive coping strategies including but not limited to suicidal behaviour and NSSI.

Identify, through trauma informed practice, the difference in response to triggers or stressors in the environment and the time it takes to regulate emotions for young people exposed to trauma and take this into account when establishing a Risk Management Plan.

1.9.5 Students in care of Department of Communities

When a student is in the care of the Department of Communities, they are the legal guardian.

Inform the student's Communities case worker or team leader and foster carer when there is a concern for a student regarding suicidal behaviour and/or NSSI and collaborate with Communities and foster carers in the development of a Risk Management Plan.

All Aboriginal Children in Care have a cultural plan and access to an Aboriginal Practice Leader via their district case worker who is available for consultations.

1.9.6 Students with a disability

Understand that young people with a disability are more likely to have mental health problems compared to those without a disability.²²

Seek consultation, where possible, with a professional who has specialist knowledge of the specific disability before intervention.

Consider the functional needs of the student when discussing a disclosure and/or when providing support.

Consider the barriers to communication a student experiences and provide assistance to fully understand the extent of their distress, where needed.

¹⁹ National LGBTI Health Alliance February 2020 Snapshot of Mental Health and Suicide Prevention Statistics for LGBTI People retrieved from https://d3n8a8pro7vnmx.cloudfront.net/lgbtihealth/pages/240/attachments/original/1595492235/2020-Snapshot_mental_health_%281%29.pdf?1595492235

²⁰ Rosenstreich, G. (2013). *LGBTI People Mental Health and Suicide*. Revised 2nd Edition. National LGBTI Health Alliance. Sydney.

²¹ Hillier, L., Jones, T., Monagle, M., Overton, N., Gahan, L., Blackman, J. & Mitchell, A. (2010). *Writing themselves in 3: the third national study on the sexual health and wellbeing of same sex attracted and gender questioning young people*. Australian Research Centre in Sex, Health and Society, La Trobe University.

²² Dix, K., Shearer, J., Slee, P. & Butcher, C. (2010). *KidsMatter for students with a disability: evaluation report*. Ministerial Advisory Committee: Students with Disabilities, The Centre for Analysis of Educational Futures, Flinders University.

Attend to spoken and unspoken information communicated by the young person in order to fully understand the extent of their distress.

Utilise information from the parent/carer and/or other relevant adults such as the teacher in addition to information from the student when deciding on supporting actions.

Utilise parent/carer, staff and other involved adults to implement actions to reduce distress and increase safety for a student.

Recognise that distress in children, expressed as suicidal intent requires investigation and action.

1.9.7 Social transmission of NSSI

- Social transmission of NSSI may be identified when multiple instances of self-injury are experienced among peers within a school over a short period of time.²³
- Intervention strategies for schools can include the following:²⁴
 - Reducing detailed communication about NSSI.
 - Encourage help seeking behaviours among those feeling distress.
 - Encourage parents to provide a calm, supportive environment for their child.
 - Encourage peers to inform a trusted adult if they are concerned for the wellbeing of a friend or peer.
 - Developing practical and caring ways of responding to wounds such as first aid procedures, or scarring such as recognising that choosing not to conceal scars may be a part of recovery.

- Referring students to individual therapies to develop an understanding of their own NSSI and useful alternatives.

1.9.8 Primary schools

Suicidal behaviour and NSSI can occur in primary school aged children. Data from a Kids Helpline report in 2018 found 10 percent of calls from 5 to 12 year olds were suicide related.²⁵

Consider the developmental capacity of the student when discussing a disclosure and undertaking suicide risk assessment. This should include sensitively ascertaining the student's concept of death.²⁶ It is important to understand that a lack of awareness regarding the permanency of death is not necessarily a protective factor.

Gather information from the parent/carer and others such as the teacher, in addition to information from the student, when deciding on supporting actions.

Understand that increasing the awareness of supportive adults about suicide risk identified in children promotes opportunities for their needs to be heard and taken seriously.²⁷

All expressions of suicidality require an action. Where a child has used suicidal language but questioning, investigation and consideration of the context reveals no suicidal intent, suitable actions such as informing parent/carer, encouraging alternative problem solving and communication strategies might apply.

1.9.9 Students 18 years and over

Identify services to support students over 18 years old (e.g. adult mental health services).

Identify and maintain multiple current emergency contact details which may not be the student's parent/carer.

Understand that regardless of age, duty of care continues for students over 18 years.

Understand that in the over 18 years age group,

²³ Hasking, P., Heath, N. (2016). Position paper for guiding response to non-suicidal self-injury in schools. *School Psychology International* 37(6). DOI: 10.1177/0143034316678656

²⁴ Hasking (2016).

²⁵ Youtown (2019). *Kids Helpline Insights 2018: National Statistical Overview*. Brisbane.

²⁶ Mishara, B. L. (2003). How the media influences children's conceptions of suicide. *Crisis: The Journal of Crisis Intervention and Suicide Prevention*, 24(3), 128–130.

²⁷ O'Grady, L. (2019). Suicide and Young Children. *InPsych: The Bulletin of the Australian Psychological Society Limited*. 41 (3).

interventions may involve negotiation and involvement of people other than the parent/carer.

1.9.10 Disclosures outside school hours

Consider how to provide general information on emergency supports to students and families out of hours. This might be via email, messaging systems or school website/social media that students or families may access outside of regular school hours such as during holiday periods.

If a disclosure of suicidal behaviour or NSSI is made or discovered outside of school hours such as during an after school activity or marking school work/assessments, best attempts to contact the parent/carer is recommended. If a student discloses via email or any other electronic means, encourage them to seek help and provide them with emergency contact and support information ([Appendix 6 – Emergency, consultation and support contacts for parent/carer/student](#)).

On making contact with a parent/carer, inform them of the disclosure and provide emergency and support information. If contact cannot be made, the police can be contacted to conduct a welfare check.

Inform the principal as soon as possible and document any actions taken.

Follow-up with the family and student should occur regarding support and student safety at school.

1.9.11 Rural and remote schools

Identify emergency response numbers and after-hours mental health services in the local area including those run out of community clinics.

Identify and utilise external agency partnerships to develop coordinated actions in regions where mental health services are unavailable or unreachable.

Recognise the multiple relationships existing between families, students and staff in rural and remote towns and their impact on the provision of

mental health intervention and referral options.

Plan and seek professional peer support when navigating competing responsibilities and blurred boundaries.²⁸

1.9.12 Excursions and camps

Recognise the importance of participation in co-curricular activities for young people with mental health issues including suicidal behaviour and NSSI.

Develop a plan for managing disclosures of suicidal behaviour and/or NSSI when off-site, which includes consideration of access to means and adequacy of supervision.

Include strategies from an existing RMP for use in the management of an individual student during offsite events.

Collaborate with parent/carer, student and any external agency or service provider to gather up to date information, including stressors and indicators of concern to develop an appropriate response strategy.

Gain knowledge of the excursion site to assist with the development of context specific strategies, such as environmental considerations and access to external services/hospital.

1.9.13 TAFE and workplace learning students

It is important that students with mental health issues including suicidal behaviour and NSSI participate in offsite education opportunities.

Students may require adjustment to or development of a RMP which extends beyond the school setting.

Share information to enhance the safety of the student with the external education provider.

Have clear, pre-organised contact pathways for the external education provider to contact parents/carers or mental health providers for planning and in the case of an incident or disclosure.

1.9.14 Students in residential settings

Establish enrolment processes that include

²⁸ Psychologists living in small, remote, or rural communities affected by disaster (2016) Australian Psychological Society

transition planning and support for students identified to be at risk.

Use the guidelines to develop a plan for managing disclosures of suicidal behaviour and/or NSSI that address issues that may arise outside school hours.

Identify emergency response numbers and after-hours mental health services in the local area.

Establish clear communication processes between the residential setting, school and the student's family and identify potential supporting actions in the case of a student mental health crisis.

Improve staff capacity to respond to concerns through:

- increasing staff understanding of mental health, how to identify risk and referral pathways; and
- provision of training in suicide prevention (such as Gatekeeper Suicide Prevention Workshops) for staff who may have contact with at risk youth.

Educate students on mental health and wellbeing strategies, including how to get help.

Consider the impact of the residential setting on mental health and wellbeing including:

- distance from family, peers and community;
- adaptation to a new living environment, peers and staff; and
- changed responsibilities and expectations which come with boarding.

1.9.15 Students studying in an online environment

Vulnerable students studying in an online environment require a preparedness amongst staff to respond to distress, suicidal behaviour and NSSI.

In the online environment, some components of the students' current plans will apply and some may need to be adapted to those times where there is scheduled contact such as, check in phone calls, online participation or email exchanges.

Contingency plans for disclosures or appearance of distress via email, phone or face to face, can

include providing reassurance, encouraging help seeking and providing emergency contact and support information.

Adaptation of reasonable safety planning can be undertaken with a young person, taking into account what is known of their home environment, supervision arrangements and presenting issues with scope for additional involvement of parent/carer.

Contact parent/carer and pass on information received and provide them with emergency and support information (see [Appendix 6 – Emergency, consultation and support contacts for parent/carer/student](#)).

If the parent/carer is unable to be contacted and the situation requires urgent action, contact WA Police or Communities through Central Intake Team (1800 273 889) during business hours or Crisis Care (1800 199 008) out of hours.

1.9.16 Disclosure by a staff member

A disclosure by a staff member can be prepared for by providing clarity for staff in the area of confidentiality and the limits to confidentiality, maintaining current emergency contacts, and providing contact information for appropriate support services including employee assistance providers.

If a disclosure by a staff member is received:

- Facilitate communication with their emergency contact, another identified significant person or a clinician to assist in accessing support and to enable safety.
- Identify and provide contact information for appropriate support services including Employee Assistance Provider details.
- Liaise with school administration teams and/or region/organisational services if concerned about employee capacity to perform work duties or functions.
- Contact emergency services or arrange a police welfare check if necessary.

Access further information for supporting staff such as the [Heads up resource – Suicide Prevention](#)

1.9.17 Disclosure by a parent/carer or community member

Disclosures by a parent/carer or community member require action:

- Identify and provide contact information for appropriate support services, including emergency numbers.
- Encourage communication with a significant person, relative or clinician to assist with accessing support and to enable safety.
- If necessary, contact emergency services or arrange a police welfare check.

1.10 Reference to suicide and NSSI in schools and classrooms

The topic of suicide is best addressed in the context of whole school mental health and wellbeing education. Programs that aim to improve general mental health and wellbeing at the individual and organisational level, promote help seeking behaviour and reduce stigma associated with all mental health issues are useful in addressing the issue of suicide and suicidal behaviour in schools.

Programs specifically addressing suicide or 'stand-alone' programs are considered less effective than programs which recognise and work within a mental health promotion framework at a system and school level.

Whilst it is important to inform and educate audiences through guiding safe and effective conversations about suicide,²⁹ we are not always aware of individuals affected by suicide and those for whom focused attention to the issue of suicide could be distressing.

Conversations and presentations specifically regarding suicide in any public forum, including schools and school groups, require careful preparation and monitoring of impact on young people with underlying and unidentified vulnerabilities.

All presentations to student groups in schools require careful consideration within the usual

context of whole school curriculum planning. Safety planning in advance of these presentations can also be undertaken to improve preparedness to respond to disclosures of suicidal behaviour or NSSI.

When considering any program for students, including on the topic of suicide, it is useful to consider the evidence supporting the program and whether the program does achieve its purported outcomes.

It may not always be appropriate for presentations or programs with a specific focus on suicide to occur in schools, particularly when there are contextual factors such as a recent suspected suicide, recent exposure to suicide attempts or NSSI.

Understand that conversations may naturally arise in the context of the broader curriculum, including classroom discussions, novels, films and mental health and wellbeing programs.³⁰

When this occurs:

- avoid normalising or glamorising suicide by describing it as an understandable solution to a significant life event or by describing it as heroic or altruistic behaviour;
- avoid increasing knowledge about methods of suicide and their lethality; and
- emphasise the availability of help and encourage people to seek help, highlight the impact of the loss on people left behind and discuss that suicide is the result of multiple stressors and risk factors.

1.11 Screening students for suicidal risk and NSSI

The recommended approach for identifying vulnerable individuals is through individual psychosocial assessment,³¹ such as the

²⁹ Conversations Matter (2017). Core principles for guiding community conversations. Retrieved from <http://www.conversationsmatter.com.au/professional-resource/core-principles>

³⁰ Conversations Matter (2017). Group discussions about suicide prevention. Retrieved from <http://www.conversationsmatter.com.au/resources-community/group-discussions-about-suicide-prevention>

³¹ headspace. *Suicide intervention in schools – an evidence summary*. Retrieved from <https://headspace.org.au/assets/School-Support/Suicide-intervention-in-schools.pdf>

Gatekeeper suicide risk assessment framework or similar, which can be conducted by trained school staff. To complement this approach, information and support in accessing school based and community services can also be provided to encourage help seeking and facilitate access to services for students who may not be otherwise identified.

The use of screening tools and measures is sometimes considered by schools as a means of identifying young people at risk of suicide who have not sought help or are not already receiving services. However, both individual assessment and screening tools can only provide a snapshot of an individual's wellbeing. Suicide risk is not static, it can change over time and is sensitive to dynamic factors such as stressors and precipitating events.

Problems arising from screening tools and measures include falsely identifying that a student is at risk when they might not be and conversely not identifying a student who does need help.³² These measures also do not account for the fact that unforeseeable events can dramatically change an individual's risk in a short period of time. Disclosures of suicidal behaviour or NSSI gained through the completion of screening tools and measures need to be investigated and addressed.

Consult with an appropriate mental health professional if considering the use of these tools or measures.

1.12 Promote self-care

It is important for staff to be aware of their own professional and personal needs and to seek support as required. Staff can seek professional collegiate support within their own networks and organisation, or personal support through their employer's current employee assistance program or an external support agency.

Wellbeing resources available online include:

[Be You: Staff wellbeing](#)

[Black Dog Institute: Wellbeing](#)

[Heads up: Taking care of yourself and staying well](#)

³² Robinson, J., Bailey, E., Browne, V., Cox, G., & Hooper, C. (2016). *Raising the bar for youth suicide prevention*. Orygen, The National Centre of Excellence in Youth Mental Health, Melbourne.

SECTION 2

School risk management plan guidelines:

Student suicidal behaviour and non-suicidal self-injury

A school risk management plan (RMP) identifies circumstances where a student may be at risk of harm and strategies to manage this risk.

2.1 Developing a risk management plan

A school risk management plan (RMP) is an organisation plan which identifies foreseeable circumstances where a student may be at risk of suicidal behaviour and/or NSSI and outlines strategies to manage this risk in the school setting (see relevant sections of 1.9 for excursions, workplace learning etc.) Following the strategies in a plan supports a coordinated approach to improving safety and promoting recovery.

Risk management plans may be referred to by other names to suit a school context e.g. support plan or wellbeing plan, however the purpose of the plan remains the same and is tailored to the individual student and circumstances.

In developing a RMP, consider the following:

- Develop a plan as soon as practical once the need has been identified. Interim strategies for monitoring student safety can be implemented while a more comprehensive RMP is developed.
- Communicate the RMP and any actions that need to be taken, to the family, school staff and external agencies.
- Parent/carer consent is recommended before implementing a RMP. Where a student is in care of the Department of Communities both guardian and carer consent should be sought.
- In cases where parent/carer consent is not provided or is difficult to obtain, a RMP can be implemented in order to improve student safety and wellbeing.
- In cases where parent/guardian consent is not provided or difficult to obtain school staff should consult further with relevant personnel. In public schools this may include the School Psychologist, Lead School Psychologist and Regional Office staff.
- RMP's are focused on recovery and supportive in nature.
- Tailor the RMP to the student's needs, information available and complexity of the individual circumstances. Generic RMPs or lists will not reflect individual circumstances.

- In less complex cases, staff can be informed of concerns and strategies using a risk management memo (see template for example) or other appropriate communication.
- Collaborate with all relevant parties where possible including parent/carer, school staff, residential staff, external agencies and service providers and the student.
- Discuss with the student how they can access support during the school day.
- Consider the risks associated with the use of an exit card (or similar) such as the maintenance of supervision.
- Staff members identified in the RMP should be routinely accessible on the school site.
- Store the RMP in a confidential place.
- Review the RMP regularly to take into account fluctuations of risk, including after a significant incident that may influence risk.
- The RMP may be phased out in stages when a student's recovery suggests less monitoring and additional strategies are required.
- Cease the RMP when all relevant parties agree that monitoring and additional strategies are no longer required, as the student is able to be supported through usual school processes.

2.2 Risk management plan sample strategies

The below are a guide only to the areas that may need to be covered by a RMP. The context and the associated strategies should reflect the individual needs of the student and the information available through a suicide risk assessment or other sources.

Attendance/Absences

- Parent/Carer notifies school staff before the school day starts if the student will not be attending that day.
- Identify absence/presence at beginning of class.
- Notify administration or student services if the student is absent but meant to be at school so steps can be taken to locate student.

Learning environment

- Student moves to a prearranged, supervised area if they are distressed and unable to stay in class.
- Teacher locates the student if they do not return in a reasonable time after a toilet break.
- Teacher notifies the nominated staff member if they cannot find the student.
- Teacher encourages the student to engage in classroom tasks and where necessary adjust academic and homework requirements in consultation with parent/carer.

Break times

- Student encouraged to remain with friends/peers during breaks.
- Student to access support from a staff member available in a set location if they need support.

Peers

- Encourage the student to seek help from staff if they need support rather than sharing confidential or distressing information with peers.
- Parent/carer, teachers to notify a nominated staff member if they become aware of any issues with peers.

Suicidal behaviour and NSSI

- School staff to inform nominated staff member immediately if there are concerns indicating suicidal behaviour or NSSI.
- Undertake suicide risk assessment by an appropriately trained staff member, where needed.
- Parent/carer to collect the student from school and seek further assistance as needed.
- Check in with the student on return to school following an incident/disclosure of suicidal behaviour or NSSI.

Communication

- Ongoing communication between family, school and external agencies and service providers regarding any issues related to student safety and wellbeing at school.

- Parent/carer to inform nominated staff member or school nurse of any changes to medication as needed.

Other strategies and information relevant to maintaining student safety in the school environment can also be considered.

2.3 Risk management templates

The following templates are available:

[Appendix 4 - Risk management plan example template](#)

[Appendix 5 - Risk management memo example template](#)

SECTION 3

Postvention

3.1 Postvention

Postvention refers to the steps taken after a death by suicide and forms part of an overall response to suicide, comprising prevention, intervention and postvention measures.³³ In the context of schools, this may refer to the actions taken following the suspected suicide of a student, staff member or member of the school community which impacts the school.

The aim of postvention is to provide long term, multi-faceted support to those affected by suicide. It forms part of a whole school approach and focuses on mental health and wellbeing, whilst addressing trauma, facilitating healing and restoring the function of the school.

School staff should act in accordance with previously developed incident management and/or postvention plans that facilitate preparedness and allows the assessment of risks and the implementation of measures to eliminate or reduce the incidence and severity of critical incidents.

All school staff should be aware of their roles and responsibilities in a critical incident, including the need for notifying school leadership if they become aware of a suspected suicide in the school community.

School staff can consult with their support networks, including interagency colleagues, to manage the impact of a suspected suicide. In public schools, this can include school psychologists, Lead School Psychologists and Coordinators of Regional Operations at regional education offices.

See [Appendix 7: Postvention operational checklist for immediate response](#).

3.1.1 Establish facts

Information of a suspected student suicide may come from a variety of sources.

On receiving information regarding a suspected suicide, it is important that school administrators, regional or central offices are alerted to enable timely support for schools and students.

Once information has been received about a suspected suicide it is vital to verify information before any communication is made with the school community. While the process of verification may take time, it is important that information is obtained from at least two reliable sources.

These may include:

- WA police
- the parents and/or family of the young person
- an external agency or service (e.g. CAMHS)
- Department of Education Service Response Branch.

The Department of Education Service Response Branch coordinates the communication process through which key agencies, services, regions and schools are notified of a suspected suicide to enable the best possible coordination of services.

3.1.2 Language and communications

All postvention communications with the school community should be made carefully in consultation with the family and the school system or sector.

Public school staff are advised to consult with the Department of Education's media unit prior to distribution of any communications. This includes information communicated through the school's social media. In addition, school psychologists, Lead School Psychologists and regional office are available for consultation.

³³ Andriessen, K. (2009). Can Postvention be prevention? *Crisis*, 30, 43-7.

In deciding on terminology to be used when referring to the death of a student, the wishes of the family and the context of the school needs to be considered. Appropriate terms may include 'suspected suicide' or 'believed to be suicide', 'sudden death' or 'unexpected death'.

Contagion is when one suicide can lead to further suicides or suicidal behaviour in the community. The risk of contagion can be minimised by reporting information accurately and respectfully without glorifying suicide or discussing details such as the location and method.

Refer to Mindframe³⁴ or Be You Suicide Response³⁵ resources for more information on speaking or writing about suicide.

3.1.3 School-based responses

Effective school-based responses are tailored to the specific situation and context. They can include:³⁶

- providing appropriate information to the school community
- providing information in small groups where individual support needs can be identified and provided
- providing appropriate avenues for help seeking and support
- providing resources for those impacted
- facilitating natural coping behaviour
- returning the school to a normal academic routine when ready
- identifying the ongoing needs of the school community

When planning responses:

- respect family needs and privacy
- consult with the family regarding references to the death when providing information to students, parents, and wider community
- confirm automated messages, such as those facilitating absentee information, reporting or

interaction with School Standards and Curriculum Authority are disabled

- provide tailored information to vulnerable students and their families when referring to the support available at school and in the wider community
- consider potential impact and needs of students not attending or disengaged from school
- consider potential impact on students and staff that have recently left the school, are absent or on leave
- liaise with and use agency and interagency supports
- conduct staff meetings or briefings
- consider and be responsive to cultural protocols
- identify and use monitored support rooms with staff available to provide one on one support or redirection back to classes
- arrange an operational debrief at an appropriate time in the future

3.1.4 Common responses following a traumatic event or suicide

Given the subsequent shock and grief experienced, anyone affected may have difficulty accessing their usual coping strategies.

Anyone with current risk factors such as pre-existing mental health issues or poor coping mechanisms may be especially vulnerable following a suicide.

Student reactions can include:

- distress or confusion over how they should be feeling or what they should be saying
- relating to the perceived pain of the deceased

³⁴ Mindframe National Media Initiative (2017). *Talking to the media about suicide*. Retrieved from www.mindframe-media.info/for-mental-health-and-suicide-prevention

³⁵ BeYou (2018). *Suicide response resources: Complete toolkit*. Retrieved from https://beyou.edu.au/-/media/pdfs/suicide-prevention-and-response/suicide_response_toolkit_complete_version_pdf_20mb.pdf?la=en&hash=C4173CE603C5B1A6C2D79C4CD3697CAFAF4BA097

³⁶ Erbacher, T.A., Singer, J.B. & Poland, S. (2015). *Suicide in Schools: A Practitioner's Guide to Multi-level Prevention, Assessment, Intervention and Postvention*. School-Based Practice in Action Series. Routledge NY.

- wanting to talk or find out more about the death
- being reminded of previous losses or experiences
- repetitive dreams about the event
- guilt (from not having prevented the death or helping the student)
- depression and preoccupation with blaming others (e.g. other students, parents or teachers)
- fear that their friends may do the same
- increased susceptibility to media portrayal of violence, tragedy etc
- spreading rumours and speculating on details

Parents/Carers reactions can include:

- wanting to learn more about the death
- comparing the death to their child's circumstances
- wanting to know about warning signs and indicators so they can protect their own child
- disinterest due to a genuine indifference or desire to deny that such events occur
- anger or unwillingness to acknowledge their child's emotional reaction
- criticism toward the school for acknowledging the death or their management of the incident
- blaming others to explain why the event occurred

Staff reactions can include:

- wanting to talk or find out more about the death
- uncertainty or confusion about how to support other students
- anger at the student for taking their life
- guilt from not preventing the death or helping the student
- being reminded of previous losses or experiences

- inability to understand the behaviour
- fear of further suicides

3.1.5 Vulnerable groups and individuals

Though it can be difficult to determine which students will be impacted emotionally in response to a traumatic event, it is important to identify, monitor and follow-up students who may be at risk following a traumatic event.³⁷

The following factors are important to consider in identifying those students who are *most likely* to present with symptoms of trauma.

Students with one or more of these features are at particularly increased risk.³⁸

- Students who witnessed the event, discovered the deceased or thought their own life was at risk.
- Close friends, neighbours, and family members who knew the deceased well or were in contact shortly before the event.
- Students with poor coping or problem-solving skills, lack of social support, history of mental illness, suicidal ideation, trauma or loss.

This also applies to school staff and members of the school community.

3.1.6 Funerals and Memorial services

School involvement in funerals and memorial services will vary according to the wishes of the family, cultural and religious observances, as well as the context of the school community. Key considerations include:

- Communication with the school community regarding funeral arrangements should occur in liaison with the family of the deceased student.
- Should schools choose to hold a service for a student or staff member who has died by suspected suicide, parents should be informed, this should be voluntary for students and ideally occur outside of normal scheduled classroom time e.g. lunch, after

³⁷ Erbacher, T.A., Singer, J.B. & Poland, S. (2015). *Suicide in Schools: A Practitioner's Guide to Multi-Level Prevention, Assessment, Intervention and Postvention*. School-Based Practice in Action Series. Routledge NY.

³⁸ Erbacher, T.A et al (2015)

school.

- Schools with churches, chapels or other places of worship located on school premises should be mindful of the potential impact of students being exposed to services for individuals who have died by suicide.
- Students that wish to attend any public funeral or memorial service should do so in consultation with and supported by their family.
- For Aboriginal students and staff, it is recommended that advice be sought from Aboriginal families and community organisations about cultural healing processes and facilitating opportunities for that to occur if desired.

See [Be You Suicide Prevention and Response](#)

3.1.7 Permanent memorials

With regards to permanent memorials on school sites, it is recommended that schools have a consistent policy for all deaths.

Students may feel that a permanent memorial on a school site is an appropriate and respectful way to honour a student who has died by suicide. However, permanent memorials erected on a school site such as plaques, perpetual scholarships or events, statues, trees and gardens³⁹ can also be constant and unnecessary reminders of loss for existing and new school community members. *Living memorials* such as donations to charitable organisations or research foundations can be encouraged in their place.

3.1.8 Social media

One of the ways schools can support their students following a suspected suicide is to be aware of the potential impact of social media. Use of technology means that information can be distributed quickly and to a wide audience at all hours of the day. Social media travels across geographical, cultural, social and economic boundaries and can cause disturbance in the school community even with strategies in place.

As far as practical, schools can monitor social

media posts and use their own sites to encourage help seeking, promote social support networks, and provide proactive ways to share accurate information and promote mental health and wellbeing.

Monitor social media activity

- Where possible, link with and work alongside friends and family to facilitate respectful and positive help-seeking and access to support services.
- Identify the administrator of any online memorial page and encourage respectful use, monitoring, help-seeking and general mental health and wellbeing promotion.
- Identify potential concerns including inaccuracies and rumours, disrespectful comments, posts indicating that other students may be at risk and information about student-organised gatherings.

Respond to concerning content

- Work with students and parents/carers to promote the respectful use of social media, and the importance of reporting concerning messages that may indicate or create risk. Refer to existing eSafety messages used by the school.
- Raise awareness and provide suitable avenues for responding to or reporting trolling or other offensive content.

Distribute help-seeking information

- Share information about support services offered at school, in the community and online.
- Share material promoting positive mental health and wellbeing and suicide prevention (e.g. ReachOut.com, e-headspace, Beyondblue, Kids Helpline and Lifeline).
- Encourage students, parents/carers to share help-seeking advice, access to professional help and suicide prevention information on their social media pages.

³⁹ Erbacher, T.A et al (2015)

- Seek advice appropriate to the school if contact is made by journalists for comments or confirmation of details about a suspected student suicide. Public schools should contact the Department of Education's Media and Communications Branch.
- For Aboriginal children and young people, seek advice from local Elders, families and community organisations about culturally responsive approaches to supporting students, staff and families.

3.2 Postvention resources and services

3.2.1 External resources for schools

[Be You Suicide Prevention and Response](#)

Resources for supporting schools in suicide prevention, including a toolkit for suicide response.

[Conversations matter](#)

Community and professional resources for having safe and supportive discussions about suicide.

[Mindframe National Media Initiative](#)

Information on safely communicating about suicide and mental health.

3.2.2 Resources for online safety

[Chatsafe Resources](#)

Guidelines for supporting young people to safely communicate about suicide online, including memorials, language, sharing lived experience and responding to others.

[Office of the eSafety Commissioner](#)

Resources for eSafety, including reporting of cyberbullying, image-based abuse and offensive and illegal content.

[Social media advice – for families](#)

A combined headspace and Facebook resource for navigating Facebook following the loss of a young person, including memorialization, removing an account and reporting inappropriate posts.

3.2.3 Services

Be You [Suicide response support for secondary schools](#)

Assists school staff to prepare for, respond to and recover from a suicide impacted death.

Phone: 0427 128 271 or (national) 1800 688 248

[Pastoral Critical Incident Response \(PCIR\)](#)

YouthCARE PCIR chaplains provide emergency support during critical incidents such as bushfires, sudden death, suicide and serious assault.

Phone: 0407 413 855

[Anglicare's Active Response Bereavement Outreach \(ARBOR\)](#)

Outreach Support service for adults recently bereaved by suicide, including grief counselling, peer support and support groups. ARBOR can also offer the services of an Aboriginal counsellor.

Phone: 1300 11 44 46

[Anglicare's Children & Young People Responsive Suicide Support \(CYPRESS\)](#)

Support service for metropolitan students aged between 6 and 18 bereaved by suicide. Support is provided through outreach, counselling, peer support and support groups.

Phone: 1300 11 44 46

[Coroner's counselling service](#)

Counselling and support, including understanding the coronial process.

[Thirrili - Indigenous Suicide Postvention Service](#)

Supports individuals, families and communities affected by suicide or other significant trauma.

Phone: 1800 805 801 (24 hours)

[Youth Focus](#)

Free, face-to-face and web-based professional counselling service for young people aged 12 to 25 who may be experiencing suicidal thoughts, depression, anxiety and self-harm.

SECTION 4

Young people with significant risk of suicidal behaviour – linking schools with acute services

4.1 Information for schools

Young people experiencing significant suicidal behaviour typically have complex needs requiring coordinated support.

A young person may be at heightened risk of suicidal behaviour while they transition from emergency or inpatient settings to supports and services in the community. Returning to home and school from an acute setting is an important step in recovery from a mental health crisis. The systemic cooperation required for this transition needs to be responsive and flexible.^{40 41} As always, cultural considerations are important.

Responding to frequent suicidal behaviour or NSSI is demanding for schools and families. Utilising a case management approach which gives consent to ongoing collaboration with the parent/carer and any external agencies, including private service providers such as psychologists, enables routine intervention and the opportunity to escalate intervention when needed. (See example form for schools [Appendix 1 – Consent for schools to exchange information with external providers](#)).

Case coordination of services aims to achieve seamless service delivery through collaboration between school staff, family and agency staff. This wrap-around approach promotes engagement of students with mental health support needs. It is important for schools and external agencies to identify key contacts for communication at the time of re-entry to school from acute settings and for ongoing planning and review.

Other considerations include:

- Establishing information channels which can alert the parent/carer and any external agencies and service providers to changes in presentation and significant incidents that impact risk management.
- Regularly reviewing individual risk factors, in light of predisposing factors including

mental illness, developmental history, family history of suicide etc.

- Sharing student centered plans and organisational plans including risk management plans to coordinate actions with external agencies and external service providers.
- Recognition that different mental health disorders may require highly individualised responses and support strategies.
- The heightened vulnerability of students with chronic suicidal behaviour or NSSI in the event of a traumatic incident, such as an attempted suicide or death by suspected suicide in the family, at the school or in the broader community.
- The ongoing impact on staff, family and peers and the potential need for them to access ongoing support.

The following sections outline some of the key acute services available to schools, children and young people and their families through the Child and Adolescent Health Services. The Department of Health is guided by the [Clinical Care of People who may be Suicidal](#). The focus is on safety and recovery and is informed by [Principles and Best Practice for the Clinical Care of People who may be Suicidal](#).

4.1.1 CAMHS Crisis Connect

This service provides phone and online videocall support for children and young people in the Perth metropolitan area up to their 18th birthday who are experiencing a mental health crisis as well as support and advice to families and carers.

The CAMHS Crisis Connect is a free service, available in the Perth metropolitan area, 24 hours a day, seven days a week. The service is operated by a mental health clinical nurse specialist and consultant child and adolescent

⁴⁰ Ombudsman WA (2014). *Investigation into ways that State government departments and authorities can prevent or reduce suicide by young people*. Ombudsman Western Australia.

⁴¹ Professor Bryant Stokes, AM. (2012). *Review of the admission or referral to and the discharge and transfer practices of public mental health facilities/services in Western Australia*. Government of Western Australia Department of Health, Mental Health Commission.

psychiatrist.

Phone: 1800 048 636

Link: [CAMHS Crisis Connect](#)

Young people in the Perth metro area aged 18 years and over, please call the [Mental Health Emergency Response Line \(MHERL\)](#)

4.1.2 WA Country Health Service (WACHS) Mental Health Emergency Telehealth Service (MH ETS)

In rural, regional and remote areas of Western Australia, the WACHS MH ETS is available to all age groups through referrals managed by doctors and nurses located at Emergency Departments across country WA. Out of hours mental health support in rural, regional and remote areas is available through Rurallink from 4.30pm-8.30am Monday to Friday and 24 hours a day on weekends and public holidays.

Phone: Rurallink - 1800 552 002

Link: [WACHS Mental Health Emergency Telehealth Service](#)

4.1.3 Acute Mental Health Inpatient Unit – Perth Children’s Hospital

This service provides statewide support for children and young people under the age of 16 with acute mental health concerns. Referral to the unit is through the local community mental health service or hospital emergency department.

Link: [Mental Health Inpatient Unit \(Ward 5A\) - Information for schools](#)

4.1.4 Youth Inpatient Unit– Fiona Stanley Hospital

This service provides statewide support for young people aged 16 to 24 years of age with acute mental health concerns. Referral to the unit is made through the local community health service or hospital emergency department.

Link: [Youth Mental Health Services](#) – Information for schools

4.1.5 East Metropolitan Youth Unit

This service provides support for young people aged 16 to 24 years of age with complex and acute mental health concerns.

Link: [East Metropolitan Youth Unit \(EMyU\)](#)

4.1.6 School of Special Education Needs: Medical and Mental Health

School of Special Education Needs: Medical and Mental Health (SSEN:MMH) provides educational support for all students whose medical or mental health prevents them from engaging in their enrolled school programs.

The service is available to students from government and non-government schools. Referrals are received through the Department of Health with parental consent, to provide ongoing learning support and facilitate links between key contacts upon return to school.

Link: [SSEN:MMH](#)

APPENDICES

Editable templates are available for all education sectors. Please contact your sector's psychology service for further information.

Appendix 1

Consent for schools to exchange information with external providers

Student Name:	School:
Parent/Guardian:	DOB:
Address:	Year:
Phone:	Case Manager:

Schools safeguard the confidentiality of information obtained to make appropriate educational adjustments to support students' needs whilst at school. They also respect the privacy of information held or obtained by others.

For this reason, consent is sought to release or obtain information about students from agencies, GP's, Psychologists or other services involved in caring for your child. This information will be used by school staff to make appropriate educational and well-being adjustments to support your child's needs while at school. Any information collected may be accessed by relevant school staff and the involved external care providers named below.

The information collected will not be given to any other person or agency unless you have given permission or school staff are authorised or required by law to do so. The information on this form will be stored securely. If you wish to access or correct any of the personal information on this form or discuss how the information has been used, please contact the school in the first instance.

If you have a concern or complaint about the way this personal information has been collected, used, stored or disclosed, please also contact the school in the first instance. The consent provided in this form can be withdrawn at any time.

As the parent/guardian of the above student I/we give the following consent for:

_____ (name of school staff member)
 _____ (name of school staff member)

to provide information to ☐ (please tick)
 to receive information from ☐ (please tick)

Agency/GP/
Psychologist
/Service:

Name:

Address

to provide information to ☐ (please tick)
 to receive information from ☐ (please tick)

Agency/GP/
Psychologist
/Service:

Name:

Address

Signature: _____
 (parent/guardian)

Date: _____

Appendix 2

Emergency and consultation contacts for school staff use

Telephone 000 for emergencies

Emergency and consultation contacts for staff	Contact numbers
School contacts	
School contact	
Nominated staff member/s	
AISWA schools	
Lead Psychologist, AISWA School Psychology Service	0417 148 397
School psychologist	
Employee assistance program	
CEWA schools	
Chief Psychologist, Psychology, Safety and Wellbeing	6228 6675 0477 900 475
School psychologist	
Employee assistance program	1300 66 77 00
Public school contacts	
School psychologist	
Lead School Psychologist	
Service Response Suicide Prevention Consultation enquiries	9402 6433 0477 757 125
Regional education office	
Pastoral Critical Incident Response (PCIR) - YouthCARE	0407 413 855
Service Response - Child Protection enquiries	9402 6124
Media advice and support	9264 5821
Employee assistance program (PeopleSense)	1300 307 912 9388 9000
Manager assistance program (PeopleSense)	1300 307 912 9388 9000

Local contacts	
Department of Communities local office	
Child and Adolescent Mental Health Service	
Medical Service	
Hospital	
Interpreter Service	
Emergency and agency contacts	Contact numbers
CAMHS Crisis Connect (Metropolitan children and young people 24 hrs 7 days)	1800 048 636
Department of Communities Central Intake Team (Metropolitan area)	1800 273 889
Mental Health Emergency Response Line (MHERL Metropolitan)	1300 555 788
Mental Health Emergency Response Line (MHERL Peel)	1800 676 822
Rural Link (All ages regional, rural and remote areas)	1800 552 002
Police (non life-threatening assistance)	131 444
Poisons Information Service	13 11 26
Alcohol and Drug Information Service	9442 5000
Sexual Assault Resource Centre	9340 1828

Under 16 years old, present to Perth Children's Hospital emergency department, 24 hours.

Over 16 years old, present to any local hospital emergency department, 24 hours.

People of any age in country areas, attend local hospital emergency department, 24 hours.

Appendix 3

School response to student suicidal behaviour and non-suicidal self-injury quick reference

This flowchart is a quick reference guide to be used in conjunction with Section One and Section Two of the Guidelines. Access Appendix 3 and 6 for consultation contacts for school staff and parent/carer and student support.



Appendix 4

Risk Management Plan example template

<u>Confidential</u>		
School name:		
Student details		
Student name:	Year:	DOB:
Parent/Carer: Phone:	Principal:	
Parent/Carer: Phone:	Teacher/Year Coordinator:	
Date of implementation:	Review date:	
Nominated staff member/s		
Title:	Contact:	
Title:	Contact:	
Student support staff		
Title:	Contact:	
Title:	Contact:	
External contacts		
Emergency: 000	Consultation Number (e.g. CAMHS Crisis Connect; Rurallink)	External agency: #
Context /Environment	School-based strategies to manage risk at school	Home-based strategies to reduce risk at school
SIGNATURES: Record of endorsement		
_____ (Parent/Carer) _____ (Student, where appropriate)		
_____ (Administration) _____ (Student Services)		
_____ (Teacher/s) _____ (Other Staff)		
Date: _____		
<ul style="list-style-type: none"> Note: In cases where parent/carers consent is not provided or is difficult to obtain, a RMP can be implemented in order to improve student safety and wellbeing. This should be documented in school records. 		

Appendix 5

Risk Management Memo example template

Modify to match the information available

[Insert recipient name]

[Insert Student name, Year group] - Confidential risk management memo

Recently there have been some concerns raised about **[student name]** wellbeing.

To support **[student name]** safety at school, please monitor them in class and notify **[staff member name and contact number]** of any concerns or changes in their behaviour or mood as soon as possible.

Strategies to support safety include: **[insert strategies as appropriate]**

- If **[student name]** is expected in class but not present, please inform **[staff member name]** at the beginning of class.
- **[further strategies as appropriate].**

While **[student name]** is aware that additional strategies are in place for them, please maintain confidentiality and do not discuss this with them.

If you have any questions or would like to discuss this further, please contact **[staff member]**.

Thank you for your support.

[nominated staff member]

[job title]

Appendix 6

Emergency, consultation and support contacts for sharing with parent/carer/student

Telephone 000 for emergencies

Emergency and consultation contacts for parent/carer/student support		Contact
13YARN - (crisis support line for mob who are feeling overwhelmed or having difficulty coping) (24 hrs 7 days)		13 92 76
CAMHS Crisis Connect (children and young people 24/7)		1800 048 636
Department of Communities Crisis Care Service (24/7)		1800 199 008
e-headspace : (12-25 years 9:00am to 1:00am AEDST, 7 days)		1800 650 890
Health Direct: www.healthdirect.gov.au (24/7)		1800 022 222
Kids Helpline (5–25 year olds, 24/7)		1800 551 800
Lifeline (All ages 24/7)		13 11 14
Mental Health Emergency Response Line (MHERL Metropolitan)		1300 555 788
Mental Health Emergency Response Line (MHERL Peel)		1800 676 822
Poisons Information Centre (24/7)		131 126
Rural Link (All ages regional, rural and remote areas)		1800 552 002
Suicide Callback Service (All ages affected by suicide 24/7)		1300 659 467
QLife (3pm to midnight)		1800 184 527
Local hospital		
Local CAMHS or WACHS CAMHS		
Additional Resources		
Beyond Blue	Black Dog Institute	Everymind
headspace	ReachOut	Sane
Family Helpline (24/7)		1800 643 000
Perth Aboriginal services – mental health services (healthywa.wa.gov.au)		
Ngala Parenting Line		(08) 9368 9368 metro 1800 111 546 country
Thirili Indigenous Suicide Postvention Support		1800 805 801

Under 16 years old, present to Perth Children's Hospital emergency department, 24 hours.

16 years old and over, present to any local hospital emergency department, 24 hours.

People of any age in country areas, attend local hospital emergency department, 24 hours.

Appendix 7

Postvention operational checklist for immediate response

ESTABLISH FACTS:

- ☐ Establish communication with the family and obtain permission to inform and disclose information. Sensitive discussion preferences for language used such as suspected suicide or sudden death.
- ☐ Confirm information from at least two reliable sources (e.g. family, WA Police, external agency, Department of Education, Service Response Branch).

ACTIVATE:

- ☐ Convene school critical incident/crisis management team.
- ☐ Refer to and follow Incident Management /Crisis Management plans already in place.

COMMUNICATE:

- ☐ Inform relevant system personnel:
 - Public schools inform their Regional Education Office and submit an online incident notification.
 - CEWA schools inform Chief Psychologist, Psychology, Safety and Wellbeing.
 - AISWA schools may wish to advise AISWA Executive and seek support from AISWA School Psychology Service.
- ☐ Develop communications (e.g. scripts/letters) and inform staff, students and families. Include relevant facts, common responses to a traumatic event such as death, and help seeking information within and external to the school. Ensure communications do not describe the method or location of the suicide.
- ☐ Seek advice through relevant system personnel prior to distributing communications to school community.
 - Public schools liaise with the Media and Communications Branch, Regional Education Office and School Psychology Service.
 - CEWA Schools with the CEWA Psychology Team and Communications and Marketing Team.
 - AISWA schools liaise with AISWA Executive and School Psychology Service, as relevant.

SUPPORT:

- ☐ Identify and support close contacts, vulnerable students and staff.
- ☐ Identify and arrange internal and external support for students and staff, as required.
- ☐ Monitor own self-care needs.

CONFIRM:

- ☐ Confirm automated messages, such as those facilitating absentee information, reporting or interaction with the School Curriculum and Standards Authority are disabled.
- ☐ School communications and postvention actions are documented in line with school and system requirements.
- ☐ Schedule time to reconvene school critical incident/crisis management team.