

MENTAL HEALTH CRISIS, SUICIDE ASSESSMENT, AND ETHICAL DILEMMAS IN SCHOOL-BASED PRACTICE



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INTRODUCTIONS

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OBJECTIVES

- Understand the prevalence of suicide thinking in schools
- Understand schools' vs mental health professionals' frames of reference in problem-solving
- Review common ethical dilemmas
- Ways to assess risk for suicide and how to document

SUICIDE

30% of female students and 18% of male students in 11th grade report seriously considering suicide according to 2016 data (Up from 24% and 15% in 2013)

SUICIDE

11% of female students and 6% of male students in 11th grade report attempting suicide according to 2016 data
(Up from 9% and 5% in 2013)

2016 Minnesota Student Survey

**TABLE 27A
EMOTIONAL WELL-BEING AND DISTRESS*^**

Minnesota Statewide Data

		Grade					
		8th		9th		11th	
		Male	Female	Male	Female	Male	Female
		%	%	%	%	%	%
Over the last 2 weeks, how often have you been bothered by little interest or pleasure in doing things?	Not at all	57%	50%	56%	46%	52%	41%
	Several days	26%	30%	27%	32%	30%	36%
	More than half the days	10%	11%	10%	13%	11%	14%
	Nearly every day	7%	8%	7%	10%	7%	9%
Over the last 2 weeks, how often have you been bothered by feeling down, depressed or hopeless?	Not at all	72%	53%	71%	50%	64%	46%
	Several days	18%	26%	19%	27%	23%	32%
	More than half the days	5%	10%	6%	11%	8%	12%
	Nearly every day	5%	11%	5%	12%	5%	10%

2016 Minnesota Student Survey

**TABLE 27B
EMOTIONAL WELL-BEING AND DISTRESS***

Minnesota Statewide Data

<i>Thinking back the last 30 days, how much do you agree or disagree with the following statements?</i>		Grade	
		5th	
		Male	Female
		%	%
I worry a lot	Strongly agree	10%	13%
	Agree	19%	26%
	Neither agree nor disagree	30%	29%
	Disagree	23%	20%
	Strongly disagree	18%	12%
I sometimes feel bad without knowing why	Strongly agree	12%	17%
	Agree	26%	31%
	Neither agree nor disagree	22%	20%
	Disagree	18%	16%
	Strongly disagree	22%	16%

CHALLENGES IN POLICY DEVELOPMENT

“They are just doing it for attention”

“We don’t want to put the idea in their head”

“Schools shouldn’t be doing that, there is too much liability”

“Schools don’t have qualified staff”

Lack of understanding around self-injurious behaviors

Differences in code of ethics among providers

CHALLENGES IN POLICY DEVELOPMENT

National Association of Social Workers Code of Ethics, Section 1.07, Part C

“The general expectation that social workers will keep information confidential does not apply when disclosure is necessary to prevent serious, foreseeable and imminent harm to a client or other identifiable person.”

American School Counselor Association Ethical Standards for School Counselors, Section A.2

Keep information confidential unless legal requirements demand that confidential information be revealed or a breach is required to prevent serious and foreseeable harm to the student. Serious and foreseeable harm is different for each minor in schools and is determined by students’ developmental and chronological age, the setting, parental rights and the nature of the harm.

SUICIDE ASSESSMENT

“When a doctor tells me that he adheres strictly to this or that method, I have my doubts about his therapeutic effect...I treat every patient as individually as possible, because the solution to the problem is always an individual one.”

Jung, C.G *Memories, Dreams and Reflections*

SUICIDE ASSESSMENT

Know our own bias and hesitancy to ask in the context of your school environment.

SUICIDE ASSESSMENT

What do you ask?

- Plan
- Intent
- Intensity
- Means
- Attempts
- Rehearsals
- Risk / Protective factors

SUICIDE ASSESSMENT

How do you ask?

- Gentle Assumptions

Things to be aware of with leading questions

“Have you ever...” vs “What other ways have you...”

- Denials of the Specific

“Have you thought of killing yourself with a gun?”

SUICIDE ASSESSMENT

How to Document for the mental health provider:

- ✓ Document everything objective
 - Plan
 - Intent
 - Means
 - Affect
 - Cooperativeness
 - Collateral contacts
 - Statements for safety...
- ✓ Subjective numerical ratings of risk

SUICIDE ASSESSMENT

- Parent/Guardian Contact
- Principal Notification
- Safety Planning
- Emergency Department
- Mobile Crisis Team/Police

SUICIDE ASSESSMENT

Mental Health Agency vs
School District Documentation

Who is responsible?

RISK ASSESSMENT

- Homicidal Ideation
- Duty to Warn

THINGS TO THINK ABOUT IN FURTHERING YOUR SCHOOL-BASED MENTAL HEALTH PROGRAM

- Who is responsible?
- Who conducts the assessment?
- Where is it documented?
- How does your team respond to immediate risk?
- What do you do when parents do not agree with assessment recommendations?



SCENARIOS

SCENARIOS

Elementary age student makes disclosure of suicidal ideation to school social worker, who then brings the student to the school-based therapist. The therapist conducts an assessment and determines that the student needs further evaluation at the emergency department. Therapist follows up with the school social worker and administration who feel that the therapist is “over-reacting.”

Administration requests that therapist notify them when parents arrive and therapist is concerned that they will not support her recommendation.

High school student tells therapist plan and intent to commit suicide over the weekend. Therapist contacts mom to communicate that the child is at high risk to attempt suicide and should be further evaluated. Mom believes her teenager is being moody and manipulative and trying to get out of going to dad and stepmom’s house for the weekend.