



Information-Gathering Tool: Suicide Concern

Adopted 2023, revised 2026

School counselors promote the health and well-being of each and every student by proactively promoting mental health awareness and ensuring policies and procedures are in place to intervene and respond to youth suicidal behavior. This work is grounded in the ASCA National Model®, which integrates the ASCA Student Standards: Mindsets & Behaviors for Student Success to support students' academic, career and social/emotional development and promote success for each and every student.

Response to Suicide Behavior in Students

When a student presents suicide behavior, school counselors may use the ASCA Information-Gathering Tool: Suicide Concern to guide supportive, student-centered conversations and identify critical student support information. Use of the ASCA Information-Gathering Tool reinforces adherence to district protocols; encourages appropriate consultation and family involvement; and promotes a comprehensive, ethically aligned response to student safety concerns.

Ethical and Professional School Counseling Practice

This tool was developed specifically for school counselors in alignment with the ASCA Ethical Standards for School Counselors and the ASCA Professional Standards & Competencies. Use of the tool supports ethical decision-making and helps school counselors provide appropriate direct and indirect students services, including counseling, consultation and referrals, while establishing appropriate boundaries in alignment with the role of the school counselor.

If school counselors are required to use assessments, screenings or any type of instrument to determine the level of suicide risk, (e.g., high, medium, low), school counselors understand that [research shows](#) risk assessment protocols cannot predict suicide outcomes with certainty and the level of suicide risk (e.g., low, medium, high) is difficult to accurately quantify. Parents/guardians should never be told their child is at a low risk for suicide.

School counselors are committed to supporting the well-being of each and every student by promoting positive mental health and helping to put caring, responsive supports in place to respond to youth suicidal behavior. Through this work, school counselors help create supportive environments where students can grow academically, socially and emotionally, reflecting a shared commitment to the success and well-being of each and every student.

View the School Counselor's Ethical Responsibility

[ASCA Ethical Standards](#)

[A.9 – Serious and Foreseeable Harm to Self and Others](#)

View the School Counselor's Role in Suicide Prevention, Intervention and Postvention

[ASCA Position Statement](#)



Suicide Information-Gathering Tool Instructions

The Suicide Information-Gathering Tool is a guide for having a conversation with a student, not an interview. The priority is to connect with the student and discuss the student's immediate concerns and needs. If at all possible, consult with a knowledgeable colleague when making decisions about how best to support a student and avoid working in isolation.

When intervening with suicide behavior:

1. Follow district policy when responding to suicide concerns, and involve supportive family members who are available in the household to help ensure safety.
2. Directly ask the student about suicide.
3. Ask the student and family about access to means.
4. Develop a support plan between the student and people in the student's life.
5. Document all actions taken.

Never leave the student alone until the process has been completed and the student is under the care and oversight of parents/guardians, emergency response personnel or a licensed mental health professional, unless the concern is unfounded.

Student Conversation Talking Points

Have a conversation with the student about any incident of self-harm or perceived threat of suicidal ideation. The intent is to connect with the student, as opposed to merely having the student answer questions. Do not ask the student to read and complete the questions alone. Do not minimize student feelings.

1. Establish rapport with the student.
2. Assure them they did nothing wrong, they are not in trouble, nor are they a burden.
3. Describe the identified concern to the student. Consider this example: *"Ms. Smith shared your English paper with me where you wrote that you think about dying every day. I really appreciate how you shared what you are feeling. These are hard things to talk about. Thank you for telling us. Your safety is important to me, and I need to find out more information to help you."*
4. Explain your obligation and responsibility to learn about the student's concerns and situations that may be dangerous for students and/or staff.
5. Explain confidentiality and the limits of confidentiality in developmentally appropriate terms with the student.
6. Ask questions through open-ended inquiry to any student who may be a threat to self.
7. If the student indicates risk to others, refer to ASCA's position statement [The School Counselor and Threat Assessment](#).
8. Be sure to emphasize:
 - All people have emotional highs and lows.
 - Problem-solving is possible, one issue at a time.

- People care about you, and you are not a burden.
- There is hope for the future.
- You are not alone.

When there is concern about suicide behavior, informing a parent/guardian is nonnegotiable.

Students may be concerned about their parents/guardians hearing of this ideation for a variety of reasons, such as their parents/guardians having past negative experiences with mental health interventions, treating them differently or sensitive information their parents/guardians may not know, such as preferred pronouns or sexual identity. When older students are concerned about their parents/guardians being notified, it is essential to give them as much control as possible in how that conversation is to happen.

Some sample questions to consider:

1. *What would be helpful for me to know about your parents/guardians before I talk with them?*
2. *Have you shared anything like this with them before? If so, what was their response?*
3. *Do you want to be on the call when I talk with them so you can hear what I say?*
4. *Do you want to lead the conversation?*
5. *Who do you consider the most supportive adult in your household?*

By documenting both student identifying information and the content of a student conversation, an educational record is created and is subject to FERPA.

Step 1: Student Conversation

When intervening with suicide behavior:

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Never leave the student alone until the process has been completed and the student is under the care and oversight of parents/guardians, emergency response personnel or a licensed mental health professional.

Full name _____ Date _____

Student ID number _____ Grade level _____

Is there a prior suicide conversation on file? Yes No

Document the student's description of the problem (i.e., school, home, friends, recent withdrawal, depression, etc.)	Notes										
<ul style="list-style-type: none"> • Are there people or things stressing you, harming you • Are you experiencing any of these? (bullying, harassment, family issues, a sense of loss or failure, pregnancy, gang issues, schoolwork) or that are threats to you? • Have you experienced any recent changes, such as difficulty sleeping, changes in your appetite, withdrawing from your friends or family, or a lack of interest in your preferred activities? 	<p>Risk factors (check all that apply)</p> <table border="0"> <tr> <td>Bullying</td> <td>Previous Suicide Attempt</td> </tr> <tr> <td>Harassment</td> <td>Family History of Suicide</td> </tr> <tr> <td>Family Issues</td> <td>Drug or Alcohol Use</td> </tr> <tr> <td>Relationship Stress</td> <td>New Medication</td> </tr> <tr> <td>Recent Loss or Failure</td> <td>Other _____</td> </tr> </table> <p>Other Notes:</p>	Bullying	Previous Suicide Attempt	Harassment	Family History of Suicide	Family Issues	Drug or Alcohol Use	Relationship Stress	New Medication	Recent Loss or Failure	Other _____
Bullying	Previous Suicide Attempt										
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Relationship Stress	New Medication										
Recent Loss or Failure	Other _____										
Ask directly about suicide and harm to others.	Notes										
<ul style="list-style-type: none"> • Have you been thinking about dying by suicide? • Have you ever had thoughts about wishing you were dead or could go to sleep and not wake up? • Do you wish you weren't alive anymore? • Have you had thoughts about killing yourself in the past few weeks? • Have you had thoughts about harming or killing others? 	<p>Thoughts of suicide? Yes No Unsure</p> <p>If yes, In the last 24 hours? In the last month? In the past? Never</p> <p>Thoughts of harm to others? Yes No Unsure</p> <p>If yes, In the last 24 hours? In the last month? In the past? Never</p> <p>Notes:</p>										

Ask directly about history and current plan.	Notes
<p>If yes, ask:</p> <ul style="list-style-type: none"> • How do you envision dying? • Do you have any intention to carry out your plan? • Have you decided how or when you would kill yourself? If yes, when would you carry out the plan? What is your plan? • Do you have access to any of the things in your plan? Firearms? Other lethal means? • Have you ever thought about or tried to kill yourself in the past? 	<p>Plan? Yes No</p> <p>Access to means to carry out plan? Yes No</p> <p>Access to firearms? Yes No</p> <p>Previous suicide attempt? Yes No</p> <p>Notes:</p>
Ask about protective factors.	Notes
<ul style="list-style-type: none"> • What makes you happy? • What is going well in your life? • What are you looking forward to in the future? • What do you like to do in your free time? • What activities, organizations, community, religion, etc., are you involved in? • Who are people you feel comfortable reaching out to if you are having a hard time? • Which adults do you know who you can trust and talk to and are available? • Are there other people in your life, such as friends, siblings or relatives who are supportive and/or helpful distractions? 	

Based on this student conversation, consider what means are necessary to support the student. Whenever possible, consult with your team, including your administrator, to make a decision about how to proceed.

When a student is actively suicidal and the immediate safety of the student or others is at-risk, school staff should immediately contact appropriate emergency response personnel per federal, state and local laws as well as school district policy (e.g., administrators, 911 dispatcher, child protective services, law enforcement).

If parent/guardian abuse or neglect is the expressed reason for the student’s suicidal ideation, contact child protective services rather than the parents/guardians in an effort to protect the student and ensure the student’s safety and well-being (Adapted from ASCA’s The School Counselor and Suicide Prevention, Intervention, Postvention Position Statement (2024)).

Parent/Guardian Conversation Talking Points

When there is concern about suicide behavior, parents/guardians must be informed unless abuse or neglect is the expressed reason for the student's suicidal ideation. Parents/guardians are key partners and ultimately responsible for their child's safety. The school counselor's role is to help equip parents/guardians with the resources they need to support their student.

- **Avoid assessing or quantifying level of risk with parents/guardians, particularly the urge to comfort or assure parents/guardians the student is low risk.**
- Focus on the facts and behavior unique to the situation and avoid making assumptions. Ensure the conversation is in the parents'/guardians' primary language if possible.
- Establish rapport before launching into questions, including mentioning a couple of facts about the student that indicate you know the student beyond this incident.
- If they do not appear to be taking the concern seriously, make a note to reach out to them again soon. It is important the family understands your school and/or district's protocol (if applicable) if a student expresses suicidality and if/when you are required to notify child protective services.
- To be culturally responsive, it is essential to understand and incorporate relevant cultural factors while avoiding stereotypes. Be open-minded and engaging.
- Depending on the conversation, it may be more effective to have initial and/or follow-up conversations in person.
- Emphasize to parents/guardians that peer reports should be considered reputable sources. Discuss with parents/guardians that peer reports may contain information that a student is unlikely to report to an adult because students often confide in peers rather than adults regarding personal or sensitive information.
- The parents/guardians may feel overwhelmed by this information and/or may not be interested in talking about formalized services at this time.

Nonnegotiable:

Call parents/guardians; do not minimize the situation. If abuse or neglect is the expressed reason for the student's suicidal ideation, contact child protective services.

Sample introduction language:

1. *We want you to know that your student is under supervision.*
2. *We have some serious concerns we want to discuss with you. Are you somewhere where we can have this conversation?*

Summarize the student's concern and then follow Step 2: Parent/Guardian Conversation

Step 2: Parent/Guardian Conversation

When there is a concern about suicidality, parents/guardians must be informed, or call CPS if abuse or neglect is the expressed reason for the student’s suicidal ideation. If a student expresses that the suicidal ideation is a result of abuse or neglect, consult with your team, including your administrator on how to best support the student.

Parent/Guardian (Full name of individual contacted) _____

Phone number _____ Email _____

Date and Time of Parent/Guardian Contact: _____

<p>Summarize the student conversation with the parent/guardian. Include details about the student conversation, peer report, teacher/staff referral, supporting documentation.</p>	<p>Notes</p>
<p>Ask the parent/guardian questions about their experience.</p> <ul style="list-style-type: none"> • Is this surprising to you? • Have you had some similar concerns? Please explain. 	<p>Parent/guardian response:</p>
<p>Ask about previous and current states of mental health and/or suicidal behavior.</p>	<p>Notes</p>
<ul style="list-style-type: none"> • How do you feel your child is in general? • Have you had concerns about your child’s mental health? • Has your child ever mentioned thoughts of suicide or dying? • If so, when and how often? • Have they mentioned having a plan of suicide? • If so, do they have access to means to carry out their plan? • Is there a history of harming themselves or others? • If so, what was going on with your child when they were experiencing that in the past? 	<p>Previous and current concerns of mental health? Yes No</p> <p>Notes:</p> <p>Thoughts of suicide? Yes No If yes, In the last 24 hours? In the last month? In the past? Never</p> <p>Plan? Yes No</p> <p>Access to means to carry out plan? Yes No</p> <p>Previous suicidal history? Yes No</p> <p>Notes:</p>
<p>Ask about current functioning.</p>	<p>Notes</p>
<ul style="list-style-type: none"> • Have you noticed any changes in behavior, sleep patterns, engagement or stress levels? • Any major life changes or stressful events? • Have you noticed any warning signs (e.g., sleeplessness, irritability, feeling disconnected/hopeless, withdrawal from activities, trouble getting out of bed)? • How has the past year been for your family and your student? Sometimes even small life changes can affect one’s ability to cope. 	

Ask about access to lethal means and provide recommendations for safe storage of lethal means. (For more resources, see Addendum.):	Notes
Does your student have access to firearms or other lethal means (e.g. medication, sharp objects) in the home or other homes they frequent?	Access to lethal means? Yes No Provided recommendations for safe storage of lethal means? Yes No
Ask about protective factors.	Notes
What are the student's positive activities, interests, relationships, reasons for living (e.g., sports, faith, clubs, recreation, pets, family, friends)?	
Ask about other concerns.	Notes
What other concerns do you have that we have not yet addressed?	
<ul style="list-style-type: none"> • Discuss measures to safety-proof the home and other environments the student frequents, including securing or removing all lethal means. • Review crisis and community resources with family and provide printed/digital copies. • Strongly encourage parents/guardians to seek a medical/mental health evaluation. • Share crisis resource with the student and family and encourage them to add the resources to their phones. 	Notes

Individuals who received verbal or combined verbal and written safe storage recommendation were three times more likely to make safe changes in firearm storage practices than individuals who did not receive that recommendation (Albright & Burge, 2003).

Step 3: Next Steps for Student Support

School counselors, school-based mental health staff and school administrators – in collaboration with the student’s family – support students experiencing potential suicidal behavior.

Possible Support Strategies (if applicable to your school/district)	Notes
<ul style="list-style-type: none"> • If imminent danger, contact emergency or crisis services. • If student belongings need to be searched, involve your administration. • Collaborate with student, family and mental health staff to identify risk factors, warning signs, coping skills and resources. • Create a support plan and provide copies for home(s), school and community providers. (For support plan examples, see Addendum). • Identify student’s trusted adult(s). • Plan for access to a school counselor and/or school-based mental health staff as needed. • Identify safe places for the student to take breaks • Encourage student to work with a trusted adult to develop a sleep, nutrition and/or exercise routine. • Collaborate with student, family and school staff to create a student reentry plan (following district or school policy). See addendum for examples. • Alert school staff (on a need-to-know basis) for safety and supervision. • Collaborate with teachers, administrators and parents/guardians to adjust academic demands (e.g. deadlines, workload, schedule, arrival/ dismissal). • Assist the student and family in identifying and further strengthening activities, relationships or experiences that increase protective factors (e.g., hobbies, skills, passions). • Other: _____ 	

Step 4: Final Checklist

Critical Actions (if applicable to your school/district). (check all that apply)	Notes
<p>Administrator notified</p> <p>Contacted parent/guardian (<i>nonnegotiable unless the parent/guardian's abuse or neglect is the expressed reason for the student's suicidal behavior. In these cases, the school counselor must contact child protective services</i>)</p> <ul style="list-style-type: none"> Provided all information gathered during student conversation to parent/guardian Provided crisis resources Discussed plan to seek medical/mental health evaluation Provided information on reducing access and safe storage of lethal means to parent/guardian Provided parent/guardian with all applicable documentation regarding student's suicidal behavior or risk to others (e.g., notes, drawing, assignments, social media posts, summary of conversations with others while maintaining anonymity of reporter) Reinforced parental responsibility for the safety, supervision, and care of their child <p>Contacted child protective services if there is reasonable suspicion of abuse/neglect (<i>following district/state policy</i>)</p> <p>If student indicated risk to others, followed district protocol</p> <p>Planned to follow up on Student Support Plan for re-entry and ongoing support</p>	<p>Administrator Name: _____</p> <p>Time/Date: _____</p> <p>Parent Contacted: _____</p> <p>Time/Date: _____</p> <p>CPS Contacted: _____</p> <p>Time/Date: _____</p> <p>Is there a plan to seek evaluation (e.g., clinical mental health support, youth counseling services, hospitalization) ? Yes No</p> <p>If yes, what is the plan:</p> <p>Student indicated risk to others Yes No</p> <p>If yes, document next steps:</p> <p>Notes:</p>

The person completing this document cannot guarantee any outcome.
The purpose is to provide information for parents/guardians to act on behalf of their child.

Resources Addendum

These materials/resources are provided as informational resources only. School counselors and other staff must follow all district/school policies and established procedures when responding to any suicide concern.

- [ASCA Suicide Prevention and Response Toolkit](#)
- [ASCA Position Statement: The School Counselor and Suicide Prevention, Intervention and Postvention](#)
- **Access to Lethal Means and Safe Storage:**
 - Harvard Means Matter [Lethal Means Counseling](#)
 - [Information for Families \(removal and storage options\)](#)
 - [Counseling on Access to Lethal Means CALM America Workshop](#)
- **Parent/Guardian Communication:**
 - Sample [Safe Storage Parent/Guardian Communication Script](#)
 - Sample [Safe Storage of Lethal Means Flyer](#)
 - Sample [Parent/Guardian Notification Letter](#)
 - Sample [Parent/Guardian Email Notification](#)
- **Student Support Plan:**

Note: Literature on this topic may refer to this as a safety plan.

 - [ASCA School Safety Plan Example](#)
 - [Stanley-Brown Safety Plan Example](#)
- **Student Reentry Plan:**
 - Sample [Student Reentry Plan Template 1](#)
 - Sample [Student Reentry Plan Template 2](#)

Note: Consider adding the following disclaimer to any template: *The person completing this document cannot guarantee any outcomes of safety; as always, parents/guardians play an essential role and remain responsible for their child's care and supervision.*

References

Albright, Teresa L., and Sandra K. Burge. "Improving Firearm Storage Habits: Impact of Brief Office Counseling by Family Physicians." *Journal of the American Board of Family Practice*, vol. 16, no. 1, 2003, pp. 40–46.

American School Counselor Association (2024). "The School Counselor and Suicide Prevention." ASCA Position Statements. <https://www.schoolcounselor.org/Standards-Positions/Position-Statements>