
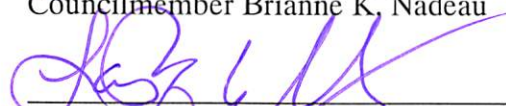




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2 Chairman Phil Mendelson

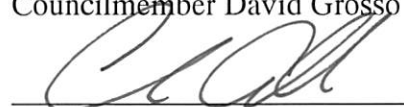
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4 Councilmember Brianne K. Nadeau


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6 Councilmember LaRuby May

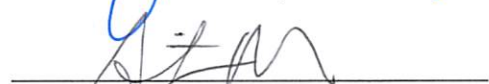
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8 Councilmember Brandon Todd

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10 Councilmember Elissa Silverman


Councilmember David Grosso


Councilmember Charles Allen


Councilmember Kenyan McDuffie


Councilmember Anita Bonds


Councilmember Mary Cheh

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27 IN THE COUNCIL OF THE DISTRICT OF COLUMBIA
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31 To direct the Office of the State Superintendent of Education to adopt rules requiring that all
32 school-based personnel receive at least 2 hours of suicide prevention, intervention, and
33 postvention training each year; to develop approved training curriculum options working
34 with stakeholders and suicide prevention experts; to require LEAs to adopt a policy on
35 student suicide prevention, intervention, and postvention; to develop research-based
36 school climate surveys by school year 2016-2017; to require LEAs to administer school
37 climate surveys and report results back to OSSE starting in school year 2016-2017; and to
38 require the submission of an annual report of school climate survey results to the Council
39 of the District of Columbia and the State Board of Education by October 1, 2017.
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BE IT ENACTED BY THE COUNCIL OF THE DISTRICT OF COLUMBIA, That this act may be cited as the “Youth Suicide Prevention and School Climate Survey Act of 2015”.

Sec. 2. Definitions.

For the purposes of this act, the term:

(1) “Affirming environment” means a culture that is welcoming, accepting, and supportive of youth experiencing suicidal ideation and the youth sub-groups as defined in paragraph (11) of this section.

(2) “Local education agency” or “LEA” means the District of Columbia Public Schools system or any individual or group of public charter schools operating under a single charter.

(3) “OSSE” means the Office of the State Superintendent of Education for the District of Columbia.

(4) “Students with disabilities” means a student with a disability as provided in the Individuals with Disabilities Education Act (20 U.S.C. §1401(a)(1)), students who require an individual education plan as provided under section 614(d) of the Individuals with Disabilities Act, and students with a disability as provided in the Rehabilitation Act of 1973, as amended, 29 U.S.C. § 794 (Section 504).

(5) “Suicidal behavior” means one or more suicide attempts, intentional injury to self that is associated with harm or death, developing a plan or strategy for suicide, gathering the means for a suicide plan, or overt action or thought indicating intent to end one’s life.

(6) “Suicide contagion” means the process by which suicidal behavior or a suicide influences an increase in the suicidal behaviors of others.

(7) “Suicide intervention training” means training on specific actions to be implemented in response to suicidal behavior, including student supervision, notification of parents or guardians, crisis response protocols, when and how to request immediate mental health

assessment or emergency services, and re-entry procedures following a student mental health crisis.

(8) “Suicide postvention training” means training on planned support and interventions to be carried out after the suicide attempt or death of a member of the school community, designed to reduce the risk of suicide contagion, provide support for affected students and school-based personnel, address the social stigma associated with suicide, and disseminate factual information.

(9) “Suicide prevention experts” means mental health professionals who have been trained in suicide assessment, treatment, and management; scientists conducting or who have published suicide-specific research studies; or representatives of a nonprofit organization for which the primary mission is to provide services to youth or adults experiencing suicidal ideation or to prevent or end suicide.

(10) “Suicide prevention training” means training to obtain knowledge and learn best practices to recognize and reduce suicidal behavior, including the identification of risk and protective factors for suicide, suicide warning signs, the process by which students are referred for help, available school-based and community-based mental health supports, the location of available online and community suicide prevention resources, including local crisis centers and hotlines, and school policies and protocols regarding suicide prevention, intervention, and postvention, school safety, and crisis response.

(11) “Youth sub-groups” means student populations that are at elevated risk of suicidal behavior, including:

- (A) Youth living with mental illness or substance use disorders;
- (B) Youth who engage in self-harm or have attempted suicide;
- (C) Youth in out-of-home settings;

- (D) Youth experiencing homelessness;
- (E) American Indian/Alaska Native youth;
- (F) Lesbian, gay, bisexual, transgender or questioning youth;
- (G) Youth bereaved by suicide;
- (H) Youth living with medical conditions and disabilities;
- (I) Other populations as identified in the most recent DC Youth Risk Behavior Surveillance Survey results; and
- (J) Other populations as identified in school climate survey results outlined in section 5.

Sec. 3. Training for school-based personnel and approved curriculum.

(a) Within 90 days of the effective date of this act, OSSE shall adopt rules requiring that all LEA school-based personnel receive at least 2 hours of suicide prevention, intervention, and postvention training each year. This training shall be provided within the framework of existing in-service training programs offered by OSSE or as part of required professional development activities during time already designated for professional development.

(b) Within 90 days of the adoption of rules, OSSE shall develop, maintain, and post online a list of approved training curriculum options to fulfill the requirements of this act, in consultation with the Department of Behavioral Health, teachers, school administrators, the Bullying Prevention Task Force, and suicide prevention experts. An approved curriculum may be listed in the Best Practices Registry of the Suicide Prevention Resource Center and shall at a minimum include:

- (1) How to recognize the warning signs of a mental health crisis and suicidal thoughts and behaviors;

(2) How to recognize the risk factors for suicide, including identification of youth sub-groups at elevated risk for suicide and culturally competent considerations for prevention, intervention, and postvention with these groups;

(3) How to identify students at risk for suicide;

(4) How to make the appropriate referrals for help both within the school and also within the larger community;

(5) How to demonstrate support for students and their families, faculty, and staff who have been affected by a suicide attempt or suicide loss;

(6) How to discuss suicide with students and their families, faculty, and staff in a manner that is age-appropriate, that adheres to safe messaging guidelines to mitigate suicide contagion, and that uses accurate terminology that reflects the most current research in suicide prevention; and

(7) How to provide affirming environments where students with mental health or substance abuse problems feel safe in seeking help and know how and where to access support.

(c) OSSE shall update the training and curriculum options at a minimum every 5 years.

Sec. 4. Model policy and LEA policy adoption.

(a) Within 90 days of the effective date of this act, OSSE shall develop and publish online a model policy to serve as a guide to assist LEAs in developing policies for student suicide prevention, intervention, and postvention in accordance with this act.

(b) Within 90 days of OSSE posting a model policy, each LEA shall adopt a policy on suicide prevention, intervention, and postvention. Such policies shall be developed in consultation with teachers, administrators, school-employed mental health professionals, the

Bullying Prevention Task Force, and suicide prevention experts, and shall at a minimum meet the standards set by the model policy maintained by OSSE.

(c) OSSE shall examine its model policy at a minimum every 5 years and update as needed.

(d) Within 30 days of updating its model policy, OSSE shall notify LEAs of the update.

(e) Within 90 days of OSSE posting an updated model policy, each LEA shall update its policy on suicide prevention, intervention, and postvention.

Sec. 5. School climate data collection.

(a) By school year 2016-2017, OSSE shall develop research-based school climate surveys that shall at a minimum include questions on the following:

(1) Student engagement, cultural and linguistic competence, relationships with school personnel, and participation in school activities;

(2) School safety, including emotional safety, physical safety, bullying, cyber-bullying, substance use, and emergency readiness and management; and

(3) Environmental factors, including the physical environment, instructional environment, physical health, and discipline.

(b) Beginning in the 2016-2017 school year, each LEA shall annually survey all enrolled students and all school-based personnel according to the specifications outlined in this section.

(c) Annual survey results shall be reported to OSSE and shall include, at a minimum, disaggregated data by the following student characteristics:

(1) Race/ethnicity;

(2) Gender;

(3) Sexual orientation;

- (4) Gender identity;
- (5) English proficiency; and
- (6) Students with disabilities.

(d) By October 1, 2017, and annually thereafter, OSSE shall submit a report on the previous school year's school climate survey results, including school-level aggregate data outlined in this section, to the Council and the State Board of Education, and shall publish the report online.

Sec. 6. Right of action and liability.

(a) No person shall have a private right of action for any loss or damage caused by any act or omission resulting from the implementation of the provisions of this act or resulting from any training, or lack thereof, required by this act.

(b) The training, or lack thereof, required by the provisions of this act shall not be construed to impose any specific duty of care.

Sec. 7. Fiscal impact statement.

The Council adopts the fiscal impact statement in the committee report as the fiscal impact statement required by section 602(c)(3) of the District of Columbia Home Rule act, approved December 24, 1973 (87 Stat. 813; D.C. Official Code § 1-206.02(c)(3)).

Sec. 8. Effective date.

This act shall take effect following approval by the Mayor (or in the event of veto by the Mayor, action by the Council to override the veto), a 30-day period of congressional review as provided in section 602(c)(1) of the District of Columbia Home Rule act, approved December 24, 1973 (87 Stat. 813; D.C. Official Code § 1-206.02(c)(1)), and publication in the District of Columbia Register.