CONCERN OF HARM TO SELF OR OTHERS
PROCEDURES FOR USING THE REFERRAL LETTER AND CONCERN CHECKLIST

WHEN TO REFER A STUDENT FOR HELP:
1. When a student is heard talking about or has been writing about committing suicide refer to Guidance Counselor to begin referral process.
2. When another student or teacher has concerns about a student being depressed or stressed, refer to the counselor. The emergency referral process may be the next step.
3. When students are overheard talking about other students with depression or violent tendencies refer to administrators and guidance counselor.
4. When you have an uneasy feeling about a student CHECK IT OUT, don’t ignore a gut feeling.
5. Encourage students to break the Conspiracy of Silence and tell someone when they are worried about a friend. Don't ignore talk of committing suicide, violence or the intent to harm someone. Openly talk with students about the need to report violent tendencies in their friends. Remember students value codes of silence where their friends are concerned and they must be taught that this kind of silence hurts rather than helps a friend. Students need to have an atmosphere of safety and trust to disclose information about a friend, even if it is life-threatening information. A study (Patterson, 1998) referring to the recent incidents of violence on our campuses around the country states these findings in common: all the students committing the murders were of at least average intelligence, the acts were pre-meditated, the students had a victim in mind even though others were killed randomly, and in each school numerous people had heard the student discussing violence and the possibility of killing before the incident occurred! Suicide is also often talked about before it is attempted.
6. Err on the safe side for the child. Refer early for suspected drug abuse, depression, or violent behavior or ideation.

GUIDE FOR THE CONCERN OF HARM CHECKLIST

TOP SECTION:
1. Put a check mark in the harm to self or harm to others box.
2. Complete student/family information.
3. Log attempts made to contact family means number of phone tries (busy signal, left message, callbacks, etc.).
4. Name of person contacted when parent cannot be reached can be the emergency contact, and or a law enforcement officer if the Baker Act is put into use, or a student is arrested in harm to others cases. The point here is notification of someone in authority that can act when a parent/guardian cannot be reached. This is an emergency.

LEVEL ONE CONCERN:
This area is reserved for students that pose a threat but are not necessarily a threat. One would complete this section if imminent danger does not exist. For example, a student that gets into a scuffle at lunch, or uses play ground trash talk would be an appropriate Level One Concern. It is important to document these cases and follow up with an appropriate response (i.e., discipline, individual counseling, phone call to parent), but a mental health screening is not necessary. Level One Concerns are to be kept at the school and placed in the student guidance file.
LEVEL TWO CONCERN:
This area is reserved for students that pose a threat and are a threat to either themselves or others. This section is reserved for students that are in imminent danger. These students are in need of a behavioral/mental health screening or in need of additional services. Level Two Concerns should be sent along with a short narrative to the District Guidance Specialist, Dr. Amy Hall at Brewster. A copy should be placed in the student’s guidance file. Additional copies should be sent to the school principal and area superintendent.

ACTION REQUIRED SECTION:
1. Every time a student is referred for possible suicide or threatening harm to others the people listed on the form need to be notified, even if this is the same student again and again.
2. Consultation with the Student Services Team (social worker, psychologist, and nurse) may be seen as follow up. Use the date section to document when this happens. If the family cannot be reached call law enforcement to initiate the Baker Act if this is warranted and use the Social Worker as a follow up.
3. The parents/guardians should be asked to come to school for this very important conference. The situation is seen as an emergency at this point. The standard parent conference form can be used for documentation of the details of why the conference is being called. This form is optional and this conference form does not go in the cumulative folder or on to the mental health agency. The counselor should keep these notes on file, if they are written at all.

REFERRAL LETTER AND RECORDS RELEASE SECTION:
1. Informed consent means the parent/guardian has been advised that a copy of the letter to the mental health agency will be placed in the student guidance folder, and sent to the District Guidance Specialist. The informed consent also signifies an understanding of the disclaimer. If the parent/guardian will not sign the disclaimer, please have them make comments in the comments section on the letter as to why they are not signing. Please make every effort to get them to seek the emergency evaluation anyway. The person conducting the conference should write comments as well. The reverse side of the form can be used.
2. Please make photocopies of the forms.

CONCERN OF HARM TO SELF OR OTHERS CASES SECTION:
1. All current procedures in the Code of Student Conduct and Discipline should be followed. This includes all documentation forms and narrative descriptions. Include all appropriate consequences. The referral to a mental health agency may possibly be at a later date if an arrest is made. The appropriate disciplinary rule takes precedence.
2. Communication between administration and Guidance Counseling is NECESSARY in these cases.
3. When a student expresses or acts in a way that demonstrates the potential to intentionally harm others, a referral to administration should be made. A threat assessment should be conducted to determine if the student is posing a threat vs. making a threat. This determination helps guide the appropriate level of intervention(s). Interventions may include the following:
   - Discipline referral
   - Parent/student conference
   - Guidance referral (provide parent or adult student with non-emergency mental health services)
   - Law enforcement involvement
   - Behavior specialist referral, when appropriate
   - School social worker referral
   - Mental Health Checklist Check List Completed
   - Other interventions as determined by team (for example, Student Success Team)
4. Law enforcement should be contacted as usual if a student is threatening harm to others. It should also be remembered that law enforcement officers, specifically the Sheriff's Department and SRD, or Local Police can initiate a Baker Act, if they determine it is appropriate. The Baker Act may be appropriate when a person is in danger of harming himself or others due to mental health reasons. The Baker Act calls for INVoluntary mental health examination in emergency situations. If the danger of homicide and/or suicide is imminent and parents/guardians cannot be reached Law Enforcement should be called.

FOLLOW UP SECTION:
1. It is important for the counselor to see the student upon return to school. Sometimes this is the next day; sometimes this is an extended time. Transitions back to school are important after emergencies. The counselor should then involve appropriate school based services/interventions (for example, Student Services Team, ESE contact, Problem Solving Team, etc.)
2. Calling the Department of Children and Families may be necessary if the family refuses to seek help and the student is in imminent danger of harm to self or others. If danger of suicide is imminent and the family won't cooperate, call law enforcement. This is a potential Baker Act situation. Remember; err on the side of safety.
3. The copies of the letter and the records release form are to be filed in the student guidance folder. Counselor-to-counselor communication may also be necessary as students move from grade to grade. The confidentiality of these situations must always be preserved!

THE RECORDS RELEASE FORM ATTACHMENT:
1. The Student Records Release Authorization form 2006-341 is to be used along with the letter to the Mental Health Receiving Facility or other parent selected mental health professional.
2. On the records request section of the Student Records Release Authorization form write "current status" by the line marked "Other." We will not receive written psychiatric records or psychological reports from the mental health agency, as these are confidential, even to parents. If we are sending copies of our psychological reports this category should be checked. A copy of the records release form should be kept in the cumulative folder as well as sent to the mental health agency.
CONCERN OF HARM CHECKLIST

☐ Harm to self  ☐ Actual suicide attempt  ☐ Harm to others

Date: ____________________________  School: ______________________________

Student Name: ____________________________ STUDENT ID: ___________  Grade Level and Age: ___________

Guardian Name and Phone Number: ______________________________

Name and Title of Person Initiating Referral: ______________________________

School Phone Number and ext. of Person Initiating Referral: ______________________________

Number of Level One Concerns: ____________  Number of Level Two Concerns: ____________

LEVEL ONE CONCERN (Check all that apply)

**Makes a threat but does NOT pose a threat**

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LEVEL TWO CONCERN (Check all that apply)

*If a student is in imminent danger to self or other, poses a threat, or there is a serious concern for safety*

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☐ Guidance Counselor notification/consultation
☐ Principal notification/consultation
☐ Parent/Guardian contact/conference
☐ Individual Counseling with Guidance Counselor
☐ Small Group Counseling with Guidance Counselor
☐ Discipline Action Taken
☐ Assist Parent in accessing services
☐ File Level One Concern in Student Guidance File

Please attach a brief narrative of events and do not include student name (**ALPHA code only**) on the narrative. The principal must receive a narrative for both LEVEL ONE and LEVEL TWO Concerns. The District Guidance Office is to be sent a narrative and a copy of LEVEL TWO Concerns only. Send to D. Amy Hall, Guidance Office: Brewster

This information is **confidential** and should be shared in a sensitive manner and only with persons with a “need to know.”
VOLUSIA COUNTY SCHOOLS

Behavioral/Mental Health Screening

TO:  MENTAL HEALTH PROFESSIONAL

REGARDING: ___________________________

(Student Name)

___________________

(School & Grade)

(Date)

For Mental Health Professional:

Please be advised that the parent/guardian of the above-named student has been notified that his/her child has expressed intent to:

☐ Harm him/herself  ☐ Harm other(s)  ☐ Actual Suicide Attempt

Therefore, the parent/guardian is seeking an immediate qualified mental health screening for this child. The parent/guardian understands that, in the event such an evaluation cannot be obtained without charge, s/he will be held responsible for payment of professional fees.

In the interest of the student’s welfare and the welfare of others, the “Student Record Release Authorization Form” is enclosed to allow us to share pertinent information regarding this student. We sincerely appreciate your cooperation in assisting this student.

Name of person completing form: ___________________________________________

Title: ___________________________ Phone Number: _____________ Ext: ___________

For Parent, Guardian, or Adult Student:

I, on behalf of the above-named student and myself, hereby release from all liability and agree not to pursue any claim against the School Board of Volusia County, its employees or agents for any actions, claims, demands, costs, or expenses that the above-named student or I may have arising out of or in any way connected with the provision of these services and resources.

Please note the distribution of this document:
♦ Student’s Guidance Folder
♦ Parent/Guardian or adult student
♦ Parent/Guardian hand-carry to professional
♦ District Guidance Services Department

Comments:

Parent, Guardian or Adult Student Signature ___________________________ Date ___________
SAMPLE LETTER - FOLLOWING MENTAL HEALTH CHECKLIST SITUATION

Dear (Parent/Guardian):

On (date) your son/daughter indicated intent to hurt himself/herself. We are very concerned about your child's emotional welfare and the faculty at_________________________ School will help in any way possible.

Because of our concern for your child, I strongly encourage you take immediate action and follow up with the recommendations that have been offered to assist your child. Upon your child's return to school a meeting with his/her guidance counselor will occur and a follow-up monitoring plan will be developed in cooperation with any professional services you have pursued. The staff will continue to be available to assist in any way to help your child be successful at ______________________ School.

Please do not hesitate to call me at_________________ if I can be of any further assistance.

_____________________________