



Purpose: To be used as a guidance document to help school teams put in place consistent, effective procedures using evidence-based tools for responding to students experiencing suicidal ideation or other crisis level mental health concerns.		
	Columbia Screener/ASQ	Full Columbia Assessment
When would I use this at school?	<p>May be used as a part of routine contact with the student as part of a larger treatment or clinical plan or as part of regular therapeutic contact.</p> <p>May be used by school staff when there is no direct evidence of suicidal ideation (SI) but an indication that there are signs of emotional distress that are often associated with suicidal symptoms.</p> <p>May be used when there is a general indication that a student is not doing well. The questions may be weaved in as part of a regular check in or conversation with students to gauge change over time.</p>	<p>To be used If there is evidence that the student is experiencing suicidal ideation (SI). (e.g. Positive screen on the ASQ, student shows up in the counselor's office after being heard saying "I am going to kill myself after school"; they have posted about attempting or completing suicide on social media; they have written a note; students are giving away belongings, etc.).</p> <p>This is sufficient to treat the student as having screened POSITIVE and the full assessment should be completed.</p>
Who can administer	Anyone who has had the training. Does not have to be a clinical therapist.	Anyone who has had the training. Does not have to be a clinical therapist.
If risk is elevated?	<p>If POSITIVE screen, complete the full Columbia and call PIRC (513) 636-4124 for next steps.</p> <p>If using the ASQ:</p> <ol style="list-style-type: none"> If a student is already known to have previously had a positive on ASQ question #4 (History of suicide attempt, they will always answer affirmatively to ASQ #4, and an answer of yes each time the ASQ is administered does not further screen in or out risk. If there is a concern, proceed to the C-SSRS. 	<p>Districts may put in place the following procedures depending upon the expertise of available staff: Team should contact parents after completion of the assessment</p> <ol style="list-style-type: none"> After completion of full assessment, the school team, if appropriately trained, may interpret risk and conduct safety planning in collaboration with PIRC (513) 636-4124 or another team member. For students in treatment with the school-based mental health partner, a therapist, if available, completes the full assessment and interprets the level of risk. In collaboration with the school team, contact PIRC and determine next steps if risk is high. If the school team is not appropriately trained or willing to interpret level of risk, call PIRC to share the information gained through the completion of the full assessment and PIRC will help to determine next steps. <p>* The KEY here is that no decision should be made in isolation and subjective assessment of risk should not be negated based solely on the results of an assessment</p>
What should the team do after completing an assessment?	Document the situation in a consistent way across the district (or in large districts consistency in process may be at the building level).	Document the situation in a consistent way across the district (or in large districts consistency in process may be at the building level).
What preventative supports can be put in place following a risk assessment?	<p>Check-in and Check-out with school staff</p> <p>Referral for mental health services</p> <p>Increase communication between school and home</p> <p>Enroll in peer or adult mentoring program if available</p> <p>Other district specific interventions as appropriate</p>	<p>Check-in and Check-out with school staff</p> <p>Referral for mental health services</p> <p>Increase communication between school and home</p> <p>Enroll in peer or adult mentoring program if available</p> <p>Other district specific interventions as appropriate</p>